Region V Level of Care Meeting

September 17, 2018 1:30 p.m. 1645 'N' Street Lincoln, NE

Present: Ty Callahan, United Healthcare (Medicaid); Dina Critel-Rathje, Julie Erickson-Fisher, Lutheran Family Services; Kathy Foster, VA; Jane Harms, Adult Protective Services; Shala Hartmann, CenterPointe; Jennifer Jennings, Lincoln Regional Center; Laura Kersten, St. Monica's; Katie Kimmerling, The Bridge; Rebecca Meinders, Lancaster County Public Defender; Barbara Strauss, Aging Partners; Kristin Nelson, Bridget Thompson, Lee Heflebower and Kim Whaley, Region V Systems

1. Welcome, Introductions, Announcements, Additions to the Agenda

- Introductions were conducted.
- 2. System Issues:
 - Kristin announced there are going to be modifications and changes made to the housing program and Lee and Bridget will be doing a presentation on that today.
 - Kristin reported that at the Provider Meeting the Emergency Response Team was discussed and the impact it is having on the emergency system. She reported that when a clinician is called to a potential EPC call that 91 percent of the time an EPC is avoided.
 - The largest group of individuals who are EPC'd are white males, ages 19-29 that are a danger to themselves, live in Lancaster county, and are dual diagnosed.
 - Kristin reported that this is the tenth year for BETA training. It has been scheduled for January 30-31, 2019. A "Save the Date" will be coming out soon. She reported that 500 police officers have been trained as has someone in all 16 counties of the Region.
 - She reported that this past year we only sent 12 people to the Regional Center and this is the lowest it has been in several years.
 - Kristin reviewed that a person on an inpatient commitment is a DHHS commitment.
 - Housing:
 - A handout was provided indicating that Region V Systems RAP is only going to be open to Priority One consumers which are defined as a person who is being discharged from an inpatient mental health board commitment from one of the following:
 - Lancaster County Mental Health Crisis Center
 - Lincoln Regional Center
 - Mary Lanning Hospital
 - Richard Young Hospital
 - Fremont Health's Inpatient Behavioral Health Hospital
 - Lee and Bridget will be meeting with the case managers at the individual agencies to review the revised admission criteria for the program.
 - Lee reported that the way the rental assistance works and that we do not receive additional funding the beginning of each fiscal year. The July 1st funds are already committed to those people who were enrolled during the previous fiscal year. The only way to have additional housing slots is to discharge a person and then new person can be enrolled in the program.
 - Our mission is to serve those that are the highest priority. Currently, we are at a one-to-one process. Because of this situation, it does not give us the flexibility for

admissions from other programs, such inpatient residential care or Priority 2 participants.

- Since this is a transitional housing program and not a permanent housing program, ideally, consumers should transition off the program in 18-24 months.
- At the present time, of the 84 consumers enrolled in RAP:
 - 47% of consumers on the program have no income
 - 80-85% have been on the program for 2 years or longer
 - 50% have been on the program for 5 years or longer
- In an effort to un-bottleneck the system, Lee and Bridget will begin talking with direct care staff and look for potential solutions.
 - Work with case manager to get applications completed and submitted to LHA to get consumers bridged.
 - Look at obtaining some type of income. If the consumer applied for SSI and was denied, was the appeal ever filed.
 - It seems people have become very comfortable in the program and are remaining on the program longer than it was intended for.
- \circ This is the first time in 15 years we have been in this position.
- \circ This is a transitional program and we must get back to it being a transitional program
 - Possible Solutions: The Region has discussed doing some referrals to SOAR, maybe doing a training for case managers on filing out disability paperwork, maybe 90-day check-ins with the case managers as to the status of consumers housing application and disability application.
- Kristin reported that in August there were 77 EPC's
- Kristin reported that there will be changes flex funds and Amanda will be addressing that with the providers.
- Discussed about what trainings may be needed
 - More clinical trainings that provide CEUs
 - Transgender trainings were suggested
 - LFS reported they are seeing more refugees with English as a second language. It is seeing an increased need for Arabic translators.
 - Citizenship status for consumers and what affects their status.
 - Borderline personality disorder training and the management of clients with that diagnosis.
 - Maybe a half-day training for threat assessments.
- There will be a free training at LFS on Traumatic Brain Injury and Behavioral Health on October 19 from 8 a.m. to 12:30 p.m. with 4 CEU's for substance use and mental health therapists. To register contact Dina Critel-Rathje at dcritel-rathje@lfsneb.org.

3. Specific Case Discussion:

• A discussion took place regarding a consumer and managing the diagnosis of diabetes.

4. Updates:

• No updates were provided.

5. Bed / Capacity Availability Update:

• No updates were provided.

6. **Other Business**:

• Project Homeless Connect is scheduled for October 16 and there will be four different languages available.

7. Next Meeting

• The next meeting date is **October 15, 2018**, 1:30 p.m. – 3:00 p.m.