

**Mayview Steering Committee
Meeting Summary
August 20, 2010**

Members Present: Karen Bennett, Tim Casey, Jenna Cawthorne, Mary Jo Dickson, Lea Ann Gerkin, Darryl Holts, Carol Horowitz, Nancy Jaquette, Matt Koren, Carol Loy, Edna McCutcheon, Chris Michaels, Brandi Mauck Phillips, Rick Rach, Carol Rico, Shirlee Hopper-Scherch, Jan Taper, Kathi Thomas, Pat Tickle, Pat Valentine, Val Vicari, Deb Wasilchak

Members Absent: Aiden Altenor, Jonathan Bear, Dee Burgess, Sue Carney, Laverne Cichon, Mary Fleming, Mary Jo Patrick-Hatfield, Ray Jaquette, David Jones, John Klenotic, Austin Lee, Christine Martone, Dave McAdoo, Donna McCurdy, Karyl Merchant, Gerard Mike, Sharon Miller, Carol Rico, Jules Rosen, Wes Sowers, Ken Thompson, Joe Venasco, Dean Virgili, Kimberly Welsh

Others Present: Terry Carik, Mercy Behavioral Health; Doritta Gross, Mercy Behavioral Health

1. Review of Minutes from June Meeting

No changes were identified to the minutes for the June Steering Committee meeting. They will be posted to the MRSAP website.

2. State Updates

Health Care Reform

Val Vicari gave an update on the status of Health Care Reform. She provided an overview of the Governor's Health Care Reform Advisory Group, including current membership, existing PA MA income limits, and an overview of Health Care Reform governance structure.

Highlights of the reform include:

- 32 million additional individuals to be covered by insurance
- Expands employer regulations and Medicaid coverage
- PA Fair Care: high risk group of individuals with pre-existing conditions, only 3,600 slots available for coverage
- Benefits and Service Committee established to ensure behavioral health is well represented, also looks at parity; Val serves on this committee
- Ivonne Bucher working on increasing stakeholder involvement
- Service delivery models being established to create health homes, physical/behavioral health integration

A suggestion was made to request additional members from the behavioral health field on the Advisory Group. Previous requests have already been made without success. Val to provide updates at each Steering Committee meeting going forward.

Karen Bennett announced that the HSAA (Human Service Administrative Association) will be hosting a Health Care Reform Day on September 8. AHCI will send out more info on this event to the Steering Committee.

State Budget:

The outcome of the State budget is still unclear; however, they are hoping to avoid drastic cuts at the county level. More state employees are expected to retire than originally expected, which will help the budget.

Other updates:

- Allentown closure: Of the original 179 individuals, 68 individuals still remain in the hospital, along with 85 staff
- Regional consolidation of forensic beds from Warren State Hospital to Torrance State Hospital continues. Overall the state census has not changed. Warren SH currently has 44 individuals in its forensic unit.
- 63 is current census, with capacity for 75
- 4th unit to open which will increase capacity to 100
- Completion of consolidation scheduled for October 31
- Psych rehab moving forward

Discussion followed regarding the role of the Steering Committee in the new administration, specifically as the voice of the Southwest PA region and advocates for continued funding. NAMI Southwest PA has a Policy Committee that meets regularly to discuss these types of issues, and they were recently approached by another NAMI chapter to produce a voting guide. They are also looking at evaluating and developing a strategy for “carve out.”

Also discussed was the Olmstead Plan drafted by the Disability Rights Network, PMHCA and MHA. Representatives from each organization discussed the importance of a regional voice and the mission of the Steering Committee in terms of regional planning. They expressed concerns regarding individuals in other counties without access to services and specialized groups such as the deaf and hard of hearing. Consumer forums are planned for the deaf community in September in Meadville and Cranberry, and a Deaf Advisory Committee has been established.

Brandi Phillips announced that John Klenotic retired last week and notified AHCI that Lawrence County would no longer be participating in MRSAP. AHCI will work with Lawrence County to continue its regional involvement. A suggestion was made to consider inviting other counties into the MRSAP regional planning.

3. SOS Transition

Kathi Thomas provided clarification on QMCC April/May data, specifically regarding March percentages documented in the April report for Advance Directives, hobbies and visits from families. Also included were the criteria for risk status taken from the QMCC protocol and additional details on the types of visits, staff, and time spent in clinical consultation for QMCC staff.

She then reviewed SOS status for the period of June 12 through August 13, 2010.

Monarch Springs LTSR:

- Census is 13; vacancies—2; admissions: 1 and 1 pending. There were 2 discharges. All residents receive services from CTT and CST. Programming and work programs continue.

Specialized Small Homes:

- Bethel Park remains at full capacity with census of three and no admissions or discharges. The residents continue to express satisfaction with the home. A request that NHS submit referral for resident to be transferred to Mercy BH CTT has been made.
- Carnegie remains at full capacity with census of three. There was one female discharge and one male admission. One resident who was being monitored for medical condition returned from the hospital and continues to improve.

Discussion followed regarding the transition to Mercy. Terry Carik announced that Bethel will be open and fully staffed with Mercy personnel on October 1. Carnegie will be fully staffed on November 1. Monarch Springs LTSR will be fully staffed sometime in December. Doritta Gross added that they have begun to post job positions and are proceeding to hire staff; supervisors are in place for both small homes. Plans are underway for staff to be trained at other residential housing sites prior to their start date.

The referral process is being refined. When an opening is anticipated, a notice is sent to the five counties. Counties can submit referrals for the open spot. If more than one county submits a referral, a review panel will convene with representatives from the counties to determine which referral should be submitted to Mercy for the opening. Discussion ensued regarding criteria for referrals.

Community Support Team (CST) Summary Report:

- The CST accomplished 594 service events to 182 consumers in Allegheny, Beaver and Washington counties in June and July 2010. CST received 7 new requests for 7 consumers in June and July.
- Designees with CST requests in place are Kim Welsh (Allegheny County), Marilyn Kurash-Huber (Beaver County) and Donna Bevan (Washington County). The CST leader will continue to meet with these designees between SOS meetings at mutually-agreeable times.

Quality Management Clinical Consultation (QMCC) Summary Report:

QMCC staff were utilized in the following services during June/July:

Clinical Consultation: 27 days

Community Support Team: 59 days

LTSR: 57 days

All clinical consultation occurred in the month of June. There were 6 staff assigned to QMCC during the month of June and 5 in July (one retirement 6/25/10). Currently, one staff is awaiting a confirmed transfer to another state position. Based on the lack of staff used for clinical consultation, and also declining staff numbers, it is recommended that the entire QMCC team be reassigned to the Community Support Team effective September 1, 2010. Clinical consultation can continue to occur as needed through CST referrals. All staff will continue to be assigned to

the LTSR on a daily basis if they have no CST assignment. Future Steering Committee Reports will consist of the CST report (no changes in current format) and hours spent in the LTSR.

Discussion followed regarding the need to scale down and to have closure with consumers. A date of October 1 has been set for the last referrals to CST, excluding spiritual support. As of September 1, there will be no more QMCC; everyone will be assigned to CST. Also discussed was the need to identify consumers who might need a “safety net” in October. Kathi promised to provide more detail on this segment of the population at the next meeting.

4. IP Census

Tim Casey reviewed the IP Census charts, which detail IP Census numbers by percent occupied by day, by month, by facility, and by unit type. UPMC Mercy has been added and Heritage/Beaver will be added at the end of the month. Other hospitals in Allegheny County that have been approached for this project include St. Clair and McKeesport.

The first chart, Percent Occupied Overall by Month, illustrates a 90% occupancy rate from March 2010 going forward, while the second chart, Percent Occupied Overall by Day, shows more fluctuation, but still averages 90% occupancy.

Discussion followed regarding the TRU unit and available beds. Also discussed was out of county admissions and the reasons for no available beds.

Tim raised the possibility of a regional bed search application. Committee members discussed hospital requirements stemming from the MH/MR Act and enhancements of their current capabilities to do a regional bed search.

5. EAC/Community-Based Resources Discussion

Due to time constraints, this agenda item will be discussed at the next Steering Committee meeting. The discussion will focus on an expanded dialogue regarding EAC and outliers, access to services, and conversion of resources into community.

6. Topics for Upcoming Next Steering Committee meeting – October 15, 2010

In addition to the EAC/community-based resources agenda item, regional planning and the role of the Committee in the new administration will be discussed.

There being no further business, the meeting was adjourned. The next meeting will be held on Friday, October 15 from 9:00 a.m. – 12:00 p.m. at the **Airport Marriott**.