



Macon County

Mental Health Task Force

October 29, 2014

Minutes

Members Present: Commissioner Ronnie Beale, Jim Bruckner, Jane Kimsey, Jim Bottomley, Tammy Keezer, Mike Neidig, Major Andy Shields & Paula Ledford

Absent: Kathy McGaha & Marty Wadewitz

Guests: Tabatha Brafford, Melissa Hamm & Ron Ross w/ACS, Amy Seay, Judy Johannsen & Nancy Chastain w/Smoky Mountain Center, Corporal Scott Marion w/MC Sheriff's Office, M. Lewis w/The Franklin Press, Marsha Reynolds w/Angel Hospice, Howard Dowdle w/Barium Springs, Theresa Jurgensen w/Youth Villages, Dianne Whitman w/Department of Juvenile Justice, Susan Johnson w/Angel Medical ED, & Kathryn Holmes w/MC School, Jennifer Iannuzzi & Donita Cline w/NAMI Appalachian South. Sheila Price w/Angel Medical & Kathy Crist w/Highlands-Cashiers Hospital - Via Conference phone.

Welcome & Call to Order: Chairman Beale called the meeting to order at 8:30 and welcomed everyone.

Approval of Minutes: A motion was made by Mr. Bruckner and seconded by Major Shields to approve the minutes of the April 4, 2014 meeting as presented. The motion passed unanimously.

Current Issues and Discussion: Commissioner Beale indicated that there is a report that NCACC has asked every sheriff's department to complete. The report includes data regarding Mental Health patients who show up in the hospital Emergency Room or are picked up for voluntary commitments and are transported to the ER. Some of the task force members attended the recent NAMI conference. Dave Richards from DHHS was there and he and Mr. Beale had a good conversation. The state is focused on the process rather than on the patient care. We will try to focus on treatment and continue to try to improve services. Things are not getting better. Similar committees are being established in other counties using our model. Government at the state level is moving toward having four regional Local Management Entities organize and manage the mental health care for the state. Our territory is hoping that Smoky Mountain will be appointed as our region's LME. Memorial Mission has taken a lead role in changing the perception of mental health care. Mr. Beale will be attending a meeting next week with Memorial Mission. The volume and age of patients is more than we have the facilities and personnel to handle. Our taskforce and those from DHHS are working hard together. The juvenile adolescent problem will become the future mental health patient. We would like to see across the board funding for the jails. There have been several issues in Macon County that have come up, but they have ended on a positive note. One of the issues that the Crisis Emergency committee has been working on is transportation for the patients to alleviate this cost for the jails. They are looking for a region wide quote for transportation. This is the same company that Mission currently uses. We had looked at them in the past but the cost was not conducive. Major Shields said they are getting help currently from the hospital for those being held there.

Crisis Emergency Committee – Ms. Kimsey asked for feedback regarding current issues. Ms. Seay reported that they have seen an increase of patients being seen in the ER. They are working on how they are going to deal with the issue of transportation after January 1, 2015. There really won't be anywhere to take these people after the first of January. The mobile service providers will be meeting after the hospital association meeting. Conversation is happening between the hospitals and the mobile providers but they are working on a plan for the ER to advise Smoky when they have a patient in their ER. Some larger hospitals have designed a separate area

in the ER's for the holding of these patients. In small rural areas there is not adequate room in the ER departments for this to happen. Ms. Price reported that the biggest thing she is seeing is the providers using Telepsych to report on these patients. Ms. Seay stated that they are having the conversations with the providers, using Telepsych and trying to work with transporters to have a plan in place prior to January 1. They have been talking with the lab at Haywood so they can have labs done outside the ER. If the patient is not registered at the hospital the billing is an issue. Ms. Brafford indicated that they may be able to contract in house for the lab services and nurse evaluations. They are trying to be proactive. There is a meeting on November 4th with providers, transport and ED's to try to discuss how to improve care to patients. Susan Johnson indicated that Telepsych is scheduled for implementation sometime in November at Angel Medical Center (AMC). She also indicated that Transylvania County has not gone live yet and Telehealth will be going live there before AMC. AMC is beginning renovation to create three psych safe rooms in November. They are hoping to be complete on the first room in three weeks. Mr. Beale indicated we are looking for holding areas. He feels that we will begin to see the local health department and local hospitals having to become more involved without any money coming down. Ms. Price indicated that all of the talk is about population health. She asked if there is any grant money available without having all of these silo projects popping up. Mr. Beale indicated it will be dictated to us by the state. Ms. Kimsey asked Ms. Seay if there was any way to determine why the numbers have increased. She understands that some of the issue is continuity of medication treatment. There are gaps in the medication treatment system that need to be filled. There is no intermediate treatment for adults. ACT team is a wraparound service but there is nothing between this and the ER service for non-Medicaid patients. Mr. Neidig indicated we are repeating problems that were seen six years ago when this committee was created. The mobile crisis services went up in April and they have not seen the drop in patient services that they normally see. They are also seeing new patients that they have never seen before. They are seeing more children and adolescents. Ms. Ledford indicated that in their day treatment classroom they have seen primarily kindergarten and first grade students. She also indicated that these children are more acute. Prior to a few years ago they never had any children below the fourth grade. There is high level treatment available for intense in home therapy to try and keep the family together. Mike Neidig reported that NCSTEP which is the hospital based Telepsych program have experienced that 64% of patients who needed services were processed under 30 hours. 37% of the time they were sent home after receiving Telepsych treatment. Mr. Beale indicated that the vast majority of these patients don't have insurance or Medicaid. Mr. Neidig is hoping that these psychiatrists will get plugged into the system and patients will get their medication. Some of the problem is getting the proper follow up. Mr. Beale asked Susan Johnson if she would try to find out a date when they will be implementing the Telepsych program. She said she would do that.

Other Business:

Sheriff Department's Report – Major Shields reported that they continue to see increases in all aspects of this process. They continue to be used as the default for involuntary commitments and the jail as the holding facility. The problem is people that need treatment and don't get it end up in jail. The numbers reflect an all-time high for commitments and ER time. The average time for process in Sept. was 56 hours. Based on average wages they have incurred over 129,000 in salary alone. There was an 11% increase in commitments from 2012 to 2013, 33% increase in time it takes to accomplish transport and 91% broken commitments last year. At the current rate of consumption, with no changes, they are projected to go over budget by \$35,000 in one line item alone. G4S transport wanted to do a regional plan but when we sent them our numbers they said they could work with us. This is a civilian based program. The sitting program is personnel that are all CIT certified. There is still some concern regarding the transport piece. There is no current funding, or billing avenue, for the mobile providers to go into the jails to do the assessments. Mr. Shields indicated his report would be available to anyone who wanted it. The history of the report goes back to 2006.

Mr. Bruckner reported that in North Carolina local health departments are required by state statute to provide mental, dental and physical health services where services are not otherwise available. There are a lot of counties that are interested in providing Telepsych programs. Mr. Neidig indicated that this is where Telepsych will be able to make the determination to involuntarily commit immediately, not four hours later when the bed may no longer be available.

Corporal Marion reported that they currently have 27 inmates on medication and at least 23 are on psych medication. They have not had to call mobile crisis lately. After the 30 days in jail they are clean and sober this would be the ideal time to get these people psych treatment. Ms. Cline indicated that she had personal experience with the Second Chance program. She is now working with NAMI and Appalachian South as a peer counselor. The piece she sees that's missing is to get them the treatment or peer support they need before they go back to self-medicating. Peer support in jail after they dry out or detox helps. Mr. Neidig indicated that the support for the Second Chance program comes directly from the county. A lot of these patients in the jail don't actually need an assessment but they will benefit from peer counseling. The Department of Corrections has the ability to do the assessment but the jail does not. Corporal Marion indicated that for the inmates there is no way to get medication prescribed. With Telepsych this piece could be provided. There is a new statute that is going to mandate that the standard for DWI's will be 180 days and below. In the past it was 90 days and below. Goal of taskforce should be to increase the amount of services available while they are incarcerated.

NAMI Advocacy Training – Nov 5th @ 1:00, 14 West Palmer St. – two ladies from Raleigh are coming to do the training. Congratulations to our local NAMI Chapter who got the award for affiliate of the year.

Schedule Next Meeting: December 17, 2014

Adjourn: The meeting adjourned at 10:05

Respectfully submitted,

Charlene Bellavance

These minutes were approved on December 17, 2014 with a motion by Paula Ledford and seconded by Kathy McGaha. The motion passed unanimously.