

Gloucester County Mental Health

September 19, 2023

<u>Members Present</u> Ms. Katie Doyle Ms. JoAnn Dunagan Ms. Suzanne Smith Chief Tom Ryan Ms. Brittany Mitchell (Designee) <u>Guest:</u> Ms. Arielle Irvin	<u>Non-Voting Members & Liaisons Present</u> Dr. DiLisciandro Ms. Holly Horwell Mr. Ron Roebuck Ms. Sharon Venezia Ms. Christina Jackey Ms. DiAnne Kelly Ms. Nicole Moore
---	---

Welcome and call to order/public record act:

Introductions:

- Roll call introductions

Approval of Minutes:

- A motion was made by Ms. Katie Doyle to approve the minutes for May 16, 2023; Ms. Suzanne Smith seconded.

Mental Health Administrator: Dr. DiLisciandro

- County Contracts:
 - Three Year Mental Health Contract:
 - The yearly monitoring visit was completed in August and successful.
 - COPE: All three towns are fully operational. The County is in the process of RFP review for contract renewal.
- CIT Program:
 - Dates: Monday, March 18, 2024 – Friday March 22, 2024
 - Time: 8:30am – 4:30pm
 - Location: Rowan-Virtua School of Osteopathic Medicine
 - Registration is not currently open. The registration form is in the approval process and we hope to distribute it soon.
- NJ Disaster Response Crisis Counselor Volunteer Program:
 - NJDMHAS released a request for letters of interest, to all NJ County Mental Health Administrators, for DRCC grants in the amount of \$30,000.00 per County. Gloucester County submitted a letter of interest earlier this month and we hope to receive notification of award sometime in October. The purpose of the grant is to both recruit new volunteers and sustain the current volunteers.
- Working on 2024 schedule. We will continue meetings at 2:30pm, large conference room, in person on the third Tuesday of the month. Noting conflicts in March and May with dates being March 26, and May 14th. Listing will be sent out.

New Jersey Division of Mental Health and Addictions Services (DMHAS) –Mr. Ron Roebuck

- Outpatient Services for Older Adults: RFP will be issued by DHS and DMHAS for outpatient services for individuals with serious mental illness (SMI) and who are 55 and older. Total of \$641,438.00 in American Recovery Plan Act (ARPA) funding to provide 3 awards of \$213,812.00 each for a period of one year. It is

expected that one award will be granted for Sussex or Morris County in the Northern Region, and one award would be granted to either Huntingdon or Union County for Central Region, and one award in either Burlington or Camden County for the Southern Region (Gloucester County residents).

- Dr. DiLisciandro asked for an introduction once services are nailed down. With an increase in phone calls regarding older population. This information on program and services provided to share with board and PAC members will be beneficial.
- Over the summer an RFP was awarded to Oaks Integrated for DVMI A+ residential program in Gloucester County
 - Fishpond Rd. Glassboro location. Working on licensing and will be doing some renovations
 - Open to community this is for DDD or DMHAS individuals (does not require state hospital referral) - five-bedroom group home to serve 15 people over a year.
 - Dr. DiLisciandro asked for contact information to invite them to board meeting for presentation.
- Mr. Roebuck recommended to continue to check website for RFP announcements. Notice of funding availability
- Staffing changes in southern regions:
 - Troy Hood- moved into southern region office covering Monmouth/ Ocean County
 - Dianne Dooer-Mercer/Burlington
 - Josephine Moreland- Assistant Regional Coordinator, maintain Camden County until new analysts brought in
- Bipartisan Safer Communities Act Disaster Response Crisis Counseling County Grants: DHS and DMHAS are issuing a Request for Letters of Interest to County Mental Health Administrators in NJ to apply for funding to support their pre-existing county DCRCC program for retention of membership and increased membership. DMHAS will issue up to a total of 21 award, with each county being eligible for one award. Each county will be awarded up to \$30,000.00 (possibly more). Funding will begin in October 2023.

Gloucester County Adult System Review Committee (SRC): Ms. Arielle Irvin, Inspira

- SRC is working with Gloucester County enhancement team to reduce emergency department wait times, and delays in care. They have met several times in person and virtually to develop a plan on where the biggest changes can be made. A list was developed that consists of special populations/circumstances that cause delays. Final presentation and surveys were developed.
- Inspira Woodbury new building still in progress.
 - Hoping next September (2024) opening. Single rooms, same amount of patient capacity, more group space, and excited mostly the new outdoor area.
 - Ms. Doyle mentioned seeing the plans long ago in the planning process.
 - A suggestion from board regarding an open house once running.
- Ms. Dunagan asked for current wait times in the Emergency Department. Ms. Moore said patients are being moved a lot; more readily from walking into ED, to disposition (includes medical clearance piece). It's hard to pinpoint but many are being moved within the 24/72 hours. Changes are being made at Inspira within behavioral health addiction resource team to have a screener available in ED to help with capturing time and to help move things along.
- Ms. Dunagan asked about diversion bed wait times. Discussion of access to diversion beds is complicated causing length of stay to be longer. Going from short term bed to diversion bed because MCO's look at as same level of care. Very difficult to access those beds.
- Dr. DiLisciandro asked for a brief explanation of short-term care facility beds and diversion beds. Short term beds are set up to be utilized by consensual voluntary and/or involuntary patients from emergency department to short term care bed. Time frame ranges from 7-10 days to stabilize patient with wrapping community supports for discharge. Diversion beds goals are to defer patients from state hospital. If they are not stabilizing on short term care units, we can refer them to diversion bed instead of state hospital. Options for diversions are less due to insurance involvement. Those who are consensual or involuntary can still go to diversion but numbers are still low. Maybe one -two a month. Mr. Roebuck said many screening programs in past were making referrals to diversionary not going to short term care prior. Since then, benchmarks have been placed so individuals would go

through continuum but then MCO's got involved. Open discussion regarding different situations and examples of wait times.

- Ms. DiAnne Kelly asked if premature discharges are being seen. Discussions on individuals going to state hospitals and the needs of those coming out of hospital (case reviews take place). EISS, 988 are resources put in place to help with individuals in the community with hope that this will help keep people out of hospital. Working progress. The need is within the community.
- Ms. Smith asked about the difference in beds by insurance. Inspira takes all insurances and non-insured.
- Chief Ryan asked about an officer bringing someone into hospital for a crisis situation. Are doctors in ER allowed to clear/release person if they are there for psych/crisis evaluation? Ms. Moore said in theory an ER doctor could as long as no paperwork on that person. Chief Ryan gave an example of a case for discussion.
- Ms. Smith asked about schools sending children to ER for behavioral health issues. Stating concerns with wait times in ER, and specifically focusing on children who are aging out of children services within community. Dr. DiLiscandro suggested this question be brought back to MHPAC for discussion with representative of the children system of care since in their purview. Ms. Moore mentioned a project being worked on called Project Connect which is like a children navigator.

Mental Health Professional Advisory Committee: Ms. Nicole Moore

- Overview of PAC members and agencies represented.
 - Discussed membership for 2024 and interests with trying to increase recruitment for more members to join PAC. Those who are interested in membership roles will send in letters of interest which will be presented to board for approval no later than November.
 - It was reiterated that any mental health agency, in or outside of Gloucester County, serving Gloucester County residents, can contact Dr. DiLiscandro if interested in attending meetings.
- Open Discussion on the changes and impacts to Involuntary Commitment Law
 - Senate Bill No. 3929 went into effect on August 16, 2023 and sunsets in two years on August 16, 2025
 - Update to Section 9 of P.L. 1987, c. (C.30:4-27.9)
 - Extends the time of the initial hold from 72 hours to 144 hours if there is no bed availability
 - DOH may issue temporary licenses for involuntary beds when a hospital can demonstrate an extraordinary need for involuntary beds
 - At this time Gloucester County is still following the 72 hours since no regulation change has been put in place. Dr. DiLiscandro mentioned until regulations change this will not be operational.
 - The law addresses the clock expiring in 72 hours but not the need of those more complex cases. Discussion about the need for specialty beds for IDD/MI, Justice Involved and Medically complex patients.
 - Inspira has met with advocates office to discuss impacts especially those who can't get placed within those 72 hours. This meeting was very supportive and complemented our concerns.
 - Ms. Smith asked if housing needs to be in place for discharge based on individuals being told to drop their loved ones. Responses would be social services would get involved, adult protective services. Case to case basis but does not serve as a remedy. Dr. DiLiscandro asked if PATH would be able to get involved. Ms. Veneziale explained PATH services and how someone is considered for program (review of program). Mr. Roebuck mentioned CSS program, RHD (serves Gloucester County), and possibly other options outside of counties.

NAMI: Ms. Suzanne Smith

- Call center for NAMI
 - Third quarter July- September average of 2.5 calls a week
- Family Support
 - Resumed meeting in person which is very beneficial to families
- Education
 - Mental Health First Aid – November 15
 - Homefront to Veterans- TBD looking to train veterans to assist with veteran community

- Family to Family – eight-week class starting January 2024
- NAMI outreaches
 - Electronic newsletters
 - Vendor table Paul Donahue Foundation is Mullica Hill, Suicide Awareness, September 2023
 - Vendor table Wenonah Farmers Market
 - Attend prosecutor board meetings
- Upcoming Events
 - NAMI walk- Middlesex County College October 14th
 - Charity Event – Christmas at Wedgewood if interested in monetary donations. Baskets and supply closet filled with washcloths, soap, toothpastes, etc.

Acenda: Ms. Christina Jackey & Ms. Sharon Veneziale

SRC Enhancement Team

- The SRC subcommittee (enhancement team) is continuing to work with the Rutgers Team building a training module for the Inspira BART, Acenda PESS, Jefferson Clinician Teams, which will consist of increasing communication within, and between teams. A survey has been created to give to various team members for feedback on the helpfulness of this training module. The Enhancement team will be meeting again on September 28th at 11am during our regular scheduled subcommittee hours.

Program Statistics/Updates

- PESS- June LOS was 90% with serving 125 individuals. We had 41 community outreaches and diverted 28 from the emergency room.
 - July, PESS LOS was 75% with serving 104 individuals. We had 32 community outreaches and diverted 14 individuals from the emergency room.
 - August, PESS LOS was 82% with serving 114 individuals. We had 37 community outreaches and diverted 17 individuals from the emergency room.
- IOTSS
 - June LOS was 152% with 2 admissions and 3 discharges.
 - July LOS was 171% with 5 admissions and three discharges.
 - August LOS was 161% with 2 admissions and 6 discharges.
 - IOTSS continues to have a rolling admission for their slots. Primary referrals are coming from Inspira inpatient and Individuals needing to increase level of care.
 - Engaging in parole initiative. Having some sessions/ groups. Working with four different parole officers. Finding these individuals (Paroles) are having early childhoods trauma.
- EISS
 - June LOS was 41% with admitting and serving 37 individuals.
 - July LOS was 32% with admitting and serving 32 individuals.
 - August LOS was 40% with admitting and serving 36 individuals. EISS continues to recruit for 2 administrative positions at this time.
- Peer Diversion Program
 - For June, Acenda was still recruiting and onboarding the Peer positions.
 - July LOS was 112% with having multiple follow-up engagements with 28 individuals.
 - August LOS was 40% with multiple follow-up engagements with 10 individuals.
 - The Peer Diversion has completed recruitment and has two full-time Peer Champions.
 - Anyone who has been in emergency department/or mental health unit twice within six months are candidates.
 - Connected to PESS
 - Acenda is internally tracking to find candidates to program

- Outpatient

- We are currently accepting referrals for outpatient level of care, and we are continuing the recruiting process for Clinicians at this time. The current wait time for therapy is between 4 and 6 weeks, with individuals being able to access EISS during this time for continuing support.
- Bridge
 - Clients are being referred to other case management with 2nd employment support. We are recruiting for 2 case managers. PD continues to maintain ongoing communication with jails and criminal justice system.
- ICMS
 - We are taking new referrals, as well as open to community referrals. Our census continues to increase each month. LOS for June-August averaging 150%.
- PATH
 - Actively recruiting for case managers. PATH continues to accept referrals.
- IOC
 - We have hired 1 case manager, and we recruiting for 1 case manager at this time. We are accepting new referrals.
- SEP
 - We have hired a new employment specialist who started in August, currently accepting referrals.
- PACT
 - Currently hiring PEER advocate, Nurse, and Co-Occurring Specialist. Continuing to service over 50 individuals monthly, despite staffing shortage.

Old Business

- Chief Tom Ryan spoke regarding COPE program and counties moving towards ARRIVE initiative together. Dr. DiLisciandro explained that the ARRIVE together initiative is out of AG office along with the prosecutors' office in lead. Chief Ryan was inquiring if both programs would work together. Dr. DiLisciandro explained the differences between programs and how the COPE program currently works. Dr. DiLisciandro explained that COPE is an extension of PESS with the goals of treatment and community stabilization. Chief Ryan confirmed two meetings planned to discuss.
- Chief Ryan asked about where screening takes place. Bringing up someone in a holding cell having issues and screening providing services. The jail is saying someone is to be cleared from hospital and screening outside of hospital is not acceptable prior to incarceration. Dr. DiLisciandro and Ms. Venezia explained the jail policy would need to be reviewed and changed. PESS will provide screening services in the community, when appropriate per regulations.

Other Announcements

- Ms. Brittany Mitchell (Designee) mentioned as a representative of Virtua – Rowan School of Osteopathic Medicine that they are always seeking opportunities for students to volunteer in community placement programs – please keep them in mind if you have any need.
- **Next Meeting:** 10/17/2023 2:30pm in person

A motion to adjourn meeting was made by Ms. Suzanne Smith; Chief Tom Ryan seconded.