DAUPHIN COUNTY MH/ID PROGRAM BOARD
MEETING MINUTES AND PLANNER

MEETING DATE: January 29, 2015

MEETING PLACE: CMU, 1100 South Cameron Street, Harrisburg

ATTENDANCE:
Board Members: Sherri Smith, Carol Oman, Bonnie Rice

Staff: Dan Eisenhauer, Paul Geffert, Rose Schultz, Cheryl Gundrum, Adam Wiener, Bobbi Segin, Renee Robison

Guests: Leah Hannah, PA Counseling Services, Ron Moro, Elwyn CRR

MEETING GOALS AND OBJECTIVES:

- Education Topic
- Administrator’s Report
- Committee Reports
- Fiscal Report
- Community Input

DECISIONS:

- No Approval of the December 4, 2014, Advisory Board Minutes due to not having a quorum

ACTION TO BE TAKEN:

- None at this time
NEXT MEETING DATE:
March 26, 2015, at CMU 1100 South Cameron Street, Harrisburg. The agenda will include a presentation, as well as the Administrator’s Report and Committee Reports.

Welcome and Introductions
Sherri Smith called the meeting to order. Sherri welcomed everyone in attendance, and introductions followed.

Approval of December 4, 2014 Board Meeting Minutes
At this time, there was not a quorum. The approval of the minutes will be at the next meeting.

Administrator’s Report
The following report summarizes major MH/ID program concerns, updates and initiatives over the past two months. Staff is working on provider contracts for FY 15-16. MH-ID-EI staff participated in a facilitated session on January 9th to focus our department on how we can make improvements in leadership and processes for planning for people with complex needs that cross MH, ID, and EI systems. More details will follow as we evaluate the written product from the consultant who facilitated the meeting.

Statewide/Department of Human Services Updates
• Governor Wolf has named Theodore (Ted) Dallas as the Secretary of the Department of Human Services. Mr. Dallas most recently held a similar position for the state of Maryland, and had worked for the Department of Public Welfare in various roles including the Deputy Secretary of Administration during the Rendell Administration. There are no announcements regarding the Deputy Secretaries for OMHSAS or ODP yet.
• Healthy PA was implemented effective January 1, 2015. We found several hundred Dauphin County individuals, and over 1,000 HealthChoices members from our five - County HealthChoices collaborative whom we believe improperly had their HealthChoices coverage terminated and who were then assigned to a Medicaid Private Coverage Option (PCO) insurance plan. As of 1/1/15, most PCO plans did not, and still do not have a behavioral health provider network in place, which means people needing services have an “insurance plan” but have no ability to access behavioral health services using their plan.
• We have alerted officials at OMHSAS about our concerns including identifying all the individuals who were negatively impacted by the termination of benefits, and we are working with our County Assistance Office to review individuals who we are requesting be transferred back to HealthChoices. Consumers have gone to appointments and found out at that time they did not have coverage. Apparently the State has to do a manual process to fix this problem.
• Our office wishes to thank Liz Pliszka for her responsiveness and her assistance on behalf of our consumers, and for her assistance in helping us to understand how best to resolve the eligibility issues we can!
Crisis Intervention

- Crisis currently has several vacancies including third shift full-time and two part-time positions. In addition, we are in the hiring process to replace Martin Yespy who retired 12/30/15 after 39 years of service to the program.
- Again, we thank our Crisis staff who is doing an excellent job of managing a very busy month and half of increased volume and demand for service while short staffed, and we thank our MH staff who is helping to fill in as supervisors during the day and on call.

MH Program

- The MH Program notified T.W. Ponessa and PA Counseling that both agencies will be funded to operate a dual MH and D&A co-occurring therapy program using HealthChoices Re-investment funds.
- Referrals have been made to Community Services Group for the new Mobile MH/ID Behavioral Intervention Service also funded with HealthChoices Re-investment funding.
- We continue to develop our plan for the Bridge Subsidy rental assistance program in collaboration with the Housing Authority of the County of Dauphin.

ID Program

- Project SEARCH is scheduled to launch April 6, 2015. Progress includes consumer interviews, great responses and planning from Dauphin County departments that will host interns. Diversity Sensitivity Trainings are scheduled for county staff in March, and we are strengthening our partnerships with OVR and CMU and Goodwill.
- Chapter 51 Regulations – ODP is organizing a workgroup across stakeholders to examine regulations that were written without clarity, and some elements that do not appear to be relevant or workable. Korah Abraham, Kathy Gingerich, and Shirley Keith Knox were appointed to the committee. Work on the review of regulations will continue through the spring.
- Independent Living Technology is a partnership with UCP to conduct a small pilot, and with Cumberland / Perry, serving about 10 folks. The group met with ODP to discuss how to expand the pilot and work out how waiver funding can be used to expand the use of independent living technology (sensors, medication dispensers, voice activation, etc.)
- March 9th, 2015 – cross system Transition Fair at HACC. In the past, the event was focused on ID consumers. The target audience and the scope continue to expand to include local colleges as partners and to expand the options for what folks consider as they plan for their post-secondary life. HACC is major contributor to this event.
- Inclusion Task Force – Shirley was appointed to serve on HACC’s inclusion task force that just was formed as a result of HACC receiving a grant from the Disability Planning Council. The purpose is to assure supports are available for folks with ID who are attending/plan to attend HACC.
- CMS – issued guidance for non-residential programs. The guidance clarifies the direction for many of our day providers. Employment and integration need to become the main focus of our non-residential programs, and not a minor part of what they do. County beginning to gear up to support, provide technical assistance and direction.
- CMS Waiver Amendments and Futures Planning documents are out for public comment at this time
Early Intervention Program

- Our EI staff is part of the steering committee for Holistic Family Supports, an initiative to build supports around parents with substance abuse issues and involved in CYS to improve outcomes for themselves and their children.
- EI is in the midst of a revised “verification process” or monitoring of the program by the state OCDEL. It requires additional self-assessments and validations by OCDEL of our program.


Highlights from the PowerPoint were:

Executive Summary
- The MH/ID program continued to adjust in FY 13-14 to reduced funding that began in FY 12-13
- MH, EI, and Crisis served fewer people for a second year, ID increased number of people served
- MH/ID staff re-adjusted some funding within MH and ID to create new services within existing allocations
- Continue participation in the Human Services Block Grant, which allowed us to benefit with increased funds from the Block Grant to support MH/ID and HAP

ID Program Challenges:
- Limited waiver opportunities to serve new persons in need of ID services
- Fee schedule rates set by ODP continue to restrict service opportunities as providers bear increased financial risk for expanding or startup of new services
- System changes driven by external requirements from CMS, and challenges to support individuals and families in natural settings and system migration to community integration

ID Program Successes
- Services were offered to all 22 eligible students who graduation in June 2014
- We consistently operate all waiver programs at maximum capacity
- Over 87 new individuals needing emergency services received waiver-funded services
- The increase of persons served is primarily an indicator of turnover, with some limited increase in waiver capacity
- Five new providers were added to the array of providers within the county creating additional options for residential services, day services, and home and community habilitation services

Employment 1st Initiative
- Focus on strengthening partnerships with local school districts. Transition-age students targeted to receive information about preparing for adult life, work, and the ID system
- Project Search planning in FY 13-14, implementation and engaging partners with County as intern site, planned for FY 14-15; and planning for second site in FY 15-16
- Staff conducted outreach to small business in the Dauphin County community to inform them of the benefits and opportunities to employ folks with ID
EI Program Challenges and Successes

- Referral numbers higher than last fiscal year
- Re-referrals to EI are high; difficulty engaging some at-risk families, about 25% of children referred were closed prior to the initial evaluation. Some were re-referred and completed the eligibility process later
- EI eligibility – the number of active children in the program dropped slightly from last fiscal year due to revised eligibility guidelines from OCDEL, and our EI program moved to an independent evaluation process for initial and annual eligibility evaluations
- Confidence that all eligible children are receiving services. 60% of children evaluated were determined to be eligible for EI services
- EI training on best practices continued to focus on improving family coaching skills for EI professionals
- Parents and EI providers received funding assistance to participate in conferences, seminars and networking events related to Early Intervention

MH Program Challenges

Initiatives for Adults:

- Reduce length of stay in adult residential services and improve recovery oriented discharge outcomes
- Divert adults from long-term inpatient care at Danville State Hospital using available capacity in residential services, the Assertive Community Treatment team, and the Extended Acute Care program
- Monitor and investigate unusual incident and complaints including deaths and explore system changes to improve quality of care and wellness
- Engage persons using mental health services in planning and evaluation activities as system moves forward as a recovery-oriented system

Initiatives for Children and Families

- Reduce the use of residential treatment services for children, teens, and families due to the lack of effectiveness and not being community-based
- Implement changes to the role of county staff in relationship to cross-system interagency teams and Children’s MH case management
- Support the design and implementation of evidenced-based and promising practices in the children’s mental health system

Adult MH Program Successes

- 281 people served in adult residential services other than the crisis CRR programs. 83 people of 29.5% served in residential services were discharged
- 54.2% of discharges from residential services during FY 13-14 were positive and recovery-oriented

Children’s MH Program Successes

Reduce use of RTF

- The RTF census in 2012-2013 was 55 children and teens. In FY 13-14, the number of persons in residential treatment was 46
• In FY 13-14, 53 child-specific meetings with County and CMU staff resulted in better preparation so that a community-based alternative was either approved or pursued for 30 children and their families

Use of Evidenced-Based Services
• 54 youth discharged from traditional MST services with 38 or 70% successful discharges. 8 youth served by MST-PSB this past fiscal year, 7 were discharged successfully
• The Incredible Years demonstrated improvements in children’s aggression, disruptive behavior, concentration and social/emotional competence. Completion rates for the program in Harrisburg were 67% for children and 40% for parents and in Middletown Area, completion rates were 80% for children and 60% for parents

Crisis Intervention Program
• The Crisis program served 3,190 persons in FY 13-14 and recorded 4,164 contacts, a decrease over the previous year
• 44% of all contacts were for persons who were first-time consumers of crisis services, an increase over the previous year
• 1,786 or 43% of all contacts resulted in commitments because of level of risk. The number of actual hospitalizations was 1732 because some persons under commitment were diverted to other dispositions
• Hospital emergency departments remain the primary referral source for the CI program, resulting in 2,154 ED referrals in FY 13-14
• CI program staff provided a mental health training course series for every member of the Lower Paxton Police Dept. This training was required to maintain the department’s accreditation

The question was asked if the EI Program is seeing more funding available for more in depth services for students, i.e. kids with autism – Dan stated that he doesn’t think there is a good strategy for autistic kids because they go from EI, to the Intermediate Unit, then to the school system. The adult “autism” department does not look at people until they are 21 so there is no unified strategy. Cheryl Gundrum stated that they try to identify kids as early as possible.

Committee Reports
Adult Mental Health Committee – Sherri Smith -- The minutes from the December 15, 2014, meeting were distributed.

Children’s Mental Health Committee – This committee has not met since the last MH/ID Advisory Board meeting.

Intellectual Disabilities Committee – This committee has not met since the last MH/ID Advisory Board meeting.

Nominating Committee – Judy Vercher – Still looking to fill the Pediatrician/Psychologist vacancy on the MH/ID Advisory Board and now recruiting to replace Korah Abraham and Malorie Sirb. If anyone has any recommendations, please contact Dan Eisenhauer or Judy. It
was noted that the applicants have to live in Dauphin County and their participation on the Board should be conflict-free.

**Executive Committee** – This committee has not met.

**Fiscal Report**
Paul Geffert distributed the Budget vs. Expenses report by cost center. This report reflects half of the bills that have been submitted already. Paul stated that the budget expenses are on track for the year.

**Community Input and Other Comments**
None at this time.

**Adjournment**
There were no additional comments or announcements, and the meeting was adjourned. The next meeting will be held March 26, 2015, at CMU, 1100 South Cameron Street, Harrisburg.