



MEETING NOTICE
INVITATION TO NEGOTIATE COMMITTEE
WEDNESDAY, MAY 30, 2012
8:30 - 10:30 a.m.
COUNTY – CITY BUILDING – 555 S 10TH ST
ROOM 113

AGENDA

1. Introduction of Committee Members, Ex-Officio Members, CMHC Staff
2. Purpose
3. Outputs (Report with Recommendations to Lancaster County and Region 5)
4. HMA and CMHC Report Recommendations
5. Process/Time Line
6. Communications

**MINUTES
COMMUNITY MENTAL HEALTH CENTER
INVITATION TO NEGOTIATE (ITN) COMMITTEE
WEDNESDAY, MAY 30, 2012
COUNTY-CITY BUILDING, ROOM 113
8:30 A.M.**

Committee Members Present: Ron Sorensen, Community Mental Health Center (CMHC); Lori Seibel, Community Health Endowment; Pat Talbott, Mental Health Association; CJ Johnson, Region V Systems; Judy Halstead, Lincoln-Lancaster County Health Department; Cpt. Joe Wright, Lincoln Police Department; Gary Lorenzen, Mental Health Foundation; Brent Smoyer, County Commissioner; Gail Anderson; J Rock Johnson; Kerry Eagan, County Chief Administrative Officer (Ex-Officio); Vince Mejer, City-County Purchasing Department (Ex-Officio); and Wendy Andorf, CMHC (Ex-Officio)

Committee Members Absent: Jane Raybould, County Commissioner; and Scott Etherton; CMHC (Ex-Officio)

Others Present: Cori Beattie, County Clerk's Office

Sorensen called the meeting to order at 8:30 a.m.

1 INTRODUCTION OF COMMITTEE MEMBERS, EX-OFFICIO MEMBERS AND CMHC STAFF

Brief introductions were made by those in attendance. Sorensen noted that Tony Messineo resigned from the Committee due to business obligations.

With regard to the meeting schedule, Sorensen noted that a report must be forwarded to the County Board by September 30, 2012. It was decided the Committee would meet every other week on Wednesdays at 7:30 a.m., in Room 113 of the County-City Building. After reviewing potential conflicts, the tentative meeting dates were set as follows: June 13, June 27, July 11, July 25, August 8, August 22, September 12 and September 26. Sorensen estimated the meetings to last 1½ -2 hours. Eagan added that this group's task is fairly focused and may not require this many meetings.

2 PURPOSE

Sorensen said the Committee's role is to come up with a list of recommendations on which services should be provided in the future as the CMHC transitions from public to private ownership. Eagan said another factor would be that certain key services would be co-located. CJ Johnson added that a primary care integration component should also be included, although, it may not need to be at the same location.

Seibel said she did not remember the "one location" principle being included in the CMHC Planning Committee report and added that satellite locations were discussed as an option.

Eagan felt the bids will likely be a wide spectrum. He thought in discussions with the County Board, the importance of having certain key services at one location was implicit, although, not every service would need to be co-located.

The following language was suggested as a purpose statement, "To identify key essential services that should be co-located." Sorensen added if key essential services are not at the current facility, then this Committee will need to define where they will be. He solicited other ideas to be considered as part of the purpose statement.

Lorenzen said the current locations (CMHC, Midtown Center, The Heather, etc.) are in areas easily accessible to clients. He said he would not want there to be increased anxiety for clients if they think they can only go to one location.

Wright added the Committee should also pay respect to the gaps that exist or may potentially be created by having a new system. He felt a continuum of services should also be a goal.

Talbott said the Committee must not forget to take into consideration what is ultimately best for the clients and added that a transition period must also be implemented, especially if big changes are forthcoming.

Gail Anderson arrived at 8:50 a.m.

J Rock Johnson suggested assessments be included, similar to what was done at the Lincoln Regional Center, whereby clients would be involved throughout the transition process and could provide feedback with regard to their needs and wants. She suggested the Committee look at how services are provided so there is truly a recovery-based system.

Halstead said data indicates that integrating primary care with behavioral health services becomes most effective when these services are co-located. She added she would also like to include an evaluation of the outcomes to see what users feel is important, if the services provided are being used appropriately and if clients feel they are achieving long-term results. Seibel supported the idea of including outcome-based evaluations.

Smoyer said Dean Settle, former CMHC Executive Director, advocated for a "one-stop shop" for behavioral and primary healthcare. Seibel said she agreed with this concept but did not want to preclude there being multiple "one-stop shops" (satellite locations). Sorensen said access should be considered an outcome. Seibel added financial sustainability is also a key factor.

Sorensen summarized the discussion points as follows:

1. Co-location of key essential services;
2. Integration of behavioral healthcare and primary healthcare;
3. Provide needed services;
4. Evaluation of outcomes;
5. Transition period;
6. Financial sustainability;
7. Identification of service gaps; and
8. Client involvement.

Lorenzen asked to see an inventory of what services/programs are currently being provided by the CMHC, including the budgetary requirements. He also requested CMHC staff present key service elements at a future meeting, if possible. Lorenzen praised the work of the CMHC noting the economy, not the services provided, is driving this change.

Eagan distributed an inventory of services prepared by Dean Settle which included some budgetary information, although, it is not complete (**see Exhibit A**). Andorf said the dollar amounts are not accurate and will be reviewed.

Halstead said the Committee may also want to review a demonstration of collaboration and/or coordination of services. She added if the County retains the Crisis Center, an array of not-for-profit providers may come together as part of a proposal, thus, focus should be given to collaboration between levels of care and client/family transitions. Eagan agreed that the provider's relationship with the Crisis Center is another important factor.

CJ Johnson noted the California Village Model stressed a "sense of community." He felt this is also important to keep in mind. J Rock Johnson added a "sense of recovery" should also be part of the purpose.

Seibel said the Committee does not want to recreate the existing system with a new supervisor but instead transform it into a national best-practices model. She felt the purpose statement should encourage innovation and transformation in a way that gets people to think beyond the current system. J Rock Johnson asked that a list of current CMHC collaborations be provided.

Sorensen said he would work on drafting a purpose statement over the next two weeks based on comments provided today.

Eagan said a purpose statement is typically very short. He felt the underlying purpose of this Committee is to design a document that has all the essential features in it to solicit proposals from providers. Halstead clarified that the points discussed today would then be included within the document. Eagan agreed and added the previous CMHC Planning Committee report and the HMA report both provide a good foundation for the document.

CJ Johnson requested to see a cross-reference of which services people are using. He felt a good start would be to review those utilizing medication management. Sorensen said staff will work on obtaining this information. Lorenzen suggested not sharing this information with any potential subcontractors as it is not totally up-to-date. Eagan said when the document is complete, an attachment can be included with the updated data.

Halstead exited the meeting at 9:15 a.m.

3 OUTPUTS

Sorensen indicated this was addressed while discussing the purpose statement and recommended moving on to the next item.

4 HMA AND CMHC REPORT RECOMMENDATIONS

In response to Talbott's inquiry, Eagan said no decision has been made by the County Board with regard to the current CMHC property. There was some discussion about moving the Crisis Center to the old jail once it is remodeled but that wouldn't be for at least two years. He added if the Crisis Center would move out of the CMHC, it would free up the second floor for additional program needs.

5 PROCESS/TIME LINE

Sorensen distributed the CMHC Transition Project Work Plan (**see Exhibit B**). He provided a brief overview of the document. He indicated the County Board is communicating regularly with clients, families and employees through written correspondence and is taping shows to air on 5-City TV regarding the transition process. Sorensen stressed the project objectives are all very open at this time and could change as the process moves forward.

J Rock Johnson questioned contract oversight. Sorensen said the County Board and the Region V Governing Board would have this responsibility. He added this Committee may assist in overseeing the process and some members could be part of the contract evaluation team.

Seibel questioned if this Committee has a budget. Eagan indicated it does not. Seibel felt it was important for someone who has gone through a similar transition to attend a future meeting. Lorenzen and Eagan agreed. Lorenzen said the Committee should have specific questions prepared prior to someone attending. Seibel felt some of these were outlined by the CMHC Planning Committee. Sorensen suggested contact information and topics be forwarded to him. Seibel said she is interested in hearing from someone who has specifically been involved with integrating a mental health center.

6 COMMUNICATIONS

It was noted the County Clerk will be the official record keeper for the Committee. Meeting agendas and minutes will be available on their web site. The County Board will also continue to tape TV shows and send out periodic letters and press releases.

OTHER BUSINESS

With regard to the next meeting agenda, Eagan said it will include approving the minutes, adopting a purpose statement and a review of CMHC services/programs and respective budgets.

Seibel suggested that it might be beneficial to engage others who will be impacted by the CMHC transition, such as BryanLGH, Lincoln Fire & Rescue and Corrections. Wright said he spoke to a provider recently who indicated they would like some input during this process versus waiting for some model to be developed. CJ Johnson hoped that a meeting would be held to obtain feedback. Mejer said detailed interviews are really part of the RFP process. Seibel said perhaps an initial discussion could be held whereby the Committee asks providers what they think should specifically be included in the RFP.

Mejer said speaking to someone who has gone through this process about the pros/cons is a good idea. Eagan suggested this occur sooner rather than later. Seibel said Kathy Reynolds, National Council of Behavioral Health, will be in Lincoln in June to meet with providers. She offered to contact Deb Shoemaker of the People's Health Center to see if Reynolds would have time to meet with the Committee while she is in town.

There being no other business, the meeting was adjourned at 9:55 a.m.

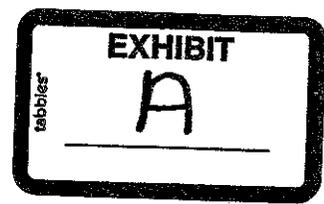
Submitted by,

Cori R. Beattie
County Clerk's Office

RECEIVED

MAY 29 2012

LANCASTER COUNTY
BOARD



MAY, 2012

DAY REHABILITATION

2011-2012 BUDGET \$593,612

6.42 FTEs

195 SERVED LAST YEAR

MARYLYDE KORNFELD, SUPERVISOR

SERVICES:

STRUCTURED DAY PROGRAM

PSYCHIATRIC REHABILITATION

LIFE SKILL TRAINING

SOCIAL SKILL TRAINING

VOCATIONAL EXPERIENCE

AWARE PROGRAM

LIMITED TRANSPORTATION

DRIVERS FOR CMHC

1,607 REGION V SERVICE UNITS

\$17,477 COUNTY AID

7857

MAY, 2012

COMMUNITY-BASED SEX OFFENDER MANAGEMENT (STOP PROGRAM)

2011-2012 \$168,000

CONTRACT WITH COUNSELING AFFILIATES OF NE, LLC MARY PAINE, Ph.D

80 SERVED LAST YEAR

RON SORENSEN, CONTRACT ADMINISTRATOR

SERVICES:

PROMOTE COMMUNITY SAFETY

SCREENING AND CONSULTATION

MEDICAL SERVICE SUPPORT & ADVOCACY

INDIVIDUAL THERAPY

GROUP THERAPY

FAMILY SUPPORT

CASE MANAGEMENT

HOUSING FLEX FUNDING

AFTERCARE

POLYGRAPHS AS NEEDED

0 COUNTY AID

\$40,000 EARNED SURPLUS

MAY, 2012

MEDICATION MANAGEMENT - MH

2011-2012 BUDGET \$683,841

3.81 FTEs + APRN CONTRACTS (56 HOURS PER WEEK)

2050 SERVED LAST YEAR

**DR. ROY, MEDICAL DIRECTOR
ALAN FULTON, NURSE SUPERVISOR**

SERVICES:

MEDICATION PRESCRIPTIONS & SUPPORT

GENERAL ASSISTANCE SERVICES

PATIENT ASSISTANCE PROGRAMS

COORDINATION OF L.B. 95 MEDICATIONS

MEDICATION SAMPLES

MEDICAL FLEX FUNDING MANAGEMENT

CLOZORIL CLINIC

CORNHUSKER PLACE CLINIC

JAIL DIVERSION MEDICAL SUPPORT

LIMITED TRANSPORTATION

2,675 REGION V SERVICE UNITS

\$312,520 COUNTY AID

7843

MAY, 2012

CRISIS CENTER

2011-1012 BUDGET \$2,459,063

29.75 FTEs

615 SERVED LAST YEAR

SCOTT ETHERTON, PROGRAM MANAGER

SERVICES/CONSIDERATIONS:

CRISIS STABILIZATION

SUBSTANCE ABUSE ASSESSMENT

SUPPORT AND HOLD POST COMMITTED INDIVIDUALS

SERVES ALL 16 COUNTIES IN REGION V

SINGLE POINT OF ENTRY LINE FOR LAW ENFORCEMENT

MENTAL HEALTH BOARD RELATIONSHIP

COUNTY ATTORNEY RELATIONSHIP

CLERK OF THE DISTRICT COURT RELATIONSHIP

\$1,247,722 PROVIDED BY REGION V

\$426,058 COUNTY AID

7851

MAY, 2012

COMMUNITY SUPPORT - MH

2011-2012 BUDGET \$1,986,093

24.76 FTEs

1085 SERVED LAST YEAR

DR. JOE SWOBODA, WENDY ANDORE, SUPERVISORS

SERVICES:

**INDEPENDENT LIVING PROGRAM
TRANSITIONAL LIVING PROGRAM+
60 PAYEESHIPS
HARVEST PROGRAM*
DROP IN PROGRAM
LIMITED TRANSPORTATION**

2,100 REGION V SERVICE UNITS

\$125,920 COUNTY AID

+ COLLABORATION WITH OUR HOMES

*** COLLABORATION WITH SENIOR PARTNERS AND CENTERPOINTE**

7847

MAY, 2012

OUTPATIENT - MH

2011-2012 BUDGET \$277,460

2.97 FTEs

833 SERVED LAST YEAR

DIANE NESS, SUPERVISOR

SERVICES:

INDIVIDUAL THERAPY

GROUP THERAPY

WELLNESS GROUPS

PRE-TREATMENT ASSESSMENTS

INTAKES/DISCHARGES

POOLED REGION V SERVICE UNITS

\$87,462 COUNTY AID

7844

MAY, 2012

CTP THE HEATHER - PSYCH RESIDENTIAL REHAB - MH

2011-2012 BUDGET \$844,731

10.5 FTEs

28 SERVED LAST YEAR

WENDY ANDORF/JAY WHITE SUPERVISORS

**SERVICES AND OTHER RELATIONSHIPS
COMMUNITY REENTRY, LIFE SKILL, INTEGRATION CURRICULUM
SERVES THOSE TRANSITIONING FROM LRC
SERVES NRIIs**

**THE LANDLORD IS OUR HOMES 15 BEDS
ONE STAFF ADMIN APT.
OUR HOMES PROVIDES 3rd SHIFT COVERAGE
DR. SPAULDING, UNL CONSULTANT
A FEE FOR SERVICE PROGRAM**

598 REGION V SERVICE UNITS

\$0 COUNTY AID

7852

MAY, 2012

DAY TREATMENT/PARTIAL HOSPITALIZATION

2011-2012 BUDGET \$430,925

FTEs 5.735

227 SERVED LAST YEAR

DIANE NESS, SUPERVISOR

SERVICES:

INDIVIDUAL THERAPY

GROUP THERAPY

PRE-TREATMENT ASSESSMENT (PTAs)

TREATMENT FOR POST COMMITTED INDIVIDUALS

AFTERCARE LIMITED TRANSPORTATION FOR ENROLLEES

592 REGION V SERVICE UNITS

\$192,892 COUNTY AID

7848

MAY, 2012

PIER/ACT

2011-2012 BUDGET \$204,787

3 FTEs

79 SERVED LAST YEAR

CATHERINE FLETCHER, RON SORENSEN SUPERVISORS

SERVICES:

**COMMUNITY SUPPORT SERVICES IN THIS PROJECT PROVIDED BY CMHC
SERVING THE HIGHEST NEED CLIENTS IN THE COMMUNITY
PROJECT IS A COLLABORATION CMHC, LFS AND CENTERPOINTE,
CENTERPOINTE SERVES AS THE FISCAL AGENT
LEASE OFFICE SPACE FROM OUR HOMES**

FUNDED TOTALLY BY STATE AND REGION V FUNDS

\$0 COUNTY AID

7866

MAY, 2012

HARVEST PROJECT (EMERGENCY SUPPORT ONLY)

2011-2012 BUDGET \$67,692

1 FTE JENNIFER HAGAN

171 SERVED LAST YEAR

WENDY ANDORF, SUPERVISOR

SERVICES:

FOCUSED PROGRAM FOR ELDERLY

EMERGENCY RESPONSE/CONSULT

**OTHER HARVEST PROJECT FTEs ARE REFLECTED IN COMMUNITY SUPPORT
CASE MANAGEMENT**

A COLLABORATION WITH CENTERPOINTE AND SENIOR PARTNERS

REGION V EMERGENCY COMMUNITY SERVICES FUNDING

\$0 COUNTY AID

7845

MAY, 2012

24 HOUR CRISIS SERVICES

2011-2012 BUDGET \$245,802

3.2 FTEs

4897 CRISIS PHONE CALLS + CRISIS WALK INS+MOBILE CRISIS RESPONSE

DIANE NESS, SUPERVISION

SERVICES:

CRISIS LINE (SUICIDE PREVENTION) RESPONSE

LINE COVERAGE 24/7

RESPONDS TO COMMUNITY CRISIS, LPD, YOUTH SERVICES, OTHER

WALK IN CRISIS RESPONSE

PRE-TREATMENT ASSESSMENTS

RECEIVES NON FEE FOR SERVICE FUNDING FROM REGION V

\$44,106 COUNTY AID

7858

MAY, 2012

HOMELESS SUPPORT (PATH PROJECT)

2011-2012 BUDGET \$88,655

1 FTE BILL STEWART

113 SERVED LAST YEAR

RON SORENSEN, SUPERVISOR

SERVICES:

OUTREACH AND CASE MANAGEMENT OF HOMELESS

SUPPORTS HOMELESS AT PEOPLES CITY MISSION/MATT TALBOT

RECEIVES \$32,500 ANNUALLY IN FEDERAL PATH (HOMELESS) FUNDING

HAS 1 PAYEESHIP

LIMITED BILLING OF COMMUNITY SUPPORT TO REGION V

\$56,155 COUNTY AID

7850

MAY, 2012

SPECIAL NEEDS

2011-2012 BUDGET \$88,680

1 FTE TIM VORM

114 SERVED LAST YEAR

RON SORENSEN, SUPERVISOR

SERVICES:

SUPPORT FOR HOMELESS

OUTREACH TO HOMELESS

WORKS WITH JAIL DISCHARGES AND REENTRY

10 PAYEESHIPS

PROVIDES CONSULTATION TO CASE MANAGERS

RECEIVES CITY FUNDING OF \$44,340

\$44,340 COUNTY AID

7859

