



Quality of Life Committee

Regular Meeting
9:00 a.m. Thursday, January 19, 2023
Microsoft Teams

Agenda

I. CALL TO ORDER AND ROLL CALL

II. APPROVAL OF THE AGENDA

III. APPROVAL OF MEETING MINUTES

- A. Approve the December 15, 2022, regular Quality of Life Committee meeting minutes pg. 2**
Sponsor: Brooke Doxtator

IV. UNFINISHED BUSINESS

V. NEW BUSINESS

- A. Determine next steps regarding a Food and Fuel Program Analysis pg. 4**
Sponsor: Marie Cornelius

VI. REPORTS

- A. Accept the Oneida Tribal Action Plan Report pg. 6**
Sponsor: Leslie Doxtater
- B. Accept the Oneida Police Department Report pg. 8**
Sponsor: Eric Boulanger
- C. Accept the Behavioral Health Report pg. 9**
Sponsor: Mari Kriescher
- D. Accept the Zero Suicide Report pg. 18**
Sponsor: Mari Kriescher

VII. ADDITIONS

VIII. ADJOURN



Quality of Life Committee

Regular Meeting
9:00 a.m. Thursday, December 15, 2022
Microsoft Teams

Minutes

Present: Chair Marie Summers, David P. Jordan, Kirby Metoxen

Excused: Daniel Guzman King, Tehassi Hill

Others Present: Leslie Doxtater, Brooke Doxtator, Keith Doxtator, Tina Jorgenson, Mari Kriescher, Rhiannon Metoxen, Joanne Ninham, Justin Nishimoto, Melissa Nuthals, Mark W. Powless, Rae Skenandore, Leah Stroobants, Brandon Wisneski

I. CALL TO ORDER AND ROLL CALL

Meeting called to order by Chair Marie Summers at 10:01 a.m.

II. APPROVAL OF THE AGENDA

Motion by David P. Jordan to approve the agenda, seconded by Kirby Metoxen. Motion Carried:

Ayes: David P. Jordan, Kirby Metoxen

III. APPROVAL OF MEETING MINUTES

A. Approve the November 17, 2022, regular Quality of Life Committee meeting minutes

Sponsor: Brooke Doxtator

Motion by David P. Jordan to approve the November 17, 2022, regular Quality of Life Committee meeting minutes, seconded by Kirby Metoxen. Motion Carried:

Ayes: David P. Jordan, Kirby Metoxen

IV. UNFINISHED BUSINESS

V. NEW BUSINESS

VI. REPORTS

Brandon Stevens arrived at 10:05 a.m.

A. Accept the Oneida Tribal Action Plan Report

Sponsor: Leslie Doxtater

Motion by David P. Jordan to accept the Oneida Tribal Action Plan Report, seconded by Kirby Metoxen. Motion Carried:

Ayes: David P. Jordan, Kirby Metoxen, Brandon Stevens

B. Accept the Quality-of-Life Survey Results

Sponsor: Melissa Nuthals

Motion by Brandon Stevens to accept the Quality-of-Life Survey Results and forward the presentation to the Business Committee work session in January 2023, seconded by David P. Jordan. Motion Carried:

Ayes: David P. Jordan, Kirby Metoxen, Brandon Stevens

VII. ADDITIONS

Motion by Brandon Stevens to add the discussion regarding the GWA – Savings at the Pump to the agenda, seconded by David P. Jordan. Motion Carried:

Ayes: David P. Jordan, Kirby Metoxen, Brandon Stevens

B. Discuss GWA - Savings at the Pump

Sponsor: Marie Cornelius

Motion by Brandon Stevens to forward the community concern regarding the GWA – Savings at the Pump to the Trust Enrollment Department, seconded by David P. Jordan. Motion Carried:

Ayes: David P. Jordan, Kirby Metoxen, Brandon Stevens

VIII. ADJOURN

Motion by David P. Jordan to adjourn at 11:42. a.m., seconded by Kirby Metoxen. Motion Carried:

Ayes: David P. Jordan, Kirby Metoxen, Brandon Stevens

Minutes prepared by Brooke Doxtator, Boards, Committees, and Commissions Supervisor
Minutes approved as presented on _____.

Marie Cornelius, Chair
Quality of Life Committee



MEMORANDUM

To: Oneida Quality of Life Committee
From: Keith Doxtator, Director, Trust Enrollments
Date: December 16th, 2022
Subject: 2022 Food and Fuel Program Stats

The following are the summary data for the Savings at the Pump program, BC Resolution 06-28-22-A, and the Food Assistance Program, BC Resolution 09-01-22-A.

Savings at the Pump Eligibility	14531
Members applied	12715
Members paid	12715
Members denied	0
Payment amount	\$300
Total cost	\$3,814,500

Food Assistance Fund Program Eligibility	14626
Members applied	12801
Members paid	12801
Members denied	0
Payment amount	\$500
Total cost	\$6,400,500

From our paper applications received:

Only applied for Fuel	27
Only applied for Food	45
Did not apply for Fuel, nor Food	49
Declined both payments	83

DRAFT**XII. NEW BUSINESS****A. Review request for Summer Savings at the Pump and Food Assistance GWA programs year-end report and determine next steps (01:12:07)**

Sponsor: Nancy Barton, Tribal Member

Motion by Lisa Liggins to direct the Quality of Life Committee to develop an analysis of the food card/GWA payment distribution to identify how the programs worked and recommendations for the future and for updates on the status of that analysis to be on the quarterly reports to the Business Committee, seconded by Jennifer Webster. Motion carried:

Ayes: David P. Jordan, Lisa Liggins, Kirby Metoxen, Jennifer Webster
Not Present: Marie Cornelius, Tina Danforth, Daniel Guzman King, Tehassi Hill

Motion by Lisa Liggins to direct the Budget Analyst to include a request at the January BC work session to forward the food assistance program reports to the January 25, 2023, regular Business Committee meeting, seconded by Jennifer Webster. Motion carried:

Ayes: David P. Jordan, Lisa Liggins, Kirby Metoxen, Jennifer Webster
Not Present: Marie Cornelius, Tina Danforth, Daniel Guzman King, Tehassi Hill

Motion by Lisa Liggins to direct the OBC liaison to the Oneida Trust Enrollment Committee to request a report to be submitted to the BC work session similar to the ARPA closeout report regarding the Summer Savings at the Pump program, seconded by Jennifer Webster. Motion carried:

Ayes: David P. Jordan, Lisa Liggins, Kirby Metoxen, Jennifer Webster
Not Present: Marie Cornelius, Tina Danforth, Daniel Guzman King, Tehassi Hill

B. Accept the Aging and Disability Services Major Home Repair report (01:55:28)

Sponsor: Mark W. Powless, General Manager

Motion by Lisa Liggins to accept the Aging and Disability Services Major Home Repair report, seconded by David P. Jordan. Motion carried:

Ayes: David P. Jordan, Lisa Liggins, Kirby Metoxen, Jennifer Webster
Not Present: Marie Cornelius, Tina Danforth, Daniel Guzman King, Tehassi Hill

Item XII.D. was addressed next.

Tribal Action Plan

The Tribal Action Plan (TAP) is part of a collaboration of efforts by the Department of Health and Human Services (DHHS), the Secretary of the Interior and the Attorney General to address alcohol and substance abuse prevention and treatment in Native American Communities.



TRIBAL ACTION PLAN REPORT

REPORT DATE	PROJECT NAME	PREPARED BY
January 19 th , 2023	Tribal Action Plan	Leslie Doxtater, TAP Manager

STATUS SUMMARY

Next Tribal Coordinating Committee (TCC) meeting is scheduled February 7th, 2023 at 3 PM.

January 2023

- Narcan Training and Distribution
 - January 6th at Westwind OneStop
 - January 12th – YonHali:yo Community Advocacy Department Training
 - January 20th at Four Paths OneStop
- Park Olympics – January 31st
 - Youth Event in collaboration with Comprehensive Housing and Recreation

February 2023

- Narcan Training and Distribution
 - February 3rd at 54 OneStop
 - February 17th at Travel Center OneStop
- Winter Indigenous Games – February 25th
 - In collaboration with Oneida Behavioral Health – Kunhiyo

Harm Reduction Awareness. Bi-monthly, we're providing Narcan Training and Distribution as a collaborative effort with OneStop Retail. On January 6th, 2023, we distributed 15 Narcan kits, 17 Deterra pouches, and 10 medication lock boxes. January 12th, TAP facilitated Narcan Training with Yon^hali:yo – Community Advocacy department and provided their department with harm reduction materials. TAP is available to facilitate group trainings, upon request.

Culture is Prevention. TAP in collaboration with Oneida Cultural Heritage and Oneida Comprehensive Housing are providing an overview, in English, of the ceremonies to encourage more community members to the Longhouse. On December 21st, 2023, Bob Brown gave an overview on Midwinter Ceremonies with a dozen people in attendance. TAP will continue to collaborate with these departments to provide ceremony education to the Oneida community.

TAP is in the process updating the Tribal Action Plan document with a working group from the Tribal Coordinating Committee (TCC). As we've experienced a decline in TCC and subcommittee participation, it's imperative that TAP regains momentum and support from departments to successfully coordinate the Nation's efforts regarding drug and alcohol misuse.

The TAP team's upcoming Tetwatatehsnye' Conference is scheduled on March 29th at the Radisson. Tetwatatehsnye' means "we all take care of each other." Keynote speakers include Tatanka Means and Lenny Hayes. Agenda and registration for the event will be available by January 31st, 2023.

PROJECT OVERVIEW

TASK/GOAL	% DONE	TARGET END DATE	LEAD	STATUS UPDATE
TAP Conference – Tetwatatehsnye'	40%	March 2023	TAP Team/Mark Powless	Keynote contracts completed
Culture – Longhouse Ceremonies	25%	November 2023	Leslie Doxtater	Will continue collaboration after Midwinter Ceremonies
Monthly Presentations	75%	Ongoing until March 2024	TAP Team	Harm Reduction Awareness Presentations
COIPP Grant – MAT services	5%		TAP Team/Mark Powless	Bi-monthly meetings scheduled
Youth Risk Behavior Assessment (YRBA)	50%	5/30/2023	Leslie Doxtater	Subcommittee meeting will determine direction

RISK AND ISSUE HISTORY

ISSUE	ASSIGNED TO	DATE
<i>If applicable</i>		

NEXT STEPS

- TCC meeting is scheduled for February 7th, 2023
- TAP staff is working with GM Mark Powless utilize the COIPP Grant for MAT services
- Continue to collaborate with departments within the Nation to promote prevention & harm reduction programming
- Confirmation to complete agenda and registration for Tetwatatehsnye' Conference on March 29th

Oneida Police Department

1st QUARTER OCTOBER 2022 – DECEMBER 2022 FISCAL YR 2023

# OF ARRESTS	# OF CHARGES	OVERDOSE DRUG TYPE A = Alive D = Deceased	NARCAN DOSES	SYRINGES FOUND	DRUG & PARAPHERNALIA SEIZED										
					UNK DRUG	THC	METH	HEROIN	COCAINE	FENTANYL	OPIATES	PILLS	PARA		
						THC VAPE									
27	47	Heroin = D	1	7	Grams	50.9	16.97 Grams		3.89		13 Dosage Units	231	58		
		Unknown = A	1												
		Unknown = A	3											ML's	7
		Percocet = A	2												
		-													



BEHAVIORAL HEALTH REPORT

OCTOBER-DECEMBER 2022

REPORT DATE	PROJECT NAME	PREPARED BY
1/19/23	Behavioral Health Report	Mari Kriescher, Behavioral Health Director

STATUS SUMMARY

Provide a short summary on your area and its progress since the previous report.

The number of people utilizing Behavior Health Services;

Alcohol, Tobacco and Other Drug Abuse (ATODA) and Co-occurring specific

We had 113 new patients and 380 active patients during this reporting period. 85 of those patients accessed Same Day Substance Abuse Care Services. (Athena -Cognos Report)

Access to care Report- We have Same Day Substance Abuse services. Co Occurring Intakes 1-6 weeks. (Athena -Cognos Report)

Staffing Levels- We currently have 9 Clinical Substance Abuse Counselors (1 Telehealth), we have 4 Co-occurring Therapist (1 vacant positions) BH Supervisor Vacant (starting 1/15/23). 2 Recovery Coaches (3 vacant)

Access to Care- Co Occurring 4-6 weeks. Substance Abuse Same Day

Mental Health Services

We currently have 700 active patients in Mental Health Services. (Cedar gate Care Management Report)

Access to Care- We are currently scheduling out 8-12 weeks for Initial Intake Appointments. (Athena - Cognos Report)

Staffing Levels- We currently have 7 Psychotherapist (1 fully telehealth and 7 vacant (4 F/T 3 grant)

Access to Care- Mental Health 12-15 weeks.

Medication Management

We currently have 1,369 patients in medication management services only. (Cedar gate Care Management Report)

Access to Care Report- Child Psychiatry Evaluation within a week. Adult Psychiatrist 2 weeks. (Athena -Cognos Report)

Staffing Levels- We currently have 3 Child Psychiatrist (1 full telehealth and 2 part time) We have 5 Adult Psychiatrist (1 part time telehealth and 4 part time) 1 part time adult psychiatrist retiring 5/1/23.

Access to Care- Child Psychiatry 1-6 weeks, Adult Psychiatry 1-4 weeks.

Our current no show rate is at 13.7% decrease from 15.0 %. NS Policy re implemented in May. Total appointments scheduled 7,070 Completed appointment 4,309 and total unique patients seen 1,640. Variance is due to provider leaving and HVAC install started on 9/29/22 -11/21/22 where we had to move most appts to telehealth with minimal in person visits.

The number of people seeking rehabilitation/detox assistance.

Referrals to Residential Treatment FY23-46 Patient referred to Residential Treatment (Athena Cognos Report)

Detox- 14 Patients admitted for Detox FY23 Q1 (PRC Report)

How many patients are utilizing Medically Assisted Treatment

Suboxone- 11 patients a month

Vivitrol- 25 patients a month

Overdose Awareness

Opioid Overdose Kits- 342 Narcan kits (684 doses) given out. We are currently putting 4 doses in each kit due to the high risk of fentanyl. We have given out 1026 fentanyl testing strips. September 2023 Pubic Health Advisory: Fentanyl Increasingly Present in Overdose Deaths in Wisconsin. We are working with Public Health to get out information on this in the community. Public Health, Behavioral Health and TAP will be participating Brown County Overdose Task Force. The first meeting is on 1/19/23.

The number of drug and alcohol related deaths- Enrollments Data – 3 deaths F23 Q1

3 – Male

0– Female

Age range –46-56

According to Oneida Enrollments- At this time we don’t have all our data reported as not all the Death Certificates are in. Due to the medical examiner running the toxically reports these typically run up 4 to 8 months after a passing. At this time, we don’t have all our data reported as not all the Death Certificates are in. There are currently 10 pending death certificates.

Recovery Support Services-

We are currently implementing Integrated Recovery Support Services (Hub & Spoke) . Currently there are 49 patients enrolled. DHS site visit scheduled 1/24/23.

The Recovery Nest.

Recovery Support Services

We currently have 66 patients active in recovery coaching

Staffing Levels- 2 Recovery Coaches and 3 vacancies

There were 14 meetings during the timeframe: 10-1 to 12-31

All Native Recovery support meetings are talking-circles for anyone seeking recovery support and anyone may bring a friend or family member for support if they wish. Anyone interested in recovery support is welcome to participate regardless if they are in active-recovery or not.

MONDAY:

6pm Monday-night is the 12-steps & 12-traditions of Wellbriety in the Native Talking-Circle. Weather permitting the group decides if the meeting will be fireside or indoors. Monday night the total participation count during this time is 70. The average is 5 – 7 /per week

WEDNESDAY:

6pm Wednesday-night is the 12steps & 12-traditions of AA in the Native Talking-Circle. Weather permitting the group decides if the meeting will be fireside or indoors. Wednesday night the total participation count during this time is 103. The average is 7-10 / per week

FRIDAY:

1:30pm Friday-afternoon is the 12-steps & 12-traditions of NA in the Native Talking-Circle. This is currently the only daytime support group that we now offer. This is an indoor meeting and may become a hybrid-zoom meeting once we have a license to purchase Zoom for our department. NOTE: hybrid meetings are open-meetings and will be announced. These offer individuals seeking support who cannot commute to participate virtually via Zoom.

6pm Friday-night is the Yukwatsistay “Our Fire” a community recovery talking-circle located at 431 Hillcrest Drive. This is not a 12-step meeting and is not sponsored by Oneida Recovery Nest. Yukwatsistay hosts a fire every Friday night, unless an emergency cancellation is announced.

Celebrating Families Support Group started 10/6/22-1/26/23. There are currently 4 participants every week (one grand-parent and her 3-grandkids)

Recovery Beading groups starting Tuesdays averaging 3-6 participants

Complete Feasibility Study Transitional Residential Detox Treatment Facility Status

We will be proceeding with redirecting the feasibility study project to the CDC #21-112 CDC #21-112 Transitional Residential Detox Treatment Facility, Paul Witek as the Project Manager.

CIP Request CDC #21-112 Transitional Residential Detox Treatment Facility signed on 10/25/22

Next steps in the Capital Improvement Process (CIP):

1. Project Team to finalize Concept Paper (attached document)- **We are here!**
2. OCHD Director's to sign-off on Concept Paper on Form CIP-05.
3. Submit for OBC Approval.
4. Upon OBC Approval, assemble project's CDC Approval Package.
5. OCHD Director's to sign-off on CDC Approval Package on Form CIP-05.
6. Submit for OBC Approval.
7. Upon OBC Approval and budget allocation, start design process.
8. Facility Design.
9. Bidding.
10. Construction.

Within the Concept Paper document, we will need to identify the amount of funds needed for completing the Feasibility Study that would be included in the project's CDC Approval Package. We are estimating a budget for those services to be approximately \$200,000.

If we plan to use CIP funding for the study, it would need to be requested in the FY2024 CIP Budget. Another possibility to get funding sooner would be to request Tribal Contribution Savings (TCS) aka: ARPA. We will continue to investigate where we can obtain funding for this project.

PROJECT OVERVIEW

TASK/GOAL	% DONE	TARGET END DATE	LEAD	STATUS UPDATE
Implement Integrated Recovery Support Services. Hub & Spoke	95%	10/2023	Mari Kriescher and Team	Finalizing documentation in Athnea to track individuals in the program. Preparing to report into the state Redcap system.
Recovery Nest Expanding Services	80%	6/30/23	Mari Kriescher Helios Recovery Recovery Coaches	Implement Vivent Health Contract Hire staff New Furniture delivered 1/2023
Complete Feasibility Study for detox, residential, transitional living	40%	TBD	Mari Kriescher Paul Witek	Transitioned to Engineering Dept. Signature on CIP Request complete 10/25/23 Finalize Concept Paper Secure funding Obtain OBC Approval
Create BH Data Dashboard	60%	12/31/22	DTS Data Analyst Eric Marcks Shane Bird Mari Kriescher Joy Salzwedel Kate Sayers Lori Metoxen Rebecca Krueger	We were able to get most of the Substance Abuse data from Athena (EHR). We have some of MH but still needs work. However, still working on some of the data outside of Athena . The dashboard still needs to be more understandable to the lay person. Comparison data with other tribal nations is limited. Will have state information linked to current Dashboard Barrier in obtaining outside data to feed into the dashboard and competing priorities.
Update Website to include specialty services	90%	6/30/23	Mari Kriescher Leonard & Finco PR Joy Salzwedel Kate Sayers Lori Metoxen	Leonard and Finco PR have received access and we are currently working on getting the website updated. Waiting for some pictures of providers.

[Oneida Nation | Behavioral Health \(oneida-nsn.gov\)](http://oneida-nation.gov/BehavioralHealth)

				<p>Need to expand information to specialized services on website.</p> <p>Oneida Nation Behavioral Health (oneida-nsn.gov)</p>
Marketing Behavioral Health Services			<p>Leonard & Finco PR Joy Salzwedel Kate Sayers Lori Metoxen Mari Kriescher</p> <p>Joy Salzwedel</p>	<p>Leonard and Finco PR is assisting in getting more information in the community on Behavioral Health topics through Communications, Kahli, Facebook and Website.</p> <p>Utilizing KFC Digital Marquee services that are happening within BH and GSD building when requested.</p>

RISK AND ISSUE HISTORY

ISSUE	ASSIGNED TO	DATE
Recruitment-Provider Shortages	HRD Division Directors Mari Kriescher	Ongoing
<p>Gathering all the data. Not all reports are built in Cognos that we need. We have the data but need the time and people power to get it all organized for easier reporting.</p> <p>Currently gathering data from 12 different reports and/or sources</p> <p>Competing Priorities- GPRA Reporting for 3 SAMSHA Grants</p>	Mari Kriescher DTS Team Informatics Therapist	Our goal of 12/31/22 has assisted us in making progress. This is related to the BH Dashboard initiative. We are still working with the outside OCHD Electronic Health Record data.

NEXT STEPS

Provide bullets or short summary your area wants to have accomplished by next report.

Next steps in the Capital Improvement Process (CIP):

Project Team to finalize Concept Paper
 OCHD Director's to sign-off on Concept Paper on Form CIP-05.
 Submit for OBC Approval.

Continue to Work with DTS to develop a BH Data Dashboard with the all the gathered information to make completion of the report less time intensive.

There were a few items that I did not include in the report due to reports not yet built within Cognos to get the data out of Athena. For example, the completion rates for each level of care, discharge status, Integrated Recovery Support Services, outcome data. We have the data, but it is not in an understandable format.

EXECUTIVE

Brown County

305 E. WALNUT STREET
P.O. BOX 23600
GREEN BAY, WI 54305-3600

**Troy Streckenbach**

PHONE (920) 448-4001 FAX (920) 448-4003

BROWN COUNTY EXECUTIVE

Release Date:
September 1, 2022

Media Contact:
Deputy Executive Jeff Flynt
(920) 448-4083

PRESS RELEASE

County Executive Declares Fentanyl a Community Health Crisis

Public Health Releases Proactive Plan to Address Dangerous Increase of Opioid Use

(Brown County, Wis.) – Brown County Executive Troy Streckenbach, with the support of Brown County Public Health Officer Anna Nick, has declared fentanyl a Community Health Crisis in the County of Brown as today marks the start of Recovery Month.

“The fentanyl and opioid crises are a scourge on our community and action must be taken,” says Streckenbach. “Brown County needs to be proactive, educate, and empower everyone through data-driven strategies and increased access to life-changing resources. It’s important for this community to team up so we can help keep our families and loved ones safe.”

As outlined in the declaration (*attached*), Streckenbach is directing Public Health to utilize opioid settlement funds to support programming, advocacy, and raising awareness regarding this issue adversely impacting our community, collaborate with public and private community partners to assist in their efforts, and develop measurable objectives to track the County’s efforts in the fight against fentanyl.

“As a mother, I am terrified that my kids will be exposed to fentanyl in some way,” says Nick. “Fentanyl does not discriminate. You don’t know who will be impacted next and how. However, we do know that Fentanyl is out there. By partnering together, we can focus on prevention, response, and recovery, while attempting to reduce the number of overdoses in Brown County.”

Over the past six years, opioid deaths in Brown County have nearly tripled. In 2021, 57 percent of all drug overdose deaths in Brown County involved fentanyl, and according to data from the Centers for Disease Control and Prevention (CDC), more than 150 people die every day from overdoses related to synthetic opioids like fentanyl.

Brown County’s efforts will continue via several platforms and involve numerous community partners to help address immediate concerns, as well as long-term approaches dealing with the root causes of opioid use including a focus on the social determinants of health. One of the first avenues is by establishing a Brown County Overdose Task Force focusing on 3 pillars: prevention, response, and recovery.

There also will be a community listening session for people impacted by the opioid crisis and fentanyl where community members share and listen to others on Monday, September 12th from 5:00 to 8:00 p.m. at Backstage at the Meyer, 117 S. Washington Street in Green Bay (*poster attached*). That event is hosted by Tom Farley, recovery advocate, who is returning to Brown County for this special night.

###

Troy Streckenbach
Brown County Executive



OFFICIAL DECLARATION

Whereas, the opioid crisis and subsequent fentanyl crisis is of such magnitude that decisive action is necessary to protect the health, safety, and wellbeing of all Brown County residents, and;

Whereas, fentanyl is a synthetic opioid that is approximately 50 times more potent than heroin and 100 times more potent than morphine and is widely available and highly addictive, and;

Whereas, traffickers are increasingly mass-producing fake pills that are mixed with fentanyl and other illicit drugs and marketed as legitimate prescription medications – increasing the rate of addiction and accidental overdose, and;

Whereas, there has been a significant increase in drug overdose deaths in Brown County associated with fentanyl since 2016, and the latest data for 2022 shows fentanyl associated with 79% of all drug overdose deaths, and;

Whereas, according to data from the Centers for Disease Control and Prevention (CDC), more than 150 people die every day from overdoses related to synthetic opioids like fentanyl.

Now, Therefore, I, Troy Streckenbach, Executive of Brown County, do hereby declare that

Fentanyl is a Community Health Crisis in Brown County

Further, I direct:

1. Brown County Departments to collaborate with public and private partners to take the necessary steps to address this health crisis.
2. Brown County Departments work with the Brown County Board of Supervisors to develop a plan for the use of opioid settlement funds for programming, advocacy, and raising awareness.
3. Brown County Public Health to develop measurable objectives to track the County's efforts in the fight against fentanyl and to report results to oversight committees and the County Executive's Office on a quarterly basis.

In addition, I encourage residents of Brown County to educate themselves and their families about the dangers of fentanyl, fentanyl-laced drugs and accidental overdose, and to engage in community-based harm-reduction strategies.

Dated this 1st day of September 2022

Troy Streckenbach
Brown County Executive

Zero Suicide

A framework for systematic, clinical suicide prevention in behavioral health and health care systems.

Oneida Comprehensive Health Division

Vision- We Provide the highest quality, holistic health care to ensure the future wellness of our Oneida Community.

Values-Responsive Leadership, Continuous Improvement, Culturally Sensitive, Communication, Respect and Safety.

Behavioral Health Mission

Our Mission is to empower individuals and families within the Oneida community to restore harmony in mind, body and spirit through culturally-inspired interventions for the next 7 generations.



ZERO SUICIDE REPORT

(OCTOBER-DECEMBER 2022)

REPORT DATE	PROJECT NAME	PREPARED BY
01/19/2023	Zero Suicide Initiative/Safe Care Pathway	Mari Kriescher

STATUS SUMMARY

Safe Care Pathway (SCP) / Suicide Screening

- Many of the OBH clinical sessions are conducted at a highbred model which can be seen in person or virtually via MS Teams. All patients at OBH are screened for suicidal ideation at each meeting using the Columbia-Suicide Severity Rating Scale (C-SSRS).

Question Persuade Refer (QPR)

- QPR Training Coordination is currently being coordinated.
- The Zero Suicide Team/QPR trainers are conducting QPR training for employees of OCHD and the community. Training is being provided virtually using the MS Teams platform.
- During this quarter the training team completed 1 QPR trainings. A total of 12 OCHD staff and 5 community members received QPR training.
- Monthly QPR trainings for all OCHD employees will be provided throughout the 2023 calendar year.
- The QPR training team is planning trainings for the 2023 calendar year.

Safe Care Pathway (SCP)

• Safe Care Pathway currently has 25 active clients. Since the program started in January of 2021, SCP has served 173 clients who had moderate to severe risk for suicide. 134 clients out of the 173 who have exited the program, have met all exit criteria. This number identifies only those clients who have met exit criteria. Some clients end the program when they are feeling better and have engaged in other services. Some client end without communicating why they are no longer coming for services. We have had zero suicides and zero suicide attempts for those clients who are active in the program.

Successes: The program is currently meeting its main objective to reduce suicidal risk for the clients participating in SCP. Zero suicides and zero attempts are the 2 most general goals for the program and both are

being met. When we look at success rates, it needs to be studied further as people are leaving the program voluntarily when they feel better. The Team is looking at how this statistic can be more accurately measured. According to the measure of meeting exit criteria the success rate is at 66 percent from October – December 2022. This measure does not count the clients who leave early but are doing well. Another positive is that Care Manager is being used to track and coordinate care for clients- which will be improved even more over time.

Integration with Primary Care

- The Behavioral Health Consultant (BHC) is fully embedded at Oneida Comprehensive Health Center.
- Each person referred to the BHC is screened for suicide at each encounter.
- The Primary Care Integration workgroup continues to meet to refine the workflow on assessing patients and referring for Safe Care Pathway.
- As of January 1, 2023, the BHC provided services to 241 unique patients at OCHC. Patients are being provided short-term targeted services and receiving referrals to specialized mental health therapy and other services as needed.

PROJECT OVERVIEW

TASK/GOAL	% DONE	TARGET END DATE	LEAD	STATUS UPDATE
Develop Workflow with integration with Primary Care providers	60%	4/1/23	Mari Kriescher Dr. Garstka Dr. Kennard Other primary care team	A workgroup was created to develop workflow on assessing and referring for Safe Care Pathway. Dr. Garstka has an office at OCHC beginning 6/1/21. Patients are being referred by their primary care provider and being seen at OCHC.
Develop Workflow for Integrated Healthcare System-ZS Model	20%	12/31/23	Mari Kriescher Dr. Garstka Dr. Kennard Other primary care team Other BH Providers	Implement universal suicide screening and utilization SBIRT process
Community Education on Suicide Prevention	50%	12/31/23	Mari Kriescher Dr. Garstka	We have the material just coming up with a plan on deployment. In getting coordinated. We just received approval to utilize the InEvent Training Software.
QPR Training with OCHC Employees		Ongoing	Dr. Garstka Rob Haen Tor Adkins	Virtual QPR training began in 7/29/21 and is continuing in 2022; During this reporting period 2 sessions completed. A new training schedule are scheduled for the OCHD staff for the 2023 calendar year.
Providing Mental Health First Aid Training to all Employee's.	30%	1/1/2023	Dr. Garstka Jacqueline Ninham Mari Kriescher Rebecca Green Blanks-Youth	We have 3 certified MHFA trainers. We are in the beginning stages of coordinating Mental Health First Aid Training to Employee's.

RISK AND ISSUE HISTORY

ISSUE	ASSIGNED TO	DATE
<i>Delays due to COVID 19 Precautions</i>		
Hiring of mental health therapists	Kate Sayers Mari Kriescher HRD	Ongoing

NEXT STEPS

Safe Care Pathway (SCP) / Trainings / Development

- Continue to refine the workflow with integration of BH into primary care with assessing and making referrals to BH Safe Care Pathway.
- Hire and train additional SCP therapist(s) to be able to work with more clients who need services. At this time cannot take internal referrals due to high demands from Intakes and post hospitalization. Will probably need 2 more, then assess numbers being served.

Challenges: It continues to be the case that the biggest challenge is staffing the program. There would be a much greater number of referrals if the program could serve more clients. When better staffed, we can add internal referrals which would increase the number of clients who can benefit. Another challenge is getting better and more meaningful statistics for monitoring client progress. The team is already discussing this issue.