

MEETING MINUTES – CRISIS RESPONSE PLANNING COMMITTEE

MEETING INFORMATION

Date: August 3, 2016 Location: 1801 Fox Drive
Time: 1:15 PM Meeting Type: CRPC
Facilitator: Claudia Lennhoff

Present: Sheila Ferguson, Karee Voges, Bruce Barnard, Saijun Zhang, Jim McGuire, Mark Driscoll, Nancy Carter, Julia Rietz, Lori Hansen, Chris Garcia, Brian Tison, Jamie Stevens, Rosita Byrd, Celeste Blodgett, Lisa Benson

Absent: Allen Jones, Monica Cherry, Mike Benner, Lori Hansen, Jeff Christensen, Gail Raney

Community Observers: Bert Stabler, Bobbi Trist

Call to Order

Lennhoff called the meeting to order, and made an announcement that going forward speaking time for public participants will be limited to the Public Participation portion of the agenda.

Introductions

The meeting started with introductions. Saijun Zhang, Data Consultant for the JMHCP project and Independent Researcher and Evaluator from the University of Illinois, and Lisa Benson Director of Community Services at Champaign County Regional Planning Commission joined the meeting.

Approval of Minutes

A motion was made to approve the minutes of the July 6, 2016 meeting, and the motion was seconded; the meeting minutes were unanimously approved.

Public Participation

The meeting was opened to allow comments from observers. Bobbi Trist, one of two public observers, both of whom represented Build Programs Not Jails, pointed out the individual indicated as Unknown (came late) in the July minutes, is Dottie Weiss. In addition, Trist stated that there have been a number of groups (Institute for Law and Policy Planning, and the Criminal Justice Task Force) that have worked on the “jail issue,” and that the groups’ reports can be accessed to inform this process. Trist continued by saying that since this process started, momentum for development of a drop-in center has slowed. The process the CRPC is engaged in should be broadened from intake to the jail, and the recent deaths in the jail could have been prevented had a community drop-in center been developed. Bert Stabler, the other public observer, voiced support for Trist’s comments.

Bruce Barnard responded that this is a much larger effort than simply reviewing the jail intake process. The CRPC is moving through a systematic process for which data is needed, in addition to knowledge of processes. The proposal for this planning process was built on the referenced reports, and the CRPC will be analyzing all of the intercepts and the resources available at each. Definitions are needed to inform data collection, which is required for any future proposal of an assessment center, so that recommendations from the CRPC are made based on real need, versus perceived need.

Update 1st Public Input Session

Chris Garcia will be taking the survey to the jail. The first public meeting was sparsely attended, but it was a good event in that it allowed the audience a give and take opportunity with CRPC members. At the next session, time will be allocated at the end for CRPC members to answer questions. Julia Rietz liked the way the meeting was conducted, as audience members are more comfortable sharing their input when their attention is not drawn to the makeup of the audience, and encouraged NAMI, and the public participants in attendance to attend the next public input session, scheduled for Wednesday, August 24th, and invite others from their organizations to do so, too. Celeste will resend the emails to the CRPC with the survey link.

Jamie Stevens suggested holding a public input session at a different time, for example, during the day as opposed to the evening. Nancy Carter suggested holding a session during the weekend. Capacity issues are a consideration. Also, specialized focus groups will be held, such as with U of I Providers, and at the County Jail. Members were encouraged to provide suggestions regarding additional groups they believe should be approached for a focus group.

Intercept 1 SIM Mapping

An Intercept One Mapping Exercise was conducted virtually by Policy Research Associates, Inc. (PRA) on Tuesday, July 12th. Individuals were invited to participate, based on a list of required agencies/organizations/programs supplied by PRA. A wide group of agencies was represented, and PRA was impressed with how many resources are already in place in Champaign County.

Brian Tison pointed out that Champaign County is well ahead of the curve, and that our issue resides in the system being relationship-based and not functioning as a system. A system needs to be built around the relationships that exist and get the necessary linkages accomplished; we need to formalize informal relationships.

Due to the Intercept 1 mapping, there is now information available to assist the CRPC with its process. The information this process procured can be used, as well as added to, it for the CRPC's purposes. Should we do something similar with each of the other intercepts?

Mark Driscoll stated that the exercise went well; some people wondered what they were doing there. There was good participation from all the parties in the room. Some of the issues are not as involved, and may be taken to the CIT Steering Committee. METCAD

is an extremely important stakeholder in the resulting processes that take place after receiving a call, and was an extremely important partner to include in this mapping process. The process also highlighted a lot of what may be needed going forward, such as training on MH CIT, MHFA, and Narcan.

Feedback received during a follow-up conference call with Travis Parker, the Technical Assistance Provider at PRA, was pretty broad and not at all specific as to what is happening in our community. Suggestions consisted of looking at what was realized, moving forward, and letting PRA know what we do. Mr. Parker also suggested gathering the mapping group together again or to meet again in other groups.

Lennhoff pointed out that moving forward by breaking into groups at this point in our process causes concern because we may be acting on gathered information in a piecemeal fashion, if we do so before first mapping the remaining intercepts. Also, there may be some overlap of mapping participants with the CIT Steering Committee and the CRPC. Mark pointed out that in addition to the agencies represented on these two groups, GROW, the Department of Public Health, and Promise Healthcare should be included in future plans. Sheila and Celeste met with representatives of GROW after the mapping exercise, who voiced their desire to be involved in future plans for justice and mental health peer support in Champaign County.

Karee Voges stated it was very beneficial to have as many participants involved as were in attendance. The dialogue was valuable in that it enhanced understanding of various agencies' roles. Some participants had no idea what services are provided or the processes and connections that are in place. Stevens asked if there is a resource guide for families of persons with a mental health disorder. Sheila Ferguson responded that there is, and stated that many individuals do not know we have crisis stabilization here, the Respite Center, which is not the same as short-term crisis stabilization. Barnard stated the importance of building on resources that we already have.

At this time, CCMHB's involvement with PRA has come to a conclusion. Though Lynn Canfield had discussed the possibility of future mapping exercises, and it had been suggested that PRA would be conducting virtual mappings for Intercept 2 in August/September 2016, there has not been any further discussion regarding this. Barnard will be attending the Leadership Academy with PRA in September, and will follow-up with them regarding future mapping events. In the meantime, Mark will send out notes to the mapping group with the chart that was developed as a result of the activity.

Update on Call with Johnson County, Kansas

A conference call was had with Johnson County, Kansas, a community that has gone through this process and developed a data collection and tracking program that allows providers to input information, but firewalls are in place to protect private health information. The system also has the ability to capture data from medical providers. The County is the primary mental health treatment provider, and they have a good idea of the mental health population in the jail.

The data piece is missing in Champaign County. We do have the Homeless Management Information System (HMIS), which is housed at Regional Planning and has some data capabilities. The state laws are different in KS than in IL, that allow for more information sharing. They may be willing to share their system or we can seek to build something like it, though consent from the client will be required in order to access protected information. Members should review the information provided about the call, and continue this discussion at the CRPC meeting next month.

Old Business

None

New Business

Exercise 4

Flags have been identified for screenings, but nothing is being implemented yet. Flags, through the Sheriff's system will help to identify and monitor level of services, but data will not be collected until the flags are in place. These are steps we continue to work on, as it takes great effort to make change in existing systems. Many recommendations, from other communities with data systems in place, are already in place here. Therefore, our data may not reflect national averages. For example, Drug Court has been implemented in this community for many years. Often, there are efforts already taking place that the community does not know about.

Exercise 5

We are in the process of conducting a county system analysis that focuses on answering the questions posed in this section of the Guide, such as key findings to support the assertion that the average length of stay in jail for people with mental illnesses is twice as long as people without mental illness. We will discuss with our TA Providers whether the extent to which we have this information is enough for us to proceed or if we are moving on to mapping remaining intercepts.

A Progress Summary of our work to date is included in the packet and has been sent to CCMHB and our TA Providers. It has been noted by our TA Providers that we are further along than the other communities doing this work.

The meeting concluded at 2:13 p.m.