

REGIONAL MANAGEMENT GROUP MEETING

Date: October 23, 2020

Time: 9:00 a.m.

Zoom Attendees: Margret Graham (LDN CSB), Daryl Washington (FFX CSB), Deborah Warren (ARL CSB), Liz Wixson (ALX CSB), Lisa Madron (PWC CSB), Betsy Strawderman (PWC CSB), Lisa Snider (Lou CSB), Amy Smiley (NVMHI), Jean Post (NVRPO), Randy Buckland (NVRPO), Robyn Fontaine (NVRPO), Tara Belfast-Hurd (DBHDS), Angelo Wider (VACSB Chari), Judith Korf (Parent)

Liaisons: Claudia Arko (Fairfax), Sarah Taylor (Alexandria), Glyn Loope (Prince William), Sue Rowland (Fairfax), Gwen Kennedy (Loudoun), Pat Carroll (Arlington), Melanie Crowder (Fairfax), James Heo (Fairfax), Nikki Brown (Prince William), Nancy Vincent (Falls Church), Monica Backmon (N.VA Transportation Authority), Elizabeth McCartney (Fairfax)

Recorder: Xiuping Cheung (NVRPO)

Call to Order: Margret Graham (LDN CSB) called the meeting to order at 9:15 a.m. The group was welcomed, and introductions were made.

Handouts: Agenda, R2 Budget Priorities document, Regional Utilization Management Report, Regional Budget

TOPIC	DISCUSSION	REC/ACTIONS	RESPON-SIBLE PARTY	F/U DATE
Introduction	<ul style="list-style-type: none"> M. Graham facilitated introductions and welcomed the group. Minutes from the September meeting were approved. 			
Special Session Discussion/Marcus Alert Bill	<ul style="list-style-type: none"> The group discussed concerns related to the status of special session bills and in particular, the Mental health Awareness Response and Community Understanding Services (MARCUS) Alert bill. The consensus is that there is some overlap between the MARCUS Alert bill and the existing definition of STEP-VA Mobile Crisis and that the General Assembly may view these as a single project and there are evident variations in the model of mobile response and funding. Legislative Liaisons shared that Members of the General Assembly view the MARCUS Alert Bill as an improvement to STEP-VA Mobile Crisis Services. Region 2 has had many conversations with the leadership of VACSB and DBHDS regarding guidance and visions for crisis services It remains unclear whether or not The MARCUS bill is a change in approach from the STEP VA prioritization for crisis services by the General Assembly. Because the Governor's budget is currently under review, the legislative liaisons encouraged the RMG to submit any appropriate budget requests to the department now. The budget coming out of the Special session identifies funding to specific projects, the not the funds distribution, operational prioritization and standards for service levels are under authority of DBHDS. . 			

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R2 Budget Priorities for 2021	<ul style="list-style-type: none"> Region 2 budget priorities for 2021 were shared and reviewed with the group. They are: <ol style="list-style-type: none"> Population size and the uninsured rate should be the significant determining factors in behavioral health funding Restore STEP-VA funding Restore Discharge Assistance funds Restore increased provider rates for services delivered through DD Waiver Legislative liaisons requested further breakdown of sufficiency of STEP-VA funding. 	Regional Office to work with RMG to create further breakdown of sufficiency of funding by each individual step.		
Discharge Planning at NVMHI	<ul style="list-style-type: none"> A. Smiley shared that telehealth discharge planning by CSB staff during COVID increases the workload on NVMHI staff. NVMHI staff are completing approximately 36 hours of discharge planning (completing referrals, applications, coordinating/facilitating meetings, sitting with during zoom meeting, and copying and scanning sections of medical records for housing/service referrals) and 8-11 hours of hearings work per week. D. Washington requested guidance from NVMHI about the existing facility COVID strategies to protect Discharge Planners for consideration as CSBs assess the return to in-person discharge planning or other strategies to address the administrative functions of discharge planning at NVMHI. A. Smiley stated, the discharge planners will be treated as part of the NVMHI staff and that protective measures for staff include: <ul style="list-style-type: none"> Staff will be notified should a COVID exposure and infection occur, and the Health Department will do contact tracking and provide direction. Facility access has been restricted to a single point of entrance, and individuals are screened, and temperatures of staff and facility contractors are checked before entering the building. When contractors/CSBs are entering the facility between shifts, HR will complete the screening and temperature check. The HR office is located at the building entrance. Status signs are posted on each unit. PPE is available, and there is currently an ample supply at NVMHI. Different PPE will be required for different situations/units. Current admission protocols are designed to protect staff from exposure. New patients are only admitted to one of 2 warm 			


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	<p>admission units, and on these units, full PPE is used at all times. New admissions are quarantined on these units for 14 days before transferring to another unit/cold unit. The cold unit has minimal COVID risks and, therefore, only requires minimum PPE.</p> <ul style="list-style-type: none"> ○ Face masks are required throughout the hospital. ○ Should a discharge planner need workspace, they are encouraged to reserve a space in advance of their arrival. <ul style="list-style-type: none"> • A. Smiley clarified that NVMHI never intended to restrict CSB discharge planners from coming into the building to do discharge planning activities. 			
OP Trauma Training	<ul style="list-style-type: none"> • Dr. Jessica Brown is offering 3 evidence-based trauma training programs. J. Post emailed these proposals to the RMG on 10/15/20. The options will be reviewed locally, further discussed regional, and the RMG will determine the next steps. • D. Washington shared that it might be especially beneficial to offer some of these additional training sessions to Adult service clinicians as the GMU EBP Consortium for Adult Practitioners will not start intel Q3 or Q4 of FY21. 			
Multiple Region PSH Consulting	<ul style="list-style-type: none"> • The first meeting with all 5 regions to review Permanent Supportive Housing (PSH) one time funds was constructive. Discussions addressed: issues with landlords who may not understand services of supportive housing, dialogue needed with the housing authority to resolve issues, and the development of an RFP or quote process to engage with a contractor. • There are 3 agreed-upon project components: 1. Advise, and update needs assessment for SMI PSH (last done in 2016); 2. Identification of strategies to support implementing an action plan (consideration for separate plans for urban and rural environments); 3. Support the development of communications strategies (a steering committee with stakeholders is being considered). • The timeline is very tight; the RFP will be posted at the end of November with a response due by mid-January, issuance of contract by Mid-February, and contract start date of March 1. The projected term of the contract is March 1, 2021 – August 15, 2022. 			
Regional Budget and UM Report	<ul style="list-style-type: none"> • R. Fontaine shared the Regional Budget summary with the group. <ol style="list-style-type: none"> 1. RMG requested DBHDS to share information such as DAP transferred out individual's success rate in out of region placements. T. Belfast-Hurd will follow up. 2. RMG requested and the regional office provided an update on LIPOS 			

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	<p style="text-align: center;">budget forecast</p> <ul style="list-style-type: none"> Regional UM report was shared for RMG to review 			
Round Robin	<ul style="list-style-type: none"> D. Washington – FFX started implementing medical clearance at ES for those without known medical complications or considered low risk of a medical complication. Individuals with known or suspected medical complications will continue to have medical clearance secured through a local Emergency Room. A. Wider – Thanked the group for their dedication and teamwork. He is interested in the budget discussion since priority is changing over time. He discussed the value of organocations growing and adapting over time based on changing needs and encouraged optimizing training opportunities for all staff. D. Warren – ARL has developed a new workgroup to look at policing practices. This group is addressing the Marcus Alert bill and homeless outreach, among other related topics. Behavioral Health Division Chief Dr. John Palmieri will be leaving his full-time position in Arlington to join SAMHSA; Nov 11th is his last day. 			

Adjournment: The meeting was adjourned at 11:32 a.m. The next meeting will be on November 19, 2020, at 9:00 a.m.


Recorder

10/23/2020
Date


Chair

10/23/2020
Date