REGIONAL MANAGEMENT GROUP MEETING

Date: September 24, 2010 **Time:** 9:00 a.m.

Attendees: Tom Geib, Mike Gilmore, Tom Maynard, Cindy Kemp, George Braunstein, Maximilien Del Rio, Cindy Koshatka, Justin Lux

Recorder: Julie Parkhurst

Announcements: None.

Call to Order: Tom Geib called the meeting to order at 9:00 a.m.

Notes: Notes from the August 27, 2010 meeting were approved.

Handouts: *Agenda, RMG Meeting Notes (August 27, 2010), Regional Utilization Management Report, signed MOA between HPR II and NVMHI for Additional Beds, FY10 HPR II Regional Funds Budget Status, HPR II LIPOS Budget Projections, TDO Crisis Plan, RMG Meetings Follow-Up List*

TOPIC	DISCUSSION	REC/ACTIONS	RESPONSI-BLE PARTY	FOLLOW-UP/DATE
Bed Management	• Hiring challenges: NVMHI is hiring a psychiatrist and a medical director. Hiring statistics can be obtained from Human Resources. Regional strategies to obtain staff are needed; i.e. affiliate with universities, share staff, etc. It is difficult to find necessary staff because better opportunities are provided elsewhere.	Add to October agenda.	RMG/NVMHI	10/2010
	• TDO Crisis Plan: The TDO Crisis Plan was supported by the RUG. Questions were asked regarding what happens if there are two or more dire cases at once. Who decides which one gets the bed?	RMG approved plan and requested a signed document. Continue to prepare for a situation where more than one client needs a bed at NVMHI. Document will be sent to RUG.	NVMHI/RUG C. Koshatka	Ongoing ASAP
Planning	• Crisis Center at NVMHI: First planning meeting on 10/13/10 will look at models. When finalized, the delegation will be approached for funding. Youth and adults are target populations; however, older adults have crises as well. The State is pushing for crisis	Send out CIC report to planning team Develop a clear plan for presentation to delegation, possibly a Crisis management model: Executive	C. Koshatka G. Braunstein C. Kemp C. Koshatka	ASAP 1/1/11

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Planning (cont.)	stabilization beds for every CSB. Strong community support will be needed. Police would like to see a TDO crisis unit where they can drop off clients.	summary, Youth (1 page) and Acute care (1 page). Associate dilemmas with numbers and emphasize responsiveness. State what consequences will occur if not funded and NVMHI closes more beds.		
	• Older Adults in Crisis: Meeting on 9/23/10 went well and was well attended. Solutions were sought. Another meeting will take place in early November and regional oversight is needed. Problems with PGH were discussed.	Send notes to RMG and assign tasks to OA work groups.	C. Koshatka	ASAP
Budget	• LIPOS Budget Projections: A handout was distributed and discussed. Admissions are down as other alternatives are being utilized and management practices have changed. The bed management plan has been mostly well-followed and has preserved resources.			
	• Regional Budget: The regional budget was discussed. CRT brought in some Medicaid funds. Recovery funds were disbursed to CSBs. $47,750 of one-time unexpended funds is available for CRT if needed; otherwise, it can go towards LIPOS.			
Updates	• Meeting Follow-Up List: G. Braunstein applied to be on the NVRC review board. ID group has drafted a report. Private hospital meetings should take place twice per year to discuss key issues. DD/Autism is being written up for presentation. Two waiver systems (DD and ID) will eventually merge together, and services will be given to those with the greatest need first. C. Koshatka is evaluating hospital logs to assess how frequently they are not available to admit our consumers.	Explore whether ID Directors have forwarded ID draft to EDs.	RMG	ASAP
		Consider adding crisis center to	RMG	ASAP

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	• Partnership: The next Partnership meeting will be held on 11/19/10 in Room 232 at the Fairfax County Government Center. ID group and youth services will be presenting.	agenda.		
Data	Highlights of the UM Report: • 15 LIPOS admissions in August. • NVMHI had 84 admissions in August. 24% of admissions YTD are TDOs, 29% insured. They were at 92% occupancy. The EBL is at 25. Readmission rate is 8.5% this month. 2 ID admissions this month. • 69 admissions to Crisis Care in August with 81% occupancy rate. • 172 commitment hearings in August. • RAFT's wait list is 10 clients for ALFs and 5 for nursing homes in August. 5 at ESH will stay, 27 at PGH.	ID admissions at NVMHI do not happen often; however, when they do they are complex (human rights issues, etc.). CRT has been involved in cases at NVMHI. Get final ID Crisis Report from Lee Price or Debbie Burcham. CSU two day training took place and was very good. SA issues and homelessness were key discussion topics.	C. Koshatka	ASAP
Round Robin	NVRPO: VACSB wants a submission for their annual report. Suggestions included Wounded Warrior, Housing RFP, primary care projects and ID plan. Loudoun: Revenues (taxes) are up and so are costs as more schools and fire stations are built. Cuts are expected. Many dollars are spent in Loudoun on outpatient services. Arlington: New County manager. Local reductions are expected. DHS has moved from Clarendon to S. Arlington and consists of cubicles and meeting rooms. Clinicians are in the field more and seeing more clients. Fairfax: The CSB will incur a $1.2 million cut that it hopes to handle without any job or service losses.			

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Round Robin (cont.)	Redesign of service system is nearing completion. The new Woodburn building will require 1) property ownership, 2) 2011 approval of building and 3) pharmacy and consumer resource center. The building will be 200K sq. ft. and Inova will lease one floor for awhile. A peer run SA treatment center is hoped for in the next six months. NVMHI: The Advisory Council will meet on 11/9/10 from 10 a.m. - 12 p.m. and will host a legislative breakfast. VITA is not fully operational – a 15% increase in costs was assessed to NVMHI but will be reflected by the State and not in NVMHI's budget. Alexandria: Alexandria brought 69% of their kids back to the community which allowed for another $2.2 million for the City of Alexandria. DIP's are being diverted instead of put in jail. Minds on the Edge will be presented on 9/30/10. Tobacco cessation programs (gum, patches, etc.) are covered by Medicaid in Virginia. Ellen Cagin was helpful in leadership training. SAMHSA is coming today to create videos for consumers and staff.	Add to next month's agenda.	NVRPO/RMG	Oct. 2010

Adjournment: The meeting was adjourned at 12:30 p.m. The next meeting will be on October 22, 2010, at 9:00 am at the Chantilly Regional Office.

Items for next meeting: Hiring strategies, Crisis Continuum Update; FFC restructuring plan

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Recorder	**Date**	**Chair**	**Date**