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NOVEMBER 2024

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The Right Person at the Right Time

CO-RESPONDER PROGRAMS IN OUTAGAMIE COUNTY

By embedding mental health professionals within the sheriff's office and a city police department, the Outagamie County co-responder program is providing trauma-informed care, reducing emergency detentions, and enhancing the community's confidence in law enforcement.

Conversations about how to respond better to mental health crises began nearly 10 years ago, but when the global pandemic triggered an uptick of calls to the Appleton Police Department, it was time for county and city leaders to act.

Working with community partners, the city and county looked at best practices across the country. The result was a collaborative, pilot program embedding a county mental health professional in the Appleton Police Department. With the program succeeding, two years later, the county added a mental health professional in the county sheriff's office.

Today, Sarah Peterson, a clinical therapist with the

Outagamie County Department of Health and Human Services, is embedded in the Appleton Police Department while Heather Freund, also a crisis mental health professional, is embedded in the county sheriff's office. Both work the second shift on weekdays since that is when the data shows the greatest need.

Both are transforming how law enforcement responds.

From one corner of Outagamie County to another, it can be an hour or more of driving time. So, Freund responds based on the situation, working as a team with law enforcement. She may arrive with a deputy or drive herself to the location after it has been assessed for safety or the individual has been brought to a fire station or hospital. If she's not able to respond in person, Freund may provide guidance to the responding deputies via FaceTime. "I like responding on the scene, helping individuals in crisis," said Freund. "Being able to break the stigma on mental health



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— Sarah Bassing-Sutton, a community suicide prevention coordinator with the N.E.W. Mental Health Connection, who helped spearhead the collaborative effort leading to the pilot program

and show that police aren’t the bad guy.”

Freund’s typical day begins by touching base with case workers and communicating with deputies to find out what they need. When she has the opportunity to ride along with deputies, she values the opportunity to learn from them.

“The informal training working side-by-side with law enforcement can be more impactful than the formal training as officers see how people respond in real-time to the crisis professional,” says Sgt. Joshua Hopkins, a behavioral health investigator in the Outagamie County Sheriff’s Office. “They learn what questions to ask and how to respond.”

Hopkins monitors the program and collects data. “I’m the ‘boots on the ground’ during the day,” he said. “A lot of communication is needed since Heather interacts with people in the evening, but meetings generally happen during the day when she cannot be present.”

“We do a ton of follow-up,” said Freund. “Sometimes even months later to make sure people have been able to take advantage of the resources we direct them to.”

Before the program, the county relied on “on-call” crisis workers, who each had their own methodology and approach. With many of the community members in crisis needing help repeatedly, having staff who are familiar with them and taking a consistent approach helps everyone involved.

The program has helped to substantially reduce the number of people who call repeatedly but there is an overall increase in the number of mental health calls.

“Two professionals aren’t enough,” said Hopkins. “In the short term, I’d like to have 24/7 co-responder coverage and embed more crisis staff in law enforcement jurisdictions throughout the county.”

In the long term, Hopkins would like to see crisis phone staff embedded in the sheriff’s office communications center to allow for warm handoffs of mental health-related calls for service where safety is not a concern. The sheriff’s

office is also looking into warm handoffs with the 988 Suicide & Crisis Lifeline when appropriate.

With the city having a more defined geographic area, Peterson typically rides along with Appleton police officers who prioritize mental health-related calls. Working closely together, they’ve learned how the other will respond. However, Peterson’s expertise benefits the entire department as she consults with officers, providing resources and training on what to watch for, how to respond, and how to approach situations.

“We’ve improved the system with a much better trauma-informed response and much better follow-up,” says

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Lt. Meghan Cash, the community resource unit supervisor for the Appleton Police Department. “The feedback has been phenomenal. It’s given law enforcement officers more confidence and the community more confidence in them.”

Similar to the county, Peterson would like to expand the crisis and behavior health officer positions to multiple shifts, ideally covering weekends as well.

The Community Resource Unit is also collaborating with the city’s health department to help residents with their basic needs. “Officers are often called to do wellness checks, but they are not trained in how to help with housing or getting an ID to access medical care,” explained Peterson. “By turning over this work to others, officers can focus on their jobs and what they are trained to do.”

To bolster the program and know what is happening throughout the city, the police department established a community advisory board. They are also working to build partnerships with organizations such as NAMI that help make the co-responder program sustainable.

“The decrease in the number of emergency detentions is probably the most compelling data in support of the program,” said Sarah Bassing-Sutton, a community suicide prevention coordinator with the N.E.W. Mental Health Connection, who helped spearhead the collaborative effort leading to the pilot program. According to Peterson, emergency detentions have gone down by 37% in the city.

One of the additional metrics that has been closely watched is the amount of time officers spend at hospitals with a person in crisis.

Before, hospital intakes could last 10-12 hours. “That is a lot of man hours and the individual gets agitated,” said Peterson. “By working with the hospital, we’ve become more efficient and now can be done in an hour.”

The behavioral health officer in the police department regularly meets with the head of nursing and the emergency room administrator along with Outagamie County crisis team members and other partners to review incidents and improve the processes. They are also working with the Winnebago Mental Health Institute and other facilities to improve coordination while minimizing the trauma for the individual and the involvement of law enforcement.



PEER RESOURCES

The International Co-Responder Alliance website, coresponderalliance.org, provides peer resources.

It is important for crisis workers to stay mentally healthy as well. Freund prepares for work by going for a walk, eating a good meal, and staying hydrated. She seeks assistance from another professional who understands the secondary trauma that can occur when being a crisis responder.

Peterson says she stays healthy by having a solid network of supportive friends and family who keep her grounded. She has access to a peer support program and the department is considering expanding the role of the mental health professional who meets with officers to also provide support to their clinicians.

“Do your research,” said Peterson. “Visit other departments to see how they do it, take what works best for you, adapt it to your needs, and make it your own. Mobile response units are good but having someone embedded in the department takes it up a level.”

“Everyone should have a program like this to provide on-site, trauma-informed care,” said Freund. “Work together, because everyone wants positive outcomes.” ■

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