

AMENDMENT #1

**BUDGET RECOMMENDATION FORM
2020 REQUESTED BUDGET
MILWAUKEE COUNTY BEHAVIORAL HEALTH DIVISION**



Please send completed recommendation forms to:
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Title: Living Room Model for North Side of Milwaukee

MCMHB Sponsor: Mary Neubauer and Pastor Walter Lanier

Narrative Description:

First developed by Recovery Innovations (now Recovery International) the Living Room Model creates a home-like environment designed to promote a sense of healing, safety, and privacy. The Living Room Model supports the values of MC3 in the creation of a welcoming, trauma-informed, culturally intelligent, person-centered environment of care that is staffed by individuals with lived experience. The Living Room Model is totally supported by peer workers that work in collaboration with clinicians and who remain involved with the individual during his/her stay. The Living Room provides linkages to clinical services, when necessary, that may include doctors, nursing staff, and prescribers all working in collaboration and partnership with the peer staff. The Living Room Model provides an alternative to the emergency department for adults in a mental health crisis. This translates into cost savings for unnecessary emergency room visits. The north side of Milwaukee is the location proposed for this Model. Currently, there are no peer run services or "drop-in" type locations on the north side. Milwaukee's north side is in desperate need for a service like a Living Room Model for residents to receive peer-to-peer interactions that assess and offer care as an alternative to a formal crisis intervention. The north side location is critical to fill a community gap. (cont. p.2)

Anticipated Financial Impact of Recommendation:

Description	Revenue	Expense	Tax Levy
Infrastructure development to secure space and provide	\$0 -	\$375,000.00-	\$375,000.00
funds necessary renovation to ensure ADA compliance and	-	-	-
initial staffing.	-	-	-
	-	-	-
	-	-	-
	-	-	-
	-	-	-
Total	\$0 -	\$375,000.00	\$375,000.00

Amendment to the Behavioral Health Division 2020 Budget
Living Room Model for North Side of Milwaukee (Continued from p. 1)

Need and Benefit

The Living Room Model, named after the familiar home space, provides a safe destination for those in crisis and is easily accessible via public transportation. There are many states, like Illinois, that have implemented the use of the Living Room Model as an alternative to the emergency departments (EDs) for crisis intervention. The Living Room model serves as an option to diverting persons in crisis from EDs. With the Psychiatric Crisis Services (PCS) slated to close by 2021, viable community based options for crisis intervention must immediately occur. The uncertainty of a standalone psychiatric emergency department offers even more concern as traditional emergency departments often provide inadequate services for people in crisis. Persons in mental health crisis frequently report negative experiences in such chaotic environments.

There are significant cost savings involved in the Living Room Model compared to EDs. Those include:

Emergency Departments¹	Living Room Model²
Average Cost: \$2,000 - \$3,000	Average Cost: \$300
Average Stay: 6 to 23 hours, median 12 hours	Average Stay: 2 to 4 hours
*Deflection Rate: 68%	*Deflection Rate: 94%
Symptom Management: Often unable to resolve the patient’s crisis.	Symptom management: Peers work with the individual to identify the root cause of the crisis and develop a crisis plan to address future crises. Peers offer 30 day follow up from deflection

*Deflected from admission criteria for an emergency department’s services.

Location and Services

The amendment proposes a location on the north side of Milwaukee. There are no peer run crisis respite or drop-in type facilities on the north side. If enacted as proposed, this would be the first location to serve residents in crisis from the north side of Milwaukee. The zip code areas for consideration are 53206, 53208, and 53212. Those locations also benefit from the services of community health centers serving those zip code areas. Milwaukee Health Services, Inc., Outreach Community Health Centers, and Progressive Community Health Centers provide primary care and benefits acquisition. Peers work in partnership and collaboration with formal systems such as community health centers for medical and prescribing services, legal services, faith-based organizations, law enforcement, and other community organizations to ensure crisis stabilization.

The State of Illinois’ Living Room’s first year of operation, suggest that community crisis respite centers are cost-effective, effective in helping many individuals alleviate crises, and have the potential to decrease the use of EDs for mental health crisis. Milwaukee’s need for community based crisis services are great. The Living Room Model was a proposed model in the HSRI/Public Policy Forum’s, December 2018 Environmental Scan Milwaukee Psychiatric Services Redesign (p. 33-34). The time is now to invest in peer run, community based crisis services and to make these services available on the north side of Milwaukee to better meet the needs of our community.

¹ *Emergency Room Visits for Mental Health Conditions: Expect Long Waits*. American Psychiatric Association Blog, November 2016.

² Heyland, M., (2017). *Evaluating an Alternative to the Emergency Department for Adults in Mental Health Crisis*. <https://doi.org/10.1080/01612840.2017.1300841>