

THE DURHAM CENTER
Managing Behavioral Health & Disability Services

AREA BOARD MEETING

Thursday, October 7, 2010
4:00pm Regular Session

MINUTES

PLACE: 501 Willard St. Durham, NC
Conference Room 100

MEMBERS PRESENT: Earl Phillips, Chairman
John Barry
Dr. Nancy Henley
Betsy MacMichael
George Quick
Amelia Thorpe
Lascel Webley, Jr.
Doug Wright
Dr. John G. Giragos, Jr.

MEMBERS EXCUSED: Monique Holsey Hyman, Rev. Michael D. Page

MEMBERS ABSENT:

GUESTS PRESENT:

STAFF PRESENT: Ellen Holliman, Susan Knox, Rob Robinson, Doug Fuller, Dr. Khalil Tanas, Tina Howard, Bill Smith, Tonya Van Deinse, Stephanie Williams, Jenna Hamill, Debra Duncan, Terry Ames, Isela Gutierrez, Jeanette Williams, Denene Hinton

OTHERS PRESENT: Eric S. Fox, DMH/DD/SAS, Thadeus Koontz, M.D., PhD

1. CALL TO ORDER: Chairman Earl Phillips called the meeting to order at 4:10pm.

2. ANNOUNCEMENTS:

Chairman Phillips asked for a moment of silence for Cameron Smith, Ellen Holliman's father, who has been in the hospital and recently underwent surgery.

Chairman Phillips announced that the two new Board members, Amir Berhannu and Phillip Golden were been appointed. He administered the oath of office, which was then notarized. He congratulated both on joining the Area Board.

Chairman Phillips recognized Sean Schreiber and Jeanette Williams. He announced that they, with their staffs, were key in the transition to Medicaid UR and he wanted to express to them the Board's appreciation for all the work they have done. Ellen Holliman thanked the other staff members who have stepped up to support the effort.

Chairman Phillips asked Ann Oshel to come forward and tell the board about the Bureau of Justice Assistance grant. The Durham Center, in partnership with the Durham Police Department and the Criminal Justice Resource Center has been awarded a grant for the third consecutive year. This grant is a two year grant for 312,500. The Police Department is the fiscal agent for the grant. The grant takes the previous work they have done further and will support embedding mental health workers in to the Police Department seven days a week as part of the Mental Health Outreach program. The grant will focus on some of the follow-up for CIT, Crisis Interventions Teams, to ensure that the people who first responders encounter get connected to the services they need.

Chairman Phillips directed Board Members to the Assurance of Confidentiality Statements and materials in the Board notebooks and asked Board Members to read and sign the materials and return to Susan Knox.

He also directed them to the NC Council Conference brochure in the notebooks. Doug Wright suggested that anyone wishing to attend should send in their forms early to ensure they get registered before registration is closed.

Chairman Phillips recognized Stephanie Williams and other staff that took part in the Operation Homeless Connect and Veterans Stand-down earlier in the day.

3. AGENDA ADJUSTMENTS

Chairman Phillips asked if there were any agenda adjustments. He asked that the CFAC Relational Agreement be added to the agenda to allow the Board to vote on approval of the agreement.

3a. CFAC RELATIONAL AGREEMENT

Chairman Phillips discussed the revised agreement that was reviewed by the Executive Committee. The Executive Committee felt that the revisions were positive and asked the Board to move forward on approval of the Agreement. George Quick added that the Executive Committee went through the agreement very thoroughly and they were satisfied with it.

George Quick moved to approve the Relational Agreement with the Consumer and Family Advocacy Committee (CFAC). **Seconded by John Barry.** **Motion approved unanimously.**

4. FINANCE COMMITTEE

George Quick reported that the Finance committee met today at 3pm. The first quarter of FY2011 was just completed. There was concern that the systems are ready to move forward to provide services and meet budget for FY2011. Indications are that it is moving in that direction and the committee is pleased.

There is one item the committee is bringing to the Board for approval. The US Department of Housing and Urban Development awarded The Durham Center a grant to provide housing and improve living conditions for men, women, and children. The two year grant totals \$306,717. The Finance committee recommends that the Board approve the increase of \$306,717 to the budget to allow spending of those dollars.

George Quick moved approve an increase in The Durham Center budget by \$306,717. **Seconded by Doug Wright.**

Chairman Phillips asked if there was any discussion on the motion. The Board discussed the distribution of dollars. All monies are leasing and other service dollars.

Motion approved unanimously.

5. BOARD TRAINING

The Board completed the “Accountability for LME Governing Boards” module from the UNC School of Government.

Information covered included:

Who is Accountable to whom and for what
What is accountability
Accountability to
Accountability for
Linking Accountability
Make your Goals
How do we hold ourselves accountable
Why conduct regular evaluations
Why do we resist
Evaluating the Director

The Board discussed the evaluations that the Board conducted for Ms. Holliman earlier this year. All Board members provided input.

Ms. Holliman shared with the new Board members that the Board Public Relations Committee was formed following the Board self-assessment that was completed in 2009. The Board will be conducting another self-assessment in the near future.

Chairman Phillips asked that Board members retain a copy of the training presentation for future reference.

6. COMMITTEE REPORTS

- A. Quality Management Committee Report
- B. Human Rights Committee Report
- C. Consumer and Family Advisory Committee Report
- D. Executive Committee Report
- E. Public Relations Committee Report

Chairman Phillips asked if there any questions about or discussion on the committee reports.

Amelia Thorpe reported that two staff members made a presentation at the Human Rights Committee meeting advising them of the work that is being done at Durham Center Access around treatment for those with substance abuse problems. She was pleased that the work gives documentable proof of the best practices that are being implemented.

7. CONSENT AGENDA

A. September 2, 2010 Area Board Regular Meeting Minutes

Lascel Webley, Jr. moved to approve the Consent Agenda. **Seconded by Dr. Nancy Henley.** Motion approved unanimously.

8. PUBLIC COMMENT

There were no public comments.

9. AREA BOARD REPORT

Chairman Phillips recognized Tina Howard to present Highlights of the FY 2010 Year End Dashboard. Ms. Howard highlighted the following data items that staff thought would be of particular interest to the Board.

On Pg. 5-Youth in non-family settings. Durham has one of the lowest rates in the state, 1.5%. Mr. Quick inquired about the rates of out of home placement rates across the state. The rate generally ranges from about 2%-4%. The state average is 2%, which has dropped because of funding and stricter criteria for Level II and III group homes.

Pg 10-The rate of admissions to Emergency Departments is one of the lowest in the state. The rate for the third quarter was 74.6. The state rate was 149. There has been a 71% decrease in state hospital admissions from FY2007 to FY2010.

Pg 11 Follow-up of individuals discharged from the state hospitals or ADATC unit. Durham was at a low, around 27% were receiving care in the community 7 days after discharge from the state hospital. We are still below the state average. That has increased to 59%. The state goal is 70% and The Durham is still working on strategies to improve.

ADATC discharges had a low of 20% of individuals that were receiving care in the community 7 days after discharge. Durham reached a high of 67% last year at this time. Currently we are around 40-50%. They are looking for ways to improve it.

Ms. Holliman added that the percentage reported does not reflect the total number of individuals that receive treatment in the community after discharge. Individuals that have private insurance or that go to community programs that are not billable services may not be captured. The Board also discussed the number of individuals that are discharged and the possibility that one individual makes a large impact on the percentage rate. They also discussed the two pieces, whether the individual shows for the appointment and whether the services are billed.

Pg 12-Performance Contract report outcomes. This provides feedback to The Durham Center on whether the reporting requirements are met. Ms. Howard also explained the difference between the state standards and goals. The Durham Center has improved. We exceed the state average. The Durham Center is one of only three Local Management Entities (LME) that met all standards.

Pg. 15-The number of individuals who have received housing assistance. This has increased substantially, over 180% increase over FY2009. This can be attributed to Stephanie Williams' help in Care Coordination ensuring that individuals receive housing assistance.

Betsy MacMichael likes the format of the report but talked of concerns that she has that key indicators that are inclusive of Developmental Disabilities (DD) community are not included. Her position is that if indicators are being measured for the DD community, they need to be included. If they are not currently being measured they need to be.

Ms. Holliman discussed that they format of the current dashboard was established with the strategic plan developed for FY2007-2010. Many more goals are measured, but not included in the report. As the strategic plan for FY2011-2013 is implemented the dashboard will change and the feedback will be incorporated and key indicators for the DD community will be included in the new dashboard.

10. SAMHSA GRANT

Chairman Phillips recognized Ann Oshel to present an overview of the Substance Abuse and Mental Health Services Administration (SAMHSA) 6 year grant that was awarded to The Durham Center.

This grant pays for two things, improving service delivery system and it pays for system transformation. At the end of six years System of Care will have a difference service delivery system for the transition age youth. There are two other North Carolina funded sites, Alamance County (year 3) and Mecklenburg county (year 5).

The grant is a cooperative agreement from the Child Mental Health initiative. The elements in the proposal were the elements that SAMHSA asked them to respond to.

Project overview-\$5.4 million dollars in federal funding and \$7.7 million dollars in local commitments from the partners. It is a six year grant that includes a one year planning period. The five years of implementation will serve a total of 800 high risk transition age youth. In the first two years 200 youth will be served and in the final two years they will serve 600 youth.

The target population is 16-21 year olds that have a serious emotional disturbance or a serious mental illness, significant functional impairments in relationships, school, or community, and are disconnected or at risk for becoming disconnected from services and supports that can assist them.

Ms. Oshel discussed the criteria for disconnected youth and statistics for the number of transition age youth in Durham. In Durham there are over 36,000 youth aged 16-21. Of those about 3700 can be characterized as disconnected based on the criteria. That is more than any of the three surrounding counties. 30% of Durham's 15-25 year olds live below the poverty line. That exceeds the state rate of 23% and the national rate of 18%. In certain populations, retention rates in services for those engaged in mental health services dropped by 75% after the age of 18.

They conducted Youth focus groups. Some of the questions asked were:

- What do you think it means to be an adult?
- Right now, who do you go to for help when you need it?
- Who would you like to go to?
- What's the most helpful to you right now?
- What is the least helpful?

After the focus groups the project goals were developed. Those goals include:

- Bridging the adult and child service system chasm with a more effective and comprehensive approach.
- Developing a system equipped to address high-risk Transition age youths' clinical, developmental, and social needs including educational attainment and workforce connections
- Address service system and policy barriers with statewide dissemination.

The found out that there were an array of services available but youth do not know how to access them, they didn't want to, the level of competency around the developmental issues was low. They are going to pay to enhance the capacity and expertise of the workforce in those services. Everything they are doing already has a Medicaid reimbursement attached to it with a service definition. There are just some policy barriers going from 18 years old to 18 years and one day old.

The services that will be paid for include:

- Education (One outcome goal is that every youth in the program will attain a high school diploma)
- Literacy (3 Literacy programs-One will train faith partners)
- Employment
- Criminal Justice
- Mental Health
- Leisure and recreational activities (working with Parks and Recreation dept. to pay fees for the youth in the program and also develop more appealing social activities)
- Outreach
- Youth Leadership Training Institutes (Two per year-10 week leadership course, an internship or apprenticeship will be waiting for them with one of the business partners; Youth representation on Boards)
- Statewide Transition Age Youth Conference
- Cross System Training
- Multiple Work Group and Advisory Groups (Currently there are 30 attached to the grant)
- Policy and Funding Group
- Cultural Competence Group
- Youth Advisory Group
- Family and Youth Partnerships

The BECOMING Project Model incorporates the following:

- Multiple entry points
- Futures Ready Plan developed by the youth, includes a mentor to guide them
- Connection to a Career and Education Specialist

Federal Funding Request includes:

- 19 full and part-time project management and direct service staff-3-1/2 are required by SAMHSA
- Consultation and Training
- Tuition Assistance
- Parks and Recreation fees
- Transportation
- Literacy programs
- Stipends for Family Partners and Youth Leaders
- Youth Leadership Training Institute
- Registration/travel costs for youth to attend statewide conferences

- National Evaluation-SAMHSA requires 20% of total budget to be dedicated to evaluation activities)
- Required Grantee meetings

The Local commitment includes:

- 30 full and part time positions amongst multiple partners
- Training
- Workgroups and advisory boards
- Technical assistance
- Social Marketing

The Infrastructure will include:

- Multiple local workgroups
- Statewide advocacy organization
- Community Advisory Board- Develop Strategic Plan and monitor implementation
- Durham County Area Mental Health Board-Will govern the overall project

Chairman Phillips inquired whether Board members would serve on the Community Advisory Board. Ms. Oshel responded that they could. There would be many opportunities for Board members to participate in any way that is interesting to them.

The following were developed to address project sustainability:

- Address service gaps and system barriers simultaneously
- No financial burden on one partner agency
- Paying for expansion and increased access to existing services and supports
- Reimbursement mechanism currently in place for mental health services and the majority of youth are Medicaid-eligible)

There are more than 36 collaborative partners.

Year One activities include:

- Develop a strategic plan-Target date to begin is January 2011. She will tell the Board more at future meetings.
- Develop comprehensive six year training plan.
- Develop a cultural and linguistic competence plan
- Finalize screening and evaluation tools
- Begin training community partners
- Hire project management and direct service staff.

Chairman Phillips asked if there were any Board members who wanted to volunteer to be on the workgroups. Phil Golden, John Barry, Lascel Webley, and Earl Phillips volunteered to participate on committees and planning.

Ms. Holliman announced that this will become a regular part of Board report, as part of the committee reports.

11. MEDICAID UR UPDATE

Chairman Phillips recognized Sean Schreiber to give a brief update on the resumption of Medicaid Utilization Management.

The Durham Center took over on September 20, 2010. Part of the transition was for Value Options (VO) to turn over cases that they had received prior to September 20 that had not been authorized yet. The website e-mail address that was set up for VO to send information to The Durham Center was being spam filtered by County IT spam filter. When that was changed, approximately 150 requests came in immediately.

In 8 days of processing, approximately 850 cases were put in the computer system to process and approximately 500 of those have been approved. About 5% of the cases are being denied. Their approach at this point is to not disrupt consumer care during the transition. They will keep notes on each case and take action in the future to review cases and work to get consumers in to the right level of care.

Mr. Schreiber does not believe that there has been a disruption of care during the transition. In two weeks, most providers have moved from faxing all documents to submitting documents electronically.

They will look at staffing over the next few months and then they would be able to look at the providers and review the levels of care.

So far, they have had to mail out 1700 letters.

Chairman Phillips asked Mr. Schreiber what his staffing is currently. Mr. Schreiber responded that he has a team of five support staff who gather information and do data entry on faxed requests and requests that are sent to VO inappropriately and are then forwarded on to us. There are two who also do provider relations. One additional staff member was added for the project. The position is currently filled temporarily. There are five clinicians who do clinical reviews and make decisions. Any cases they have questions on are forwarded to Doctor Tanas.

The Durham Center gets all requests for Durham County Medicaid eligible individuals with the following exceptions; Community Support-stays with VO until the services is ended and one type of Targeted Case Management.

Mr. Schreiber reported that he had met with individuals from the state today and they have had no complaints over the transition.

Ms. Holliman asked that Jeanette Williams speak about the IT component of the project. She reported that some of the processes they had in place were being changed to make them less labor intensive and make them easier to the UM staff to process quickly. The staff has worked hard to ensure that the IT component was up and running.

Chairman Phillips commented that it sounded like it has been a real team effort.

Ms. Holliman said that we will send out the contract in the next Board packet and have another update.

10. CHAIRMAN'S REPORT

Chairman Phillips reported that he attended a Rotary meeting earlier in the afternoon and the Vice President for Academic spoke about the Mental Health issues are now one of the major issues facing Universities nationwide. More than a third of students on campuses are involved in mental health issues.

That is currently their biggest concern and Universities are now coming together to discuss the commonalities of the issues. Over a third of youth in elementary schools and high schools are now on medication. The issue facing college students is that they are losing their natural supports that help them with medication management and recognizing signs of need.

There was also discussion of the role of Mental Health issues in bullying.

Lascel Webley reported that he attended the Recovery celebration, it was very well attended and there were a number of staff there working hard.

There will be a Unity in Community on October 16 at El Centro. He would like the Board to support.

11. ADJOURNMENT

Doug Wright moved to adjourn the meeting. **Seconded by John Barry.** Motion approved unanimously.

Meeting adjourned at 6:00 pm.

Respectfully submitted:

Ellen S. Holliman

Ellen Holliman, Executive Director

11-4-10

Date

Material included in Notebooks:

- > NC Council of Community Programs Fall Conference Brochure
- > Assurance of Confidentiality Statement
- > The Durham Policy and Procedure R-2: Consumer Right to Privacy, Confidentiality and Protection of identifiable health information
- > Confidentiality Rules for Mental Health, Developmental Disabilities and Substance Abuse Facilities and Services
- > Final Draft-Relational Agreement between Durham County Area Authority and Durham County Consumer and Family Advisory Committee

Handouts

- > Agenda Action Form-Budget Increase for HUD Grant
- > Summary of expenditures for the period ending September 30, 2010