REGIONAL MANAGEMENT GROUP MEETING

Date: July 27, 2012 **Time:** 9:00 a.m.

Attendees: Tom Geib, George Braunstein, Carol Layer, Joe Wilson, Cindy Kemp, Mark Diorio, David Lyon, Cindy Koshatka, Tom Young, Lyanne Trumbull.

Absent: Mike Gilmore

Guests: Christy Cacciapaglia, Margaret Graham

Recorder: Julie Parkhurst

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

Notes: Notes from June 22, 2012 meeting were approved and signed.

Handouts: Agenda, RMG Meeting Notes (June 22, 2012), Regional Utilization Management Report, FY12 HPR II Regional Funds Budget Status, Statewide Bed Capacity Sheet, May and June 2012 SAARA Reports, Preliminary FFC CSB Residential RFI Analysis, RCRT & RCSC: Psychiatry and Behavioral Consultation, Hospital Admissions FY08 – FY12, CSB Provider Search, Budget Requests.

TOPIC	DISCUSSION	REC/ACTIONS	RESPONSI-BLE PARTY	FOLLOW-UP/DATE
MH	**NVMHI Study:** • A meeting took place on July 25 regarding the NVMHI bed study. The purpose of the meeting was to look at diversion, discharge, NGRIs and efficiencies within the system. • Drop off and 23-hour bed services may be recommended. • Arlington CSB has office-based crisis intervention that has diverted several consumers. • Fairfax-FC CSB will have six 23-hour beds that will open in 2014. A peer-run crisis program is being discussed in Fairfax. • ICRT+ level of care has support. • The committee is also looking at the number of beds at NVMHI. They are licensed for 144, but funded for only 123. Numbers between 127 and 129 are being discussed. NVMHI is at 96-98% occupancy most of the time. • A draft will be forthcoming at the end of August and feedback is welcome.	The next meeting will take place in August. Ask D. Mangano for proposal.	C. Koshatka	End of August ASAP

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MH (cont.)	**CSU Project:** Funding has been given to PW CSB for this project and the RFP has been published. The CSU will have capacity for some TDOs and medical detox. R. Romano, L. Trumbull, M. Petruzzello and S. Hoover make up the selection committee. **Child Proposal:** A proposal for a subregional project will be requested for Alexandria, Arlington and Eastern Fairfax with Arlington as the fiscal agent. The proposal is to include 24/7 mobile crisis services with response time under two hours, child psychiatry, etc. for $300K. A proposal for $433,984 will be submitted to DBHDS today. **SAARA:** May and June reports were distributed.	Request SAARA reports by CSB.	C. Koshatka	ASAP
ID	**NVTC Residents/Costs:** • RMG wants to know how much clients will cost when they are discharged from NVTC. Some providers will not take a client before they have been accepted to a vocational program. Assessments of those needing ICF versus waiver slots differ between CSBs and NVTC. Discharges will be delayed if the program enhancement is not addressed. • The Employment First model cannot be continued without sufficient funding. • Fairfax-FC CSB has done 30 day support contracts for six month periods only. • NVTC can surplus items to residents with documentation of where items went. **RFI Summary:** • Vendors in the community may be able to meet need for residential and day programs in the next 3-4 years. • Federal funds were used in Fairfax to buy 7 homes for vendor use. **Regional ID Forum:** Discuss conference calls in mid-September. **CRT/RCSC:** • A draft proposal regarding future planning for CRT was distributed to RMG. CRT has 16 people on its caseload; no new referrals are expected after START starts. Future planning will include how RCSC fits in with CRT. • Behavioral specialists are needed in our region.	M. Graham is working on data analysis. Keep M. Diorio informed regarding rates as vendors are asking for more and he is completing contracts for next year. Distribute information to ID Forum. Work with Alexandria CSB.	CSBs C. Koshatka C. Koshatka	ASAP ASAP

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New Business	**VACSB Annual Report:** Items to be included in the VACSB Annual Report include unsung heroes, bed capacity, WRAP training and peer involvement, NVMHI peer bridger and START. **START:** • An updated START MOA was distributed for signatures. • Four START Coordinators have been hired. A two day training took place 7/25 and 7/26 with Region 1 in Chantilly. START Coordinators will start providing direct services when licensing is done. • The home has been purchased. Permits from Prince William county are needed before renovations can occur. • Human rights guidelines are done.			
Budget	**Regional Budget Updates:** The regional budget was reviewed and discussed. **Unexpended Funds:** A budget request handout was distributed to the group and discussed. • The Wounded Warrior budget will get up to $12,000 depending on their latest contract negotiation with J. Thur • Behavioral supports are needed for ID population. Up to $20,000 will be set aside for CRT pending a needs analysis • WSH has no unit specifically for deaf clients as they no longer have enough staff or clients for it. The region can look into colleges for services. No funding for a Regional Coordinator will be available. Add $26,250 of one time funds so funds for deaf interpretation for FY13 = $50,000 • More discussion is needed regarding SA Recovery and child services. • $20K was approved for Dr. Mee Lee training (regional) • Up to $5K for encryption was approved • CRT reimbursement of $18,153 was approved • Transportation will be discussed when NVRPO position has been filled. • The funding for children will be moved to the LIPOS column.	Make a decision re: programming for Wounded Warrior Program within the next few months. Verify that SA Recovery needs haven't changed since their block grant proposal was written. LIPOS for minors will be discussed in August.	RMG C. Koshatka RMG	 ASAP 8/23/12
Data	**LIPOS:** 49 admissions in 6/12; average per month for FY12 was 41. Average LOS for FY12 is 5.4 days. Most admissions went to Mt. Vernon. 20 PHP admissions. 35 consumers stayed longer than 12 days.			

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Data (contd)	**NVMHI:** 62 admissions in 6/12. 23% TDOs in FY12. 22% were insured for FY12. 94% occupancy in June. 24 people on the EBL. 15 ID admissions. **Forensics**: 180 admissions in FY12. 57% RTC, 23% ETO, 11% eval, 6% NGRI. **NVTC/CRT**: NVTC census=153. 0 admissions, 0 discharges, 2 respite admissions for 4th quarter. 16 consumers in CRT at end of FY12. 67% crisis prevention, 17% crisis stabilization, 11% hospital intervention, 6% hospital diversion for FY12. **TDOs:** 203 commitment hearings were held in 6/12; an average of 192 per month for FY12. 191 clients went out of region in FY12 (131 are PW). **Crisis Care:** 73 admissions in 6/12; 76% diversion, 21% step-down, 2% NGRI and 2% TDO/CMA YTD. 88% occupancy for FY12. 38% had a SA diagnosis; 3% had an ID diagnosis. **Older Adults/Minors**: ESH-5, 2 RFD. PGH – 21, 4 RFD. PGH had 8 admissions and 6 discharges for FY12. RAFT census = 34; 3 on wait list. 163 admissions to CCCA in FY12. **Wounded Warrior**: FY12 4th quarter – 90 screenings and referrals; 48 directly to veterans. 21 education/training opportunities conducted to over 937 participants. Average caseload for ongoing services is 47/month in FY12.	Watch NGRI population at NVMHI. 151 = NVTC census as of 7/27/12. ID admissions to CSUs are expected to decrease once START begins. PGH has a new admissions coordinator.		
Round Robin	**Arlington:** Additional recovery money was granted by RMG for expanded hours and more people to be served. C. Kemp thanked the RMG and notified the group that she will not be at the August meeting. **NVMHI:** Audit has taken place and C. Koshatka represented the Region. DBHDS is looking at the number of RNs needed. M. Preston is the main contact for admissions and discharges. **NVTC:** Legislator Cook is coming on Thursday for a tour. H. Dix will come as well. A provider search handout was distributed. The judge's decision is still being awaited. **Loudoun:** They are going through a large reorganization. They modified their in-home team so it is Medicaid billable. More system of care practices are being developed. **Fairfax:** • VACSB priorities include 1) Part C needs a caboose amendment for Medicare, 2) SA Prevention needs to be systemic. Pilot programs are being done. 3) A higher rate for behaviorally challenging TDOs is warranted. 4) Right sizing child funds. 5) More comprehensive effort to have 20 Statewide drop off			

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Round Robin (contd)	centers with mobile crisis and 23 hour beds. Correct rates for waivers needs to be obtained sooner rather than later for discharges. • DMAS is proposing VICAP for SMI adults • DMAS is reviewing use of MH Support Services for those living in ALFs. Fund reduction will impact residential viability • Fairfax will manage $2.5 million in reductions • C. Castro-Donlan has resigned and position will remain open for six months. **WSH:** WSH had 7 jail transfers this month and charges were dropped. They will move into the new hospital in about one year. **Prince William:** Admission rates for minors have increased and an intensive in-home project is being done. **NVRPO:** Note that the November meeting will take place on the fifth Friday, November 30.	G. Braunstein will discuss at State meeting.		

Adjournment: The meeting was adjourned at 12:00 p.m. The next meeting will be on August 24, 2012, at 9:00 a.m. at Chantilly, Suite 200 Multipurpose Room.

Items for next meeting: Wounded Warrior, Child LIPOS

Julie M. Parkhurst 8/24/12 Tom Fish 8/24/12

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