

REGIONAL MANAGEMENT GROUP MEETING

Date: June 28, 2013

Time: 9:00 a.m.

Attendees: Tom Geib, Jim Newton, Mark Diorio, George Braunstein, Mike Gilmore, Joe Wilson, Cindy Koshatka, Lyanne Trumbull, Tom Young

Guests: Judith Korf, Bob Anthony, Jane Anthony, John Pezzoli, Jeff Aaron, Victor Mealy, Donna McHugh, Lisa Madrin, Margaret Graham, Heidi Dix, Phillip Caldwell, Candace Butler, Joanna Barnes, Jackie Turner, Jean Hartman.

Absent: Cindy Kemp

Recorder: Julie Parkhurst

Call to Order: T. Geib called the meeting to order at 9:00 a.m. NVCC and hospital recert MOAs were given to RMG for signatures.

Announcements: None.

Notes: Notes from May 24, 2013 meeting were approved and signed.

Handouts: Agenda, RMG Meeting Notes (May 24, 2013), Regional Utilization Management Report, FY13 HPR II Regional Funds Budget Status, LIPOS Budget Projections, NVTC Aggregate Data June 2013, June 28 RMG Meeting Implementation Updates, Congregate Living handout, CCCA Admission Legal Status Report FY13.

TOPIC	DISCUSSION	REC/ACTIONS	RESPON- SIBLE PARTY	FOLLOW- UP DATE
CCCA	Jeff Aaron was introduced as the new director at CCCA. Handouts regarding HPR II's usage of CCCA were distributed to the group and discussed.			
Updates	<p>RDAP</p> <ul style="list-style-type: none"> • Central Office will review applications for the new RDAP funds to ensure money is going to the right places. Proposals will be reviewed in August 2013. They are not first come first serve. A house is not out of the question but the State will not wait for a region to find property, talk to neighbors, etc. It is preferable to find a vendor who is ready to go. The LOS, barriers and the likelihood of client success will be given priority. • The OIG report will be out soon and may be critical. Funding will have more scrutiny • The average LOS at NVMHI is 15-19 days. Housing is needed to assist with keeping people out of hospitals. 	Proposals are due by 7/31/13. A work group will be put together with C. Koshatka's participation.	NVRPO	

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<p>Updates (cont)</p>	<p>Infrastructure is needed, and not just through DAP funding.</p> <ul style="list-style-type: none"> The Region is being empowered to review DAP usage at all of the CSBs in their region. Questions exist regarding regional reporting being redundant with other reporting processes <p><u>Children's Crisis Proposal</u></p> <ul style="list-style-type: none"> Arlington CSB is the lead CSB for this regional program. The planning team is exploring the possibility of contracting it out; qualified vendors are being sought. <p><u>SOC</u></p> <ul style="list-style-type: none"> Prince William CSB is working on getting a SAMHSA grant for SOC and get CPMT on board. Loudoun CSB is moving ahead and not waiting for the grant. They will implement SOC within the CSA system and are working to develop a family support organization for family services. Trained peer support will be given to caregivers. Mini grants are coming out in the Fall for local entities for crisis plan support, etc. for families. The program will be utilizing evidence-based practices. Loudoun CSB requested \$75k from the Region in May and was tabled due to a lack of information. The program just achieved its individual 501©3 status. <p><u>Wounded Warrior</u></p> <ul style="list-style-type: none"> Fairfax will be the fiscal agent for this project and the regional office will manage the contract but a willing vendor would need to provide the services. 	<p>Keep Dr. Aaron (CCCA) informed about this project. Obtain estimates about time line</p> <p>Add to July agenda.</p> <p>Bring funding request to RMG when ready</p> <p>Follow-up from J. Thur as needed</p>	<p>C. Kemp</p> <p>J. Wilson</p> <p>G. Braunstein</p>	
<p>ID Planning</p>	<p><u>NVTC Data</u></p> <ul style="list-style-type: none"> Congregate living data were reviewed. M. Diorio gave an overview of the NVTC aggregate data and needs of clients. All clients at NVTC have an AR or guardian. 11 people are scheduled for discharge in July 2013. <p><u>START Updates</u></p> <ul style="list-style-type: none"> \$2 million in funding was given to START programs for FY14. START has gaps in services and implementation problems in some regions. Child crisis is still under discussion. 	<p>Service gaps are being addressed. Target dates for child crisis will</p>	<p>B. Rollins</p> <p>H. Dix</p>	<p>Ongoing</p> <p>1st week of</p>

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ID Planning (cont)	<p>housing successfully for a long period of time will not the enhanced level.</p> <ul style="list-style-type: none"> • Work groups are taking place. Currently there is no Northern Virginia participation. <p><u>Settlement Agreement Executive Advisor</u></p> <ul style="list-style-type: none"> • The Office of Settlement Agreement Executive Advisor was established on 6/14/13. Goals include improved communication and coordination. <p><u>NVTC Discharge planning process</u></p> <ul style="list-style-type: none"> • A 12 week process for discharge planning is place. Meeting dates have been scheduled for each person. <p><u>Respite</u></p> <ul style="list-style-type: none"> • NVTC is no longer providing respite for families. • Hartwood is doing them and emergency respites will be considered. Arlington purchased one bed from Fairfax at Hartwood in Springfield and will share with other jurisdictions as it is not always full. 	<p>Explore Northern Virginia participation in 18 work groups.</p> <p>DBHDS is hiring nationally for an Assistant Commissioner, DS.</p>	<p>H. Dix</p>	
Budget	<p><u>Regional Budget Overview</u></p> <ul style="list-style-type: none"> • T. Geib said their SA jail-based project survived. Four new ID case managers have been approved for hiring. Over 5 years, CM staff has been increased by ~20. PW obtained two ES staff via reallocation of funds in the budget. • Loudoun is OK with their budget. They are hiring for a Medical Director (.8). Medical Directors meet quarterly. • Fairfax's budget is stable and they are working on internal infrastructure. It is hoped that Woodburn Place will be staffed so that all 16 beds can be utilized in the near future. • Arlington's FY14 budget is tight and FY15 is even tighter. Funding was given for ID school graduates this year and an ID case manager is being advertised. • LIPOS ended the year without a deficit. • NVMHI returned \$89k. • CRT closed and returned \$81k. • \$400k+ was given to NVRPO from PW unused CSU funds. <p><u>Cardinal House</u></p> <ul style="list-style-type: none"> • PW has a contract with Cardinal House. They requested a 2% increase which is still being negotiated. • Arlington is not giving any increases. 			

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Data	<p>LIPOS: 56 admissions in 5/13; average per month for FY12 was 41; average per month for FY13 is 47. Average LOS = 5.1 days; FY12 was 5.4 days. Most admissions went to Mt. Vernon Hospital. 17 PHP admissions YTD. 28 consumers stayed longer than 12 days. 24 Youth LIPOS admissions YTD.</p> <p>NVMHI/WSH: 65 admissions in 5/13. 23% TDOs YTD; 23% TDOs in FY12. 18% were insured for 5/13; 22% for FY12. 30 day re-admission rate = 11%. 95% occupancy in 5/13. 23 people on the EBL. 1 ID admission for 5/13. 43% had a SA diagnosis. WSH had 17 admissions.</p> <p>TDOs: 222 commitment hearings were held in 5/13; FY13 monthly average = 203. FY12 monthly average = 192. 34 clients went out of region in 5/13.</p> <p>Crisis Care: 74 admissions in 5/13; 75% diversion, 23% step-down, 2% NGRI/TDO/CMA YTD. 90% occupancy YTD. 42% had a SA diagnosis; 3 admissions had an ID diagnosis in 5/13.</p>			
Round Robin	<p>J. Newton: The forensic unit is opening in July 2013. They will operate with 123 beds for FY14. \$700k was received but \$800k was lost.</p> <p>M. Diorio: A meeting took place with ServiceSource. M. Diorio will attend discharge meetings. NVTC was cut \$700k for FY14. A new dental externship was obtained with a grant. Tours of homes are taking place.</p> <p>G. Braunstein: Families want hospitals to provide more information about community resources upon discharge. \$2.2 million was earmarked for infant programs. A regional initiative to prevent violent behavior among youth and expand crisis responses is pending. This two year project will address both ADS and MH issues. \$1.4 million was earmarked for an adult MH drop off center that will have medical detox and peer recovery services. It is hoped some localities will do a pilot. Nursing is being requested in each CSB specifically for ID clients. No. Va. is requesting \$1.5 million in FY15 and \$3 million in FY16 for ID/DD to support necessary rate increases.</p> <p>T. Geib: PW CSB is working on discharge issues with hospitals. Private sector options are limited in Prince William. CSB has to set priorities for psychiatric services: NVMHI and</p>	<p>Arrange regional meeting with advocates, hospitals</p> <p>Write budget amendment</p> <p>Creating letter for hospitals</p>	<p>C. Koshatka/G. Braunstein</p> <p>G. Braunstein</p> <p>T. Geib</p>	

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Round Robin (cont)	LIPOS discharges are high priority. R. Romano's last day with PW CSB is 7/31/13 due to her retirement.			

Adjournment: The meeting was adjourned at 12:00 p.m. The next meeting will be on July 26, 2013, at 9:00 a.m. in the Suite 200 Multipurpose room in Chantilly.

Items for next meeting: Loudoun Family Support Program request.

Julie M. Parkhurst

Recorder

7/26/13

Date

Tom York

Chair

7/26/13

Date