## FAIRFAX-FALLS CHURCH COMMUNITY POLICY AND MANAGEMENT TEAM CPMT Minutes 3-22-19

Attendees: Lesley Abashian, Gloria Addo-Ayensu, MD, Robert Bermingham, Nannette Bowler, Tisha Deeghan (Chair), Kelly Henderson, Michael Lane, Rick Leichtweis, Jane Strong, Nancy Vincent, Daryl Washington.

Absent: Staci Jones Alexander, Katherine Caffrey, Deb Evans, Jessie Georges, Teresa Johnson, Chris Leonard, MaryAnn Panarelli, Rebecca Sharp, and Terri Williams.

SOC Attendees: Jim Gillespie, Desiree Gordon, Peter Steinberg, and Jesse Ellis.

CSA Management Team: Cindy Barker, Terri Byer, Jessica Jackson, Barbara Martinez, Kamonya Omatete, Matt Thompson.

Stakeholders and CSA Program Staff Present: Janet Bessmer, Chris Metzbower, Patricia Arriaza, Kristina Kallini, Lisa Morton, Kim Jensen, Hilda Calvo, Sarah Young

MINUTES: A motion was made by Nannette Bowler and seconded by Bob Bermingham to approve the minutes of the February 22, 2019 meeting. The motion was approved by the committee of the whole.

ITEMS:

Item P-1: Christianne Esposito-Smythers, Ph.D., George Mason University gave a report on the Evidence-Based Workgroup and Training Consortium. What is an "evidence-based" intervention? Tested in research studies, Follows the "medical model", List grows as interventions are tested. Parental "informed" consent: Testing interventions in research allows for true informed consent, Medical field presented with options, risk, success rates, and Allows parents to make an informed "choice". and avoid interventions that may have negative outcomes. What is the Core Competency Training? Trans-Diagnostic CBT/DBT Treatment Program for adolescents and their families, Teach core CBT/DBT skills to address skill deficits that underlie multiple mental health difficulties. Addresses multiple comorbid conditions simultaneously, Negates need for multiple "boutique" trainings, Target Areas, Suicidal Behavior, Non-Suicidal Self-Injury, Depression, Anxiety, Opposition Defiant Disorder, Conduct Disorder, Trauma, Substance Abuse. We need to develop a system to ensure that clinicians have the support that they need to use evidencedbased practices: Develop implementation plans that are specific to each public agency/private provider that has participated in the training consortium. Develop plans with public agencies and private providers on how to best collect data from youth and parents (their experience and youth outcomes), and Explore means to translate material into Spanish.

HMF Presentation Item:

## CSA Contracts:

Item C-Ia: Southstone, South Boston. VA from DFS FC&A was withdrawn.

Item C-1 b: A motion was made by Jane Strong and seconded by Rick Leichtweis to approve Southstone, South Boston, VA from DFS FC&A. The motion was approved by the committee of the whole.

Item C-Ic: A motion was made by Bob Bermingham and seconded by Michael Lane to approve Youth Villages, Bartlett, TN from DFS FC&A. The motion was approved by the committee of the whole.

Item C-1d: A motion was made by Bob Bermingham and seconded by Gloria Addo-Ayensu to approve New Hope, South Carolina from JDRDC. The motion was approved by the committee with 1 Opposed.

## CSA Information Items:

Item 1-1: Yin Jia gave the CSA Budget Report. Pooled expenditures through January 2019 equal \$14.2M for 909 youth. This amount is a decrease from January last year of approximately \$1.6M, or 9.98%. Pooled expenditures through January 2018 equal \$15.8M for 888 youth. The number of youth served is unduplicated within individual categories, but not across categories.

## HMF Information Items:

Item 1-5: Peter Steinberg and Jessica Jackson gave a report on the Behavioral Health Policy Statement and Transition Readiness Checklist and Plan. All providers will help the youth create a transition plan. This plan will include a transition readiness assessment as well as a plan on how the youth will meet both their physical and behavioral health needs. Plans will include a section on the youth's plan to obtain employment or get connected to a meaningful daytime activity. All plans will have a section on the youth having a safe, affordable place to live. Providers will spend the time with the youth and their family to assist them in setting up their behavioral health care priorities and to support them in becoming more independent. Providers will work closely with the youth and their families regarding moving their care to a provider who works with adults before the youth ages out of youth services. Providers will assist with this process by helping the youth identify a provider, sending medical records and communicating with the new provider.

- NOVACO Private Provider Items: N/A
- CPMT Parent Representative Items: N/A

• Cities of Fairfax and Falls Church Items: Nancy Vincent stated that a new group home was holding an open house on 4-23-19.

Public Comment: N/A

A motion was made by Bob Bermingham and seconded by Michael Lane to Adjourn at 2:45pm. The motion was approved by the committee of the whole.