

REGIONAL MANAGEMENT GROUP MEETING

Date: November 17, 2017

Time: 9:00 a.m.

Attendees: Tisha Deeghan (FFC-CSB), Margaret Graham (Loudoun CSB), Jean Post (NVRPO), Lyanne Trumbull (NVRPO), Kathleen Culbertson (NVRPO), Deborah Warren (Arlington CSB), Ruth Ann Bates (DBHDS), Jackie Turner (PW CSB), John Gyampoh (NVRPO Intern), Max Harrison (Loudoun CSB), Phil Caldwell (Alexandria CSB), Heather Norton (DBHDS), Kevin Laffin (FFC-CSB), Judith Korf (NVTC Alum), La Voyce Reid (Arlington CSB), Brandie Williams (Rap Area CSB), Jamie Elzie (DBHDS), Joe Wickens (Rap Area CSB), Daryl Washington (FFC-CSB), Beth Mack (Loudoun CSB), Victor Mealy (FFC-CSB), Shanise Allen (FFC-CSB).

Absent: Alan Wooten (PW CSB), Ollie Russell (Arlington CSB), Carol Layer (Alexandria CSB), Amy Smiley (NVMHI)

Recorder: Julie Parkhurst (NVRPO)

Call to Order: Tisha Deeghan (FFC-CSB) called the meeting to order at 9:00 a.m. The group was welcomed and introductions were made.

Notes: Notes from the October 27, 2017 meeting were approved.

Handouts: Agenda, RMG Meeting Notes (October 27, 2017), Regional Utilization Management Report, DBHDS Questions, RUG DD Summary Pages for 1st Quarter, Regional Budget.

TOPIC	DISCUSSION	REC/ACTIONS	RESPON-SIBLE PARTY	F/U DATE
FY18 Q1 Northern Region DS UM Report	<ul style="list-style-type: none"> The FY18 Q1 Northern Region DS UM Report was reviewed and discussed. REACH Law enforcement training is provided for CIT, jails, airport police, etc. DBHDS in partnership with Niagara University is developing trainings to strengthen disability awareness. A one-day overview is planned in areas of dementia, ID, autism and some MH. Trainings are designed to enhance existing trainings, not to replace them. Outcome measures have not yet been created. A train the trainer model will be developed for law enforcement as well. 			
Discharge Planning from State Facility for DS Individuals	<ul style="list-style-type: none"> Lead within each CSB for discharge coordination from State facilities for DD individuals is not consistently defined across CSB. The region planned to have the discharge planner be the key contact; however, DBHDS says the discharge protocol requires the lead be person most knowledgeable of resources available to the client. Region 2 was asked to bring this back to the DD Directors meeting and to consider developing a rotating assignment among the Directors or Managers of DD services to represent these individuals at the Census management and team meetings. 	Follow up with NVMHI	R. Bates	

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Discharge Planning from State Facility for DS Individuals (cont.)	<ul style="list-style-type: none"> Treatment team meetings are scheduled at NVMHI and ample notice is not always given. The DD lead can call in. One goal of the DD Director or Manager's participation in the census management meeting is to provide information and education to clinicians regarding discharge of DD clients and available community resources. D. Washington noted that cross-training will be necessary in the future and the expectation needs to be set now. Parallels were drawn between the linkage of MH and SUD over the past few years and new linkage needs between BH and DD. REACH has a hospital liaison that attends census management and treatment team meetings while REACH staff are in the field with clients. The regional ID short-term clinic consists of one doctor and one nurse which results in limited capacity. A part-time psychiatrist has been requested to expand capacity. 	Discuss further at next DD Focus meeting	RMG	
Process and Questions Asked by WSAC Related to Award of Waiver Slots	<ul style="list-style-type: none"> DBHDS was asked to address waiver slot allocation as it is unclear why some very vulnerable clients are not receiving slots while others with less intensive needs are. <ul style="list-style-type: none"> WSAC members are the decision makers for waiver slot awards and usually do not have sufficient information regarding need. There are not enough slots to meet current need It was noted by DBHDS that some of the write-ups of clients from the CSBs that the WSAC utilize to make slot allocations do not adequately present the client's level of need and result in the above noted service decisions. CSBs were encouraged to have Managers or Directors review these documents before they are submitted to the WSAC for consideration. P. Caldwell suggested an audit of WaMS as information in WaMS and information in CSB paperwork does not always match. 	Submit examples to DBHDS.	CSB to DBHDS	
Community Living Waiver restrictions Related to Other Waivers	<ul style="list-style-type: none"> If the client's level of functioning changes significantly and waiver slot is surrendered, problems may arise due to the long waiver wait list. The individual should only accept a waiver that meets their needs at the time of acceptance and consider how long it will sustain the client and family. 			
Defining Emergency as it Related to Slot Allocation	<ul style="list-style-type: none"> For a child, an emergency slot is granted if CPS has substantiated abuse and/or neglect and the child has been removed from the home. For adults, APS must document an abuse and/or neglect founded 			

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	<p>report by them or from corroborating information from other sources. Additionally, no other caregiver is available and there is inherent risk to the individual.</p> <ul style="list-style-type: none"> There is a very limited amount of emergency slots, especially for the Community Living Waiver. 			
Reconciliation Plan for SF and CD services	<ul style="list-style-type: none"> Families can act as service facilitators. It was asked how communication occurs and how the service by family member is monitored. Guardians can be paid for adults but not for children. 	DBHDS will follow up.	H. Norton	
Aging Out of Foster Care and Eligibility for Family and Individual Supports	<ul style="list-style-type: none"> Client may meet priority 1 due to homelessness or need for supports to aid in successful community living. 			
VIDES Completion Standards	<ul style="list-style-type: none"> VIDES need to be in WaMS. It must not be greater than six months old after the client is approved for waiver services. 			
ISP	<ul style="list-style-type: none"> DBHDS will complete a line by line review of requests. If the completed box on the ISP is checked, the plan cannot be updated. CSBs noted that ISPs have disappeared from WaMS and information needs to be re-entered by CSB. In WaMS, ISPs not marked as complete have been marked as discarded, but attachments are there. CSBs noted that they do not have the resources to continue re-entering information. 	<p>Check with Forester regarding the October conversion as this may have an impact.</p> <p>Follow up with Eric.</p>	<p>P. Caldwell</p> <p>H. Norton</p>	
Shelter Discharges and REACH CTH	<ul style="list-style-type: none"> Clients at the REACH CTH cannot discharge to a shelter due to DBHDS standards unless the individual wants to go there, has the capacity to make the decision, and can function in that environment. After an individual is reviewed by the RST process and supports are still not available, the case goes to the Critical Complex Consultation Team (CCCT). There have been little to no referrals over the past year because some crisis money has been used to meet the need for these situations. 			
Integrated Health Support Network	<ul style="list-style-type: none"> It was asked if a client who is ineligible for a waiver would be eligible for the Integrated Health Support network. It was noted that REACH will serve anyone with DD needs regardless of waiver status or eligibility. Two REACH homes (1 child and 1 adult transitional) are under contract in Culpeper and are being built under as new 	Explore and follow up.	H. Norton	

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	construction. There will also be two homes (1 child and 1 adult transitional) in Chesterfield. REACH homes will function as step-up and step-down homes.			
CCC+ and Definition of Roles	<ul style="list-style-type: none"> Care coordination will not replace case management. One MCO said in Loudoun that the family can decline care coordination although care coordination will still be done behind the scenes. One MCO also said that the health risk assessment can be declined. 			
Tracking Service Facilitation Providers	<ul style="list-style-type: none"> It was asked whether DBHDS is tracking service facilitators who are going out of business. There is a need for out of home placements for children. 	A conversation will be had between DBHDS and service facilitators and follow up will be done.	H. Norton	
Budget Report	<ul style="list-style-type: none"> An overview of the budget was given by K. Culbertson. PGH diversion funds which were authorized by DBHDS to be redirected for Region 2 LIPOS have now been recalled to DBHDS. Two new ongoing DAP requests will be going to DBHDS as a BH Funding request to avoid a waitlist. Deaf services funding is not restricted to MH clients. The budget format was praised by DBHDS. 			
UM Report	<ul style="list-style-type: none"> The UM Report was distributed and discussed. Extended LIPOS stays were noted. Dismissals of minors at their hearings are high because after a TDO has been served, many parents elect to sign the child in. NVRPO staff were praised for their impressive reporting and it was asked how this information is being utilized. It was noted that EDs carry the report with them in order to answer questions statewide. 			
Round Robin	<ul style="list-style-type: none"> D. Warren (Arlington CSB) shared that Arlington is studying best practices with clients dually diagnosed with autism and mental health issues. No funding was received by their board; however, they are utilizing other options to assist with creating a model without local tax dollars being used. P. Caldwell (Alexandria CSB) said that the city manager has requested a 2% budget cut. The budget won't be finalized until May. Also, 30-50 affordable housing units are opening for DD clients. P. Caldwell's title has changed to Administrative Operations Officer and he will work to streamline different State initiatives. 			

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Round Robin (cont.)	<ul style="list-style-type: none"> • L. Reid (Arlington CSB) shared that Arlington CSB is studying competitive integrated employment and are looking to expand their program. A successful employment summit was held that they hosted and many ideas were received regarding how to move forward. • H. Norton (DBHDS) reported: <ul style="list-style-type: none"> ◦ DBHDS is working on customized employment opportunities as an initiative with DARS called DIVP. ◦ They are also working with VCU to develop a resource for those with autism/mental health needs. ◦ A stakeholder meeting will be held on 12/6/17 with VACSB, behavioral health and ID, MH, and autism stakeholders. Additional information will be forthcoming. ◦ A free training will be offered regarding diagnosing mental health clients and treatment for those with co-occurring DD. Dr. Fletcher of National Association for the Dually Diagnosed (NADD) will conduct the training. If interested, H. Norton can add people to their list serve. ◦ Employment best practices are also being reviewed and funding has been requested. One time funding will be given for individual stipends when doing internships in the community for adults. DBHDS would like to pilot this in Northern Virginia first. ◦ Funding was received for co-occurring DD/MH training. One will be held at Central Office and one will be held in the community. A webinar was suggested and Fairfax's board auditorium was offered for the training so that it can be taped and aired on their local channel. • R. Bates (DBHDS) shared that her title has changed to Acute Care Consultant and she is overseeing NVMHI and ESH. Jamie Elzie oversees CSH and PGH, Heather Tickle oversees SVMHI, SWVMHI and Catawba and Suzanne Mayo, their supervisor, oversees WSH. • D. Washington (FFC-CSB) – A group is studying the Fairfax's employment and day continuum and considering future goals and options. Forums will be held on Dec. 5 and Dec. 7 to look at psychosocial rehab continuum of care. • J. Post (NVRPO) shared that the December RMG meeting is cancelled and the next one will take place in January in Chantilly. The next I/DD Focus meeting will be held in February at the 	Send out to chart to group.	J. Post	


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	<p>Fairfax County Government Center.</p> <ul style="list-style-type: none">• T. Deeghan (FFC-CSB) said that J. Post will send out a presentation done on taking care of each other as well as her most recent presentation to the BOS on DD Waiver impacts.• J. Turner (PW CSB) noted that they have a Circles of Support event coming up at Hilton High School.			

Adjournment: The meeting was adjourned at 11:30 a.m. The next meeting will be on January 26, 2018, at 9:00 a.m. at Chantilly Suite 240.

Julie M. Parkhurst
Recorder

1/26/18
Date


Chair

1/26/18
Date