

NEXT MEETING: MAY 14, 2008, 10:30 AM TO NOON
64 NEW YORK AVENUE, 4TH FLOOR, CONFERENCE ROOM D

**DISTRICT OF COLUMBIA
DEPARTMENT OF MENTAL HEALTH**

**CRISIS EMERGENCY SERVICES PLANNING WORKGROUP
IMPLEMENTATION UPDATE**

**MEETING MINUTES
FEBRUARY 13, 2008**

Attendees:	Steve Baron, Director, Department of Mental Health (DMH) Barbara Bazron, Deputy Director, DMH Toni Brown, SOME Lois Calhoun, Forensic Coordinator, DMH Christine Elwell, First Helping, DC Central Kitchen Tedla Giorgios, DCCSA Lt. Silvia Hamelin, Metropolitan Police Department (MPD) Claire Johnson, PreTrial Services Agency Commander Brian Jordan, MPD Yvonne Keyes, DMH Dr. Robert Keisling, Pathways to Housing Susan Shaffer, PreTrial Services Agency Dr. Steven Steury, DMH, Chief Clinical Officer Anne Sturtz, Deputy Director, DMH Office of Strategic Planning, Policy & Evaluation LaToya Wesley, Research Analyst, CJCC
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Introductions & Welcome.

Steve Baron opened the meeting by welcoming all the participants. All participants introduced themselves.

Discussion.

Steve explained that the purpose of this meeting was to provide participants with an update on the implementation of the recommendations contained in the Workgroup's Final Report dated December 21, 2007 (the "Final Report").

CPEP.

Steve Baron reported that DMH will be renovating the building where CPEP is currently located. CPEP will remain in place and operate throughout the renovation. The renovations will include the renovation of space to operate extended observation beds and space for an urgent care clinic.

The architect that had been working on the renovation plans dropped out of the project, so DMH is working to replace the architect.

Mobile Crisis Teams.

Steve Baron reported that a position description has been developed for the mobile crisis team coordinator. DMH will circulate a copy of the position description to the workgroup, so that the workgroup can refer qualified candidates to the DMH Division of Human Resources.

Staffing for the mobile crisis team is dependent upon funding. Steve has had some discussions with the Department of Human Services (“DHS”) and Fire and Emergency Services (“FEMS”) about funding and positions for the teams. Ideally, DMH would like to have teams operating sixteen (16) hours per day, seven (7) days per week.

Steve Baron hopes to hire the mobile crisis team coordinator by early April. If the mobile crisis team coordinator starts in April, then he hopes to have the mobile crisis teams operational by mid-July. The mobile crisis team coordinator will be responsible for developing protocols with the Metropolitan Police Department (“MPD”), FEMS and the Office of Unified Communications (“OUC”) to facilitate the provision of mobile crisis team services. The mobile crisis team coordinator will also be the public face for the mobile crisis team services.

Walk-in Urgent Care.

Steve Baron reported that DMH received proposals from two (2) vendors to operate urgent care services at the Superior Court. DMH hopes to be able to announce a contract award by mid-March 2008, with services expected to start sixty (60) to ninety (90) days after the contract award.

Steve Baron also reported that the DCCSA has had some success with the provision of urgent care or same day services through its new Services Upon Request Enhanced program (the “SURE program”). The program began on November 1, 2007. Referral sources have reported a high level of satisfaction with the SURE program. DMH will circulate data about the operation of the SURE program to the Workgroup. Dr. Keisling stated that he has referred several people to the SURE program for urgent care services and has not received any complaints about the availability of the service.

Warm Telephone Line.

Steve Baron reported that DMH is working to transition the Access Helpline telephone system onto the same system used by the OUC for 911 and 311 calls. The warm telephone line is expected to use the same system.

Commander Jordan asked about training for 311 operators about mental health issues. He also asked whether the telephone system would include data about the number of calls disposition of calls, including referrals from the 311 operators for mental health services.

Steve Baron agreed that the issues raised by Commander Jordan needed to be resolved as part of the implementation process.

Children's' Mobile Crisis Services.

Dr. Bazron reported that DMH is negotiating with a vendor to provide mobile crisis services to children and youth. The mobile crisis service will include four (4) crisis stabilization beds specifically for children and youth. The main purpose of the mobile crisis service for children will be to provide services to children involved in the child welfare system. The development of this program is required as part of the LaShawn Amended Implementation Plan.

Dr. Keisling said that he had heard reports about children being held in the emergency room at Children's National Medical Center ("CNMC") because CNMC did not have capacity to admit them. Commander Jordan reported that as a result of the closure of Riverside Hospital, MPD had experienced some difficulty getting inpatient psychiatric services for older youth who had been detained (ages 16 & 17). MPD policy had required transport of older youth to Riverside Hospital for inpatient services. However, the Psychiatric Institute of Washington ("PIW") has agreed to make space available for emergency admissions of older youth, although CNMC will continue to conduct emergency assessments.

Steve Baron agreed to invite the children's mobile crisis team provider, once selected, to attend the quarterly implementation update meetings of the Workgroup. Commander Jordan suggested inviting the children's mobile team crisis provider to the PSA 101 meetings.

Training

Susie Shaffer asked about an MOU between DMH and MPD for the provision of training about mental health issues. Commander Jordan noted that MPD has been providing all officers with 32 hours of training, using the training curriculum developed by DMH. Although DMH has not been involved in conducting the training for several years, the training has continued.

Lois Calhoun reported that she and Dr. Van Buren, the new DMH Director of Organizational Development visited MPD on February 12, 2008 to discuss training. Lois stated that they agreed that the curriculum needs to be updated and institutionalized at DMH. Dr. Bazron noted that Dr. Van Buren has been conducting a training needs assessment at DMH and with DMH sister agencies and partners. Dr. Van Buren has developed a workplan with deadlines. DMH will circulate information about the timelines for reviewing and revising the MPD curriculum. Dr. Bazron also stated that the training workplan includes plans for developing capacity for MPD to offer the training on an ongoing basis.

Suzy Shaffer also asked about the training of FEMS personnel as officer-agents. Dr. Steury reported that Dr. Williams, the medical director of FEMS is going to select staff to participate in the training. Dr. Steury expects the selection process to be completed by mid-March 2008. Dr. Steury wants to be selective about the number of trained officer-agents.

Dr. Steury reported that rules regarding officer-agent training will be published soon. DMH will circulate the rules to the Workgroup for comment.

Suzy Shaffer asked about timelines for implementing the MPD training and the FEMS training. DMH will provide information about projected timelines to the Workgroup.

Meeting Schedule.

Steve Baron asked whether the group wanted to continue to meet quarterly to discuss the implementation of the recommendations contained in the Final Report. The group agreed that the next meeting would be May 14, 2008 at 10:30 am.

Date	Time	Location
Wednesday, May 14, 2008	10:30 am – noon	64 New York Avenue, NE 4 th Floor Conference Room D

The next meeting has been scheduled for May 14, 2008 from **10:30 am to noon at 64 NEW YORK AVENUE, NE, 4TH FLOOR, CONFERENCE ROOM D.**

Action Items and Next Steps.

1. Circulate minutes to workgroup for review.
2. Circulate position description for mobile crisis team coordinator.
3. Circulate statistics about DCCSA's SURE program.
4. Circulate information about timelines for training projects.

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