

ARLINGTON COUNTY COMMUNITY SERVICES BOARD

Mental Health Committee

4/18/18

Approved 5/23/18

Committee Members Present: Judy Deane (Co-chair), Dori Mitchell (Co-chair), John Mitchell, Wayne Bert, John Blount, David Fitzgerald, Debra Byrd, Anne Hermann, Scott Brannon, Betsy Greer

Committee Members Absent: Lee Long, Adi Radhakrishnan, Tom Quinn, Cathy Lewis, Tamara Theiler, Caroline Bragdon, Steve Gallagher, Leslie Gosling, Sam Howlett

Staff Present: Alan Orenstein, Leslie Weisman, Kelly Nieman, Alexis Mapes, Grace Guerrero

Observer: Florence Jones

Call to order: The Chair called the meeting to order at 5:00 pm.

Approval of Minutes: The Committee approved the 3/28/18 minutes with correction.

Client Services Entry Procedures

- **ACCESS.** Ms. Mapes explained that ACCESS is a contracted, crises stabilization program with 6 beds. It is partially state funded and Emergency Services is the gatekeeper. There are approximately 9 admissions/month, with a 65% bed utilization rate. The challenges for admission are that a 14-day medication supply and prescriptions are required, and some clients have medical or SA complications. In response to questions, she also explained that there is coverage by a prescribing Nurse Practitioner 1-2 times weekly; and ACCESS does accept MOT-involved clients. There is an extensive schedule of activities through the day. The level of supervision at ACCESS may not be sufficient for some clients who are then referred to the hospital. For example, the program is voluntary and there are no locked doors.

There were comments from members who had experienced or were aware of situations in which families were not informed by VHC of the availability of ACCSB crisis beds. Ms. Weisman and Ms. Mapes indicated that they would look into it. In response to a question about the 65% utilization rate, Ms. Mapes responded that it was in part explained by some clients needing a more secure environment (hospital) and Dr. Orenstein's noting that several years ago there was an increase from 4 to 6 beds without additional cost, because with the 4- bed house, there were frequent times when a bed was not available.

- **TDO Criteria ("third prong").** Ms. Weisman explained that the "third prong" relates to ability to care for self), defined in terms of self-care, food, safety, and orientation. She noted that 71-78% of TDO' d clients are ultimately committed, based on the determination by independent evaluator (IE) and the decision of the Special Justice. In response to questions from Ms. Greer, Ms. Weisman clarified the IE's function and that there is little relationship with the IE who is not a part of the CSB; it is independent.
- **Competency Code and Procedures.** Kelly Nieman distributed and summarized relevant competency codes (19.2-169.1 and 19.2-169.2). She explained that competency is determined by the person's capacity to understand criminal charges, and the ability to participate in a trial and contribute to their own defense. Restoration to competency can occur while the person is an inpatient (which is typical and at Western State Hospital) or as an outpatient. We have a forensic discharge planner that serves out clients at Western State Hospital. There are various tools and techniques used for the restoration which then is followed by a reevaluation. Several members of the CSE Jail Diversion/Forensic Program are trained in competency evaluation. There are now 16 Arlington clients awaiting restoration at Western State Hospital.

Outpatient Services Director's Report:

- Interagency Agreements: Dr. Orenstein explained the requirements that the CSB has and review interagency agreements. He described the status of the three MH-related agreements:
 1. VDRS: multiyear agreement with renewal required 6/30/20 20, no change
 2. Area Agency on Ageing: multiyear agreement with renewal required 6/30/2019, no change
 3. VHC/Sheriff: renewed effective 7/1/18 with renewal required 6/30/2021, otherwise no change

The Committee approved the three interagency agreements. Action: Dr. Orenstein will inform DHS management of MH Committee interagency agreement review.

- Meeting Schedule: Dr. Orenstein reminded the Committee of the next meeting is scheduled for 5/23 and the agenda will include: a program review, review of the preliminary FY20 program budget proposals, and scheduling of at least the September meeting. He noted he had checked on the status of FY19 priorities, and one is outstanding (young adult case manager), and others were internally resolved, not resolved, or the status is still to be determined. Actions: Dr. Orenstein will: 1) update the Program Review document; and 2) request preliminary FY20 budget priority proposals of program management staff.

There was also discussion of the 5/23 agenda and the Chair requested that a presentation by the homeless outreach team (TOW) be scheduled. There was discussion also of the need to schedule a June meeting and the date, since Dr. Orenstein would be on leave at the time of the regularly scheduled meeting. After discussion, the Chair requested that a June meeting be schedule for 6/13/20 5-7:00pm and the membership be informed. Action: Dr. Orenstein will schedule the TOW presentation for 6/13/18; Action: Dr. Orenstein will inform the Committee of the meeting schedule changes.

Chairs' Report: Ms. Deane noted interest in getting into State level advocacy, beyond commenting on periodic budgets. Mr. FitzGerald detailed his involvement in advocating for various state code changes, in conjunction with Patrick Hope:

- 934 extending MOT from 90 to 180 days. Tabled since opposed by NAMI since not consulted
- 935 to allow medication in the jail over client objections. Passed by the House
- 936 to eliminate language requiring consent for MOT. Opposed by NAMI and there were other opposing advocates and was tabled.

Mr. Fitzgerald explained that he had discussed code changes with Ms. Weisman in meetings with her and Ms. Nieman last year and asked if these changes would be supported by CSB management. Dr. Orenstein indicated there had been no recent, specific discussion about this but that there might be support. Mr. Fitzgerald with concurrence of the Chair asked if this could be checked with the CSB management. Action: Dr. Orenstein will consult with Ms. Weisman and bring up the question of support at the next Leadership Team meeting.

There was some discussion of the different views on coercive methods and the need to seek the right balance with a person's human rights.

Ms. Mitchell described the "We Care Dinner" held at the 13th Street group home. Participating were: 8 residents, 6 CR staff (including the CEO), 3 family members, and 4 people from the CSB and Mental Health Committee. Pizza, salad, cupcakes and beverages were served., attendees socialized, and there was an informal discussion of what residents liked (safety, location, staff) and would like (new sofa, more house and outside activities). The house was toured and appeared clean and well furnished. The next dinner will be at the Fillmore house 5/16.

Adjournment: The meeting adjourned at 6: 50 pm.