REGIONAL MANAGEMENT GROUP MEETING

Date: October 26, 2012 **Time:** 9:00 a.m.

Attendees: Tom Geib, George Braunstein (via phone), Cindy Kemp, Joe Wilson, Mark Diorio, David Lyon, Cindy Koshatka, Lyanne Trumbull, Deborah Warren, Candace Butler.

Absent: Mike Gilmore

Guests: John Beghtol, Kathy Drumright, Jim Thur, Phil Caldwell, Margaret Graham

Recorder: Julie Parkhurst

Call to Order: T. Geib called the meeting to order at 9:00 a.m. A welcome was extended to the group and introductions were made.

Notes: Notes from September 28, 2012 meeting were approved and signed.

Handouts: Agenda, RMG Meeting Notes (September 28, 2012), Regional Utilization Management Report, FY13 HPR II Regional Funds Budget Status, LIPOS Budget Projections, DAP/RDAP Handouts, START Updates.

TOPIC	DISCUSSION	REC/ACTIONS	RESPONSI-BLE PARTY	FOLLOW-UP/DATE
Wounded Warrior Program	• Handouts were distributed to the group and an overview of the Wounded Warrior Program was given by J. Thur. • A new hospital is at Ft. Belvoir with a VA Clinic. NVCC provides peer support. Discussion took place regarding homeless vets, employment, rehab initiatives and housing initiatives. Incarcerated vets have a unit with a military culture which appears to be more helpful to them. • State funding has flat-lined. Contract with Loudoun expires at the end of June 2013. • Data collection issue not yet fixed. Loudoun CSB offered to provide spreadsheets to Wounded Warrior Program for entry into their system.			
MH Updates	**Bed Study/NVMHI Updates:** • The bed study report has not been made public yet. • Admissions to NVMHI have dropped over the last 3 years. • The roof renovation project at NVMHI is in progress. • Bed holds have reduced the availability of beds at NVMHI. After the roof has been repaired, half of the recently-closed wing will be re-opened.	Ensure DBHDS understands how NVMHI is set up structurally for safety Explore moving beds around for increased admissions.		

REGIONAL MANAGEMENT GROUP MEETING

TOPIC	DISCUSSION	REC/ACTIONS	RESPONSI-BLE PARTY	FOLLOW-UP/DATE
MH Updates (cont.)	• NVMHI licensed for 144 beds but staffed for 123. • NGRIs impact bed availability (34 currently). • Fourteen people will leave NVMHI with DAP funds, four within a week. **CSU Project:** The region is waiting for the contract to be signed and protocols are being put into place. The CSU will have detox capability. **OIG/EBL:** Two CSBs were selected to work with M. Preston and NVRPO regarding plans for those on the EBL. One person ($151k) and two people with TBI would need $154k each if presented. Interstate transfers, an acceleration of NGRIs, and stepdown option for Dave's House residents are being explored.			
	OIG/RDAP: Handouts with RDAP obligations were distributed. Aftercare Managers will speak with fiscal people to identify any issues regarding the new DAP form. LDAP now requires a regional review as well as RDAP, and the new forms will need to be in place by the end of December 2012.	New DAP form will be discussed with Aftercare Managers. Finalize plans.	R. Payne L. Trumbull	ASAP End 12/12
	Bed Registry: The State bed registry tool will roll out in March 2013. Each CSB has been assigned a primary user. Primary users for Prince William, Fairfax and Arlington are the CSU directors. System updates are needed in real time, not just once per day.	Talk to J. Pezzoli re: primary users being in ES and clinician vs. IT staff.	C. Koshatka	ASAP
	ROI: ROI is going slowly and is not a high priority at the moment. The group meets quarterly via phone calls. Data for the annual report has not been developed yet. What is ROI for services? Outcomes and cost per unit of service suggest good use of funds.			
	ES Survey: R. Bonnie's ES Survey is being updated and will be implemented in the spring.	Discuss with ES Managers and give updates as available.	C. Koshatka	ASAP

REGIONAL MANAGEMENT GROUP MEETING

TOPIC	DISCUSSION	REC/ACTIONS	RESPONSI-BLE PARTY	FOLLOW-UP/DATE
ID Updates	**CRT:** CRT funding proposal includes keeping Dr. Sherer 6 hrs/week for START at $50k and expanding his role to medication management for START clients who aren't in the respite home. $86k was requested for behavioral consultation. CRT is being phased out.	Approved funding. Approved funding.		
	START: • A handout of updates was distributed. • A preliminary license has been awarded but cannot be completed until the site has been visited. The program cannot operate until the full license is in place. • The home is almost ready, hopefully in approximately one month. Staff will be moving in soon. • The MH/ID MOU needs to be updated to include START. • Letters will be sent by H. Dix to residents at NVTC with first year move out dates.	ID/MH MOU draft will be reviewed and updated as needed	L. Trumbull	ASAP
	DOJ/Commissioner assignment: Handouts were discussed regarding current cost estimates for ID residential supports (does not include ancillary services). No additional analysis from the ID Directors is needed until DBHDS has a chance to review information provided and comment.	Take spreadsheet to DBHDS. Provide information to DBHDS and C. Koshatka. Provide information to RMG.	K. Drumwright M. Graham C. Koshatka	ASAP ASAP ASAP
Budget	**Regional Budget Updates:** The regional budget was reviewed and discussed. LIPOS is $324K in a projected deficit.			
	LIPOS Funding for Minors: $100k is being requested for LIPOS funding for minors. Youth staff will provide discharge planning. Contracts exist for Poplar Springs and Dominion hospitals.	Approved funding. Work on procedures and amendments.	C. Koshatka C. Butler	ASAP
Data	**LIPOS:** 57 admissions in 9/12; average per month for FY12 was 41. Average LOS = 6.3 days; FY12 was 5.4 days. Most admissions went to Dominion and Mt. Vernon hospitals. 7 PHP admissions YTD. 18 consumers stayed longer than 12 days. **NVMHI:** 45 admissions in 9/12. 25% TDOs YTD; 23% TDOs in FY12. 18% were insured for 9/12; 22% for FY12. 96% occupancy in 9/12. 27 people on the EBL. 1 ID admit for 9/12.			

REGIONAL MANAGEMENT GROUP MEETING

TOPIC	DISCUSSION	REC/ACTIONS	RESPONSI-BLE PARTY	FOLLOW-UP/DATE
Data (cont.)	**Forensics:** 54 admits in 1st quarter; 57% are RTC, 22% ETOs, 13% Evals., 7% NGRI. **NVTC/CRT:** 0 admits, 3 discharges, 0 respite admits for FY13 1st quarter at NVTC. 3 referrals, 4 discharges, 15 consumers at end of FY13 1st quarter for CRT. CRT is transitioning to START. **TDOs:** 184 commitment hearings were held in 9/12; FY12 monthly average = 192. 19 clients went out of region in 9/12. **Crisis Care:** 57 admissions in 9/12; 74% diversion, 26% step-down, 1% NGRI and 0% TDO/CMA YTD. 66% occupancy for 9/12. 41% had a SA diagnosis; 3 clients had an ID diagnosis. **Older Adults/Minors:** 5 consumers at ESH, 2 ready for discharge; 21 at PGH, 3 ready for discharge. 2 admissions to PGH for FY13 1st quarter. RAFT census = 33; 3 on wait list. 20 admissions and 23 discharges at CCCA for FY13 1st quarter.	WSH has had a surge in jail transfers. Two from Arlington have to wait due to TDOs.		
Round Robin	**C. Butler:** Contracts will develop LIPOS contract for Pavilion in Williamsburg. **J. Beghtol:** JCAHO is going well. WSH is getting more forensic referrals; admissions are slower than usual as a result. **NVTC:** Positions have been lost. Monthly meetings with DBHDS have been reinstated. Data have been requested and provided. NVTC is reviewing the number of serious injuries that occur after discharge. Letters to residents may concern parents. SS survey went well. A meeting took place with NVCC to discuss moving the dental clinic which went well. **Arlington**: Budget issues are still unknown. **NVMHI:** The process for hiring a new Facility Director is moving forward. JCAHO review took place a few weeks ago. NVMHI passed and the process went smoothly. **Alexandria:** The budget process is just beginning. A federal grant was received from the Administration for Children and Families focusing on teen pregnancy and STI. $290k was awarded per year for three years. A new family and youth services program will kick off in 11/14. The development of a youth master plan is underway. A part time employee does trainings on LGBTQ. Other jurisdictions are looking to tap into the resource. Please alert D. Warren if there is regional interest. **K. Drumwright:** DOJ Implementation Plan was presented at VACSB. Eight of the quality teams will be started. Data analysis will need representatives (ID council, etc.) The request will come from Maryann Bergeron.			

REGIONAL MANAGEMENT GROUP MEETING

TOPIC	DISCUSSION	REC/ACTIONS	RESPONSI-BLE PARTY	FOLLOW-UP/DATE
Round Robin (cont.)	Module 7 on Case Management (Accountability) started yesterday and is to be completed by 2/6/13. She hopes to continue participation in meetings here and in Region 4. **Prince William:** Prince William is waiting for more information regarding the healthcare act and their budget.			

Adjournment: The meeting was adjourned at 12:00 p.m. The next meeting will be on November 30, 2012, at 9:00 a.m. at Chantilly, Suite 200 Multipurpose Room.

Items for next meeting:

Julie M. Parkhurst	__12/14/12_____	Pam Hall	____12/14/12_____
Recorder	**Date**	**Chair**	**Date**