

Dallas County Behavioral Health Leadership Team

Thursday, December 13, 2018

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 8, 2018*
- III. NTBHA Update
- IV. The Stepping Up/ Caruth SMART Justice Initiative Update
- V. Dallas County Behavioral Health Housing Workgroup
- VI. 1115 Waiver Crisis Services Project Update
- VII. Legislative Update
- VIII. Funding Opportunities
 - Cottages Update
 - SAMHSA Residential Treatment Grant Update
 - Community Courts Grant Update (Public Defender's Office)
- IX. Upcoming Events and Notifications
- X. Public Comments
- XI. 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, PD Mental Health Stats and North Texas Behavioral Health Authority*. Unless action is required, there will be no verbal updates from those committees.



Dallas County
Behavioral Health Leadership Team
Meeting Notes
Thursday, November 8, 2018

<https://www.dallascounty.org/departments/criminal-justice/bhlt/>

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 asked first-time attendees to introduce themselves: Raquel Wilson and Kristen Kubat, City of Dallas Community Court; Chad Aebersoel, NTBHA Director of Forensic Services; Noemi Gonzalez, Dr. Garcia's Office; Karl Berry, Overcomers Outreach with Faith Based Psychiatric Services; Nicole Raphael, Desoto Councilmember.

Review/Approval of Minutes/BHLT Website

The minutes of the BHLT meeting held on November 8, 2018 were included in the meeting packet (pg. 2-4). A motion was made by Doug Denton to accept the minutes and was seconded by Ken Medlock. The committee members voted to approve the minutes with no modifications.

Strategic Planning

Presentation: SAMHSA

Karen Hearod, CDR Region VI Regional Administrator Substance Abuse & Mental Health Services Administration (SAMHSA). SAMHSA's mission is to reduce the impact of substance abuse and mental illness in America's communities. In the United States (US) 18.7 million individuals suffer from a mental health disorder. Among those with a substance use disorder: 3 in 8 struggle with illicit drugs, 3 in 4 struggle with alcohol use, 1 in 9 struggle with illicit drugs and alcohol, and 1 in 4 have a serious mental illness. A household survey was conducted and they saw a significant decrease from 12.7 million misusers of drugs and/or alcohol in 2015 to 11.1 million. This is not a large decrease; however, the numbers do seem to be declining. Out of the 11.1 million, 6.3 were misusers of hydrocodone, 3.7 of oxycodone and 245,000 were fentanyl. Opioids are narcotics that act on the opioid receptors in the brain to produce morphine-like effects. Opioids are used medically for pain relief. Symptoms of opioid use disorders include a strong desire for opioids, inability to control or reduce use despite interference with major obligations or social functioning, use of larger amounts over time, development of tolerance, and spending a great deal of time to obtain and use them. Commander Hearod went over Adverse Childhood Experiences (ACEs) and its history. ACEs have been linked to risky health behaviors, chronic health conditions, low life potential, and early death. Some of the consequences of ACEs are higher risk of alcohol use as adults, continued tobacco use during adulthood, increased prescription drug use and lifetime illicit substance use, substance dependence, and self-reported addiction. Commander stated that research has indicated that persons with substance abuse disorders have: Nine times greater risk of congestive heart failure, 12 times greater risk of liver cirrhosis, and 12 times the risk of developing pneumonia. The approved medications for Medicated Assisted Treatments (MAT) by the FDA medications are the following: Naltrexone, blocks effects of opioids; methadone, long acting, once daily, opioid from specially licensed programs; and buprenorphine/naloxone, long acting, available by prescription only. These medications relieve withdrawal symptoms and psychological cravings that cause chemical imbalance in the body. MAT programs provide a safe and controlled level of medication to overcome the use of an abused opioid. CDR Hearod stated that research has shown that when provided at the proper dose, MAT medications have no adverse effects on a person's intelligence, mental capacity, physical functioning and employability. CDR Hearod informed the members despite that the National Institute of Health says there is "unequivocal" evidence of MAT's effectiveness and safety, many myths persist about MAT. As a result, people are denied potentially lifesaving addiction treatment. Becca Crowell stated that Nexus is currently having issues with CPS approving MAT because it is perceived to

be just another drug. CDR stated that they held a TRI- Regional meeting with the Director of Child Protective Services (CPS), Director of Behavioral Health and others regarding MAT. CDR stated that she would be glad to attend any future meetings and share the evidence based research if that would help. CDR went on to discuss MAT to MARS (medication assisted recovery), which consist of: counseling, developing coping skills/relapse prevention skills, establishing recovery supports and social supports to help bring people back into a healthy community, assist with housing, residential treatment facilities, employment, and vocational training. Studies have found that people in MAT are 75% less likely to die from opioid related misuse/overdose. CDR went on to discuss overdose reversing medications (naloxone), the signs and symptoms of an opioid overdose and what to do if you think someone is overdosing. The Surgeon General of the United States Public Health Service emphasizes the importance of the overdose-reversing drug naloxone for patients currently taking a high dose of opioids. For additional information not provided in the packet on evidence based prevention, treatment, and recovery please visit <https://knowledge.samhsa.gov/resources/treatment-opioid-use-disorder>.

NTBHA Updates:

Carol Lucky, CEO of North Texas Behavioral Health Authority, acknowledged that NTBHA has received all of their state funding. The Extended Observation Unit (EOU) is fully operational at Parkland at this time. The crisis residential beds are full at Homeward Bound with 31 beds being its capacity. NTBHA has conducted two Multicultural Trainings with 40 individuals in attendance; NTBHA has also had 4 staff attend train the trainers training. Ms. Lucky requested that after signing up for the trainings if you are unable to attend please let them know, so that someone else would have the opportunity to attend. Keta Dickerson requested a more condensed version of the training, however, Ms. Lucky stated that because it is more evidence based the trainings are 2-3 days. However, she also stated that she would have her staff to look into other options in order to provide a condensed cultural competence training. NTBHA is currently serving 37,000 individuals in the community a month. The state requires them to serve 29,000 a month which puts NTBHA over the mark. Ms. Lucky went on to announced that the State released \$699,000 in Tenant Based Rental Assistance (TBRA) funding (housing). NTBHA was able to secure \$370,000 or 53% of the state-wide pool for individuals in Dallas County. They have had 12 families (with disability) approved and moving through the process. The families will receive approximately \$30,000 (over 2 years) in support. The Commissioners requested that Ms. Lucky generate information regarding the appropriation of funding, where the facilities will be located and what is being offered in the community. Ms. Lucky stated that she would have this information available for the December BHLT meeting.

Stepping Up Initiative Update/Caruth Grant:

Ron Stretcher, Senior Director of Systems Management, MMHPI stated that all projects continue to move forward and updates were included in the packet on pages 5-9.

Behavioral Health Housing Work Group (BHHWG) Update:

Commissioner Daniel stated that BHHWG continues to look at ways to impact housing in the community. Commissioner Daniel stated that shelters are preparing for colder inclement weather. One of the hurdles is working with faith-based organizations who wish to open their spaces to accommodate individuals during inclement weather. The Bridge has been approved by the Dallas City Council to house fifty more individuals. The Salvation Army of Plano applied for a specialty use permit to shelter 70 additional individuals. The St. Jude Project held their grand opening in October and the project currently has 104 efficiency units. Commissioner Daniel also acknowledged that the amount of data that the committee has been receiving for all the programs and courts that they which had not received in the past. Commissioner Daniel also announced the Point & Time Count (PIT) is scheduled for January 24th and more information will be forthcoming.

1115 Waiver Crisis Services Project (CSP) Update:

Joyce White, Crisis Services Project Manager (CSP), reported that the October 2018 reporting has been submitted and payment should be processed in January 2019. Staff is currently working on 2019 DSRIP reporting as well as return investment and cost benefit analysis. Program evaluations for all CSP contractors are being completed and will start on Monday, November 12th. Staff is also working on sustainability planning for CSP for when the funds go away.

Legislative Update

- Janie Metzinger, NTBHA Legislative Coordinator, stated that as of Tuesday, November 6th, there are 12 new representatives for the Delegation (10 Dallas, and new members for Kauffman & Navarro Counties). Ms. Metzinger and Ms. Sabrina are currently working on the text and hyperlinks for HR6 which will include an index in the back.

Funding Opportunities:

- **Cottages Update:**

Jennifer Jaynes, Cottages Director, reported that there were 5 evictions (3 were due to owing excessive rent payments in the amount of \$1500, 1 neighbor committed threats toward staff, and 1 neighbor a non-lease was filed for selling drugs). Cottages currently have 7 on the waiting list. Since the evictions, there has been a decrease in EMS transports, ER visits, jail admits, and medical and psychiatric visits. Cottages are currently revisiting the candidate selection process. The new process should be ready for the Cottages Board for review by December.

- **SAMHSA Grant Update:**

Keta Dickerson, Dallas County Specialty Court Manager, reported that Specialty Courts will start accepting referrals for the SAMHSA Grant starting next month and providers will start receiving emails from Teresa Saulsberry, Treatment Coordinator, for referrals. Ms. Dickerson also reported that the Governor's Office has approved Opioid Specialty Courts.

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

Lynn Richardson, Dallas County Chief Public Defender, had no updates to give on Community Courts. The PD's office submits Mental Health Court Stats monthly which is included in the supplemental packet on page 1.

Adjournment:

The meeting was adjourned at 11:01 am.

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					
	Jail Behavioral Health Services	1	Waseem Ahmed	Waseem Ahmed	
	City of Dallas	1	New Seat	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			Open
	School Liaison	1	New Seat	Dr. Michael Ayoob	
	Category Subtotal	13			
Residential Facilities					
	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					
	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	Dr. Rebecca Corona	
	Psychiatrist Leadership Organization	1	Judith Hunter	Judith Hunter	
	Psychiatry Residency	1	Adam Brenner	Dr. Ibrahim Hicham	
	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					
	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 Provider		CMHP		

Month	Year	Initial MH #	Eligible	# Signed orders	Presented	Denied	Other	Granted	Misdemeanor	Felony
January	2018	1284	162	211	67	6	3	58	38	44
February	2018	1262	150	187	51	8	3	40	19	37
March	2018	1271	175	235	42	13	1	28	18	20
April	2018	1384	181	234	53	6	1	46	25	38
May	2018	1457	243	323	84	14	0	70	45	45
June	2018	1455	214	301	60	13	1	46	36	32
July	2018	1438	223	296	69	11	1	57	39	35
August	2018	1509	230	284	80	12	0	68	45	55
September	2018	1303	177	247	56	12	0	44	29	33
October	2018	1317	175	236	42	12	1	29	12	30
November	2018	1220	136	169	42	6	0	36	21	27
TOTALS		14900	2066	2723	646	113	11	522	327	396

Yellow = Court Proceedings

Other = Granted MH Bond in court released by other means prior to PR bond posting

Misdemeanor and Felony totals calculated for individuals APPROVED & RELEASED on MH Bond

2017 TOTALS

APR - DEC	10794	1568	1609	449	36	15	398	296	277
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Note:

April-October 2017: Misdemeanor and Felony totals included all cases presented for bond (approved and denied)

November 2017-Current: Misdemeanor and Felony totals included only cases APPROVED for bond

April 2017 - Present

APR - DEC	25694	3634	4332	1095	149	26	920	623	673
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Levels

Month	Year	Level 1	Level 2	Level 3
January	2018	13	30	15
February	2018	6	22	12
March	2018	5	11	12
April	2018	5	30	11
May	2018	16	44	10
June	2018	7	27	12
July	2018	10	30	17
August	2018	6	46	16
September	2018	3	28	13
October	2018	3	17	9
November	2018	7	17	12
TOTAL		81	302	139

Total number of levels approved, does not account for discharged/closed out files.

Discharges

Month	Year	Successful	Unsuccessful	Other
January	2018	20	25	0
February	2018	15	24	0
March	2018	15	22	0
April	2018	21	30	0
May	2018	15	25	1
June	2018	16	25	1
July	2018	15	29	2
August	2018	11	30	0
September	2018	17	35	0
October	2018	21	41	1
November	2018	18	27	0
TOTAL		184	313	5

April 2017-Present: Total Approved 920

April 2017-Present: Total Discharges 656

**Successful-239 (36.4%); Unsuccessful-410 (62.5%); Neutral-7 (0.010%)

264 - Active Cases 11/30/2018

Months	IMPLEMENTATION LAUNCH - Reasons for outcomes for all ordered assessment/not presented to Mag. [from column E on sheet 1] ²																	
	Attorney refusal	Case deferred	Chrages dropped	Competency Concerns	Contested and detained	Court plea/disposition	Current MH Bond	Declined assessment	Dry writ release	Exc. per CJ criteria	Homeless/no reference	Other	Other PR Bond	Posted Bond	Reference declined residence	Refused to participate	Unable to verify residence/contact	Total ³
AUG '17	0	0	0	4	0	0	0	24	0	13	0	24	0	32	0	9	34	140
SEP '17	0	0	0	11	0	0	0	22	0	5	0	10	0	24	0	10	44	126
OCT '17	0	0	6	4	0	1	0	16	1	15	15	5	3	35	5	9	11	126
NOV '17	0	0	5	5	0	4	0	21	0	13	19	0	2	39	14	6	10	138
DEC '17	0	0	1	5	0	4	0	10	0	2	15	0	4	24	8	6	16	95
JAN '18	0	0	7	4	0	6	0	22	0	6	8	1	1	21	12	10	8	106
FEB '18	0	0	1	7	0	2	0	23	0	5	10	1	3	19	4	10	3	88
MAR '18	0	0	3	3	0	6	0	20	0	14	11	4	8	20	14	19	8	130
APR '18	0	0	2	4	0	5	0	18	0	7	16	0	7	16	18	13	10	116
MAY '18	0	0	3	5	0	6	0	25	0	4	23	3	6	35	21	10	14	155
JUN '18	0	0	3	13	0	3	0	26	1	8	17	3	2	30	19	12	15	152
JUL '18	0	0	1	5	0	0	1	25	0	5	23	3	2	26	24	13	12	140
AUG '18	0	0	0	9	0	1	1	22	2	11	19	8	4	41	9	16	6	149
SEP '18	0	0	0	3	0	1	0	24	0	10	18	5	4	26	12	13	4	120
OCT '18	0	0	2	4	0	3	0	25	1	11	15	1	2	29	14	12	11	130
TOTAL	0	0	34	86	0	42	2	323	5	129	209	68	48	417	174	168	206	1911

Months	IMPLEMENTATION LAUNCH - Percentages of Reasons for outcomes for all ordered assessment/not presented to Mag. [from column E on sheet 1]																	
	Attorney refusal	Case deferred	Chrages dropped	Competency Concerns	Contested and detained	Court plea/disposition	Current MH Bond	Declined assessment	Dry writ release	Exc. per CJ criteria	Homeless/no reference	Other	Other PR Bond	Posted Bond	Reference declined residence	Refused to participate	Unable to verify residence/contact	
AUG '17	0%	0%	0%	3%	0%	0%	0%	17%	0%	9%	0%	17%	0%	23%	0%	6%	24%	
SEP '17	0%	0%	0%	9%	0%	0%	0%	17%	0%	4%	0%	8%	0%	19%	0%	8%	35%	
OCT '17	0%	0%	5%	3%	0%	1%	0%	13%	1%	12%	12%	4%	2%	28%	4%	7%	9%	
NOV '17	0%	0%	4%	4%	0%	3%	0%	15%	0%	9%	14%	0%	1%	28%	10%	4%	7%	
DEC '17	0%	0%	1%	5%	0%	4%	0%	11%	0%	2%	16%	0%	4%	25%	8%	6%	17%	
JAN '18	0%	0%	7%	4%	0%	6%	0%	21%	0%	6%	8%	1%	1%	20%	11%	9%	8%	
FEB '18	0%	0%	1%	8%	0%	2%	0%	26%	0%	6%	11%	1%	3%	22%	5%	11%	3%	
MAR '18	0%	0%	2%	2%	0%	5%	0%	15%	0%	11%	8%	3%	6%	15%	11%	15%	6%	
APR '18	0%	0%	2%	3%	0%	4%	0%	16%	0%	6%	14%	0%	6%	14%	16%	11%	9%	
MAY '18	0%	0%	2%	3%	0%	4%	0%	16%	0%	3%	15%	2%	4%	23%	14%	6%	9%	
JUN '18	0%	0%	2%	9%	0%	2%	0%	17%	1%	5%	11%	2%	1%	20%	13%	8%	10%	
JUL '18	0%	0%	1%	4%	0%	0%	1%	18%	0%	4%	16%	2%	1%	19%	17%	9%	10%	
AUG '18	0%	0%	0%	6%	0%	1%	1%	15%	1%	7%	13%	5%	3%	28%	6%	11%	4%	
SEP '18	0%	0%	0%	3%	0%	1%	0%	20%	0%	8%	15%	4%	3%	22%	10%	11%	3%	
OCT '18	0%	0%	2%	3%	0%	2%	0%	19%	1%	8%	12%	1%	2%	22%	11%	9%	8%	
AVG %	0%	0%	2%	5%	0%	2%	0%	17%	0%	7%	11%	3%	3%	22%	9%	9%	11%	

Months	Assessments Ordered - Results				Assessment Recommendations (LOCs) ³										Outcomes
	Assessments Ordered	Assessment Completed	Assessment not completed ¹	Assessment halted - competency concerns ²	IDD Services	Jail-based Psy. Services	LOC 15 / Standard IOP	LOC 2 / Standard IOP	LOC 3 / Standard IOP	LOC 4 FACT / Standard IOP	LOC 4 ACT / Standard IOP	LOC 5 / Standard IOP	Routine Outpt.	No BH Svs. Indicated	
JAN - DEC 2018															
JAN '18	164	120	41	5	2	7	31	28	20	4	1	2	13	10	58
FEB '18	140	89	47	5	0	8	28	14	18	2	2	3	4	7	40
MAR '18	174	116	54	3	0	4	50	9	34	2	2	0	5	1	28
APR '18	180	159	40	5	4	8	70	24	32	3	4	4	3	5	46
MAY '18	237	203	66	4	1	8	96	30	44	4	6	0	6	6	70
JUN '18	222	176	64	13	0	15	86	21	28	8	3	0	5	5	46
JUL '18	211	177	70	5	0	7	72	18	46	2	11	0	6	5	57
AUG '18	228	186	72	9	0	12	91	23	39	0	7	0	9	2	68
SEP '18	187	141	71	3	0	5	54	21	35	0	10	0	5	7	44
OCT '18	160	111	67	4	1	5	49	10	28	0	6	0	3	5	29
TOTAL	1903	1478	592	56	8	79	627	198	324	25	52	9	59	53	486

Dallas County Behavioral Health Housing Work Group
Dallas County Administration, 411 Elm Street, 1st Floor, Dallas Texas 75202
November 28, 2018 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; Laura Edmonds, DCCJ; Blake Fetterman, Salvation Army; Yvonne Green, Parkland Jail Health; Jennifer Jaynes, The Cottages; Mike Laughlin, Dallas County; Thomas Lewis, Dallas County; Atoya Mason, VA, VISN 17; Jim Mattingly, LumaCorp, Inc; Janie Metzinger, NTBHA; Ikenna Mogbo, Metrocare; Sibi Powers, NTBHA; Kimberly Rawls, Diana Romagnoli, MDHA; DCCJ; Keri Stitt, Promise House; Ron Stretcher, MMHPI; Joyce White, DC; Justin Vander, Prism Health North Texas; Erin Moore, Dallas County; Candice Lennox, Dallas County; Wyndll Robertson, Dallas County; Tzegabrhan Kidane, Dallas County

CALL TO ORDER: Minutes approved with no changes.

GOVERNANCE

Dallas Area Partnership to End and Prevent Homelessness: Dr. Theresa Daniel, Commissioner
Commissioner Daniel reported that the partnership is discussing how to become more efficient.

Federal and State Legislative Update: Janie Metzinger, North Texas Behavioral Authority (NTBHA)

Ms. Metzinger reported that the summary of combined committee hearings was ready to be sent out to the group. Additionally, the Texas State Legislature has filed over 600 bills this session and she has pulled the 35-40 bills directly pertaining to mental health and substance abuse. She will forward a synopsis to the group.

Ms. Metzinger also mentioned all funding for mental health will be in HB1 and SB1 which are the budget bills. Ms. Metzinger shared that the funds should be disbursed almost immediately upon signing. Ms. Metzinger said she would share her analysis of the bills in addition to attaching an electronic copy of the bill. These bills include provisions for counseling services for children formerly under Child Protective Services and those formerly homeless who now attend college.

Bills included are:

- A bill allowing counties to do an 1115 waiver to expand Medicaid within that county giving many more people access to mental health and substance abuse assistance. In addition, another bill would extend Medicaid services to post-partum women to 12 months.
- State Senator Nelson, along with four co-sponsors, is sponsoring a bill which would create the Texas Mental Health Consortium. The consortium will serve to expand mental health services and workforce throughout the state in coordination with institutions of higher learning and community mental health leaders and professionals. Additionally, they will look to make current and future services more effective for those they serve.
- HB75 and SB105 which create a needle exchange pilot and a Mental Health Jail Diversion Crisis Stabilization Unit pilot for Bexar County, respectively.
- Ron Stretcher mentioned an additional bill they are trying to file that would make determining the dangerousness of mental health individuals more efficient and accurate.

Ms. Metzinger will be adding her tracking chart to her website with links to the bills and a brief summary on the contents of each.

Commissioner Daniel mentioned that November was National Homelessness Awareness Month and a resolution was presented at the previous Commissioner's Court.

DEVELOPMENT ACTIVITIES

Crisis Residential and Respite Services: Blake Fetterman, Salvation Army

Ms. Fetterman issued an update on discussions with Parkland over recuperative care. There was a recent meeting with Parkland's operations and clinical director, in which they visited John Peter Smith Hospital in Fort Worth.

Ms. Fetterman explained why the Salvation Army Risk/Legal departments and John Peter Smith, who is responsible for funding, decided on recuperative care over respite care. The former has less stringent requirements and regulations than the latter, but is still comprehensive in the level of onsite care given to patients. There are currently no new sources of funds for this program.

RESOURCES

Shelter Discussions: Blake Fetterman, Salvation Army

Commissioner Daniel spoke about the letter on inclement weather that went out to the City of Dallas, Mayor Mike Rawlings, and homeless programs which concerned Dallas' four track plan on homelessness. It clarified the effect that Track 2 not being supported had on the various shelters' (mainly churches) ability to provide adequate shelter from the colder weather. Commissioner Daniel thanked members of the Housing Workgroup for backing the letter and helping to make sure it reached the proper individuals. She will be following up with the City of Dallas.

Ms. Fetterman briefed everyone on the new guidelines on inclement weather sheltering. Shelters would begin opening their doors once temperatures were at or below 36°. Three consecutive nights with temperatures at or below 36° would trigger continuous inclement weather sheltering, in which spaces would stay open for the duration of that colder weather. This will continue until March 1st, 2019. In addition, there are four churches which have chosen to open their doors during freezing weather in order to provide additional spaces.

Ms. Cassandra Owens introduced herself and her organization, Torch, which is a homeless organization operating in Dallas.

North Texas Behavioral Health Authority (NTBHA): Janie Metzinger, NTBHA

Ms. Metzinger reported Tenant Based Rental Assistance (TBRA) applications were still open and can still be submitted to housing@ntbha.org. The TBRA funding is available for up to two years for those who have a recovery plan.

Housing Navigator: Joyce White, Dallas County (DC)

Ms. White reported that referrals to St. Jude have been made but some are being rejected because of how their priority system works. St. Jude has implemented a new system of operations as previously discussed. However, some staff members have not embraced the newer guidelines and are still working under the older methods. There is an upcoming meeting with St. Jude to discuss concerns and barriers to housing.

DHA Housing Solutions: No report.

Caruth Smart Justice: Ron Stretcher, MMHPI

Mr. Stretcher reported the City of Dallas is expanding the Right Care team model to other areas and Irving is close to having a Right Care team. He added that the NTBHA and Parkland relationship has, so far, been positive.

The SB292 budget is allowing expansion of access to Assertive Community Treatment (ACT) and Forensic Assertive Community Treatment (FACT).

Mr. Mike Laughlin talked about the consensus on using the Arnold risk assessment tool. There is a need to validate and normalize the tool for local usage which is in process. Homeless individuals continue to be a major challenge and they are hoping this tool will make things more efficient in that regard. Discussions are currently taking place on how to better identify gaps and resources to bridge those gaps. The Cottages staff has agreed to help organize those resources.

Ms. Jennifer Jaynes says they have put together a group of individuals to gather information related to the criminal justice issues that target homeless shelters specifically.

Ms. Blake Fetterman talked about targeting their efforts toward community need and that the Salvation Army has a very large criminal justice program encompassing 255 beds. Their aim for those beds is local need as opposed to statewide.

Mr. Stretcher offered to connect Ms. Fetterman with people involved with Right Care to further the Salvation Army's goals. Additionally, Mr. Stretcher noted a low show-rate for individuals released on mental health bonds as only a third return for their court dates. Mr. Mike Laughlin responded that they were working on better communication methods and that the Courtminder system should start to impact those numbers.

PROJECTS AND INDUSTRY UPDATES

Coordinated Access System (CAS):

Commissioner Daniel shared that MDHA is working on an RFP for Homeless Management Information System (HMIS).

Homeless Jail Dashboard: Kimberly Rawls, Dallas County Criminal Justice (DCCJ)

Ms. Kimberly Rawls reported total number of book-ins for the month of September decreased by 66 (42 males, 14 females)

- Total number of homeless book-ins decreased by 75 (71 males, 4 females)
- Total number of mental health book-ins decreased by 18.
- Total homeless book-ins with mental health flags decreased by 54

The Cottages: Jennifer Jaynes, The Cottages

Ms. Jaynes reported the latest census is 39 units occupied. There were several evictions for dealing drugs, rent delinquency after a counseling period, and violence against residents and staff. Ms. Jaynes also stated that the candidate referral process needs to be completely revised. The Cottages has capacity and need, and DHA continues to work to improve the process of getting people in quickly and efficiently. A variety of reasons were cited for the current challenges to housing, such as the managing processes (training, staffing, etc.) at large. They are also working with Probation, Criminal Justice and the DA to help with criminal violations.

Mr. Ikenna Mogbo, Mr. Thomas Lewis and Mr. Jim Mattingly all pointed out how the disparate systems, regulations, requirements, redundancies, scheduling, lack of follow-up, proper support and oversight of each entity can often prove to be counterproductive to the overall goal. However, there have been discussions amongst the whole group on ways to clean up these issues.

St. Jude: Jari Mema, Catholic Charities of Dallas

Mr. Mema reported the following numbers for St. Jude, via email: 82 units are currently occupied with 22 vacant, Catholic Charities has 13 units, CitySquare has 34 units, VASH has 16 units, Metrocare has 19 units.

Currently, all vacant units are assigned to a referral and are in pending status for move-in. Their goal is to be fully occupied by December 31st. They continue to work with DOPS to fill up the list.

The DHA voucher issue has been mitigated. The "No Children" policy is an issue as many of the residents aged 55+ are grandparents. There has been a discussion on relaxing those rules for day visits, but overnight stays would be excluded. There will be 50 vouchers needed for the spring budget.

Homeward Bound: No report.

Youth Housing: Keri Stitt, Promise House

Ms. Stitt reported the opening of two additional houses dedicated to trafficked youth and that they are working on the homeless youth count, in partnership with SMU and MDHA, for January.

MDHA: Diana Romagnoli, MDHA

After a reorganization, Carl Falconer has begun his tenure as the new director at MDHA. Ms. Diana Romagnoli, who had been the interim director since April and will continue as staff during the transition, noted there are still four to five personnel positions left to fill.

Ms. Romagnoli has gone through the Housing Priority List (HPL) and cleaned it up. There were 894 names on it with approximately 30-40 people currently housed. There are 619 names remaining on the HPL. She also pointed to their website on which can be found the criteria for priority. They are also looking at moving to HMIS in order to meet HUD requirements initially noted by the community.

Announcements:

No announcements.

***Please note: NO MEETING IN DECEMBER
Next Meeting: January 23, 2019***

Dallas County Administration Building, 411 Elm Street, 1st Floor, Allen Clemson Courtroom



Dallas County Criminal Justice – Crisis Services Project

FY2019: Service Provider Overview

Mission: Reduce the use of higher levels of care and criminal justice involvement for persons with behavioral health needs.

Referral Process:

Any entity can refer a client. However, CSP must have a Magistrate's order or attorney permission to speak to an individual. * Adapt can only get someone out of jail on a hold if Adapt previously worked to coordinate the client's connection to care.

1. Email: acs1115referrals@adapt.us
2. Phone: 214-761-1300

Adapt Community Solutions (ACS)

Services

- Operate in the STELLA continuity of care work flow to perform the following tasks.
 - Identification of individuals in jail with suspected or confirmed mental illness
 - Assign targeted clients to Pre-Trial Release
 - Receive referrals to perform mental health assessments as ordered by a Magistrate Judge
 - Alert Competency Coordinator when assessing clinician suspects concerns
- Perform mental health assessments and formulate an exit plan for incarcerated individuals, as either ordered by the Magistrate Judge or requested by the representing attorney
- Assist in facilitating a warm handoff to a community provider

Capacity: Client capacity is (up to) 300 assessments per month

Transicare

Services

- Intervention includes the following:
 - Continuity of care support to CSP in the form of non-emergency transportation to participating providers, referred by ACS.
 - Criminogenic & psychiatric assessment
 - Psychiatric medication management
 - Psychosocial rehabilitative services
 - Skills training
 - Case management
 - Individual & group therapy
 - Crisis support and intervention

Capacity: Client capacity is 130 unduplicated clients per month.

Forensic Diversion Unit (FDU)

Services

- Assist consumers in the clinic to identify their recovery goals, learn and practice new skills, and support consumers in their recovery
- Provide medication management and delivery
- Address psychiatric needs including prescription of psychiatric medications and medication training

Capacity: Client capacity is 50

**Note: If any program reaches capacity, efforts will be made to communicate this information to referring agencies and attempt to help redirect the referred client to other appropriate treatment options.*

The Cottages at Hickory Crossing

Services

- Permanent supportive housing
- Case management and associated services
- Behavioral health and medical care via partner agencies

Capacity: Client capacity is 50

Referral Process: Send an internal email to Kim.Rawls@dallascounty.org to request a referral form. Once completed, return the referral form to Kim. The form will be forwarded to The Cottages.

**Note: If any program reaches capacity, efforts will be made to communicate this information to referring agencies and attempt to help redirect the referred client to other appropriate treatment options.*

The Cottages: Monthly Metrics Summary																			
Metric Criteria	July 2017	Aug	Sept	Oct	Nov	Dec	Jan 2018	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Notes	
Property Management Overview																			
Beginning Census	45	44	40	44	45	46	44	44	42	43	40	41	44	47	46	45	38		
Evictions	3	2	0	0	1	1	1	0	1	0	0	0	0	2	3	5	1		
Terminations	0	2	0	0	2	1	2	3	2	2	0	0	0	0	0	2	0		
Exit to Permanency									0	1	1	0	0	0	0	0	0		
Move-ins	2	0	4	1	3	0	3	1	5	0	2	3	3	1	2	0	1		
Ending Census	44	40	44	45	46	44	44	42	43	40	41	44	47	46	45	38	38		
*New screenings for waitlist	4	16	11	13	11	5	6	9	11	9	5	5	5	24	37	25	3		
DHA Inspections	2	0	9	1	0	1	0	4	9	0	3	3	3	1	2	1	0		
Total residents housed since opening	52	52	56	57	60	60	63	64	69	69	71	74	77	78	80	80	81		
Residents in Cottages for less than 90 days	2	2	7	6	7	4	6	3	9	6	5	5	8	8	6	3	3		
Residents in Cottages 91-180 days	14	8	5	7	8	10	12	15	12	14	14	16	15	14	14	19	16		
Residents in Cottages 181 days or more	36	42	44	44	45	43	42	45	47	29	52	53	54	57	60	60	63		
Metrocare Cottages																			
<i>Encounter Breakdown</i>																			
Psychosocial Rehab Individual Sessions	74	138	148	208	183	177	179	130	165	219	132	158	151	127	120	152	116		
CBT sessions	10	18	16	7	27	40	44	19	8	11	11	0	0	0	0	0	0	Beginning in June, Metrocare Services began providing off site CBT services, due to low interest. Ramped up on Substance Abuse service offerings in lieu of.	
Psychosocial Group Sessions (clinical groups only)	25	6	15	9	26	16	24	25	31	34	25	34	35	34	30	29	28		
Appointments made with prescriber	39	41	37	44	21	34	40	40	27	72	80	93	82	81	92	58	95		
Appointments attended	21	27	27	29	16	23	30	29	20	27	28	76	69	64	79	26	26		
Residents that were prescribed medication	19	23	19	26	17	18	27	19	21	24	25	30	28	29	28	21	23		
Incident Reports by Category																			
Medical	2	3	5	3	7	6	2	1	6	1	4	1	4	2	6	0	1		
Psychiatric	1	0	1	0	1	3	1	1	9	0	0	2	3	3	1	0	0		
Residents Accessing Higher Level of Care																			
Number of residents involved in EMS transports	-	-	-	-	-	-	-	0	5	1	1	0	3	2	3	0	0		
Emergency Room (Baylor and Parkland)																			
Emergency Room (Baylor and Parkland)	38	43	20	30	15	29	7	6	12	5	7	5	14	11	13	3	5		
Psychiatric (inpatient and 23 hour obs)	5	2	1	3	3	11	3	1	0	1	0	0	0	1	0	0	0		
Jail Book-In	6	5	5	4	4	2	0	2	3	2	1	4	3	3	5	4	1		
SUD Treatment Centers	2	1	4	1	1	1	0	0	1	2	0	0	0	0	0	0	1		
CitySquare Case Management																			
Residents receiving case management services	33	38	43	42	37	39	40	38	37	32	34	27	33	38	35	38	37		
Residents served by Community Nurse	11	11	6	8	4	9	9	10	9	9	0	7	7	3	4	4	3		
Residents served by CitySquare Clinic	5	6	7	6	6	6	8	8	7	6	8	7	7	8	5	7	3		
Residents attending Lifeskills Groups	10	5	4	16	0	0	0	21	5	9	13	18	12	7	13	21	0		
Residents attending Community Groups	27	29	36	25	28	27	21	24	37	33	27	30	35	33	26	28	27		

Metrocare Services at the Cottages Metrics									
Metrocare Services at the Cottages Metric Criteria	BASELINE	October	November	December	January	February	March	April	Notes
Current Cottages Census		45							
Jail Data									
Average number of jail admission baseline	4								data collected for 37 individuals
Average number of days in jail baseline	57								data collected for 37 individuals
Jail admissions for Metrocare Individuals for the Month		4							data collected for 45 individuals
Jail average length of stay (days) for Metrocare Individuals		1							data collected for 45 individuals
Jail admissions for Non-Metrocare Individuals for the Month		0							
Jail average length of stay (days) for non Metrocare Individuals		0							
Reduction in jail admissions for month from baseline for Metrocare Individuals		0%							Calculated by measuring total jail admissions for the month against jail admissions at baseline
Reduction in average jail length of stay (days) for the month from baseline for Metrocare Individuals		98%							Calculated by measuring average length of stay in jail in days for the month against the average length of stay at baseline
Reduction in jail admissions for month from baseline for NoMetrocare Individuals		100%							Calculated by measuring total jail admissions for the month against jail admissions at baseline
Reduction in average jail length of stay (days) for the month from baseline for Non-Metrocare Individuals		100%							Calculated by measuring average length of stay in jail in days for the month against the average length of stay at baseline
Hospital Data									
Average number of Mental Health Hospitalizations baseline	2								
Average number of Mental Health Hospitalization day baseline	8								
Mental Health Hospitalizations for Metrocare Individuals for the Month		0							
Mental Health Hospitalization average length of stay (days) for Metrocare Individuals for the Month		0							
Mental Health Hospitalizations for Non-Metrocare Individuals for the Month		0							
Mental Health Hospitalization length of stay (days) for Non-Metrocare Individuals for the Month		0							
Reduction in Hospital admissions for the month from baseline for Metrocare Individuals		100%							Calculated by measuring total hospital and/or 23-hour obs admissions for the month against jail admissions at baseline
Reduction in Hospital average length of stay (days) for the month from baseline for Metrocare Individuals		100%							Calculated by measuring average length of stay in hospital in days for the month against the average length of stay at baseline
Reduction in Hospital admissions for the month from baseline for Non-Metrocare Individuals		100%							Calculated by measuring total hospital and/or 23-hour obs admissions for the month against jail admissions at baseline
Reduction in Hospital average length of stay (days) for the month from baseline for Non-Metrocare Individuals		100%							Calculated by measuring average length of stay in hospital in days for the month against the average length of stay at baseline
Treatment Compliance									
Metrocare Assigned Individuals		41							8 of these Individuals received no services due to being off property and inability to engage due to circumstances. 1 of the Individuals only receives Medication Management services from the Doctor and does not have a Recovery Plan.
Metrocare Individuals with Recovery Plans		32							
Metrocare Engaged Individuals		17							These Individuals agreed to weekly, hourly engagements and have signed contracts.
Non-Engaged Metrocare Individuals		24							These Individuals do not meet the weekly, hourly engagement measurement.
Percentage of Metrocare assigned individuals who met Engagement Agreement		71%							12 of the 17 individuals received weekly, hourly engagements. The remaining 5 Individuals had scheduled appointments for weekly hourly appointments but were not available for their appointments.
Percentage of Non-Engaged Metrocare Assigned Individuals with weekly outreach: Applicable for Metrocare clients who have been residing at the Cottages for 1-30 days		NA							All Metrocare assigned individuals who have been housed at the Cottages for 1-30 days have a signed weekly engagement contract.
Percentage of Non-Engaged Metrocare Assigned Individuals with bi-weekly outreach: Applicable for Metrocare clients who have been residing at the Cottages for 31-180 days		67%							There are 3 individuals who fit these parameters, 1 of them was employed full time and did not receive outreach. These Individuals do not have a signed contract and did not meet the weekly, hourly measurement.
Percentage of Non-Engaged Metrocare Assigned Individuals with monthly outreach: Applicable for Metrocare clients who have been residing at the Cottages for 181 plus days		100%							There are 12 individuals who fit these parameters and all received outreach. Many of these individuals have obtained multiple hours of interactions but do not have a signed contract and did not meet the weekly, hourly measurement.
Percentage of Individuals with outreach who are not currently assigned to a behavioral health provider		100%							There is currently 1 individual who is not assigned to a service provider. This individual has tenancy over 181 days and received outreach that exceeded the once a month measurement.

Attendees: Walter Taylor (Chair, NTBHA), Charlene Randolph (Co-Chair, Dallas County), Joyce White (Dallas County), Kimberly Rawls (Dallas County), Doug Denton (Homeward Bound Inc.), Calvinah Jenkins (MMHPI), Karla Sweet (HBI), James McClinton (MDHA), Matt Roberts (NTHBA), Deborah Mate (NTHBA), Obie Bussey (ARM), Jarrod Gilstrap (Dallas Fire Dept.), Jerromie Jones (Dallas Fire Dept.), Jacob Twombly (University of Texas Police), Sherry Cusumano (MCGO & NAMI-North TX), Amy Cunningham (CFGC), Matt Morrison (IPS), Ashely Williams (DCCSCD), Tzeggabrhan Kidane (Dallas County), Michael Carr (Dallas County), Ellen Duke (Hickory Trail Hospital), Alyssa Aldrich (Adapt), Janie Metzinger (NTBHA)

1. Welcome and Introductions (Walter Taylor, Chair and Charlene Randolph, Co-Chair):

- All attendees were introduced, including all new attendees.

2. Review and approve previous meeting minutes:

- The meeting minutes from the previous month's meeting were reviewed and approved by James McClinton and Doug Denton with one correction presented by Matt Roberts to the spelling of Sherry Cusumano's last name.

3. Presentation: "Adult Rehabilitation Ministry," by Obie Bussey, Director

****** Obie Bussey presented from 12:18pm-12:38pm. His presentation included informational slides regarding the Adult Rehabilitation Ministry program requirements and brochures. He also answered audience questions throughout the presentation and after. ******

If anyone has additional questions, please contact him via email at director@armdallas.org.

4. Multicultural Competency Training Update (Matt Roberts, NTBHA and Deborah Mate, NTBHA)

- Matt Roberts stated that they have another training scheduled for November 6-8th, 2018. They have 37 people currently register and are accepting additional registrations. He has flyers for anyone that maybe interested. If anyone would like to attend next week's training, please register between today, November 1, 2018- tomorrow, Friday, November 2, 2018. Walter Taylor stated that they can host 60 individuals for next week's training class and free lunch will be provided for all three days. He stated that individuals could receive up to 24 hours of social work Continuing Education Units (CEU's) credits. Deborah Mate stated that Licensed Chemical Dependency Counselors (LCDCs) and those individuals with associate level certification also qualify to receive the 24 hours of social work CEU credits.
- Deborah Mate stated that the first six train-the-trainer cohorts would begin facilitating parts of the training with Dr. Gloria Morrow. Walter Taylor stated that they have invited Dr. Gloria Morrow to return in February 2019 to shadow the training team. He also stated that they plan to offer a separate training for Executive Directors/CEOs. Last, he stated they plan to offer two additional initial cohort trainings, one in March 2019 and the other in May 2019.

5. NTBHA Updates (Walter Taylor, Chair-NTBHA)

- He stated that Tenant-Based Rental Assistance (TBRA) currently has \$350,000.00 statewide for persons with disabilities funding that can be used in Dallas County.

They have already signed up seven individuals from Dallas County and claimed about \$200,000.00. He also stated there is about \$7 million dollars available for outlining communities. Last, he stated that there are funds available for individuals who have been affected by Hurricane Harvey and are willing to move to Dallas County. For questions, please email housing@ntbha.org.

6. Smart Justice Initiative Updates (Calvonah Jenkins, MMHPI):

- She stated that the reported data is up to September 30, 2018. The team had 1,875 interactions with individuals, which resulted in 640 individuals being immediately linked into services or provided referrals' and 581 of those interactions resulted from the team providing follow-up or outreach services to individuals.
- The Meadows Foundation board has requested a RIGHT Care team presentation be conducted and key RIGHT Care leadership members have been invited to represent their organizations scheduled for November 8, 2018. Jarrod Gilstrap provided a brief overview of the RIGHT Care team's status. Michael Carr asked if there is an on-going training between Dallas Fire and Dallas Police who are involved with the RIGHT Care team. Jarrod Gilstrap stated that there is currently no training available, but each entity educates one another on a case-by-case basis. Calvonah Jenkins also added that everyone who participates in the RIGHT Care team is required to attend a 3-day multidisciplinary training together as a group educating him or her with team-building skills as well as executing the same field curriculum. Conversation ensued regarding the working relationships between the Dallas Fire, Dallas Police and Social Workers who participate with the RIGHT Care team. Sherry Cusumano stated she would provide Walter Taylor Samuel Hanson's information to provide to the RIGHT Care team to help assist with any of the team's needs. Jarrod Gilstrap and Jerromie Jones also addressed the various work hour scheduling between each RIGHT Care team member (Monday-Friday vs weekend staff) and how it affects the workflow among the various members. They also suggested implementing a set schedule of staff only to handle RIGHT Care responsibilities as well as creating a documenting data system to streamline data, so all entities can see each other's case notes. Calvonah Jenkins stated that the Meadows Foundation board met and discussed various methods to streamline the data process.
- Walter Taylor stated that he would like the RIGHT Care team to present and provide a yearly update of the team's progress in January 2019. Calvonah Jenkins stated that she would inform BJ Wagner, Senior Director of Smart Justice with the Meadows Foundation and confirm with Walter.
- Jarrod Gilstrap stated that the City of Dallas has approved funding to purchase the land to build Neighbor Up Dallas Education Corridor's Integrated Health Clinic in the southern Dallas region. The center will be an outpatient mental health clinic to help reduce the number of 911 mental health crisis calls in the southern Dallas region.

7. Legislative Update (Janie Metzinger, NTBHA):

- Janie Metzinger provided the group with rough draft summary handouts of the Texas health and Human Services Commission Rate Analysis Department and H.R.6 grant amounts, which summarizes the 250-page House Bill 13 document. She reviewed and explained the H.R. 6 Grants handout to the committee. For easier access to the grant requirements, she will include hyperlinks in the final draft. Doug Denton shared that for some of

titles and sections verbiage for “5 states” i.e. title /section 7151, Texas is not eligible for those grant funds due to the lack of data reporting in order to verify a need for fund awards. Janie added that the state of Texas might be eligible for those grant awards depending on whether the requirement allows data to be combined among county to county for those with higher rates of opioid/substance abuse deaths. Ellen Duke stated that the Overdose Detection Mapping Application Program (ODMAP) is a federally funded group that collaborates with police stations to track and research the required data as it relates to opioid/substance overdose calls. She will provide Walter Taylor with the information. Janie added that the grant also has allocated some funding toward police protection and safety while managing opioid/substance overdose calls. She stated that the bill also includes changes to how states serve both Medicaid and Medicare clients, which could affect service providers’ treatment methods.

- Janine Metzinger asked the group to review the rough draft handouts and provide feedback to her at jmetzinger@ntbha.org. She also stated that some grants are beginning now or within the next 3 months. Last, she stated that due to the Tuesday, November 6, 2018 elections, Congress could begin prefiling bills directly following the elections.

8. Decide location for ACOT going forward (Walter Taylor, Chair)

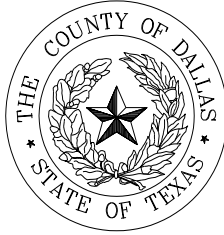
- Walter Taylor announced if anyone has any speakers that they would like to present during the December 6, 2018 meeting, please email him at wtaylor@ntbha.org. Ellen Duke stated that she could contact the presenter with the Overdose Detection Mapping Application Program (ODMAP) to see if they are available and inform him.
- Walter Taylor asked if the committee would like to do a holiday potluck meal for the December 6, 2018 meeting. They committee discussed and decided to have Walter Taylor and Janie Metzinger decide on the potluck meal options. Walter will inform the group later regarding the details.
- Sherry Cusumano announced that there would be an Assisted Outpatient Treatment (AOT) Task Force symposium at Abuelo’s restaurant in Plano, TX scheduled for November 7, 2018 @ 6:30pm. Please RSVP by today, November 1, 2018 to CherylRayl@gmail.com. She also announced that there would also be a policy analysis presentation conducted by Public Policy Director of NAMI Texas, Greg Hansch, which will be separate from the AOT symposium, but held on the same day and location. Please contact her at Sherry.Cusumano@MedicalCityHealth.com, if anyone is interested in participating. Last, she stated that tonight, November 1, 2018 at 7:30 pm at the NAMI North Texas General meeting held at Park Central Baptist Church, guest speaker Sergeant AD Paul with the Plano Police Department would be their presenter. She stated that he would address the collaborations that are taking place between the mental health community, law enforcement, schools, and hospitals addressing the needs of people with mental health and developmental disorders programs as well as the Crisis Intervention Team (CIT) program.

9. Adjourn

The meeting adjourned at 1:31 p.m.

Other

- The next meeting will take place Thursday, December 6, 2018.



DALLAS COUNTY, TEXAS

Minutes of the Behavioral Health Steering Committee (BHSC) Meeting Thursday, November 15, 2018

Call to order and Introductions

Judge Kristin Wade called the meeting to order at 8:36 am. 25 staff and agency representatives/providers attended with names recorded on the meeting sign-in sheet. Introductions were done around the room.

Minutes review and approval

The minutes from the last bi-monthly BHSC meeting held on September 20, 2018 (packet pgs. 1-6), were reviewed with motion and second by Harry Ingram and Lynn Richardson, respectively for acceptance with no discussion or corrections. Motion unanimously passed accepting minutes as read without objection.

Caruth Smart Justice Grant Update (Mike Laughlin-pgs. 7-13): Mike Laughlin stated that on pgs.7-8 shows the data points for the Caruth Smart Justice grant as they close out the final year of the grant, which is scheduled to end December 31, 2018. The team has several resources in place to continue with the program such as finding new funding resources, which have been absorbed by Dallas County to continue those efforts and the bail reform initiative. Pages 9-13 shows the quarterly report. For Intercept 1 activities, the team has completed training for both the South Central-Dallas Police and Dallas Fire & Rescue departments. Parkland Medical Center has clinical inpatient beds within the 911 dispatch and unmarked rapid response responder teams. The teams are about 6 months into the testing phase. For Intercepts 2-4, they are continuing to assess/screen individuals and present them to the judge for release. Those numbers are low, but he believes once staff is hired and trained and the bail reform initiative occurs they could change. Page 7, from project to date there were 848 individuals granted and released on a Mental Health Personal Recognizance (MHPR) bond. The fourth table shows the levels of care and the levels of supervision is concentrated in the moderate risk range with level two being the higher risk and level one being the lower risk, which he believes may soon change. Page 8 reflects those individuals who are not being released during the first attempt, the last table reflects the number of assessments that are ordered and the level of care recommendations, and placements that are occurring. Judge Wade asked Mike Laughlin what the success rate is of getting individuals to return to court. Mike answered stating they are working to receive this information, but is difficult to get because of how the notification system is structured in Forvus. He also stated that because of the bail reform initiative they are updating the correctional and software solutions (CSS) and working with the IT department to revise the current data tracking process. Last, he stated they do not have solid data due to this revision, but it should be available either before or during spring 2019. Lynn Richardson announced that Michaela Himes is the new Chief of the Bond Division of the Public Defender's Office and will be charged with supervising the bail reform initiative, the attorneys, and the planning process for the 24-hour Magistrate Court. Michaela Himes introduced Dan Eckstein as her previous position's replacement as Mental Health PR Bond Public Defender. Dan provided the committee with his brief background history. Enrique Morris asked Mike Laughlin if the Adult Needs and Strengths Assessment (ANSA) report is the tool used to determine a client's level of care. Alyssa

Aldrich answered stating that ANSA reporting is not completed when the client is incarcerated. She stated that the level of care is determined based off the clinician's judgement and knowledge of the ANSA report, but it is not being performed onsite and is completed once the client arrives to the site. Enrique Morris asked what the requirements for both FACT and ACT recipients. Alyssa Aldrich answered stating that if a client meets the standard hospitalization criteria, they meet ACT requirements. If a client meets the standard hospitalization criteria and have the appropriate pretrial arrests and or bookins, they will meet FACT requirements. Enrique Morris stated this information is important to know when determining FACT/ACT outcomes. Conversation ensued regarding FACT/ACT requirements and outcomes. Mike Laughlin stated that there are seven domains: three show their criminal history (one is a failure to appear) and three deal with their drug use and residence, which could affect scoring. He stated hopefully, as they convert toward using a new scoring tool, the numbers might shift. Mike Laughlin asked Enrique Morris if he is seeing individuals who are involved with FACT who may have been improperly placed due to Risk scoring. Enrique answered stating no, but can review the data and provide the information later. Alyssa Aldrich stated that more clients could be considered for FACT services if their criminal background history were more extensive verses how Pretrial rates.

Judge Kristin Wade asked everyone to introduce himself or herself.

BHSC Data and Reports – Judge Kristin Wade

Program and Department Updates: Program/outcome data, updates, and workload reports were presented and accepted via relevant dept. /agency staff for the SAMHSA Grant, 530 Subcommittee, BHLT/CSP, Jail reports, Public Defenders, District Attorneys, Provider Reports, and Problem Solving and Specialty Courts (see packet pgs. 14-47 for details).

SAMHSA Update (Laura Edmonds/No data for this month): Laura Edmonds stated that the previous SAMSHA grant, which only served women, has ended. The new 5-year SAMSAHA grant will serve both male and female clients. The grant will fund females treated at Nexus Recovery Center who are in specialty courts and minority males ages 17-30 to go to Homeward Bound for treatment. She stated the funds are also available for peer recovery coaching. They are completing contracts and will accept referrals December 1, 2018. She will email everyone with the referral process information and referral forms. Judge Kristin Wade asked Laura Edmonds for the SAMHSA grant's definition of minority males. Laura Edmonds answered stating she will check and provide that information on a later date when she sends the referral process information email.

530 Sub Committee (Laura Edmonds pgs. 14-15): Laura Edmonds stated that they have action items to be approved and voted on by the BHSC committee. She stated pg.14 shows STAC courts request to approve \$2,550.00 to cover three female STAC court participants who will receive treatment at Nexus Recovery Center for an additional 10 days for 45 days. STAC court has grant funding available to cover 35 days of treatment. She also stated pg. 15 shows MHJD and SET courts fund request for the FY2019 incentives of \$750.00.

Judge Kristin Wade asked for a motion to approve the STAC courts request to approve \$2,550.00 to cover three female STAC court participants who will receive treatment at Nexus Recovery Center for an additional 10 days for 45 days with the STAC court grant funding the first 35 days of treatment (pg. 14) the motion was made by Lynn Richardson for approval and second by Michael J. Laughlin. Motion unanimously passed accepting the request without objection.

Judge Kristin Wade asked for a motion to approve the MHJD and SET courts fund request for the FY2019 incentives of \$750.00 (pg.15) the motion was made by Harry Ingram for approval and second by Lee Pierson. Motion unanimously passed accepting the request without objection.

BHLT & CSP Update Laura Edmonds/Adapt (Laura Edmonds pgs. 16-23): Laura reported that they have completed all CSP contracts for the next fiscal year (FY) and are reminding everyone that the CSP Waiver funding will end in the next 4 years. She also stated that the CSP funding would decrease each year of the remaining 4 years, and they have completed their reporting for this past year. How or where the funding will decrease has not been provided to the department, but she will inform everyone once the information is available. Joyce White (CSP Manager) is conducting service provider program evaluations. Alyssa Aldrich stated after reviewing all the data historically before the MHPR bond and completing all attorney referrals they are receiving more than double the amount of bond assessments than attorney assessments. She also stated that Transicare is not accepting referrals and are at capacity.

Hospital Movement (Janine Capetillo pg. 24): Janine Capetillo stated that there were fewer competency evaluations from September to October 2018. She stated that there is also a decrease for state hospital admissions due to no beds being available, which is increasing wait times. She also stated that she contacted Terrell State Hospital to see what is causing the increase in hospital admissions and they stated that they are receiving a surge of community voluntary admissions. Last, she stated that she does not believe many people passed the Dangerousness Review Board (DRB) assessment at Vernon State Hospital and if they passed, there is no room at Terrell State Hospital for them to be admitted. Judge Kristin Wade asked Chad Auderson to summarize his background and the new jail based competency program. Chad Auderson summarized his background and the new jail based competency program with a Q&A session from 8:55am-9:05am.

Homeless Report (Kimberly Rawls pgs. 25-30): Kimberly Rawls stated that from September 2018-October 2018, there was a slight decrease of eight persons among "Unique Individuals". She also stated there was an increase of 1,160 days for "Days in Jail" and an increase of 4 days for "Average Number of Days in Jail" categories. Last, she stated all other categories were constant and to refer to the data in the packet.

Mental Health Case Matches (Laura Edmonds pg.31): Laura Edmonds stated that the report shows individuals identified with a mental health flag out of the total number of monthly jail bookings from the JIMI Stella database. For the month of October 2018, there were 5,154 total individuals booked into jail and 3,199 unique individuals who had a mental health flag. She also stated the percentages for the mental health categories would never equal 100% because some individuals may have multiple flags. Last, she stated the NTBHA ID (23.98%) and PAP (10.69%) flag categories represent those individuals with an active mental health condition.

Public Defenders (Lynn Richardson pgs. 32-34): Lynn Richardson stated to refer to their data listed on pgs. 32-34 for the months of August to October 2018. She also stated that she contacted City of Dallas Manager, T.C. Broadnax and his staff a few weeks ago to schedule a meeting with them along with Paul Blocker and Vickie Rice to partner and share information regarding the homeless population. Since the initial meeting, they have had two follow-up meetings with individuals in their homeless division. Last, she stated there could be future partnership efforts between the Public Defender's office and the City of Dallas Homeless division to address the homeless situation.

District Attorney's (Lee Pierson/ pgs. 35-36): Lee Pierson stated to refer to the data listed on pgs. 35-36. He also congratulated Michaela Himes on her new position as Chief of the Bond Division of the Public Defender's Office.

Provider Reports

The Bridge (Kelly Kane pg.37): Kelly Kane stated to refer to the data listed on pg. 37. They are still collaborating every morning with Downtown Dallas Inc. (DDI) clean team to engage unsheltered homeless individuals in the downtown area to bring them into The Bridge for community services and shelter. She stated that the Bridge has a contract with the City of Dallas for pay-to-stay beds. The Bridge is sheltering an extra 40-60 individual's per night due to inclement weather besides the 50 extra beds. They have an EMT on staff from 6am-8pm, which has help to decrease the 911 calls. They also hired a new Chief Services Officer, Rebecca Cox, who will start at the end of the month. Judge Kristin Wade stated that during the November 8, 2018 BHLT meeting the Salvation Army announced that they would receive a grant waiver, which will allow them to accommodate additional persons during inclement weather. Judge Kristin Wade asked Kelly Kane if they still have overflow beds at Dallas Life. Kelly Kane answered stating yes, but they have more extensive criminal background and ID requirements. She also stated that she believed they were supposed to have "pay-to-stay" beds, but does not believe they are available. Lynn Richardson stated that the City of Dallas has funding available for additional beds, but they require that whoever they contract with must have the equal opportunity employer provision. Dallas Life did not agree to those terms and were not eligible to receive the funding. Harry Ingram asked to define "pay-to-stay" beds. Kelly Kane answered stating that the City of Dallas pays for the beds.

Metrocare (Crystal Garland pgs.38-40): Crystal Garland reported that their data is on pgs.38-40 and has been consistent except for ATLAS and Misdemeanor court numbers being lower due to having individuals graduate. She stated that they have referrals to both courts (ATLAS has three pending referrals for this week). They have zero participants for PRIDE court and no pending referrals. Marlene Buchanan announced Crystal Garland as the new Program Director over the Tacoma. Marlene also stated that they have had staff increases to their juvenile program. Lynn Richardson suggested contacting the new ATLAS court judge, who would like to keep the program. Judge Kristin Wade suggested that she and Lynn Richardson meet with the new District Attorney (DA), John Creuzot to discuss methods to get individuals involved with the specialty courts and increasing DA referral opportunities.

IPS Reports (Enrique Morris/Jessica Simmons/Provided Data Handout): Jessica Simmons provided the committee with a handout of their statistical data. Their admissions trends are up for the month of October 2018 compared to last year stats, which includes an increase of 27.4% (March-October 2018) and (September to October 2018) an increase of 3.3% in admissions. For Program Utilization Distribution, most of their clients are in the SUD program (56%), Psych 25%, Psycho Ed (11%), SUD-MAT/Detox (5%), and Monitoring (3%). Gender Distribution for September 2018-October 2018 was predominately males (74%) and females (26%). Ethnic Distribution September 2018-October 2018 remained stable (please refer to the data in the packet for a complete breakdown). September 2018-October 2018, Drug of Choice by Self Report was Cannabis/Cannabinoids (36%) and Alcohol (20%). Last, she stated that for September 2018-October 2018, SUD Program Progression Rate 50% of their clients achieved a phase advance, 36% a phase retention, and 14% of their clients had an elevation of care. Judge Kristin Wade asked how many clients they have on drug patches. Jessica Simmons answered stating around 100 clients. Enrique Morris added stating since they offer drug patch services free to patients; they had to cap capacity of the drug patches that were issued. This pushed back new admission appointments by two weeks and previously they were available by the next day. He stated that eventually they could migrate back to a cost model that involved patients paying for drug patches, which could create next day availability. Judge Kristin Wade asked how much the drug patches would cost the patient. Jessica Simmons answered stating it would cost the patient around \$45.00 per patch. Enrique Morris stated that they would have to hire billing staff to process patch payment because patients would need patches removed and reapplied. Once payment is received, staff will then be able to provide courts with patch results, so dispositions can be reached or treatment plans adjusted. If no payment were received, staff could provide the information, but would require them to locate those patients to collect funds for used patches. Michaela Himes asked if they conduct Telemed services. Enrique Morris answered stating that 18%-20% of their Psycho encounters are Telemed services. He stated on a federal level, Telemed services is being promoted as

a primary service method. Michael Carr asked if drug patch payment is funded through a grant. Enrique Morris answered stating no, they pay for all the drug patches.

Outpatient Competency (Janine Capetillo pg. 41): Janine Capetillo stated that their numbers are consistent. They will have individuals graduating shortly and hope to end the year successfully. Last, she stated that the new program should bring more referrals.

DIVERT (Keta Dickerson [Report update provided by Kimberly Rawls] pg. 42): Kimberly Rawls stated that for October 2018, at the start of the month they had 144 participants, 14 new admissions, 6 unsuccessful discharges, 14 graduates, and ended the month with 138 participants.

Specialty Courts CSCD (Serena McNair/Rosa Sandles pgs. 43-47): Rosa Sandles stated that ATLAS court their numbers are declining due to individuals graduating. She stated they should be in the single digits by the end of the year. DDAC court remains consistent. For MMH and STAR courts, numbers are also consistent. Last, she stated that STAC court is consistent and end October 2018 with 138 participants.

Announcements: Janie Metzinger announced in October 2018 congress passed the H.R.6 Grant, which is a new grant funding available for opioid and substance abuse treatment. She stated that some funding award amounts include receiving \$50 million dollars, per fiscal year over the next 5 fiscal years for trauma support and mental health services. \$496 million dollars per fiscal year for the next 5 fiscal years to states localities and Indian tribe prevention, data, education, and awareness. \$75 million per fiscal year for the next 5 fiscal years for drug courts. \$2 million dollars per fiscal year for the next 5 fiscal years for drug court technical assistance and training. She completed a summary of the funding. She stated that the summary would include a table of contents, which will direct individuals to the summary report outlining the bill's criteria and funding amount. Judge Kristin Wade asked a representative from Nexus Recovery Center to provide a program update. Niki Prince answered stating that they are settling in with their new Clinician Director, Stacy Barnes. She stated that they are waiting on the SAMSHA grant to begin and receive referrals. They are increasing their recovery support services and creating various ways to support their clients; prior, during and immediately following treatment. They are increasing their medicine assist recovery numbers and providing the medicines to assist women with their ongoing and long-term recovery treatment plans. Their adolescent and detox programs are going well. Judge Kristin Wade stated that New Vision's work in exchange for rent program is leaving the Dallas Metro Area. If anyone has other work in exchange for rent program leads, please contact Kimberly Rawls and she will inform the committee.

Adjournment

Judge Kristin Wade adjourned the meeting at 9:30 am. The next meeting is set for Thursday, January 17, 2019, at 8:30am in the same location. A reminder was provided to everyone to submit their monthly stats to Kimberly Rawls (Kimberly.Rawls@dallascounty.org) via email by the 2nd Friday of each month for tracking and distribution.



	Past Year Avg	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	Average:	Sum:
Total Service Episodes:	768	680	646	702	391	454	355	364	396	305	328	462.1	4,621
Total Unique CID:	589	672	603	610	328	388	301	281	309	233	247	397.2	3,972
Total Unique SID:		671	603	609	328	388	301	281	309	232	247	396.9	3,969
% Change to DY 4 by CID		114.09%	102.38%	103.57%	55.69%	65.87%	51.10%	47.71%	52.46%	39.56%	41.94%		

<u>Total Encounters by Type:</u>		2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	Average:	Sum:
Triage		680	646	702	391	454	355	364	396	305	328	462.1	4,621
Care Coordination		2,608	2,418	2,770	2,447	3,044	2,433	2,459	2,733	1,999	2,058	2,496.9	24,969
F2F Encounter		345	352	384	310	386	308	295	339	246	249	321.4	3,214
Sum:		3,633	3,416	3,856	3,148	3,884	3,096	3,118	3,468	2,550	2,635	3,280.4	32,804

<u>F2F Encounter</u>		2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	Average:	Sum:
MHPR Bond		166	142	159	174	241	199	200	218	158	148	180.5	1,805
Non-MHPR		179	210	225	136	145	109	95	121	88	101	140.9	1,409
Sum:		345	352	384	310	386	308	295	339	246	249	321.4	3,214



Crisis Services Project

Frank Crowley

DY7 CSP Monthly Report_No Graphs(with LCN)

Last Refresh: 12/6/18 at 2:52:01 PM GMT-06:00

	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	Average:	Sum:
Service Episodes:	680	646	702	391	454	355	364	396	305	328	462.1	4,621

	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	Average:	Sum:
Unique Consumers:												
By N* ID	287	251	255	122	133	95	101	105	71	56	147.6	1,476
By LCN	136	129	126	81	105	78	66	97	57	77	95.2	952
By Client ID	249	223	229	125	150	128	114	107	105	114	154.4	1,544
TOTAL Unique Consumers:	672	603	610	328	388	301	281	309	233	247	397.2	3,972
TOTAL Unique Consumers as %:	98.82%	93.34%	86.89%	83.89%	85.46%	84.79%	77.20%	78.03%	76.39%	75.30%		

	2018-01	2018-02	2018-03	2018-04	2018-05	2018-06	2018-07	2018-08	2018-09	2018-10	Average:	Sum:
Unique F2F:												
By N* ID	115	119	136	86	100	73	75	85	46	47	88.2	882
By LCN	57	65	59	47	78	67	47	71	41	57	58.9	589
By Client ID	140	121	123	92	130	105	95	96	83	85	107	1,070
TOTAL Unique F2F:	312	305	318	225	308	245	217	252	170	189	231	2,541
TOTAL Unique F2F as %:	90.43%	86.65%	82.81%	72.58%	79.79%	79.55%	73.56%	74.34%	69.11%	75.90%		

	Average:	Sum:
F2F Percentages:		

Triage 12 w/F2F	2,198
Recidivism 12-12 w/F2F	635
Recidivism 12-12 w/F2F Percentage	28.89%

	January	February	March	April	May	June	July	August	September
Year MO	2018/01	2018/02	2018/03	2018/04	2018/05	2018/06	2018/07	2018/08	2018/09
Recidivism 12-12	2	23	55	116	172	243	340	440	534
Triage 12	260	513	761	971	1,236	1,450	1,663	1,889	2,039
Recidivism 12-12%	0.77%	4.48%	7.23%	11.95%	13.92%	16.76%	20.44%	23.29%	26.19%

October
2018/10
635
2,198
28.89%

Triage 12	3,968
Recidivism 12-12	1,201
Recidivism 12-12%	30.27%

Triage 12 w/F2F	2,198
Recidivism 12-12 w/F2F	635
Recidivism 12-12 w/F2F Percentage	28.89%

Triage 12 w/oF2F	2,040
Recidivism 12-12 w/oF2F	687
Recidivism 12-12 w/oF2F Percentage	33.68%

Transicare Reporting

Crisis Services Project

	2018-10	TOTAL
Beginning Census	117	
Referrals	19	19
Admissions		
Referred Admitted	7	7
No Admit Client Refusal	1	1
No Admit Criteria	1	1
No Admit Structural	0	0
Pending	10	10
<i>Prior Pending</i>		
Pending Admitted	20	20
No Admit Client Refusal	1	1
No Admit Criteria	1	1
No Admit Structural	7	7
Total Admissions	27	27
Discharges		
Success Transfer	5	5
DC Midterm Disengage	4	4
DC Rapid Disengage	6	6
DC Structural	8	8
Total Discharged	23	23
Active End Of Month	121	
Outcome Data		
<i>Terrell State Hospital Linkages</i>		
≤7 Connect To Prescriber	5	5
Missed ≤7 Day Connect	2	2
≤30 Connect To Prescriber	7	7
Missed ≤30 Day Connect	0	0
Total Missed Metric	0	0
Total Released	7	7
Cummulative ≤7 Connect %	71.4%	71.4%
Cummulative ≤30 Connect %	100.0%	100.0%
Missed Metric	0.0%	0.0%
<i>Unduplicated Served</i>		
Monthly Unduplicated	141	
DSRIP YTD Unduplicated Served	141	
<i>Encounter Data</i>		
F2F Encounter	757	757
Care Coord	44	44
Total	801	801

Forensic Diversion Unit (FDU) Report

	Jan-18	Feb-18	Mar-18	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec - 18
Beginning Census	42	47	48	51	53	51	51	45	50	52		
Number of Referrals Received from CSP												
Adapt	7	16	13	9	7	4	3	6	5	8		
Metrocare	0		0	0	0	1	0	1	0	0		
Transicare	0		0	0	0	0	0	0	0	0		
DA	1		0	0	0	1	0	1	2	1		
Number of Admissions	8	10	11	9	7	6	2	1	4	5		
Number Discharged	3	13	8	10	4	4	5	3	5	14		
Number not admitted due to:												
Client qualifies for ACT	0		1	0	2	0	0	0	0	0		
Client qualifies for other programs	0	2	0	1	2	1	0	1	0	0		
Client didn't meet level of need required	0	3	1	2	4	0	1	1	0	1		
Other reasons	0	2	1	1	0	3	1	1	2	0		
Average Service Utilization:												
Average hours seen	9.03	49.05	13.51	12.65	12.82	10.72	12.49	13.81	10.47	11.08		
Encounter Breakdown:												
Face to Face	269	293.53	338	541.25	539.25	524	525.35	530	438	442		
Service Coordination	676	692	798	542.25	541.25	522	525.75	532	440	466		
Number of clients accessing:												
Emergency Room (medical)	2	2	0	1	1	2	4	3	2	3		
23-hour observation (psych)		1	0	0	2	1	1	2	0	1		
Inpatient (med/ psych)	3		0	0	0	0	3	1	0	0		
Jail book-in	0		1	2	3	1	2	5	2	2		
Reasons for Discharge:												
Graduate		1	2	2	0	0	2	0	0	0		
Client Disengagement		7	3	1	3	3	0	0	5	5		
Extended Jail stay (case-by-case basis)	3	2	2	4	1	3	2	0	0	3		
Other Intervening factors		3	1	1	3	1	1	3	0	6		
End of Month Stats:												
Number of Active FDU clients end of month	47	44	41	46	42	43	42	46	48	46		
Number of Unique Consumers	47	48	51	53	51	51	45	50	52	52		
# of clients waiting to be released from jail	9	11	10	8	3	8	3	4	4	6		
Average Length of stay on FDU (month)	6.67	6.22	5.31	4.48	4.54	4.6	5.26	5.38	5.54	5.36		
Maximum Census	46	46	46	46	46	46	46	46	46	50		

the consumers on the "waiting" list are being actively seen in jail until release

NOVEMBER 2018 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 11 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	Participated in PATS/FACT Huddle Calls Hospitalization search, benefit standing, and prescription assistance was not provided this month.	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 8 FDU referrals, five of which were approved for FDU assessment. Conducted initial phase of FDU process audit.	Not Applicable
4	Caruth Smart Justice	There were no Smart Justice specific activities completed 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	No candidate cases reviewed this reporting period.	Not Applicable