

NAMI Wisconsin Position Statements

Community Outreach

Diversity and Inclusion

NAMI WI supports inclusion of persons of different ages, and of varying cultures, racial, religious, ethnic, sexual orientation, gender, gender identity, disability, including persons who are deaf and hearing impaired, and those for whom English is not the primary language have unique characteristics that sometimes cause them to be partially or poorly served or excluded from existing treatment, training, and rehabilitation programs. These differences must be respected, embraced, and accorded appropriate representation in mental health care policy, administration, diagnosis, treatment, services, and support in provider and governmental organizations, as well as throughout the organization and operation of NAMI. NAMI WI supports expanded efforts toward recruitment and training of professionals from these groups, the development and distribution of culturally and linguistically appropriate materials for use in education, encouragement of their participation in programs and services, and outreach efforts targeted to these underserved and excluded groups.

Veterans, Service Members and their Families

NAMI WI believes that persons with mental illnesses who are veterans, on active military duty, in the National Guard, or in the Reserves, as well as their families, should receive the same full range of integrated diagnosis, treatment services, and supports across a continuum of care as should be available to all people with serious mental illnesses.

Criminal Justice Advocacy

Partnerships at Every Level

NAMI Wisconsin supports close collaboration between state and local mental health authorities and state and local correctional and law enforcement agencies to develop strategies and programs for compassionate intervention by law enforcement, jail diversion, treatment of individuals with serious mental illnesses who are incarcerated, as well as discharge planning and community reintegration services for individuals with serious mental illnesses released from correctional facilities.

Nurturing Education and Fighting Stigma

NAMI Wisconsin believes that education about serious mental illness at all levels of judicial and legal systems is crucial to the appropriate disposition of civil and criminal cases involving individuals living with serious mental illness. Judges, lawyers, other court personnel, police officers, correctional officers, parole and probation officers, other law enforcement personnel, and emergency medical transport and service personnel should be required to complete training about serious mental illness. Individuals living with serious mental illness and family members should be a part of this educational process and training should be consistent with available model standards for crisis intervention training.

Program Focus

NAMI Wisconsin supports the constitutional right of inmates with severe mental illnesses to have access to humane and effective treatment for their mental illnesses while in correctional settings. NAMI supports a variety of approaches to diverting individuals from unnecessary incarceration into appropriate treatment, including pre-booking (police-based) diversion, post-booking (court-based)

diversion, alternative sentencing programs, post-adjudication diversion, and conditional release to community treatment.

Medication

Accessibility and Ongoing Support

NAMI Wisconsin supports access to a full array of psychiatric medication and medication prescription based on the clinical judgment of the prescriber in on-going consultation with the consumer. Medication prescription, management, and reimbursement policies should include regular screening and recommended lab work to monitor for side effects and metabolic changes in order to avoid adverse health consequences and additional health care costs.

Prescribing Privileges

NAMI Wisconsin does not endorse proposals to expand prescribing privileges to psychologists. NAMI WI acknowledges that serious shortages exist in the mental health professional workforce, particularly in public mental health systems and in rural and medically under-served regions of the state. However, there is no current evidence that expanding prescribing privileges to psychologists will address these shortages.

Quality of Care

Affordable and Accessible Care

NAMI Wisconsin supports health care for all persons with mental illnesses that is affordable, nondiscriminatory, and includes coverage for the most effective and appropriate treatment. NAMI supports mandatory coverage and full parity for mental illnesses that is equal in scope and duration to coverage of other illnesses, without lifetime maximum-benefit caps and other limits more restrictive than those required for other illnesses or disorders, and covers all clinically effective treatments appropriate to the needs of individuals with mental illnesses.

Evidence Based Practices

NAMI Wisconsin supports the provision of high quality evidence-based practices including Assertive Community Treatment, Integrated Dual Disorders Treatment, Supported Employment, and Illness Management & Recovery. Fidelity of any evidence-based practice must be monitored by outside evaluators to ensure expected outcomes and to achieve cost effectiveness.

Adequate Continuum of Care

NAMI Wisconsin supports access to mental health services that are comprehensive, adequately intensive, of high quality, and span a continuum of care including community based treatment, inpatient psychiatric care and/or other acute inpatient alternatives, and crisis intervention services. Treatment, services, and supports should always be timely, easily accessible, and provided in the least restrictive environment. Peer support services should be available at all times and at all levels of care. Such a range ensures availability of the right services, in the right place and at the right time.

Program Monitoring and Accountability

NAMI Wisconsin supports systematic program review to include financial audit, quality review, and consumer and family satisfaction to ensure that expected outcomes are achieved, quality improvement

occurs and services are cost effective. Results should be made public for use by decision makers, administrators and advocates.

Data Collection

NAMI Wisconsin supports effective, efficient, and comprehensive data collection at the state level to accurately track service access, cost, utilization, performance and outcome measures, and geographic coverage. Reliable data is critical for informed decision-making and quality improvement.

State Financing

Provider Workforce

NAMI Wisconsin supports adequate funding, including provider payments for community mental health services and supports in order to: attract and maintain a sufficient and well trained workforce of qualified providers to provide a broad array of science-based services to meet the needs of those individuals living with serious mental illnesses.

Family Member and Peer Programs

NAMI Wisconsin supports adequate state financing for family and peer support organizations to deliver family and peer education and support programs to help families and consumers deal more effectively with mental illness and promote recovery. Such education and support can eradicate stigma which contributes to a delay in seeking treatment. Through early intervention and access to treatment, deterioration and more costly interventions can be avoided.

System Coordination

Youth transition

NAMI Wisconsin supports a comprehensive array of treatment, services and supports that address prevention, early intervention, and recovery. This support should be available to children, adolescents and young adults living with mental illnesses and their families. These services should be available through publicly and privately funded service systems. They should promote resiliency and recovery and include evidence and research based interventions. There must be effective system coordination and collaboration between systems serving children, youth, young adults and their family.

Physical and Mental Health Care Coordination

NAMI Wisconsin supports care coordination and integration of physical health care and mental health care of the priority populations, including children, adults and older adults with serious mental illness. We support co-location of services following the concept of medical homes only if adequately intensive psychiatric care and outreach are provided. This includes the option of locating a mental health expert/consultant in primary care settings as well as incorporating a primary care provider in mental health settings. Such coordination would ensure timely attention to health needs so that more costly services such as urgent care or emergency room care can be avoided.

Smoking Cessation

NAMI Wisconsin supports consumers in seeking smoking and other tobacco use prevention, cessation and recovery as essential to overall wellness. NAMI calls upon physicians and other health care providers, in community and inpatient settings to implement educational and tobacco use cessation programs to help consumers stop and avoid tobacco addiction. Treatment and other facilities instituting

smoke free policies must provide effective tobacco addiction treatment and support to consumers as well as health care providers, caregivers and others working in such facilities, who use tobacco products.

Treatment Planning

Person-Centered Training

NAMI Wisconsin supports training for providers, family members and consumers in person/family centered strategies for inclusion of families and consumers in treatment planning and assessment, and in shared decision-making processes related to all aspects of treatment.

Consumer and Family Member Involvement

NAMI Wisconsin supports active consumer and family involvement in planning, implementing and evaluating mental health services. Inclusion of all stakeholders often results in creative and innovative solutions and system improvements.