

## **Mental Health Utilization Management Team- HPR I**

Friday, June 5, 2015

10am-12pm

Western State Hospital

### **Minutes**

The meeting was called to order by Dennis Vaughn. There were 17 attendees including Andrea Dilley-Frame (AHCS), Tim Mathia (Horizon), Mindy Conley (DBHDS), Mary Begor (DBHDS), Christy Cacciapaglia (WSH), Jacque Kobuchi (RACSB), John Young (RBCSB), Crystal Myers (NWCSB), Ellen Dotus (SRMH), Gail Paysour (HPR I), Anna Tuomisto (WSH), Molly Yates (R10), Dennis Vaughn (HPR I), Suzanne Mayo (Catawba), Robert Tucker (VCSB), Denise Janocka (HRCSB), and Jessica Lawrence (HPR I).

After welcome and introductions, Vaughn asked the group if there were currently any changes or additions to the agenda, of which there were none. The minutes from the last UMT meeting on April 3, 2015 were introduced and Vaughn asked if there were any corrections needed, but none were needed at that time. The next item of the agenda focused on the addition of Alleghany Highlands CSB to PPR I. Vaughn informed the group that this addition is effective on July 1, 2015, and that, judging from his meetings with Alleghany Highlands representatives; they seem like a good fit.

Next, Gail Paysour went over the REACH update and the REACH monthly report and data summary. Her project manager's report (see handout) included a breakdown on FY15 referrals by board. Paysour elaborated that REACH continues to respond to crisis calls, and that in April, more crisis calls came in during business hours. She further continued to say there may be an opportunity for more RBT training. She added that those who have completed the classroom training are now training in the field.

The next item on the agenda concerned the need for a geriatric RAC (CMT) for Catawba Transfers. Vaughn noted that this is needed, and said that the current RAC for WSH works quite well. Suzanne Mayo from Catawba then spoke of Catawba's current admissions process. As they are getting more referrals, she feels that there should be a team approach without adding an undue workload to participants. Vaughn added that the need for a geriatric RAC has developed due to new state procedures. Bob Tucker agreed that the current adult RAC, while keeping all involved in compliance, doesn't address child and geriatric cases and reminded the group that the state is "asking for details." Ellen Dotas agreed that there should be a process in place. John Young agrees that there is a need, but suggested perhaps only involving the CSBs with active geriatric cases. He later added that the geriatric population has grown. Mayo added that Alleghany is the top board sending geriatric admits at this time, and reiterated that she hopes to develop a RAC procedure in a way that is efficient. Suzanne then went on to explain the current process, which occurs five days a week, and CSBs give permission for the hospitals to present the cases. As for the more formal RAC process in development, the frequency of the calls is still being discussed, and Patty Williford, PPR 7 Regional Manager, will be the point person and the one facilitating the calls for Catawba transfers. Suzanne said that she is open to suggestions as this continues to develop and reiterated that she would like CSB involvement. July 1<sup>st</sup> is the start date for the new RAC calls, but the procedure will develop and change as needed. Vaughn stated that he will continue to send e-mails on this matter and told the group to feel free to continue to give input.

Item 7 on the agenda concerned “Last Resort” TDO admissions for individuals who are out-of-region. Anna stated that there appears to be a difference of opinion about what is out of catchment, and she wanted to clarify referrals and the process. She added that admissions are based on a person’s residential address. Mindy Conley added to try private hospitals first for admissions, then, if there are no beds, to find a state hospital bed based on the individuals residence. John Young agrees that the state of Virginia must create a procedure that is clear and across-the-board. Mindy agreed that this is reasonable.

Item eight, concerning the review of the Regional Admissions Protocol (pages 9-25 on the handout), was the next item on the agenda. Vaughn pointed out that there are changes on page 25, and he also added that there will be changes due to the addition of Alleghany Highlands. Vaughn asked the group if the current process is working, and Robert Tucker mentioned some problems with Commonwealth. Mindy said they need to redevelop their admissions protocol. Tucker then pointed out that the current wording could possibly lead to legal issues. He also added, (concerning the Regional Admissions Protocol as included in the handout) that the second paragraph on page 15 is no longer protocol, and he pointed out the discrepancy between using the word “may” on page 11, as the language changes to “shall” on page 15. Concerning ECOs, Anna noted that she has been asked to track ECOs, and therefore would like continuity across the board in order to make this tracking more efficient. Bob and Jacque asked for clarification so that they could create a template, and Dennis said that he would work with Anna on the language and send out information to the group. Mary Begor pointed out that there is no standard of how many hospitals are contacted, and is concerned that perhaps only a small number of hospitals are being contacted, even when there is still time left on the ECO. Robert Tucker also pointed out that there should be a better, standardized relationship with law enforcement. John Young brought up the subject of transport, saying that too often, current legislation is a disservice to the consumer because the language isn’t clear, to which Mindy Conley pointed out that there will be new legislation for transport effective on July 1<sup>st</sup>. Still speaking on the subject of the Regional Admissions Protocol, Mary mentioned that in March, there were no beds for adolescents, which brought up a very complex issue with a serious case. The group agreed that this adds fire to Gail Paysour and Barbara Shue’s proposal for the Children’s Mobile Crisis Unit as this would add an alternative resource. Gail reiterated to the group that there is a lack of crisis stabilization for kids in the state. Mindy mentioned that contacting local congressmen may be a next step.

Next, Vaughn introduced the idea of merging the UMT Meeting with the Substance Abuse Regional Access Team meeting (SARAT), as both meetings often mirror each other in terms of information. There were no objections to this merge, and Jacque Kobuchi noted that ECO items could be moved to the Emergency Services (ES) meeting.

Item 9, LIPOS FY15 Utilization Summary by CSB and Hospital, is broken down on pages 26-27 of the handout. Vaughn pointed out that LIPOS has already surpassed last year’s encumbrances, which was a record. He stated that he is confident that money can be absorbed this year, but due to growth, he is unsure about FY16. He informed the group that there is currently a workgroup focusing on the current LIPOS model, but is confident that any changes will not be in place by July 1<sup>st</sup>, as there is still discussion about the best model.

The next item on the agenda was the HPR I Regional Initiatives Director Report, and Vaughn said about the ES Activity and Exceptions Report data that there is no May data yet due to it being the beginning of the month. He pointed out that there is April data (see handout), and also reminded the group that they can track their own CSBs via the color chart. For the Regional Program Utilization Reports and Updates, Vaughn commented that everything appears to be in-line with expectations. The group noted that March was a very busy month, and Mindy added that this was the same across the state. The Aggregate Data for WSH and the CSBs, as well as data for the WSH "Safety Net" TDO admissions are found on pages 36-38 of the handout. Anna added to the discussion that WSH is getting a large number of TDOs, and that more forensic TDOs are coming in on Thursday-Saturday, while civil TDOs often come in Sunday-Monday. She also stated to the group that she brought with her numbers from the past 3 fiscal years to show the changes in trends.

As no one was present from CCCA, no updates from Commonwealth were given, but Vaughn stated that he will forward on any information that comes his way.

Concerning local hospital updates, Ellen Dotas from SRMH informed the group that she would like to see her beds filled, and asked the group why her hospital isn't called with more frequency. The response from several members of the group was that they simply go with a faster response time, and the fact that there is no formal admissions office, as pointed out by Molly Yates. Jacque Kobuchi added that other hospitals ask all pertinent questions on the first call, and therefore the process is faster with them. Ellen thanked the group for feedback and suggestions and reiterated that SRMH hopes to receive more calls when beds are searched for.

The last item was updates from DBHDS. May Begor informed the group that currently the Department is looking at numbers, with a special interest and increased scrutiny on geriatric facilities.

The meeting was adjourned at 12:00 pm. The next UMT meeting will take place on August 7, 2015 at Western State Hospital.