CALVERT COUNTY HEALTH DEPARTMENT

Local Behavioral Health Authority

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LBHAC Bi-Monthly Meeting Wednesday, April 13, 2022 12:00 – 2:00pm

Attendees:

Andrea McDonald-Fingland, Katie Wandishin, Sierra Ringley, Racheal Morgan, Amber Oliverio, Cheryl Harms, Cynthia Scribner, Julie Mashino, Candice D'Agostino, Betsy VanAuker, Lauren Joeckel, Christina Otruba, Danielle Johnson, Joe Windsor, Nick Defelice, Sonia Hinds, Noelle Flaherty, Jennifer Moreland, Ariane Odom.

I. Introductions/ Roll Call

- February Meeting Minutes approval
 - Motion to Approve
 - 1st- Noelle Flaherty
 - 2nd Ariane Odom
 - 0-Nays, 0- Stays, All in favor-(Unanimous)

II. LBHA Updates:

Andrea McDonald-Fingland-

- Final Annual Plan Submitted- Annual Plan review scheduled for 4/27/2022 from 10-12pm. LBHA and BHA are still working out some final details of the Financial Plan.
- Over the Allocation request were approved for:
 - MCCJTP
 - Wellness and Recovery Add an additional Certified Peer
 - LBHA/Adm- Add additional staff for the RRP program and COC.
- Strategic Planning Goals- reviewed and updates given on each goal (Slideshow presentation Shared) Chalk the Walk flyer shared with the Council.
- Homeless Essentials Flyer, order form and updates shared.
- Comfort Bags Flyer, order forms and updates shared.
- New LBHA- Path Coordinator position to be opened soon Critical time intervention
- COVID testing and mitigation Award- Contracting with BH providers to receive these supplies. Have to be NON- Profit organizations. Order form to come.
- MAT works for me website reviewed. Taking requests for flyers. Candice suggested the cards and flyers to go into the purple bags for overdose awareness that CASA is putting together.

- Started working on Policy and Procedure Manuals. If anyone would like to volunteer and assist, please let Andrea know.
- Preference to returning to IN-Person meetings?
 - Arianne, Sonia, fine day, time and virtual.
 - Cheryl Harms, good with the date, if stayed virtual it would be beneficial to have it at a different time, due to lunch hour and following meetings.
 - Betsy, prefers virtual, date and time are fine.
 - Meetings will remain virtual at the Same date and time for the moment.

Katie Wandishin

• **Reminders:**

- We are still looking for volunteers in recovery from SUD and/or MH to do testimonials for Social Media Campaign
- Community Conversations Anti-Stigma Training: Language Matters event coming up on April 28, 2022 from 6pm-8pm. Contact me for details.
- Community Conversations Panel Event on May 25, 2022 from 6pm-8pm at Southern Community Center in Lusby (Hybrid Meeting) – Panelist discussion on Calvert County treatment services for individuals with SUD; target audience is Calvert County residents & BH professionals.
- <u>RRP</u>- Currently 1 open Bed in General & 1 Intensive Bed open -No General RRP applications on a waitlist.
- Currently scheduling presentations on funds to local providers to educate them on the process and eligibility requirements

STATS updates -

- <u>Adolescent Clubhouse -</u> currently have 32 members enrolled with 4 referrals pending
 They had 20 referrals last month (March) mostly from public schools.
- <u>Oxford House-</u> both houses in Chesapeake Beach are open and accepting new residents.
- <u>Hub and Spoke</u> 88 New enrollments since the beginning of this grant funded service.
 - Only One spoke enrolled. Focus on getting more SPOKES enrolled to initiate the coordination between Hub and Spokes.

Sierra Ringley

- <u>CoC Program-</u>
 - Still working to assist a client with transitioning from homelessness to housed. Transferred to more intensive community services.
- <u>C&A-</u>
 - Most child and adolescent behavioral health providers are still full with increasingly long waitlists.
 - There has been an ongoing issue with youth coming back from RTCs and not having their MA converted back to community quickly enough to get them seen by providers within 30 days.
- Optum said: This is an issue that affects all children coming out of an RTC. They have seen a trend where the community MA is transferred about a month after the child has been discharged from the RTC, and can sometimes last up to 90 days. The problem is actually a Medicaid issue. Optum leadership is working with BHA to come up with a work-around solution for this.
 - Other jurisdictions are utilizing their crisis response system for short-term therapy and medication management; however, this does not cover the cost of medication, but the local CSA is covering it.
 - They have discussed creating an unfunded auth for TCMIII services, BUT this does not mean that the provider will get paid; it's just "placeholder"

> <u>Rachel Morgan</u>-

- o General Services Substance Use Services Performance Measures
 - •All Performances measures are doing well
 - •All programs are on target with their budget and anticipated to spend all
- <u>Treatment in the Detention Center</u>
 - •Counseling Services to inmates with mental illness, SUD and Co-occurring disorders. They will need to meet Level of Service/Case Management Inventory (LS/CMI) and ASAM. Individuals are also linked to community resources.
- o States Attorney Liaison
 - The State's Attorney Liaison will build relationships with the local Office of the State's Attorney, as well as the Office of the Public Defender. This position will work to remove barriers to treatment for individuals with behavioral health disorders.
- <u>Peer to Peer</u>
 - Peer to Peer services are unique in that the delivery of these services is facilitated exclusively by individuals who identify as having lived experience in behavioral health recovery. Peer-to-Peer services can be facilitated within a formal setting such as a community-based treatment program but are not exclusive to that setting.

- <u>Recovery Community Center (On Our Own)</u>
 - Is a recovery-oriented sanctuary in the heart of the community. RCC will focus on supporting recovery and the establishment of life in the community.
- Temporary Cash Assistance
 - This program funds a Licensed Addiction Counseling Professional who is responsible for screening, assessment, and referral to treatment for individuals that are referred by LDSS case workers. Case management and care coordination will be provided to individuals meeting criteria for substance use counseling services to assist them in meeting their goals and maintaining recovery.
 - PMS Are on the right path for some. This is 100% and 0% at the same time. Bec those are already enrolled in treatment when they are being assessed.
 - Budget On track for spending the whole awarded amount

• Substance Abuse Treatment Outcomes Partnership (STOP)

- Healthy Beginnings and MAT in the Detention Center
 - Jail-based services will be used to sustain behavioral health screening, assessment, treatment, and case management services to inmates at the local Detention Center. Pregnant and postpartum case management services will aim to reduce infant mortality, preterm births, and low-birth weight babies particularly in vulnerable populations including substance users, women of lower socioeconomic status, and the historically underserved. CCDC treatment services on track for meeting PMS and spending the awarded budget
- Healthy Beginnings
 - Not much data had been collected due to staffing with the vendor. It is known that they are working on these PMS' but no reported data will be collected until March 2022. Started spending HB part of Stop as of March 2022.
- Substance Use Federal Services
 - All are doing well with their performance measures and it is anticipated that they will meet them or be close to them. (some have already passed their anticipated) Projected to spend the entire budget
- <u>SUD Court Assessor:</u>
 - This program will provide behavioral health assessment, case management, and care coordination to individuals with Substance Use Disorders involved with the criminal justice system in order to divert them, when appropriate, from incarceration and into treatment services.

- <u>MAT Coordinator/Case Manager:</u>
 - Provide care coordination to individuals seeking Medication Assisted Treatment in Calvert County.
- <u>School Based Services Coordination:</u>
 - This program will connect youth in crisis or experiencing behavioral health events to school and community-based behavioral health services. Coordinate the provision of comprehensive integrated services for young children and their families
- State Care Coordination:
 - The purpose is to expand access to a comprehensive array of community-based behavioral health services for Maryland residents in varying stages of recovery. It is designed to improve recovery outcomes for individuals identified as at high risk for relapse. They will do this by providing care coordination.
- Drug Court Treatment:
 - On target with their performance measures and also budget drug treatment courts are specialized court dockets that target criminal defendants and offenders, juvenile offenders, and parents with pending child welfare cases who have a substance use disorder. This grant funds 1 Full Time Service clerk to assist the individuals with successfully completing Drug Court
- Crisis Response Services
 - PMS: doing well with the exception of C&A crisis services have not been able to find staff to fill this position. Also, linkage to resources at Discharge for RCS is due to them typically already being connected. Budget: programs are doing well with the exception of C&A Crisis services.
- Crisis Call Hub:
 - To provide a centralized crisis call center with dispatch services 24/7/365
- <u>C&A Crisis Services:</u>
 - To provide mobile crisis intervention to children and adolescents in Calvert County. Licensed MH Professional
- Residential Crisis Services (RCS) Porter house
 - To establish RCS Short-term, intensive mental health and support services for adults in Calvert County in a community-based, non-hospital, residential setting rendered by a provider approved under Maryland Law (COMAR 10.63.04). Services are provided to prevent psychiatric inpatient admission, to provide an alternative to psychiatric inpatient admission or to shorten the length of inpatient stay. Crisis Stabilization Center typically.
- o <u>Buprenorphine Initiative</u>

• This program will assist with reducing barriers to accessing Medication Assisted Treatment (MAT), in particular Buprenorphine based treatment services, in Calvert County. PMS: The medication is for uninsured or underinsured people. Have not had many requests and LBHA is now doing a presentation on these funds. WE have not had as many requests like we thought. BUDGET: on track to spend the award amount

• Maryland Recovery Network (MDRN)-Client Support Services

• Funds used by the LBHA to assist MDRN SU Clients to enable them to access or retain community based behavioral health services and ensure they are linked to their recovery goal plans. Challenging to get funds approved, not allowed to advertise and only eligible to those state care coordinated clients.

• State Opioid Response (SOR) II

- PMS: Doing well with them all. Crisis and MAT in Det. is doing well
- <u>Healthy Beginnings</u>: has not had a lot of clients that are enrolled but doing lots of outreach.
 - The Healthy Beginnings Program is an initiative committed to reducing infant mortality, preterm births, and low-birth weight babies, particularly invulnerable populations with OUD and stimulant use disorders to include cocaine and methamphetamines, and who may also have a lower socioeconomic status, be at high risk for infectious diseases such as HIV and hepatitis, and/or at risk for unplanned pregnancies.
- <u>Recovery Housing</u>: has 2 homes opened in the beach and accepting clients They houses are almost full (²/₃ openings) and they have their OD presentation scheduled for end of April
- <u>Hub and Spoke</u>: 8 new enrollments since the beginning of this grant funded service.
 - Only 1 SPOKE enrolled. Focus on getting more SPOKES enrolled to initiate the coordination between Hub and Spokes.
 - Respond to the OUD challenge by strengthening Calvert County's hub and spoke network of care, facilitating the transfer of an OUD patient between a community-based prescriber (Spoke) and a SUD treatment program {Hub}. Stabilize on MAT and then transfer to Spoke (primary care etc.)
 - ACH: (EJYC and MCF) supporting ACH that will provide recovery support for youth at risk of, diagnosed with or being treated for an OUD or stimulant use/ misuse disorder, or in recovery from an OUD &/or stimulant use/ misuse
- <u>ACH</u>: received 20 referrals in March! (not counted in PMS) will bring them up to 32 with 4 pending referrals. They have been staffing difficulties with MCF and still waiting for full time per. Person. Temp people started a few months ago and they have been holding monthly groups. Budget on track to spending it all

- <u>Crisis Now</u>: to fund a Mobile Crisis Team and Modified Safe Station. The Crisis Now Program will be community-based, peer driven, and provide an alternate intervention for individuals refusing transport by EMS to an emergency department or high risk for contact with EMS, police, and crisis response systems.
- MAT in the Detention Center:
 - To provide for case managers and therapists who administer the LS/CMI risk/recidivism tool to inmates at moderate to high risk of recidivism, resulting in an individualized treatment plan that includes substance use/mental health treatment along with linkages to vocation, DSS, medical, housing, transportation, educational and other services in the community.

• Mental Health Services

- PMS: Doing well with the exception of the Consumer support funds. Katie is doing presentation on these funds and how to request them. Budget: on track with budgeted amount.
- <u>Consumer Support Funds:</u>
 - Funds will enable youth to access or retain his or her community placement and/or meet their therapeutic goals.
- <u>EPS:</u>
 - This program will provide face to face psychiatric evaluations by a qualified mental health professional, available 24 hour per day, 7 days per week, 365 days per year. Somatic examinations will be conducted to rule out medical etiology of symptoms. The program will actively seek alternatives to hospitalization by making referrals to other community mental health services when appropriate. If psychiatric hospitalization is required, transportation will be provided or arranged.
- Urgent Care/ Diversion Appts:
 - this program will provide urgent outpatient mental health services at a licensed Outpatient Mental Health Clinic (OMHC) to individuals being discharged from the local Emergency Department following a psychiatric emergency. The OMHC will be compensated for holding 3 one-hour long appointment slots per week.
- Wellness and Recovery (OOO)
 - a site that allows individuals living in or seeking behavioral health recovery to meet at least 2,000 hours per year. This site will offer peer support services and provide individuals with the ability to connect with others in recovery while navigating local support services and overcoming barriers to their own personal recovery. Services are offered on a voluntary basis and are available to participants throughout their recovery process. Wellness & Recovery Centers are not recovery clubs, soup kitchens, or drop-in centers, although aspects of all of these can be apparent. These services are most effective in non-traditional settings such as no-barrier community support agencies, standalone non-profit community centers, and other non-clinical behavioral health settings.

• Maryland Community Criminal Justice Treatment (MCCJTP)

• This program will identify individuals involved with the Calvert County criminal justice system who have a serious mental illness and/or are at risk for reinstitutionalization. Inmates will be screened and assessed for Mental Health Disorders and, if eligible, referred to case management and counseling services.

o <u>Court Assessor</u>

• This program will provide behavioral health assessment, case management, and care coordination to individuals with mental health conditions involved with the criminal justice system in order to divert them, when appropriate, from incarceration and into treatment services.

• Project for Assistance with Transition from Homelessness (PATH)

• On track with performance measures and with spending awarded amounts. PATH links a vulnerable population of individuals experiencing serious mental health disparities to benefits, entitlements, and other supportive services in Calvert County, MD. The PATH staff will also provide Peer Support Services to enrolled individuals. The goal of this program is to assist individuals experiencing homelessness (or at imminent risk of homelessness) and who have SMIs or co-occurring SMIs and substance use disorders (SUDs) to secure safe, stable housing, improve their health, and live self-directed, purposeful lives in Calvert County, MD.

• Senior Mental Health Outreach

• Exceeding the expected PMS and with spending the awarded budget. To provide mental health services to seniors unable to access mental health services in traditional settings.

• <u>COC</u>

• Provide permanent housing and supportive services to primary target populations that are experiencing homelessness (as defined by HUD); these individuals primarily have difficulties with being housed due to their mental health, substance use, Co-occurring. 18 CLIENTS at this time. They are provided with case management services as well.

o <u>ADMIN</u>

• On track with all PMS and budget spending

Kristy Kidwell (Andrea Presented-

- Email forthcoming with details and deadlines for Re-appointments, New appointments as well as Financial Disclosure forms.
- Updated list of Advisory council vacancies. Flyer shared.

Ill. Sub-Committee Updates

> Child and Adolescent Subcommittee-

- Meeting held in March
- Chalk the Walk Event (shared flier)
- For Children's Mental Health Awareness Week (May 1-7), we are asking schools and other community members to participate in our "chalk the walk" event by writing and drawing positive messages with sidewalk chalk.
- I reached out to local news sources to get some media coverage, but I haven't received any responses yet.
- We will be meeting again next week to finalize a hashtag to share on social media.

> Behavioral Health Collaboration & Outreach Subcommittee

- Last meeting was on March 14th, 2022
- Worked on finalizing the work plan
 - Hoping to dig into the actual work/plans next meeting

IV. Advisory Council Member Updates:

- Arianne Odom- if anyone is interested you can come by Community Resources to see there "Chalk the Walk" display first week of May.
- Cheryl harms- New grant to cover Water turn -off notice/bills
- Motion to adjourn 1st- Betsy 2nd- Cheryl Harms All in Favor

Next LDAAC Meeting – June 8th 2022 from 12pm-2pm

Respectfully Submitted, Kristy Kidwell