

Denton County Behavioral Health Leadership Team

November 30, 2017

8:00 a.m. - 9:30 a.m.

United Way of Denton County (1314 Teasley Ln, Denton, TX 76201) Agenda

I.	Welcome	T. McKinney	2 min.
II.	Consideration of September Meeting Minutes (approval) (attached)	T. McKinney	2 min.
III.	SIM Webinar Discussion	S.Redwine	10 min.
IV.	Denton County MHMR Update	P. Gutierrez	15 min.
V. •	Veterans Initiatives TV+FA Phase I TV+FA Phase IIB New TV+FA grant application	S. Redwine	10 min.
VI.	Denton County Veterans Center Update	B. Widmer	10 min.
VII.	UWDC Annual Report/Needs Assessment	G. Henderson	10 min.
VIII.	 Workgroup Reports(attached) Veterans - Colonel Chris Martin Jail Diversion - Dr. Teresa McKinney Child and Family Systems - Dr. Lisa Elliott & Lau Community Conversation - Elizabeth Ferring Mental Health Court - Tami Russell 	Workgroups ra Prillwitz	20 min.
IX. •	New Business Dates for DCBHLT bimonthly meetings for 2018	T. McKinney	
Χ.	Public Comments		
XI.	Adjourn	T. McKinney	

Next Meeting: January 22, 2018 @ 8:00 a.m. United Way of Denton County





Denton County Behavioral Health Leadership Team November 30, 2017 Meeting Minutes

Appointees present: Russ Kerbow, Dr. Lisa Elliott, Louise Baldwin, Dr. Stephanie Brown, Monya Crow, Craig Daugherty, Elizabeth Ferring, Melinda Galler, Dr. Bill Giese, Councilman TJ Gilmore, Monica Glenn, Mayor Bill Heidemann, Mary Jones, Jane Krhorjak, Captain Douglas Lee, Chief Robin Paulsgrove, Dr. Kathryn Stream, Dr. Richard Valenta, Terry Widmer

Ex-officios present: Gary Henderson, Judge Doug Robison, Sonia Redwine

Appointees absent: Dr. Teresa McKinney, Dr. Roxanne Del-Rio, Samantha Castle, Gary Fullerton, Judge Barbara Gailey, Dr. Tim Harris, Chief Lee Howell, Dr. Randall Langston, Commissioner Bobbie Mitchell, Dr. Matt Richardson, Juan Rodriguez, Judge Coby Waddill, Mayor Chris Watts

Meeting called to order at 8:00am

I. Welcome R. Kerbow Chief Russ Kerbow called the meeting to order and welcomed guests.

II. Consideration of September R. Kerbow
Meeting Minutes included for approval, including the electronic minutes to vote for a letter of support for DCMHMR.

Motion to approve minutes. Minutes were approved unanimously by DCBHLT.

III. SIM Webinar Discussion S.Redwine

The Sequential Intercept Model is an evidence based model that is recommended through the state. This model has been proved effective when working with justice-involved persons with mental and substance abuse disorders. Sonia reviewed the key issues in each intercept (see attached handout with SIM chart). SAMHSA offers free workshops to help communities implement the SIM model. The DCBHLT was not able to garner enough support from the required agencies to submit an application to bring a free SIM workshop to Denton. However, on November 15th members of the DCBHLT were invited to sit in on a webinar where 3 communities shared how they implemented the SIM model, with support from SAMHSA. With more understanding of how the SIM is used in practice, my hope is that we will be better prepared for future opportunities, including SB292, as it was listed in the RFA.

The model has intercepts 0-5, or opportunities for intervention. 0 focuses on community services and early detection/intervention; 1 focuses on law enforcement; 2 focuses on initial detention/court hearings; 3 focuses on jails and specialty courts; 4 focuses on reentry; and 5 focuses on community corrections.







Strengths include the DCBHLT, trainings in place, CIT, specialty courts. Opportunities include information and data sharing across community agencies and coordination of release with social services support.

As we look at our jail diversion workgroup, we see the SIM as an opportunity to improve communication, reduce duplication of services, identify gaps in services, and improve recidivism rates.

Suggestion to reach out to THR to look at ED Navigation.

Letters of support needed to pursue application include Denton County courts and Social Security Office.

Bonds and bond programs highlighted as a factor to jail recidivism.

Douglas Lee mentioned Houston as a model to look at for Mobile Crisis Team. Sonia mentioned the Colorado Springs Model as another example.

Need Mental Health Court and Jail Diversion workgroups to focus on SIM. Possible ad hoc workgroup for ED diversion.

Suggested to look at CASA model to utilize and train volunteers to fulfill gaps in the community to support some of the areas in SIM.

IV. Denton County MHMR Update

P. Gutierrez

Not able to get match for Crisis Stabilization Unit for SB 292 and HB 13. 1115 Waiver funding is uncertain, so MHMR wrote for \$1 million grant to sustain Psych Triage for SB292. Received a letter of support from DCBHLT.

Should know something about SB292 in the Spring 2018.

Pam asks the group to consider the needs of the community and further discussion on CSU, including a capital campaign.

V. Veterans Initiatives

S. Redwine

TV+FA Phase I

Served 280 Veterans and their family members in grant year. Looking towards sustainability with 1 VCN and 1 MSW intern. Currently sustained with UWDC budget through March 2018. Goal is to shift program to Denton County VSO for FY19. Positions funded through March. Applied for TVC Mental Health Grant, TVC General Assistance Funds grant, and Flow Foundation grant to bridge gap from April 2018 until October 2018. In addition to salaries, the grants requested funding for transportation, living costs, and MH services for clients.





TV+FA Phase IIB

Slow start to grant; 11 veterans and 1 dependent have gone through Project Camo, with a goal of 110. Spring 2018 dates have been selected. Course will be held at Denton County buildings throughout the county, in addition to the Denton County Veteran Center. Please help share this program with Veterans and their dependents. We are also open to providing the course to faith based organizations, so if you have contacts, please share with us. We will have an intern helping with outreach next semester.

Gary asked for support to connect with military families at the schools. Dr. Elliott suggested support groups, posters in non traditional places.

Bob Widmer offered lunch and open house for Veterans Center to see what resources are being colocated in the center.

Chris Martin addressed the question regarding Veterans experiencing homelessness. HMIS has identified 45 experiencing homeless, 10 literally homeless identified in Veteran Stand Down. VA offers case management for those Veterans who receive HUD-VASH vouchers (10 received and used for the county).

Terry Widmer mentioned barriers for Veterans experiencing homelessness include lack of case management and not enough units available. Veterans who have a criminal background have limited options to the types of housing available.

Gary Henderson discussed barriers fund in Homeless Coalition to help with those individuals who need additional incentive to be housed.

Chris Martin identified that we are not reaching those who are newly out of the military for Project Camo.

What is not captioned in the data are the number of community members who have completed the military module of MHFA training through this grant. Our grant metric is 100 community members. We have reached 41 to date.

- New TV+FA grant application
 Application due December 4th. Looking for new ideas, as we cannot apply for sustainability of the program. We would need to make a modification to the VCN program in order to reapply for the grant.
- VI. Denton County Veterans Center Update

 Low Income Taxpayer Clinic is a 501c3 that began about a year ago. It uses graduate accounting students to provide support for clients. Saw more and more Veterans come through the LITC for services. B. Widmer wanted to learn more about what was being done for Veterans in the community.







He raised funds for the Veterans Center which provided rent (\$2100/month) and refurbished the space. Nice collaboration between the Veterans Center and the LITC. 75 active clients, 25 of which are Veterans at the LITC.

VII. UWDC Annual Report/Needs Assessment G. Henderson Needs assessment at a glance distributed to DCBHLT members. Focus on children experiencing homelessness. 47,000 adults living in poverty, with single female head of household making a large percentage. \$33 living wage in Denton County. Veterans experience suicide a higher rate than civilians. 50 % of homeless population work full time. 135,000 experiencing mental health illnesses. Growth in Denton County, so the need for infrastructure for non profit organizations continues to grow.

VIII. Workgroup Reports(attached)

Workgroups

- Veterans Colonel Chris Martin-no meeting last month. Working on peer support.
- Jail Diversion Dr. Teresa McKinney-no update
- Child and Family Systems Dr. Lisa Elliott & Laura Prillwitz: Continue to work on Texas System of Care designation. Reached out to Community Conversations to garner feedback from consumers. Making progress with the Ok to Say banners.
- Community Conversation Elizabeth Ferring: Meeting at Emily Fowler library to collect feedback from community.
- Mental Health Court Tami Russell- no update

IX. New Business

R. Kerbow

- Dates for DCBHLT bimonthly meetings for 2018
 January 18, March 22, May 17, July 19, September 20, November 15
- X. Public Comments

VA behavioral health center expansion update from Gary. VA will schedule a meeting through Congressman Burgess' office once they have their permanent staff in position. Need DCBHLT to advocate for expansion of services for Denton County Veterans.

DCPH Community Health Improvement Plan Release December 7 10am-12pm. Will bring back the strategic goals the county has set for mental health.

XI. Adjourn

R. Kerbow

Next Meeting: January 22, 2018 @ 8:00 a.m. United Way of Denton County

Secretary	Date





Denton County Behavioral Health Leadership Team

November 14, 2017 Electronic Voting

Motion to move forward with a letter of support for Denton County MHMR for the SB292 grant application to sustain the Crisis Residential Unit.

Based on the members who responded, the motion to move forward with a letter of support on behalf of the DCBHLT for Denton County MHMR passed.

Appointees responding:

Louise Baldwin

Stephanie Brown

Samantha Castle

Monya Crow

Dr. Roxanne Del-Rio

Dr. Lisa Elliott

Melinda Galler

Judge Barbara Gailey

TJ Gilmore

Monica Glenn

Dr. Timothy Harris

Chief Lee Howell

Mary Jones

Chief Russ Kerbow

Jane Krhovjak

Captain Douglas Lee

Dr. Teresa McKinney

Commissioner Bobbie Mitchell

Chief Robin Paulsgrove

Dr. Matt Richardson

Dr. Nicki Roderman

Juan Rodriguez

Dr. Richard Valenta

Honorable Coby Waddill

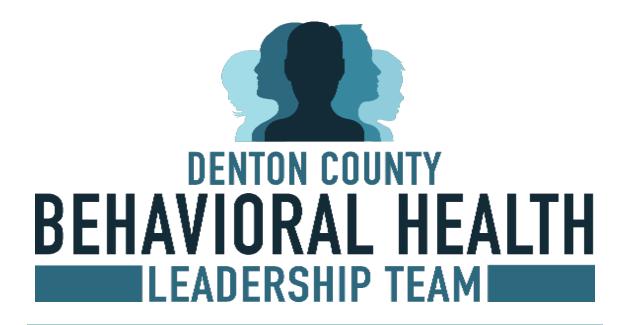
Mayor Chris Watts

Terry Widmer

Secretary Date







Comprehensive behavioral health services for every person in Denton County.

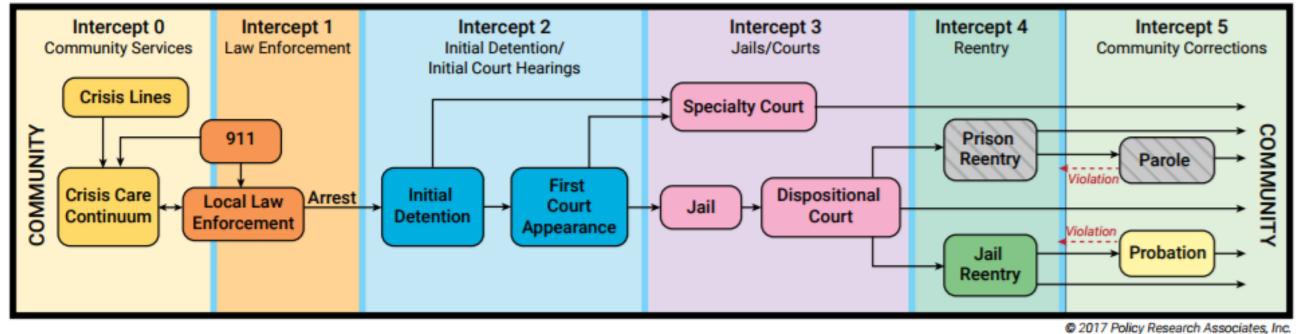
A collective impact initiative supported by:







The Sequential Intercept Model



Policy Research Associates (2017), The Sequential Intercept Model: Advancing Community-Based Solutions for Justice-Involved People with Mental and Substance Abuse Disorders

Intercept 0

Mobile crisis outreach teams and coresponders. Behavioral health practitioners who can respond to people experiencing a behavioral health crisis or co-respond to a police encounter.

Emergency departments. Emergency departments (EDs) can provide triage with behavioral health providers, embedded mobile crisis, and/or peer specialists staff to provide support to people in crisis.

Police-friendly crisis services. Police officers can bring people in crisis to locations other than jail or the ED, such as stabilization units, walk-in services, or respite.

Intercept 1

Dispatcher training. Dispatchers can identify behavioral health crisis situations and pass that information along so that Crisis Intervention Team officers can respond to the call.

Police-behavioral health collaborations.

Police officers can build partnerships with behavioral health agencies along with the community and learn how to interact with individuals experiencing a behavioral health crisis.

Intervening with frequent utilizers and providing follow-up after the crisis. Police officers, crisis services, and hospitals can reduce frequent utilizers of 911 and ED services through specialized responses.

Intercept 2

Screening for mental and substance use disorders. Brief screens can be administered universally by non-clinical staff at jail booking, police holding cells, court lock ups, and prior to the first court appearance.

Data matching initiatives between the jail and community-based behavioral health providers.

Pretrial supervision and diversion services to reduce episodes of incarceration. Risk-based pre-trial services can reduce incarceration of defendants with low risk of criminal behavior or failure to appear in court.

Intercept 3

Treatment courts for high-risk/high-need individuals. Treatment courts or specialized dockets can be developed, examples of which include adult drug courts, mental health courts, and veterans treatment courts.

Jail-based programming and health care services. Jail health care providers are constitutionally required to provide behavioral health and medical services to detainees needing treatment.

Collaboration with the Veterans Justice Outreach specialist from the Veterans Health Administration.

Intercept 4

Transition planning by the jail or in-reach providers. Transition planning improves reentry outcomes by organizing services around an individual's needs in advance of release.

Medication and prescription access upon release from jail or prison. Inmates should be provided with a minimum of 30 days medication at release and have prescriptions in hand upon release.

Warm hand-offs from corrections to providers increases engagement in services. Case managers that pick an individual up and transport them directly to services will increase positive outcomes.

Intercept 5

Specialized community supervision caseloads of people with mental disorders.

Medication-assisted treatment for substance use disorders. Medicationassisted treatment approaches can reduce relapse episodes and overdoses among individuals returning from detention.

Access to recovery supports, benefits, housing, and competitive employment. Housing and employment are as important to justice-involved individuals as access to behavioral health services. Removing criminal justice-specific barriers to access is critical.

TV+FA Phase 1 Pilot: Community Navigator Program Final Report

		Actual Unduplicated Clients Served				
		FY16 Q4	FY17 Q1	FY17 Q2	FY17 Q3	FY17 Q4
Measure: Unduplicated Clients Served	Estimated Clients to be Served	6/1/16- 8/31/16	9/1/16- 11/30/16	12/1/16- 2/28/17	3/1/17- 5/31/17	6/1/17- 8/31/17
Veterans						
Mental Health Services Only		2	2	1	8	0
Non-Mental Health Services Only		2	16	5	16	25
Both Mental Health/Non-MH Services]	9	36	40	77	9
Total Veterans Served		13	54	46	101	34
Family Members - Adults						
Mental Health Services Only		0	1	0	1	0
Non-Mental Health Services Only]	1	5	1	0	1
Both Mental Health/Non-MH Services]	1	6	4	7	4
Total Family Members - Adults Served		2	12	5	8	5
Family Members - Children						
Mental Health Services Only		0	0	0	0	0
Non-Mental Health Services Only		0	0	0	0	0
Both Mental Health/Non-MH Services]	0	0	0	0	0
Total Family Members - Children Served		0	0	0	0	0
Total	200	15	66	51	109	39
Cumulative		15	81	132	241	280

TV+FA Phase IIB: Project Camo

		Actual Unduplicated Clients Served			
		Q4 FY17	Q1 FY18	Q2 FY18	Q3 FY18
Measure: Unduplicated Clients Served	Estimated Clients to be Served	6/1/17 - 8/31/17	9/1/17 - 11/30/17		3/1/18 - 5/31/18
Veterans					
Mental Health Services Only		0	0	0	0
Non-Mental Health Services Only		1	11	0	0
Both Mental Health/Non-MH Services		0	0	0	0
Total Veterans Served		1	11	0	0
Family Members - Adults					
Mental Health Services Only		0	0	0	0
Non-Mental Health Services Only		0	0	0	0
Both Mental Health/Non-MH Services		0	0	0	0
Total Family Members - Adults Served		0	0	0	0
Family Members - Children					
Mental Health Services Only		0	0	0	0
Non-Mental Health Services Only		0	0	0	0
Both Mental Health/Non-MH Services		0	0	0	0
Total Family Members - Children Served		0	0	0	0
Total	110	1	11	0	0
Cumulative		1	12	12	12

UWDC 2017 Needs Assessment

Proposed DCBHLT schedule for 2018

- January 18
- March 22
- May 17
- July 19
- September 20
- November 15





COMMUNITY HEALTH IMPROVEMENT PLAN RELEASE

DEC 7, 2017

701 KIMBERLY, DENTON

Behavioral Health in Denton County



Next Meeting Date:
January 18, 2018
8:00 a.m.
United Way of Denton County

