

Denton County Behavioral Health Leadership Team

October 15, 2015

8:00 a.m. – 9:30 a.m.

United Way of Denton County, Inc. (1314 Teasley Lane, Denton, TX)

Continental Breakfast will be provided

Agenda

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|-------|---|--|---------|
| I. | Welcome & Introductions | B. Gailey | 5 min. |
| II. | Consideration of September Meeting Minutes (approval) (attached) | B. Gailey | 2 min. |
| III. | Denton County Citizens Council on Mental Health (action) (approval) | J. Mulroy | 10 min. |
| IV. | Strategic Planning Sub-Committee Update
Consideration of Vision Statement (discussion) | M. Richardson | 20 min. |
| V. | Workgroup Reports/Updates (attached) <ul style="list-style-type: none">• Child & Family Systems• Housing• Jail Diversion• Mental Health Court• Veterans• Consumer (Recommendation) | Workgroups | 40 min. |
| VI. | Public Relations/General Discussion <ul style="list-style-type: none">• Website Update• Logo Discussion | B. Gailey/J. Mulroy
T. Yan
S. Daughhetee | 10 min. |
| VII. | New Business | B. Gailey | |
| VIII. | Adjourn | B. Gailey | |

Next Meeting: November 19, 2015 @ 8:00 a.m.

Denton County Behavioral Health Leadership Team
September 17, 2015
Meeting Minutes

Appointees Present: Bryan Langley, Chief Lee Howell, Chief Russ Kerbow, Councilwoman Sanden Daughhtee, Commissioner Bobbie Mitchell, Chief Deputy Randy Plemons, Dr. Bill Giese, Dr. Kathryn Stream, Dr. Lisa Elliott, Dr. Matt Richardson, Dr. Nicki Roderman, Dr. Richard Valenta, Dr. Roxanne Del-Rio, Dr. Teresa McKinney, Dr. Timothy Harris, Elizabeth Ferring, Gary Seguin, Gina Warr, Joe Mulroy, Juan Rodriguez, Judge Barbara Gailey, Louise Baldwin, Melinda Galler, Monya Crow, & Councilman Tj Gilmore

Ex officios present: Gary Henderson, Judge Doug Robison, Lacrica Olson

Appointees Absent: Dr. Derrell Bulls, Dr. Monica Mendez-Grant, Jim Russell, Judge Coby Waddill, Mayor Chris Watts, and Prudence Sanchez

Meeting called to order 8:05 a.m.

Welcome & Introductions

Judge Barbara Gailey provided the welcome and recognized first time attendees to the team, along with recognition of guests.

Consideration of August Meeting minutes

The August meeting minutes of the Denton County Behavioral Health Leadership Team were reviewed and approved:

Motion: Commissioner Bobbie Mitchell

Second: Councilman Tj Gilmore

Minutes approved as written

Strategic Planning Sub-Committee Update:

Dr. Matt Richardson provided an update from the strategic planning sub-committee. The group met on September 15, 2015. Matt provided an overview of the mission and vision planning process discussed during the August DCBHLT Meeting. The committee is dedicated to assisting with the vision and mission construction, but not the formation. It is the role of the DCBHLT to form the vision and mission. The vision and mission should reflect the journey and the destination.

The strategic planning committee proposed two draft vision statements along with key words for consideration and discussion. The terms provided are those that the committee has heard repeated on numerous occasions. The two vision statements proposed were as follows:

Vision 1: Ensure the mental health needs of every person in Denton County are met.

Vision 2: Comprehensive mental health for every person in Denton County.

A list of key words presented for consideration into the formation of the vision statement were as follows:

- Advance
- Advocate
- Ensure
- Establish
- Promote

The group also discussed at length the inclusion of behavioral health in the mission and vision rather than mental health. Both are unique and different, but need to be consistent as we share information with the community. Behavioral Health holds less stigma and is more inclusive than Mental Health.

Joe Mulroy, provided the group with information learned during the fact finding stage. As a lay person, his experience in the last year and half is that he knew Mental Health, but after hearing all of the conversations and engaging with Meadows, Behavioral Health is much more powerful, acceptable and holistic approach. Behavioral Health is the more acceptable term with professionals and to reduce stigma.

It was determined by consensus that since the group has Behavioral Health in the team name that the vision and mission should be consistent with the same terminology.

The team felt that Vision 1 appeared to be more active, action and outward focused. After discussion the group agreed that vision 1 as presented with the addition of continuity of care and identification should be revised and blended to reflect the following as proposed by Judge Doug Robison, **“Ensure that the identified behavioral health needs of every person in Denton County are met through a comprehensive system of care”**.

Next Step: The strategic planning committee will refine Vision 1 as proposed and present a final vision statement to the DCBHLT during the October meeting for consideration.

Matt also shared with the group that the strategic planning committee has also developed a list of key words for the development of the DCBHLT mission statement. The mission statement has not been developed but discussed. The Meadows report offers some guidance for the mission. The list of key words proposed were as follows:

- Establish and promote
- Mental health system
- Improvement
- Access
- Integration
- Community Case Management
- Wrap-around
- Cultivation
- Coordination
- Client/person centered approach

- Comprehensive
- Link
- Bridging gaps
- Facilitate

Matt also requested the team identify any keywords missing from the mission list. Those terms identified were as follows:

- Systems of Care
- Communication
- Advocate
- Identification of needs and inefficiencies
- Behavioral Health vs Mental Health
- Collaboration
- Affordable
- Participation
- Advocacy and Awareness

Next Step: The strategic planning committee will take the key words and feedback provided to begin development of a mission statement. Examples will be provided to the group.

The vision statement will be sent in the agenda packet in advance of the meeting for the team to review.

Judge Gailey also shared with the group that she is the current chair of the Denton County MHMR Board and MHMR is under state mandate to change their name. This would align with the discussion on the use of behavioral health versus mental health.

End User/Consumer Workgroup Update:

Lacrica Olson provided an update to the group on the new end user/consumer group as suggested by Commissioner Mitchell. The group will be dedicated to hearing directly from the consumers to complement decisions that will be made. There are currently 14 people confirmed to participate in the group. Individuals recruited for this workgroup were as a result of DCBHLT and workgroup members reaching out to individuals and families they may know personally or professionally. Once secured, Lacrica followed up with each person via phone to explain the role, timeframe, etc.

Those who have agreed to participate shared much enthusiasm for having a chance to be heard. The group represents a diverse group of participants including, both male and female, youth, adults, Veterans, family members of those receiving services, grandparents, caregivers, etc. The group also comprises a diverse group of illnesses including those that are not commonly talked about such as eating disorders. The first meeting of the workgroup will take place on September 30, 2015 at the United Way office. Judge Barbara Gailey and Dr. Matt Richardson will be in attendance to represent the DCBHLT. Lacrica has requested that there be minimal attendance from the DCBHLT to ensure that consumers do not feel intimidated and are open to share. Next month the report will fall under normal workgroup updates, and Lacrica will also be seeking a chair for the group.

Workgroup Reports/Updates:

Workgroup updates and highlights of individual workgroups were provided by the Chair of each group. A formal written report was provided in the DCBHLT agenda packet. Lacrica Olson provided

an update on behalf of the Housing and Mental Health Court Workgroup due to the absence of Terry Widmer and Tami Russell.

Workgroups have agreed that it is best to develop short, mid, and long term goals to generate high benefit. Some are still obtaining education and guidance on specific topics to present workable and evidenced based goals and objectives to the group.

Dr. Bill Giese also requested that the dates of the workgroups be placed on a calendar. This will allow DCBHLT members to have access to workgroup schedules should they have an interest in attending a meeting.

A list of workgroup chairs is as follows:

- Veterans: Mr. Chris Martin, Chair
- Mental Health Court: Ms. Tami Russell, Chair
- Housing: Ms. Terry Widmer
- Jail Diversion: Chief Deputy Randy Plemons
- Child & Family Systems: Dr. Lisa Elliott and Ms. Laura Prillwitz, Co-chairs

Public Relations/General Discussion:

Consideration of Website Proposal:

Teddy Yan, Marketing and Outreach Coordinator for United Way of Denton County provided a presentation for consideration of a website proposal. This would allow DCBHLT to have a separate website presence outside of United Way of Denton County.

The RFP for One Each, and the cost comparison for both One Each and Go Daddy were provided to the team in the agenda packet. One Each Technologies is currently used by United Way of Denton County.

Councilwoman Sanden Daughhtee recommended that the DCBHLT consider Dream Host as they offer free hosting for non-profits. She also volunteered to assist with the creation of the website, logo, etc. Joe requested that additional research, a list of menu options, and any additional expertise be sought for development.

Action: DCBHLT approved United Way staff to proceed with the development of a website and necessary items. Funding will be discussed at a later time. Item will be placed on the October agenda.

Motion: Dr. Bill Giese

Second: Dr. Tim Harris

Motion approved as stated

Speakers Bureau:

Chief Lee Howell has agreed to lead the Speakers Bureau and committee. Those who are interested should contact Lacrica or Chief Howell.

Community Impact Director Updates: Lacrica Olson, UWDC Community Impact Director provided regional updates from Dallas and Tyler. Dallas County has been in existing since 2011. Prior to a BHLT they were made up similar to a Citizens Council. Much can be learned from them, in that it has been difficult to connect with them due to lack of updates on their website, Facebook, etc. They are currently operating on a Charter only. As we think about communicating with the public, it is important to have good communication within the appointing agencies, awareness, and a person to contact regarding the progress of the DCBHLT.

Another community that is exploring the same type of approach is Tyler, Texas, which is located in Smith County. They have been involved with Meadows, and with United Way, however they are still in the planning phases. They are now bringing in United Ways of Texas to assist with some planning facilitation for the establishment of their team.

Joe and Judge Gailey shared with the group that United Way has been important to the success of the DCBHLT thus far. The amount of work that has happened in the last four months is remarkable.

New Business:

Facility Tours: Many people have shared an interest in touring both the jail and the juvenile detention center. A signup sheet is provided for those who are interested. The jail tour date has not been determined at this time, but the juvenile detention center tour is scheduled for October 9, 2015 at 10:00 a.m. Laura Prillwitz will provide the tour at the Juvenile Detention Center and Randy Plemons will work on arrangements for a tour of the jail.

The meeting adjourned by consent at 9:15 a.m.

**Next Meeting: October 15, 2015 @ 8:00 a.m.
United Way of Denton County Office**

Secretary

Date



DCBHLT Workgroup Reports

October 2015

WORKGROUP NAME: CHILD AND FAMILY SYSTEMS

CHAIR NAME: LISA ELLIOTT AND LAURA PRILLWITZ

Meeting Summary (provide meeting date, and items discussed during meeting)

The Child and Family Workgroup met on Friday, September 18th and again on October 2nd.

On September 18th, the Workgroup invited Sherri Hammack, Project Director, and Barbara Granger, Family Involvement Specialist, Texas System of Care, Office of Mental Health Coordination, Texas Health and Human Services Commission and Robert Shaw, Community Development Specialist, Texas Institute for Excellence in Mental Health, UT at Austin to present an overview of the Texas System of Care.

On October 2nd, the Workgroup invited Ernie McCraw, past Director of Advertising, Merchandizing, Displays, and Public Relations at Sally Beauty to discuss steps in the creation of a mass Media Campaign, and Sherri Gideon, Executive Director of CASA to discuss the possible inclusion of CASA volunteers in the Juvenile Court.

Short-term action items

The Child and Family Workgroup will meet on November 6th to review information presented during the previous two meetings to begin discussion on short and long term goals.

Accomplishments

Multiple short-term and long-terms goals continue to be explored, but have not yet been established.

The workgroup gained information relevant to setting those goals, during presentations regarding Texas Systems of care, asset mapping, volunteer Juvenile Court advocates, and development of a media campaign to address the stigma of mental health issues.

Concerns

None at this time.



DCBHLT Workgroup Reports

October 2015

WORKGROUP NAME: HOUSING

CHAIR NAME: TERRY WIDMER

Meeting Summary (provide meeting date, and items discussed during meeting)

The Housing workgroup met September 21st and will meet again on October 26th. The group was updated on the newly formed Consumer workgroup from Lacrica Olson.

Giving Hope provided a brief overview of the recent Housing Study commissioned with the assistance of a grant from Texas Homeless Network. The full presentation along with findings will be shared at the October meeting. The group also discussed the Housing the Homeless Survey and were briefed on the outcome of the Mayor's Homeless Taskforce including recommendations approved by Denton City Council.

Short-term action items

As the data collection and needs assessment discussion continues, the need for an intake and navigation system for the homeless and those at risk of being homeless is needed. This will also assist in long term navigation through the wrap around services available including supportive housing stabilization. A CASA-like model was suggested.

The group also determined the need to track those who are potentially homeless from UBH, Mayhill, Carrollton Springs and jail for the purpose of transitional placement.

Accomplishments

The group reports that housing services in Denton seem to be moving away from being a "silo" model to being more collaborative. In an effort to improve communication and education between groups an inventory of housing terminology will be shared with the group to allow for better understanding.

Concerns

As we study our various emergency and transitional housing services and rehousing programs our concern is that we are lacking data/services for homeless prevention and that these services are too restrictive to the city of Denton and do not adequately cover the county wide unmet needs.



DCBHLT Workgroup Reports

October 2015

WORKGROUP NAME: JAIL DIVERSION

CHAIR NAME: RANDY PLEMONS

Meeting Summary (provide meeting date, and items discussed during meeting)

The Jail Diversion workgroup met on October 7, 2015 to review jail intake forms that are required during the pre-booking process. Jail and correctional health staff were in attendance to provide an overview to on forms, completion steps, etc. Staff also shared what forms are required by state and federal law. Forms were reviewed and discussed at length.

The group also learned that during the prescreening process inmates/patients/clients are assessed a minimum of two times for suicide; once by medial and once by detention. Additional screenings are provided based on assessment. Other immediate health needs are also addressed during the prescreening process.

Short-term action items

Use feedback from workgroup to determine areas where revisions might be made possible.

As a portion of the discussion it was determined that additional forms can be made available to MHMR staff to better ensure continuity of care at release. MHMR staff will work with Doug Sanders, Correctional Health Supervisor to communicate protocol.

Accomplishments

Reviewing and having a better knowledge of the booking process, including assessment for those who are incarcerated.

Concerns

None identified at this time.



DCBHLT Workgroup Reports

October 2015

WORKGROUP NAME: MENTAL HEALTH TREATMENT COURT

CHAIR NAME: TAMI RUSSELL

Meeting Summary (provide meeting date, and items discussed during meeting)

The group met on September 24, 2015. The group discussed the status of 4 active cases in the court, 3 pending evaluations and 8 other notifications of interest. Staff discussed struggles of 2 participants both involving drug use and sanctions court will be using for infraction. A brief history of 2 new participants to court which are female were provided. Both females have violent past relationships. All participants report dealing w/ anxiety and depression. The group also discussed other cases that were interviewed for the program, but rejected due to substance abuse issues being more prominent than mental health. Evaluation process is going well, including cost.

The group discussed targeting appropriate candidates for program and providing a flow chart of process. Cari Coker advised the group that the county sheriff's office will be implementing a new protocol/screening when potential mental health clients are booked into the jail. New system will be implemented in October 2015.

Short-term action items

Seminar for Judges to share information about the court

Research establishment of a mental health IOP program

COG funding application to be released in December.

Research establishment of a potential continuous group therapy program

Accomplishments

Continued momentum and increased participants in the court.

Establishment of reduced cost evaluation, and use of community resources (DARS or CSCD) to facilitate court participants w/ employment, school, counseling.

Concerns

Upcoming grant proposal

Lack of family education for those w/ mental illness



DCBHLT Workgroup Reports

October 2015

WORKGROUP NAME: VETERANS WORKGROUP

CHAIR NAME: CHRIS MARTIN

Meeting Summary (provide meeting date, and items discussed during meeting)

On 24 Oct 2015, the Veterans Committee met with 13 members in attendance. The theme for this meeting was to assess the professional counselling services available to Veterans in the County, and determine how Veterans can gain access to those services. The committee was first briefed on the results of the last DCBHLT meeting, and the formation of the Consumer Group. Following that discussion, the committee was briefed by Latisha Gaten from the Dallas VA hospital on existing services available to Veterans. Ms. Gaten also provided the group with numerous VA "hotline" telephone numbers. Key to gaining access to those programs is enrollment into the VA system. Unfortunately, not all Veterans were enrolled when they left the military.

Judge Garcia informed the group that the Veterans Court is preparing a guide of Veterans mental health services in Denton County and the surrounding area for *internal use*. Currently all Veterans in the Court needing a PTSD assessment are sent to a doctor in Fort Worth. This service is not available in Denton County, due to lack of credible providers and cost.

Judge Garcia and Jeff Gilmore both made it very clear to the committee that Veterans with PTSD overwhelmingly state that a doctor/psychiatrist/social worker/counselor, etc., who is not a Veteran has zero credibility with Veterans. It is even more preferable that this person be a combat Veteran.

The group discussed expanding the services of MHMR in Denton County to provide Veteran-specific programs, but will seek clarification on what can be provided with a presentation during the October meeting from MHMR. The group also discussed the transportation requirements of Veterans with PTSD needing to go to the Dallas VA or to see other professionals.

Short-term action items

Adjust October committee meeting to continue the discussion on professional services available in DC. Invite MHMR to participate in the next meeting to determine if there are ways to expand the services they offer to veterans.

Research potential incentives for behavioral health professionals to practice in Denton County.

Accomplishments

Continuing to develop the SWOC analysis for the DCBHLT.

Continue to increase awareness of the issues, gaps, and shortfalls in care available to Veterans with PTSD.

Concerns

The VA is unaware of the dissatisfaction among Veterans in using the tele-med system at the CBOC to receive help for PTSD.

Shortage of behavioral health professionals who are also Veterans with combat experience available in Denton County.

No mechanism in place to ensure that homeless veterans are aware of the services available to them through the VA and other sources.

We do not have a mechanism in place for Veterans admitted to one of the Denton County hospitals for a behavioral/mental health crisis for follow-up care. Hospitals do not ask if the patient is a Veteran, and once the patient is released, there is no system in place to ensure they are guided into the VA system (if they are eligible for the VA services).



DCBHLT Workgroup Reports

October 2015

WORKGROUP NAME: CONSUMER/END USER WORKGROUP

CHAIR NAME: VACANT, LACRICA OLSON INTERIM

Meeting Summary (provide meeting date, and items discussed during meeting)

The Consumer/End User Workgroup initial meeting was held on September 30, 2015 at the UWDC office. A total of 19 people have been identified with 12 people attending the first meeting. The group is composed of individuals, families, caregivers, grandparents, and advocates for those who are accessing behavioral health services in Denton County. Diagnosed illnesses shared with the group ranged from bipolar, anxiety, depression, PTSD, anorexia, addiction and some not openly shared. An overview was provided on the current status of the DCBHLT and the progress being made. Participants were made aware that the concerns, frustrations and or successes would be shared with the DCBHLT and identified workgroups. Workgroup members were given the opportunity to openly discuss the current status of services available, gaps and programs needed to enhance services to residents of Denton County. The group will plan to meet monthly.

Short-term action items

Items of discussion, concern and need will be shared with appropriate workgroups based on topic and or service area.

Accomplishments

- Bringing together consumers to openly discuss behavioral health services from the end user perspective.
- Providing the opportunity for consumers to engage with the work of the DCBHLT and to be part of the solution.
- Observing the gratitude expressed from consumers for providing an opportunity to openly share concerns, stories, etc.

Concerns

None identified at this time; however would like for a member of the DCBHLT to be present during some of the future discussions.

Denton County Behavioral Health Leadership Team Consumer Workgroup Participant Profile

Consumer 1: Individual with Bipolar and also child with bipolar

Consumer 2: Caregiver of grandchildren experiencing mental illness

Consumer 3: PTSD (non-military) and severe anxiety

Consumer 4: Anorexia disorder and severe anxiety

Consumer 5: PTSD and suicidal thoughts

Consumer 6: Bipolar Disorder

Consumer 7-8: Parents of child who committed suicide

Consumer 9: Individual working directly with peer specialists: A person who has self-identified as having received or is presently receiving behavioral health services in personal recovery

Consumer 10: Caregiver for individual with bipolar and addiction

Consumer 11: Advocate for neighbor and friend with severe mental illness and homelessness

(Consumer 12 chose not to disclose during first meeting)

Summary of Consumer Feedback:

Consumer 1 expressed frustration with current system and lack of services available for treatment. Consumer 1 expressed a concern for lack of family physicians to see patients and lack of services available in the county.

Consumer 3 expressed the stigma associated with the lack of understanding that individual can be diagnosed with PTSD and be non-military.

Consumer 4 expressed need for additional resources for anorexia disorder.

Consumer 7 expressed frustration with the lack of resources available and knowledge awareness.

Consumer 9 expressed frustration with lack of training for medical staff, and cost associated with treatment including UBH non-acceptance of specific insurance and pay for stay at intake. 7 days is approximately \$15,000. Consumer 5 validated this concern with UBH. Consumer 10 also discussed cost of medication. Orders medication from Canada due to cost in the US.

Consumers 1-10 all expressed a need and desire for supportive services especially group services. After lengthy discussion it was determined there is a need for additional support groups in Denton County. Transportation to and from meetings pose challenges for many. Currently, NAMI (National Alliance on Mental Illness) offers support groups in Lewisville in and Denton. See attached.

Recommendation: Based on the first meeting of the Consumer Workgroup, it is recommended that the DCBHLT request the Child and Family Systems Workgroup to conduct an inventory of support group services in Denton County to identify gaps, and develop recommendations for consideration. See attached current support groups offered by NAMI.

**Denton County Behavioral Health Leadership Team
Consumer Workgroup
September 30, 2015**

Meeting Summary

Welcome and Introductions: Lacrica Olson provided the welcome. Individuals introduced themselves to the group and identified whether they were an individual, caregiver, family, family member, sibling, or acquaintance.

Purpose and Overview:

Lacrica Olson shared with the group the purpose of the workgroup, and status of Denton County Behavioral Health Leadership Team including role of the team in improving behavioral health services in Denton County.

Group discussion:

The group then engaged in a group discussion based on specific topics.

Services Needed:

According to workgroup members, there is a lack of information/knowledge within the community regarding mental health. Consumers indicated they are often unable to determine what they need and what services are available in their community.

Counseling services in Denton County are not accessible through their individual family doctors. Treatment options are limited. Hospital staff appears to lack the required knowledge for diagnosing mental illnesses. Accurate mental health assessments are difficult to obtain. Many members have discovered Dallas is better staffed to diagnose mental health patients.

Group members discussed the lack of suitable mental health support in Denton County. Members suggested mental health patients are being “lumped” together. Mental health patients are not classified separately based on their individual mental health issue.

Transportation is expensive. Group members stated, in order to obtain certain services, they must travel over 30 miles. Transporting mental health patients is costly to caregivers. Due to the lack of mental health inpatient resources in Denton, some patients must travel to Dallas. Though inpatient resources are more accessible in Dallas, family members are unable to visit their loved ones due to travel constraints.

Homeless shelters are scarce in the Denton County area. Currently, Salvation Army requires individuals to pass a drug test prior to being permitted to enter the homeless shelter. More resources in city versus county.

Workgroup members also expressed concerns regarding the lack of communication between the mental health provider and the patient. Patients suggest providers are not communicating with them effectively regarding their mental health. Additionally, providers are being rotated too often. There is no continuity of care. Members stated their providers may change several times within a year.

Inpatient programs are unaffordable. Generally, inpatient services in Denton do not accept specific insurances. Therefore, members indicated they have paid out-of-pocket for inpatient mental health care.

Group members also suggested there is a lack of adequate supportive services in Denton County including long term substance abuse treatment services.

There is no existing supportive mechanism for individuals diagnosed with eating disorders.

Barriers:

- Limited services
- Stigma
- Transportation for individual and caregivers
- Training for health care providers
- UBH/Mayhill billed for a set number of days at intake.
- Access to services (cost, insurance, etc.) Psychiatric services not covered by Medicare.
- Job placement for those with mental illness
- Lack of supportive services and support groups
- Short term shelter
- Services for single males
- Need for county wide services

Current gaps:

- Transportation
- Continuity of care
- Lack of inpatient facilities
- Inadequate communication between patient and mental health provider (communication vs. just prescribing medication)
- Training with hospital staff
- Lack of support groups

Group wish list:

- Need for local support groups (Denton, Lewisville, rural)
- Awareness of what is available? “Yelp” app for parents and caregivers to search for local psychiatrists, psychologists, or warning signs.
- Service providers to provide services that is indicated either in print or on website.
- 12-14 bed Intensive Outpatient Program (IOP) at a local hospital
- Need for more providers

- Medical staff training to better understand the needs of those with mental illness (hospital, etc.)

Meeting Schedule:

Lacrica will sent out a doodle poll for next meeting dates.