

COUNTY OF



ALLEGHENY

RICH FITZGERALD
COUNTY EXECUTIVE

Drug & Alcohol Planning Council Meeting Minutes
Wednesday, July 8, 2015
Human Services Building, Homestead Grays Conference Room,
One Smithfield St., Pgh., PA 15222

Present: Theresa Edwards
Absent: Abbie Scanio, Valerie Ketter, Mario Browne, OBH Assistant Deputy Director
Sue Martone
Staff: OBH Deputy Director Denise Macerelli, D&A Bureau Administrator Dr. Latika
Davis-Jones, OBH Manager of Special Projects Bill Bedillion, D&A Bureau
Clerk Typist 2 Michelle Lee

I. Call to Order & Introductions

Vice Chair, Theresa Edwards called the meeting to order at 4:36 p.m.

II. Introduction of Denise Macerelli (New Deputy Director of OBH)

Bill Bedillion introduced Denise Macerelli, the new OBH Deputy Director, who previously worked with the DHS/OBH child welfare and integrated services program. She is a licensed and certified social worker with 30 yrs. of experience working in the behavioral health system, ranging from direct clinical practice to administration. She has worked on policy and regulatory reform from the local to the national level. In addition, she has participated in advocacy, community, and provider-based professional organization boards and committees at the national, state, and county levels. In Allegheny County, she has been active in the certified peer specialists committee, the Deaf, Blind, and Hard-of-Hearing Behavioral Health Task Force, and the MH/ID Advisory Board. She has also done grassroots advocacy on behalf of individuals and families recovering from mental illness/substance abuse disorders. Denise Macerelli was also instrumental in the start of CCBH and served as the first CCBH director of care management and member services. She played a critical role in developing Allegheny County's Re:solve Crisis Network.

III. Council Business:

Review of May 2015 Joint MH/ID Board and D&A Council Meeting Minutes

Since there was not a quorum, the May minutes will be approved via e-mail.

IV. D&A Updates-Dr. Latika Davis-Jones

Overdose Prevention Initiatives

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Dr. Latika Davis-Jones talked about the overdose prevention initiatives that are in the process of being implemented in Allegheny County. OBH/D&A has been working with providers for a while on overdose prevention, especially on expanding the use of Narcan. There is a 3-prong approach to expanding the use of Narcan within Allegheny County. The first part of the approach is to have D&A providers give Narcan to their clients. The second part is to have treatment facilities' onsite doctors prescribe Narcan to clients' friends and families (Act 139 allows 3rd party prescribing). Lastly, OBH/D&A is currently working with both the Pittsburgh and Allegheny County police to make sure that all police officers receive training on how to use Narcan and that all police cars are equipped with Narcan.

The AQM (Adult Quality Measures) pilot project is a joint effort between AHCI, CCBH, and Allegheny County to engage people who are reporting to hospital emergency departments with physical health problems, along with SUD's. These people are being connected with a social worker for a brief intervention, which may include a PCPC assessment/ quick screening so they can be referred to treatment. Jim Dodd, a program manager at CCBH, said that CCBH has 2 community outreach resource specialists who, starting next week, will be going to 4 hospitals, including Allegheny General Hospital, UPMC McKeesport, and UPMC Mercy. The peer specialists at these hospitals can refer to the community outreach resource specialists, who can then set up LOC assessments and link clients to services.

Because of DDAP's requirement that overdoses be tracked, Dr. Davis-Jones said that OBH/D&A wants to use the AQM pilot project to track non-fatal overdoses since Allegheny County does not currently have a way to track them. She recently talked to Dr. Karen Hacker, the ACHD medical director, about ways to obtain and track non-fatal overdose data, including figuring out how to get physical health data and some of the EMS data with people's names. For non-fatal overdoses, the goal is to intervene and possibly save a life before people fatally overdose.

OBH/D&A submitted 3 grant proposals to DDAP (Department of Drug and Alcohol Programs), PCCD (Pennsylvania Commission on Crime and Delinquency), and SAMHSA (Substance Abuse and Mental Health Services Administration). Although any grant money received could fund some work on the AQM project, another option would be to fund work on the AQM project through the reinvestment funds. However, OBH/D&A needs data to support using the reinvestment funds.

Denise Macerelli asked if the screening of the non-fatal overdose clients in the emergency departments focused on treatment needs or non-treatment needs such as, housing, food, or lack of insurance. Jim Dodd responded that although it is treatment focused, there is an understanding that clients face other barriers. At CCBH, David Loveland is training the CCBH community outreach resource specialists on ways to engage clients and keep them engaged by understanding their motivations, values, short-term goals, etc. Also the community outreach resource specialists will connect the client to one of CCBH's peer providers, community resources, or whatever the person needs. Dr. Davis-Jones said that right now the AQM project is geared towards HealthChoices

members, but a lot of uninsured people are also being funded to ensure that they receive services. There is a hope that with the Medicaid expansion, more people will be covered. Any additional funding from the grants could possibly be used to hire more peers to work in the emergency departments.

MA (Medical Assistance) Allegheny County Jail Pilot Program

The MA pilot program at the Allegheny County Jail ensures that individuals, who are being released and want to access long-term treatment, are enrolled in MA and have their benefits active upon their release. In the past, individuals had to wait for their benefits to become active. In the pilot program, inmates' applications are sent within 30 days prior to their tentative release dates so that their benefits are active upon their release. Currently, this program is focused on individuals who are going into residential treatment after their release, but there is a hope that it will be expanded to other levels of care. This pilot program frees up Allegheny County's D&A funding for those who are uninsured.

ROSC (Recovery-oriented Systems of Care) Community Listening Forums

Helpful information was gathered from the ROSC community listening forums held this year at McKeesport, the North Side, East Liberty, the Onala Club, the Salvation Army, and Light of Life Ministries. The goal of these listening forums was to talk to residents about what was/was not working with the current SUD/MH system and how to improve it. The listening forums are part of Allegheny County's ROSC transformation process, which involves getting feedback from the community and stakeholders about currently offered services, in order to think of ways to transform the current system. There is a hope that listening forums might be held annually in the future. During this fiscal year, there is a plan to hold listening forums for contracted providers in order to find out what's working/not working for them, how to improve the way business is done as a system, etc. More information about the upcoming provider ROSC listening forums will be forthcoming.

ROSC Philadelphia Trip

Dr. Davis-Jones said the some members of the ROSC Transformation Leadership Group will be returning to Philadelphia, to learn more about Philadelphia's ROSC system, which is about 12-13 yrs. old. Last year ROSC Transformation Leadership Group members went on a 1-day trip to Philadelphia to see their ROSC system and visited recovery support centers, treatment centers, met with administrative and marketing staff, and saw how they integrated their services. The next trip in mid-August 2015 will be 2 days since the last trip did not allow enough time to cover everything. During the next trip, attendees will learn about topics like, Philadelphia's pay-for-performance system and how they rebid their entire system. Attendees can learn from Philadelphia's ROSC and either adopt or adapt their practices for Allegheny County. Also there will be breakout sessions depending on attendees' different interests. OBH/D&A had the opportunity through the ONDCP (Office of National Drug Control Policy) to participate in a ROSC learning community. OBH/D&A has been working closely with Dr. Ijeoma Achara, a ROSC consultant from Philadelphia and Connecticut. Eric Hulsey, from the DHS-DARE (Data Analysis, Research and Evaluation) department, is looking at data to determine what it means and how we can make changes based on real-time data

reporting. Matt Hurford, who formerly worked in Philadelphia's CBH (Community Behavioral Health) managed care agency, is now a part of CCBH and can be a great resource.

DDAP QAA (Quality Assurance Assessment) Visit

OBH/D&A has a QAA visit with DDAP coming up in October 2015.

Pennsylvania In-depth Technical Assistance (IDTA) Child Welfare in D&A Project- Denise Macerelli & Dr. Latika Davis-Jones

A PowerPoint presentation on IDTA, which was created by Chereese Phillips from CYF, was distributed to attendees. Denise Macerelli was involved with the IDTA project when she was a DHS Integration Best Practice Manager. The IDTA project addresses the need to improve identification of SUD's in families involved in the CYF system. OBH/D&A has been working with CYF over the past year to identify what training, resources, and tools CYF caseworkers need in order to identify and better meet families' needs. CYF caseworkers need information about SUD specialists to make referrals to and need to know what questions they could comfortably ask to determine whether to make a referral/suggest a screening. The IDTA project is building a best practice, which will become a standard practice, for identifying family needs within the child welfare system.

Budget Updates

Dr. Davis-Jones said that despite the veto of the budget, OBH/D&A has still received their 5-yr. grant agreement with DDAP. Pat Valentine had had a conversation with Randy Brockington, who works on the 2-month prepayments for providers, and providers will still be able to get their prepayments.

V. OBH Updates

Denise Macerelli spoke about the long-term managed care proposal, which concerns people who are on Medicare, either because of age or disability. However, the proposal excludes those receiving services through Intellectual Disability and would be separate from any other managed care program. HealthChoices members who have Medicare and are dually eligible, provided they do not receive services through Intellectual Disability, would be a part of this new plan. This new plan would take over the SNPs (Special Needs Programs) in Medicare/Medicaid, for those who are dually eligible and have a specialized care management unit to help them. There is a concern about how this proposal would affect those who are Medicare eligible due to a disability related to a mental health disorder.

VI. Adjournment

The meeting was adjourned at 5:20 p.m.

VII. Next Meeting

The next public meeting will be on Wednesday, September 9, 2015 at 4:30 p.m. - 6 p.m. in the Homestead Grays Room at One Smithfield Street.