

Dallas County Behavioral Health Leadership Team

Thursday, December 14, 2017

Henry Wade Juvenile Justice Center

2600 Lone Star Drive, Dallas, TX

Room 203-A at 9:30am -11:00am.

- I. Welcome and Call to Order
- II. Review/ Approval of Minutes from last meeting*
 - Minutes November 9, 2017*
 - Proposed Representative Update:
City of Dallas, Assist. Chief Daniel Salazar; Dallas Fire EMS Chief
Resolution*
- III. Strategic Planning
- IV. NTBHA Update
- V. The Stepping Up/ Caruth SMART Justice Initiative Update
- VI. Dallas County Behavioral Health Housing Workgroup
- VII. 1115 Waiver Crisis Services Project Update
 - DY6 Intergovernmental Transfer (IGT) Resolution*
- VIII. Legislative Update
- IX. Funding Opportunities
 - Cottages Update
 - SAMSHA Residential Treatment Grant Update
 - Community Courts Grant Update (Public Defender's Office)
- X. Upcoming Events and Notifications
- XI. Public Comments
- XII. Adjournment

* Indicates items requiring approval from Dallas County Behavioral Health Leadership Team

The following reports from BHLT Committees are included for your records: *ACOT, FACT, BHSC, Legislative Committee, PD Mental Health Stats*. Unless action is required, there will be no verbal updates from those committees.



Dallas County
Behavioral Health Leadership Team
Meeting Notes
Thursday, November 9, 2017

Welcome and Call to Order

The meeting was called to order by Commissioner John Wiley Price at 9:30 AM.

Introductions and Absent BHLT Members:

Commissioner Price opened up the floor for introductions from new attendees. First time attendees Ron Wright, District Attorney's Office; Ivy Ofori, Program Director for Gateway Corrections Foundation; Tan Lee, Sundance; Soni Helmicki, Sundance; Tumikee Johnson, Sundance made introductions.. Commissioner Theresa Daniel unfortunately could not be in attendance due to the Homeless Advisory Meeting. Carol Lucky presented Walter Taylor as North Texas Behavioral Health Authority new Chief Strategy Officer (CSO).

Review/Approval of Minutes

The minutes of the BHLT meeting held on October 12, 2017 were included in the meeting packet (pg. 2-4). A motion was made by Gordon Hikel to accept the minutes and was seconded by Doug Denton. The committee members voted to approve the minutes with no modifications. Commissioner Price presented resolution 08-2017 which stated that BHLT recommends the appointment of Walter Taylor, as the new Adult Clinical Operations Team chair. The resolution was approved by Mr. Denton and seconded by Mr. Hikel. The BHLT committee approved the resolution with no modifications.

Presentation:

Ryan Brown, Dallas County Budget Officer gave a short presentation on the Data-Driven Justice Initiative Design Institute. Mr. Brown informed the members that the information regarding this initiative design was provided for them in the BHLT monthly packet (page 5-6). Mr. Brown stated that Dallas County had become recipients of a SAMSHA Grant on behalf of Commissioner Daniel. The members that were chosen attended training in September which revolved around the concept of how Data Integration and Data Sharing can improve decision making and outcomes for individuals with Behavioral Health challenges.

Strategic Planning:

Erin Moore, Chief of Staff for Commissioner Daniel's office gave a brief update indicating Commissioner Daniel will continue to move forward with best practices and giving presentations to the committee.

NTBHA Updates:

Carol Lucky, CEO of North Texas Behavioral Health Authority (NTBHA) stated that the NTBHA board has approved the move of the contract with Pathways by Molina to Pathways Youth & Family Services (PYFS). This contract will allow for PYFS to continue to help 400-500 hundred youth and adults. PYFS has agreed to keep the same location and keep the same staff which will help in the transition. The board also approved the Green Oaks contract extension for their 23hr. observation services. The board also approved the contract with Homeward Bound (HB) for NTBHA Crisis Services space. MS. Lucky stated that NTBHA is currently collaborating with Parkland to open an Observation Unit at HB. NTBHA would also like to have Residential and Respite Services available to clients as well as a Sobering Center and Mental Health living room (step down crisis). NTBHA currently has 2 wings on the lower level of the new HB building and are working with Doug Denton for additional space. The NTBHA board did approve the contract with HB.

Stepping Up Initiative Update/Caruth Grant:

Ron Stretcher with Meadows Mental Health Policy Institute (MMHPI) stated that the update was located in the packet (pages 7-9). MMHPI is currently working on their contract with Parkland to provide the clinical staff. This agreement and approval may delay the beta launch from November 29, 2017. After the approval they will conduct a 10 to 14 day launch and the leadership team will review the data from the Multidisciplinary Response Team (MDT). In Intercept 1, Loopback Analytics are analyzing data during pre-arrest involving police, hospitals, shelters, etc. Loopback Data System is close to having what MMHPI needs to move forward. Intercepts 2-4 are moving along nicely and they currently have 4 months of data and are looking at what works and what doesn't to get more individuals out. In Intercept 5, expanded FACT/ACT services have been reviewed and training has been completed. MMHPI has also started housing coaching. Russell Roden, Chief of Civil Division, DA, is the point person for Dallas County with regards to the data request. Mr. Hikel inquired about the due date for the data information from Criminal Justice. Mr. Stretcher expressed how important it is to have it sooner than later. MMHPI continues to work to finalize the data sharing agreement with Dallas County Criminal Justice Department and it is anticipated that the agreement will be on the November 16th Commissioners Court Agenda for approval. .

Behavioral Health Housing Work Group (BHHWG) Update:

Erin Moore, Commissioner Daniel's Chief of Staff informed the committee that the next scheduled meeting for BHH/WG will be November 15th. BHHWG continues to work on finding beds and housing for members of the special population in crisis. Ms. Moore also stated that Commissioner Daniel continues to work with the Dallas Area Partnership to End and help Prevent Homelessness.

1115 Waiver Crisis Services Project (CSP) Update:

Mrs. Charlene Randolph, Department of Dallas County Criminal Justice, stated that 1115 Waiver CSP was able to meet the October 31st deadline and met all of the DY6 achievement metrics. Ms. Randolph also stated that CSP is expecting to receive match funding for the recidivism goal met from DY5 and will be able to recoup 6 million dollars by January. She also advised the committee that the CSP Coordinator, Ms. Brianne Brass, would be leaving the Criminal Justice Department (CJD) after 6 months with the department. She acknowledged Ms. Brass for all her hard work. Mrs. Laura Edmonds would be taking on a lot of the duties of the coordinator and taking on more of the mental health duties for the CJD. Ms. Randolph also informed the committee that she has not received any information on the renewal from CMS.

Legislative Update:

Janie Metzinger stated that all the committees are currently looking at the effects of Hurricane Harvey (HH) on the state. Locally they are looking at what went right and what went wrong in regards to HH and they will start submitting rollouts and recommendations in preparation for a disaster in the future. Interim Hearings are also looking at issues related to Criminal Justice, MCO's, and the Sandra Bland Act. Ms. Metzinger will send Ms. Greer links of upcoming hearings so that anyone interested in watching the Hearings will have access to do so.

Commissioner Price asked if there are currently any concerns with mental issues related to Hurricane Harvey, Hurricane Irma, and Hurricane Maria. Dr. Jane Le Vieux, Clinical Manager for Children's Medical Center, was deployed to Hurricane Harvey and Hurricane, Irma as a part of the National Medical Disaster Team. Dr. Le Vieux stated that they have found that are negative after-affects on the providers, first responders (nurses, doctors, etc.) and the people (families) that come to the tents. A good thing for the community to watch out for is the acute stress which may move to post-traumatic stress. Commissioner Price asked if a contingency plan for our population of providers has been developed. Ms. Metzinger stated that contingency plans will be a part of the lessons learned roll out plan and recommendations that will be submitted. Catholic Charities are currently still assisting 250 individuals that are still residing in Dallas County from Hurricane Harvey. Dr. Buruss discussed future legislation related to IDD issues because available services have lagged behind the need for these services.

Funding Opportunities:

- **SAMSHA Grant Update:**

Laura Edmonds with the Dallas County Criminal Justice Department stated that the numbers were located in the packet (pg. 15). The program goal is to serve women involved in the Specialty Courts at Nexus. They have started the 3rd year for the grant project with 3 women being served and are currently accepting referrals. All referrals can be sent to Mrs. Edmonds for review.

- **Community Courts Grant Update (Public Defender's Office):**

Vickie Rice reported that there are no significant items to report on this month.

- **Cottages Update**

Annie Lord was unable to attend the meeting so Ms. Randolph reported on her behalf. There are currently 44 individuals living at the Cottages and within a few weeks they should be at 46. There are currently 9 persons in the queue that have been approved by the selection committee and are still in the process of gathering data and documentation to receive their vouchers through Dallas Housing Authority. Diane Dusek, Clinical Manager for the Cottages stated that the clinical services have increased and they are currently focusing on home reduction, psycho social rehab and engaging with those who are resistant. Commissioner Price requested to know the number of staff dedicated to the Cottages population. Ms. Randolph will provide the number of clinical staff, cases management staff and property management staff on behalf of the Cottages.

Public Comments:

Doug Denton gave an update on Homeward Bound (HB) stating that they have moved out the old building. HB is currently in their new building located in the Oakcliff area (5300 University Hill Blvd). They are currently going through State inspections and they will know the official opening date once the inspections have been completed. Friendship West and Oakcliff Bible have visited the new building and have offered to lend their support and help to HB. HB has applied for several grant proposals and is currently waiting to hear back from them. Commissioner Price stated that he wants to keep the committee updated on the progress of HB and to let them know how much the community has embraced them.

Upcoming Events and Notifications:

Judge Wade stated that a small delegation went to speak to Chief Spiller regarding the increase of criminal trespass violations. Chief Spiller did express that he would like to be involved with the BHLT committee. Erin Moore stated that the committee may want to reach out to the Dallas Fire and Rescue. Councilman Patrick LeBlanc announced the Southern Dallas Alliance of Mental Health Professionals meeting, Saturday, November 18th 9:30-11:30am. Joe Powell, President of APAA was selected by the legislator to represent on HB1486 work group and their first meeting is scheduled for November 30th. Ms. Randolph acknowledged and thanked Sherry Cusomano for all her hard work and dedication to ACOT committee. Mrs. Rice acknowledged and thanked Christina Crain, Unlocking Doors, for her donation of 100 hygiene kits to the Public Defender's Office.

Adjournment:

The meeting was adjourned at 10:40 am with a motion made by Doug Denton and seconded by Dr. John Buruss.

Advocates		Initial Representative	Current Representative	Proposed Representative
Mental Health America	1	Janie Metzinger	Janie Metzinger	
NAMI Dallas	1	Ashley Zugelter	Marsha Rodgers	
NAMI Dallas Southern Sector	1	Anna Leggett-Walker	Sam Bates	
Child/Family	1	Vanita Halliburton	Patrick LeBlanc	
Consumer	1	Dedra Medford	Dedra Medford	
Category Subtotal	5			
County/City		Initial Representative	Current Representative	Proposed Representative
Jail Behavioral Health Services	1	Waseem Ahmed	Waseem Ahmed	
City of Dallas	1	New Seat	Nadia C. Hardy	Asst. Chief Salazar
Sheriff Department	1	David Mitchell	Alice King	
CSCD (Adult Probation)	1	Teresa May-Williams	Dr. Jill Love-Johansson	
Juvenile Department	1	Desiree Fleming	Leslie Gipson	
Judicial Representative	1	New Seat	Kristin Wade	
District Attorney	1	Durrand Hill	Faith Johnson	
Public Defender	1	Lynn Richardson	Lynn Richardson	
Metro Dallas Homeless Alliance	1	Mike Faenza	Cindy Crain	
Dallas Housing Authority	1	Brooke Etie	Troy Broussard	
Law Enforcement	1	Herb Cotner	Herb Cotner	
Dallas County Health & Human Services	1	Zach Thompson	Zach Thompson	
School Liaison	1	New Seat	Dr. Michael Ayoub	
Category Subtotal	13			
Residential Facilities		Initial Representative	Current Representative	Proposed Representative
Parkland	1	Josh Floren	Dr. Celeste Johnson	
Green Oaks	1	Tom Collins	Tom Collins	
Timberlawn	1	Craig Nuckles	James Miller	
Terrell State Hospital	1	Joe Finch	Joe Finch	
Chemical Dependency Residential Center	1	Doug Denton	Doug Denton	
Veterans Affairs (VA)	1	New Seat	Tammy Wood	
Dallas Behavioral Health Hospital	1	Patrick LeBlanc	Selena Hammon	
Category Subtotal	7			
Outpatient Providers		Initial Representative	Current Representative	Proposed Representative
Alcohol and Other Drug (AOD) -(Residential/OP)	1	Rebecca Crowell	Rebecca Crowell	
The Bridge	1	Jay Dunn	Dr. David Woody, III	
CMHP - Adult	1	Liam Mulvaney	Carol Lucky	Open
CMHP-Child Adolescent	1	Michelle Weaver	Michelle Weaver	
CMHP - Crisis	1	Preston Looper	Preston Looper	
Peer/Non-Clinical	1	Joe Powell	Joe Powell	
Non-CMHP Crisis	1	Ken Medlock	Ken Medlock	
Re-Entry	1	Michael Lee	Christina Crain	
Adult Clinical Operations Team	1	Renee Brezeale	Walter Taylor	
Child/Adolescent Clinical Operations Team	1	Summer Frederick	Jane LeVieux	
Parkland COPC	1	Jacqualane Stephens	Karen Frey	
Psychiatrist Leadership Organization	1	Judith Hunter	Judith Hunter	
Psychiatry Residency	1	Adam Brenner	Ella Williams	
Mental Retardation/Developmental Delay	1	James Baker	Dr. John Burruss	
Underserved Populations	1	Norma Westurn	Norma Westurn	
Primary Care Physicians	1		Dr. Sue S. Bornstein	Open
Category Subtotal	16			
Payers/Funders		Initial Representative	Current Representative	Proposed Representative
Meadows Foundation	1	New Seat	Jaqualene Stephens	
NTBHA	1	Alex Smith	Carol Lucky	
NTBHA Chair	1	New Seat	Gordon Hikel	
Commissioners Court	1	Ron Stretcher	Vacant	
Category Subtotal	4			
Membership Total	45			
Comprehensive Mental Health Provder		CMHP		Rev. 11/8/17

RESOLUTION

DALLAS COUNTY BEHAVIORAL HEALTH LEADERSHIP TEAM

RESOLUTION NO: 09-2017

DATE: December 14, 2017

STATE OF TEXAS }

COUNTY OF DALLAS }

BE IT REMEMBERED at a regular meeting of the Dallas County Behavioral Health Leadership Team held on the 9th day of November 2017, the following Resolution was adopted:

WHEREAS, On January 4, 2011 Dallas County Commissioners Court was briefed to establish the Behavioral Health Leadership Team (BHLT); and

WHEREAS, the Dallas County BHLT was comprised of key stakeholders and organizations throughout the county, including the Dallas County Hospital District.; and

WHEREAS, the body is made up of five (5) Advocates, thirteen (13) County/City organizations, six (6) Residential Facilities, sixteen (16) Outpatient Providers, and three (3) Payers/Funders; and

WHEREAS, in the six years since the BHLT's inception, a number of membership seats have become vacant and additional stakeholder groups have been identified for representation in the BHLT; and

WHEREAS, the BHLT recommends the following changes and additions to the BHLT membership:

- City of Dallas-DFR Asst. Chief Daniel Salazar

IT IS THEREFORE RESOLVED that the Dallas County Behavioral Health Leadership Team appoints the above listed individual as an active member of the BHLT.

DONE IN OPEN MEETING this the 14th day of December, 2017.

John Wiley Price
Commissioner District #3
Dallas County

Dr. Theresa Daniel
Commissioner District #1
Dallas County

Dallas County Behavioral Health Housing Work Group
Dallas County Administration, 411 Elm Street, 1st Floor, Dallas Texas 75202
November 15, 2017 Minutes

Mission Statement: The Dallas County BH Housing Work Group, with diverse representation, will formulate recommendations on the creation of housing and housing related support services designed to safely divert members of special populations in crisis away from frequent utilization of expensive and sometimes unnecessary inpatient stays, emergency department visits and incarceration.

Success will be measured in placement of consumers in housing and the decreased utilization of higher levels of care (hospitals and emergency care visits) and reduced incarceration in the Dallas County Jail. The Dallas County BH Housing Work Group is committed to a data driven decision-making process with a focus on data supported outcomes.

ATTENDEES: Dr. Theresa Daniel, Commissioner; Ron Stretcher, MMHPI; Courtney Clemmons, NTBHA; Joshua Cogan, Outlast Youth; Doug Denton, Homeward Bound; David King, Wilson & Randolph Holdings; Thomas Lewis, DCHHS; Atoya Mason, VA; Jim Mattingly, LumaCorp; James McClinton, MDHA; Jari Mema, Catholic Charities; Ikenna Mogbo, Metrocare; Shenna Oriabure, DCCJ; Sandy Rollins, Texas Tenants Union; Jacky Sylvie, CPSH; Joyce White, Transicare; Zachary Thompson, DCHHS; Krystal Lotspeich, CitySquare; Tom Edwards, Mesquite ISD; Yvonne Green, DCCJ; Judge Lela Mays, Dallas County; Maggie Parker, TREC; Erin Moore, Dallas County; and Claudia Vargas, Dallas County

CALL TO ORDER: Minutes were approved with no changes.

GOVERNANCE

Dallas Area Partnership to End and Prevent Homelessness: Initial meeting is scheduled for November 29th, 9:00 -11:00 a.m., at the DCCCD Administration Building. The address is: 1601 S. Lamar Street; Dallas, TX 75215. This is a public meeting and all are invited to attend.

DEVELOPMENT

Crisis Residential and Respite Services: Doug Denton of Homeward Bound reported that their state license is pending approval of building inspections and completion of building renovations. The new location will house a substance abuse detox and intensive residential treatment for men and women and HIV clients. It will also have a crisis section for suicide risk clients. Homeward Bound is anticipating resuming operations in December, starting with SED services, and eventually building up to crisis residential and respite services. Observation services will begin after additional planning and renovations. Homeward Bound's new address is at 5300 University Hills Blvd.; Dallas, TX.

RESOURCES

NTBHA: Courtney Clemmons reported that work continues with Meadows on SB 292 application for funding. NTBHA is also applying for HB 13 funding. If awarded, SB 292 funding for larger counties will be used to improve services in Dallas County and HB 13 will be directed towards services in smaller counties. This funding will be used to develop additional services and to expand crisis residential services. As well, NTBHA continues to work with Homeward Bound on their new location and is exploring a partnership with Parkland that would expand crisis services and remove barriers to access for another population.

Housing Navigator: Joyce White shared that the next housing services workshop is in December and will be geared towards members of the judiciary. The invitation will be extended to judges from surrounding municipalities. Additionally, the 2018 workshop schedule is in process and will be finalized early next year. Ms. White will connect with Catholic Charities to coordinate beds set aside for Dallas County in the St. Jude's housing project.

Caruth Smart Justice: Ron Stretcher reported the following:

- Intercept 1 is almost ready for implementation but is delayed due to leadership changes in the Dallas Police Department. Work continues on intercepts and changes are made as needed. The extra time is being used to complete care teams. Care teams will be ready to work pending trainings and approval of contract and legal requirements. In addition, officers are receiving training on processes and procedures and available services.

- Intercepts 2, 3, and 4 are in process with Dallas County. Clients are being screened, assessed and given PR bonds. Adjustments are being made to address challenges with PR bonds and the “no housing” issue for homeless clients who are released is being addressed with pre-trial officers. Efforts continue to input homeless individuals into HMIS to begin documentation for services.
- Intercept 5 fidelity reviews are complete. Provider teams are working on their caseloads and identifying service needs for clients. Housing shortages continue to be an issue and will continue unless new projects are identified. The move to develop a more comprehensive HMIS and CoC in Dallas region will bolster future funding requests for HUD CoC funding but is not the only solution. Community providers and leaders must find ways to develop short-term and transitional housing which is not a HUD funding priority.

PROJECTS AND INDUSTRY UPDATES

Homeless Jail Dashboard: The latest report indicates that class b misdemeanors and state jail felonies are highest among the homeless population, followed by class a misdemeanors. Average days in jail are higher for felonies than class b misdemeanors. The PD mostly handles lower offense cases and a large majority of homeless cases, which typically are lower level offenses.

Jim Mattingly asked if this data is used to drive change within departments. Commissioner Daniel explained this data informs decisions at different levels of the criminal justice system and whether there are inefficiencies that need to be addressed or processes that need to be changed or updated.

The Cottages: Six vacancies, two evictions and one pending eviction were reported. Three new clients have moved in. Outreach efforts are increasing, including a new relationship with Baylor. Baylor has already started making referrals to The Cottages. Outreach efforts are helping to build the waitlist. The selection committee continues to work on approvals and documents for clients.

Mr. Mattingly asked how vacancies are impacting the program budget. Cottage tenants currently pay a subsidy or use a DHA voucher. The Cottages concept is still very new and would require more time to determine the financial impact. Jari Mema of Catholic Charities is building a program budget allowing for a mix of tenants and will also need to determine financial impact over time.

PRESENTATION

Community Reinvestment Act and Community Development Finance Institutions: The Real Estate Council, Maggie Parker The Real Estate Council (TREC) Community Fund provides funding for real estate on the commercial side of business. TREC Community Fund is subsidiary of TREC and provides loans and technical assistance for projects and to nonprofits in LMI communities in Dallas and Collin Counties. TREC Community Fund is a CDFI, a federal certification that allows them to receive funding from the US Dept. of Treasury and allows them to apply for advantageous bank rates. TREC offers community trainings on real estate for nonprofit leaders and community advocates. TREC also has a faith based lending initiative for churches. Over 2,000 volunteers assist community clients throughout the variety of projects. TREC has relationships with banks, foundations, mission-driven and impact investors to get projects completed. The Community Reinvestment Act (CRA) is a requirement that banks and savings institutions have to give back to their communities, through lending and services to the community.

ANNOUNCEMENTS

Josh Cogan reported that the “See Us Now Youth Count” is still in need of around 100 volunteers. Training is mandatory and can be found on the information flier shared at the BHHWG meeting.

Next Meeting: Wednesday, December 13, 2017, at 10:00 am

***Dallas County Administration Building, 411 Elm Street, 1st Floor, Allen Clemson Courtroom
If you need parking, please contact Claudia Vargas***

**1115 Waiver- Dallas County
 Demonstration Year (DY) 6 Crisis Services Project (CSP) Anticipated Match Funds and IGT Needed
 December 14, 2017**

Process Improvement Metrics (Category 1)

Metric Description	DY6 Goal	DY6 Achievement	Status	Match Value	IGT Needed
Consumers Served	5,400	7,594	Report Achieved	\$1,135,739.25	\$489,730.76
Medicaid Low Income Uninsured (MLIU) Quantifiable Patient Impact	4590	5714	Report Achieved	\$1,135,739.25	\$489,730.76
Project Summary and Core Components	N/A	N/A	Report Completed	\$1,135,739.25	\$489,730.76
Sustainability Plan	N/A	N/A	Report Completed	\$1,135,739.25	\$489,730.77
Cost avoided by crisis alternative setting (jail)	5% reduction from baseline (21%)	45% cost avoided	Reported Achieved (from DY5 Carryforward)	\$757,159.50	\$326,487.18
Total				\$5,300,116.50	\$2,285,410.23

Outcome Metrics (Category 3)

Outcome Improvement Metrics (Cat. 3)	Goal	Achievement	Status	Match Value	IGT Needed
Decrease in jail readmissions from baseline	26.56%	26.45% (1,997 out of 7,549 clients had readmissions)	Reported Achieved	\$567,209.25	\$244,580.63
Decrease in jail readmissions from baseline	27.32% (from DY5 goal)	26.45% (1,997 out of 7,549 clients had readmissions)	Reported Achieved (from DY 5 Carryforward)	\$283,604.63	\$122,290.31
7-day follow-up after hospital	37.81%	75.00%	Reported Achieved	\$283,604.63	\$122,290.31
30-day follow-up after hospital	61.34%	76.92%	Reported Achieved	\$283,604.62	\$122,290.32
Total				\$1,418,023.13	\$611,451.58

Anticipated Total IGT Needed for CSP = \$2,896,861.81

Anticipated Total DSRIP Match Receipt = \$6,718,139.63

RESOLUTION

DALLAS COUNTY BEHAVIORAL HEALTH LEADERSHIP TEAM

RESOLUTION NO: 12-2017

DATE: December 14, 2017

STATE OF TEXAS }

COUNTY OF DALLAS }

BE IT REMEMBERED at a regular meeting of the Dallas County Behavioral Health Leadership Team held on the 14th day of December 2017, the following Resolution was adopted:

WHEREAS, on February 14, 2013 the Dallas County Behavioral Health Leadership Team endorsed the 1115 Healthcare Transformation Waiver DSRIP Project, and development of Behavioral Health Crisis Stabilization Services as alternatives to hospitalization; and

WHEREAS, the Dallas County Behavioral Health Leadership Team is the governing body for the DSRIP project through a standing committee known as the Crisis Services Project (CSP) Governance Committee; and

WHEREAS, the CSP Governance Committee is responsible for the submission of required reporting on metrics and milestones; and

WHEREAS, functioning as the reporting entity, the CSP Governance Committee reported on the following Demonstration Year (DY) 6 milestones and submitted supporting documents on October 31, 2017:

Category 1 Measures:

- Total consumers served
- Medicaid Low Income Uninsured (MLIU) quantifiable patient impact
- Project summary and core components
- Sustainability plan
- Cost avoidance by crisis alternative setting (DY 5 Carryforward)

Category 3 Measures:

- 7-30-day follow-up after hospitalization
- Decrease in mental health admissions and readmissions to criminal justice setting (DY5 Carryforward and DY6 measure)

WHEREAS, the Dallas County Behavioral Health Leadership team is responsible for endorsing the submission of the disbursement of estimated IGT funds for the CSP for those metrics in the amount of \$2,896,861.81, as well as approve receipt of estimated DSRIP matched funds of \$6,718,139.63.

IT IS THEREFORE RESOLVED that the Dallas County Behavioral Health Leadership Team endorses the submission of the estimated IGT funds and receipt of estimated matched funds.

DONE IN OPEN MEETING this the 14th day of December 2017.

John Wiley Price
Commissioner District #3
Dallas County

Dr. Theresa Daniel
Commissioner District #1
Dallas County

The Cottages: Monthly Metrics Summary

Metric Criteria	July	Aug	Sept.	Oct.	Nov.	Notes
Property Management Overview						
Beginning Census	45	44	40	44	45	
Evictions	3	2	0	0	1	
Terminations	0	2	0	0	2	
Move-ins	2	0	4	1	3	
Ending Census	44	40	44	45	46	
Lease Violations	20	15	14	50	17	
*New screenings for waitlist	4	16	11	13	11	
DHA Inspections	2	0	9	1	0	
Total residents housed since opening	52	52	56	57	60	
Residents in Cottages for less than 90 days	2	2	7	6	7	
Residents in Cottages 91-180 days	14	8	5	7	8	
Residents in Cottages 181 days or more	36	42	44	44	45	
Metrocare Cottages						
Encounter Breakdown						
Psychosocial Rehab Individual Sessions	74	138	148	208	183	
CBT sessions	10	18	16	7	27	
Psychosocial Group Sessions (clinical groups only)	25	6	15	9	26	
Appointments made with prescriber	39	41	37	44	21	
Appointments attended	21	27	27	29	16	
Residents that were prescribed medication	19	23	19	26	17	
Incident Reports by Category						
Medical	2	3	5	3	7	
Psychiatric	1	0	1	0	1	
Residents Accessing Higher Level of Care						
Emergency Room (Baylor and Parkland)	38	43	20	30	15	
Psychiatric (inpatient and 23 hour obs)	5	2	1	3	3	
Jail Book-In	6	5	5	4	4	
SUD Treatment Centers	2	1	4	1	1	
CitySquare Case Management						
Residents receiving case management services	33	38	43	42	37	
Residents served by Community Nurse	11	11	6	8	4	
Residents served by CitySquare Clinic	5	6	7	6	6	
Residents attending Lifeskills Groups	10	5	4	16	0	
Residents attending Community Groups	27	29	36	25	28	

	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sep.	FY2018 Total	FY2017 Total	FY2016 Total
Number of New Admissions	4	2											6	44	33
Number of Successful Completions	3	0											3	36	24
Number of Unsuccessful Completions	0	0											0	10	9
Average Days in Jail from Referral to Admission	12	9											12	7	4
Number of New Admissions on ELM	2	2											4	37	12
Program Referral Follow-Ups by Type (running total per grant year)															
Court Program Graduate													0	0	6
Active In Court Program													3	8	4
Active In Treatment at Nexus													6	0	0
In Jail													0	2	2
Re-Arrested and Released to Community													0	16	12
Re-Arrested and Released to Further Treatment													0	7	2
Released to TDCJ or State Jail													0	4	3



DALLAS COUNTY, TEXAS

Minutes of the Behavioral Health Steering Committee (BHSC) Meeting Thursday, October 19, 2017

Call to order and Introductions

The meeting was called to order by Lynn Richardson at 8:35 am. 27 staff and agency representatives/providers were in attendance with names recorded on the meeting sign-in sheet. Guest: Commissioner Theresa Daniel was present and was introduced. She encouraged and thanked everyone for their hard work and impact. She also addressed the immense value everyone involved is providing to the community and Courts.

Minutes review and approval

The **minutes** from the last bi-monthly BHSC meeting held on August 17, 2017 (packet pgs. 2-5), were reviewed with motion and second by Harry Ingram and Lee Pierson for acceptance. No discussion or corrections. Motion unanimously passed with minutes approved without objection.

No guest speakers presented today.

Caruth Grant: Mike Laughlin provided quarterly summary update regarding the MMHPI Smart Justice Grant with materials in the packet (packet pages 6-8). The 5-year, \$7 million Implementation Grant submitted by MMHPI was awarded in October 2016, leading to the \$1.174 million sub-grant to Dallas Co. in Jan. 2017 to address Intercepts 2-4, and part of 5. Mike gave an update on the current status and upcoming actions related to the award. The beta test of the project began on April 17th, and all the workgroups and sub-teams for the Intercepts 2-4 continue to meet/complete pre-implementation tasks related to procedures/forms, Court orders, space/staff preparations, modified resource allocations, training curriculums/plans culminating a successful implementation launch the week of August 14th. Mike also provided program activity/performance data through August 31st reflecting:

- 5299 or 21% of the 25,375 book-ins screened MH positive (100% of all book-ins were MH screened)
- 848/17% of those screened MH positive were found MHPR Bond eligible by Pretrial, and Court-ordered for assessment (after criminal history and risk review)
- 563/69% of those ruled eligible were fully assessed (most with Recommendations for Standard Intensive or Routine OP)
- 285/31% of those ruled eligible were not assessed (due to refusal, early alternate release, etc.)
- 629/75% of those eligible were disposed by other means prior to presentation to Court
- 219/25% of those eligible were presented to the Court for bond decision
- 185/85% of those presented to the Magistrate were granted bond and released
- 22/9% of the 219 were denied bond and detained, and 12/6% of the 219 presented had an alternate disposition
- 185 or 100% of bond-released defendants were opened by Pretrial (15% to low level, 60% med. Level, and 20% to high level bond supervision).
- 185 releasees (100%) were connected/referred to follow up treatment by ACS and PTS

- 50 MHPR Bond cases were closed by PTS (25% successful/75% unsuccessful)

The next step will be completion of a full, start to finish, flowchart in October 2017 of the processes for everyone to commonly follow, along with a guide, and an agreed set of data elements and definitions for tracking implementation progress and client/system outcomes among all parties. Lastly, MMHPI and the County continue to meet and work with community providers to build up treatment resources related to Intercept 5 for referral and treatment connection upon release. This will soon include randomized assignment into control and enhanced ACT and FACT treatment groups to test new treatment options to reduce risk and increased stability and compliance.

Mike emphasized that these are still initially small numbers, but growing and that we will continue to expand, but in the meantime, the smaller numbers have made it easier for us to address and overcome barriers and problems as they arise. Ultimately, the flowchart and data guide will assist us in sharing information, resolving issues, and tracking program activity, performance, and outcomes.

Dawn McKeehan with MMHPI also presented updates on progress with Intercepts 1 and 5 advising that the City and Meadows have jointly made great strides in setting up the new Intercept 1 pre-arrest diversion protocols, staffing, and resources for the emergency response RIGHT Care Teams with training forthcoming soon, and beta implementation as early as late November. With Intercept 5, all the contracted providers have reviewed and approved new agreements, and training and beta implementation is forthcoming quickly. She was also very complimentary of the identified providers as to their creativity and overall flexibility in preparing for the Intercept 5 implementation.

Lynn and Michaela brought up the importance of sharing data and outcomes. Michaela asked about a data dashboard which is the plan, but much further down the line. Also, lengthy discussion by Lynn, Michaela, Enrique and others about re-arrests, successful diversion and reduced recidivism, and how the homeless are still getting stuck in the system. We all agreed more housing options are part of the plan, and continues to a big issue holding up release considerations.

Lynn, Lee and Mike shared the outcome of the recent follow up meeting with DART on how to better divert the homeless MI clients out of their system and to better service and treatment options that reduce re-arrest on fare violations and criminal trespass. We advised that they agreed to start tracking these super utilizers better to improve diversion and reduce re-arrest. This includes a new contact person at DART who will allow us to add names to their internal list that will permit our clients to have greater consideration and lifting of rider bans for those in the program. They have also agreed to work with us to improve officer and fare enforcer trainings. Dr. Love advised that there are clinics in the Metrocare system that will allow drop offs during business hours for those riding the trains illegally, or causing trouble when doing so. Mike advised that DART will now be working with us much more closely on these issues. Enrique brought up that he is now playing a leadership role in our local Data Driven Justice/Behavioral Health project, and that an integrated data system can help address some of these issues as well. Lee mentioned that the new DART Sight and See phone app can be loaded and used to more rapidly address and de-escalate situations more quickly. It was also brought up that many of us do not have access to any directory of the variety of services and locations available, and it was agreed that a directory needs to be developed and distributed.

John Henry also shared that the efforts within HB 13 will provide an opportunity to apply for part of the \$2.5 million in potential funding of respite services that can also impact this. Joyce Williams also spoke at length about the housing services be built up within the Caruth Grant Intercept #5 which includes the new process for HMIS enrollment prior to jail release. Additionally, she noted that HUD has identified and targeted the super utilizer for service impact which also includes emergency shelter fund and rapid re-housing programs. Lynn completed on the recent attorney homeless training led by Joyce, and Joyce reminded of the next

BHSC Data and Reports - Chief Public Defender Lynn Richardson

Program and Department Updates: The program/outcome data, updates, and workload reports were presented and accepted via relevant dept./agency staff for the SAMHSA Grant, 530 Subcommittee, BHLT/CSP, Public Defenders, District

Attorneys, CJ Dept. Jail reports, as well as provider reports (The Bridge, Metrocare, and IPS), and the various Problem Solving and Specialty Courts (see packet pgs. 7-63 for details).

Laura presented the SAMHSA Grant update along with the data and activities (see packet pg. 7). They are above their target, and beginning the last year of their grant. It was also mentioned that the Specialty Courts will have to be certified to continue services and funding.

Laura Edmonds also presented a summary of current 530 Subcommittee activities and expenses. The semi-monthly September 2017 Committee meeting minutes and report were presented by Laura who also advised the current balance on pg. 10 is \$165,543. Additionally, the FY18 530 committee budget of \$169,047 was briefed and then approved by the committee and is on pg. 12. The 530 Subcommittee approved in September and needs BHSC approval for \$310 expenditure from budget line items for inpatient treatment at Homeward Bound for one MHJD Court participant and a SET incentive approval for \$39.93 in additional funding beyond what is currently available. Motion made and seconded by Harry Ingram/Mike Laughlin. Motion unanimously passed and approved without discussion or objection. Lastly, FY18 request for \$600 in MHJD holiday party incentives from the \$15/client that is already allotted. Motion made and seconded by Leah Gamble/Lee Pierson. Motion unanimously passed and approved without discussion or objection.

Reminder there will be an increase in training opportunities and focus for FY 2018 to include the National Assoc. of Drug Court Professionals Conference coming to Texas.

The 530 Subcommittee will also have their next lunchtime training Delightful Discussions on Friday, [October 27, 2017](#), from 1130-1215pm. It will be held in the in Pretrial Conference Rm. A9 on the 1st floor. The next 530 Subcommittee meeting will be on November 8th at 930am.

CSP stats and metrics for August/September were presented/reviewed by Laura (see packet pgs. 14-27), and they are exceeding YTD outcomes and DY6 metrics with final DY report due for release by October 31st. There continues to be an uptick in the numbers due to the new Caruth MH PR Bonds. Terrell Hospital Connection Project for improved release planning continues to go well.

Charlene and CSP providers continue to communicate with NTHBA to facilitate the transition planning since the care manager and Specialty Court Aftercare Engagement Packages currently go through CSP and as of this year are coordinated through NTBHA. Process continues to go well. Additionally, HHSC has submitted request for 21-month extension of CSP funding with an announcement on that by the end of the current calendar year.

Cottages Update: Census is not full at this time. Referral criteria include multi-bookings, MI diagnosis, and homeless. Also they are permitted to have income, but don't have to meet HUD definition, no sex offender cases, and Arson cases are reviewed individually. DHA processing can take some time in order to process the needed documents, verify homeless status, etc. City Square case workers will interview/screen and help to gather documents, etc.

Jail and hospital movement, pregnant defendants, and homeless and Veteran data and reports were presented by Laura and are found in the meeting packet on pages 27-48. Competency numbers from pg. 27 of the packet, and we have a higher number of those waiting to go to the state hospital recently likely due to more being ruled incompetent to stand trial. She advises they are working hard to get those numbers down, and a lengthy discussion and presentation was made about the recent efforts to start up a jail-based competency program via SB 292 via Caruth seed money along with leadership and assistance of Parkland Hospital. Pat Jones explained that Caruth plans to match local money dollar for dollar, and this will be a great improvement to the local process and situation. Many communities do not want to lengthen the jail stay for this population, but Dallas has recognized that they are in the jail already, and this will at least allow them to be treated and possibly restored while waiting so long for a state hospital bed. This will help the many that do not qualify for outpatient competency. We will know for FY18 quarter #2, FY 19 (Sept. 2018) will be a new set of money to requalify for then. Janie Metzinger pointed out that HB 13 is more for community based mental health services, and SB292 is more to address the criminal justice system and to reduce the jail revolving door, particularly high

utilizers. Pat advises that DSO is looking at the physical space changes needed, staffing, etc.. Laura mentioned that they will remain on the state hospital list simultaneous to their participation in the new Jail Based competency. Pat mentioned that the target is for more of the “chronic” cases vs. “acute, and that they will have mechanisms to minimize use of forced medications. Pat also advised that some will stabilize enough to be released to outpatient competency as well, and that this will be time-limited based on how much progress the patient has made in the jail-based program with the goal of resolving their status without having to move to the state hospital if at all possible. Laura also advised that there will be strong screening of past treatment history to reduce the number stalling out in the process, and Dr. Love mentioned that they should be monitored to ensure they move to the hospital when bed opening occurs if they are still in need of those services. Leah also mentioned that all these things are within the on-going discussions between the lawyers, Parkland, County, the Court and others as to how this is being designed and how it will be used. Lee Pierson with DA Office noted that all competency cases will be reviewed individually as to whether they will qualify and allowed to be accepted into this program based on their criminal history, medical/mental condition, and current case details. They will also review those who may qualify or be converted instead to the conditional dismissal program, civil commitment or other. This also includes those waiting for NGBI (not guilty by reason of insanity) review at a maximum state hospital facility (e.g., Vernon State Hospital). Terrell State Hospital has a lag in acceptance causing the wait list to increase.

John Henry and Janie Metzinger noted that \$300 million is authorized statewide to improve existing, or build new, state hospitals, and/or to buy local psychiatric hospital beds as space is available (and doctor availability), but that it will take years to address this.

Laura noted that the count of pregnant patients (pgs 28-29) is trending down recently and sits at 64 in September. Laura gave compliments to Nexus Recovery Center for their continued quick acceptance of pregnant patients, and their continued great work with them. Some of these are for probation/parole violations, and most of them have an MI diagnosis per the Stella data and MH screenings.

Veteran's prevalence continues to under report pg. 32 (263), and they continue to rapidly cycle out of the jail making it hard to get the designated staff catching them before release due to limited staffing. Small number of these go to the Veteran's Court. Dr. Love noted they have a state grant for Intensive Outpatient Services for veterans and they are waiting for referrals. They will accept all but dishonorable discharge, are using the “Seeking Safety Curriculum”, and it will include family services and peer support components. Additionally, treatment needs do NOT have to be service trauma related. Serena McNair noted that it is also important to use the Courts to flag the Veterans (via Jail, CSCD, Courts, etc.) in need of attention and enrollment in the Veterans programs. Lynn and Jill noted that their will generally not be a limit as to what type of offenses are accepted, but that it will target resources to the higher risk with some funding set aside to assist via 2 contracted vendors to help address housing issues. Serena McNair and others noted that we are still missing too many of these and other specialty populations since they are getting missed either at the early jail identification process, or in the Courts (pre adjudication), and so when CSCD gets them it is much later in the process, and lots of opportunities are missed for Veterans and other populations. Everyone agreed the process needs to be improved.

Homeless numbers are on page 36, and show an average stay of 43 days with 313 unique clients being served. It was noted that getting IDs is still an issue, and several mentioned Police Department based programs around the state in connection with shelters have been helpful on this issue. Joyce White advised they had a homeless meeting last week noting that once they are out of homeless status for 90 days they are being removed from the list for services, and they are working to address this issue.

Monthly CCQ match: Mike Laughlin provided the MH prevalence which according to TLETS is still high 64% (packet pgs. 39-40). The Jail MH screen is still too inclusive leading to too many false positives, and data sources are still being

reviewed with IT to refine the data feeds and hopefully resolve the issue soon. The NTBHA feed is also being added soon to the data collection which should help in more accurate triaging and identification.

All other department and agency data reports and program updates were accepted as read, and can be reviewed in the meeting packet.

Lynn Richardson presented the **Public Defender MH case data and reports (pgs. 41-42)** noting they will soon have the Smart Justice numbers added also. They are now also closely tracking all specialty court participants. No other comments at this time.

Lee Pierson provided the **DA data updates and report (pgs 43-47)** noting that Cresta Garland is back in the Courts, and Shelley Fox is back in the Diversion Courts. Additionally, Blake Reyna and Ron Wright are added to handle felony courts and will be starting to attend next month.

Provider Reports

Kelly Lane from The Bridge reported their numbers (pg. 48) are pretty consistent with no changes, or comments/concerns expressed. DHA is taking briefings again for placements for the first time since November 2016.

Metrocare: Crystal Garland presented Metrocare data/reports (pg. 49-50) advising that Pride numbers remain low but is being addressed. DDRC remains at full capacity, and Atlas is picking back up.

IPS: Supplemental agenda insert was provided by Enrique/IPS. He reminded everyone that service slots are continually available, acknowledging that their service numbers have grown but their service capacity has not always grown equally as fast. He reminded everyone that they can communicate with any admission/intake needs by phone or at www.ipsrecovery.com. He also mentioned that much of the recent growth in service provision has been from psychiatric services, detoxification, and MAT services. Also, he has noted a reduction in intakes for Hispanic clients, and an increase in Caucasian clients. He also noted that there was a temporary medication funding crisis for about 90 JTC clients with a gap filled with assistance from NTBHA, CSCD, Gateway etc. via the Pharmacy Assistance Program (long process, but worth it and thankful to have it.)

NTBHA: John Henry reported that engagements are up, and some good things are happening with the expansion to include increased capacity for OCR and new money/collaboration to implement SB2 Collaborative locally.

Specialty Courts: Laura presented OCR Court data (pg. 51). It was noted that Governor's Office is no longer funding attorneys for Specialty Courts. DIVERT Court numbers are on (pg. 52/53). Ms. McNair was present and provided the other Specialty Court numbers for post adjudication (pages 54-63) noting that PRIDE Court is down and is at a census of 2, Atlas Court numbers are picking back up, and DDRC remains at capacity. Dr. Love mentioned that Metrocare is their primary MH treatment source, and reminds everyone to identify and refer any potential client with high mental health needs to Metrocare. Enrique commented

Funding: Everyone was again encouraged to keep good track of program/outcome numbers to ensure they are accurate and that your target population makes up most of your slots and program effort.

Announcements

Housing: recent housing training for cross-disciplinary group targeted to domestic violence went very well, and the next one for the attorneys and Judges will be in the Central Jury Room on December 20, 2017, from 1-2pm in the A5 DSO training room.

Shenna and Laura announced the next monthly “Delightful Discussions” brown bag in-service with **Census and Caseloads/Monitoring and Evaluation** on Friday, October 27, 2017, from 1130-1215pm. It will be held in the in Pretrial Conference Rm. A9 on the 1st floor. Desert will be provided with door prizes. RSVP to Shenna via email.

Homeward Bound is moving to their new location at 5300 University Hills, Dallas, Texas 75241 at an uncertain date in November. They already know the renovations and facility license inspection will not be done in time, and they will be shutting down new admissions in late October, and will close down all admissions for 2-3 weeks in November to finish preparing and passing the facility before re-opening it. Undated information will be provided soon on these details.

Adjournment

The meeting was adjourned by Lynn Richardson at 950am. The next bi-meeting is set for Thursday, December 21, 2017 at 830am in the same location. Reminder was provided to everyone to submit their monthly stats to Mike Laughlin via email by the 2nd Friday of each month for distribution.



Crisis Services Project

CSP Total

DY7 CSP Monthly Report_No Graphs

Last Refresh: 11/21/17 at 8:24:36 AM GMT-06:00

	Past Year Avg	2017-10	Average:	Sum:
Total Service Episodes:	808	840	840	840
Total Unique CID:	630	829	829	829
Total Unique SID:		829	829	829
% Change to DY 4 by CID		131.59%		

<u>Total Encounters by Type:</u>		2017-10	Average:	Sum:
Triage		840	840	840
Care Coordination		2,660	2,660	2,660
F2F Encounter		397	397	397
Sum:		3,897	3,897	3,897

<u>F2F Encounter</u>		2017-10	Average:	Sum:
MHPR Bond		190	190	190
Non-MHPR		207	207	207
Sum:		397	397	397

Triage 12	829
Recidivism 12-12	14
Recidivism 12-12%	1.69%

Triage 6	829
Recidivism 6-6	14
Recidivism 6-6%	1.69%

Triage 6	829
Recidivism 6-12	14
Recidivism 6-12%	1.69%

	October
Year MO	2017/10
Recidivism 12-12	14
Triage 12	829
Recidivism 12-12%	1.69%

	October
Year MO	2017/10
Recidivism 6-6	14
Triage 6	829
Recidivism 6-6%	1.69%

	October
Year MO	2017/10
Recidivism 6-12	14
Triage 6	829
Recidivism 6-12%	1.69%

Transicare Reporting

	Oct-17	Nov-17
Beginning Census	152	149
REFERRALS		
Referred Admitted	33	23
No Admit Client Refusal	0	1
No Admit Criteria	5	2
No Admit Structural	3	2
Pending	31	33
PRIOR PENDING		
Pending Admitted	16	5
No Admit Client Refusal	1	3
No Admit Criteria	1	4
No Admit Structural	17	1
Total Admissions	49	28
Discharges		
Success Transfer	7	6
DC Midterm Disengage	19	14
DC Rapid Disengage	14	14
DC Structural	12	9
Total Discharged	52	43
Active End Of Month	149	134
TSH Outcome Data		
<i>Terrell State Hospital Linkages</i>		
≤7 Connect To Prescriber	4	2
≤30 Connect To Prescriber	0	0
Missed Metric	0	0
Total Released	4	2
Cummulative ≤7 Connect %	100%	100%
Cummulative ≤30 Connect %		
Missed Metric	0	0
Unduplicated Served		
Monthly Unduplicated	204	187

Forensic Diversion Unit (FDU) Report

	Jan-17	Feb-17	Mar-17	Apr-17	May-17	Jun-17	Jul-17	Aug-17	Sep-17	Oct-17	Nov-17
Beginning Census	47	46	50	45	44	47	50	47	50	47	
Number of Referrals Received from CSP											
Adapt	7	8	16	12	20	17	8	15	10	16	
Metrocare	0	0									
Transicare	0	0									
DA	0	0									
Number of Admissions	5	8	10	7	9	8	6	7	6	11	
Number Discharged	0	4	10	3	6	5	9	3	6	10	
Number not admitted due to:											
Client qualifies for ACT	0	0	0	2		4		1		0	
Client qualifies for other programs	1	0	0							1	
Client didn't meet level of need required	0	0	0				1	2	1	1	
Other reasons	0	0	0	3	7	5	1	5	3	3	
Average Service Utilization:											
Average hours seen	7.22	6.46	6.36	6.52	6.72	5.19	6.18	10.32	10.48	11.63	
Encounter Breakdown:											
Face to Face	254	275.25	245	264.25	269	240.28	298.75	324.54	258.16	259.83	
Service Coordination	193	225	215	188	296	210.25	239	181.75	437	628	
Number of clients accessing:											
Emergency Room (medical)	0	0	0		0	0	0	0	1	0	
23-hour observation (psych)	1	1	0	1							
Inpatient (med/ psych)	0	0	0		2	2	1	1	1	0	
Jail book-in	10	2	0	1	5	5	2	5	2	0	
Reasons for Discharge:											
Graduate		0	0		1	1	0	1	1	0	
Client Disengagement	2	3	0	3	3	1	7	2	3	5	
Extended Jail stay (case-by-case basis)		0	0		1					5	
Other Intervening factors		1	0	2	1	1	2	1	5	1	
End of Month Stats:											
Number of Active FDU clients end of month	46	50	48	44	47	50	47	50	47	47	
Number of Unique Consumers	2	0	2	0	47	50	47	50	47	47	
# of clients waiting to be released from jail	11	12	15	12	14	9	8	6	9	15	
Average Length of stay on FDU (month)	12.27	11.38	7.72	8.06	6.33	5.54	5.63	5.99	7.01	6.57	
Maximum Census	46	46	46	46	46	46	46	46	46	46	

NOVEMBER 2017 Monthly Report

Dallas County Crisis Services Program	Program Specific and Systems Update	Summary of NTBHA's Monthly Activities	Action Items/Concerns
1	Adapt Community Solutions (ACS) – Targets member released from jail using ACS to ensure continuity of care	Conducted case consultations on approximately 18 referrals.	Not Applicable
2	Transicare Post Acute Transitional Services (PATS) – Targets high utilizers released from jail with more intensive need to ensure continuity of care	Provided case consultation and clinical support during PATS/FACT Huddle Calls	Not Applicable
3	ACT Forensic Diversion Unit (FDU) – Provides ACT services for high utilizers of the legal system. Responsible for approving evaluations of FDU referrals and FDU oversight	Clinical review of cases for appropriate LOC recommendations on 7 FDU referrals, 3 of which were approved for FDU assessment.	Not Applicable
4	Caruth Smart Justice	No documented activities during this reporting period.	Not Applicable
5	CSP – Cottages Project – Housing complex of 50 cottages that provides housing, mental health assessments and counseling for clients categorized as high utilizers of MH and judicial systems	22 candidate cases reviewed Participated in Selection Committee meetings where individuals were considered for the program.	Not Applicable



DALLAS COUNTY
BEHAVIORAL HEALTH LEADERSHIP TEAM

BHLT Meeting Supplemental Packet

December 14, 2017

**Dallas County Behavioral Health Leadership Team (BHLT)
Adult Clinical Operations Team (ACOT) Committee Meeting
November 2, 2017**

Attendees: Charlene Randolph (Co-Chair, Dallas County), Chad Anderson (Metrocare), De-An Roper (Transicare/IPS), Laura Edmonds (Dallas County), Mary Ann Niles (Medical City Green Oaks), Dawn McKeehan (MMHPI), John Henry (NTBHA), Allie Yun (IPS), Enrique Morris (IPS), Amy Cunningham (Child and Family Guidance), Ellen Duke (Hickory Trail Hospital), Walter Taylor (NTBHA), Homer Norville (DFR MCHP), James McClinton (MDHA), Jennifer Torres (Metrocare), Jarrod Gilstrap (Dallas Fire), Janie Metzinger (MHA)

Welcome and Introductions

- All attendees were introduced, including all new attendees
- Charlene informed attendees that Sherry Cusmano was stepping down as ACOT chair, and that Mary Ann Niles was filling in for Sherry for this meeting only.
- The meeting notes from the previous month's meeting were reviewed and approved.

Presentation on FACT/ACT Services

- *IPS/Transicare*
 - Enrique Morris provided an overview of the IPS/Transicare FACT team (Forensic Assertive Community Treatment).
 - He explained that the FACT team targets clients who meet the criteria for level of care 4 treatment, and who have higher criminogenic needs.
 - Enrique explained that their FACT team underwent a TMACT fidelity review from MMHPI and he provided some highlights from this review.
 - De' An Roper gave an overview of how the client's criminogenic needs are addressed through the incorporation of Risk Need Responsivity (RNR) interventions. She went on to provide an overview of the curriculum that is utilized for treatment interventions.
- *Metrocare*
 - Chad Anderson presented on the Westmoreland ACT team that is part of the Caruth Initiative expansion.
 - He provided an overview of their baseline fidelity review completed by MMHPI and stated that his ACT team is close to being a full team.
 - He explained that each ACT team under TMACT has 8 QMHPs, 1 LPC, 1 LCDC, 1 nurse, 1 medical assistant, 1 clinical manager, and 1 part-time prescriber.
 - This ACT team currently has a census of approximately 100 clients, and with Caruth, their capacity can expand to up to 125.
 - He elaborated on the various successes and benefits that clients receive from ACT level services.
- *Child and Family Guidance (CFG)*
 - Amy Cunningham from CFG presented on the changes that were made to their ACT teams through the incorporation of TMACT. She explained that TMACT sets higher performance standards through enhanced assessment of recovery-orientation, evidenced-based practice, and teamwork. This is more extensive than the previous DACTS model that was used to measure ACT teams.
 - Amy explained their current referral process and eligibility criteria.
 - Discussion was had on the Caruth referral process that occurs through Adapt Community Solutions (ACS). CFG reports that they receive very low referrals from ACS, and Chad Anderson confirmed that his team also receives low ACS referrals. Discussion elaborated

on the difference between ACS assessment recommendations and the recommendations gained from the completion of the ANSA assessment at the clinic.

Update on Smart Justice Program

- Dawn McKeehan from MMHPI reported that training for the multi-disciplinary team for Intercept 1 will be taking place on 11/15/2017. MMHPI is also working on finalizing the contract with Parkland for social work services for Intercept 1. A beta launch for Intercept 1 will occur from November 29th-December 14th, 2017.
- She provided a summary of the Intercept 2-4 meeting that took place on 11/6/2017.

Nominations for new ACOT Chair

- Discussion amongst the group occurred regarding selecting a new ACOT chair in replace of Sherry Cusmano.
- It was decided that a vote would occur via email to close prior to the next BHLT meeting on November 9, 2017.
- Jennifer Torres proposed that a discussion be had at a future meeting about limiting the term of the ACOT chair.
- An email vote did occur after the meeting and Walter Taylor (Chief Strategy Officer, NTBHA) was elected as the new ACOT Chair.
- Janie Metzinger offered to host the next ACOT meeting on December 7, 2017 at Mental Health America.

Legislative Update

- Janie Metzinger (MHA) provided an overview of the latest impact from legislative changes. She informed the group that Speaker Strauss appointed a special committee on substance abuse and opioid abuse. She also stated that the President's committee on substance abuse and opioid abuse just published their recommendations, and this will be discussed at the next COMI meeting.

Other

- The next meeting will take place on Thursday, December 7, 2017 at Mental Health America. Lunch will be provided for a \$5 donation per attendee.
- Dr. Amanda Smith and Princess Smith from Metrocare will be presenting on IDD services.

Meeting was adjourned at 1:10pm.