

Crisis Committee Meeting
ALAMANCE/CASWELL/ROCKINGHAM LOCAL MANAGEMENT ENTITY

April 16, 2008

LME Staff Present: Alicia Graham, Helen Feroli, Suzanne Marens, Victor Armstong, Daniel Hahn and Carmen Morrow

Provider Staff Present: Anne LeForce, Advanced Health Resources; Debbie Duross, Psychotherapeutic Services; Michelle Stamps, Hearthstone; Gillian Eberlee, Easter Seals; John Teer, Therapeutic Alternatives; Felissa Ferrell, Rockingham Co. DSS; Gloria and Norman Melton, NAMI; and Jackie Butler, ADS.

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
<i>Item number and name</i>	<i>Detailed reflection of discussion and any conclusions from discussions. Include pertinent data wherever possible.</i>	<i>Any decisions, recommendations and/or steps the committee takes.</i>		<i>Open or Closed</i>
Welcome	Mr. Daniel Hahn, ACR LME CEO welcomed all members to this important Crisis Committee Planning Meeting. He expressed to members how important the task of this committee is for all three communities.			Closed
History of Crisis Committee	<p>Ms. Suzanne Marens, UR/STR Manager gave brief background of the history of the Crisis Committee. Timeline goes as follows:</p> <ul style="list-style-type: none"> ❑ Senate Bill 1741, Section 10.26 in 2006 specified required crisis service planning activities and appropriated start up funding for Crisis services. ❑ Each LME had to submit an inventory of existing crisis services in September 2006. ❑ Consultants (Technical Assistance Collaborative) TAC was awarded contract in November 2006 to begin reviewing crisis service plans. ❑ ACR LME prepared a Crisis Survey and forwarded out to providers and stakeholders to help develop Crisis Plan. Surveys were distributed at Provider Forum in February 2007. The top five priorities out of the survey were: <ol style="list-style-type: none"> 1. Transportation 2. Secured Non State Inpatient Involuntary Treatment Hospital Issues 3. Crisis Stabilization 4. Crisis Respite 5. Walk-In Crisis ❑ ACR LME submitted Crisis plan in March 2007. ❑ ACR LME Crisis Plan was approved on September 28, 2007 with start up funds of \$153,544 allocated. 			Closed

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p>Through the survey members of the community expressed interest in participating in the Crisis Committee – which is now this Crisis Committee. Ms. Marens thanked all members for being a vital part of the crisis plan to ensure crisis services for the community.</p> <p>Crisis Committee members introduced themselves in roundtable form.</p>			
<p>Purpose, By-Laws & Sub-Committees.</p>	<p>Mr. Victor Armstrong, Care Coordination Manager explained the purpose of the Crisis Committee. The purpose is to promote understanding, access and development of crisis services in all three communities. With this first meeting we hope everyone will become acclimated with why this committee was developed? And what has been done thus far. The committee consists of stakeholders from all three counties (Alamance, Caswell and Rockingham) – to give voice, input, to share ideas and be a part of the process.</p> <p><u>By Laws</u> –</p> <p>Mr. Armstong discussed the Crisis Committee By-Laws. The by-laws were developed with State Mandates considered. We had to ensure responsibility to consumers, and what they need from us as well as the communities.</p> <ol style="list-style-type: none"> 1. The committee should be governed by the following five goals: 2. To identify service gaps, identify strategies to address gaps and implement strategies to fill gaps. 3. To provide oversight and monitoring provision and utilization of crisis services. 4. To provide community education and coordination of Crisis services. 5. To review and monitor implementation of crisis plan for all three counties. 6. To ensure equal representation of community stakeholders in Alamance, Caswell and Rockingham counties for each disability group. <p><u>Sub-Committees</u> – Currently there is only one sub-committee – Transportation. Sub-Committee members are as follows: Alicia Graham, Victor Armstrong, Debbie Duross, Sandy Thompson and Carmen Morrow.</p>			

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p>The purpose of the sub-committee is to discuss needs and issues regarding transportation. Currently discussions have been focused on modes of transportation, historic voucher system, and vendor drivers.</p>			
<p>Membership Packet</p>	<p>Ms. Debbie Duross, Psychotherapeutic Services presented the membership packet. The items in the notebook are as follows:</p> <ul style="list-style-type: none"> ❑ Agenda ❑ Crisis Committee Membership List ❑ By-Laws ❑ A Community Based Comprehensive Psychiatric Crisis Response Service/April 2005 ❑ ACR Crisis Plan (Approved) <p>Ms. Duross thanked Ms. Carmen Morrow for the hard work of creating all of the membership packets.</p>			<p>Closed</p>
<p>Current Services in Crisis Services</p>	<p>Ms. Alicia Graham, LME Clinical Director discussed current services in crisis services. Ms. Graham distributed PowerPoint presentation. Current services are as follows:</p> <p>Walk-In Crisis Services – available Monday-Friday 8am – 5pm in all three counties. These services may be accessed at the following sites:</p> <ul style="list-style-type: none"> ❑ ACR LME (Alamance) ❑ Caring Family Network (Caswell) ❑ Advanced Health Resources (Rockingham) <p>After-Hours Crisis Services – They are as follows:</p> <ul style="list-style-type: none"> ❑ Alamance Regional Medical Center ❑ Mobile Crisis Services – available 24 hours a day/ 7 days a week to provide crisis stabilization, interventions & prevention activities. Services can be accessed after hours by calling 1-888-543-1444. During 8am – 5pm – Mobile Crisis can be accessed by 538-1220. <p>Sponsorship Resources – They are as follows:</p> <ul style="list-style-type: none"> ❑ Alamance Regional Medical Center (ARMC) – most widely used ❑ Moses Cone Hospital – most widely used ❑ Holly Hill Hospital – rarely used due to location. ❑ Old Vineyard Behavioral Health Services – rarely used due to location. 			<p>Closed</p>

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p><u>Question: How do you access sponsorship After Hours?</u> <i>Answer: Ms. Graham explained the process – the following should be used:</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> <i>Call Crisis Line – 1-888-543-1444</i> <input type="checkbox"/> <i>Psychotherapeutic Services would receive call – eligibility/disability information would need to be determined.</i> <input type="checkbox"/> <i>If sponsorship is needed, PSI can initiate the sponsorship form for the hospitals.</i> <p><u>Question: How many sponsorships are done a year? And is legislature allocating more dollars?</u> <i>Answer: The LME has negotiated reduced contract rates with hospitals. The LME has sponsored more in a month this year, than we did for an entire year. Ms. Graham reported she is aware of discussions taken place regarding putting more money into local hospitals.</i></p> <p><u>Detoxification & Crisis Bed Settings –</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Residential Treatment Services (RTS) <input type="checkbox"/> Freedom House <input type="checkbox"/> Both facilities have crisis beds available. <input type="checkbox"/> For all Medical detox – ARMC/Moses Cone are used. <p><u>Crisis Respite –</u> Respite for children is provided by Easter Seals. The LME has received numerous requests that there is a need for respite beds, but the beds are under utilized.</p> <p><u>Definition of Respite:</u> Therapeutic homes that provide treatment, structure & supervision to children with serious emotional disturbance while providing temporary relief to primary caregivers in order to reduce the constant and often stressful care of the child.</p> <p><u>Crisis Committee –</u> We are here today as the Crisis Committee. Purpose and History has been given at the beginning of the meeting. There are some goals as a committee that we hope to accomplish:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Identify service gaps, identify strategies to address the gaps and help implement strategies to fill the gaps. <input type="checkbox"/> Monitor the provision and utilization of crisis services 			

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<ul style="list-style-type: none"> ❑ Provide community education and coordination of Crisis services ❑ Review and monitor implementation of the ACR LME Crisis plan for all three communities. <p>Ms. Graham informed committee members of important references: http://www.acmhdds.org/crisis_plan.html (Crisis Plan: including plan updates & meeting minutes)</p> <p>http://www.tacinc.org/Pubs/crisisresponse.htm (TAC Monograph), which is included in your packet.</p> <p>Division website can also be used as a reference – http://www.dhhs.state.nc.us</p>			
<p>Crisis Trainings Participation</p>	<p>Ms. Helen Feroli, QI Manager reported on Crisis Trainings. Ms. Feroli distributed handout of past & upcoming trainings. They are as follows:</p> <p><u>Crisis Response/Crisis Planning</u> Training presented by Lisa Bunting. This training gave providers an overview of crisis response and how to develop a crisis plan. These trainings were mandated for ACR LME contract providers.</p> <p><u>Training Dates were as follows:</u></p> <ul style="list-style-type: none"> ❑ December 27, 2007 ❑ January 10, 2008 ❑ January 15, 2008 ❑ March 27, 2008 <p><u>First Responder Training</u> is a “new” training and will be developed with ACR Crisis Resources in mind. All community support providers have first responder responsibilities. The service is to provide crisis response on a 24/7/365 basis to consumers experiencing a crisis. Lisa Bunting will also present this training.</p> <p><u>Training dates are as follows:</u></p> <ul style="list-style-type: none"> ❑ April 23, 2008 ❑ May 12, 2008 			<p>Closed</p>

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p><u>Crisis Training for Law Enforcement</u> – The Alamance-Caswell-Rockingham NAMI chapter has worked with the LME and Alamance Community College to implement a local CIT Training for officers in the local catchment area. CIT training is a nationally recognized 40 hr. training developed by the University of Memphis with proven efficacy in helping divert mental health consumers from arrest/arraignment to treatment.</p> <p><u>Class Schedule is as follows:</u></p> <ul style="list-style-type: none"> ❑ 1st Class -January 28 class was held with 14 officers graduated from the program. ❑ 2nd Class – scheduled for May 12th – May 16th ❑ 3rd Class – scheduled for August ❑ 4th Class – scheduled for November <p>Ms. Feroli also announced June 4th TAC Regional training will be held. We hope to receive information to bring back to this committee.</p> <p>Ms. Graham also informed the group of the 4/23/08 CFAC Regional Training that the crisis committee has been asked to participate.</p> <p>Ms. Feroli expressed appreciation to Ms. Gloria Melton, NAMI for all of her hard work in pulling the CIT trainings together.</p>			
Preparation for next meeting	<p>Ms. Graham asked members to go back and do a bit of “homework” in preparation for the next meeting.</p> <p>The assignments were as follows:</p> <ul style="list-style-type: none"> ❑ Read Crisis Plan – ACR LME will continue with “Road Shows” to communities – education is the key! ❑ Read the TAC Monograph – the articles are very interesting. ❑ Go back to your communities regarding service gaps, etc. and bring back any feedback to the next meeting. 			
Other:	<p>Suggestion was made to include in the next ACR LME Quarterly Newsletter a section on current Crisis Services.</p> <p>Ms. Gillian Eberlee, Easter Seals announced to all providers regarding Provider Council meetings. This is a meeting where providers can discuss different issues in a non-competitive setting to gather solutions. The meeting is held the 2nd Friday of every month at the LME. The meeting</p>			Closed

AGENDA ITEM	DISCUSSION/CONCLUSION	ACTION/NEXT STEPS	RESPONSIBLE PERSON	STATUS
	<p>begins at 12pm. Committee member expressed the need to discuss staff turnover and include this as a service gap for this committee.</p> <p><u>Question: What about using tele med for consumers?</u> <i>Answer: Mr. Armstrong gave a brief background of how this service works. The service works for outpatient and medication management. The service cannot be used for hospitalization, which requires a face-to-face first evaluation.</i></p> <p>Mr. Daniel Hahn announced Dr. Cristina Mickiewicz is working on Child Forum that is scheduled for May 8th. More information to be shared at a later date.</p>			
Next Meeting:	Wednesday, May 14th at 11:30am. Location TBA			

Respectfully Submitted By:

_____ Date _____
 Carmen Morrow