# **Meeting Minutes**

## CDS Family & Behavioral Health Services, Inc.

Meeting: Staff Meeting
Date: March 10, 2020
Time: 9:00 AM & 4:30 PM

Location: IYP-NW

Date of Next Meeting: April 14, 2020

Attendance: Walter D., Kathy H., Wanda J., Carlos L., Christine K., Ralph M., Sharon M.,

Justin R., Athena R., Terri W., Daphena W., Sabriena W., Sherri Ann W.

Absent: Chondra B., Jalen W.

## I. Business Operations:

A. Monthly Budget (Revenue and Expenses)

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

B. Marketing and Business Development

1. Sub-topic: Introduction - Carlos Lopez (Residential Supervisor)

Discussion: Mrs. Williams introduced Mr. Carlos Lopez as our New Residential Supervisor for the North West Region.

Outcome, Actions, Timeframe:

2. Sub-topic: SNAP (6-11) & Family Action (6-17) Intake

Discussion: Mrs. Williams spoke about the SNAP program and what the age bracket for intakes into that program which is ages 6 to 11 boys and girls. She also spoke about the Family Action program and the ages for Intakes into that program are 6 to 17. We should be referring the appropriate children to these programs if at all possible.

Outcome, Actions, Timeframe:

3. Sub-topic: Spring Break Plans – Wanda Jones, Senior Youth Care Worker Discussion: Mrs. Wanda and Mrs. Williams are working on a schedule for this year's Spring Break. They have already got several ideas for the participants to do during this time. As soon as it is completed it will be posted in the Youth Care Workers office. Please try to stick to this schedule so that we keep the children engaged in the program during this time period.

Outcome, Actions, Timeframe:

4. Sub-topic: Behavior Management (Incentive Store) – Ralph Montgomery – House Manager Discussion: Mr. Ralph spoke about the Incentive Store and how it has been working so far and discussed what the participants were most interested in as far as incentives. Outcome, Actions, Timeframe:

5. Sub-topic: On Call Schedule – Change in April

Discussion: Mrs. Williams discussed the change to the On-Call schedule Mr. Lopez was added to the April on-call schedule along with her, Mrs. Wanda and Walter. Outcome, Actions, Timeframe:

6. Sub-topic: Nurse Input

Discussion: Mrs. Kathy spoke about COVID-19 and gave us the medical outlook on what she knew and what we all needed to know about this virus and how we need to handle our jobs at this point and how we are to keep ourselves healthy and safe as well as the

children in the shelter. She will give us a more detailed look at how we are to proceed during this time and how shelter life will be during this outbreak at our next meeting.

Outcome, Actions, Timeframe:

7. Sub-topic: Counselor Input – Christine Kim, Residential Counselor

Discussion: Christine spoke about the participants we have in shelter at this time and things we need to look out for as far as each one is concerned.

Outcome, Actions, Timeframe:

8. Sub-topic: Staff Incentive

Discussion: Mrs. Williams asked staff what they would like to see as incentives for the staff. If you have any ideas please let her know, you may write them down and put into her door box or speak to her directly.

Outcome, Actions, Timeframe:

9. Sub-topic: VALIC Update

Discussion: If you need to make any changes to your VALIC accounts and you have not done so, please contact HR for the number if you do not have it.

Outcome, Actions, Timeframe:

C. Regulatory Issues

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

D. Human Resource Issues (Staffing and Training)

1. Sub-topic: MRT Training - Meridian Mobile Response Team

Discussion: About Mobile Response Teams (MRTs)

The MRT program is designed around troubled youth and young adults (25 and younger), within Baker, Bradford, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy, Suwannee, and Union counties, who are in need of 24/7 crisis intervention services. The program's goals are to lessen the trauma of crisis situations, particularly, diverting individuals away from ER's and/or jail, and stabilizing them in the most conducive setting possible. During the initial crisis phase, a master's level counselor responds at the crisis location 24/7 (or through Telehealth as requested), while a care coordinator establishes links to appropriate community resources, and a peer specialist regularly follows-up.

## Mobile Response Teams Aim to...

- Respond on-site within 60 minutes of a crisis notification
- Follow-up next day with tailored behavioral health crisis-oriented care plans
- Provide screening, standardized assessments, and referral services
- Create safety plans to prevent future crises
- Include family members in decision-making & support process
- Ensure linkage between all continuum of care services; i.e., psychiatry, outpatient, and referral agencies
- Promote use of innovative technologies; i.e., Telehealth.

### When to Call a MRT

Anyone can call a MRT and absolutely should call a MRT when:

- A youth to young adult 25 and younger
- Is experiencing a mental health crisis

...this can be identified by any of the following:

- Posing threat to self, others, or property (to include, self-harm, suicidal thoughts and/or actions, harm to others, homicidal thoughts and/or actions, generally aggressive behavior, and/or destruction of property)
- Psychotic perceptions, thoughts, and/or behaviors (to include: hallucinations, hearing voices, seeing images, delusions, and paranoia, all of which may or may not have been induced by drugs)
- Depressive state of being (to include: despair, powerlessness, doom, bullying and/or being bullied)

### The MRT Staff

## **Program Managers**

• Directs day-to-day clinical operations of the Mobile Response Teams within a geographic region – North & South.

## Licensed Clinician/Counselor

 Responds to calls 24/7, conducts risk assessments, and completes safety planning over dedicated crisis phone line, and provides therapy and counseling to individuals, couples, and families.

### **Care Coordinator**

• Coordinates the continuum of care process and links clients to the best-suited support systems on an as needed basis.

### **Peer Specialist**

 Serves as a positive role-model to clients & their families, sharing experiential knowledge & skills.

Outcome, Actions, Timeframe:

2. Sub-topic: Training Files – Walter D., Administrative Assistant

Discussion: Walter is tracking the staff training and will let everyone know if they have any training to do to complete for this fiscal year. If you have not yet gotten with Walter please do as soon as possible.

Outcome, Actions, Timeframe:

3. Sub-topic: Title IV-E

Discussion: Mr. Ralph spoke about the Title IV-E process and why this is important to our program, and why we need to collect this data. We are given money for all participants that qualify for Title IV-E.

Outcome, Actions, Timeframe:

4. Sub-topic: Over Time

Discussion: Mrs. Williams spoke about O.T. and that we need to continue to reduce the over time we have as much as possible, even though we are still below the other two shelters in O.T. Great job team!!

Outcome, Actions, Timeframe:

## E. Annual Budget Planning and Process

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

## II. Health and Safety: Program/Regional Coordinators

## A. External Inspections

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

## B. Self-Inspections (Reports, analysis, and recommendations)

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

## C. Incident Reports (Reports, analysis of trends, recommendations)

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

# III. Quality Improvement

## A. File Audits and Case Record Review (reports and recommendations)

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

# B. Outcome Management (status, reports, recommendations)

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

# C. Accreditation and Regulatory Requirements

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

# D. Policy and Procedure Updates and/or Review

1. Sub-topic: Human Trafficking - Children

Discussion: They span a wide age range from 1 to 18 years old. Sex trafficking victims up to roughly 25 years old most often started as young as 14. Children are trafficked out of, or into the United States from all regions of the world and represent a variety of different races, ethnic groups and religions. If we happen to get a child that we suspect of Human Trafficking or Sex trafficking we are to report it to Law enforcement. They are to be slept

separate from the other children, because they may try to recruit the other children. Supervision is the key to keeping the participants in check.

Outcome, Actions, Timeframe:

2. Sub-topic: **Bed Checks** 

> Reminder: As youth prepare for bed, constant sight and sound supervision Discussion: begins. Staff will provide constant sight and sound supervision until all participants are asleep. When staff is confident that all participants are asleep, bed checks should begin. Bed checks should occur every 15 minutes in each room where participants are asleep and be documented with associated findings in the Bed Check Log Book when using the manual method. NO documentation should ever occur prior to taking action. Documentation is a record of history, not a prediction of the future. Any unusual events should be documented in the Program Log Book, i.e. runaway, disruptive behavior, etc. If any participant is found to be awake, constant sight and sound supervision should begin again until all participants are asleep. If you are found sleeping you will be terminated.

Outcome, Actions, Timeframe:

3. Sub-topic: **Employee Handbook** 

Please sign that you have been given, read, and understand the Employee Discussion: Handbook. If you do not have a copy, please let us know and we will provide you one. Outcome, Actions, Timeframe:

4. Sub-topic: Logbook

Discussion: Please make sure you are documenting the happenings of the shelter, movement of participants and staff in the logbook. Highlight what needs to be highlighted, information that needs to be passed along to the following shift and your participant counts as well. This is a legal document and should be treated as so. This book should never be left unattended at any time and should be locked behind a closed door when not in use.

Outcome, Actions, Timeframe:

Participant Complaint and Grievance (specific and quarterly review of trends) E.

Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

Planning Documents (reports, status of goals and objectives, reformulation) F.

Sub-topic: 1.

Strategic Plan

Discussion:

No discussion

Outcome, Actions, Timeframe:

2. Sub-topic: Accessibility Plan

Discussion:

No discussion

Outcome, Actions, Timeframe:

3. Sub-topic: Cultural Competence Plan

Discussion:

No discussion

Outcome, Actions, Timeframe:

4. Sub-topic: Input Plan

Discussion:

No discussion

Outcome, Actions, Timeframe:

5. Sub-topic: Community Relations plan

Discussion:

No discussion

Outcome, Actions, Timeframe:

## IV. Risk Management

Risk Management Plan (exposure to loss)

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

#### **Employee Concerns or Complaints** B.

1. Sub-topic:

> Discussion: No discussion Outcome, Actions, Timeframe:

#### <u>C.</u> Potential regulatory audits and/or investigation of operations

Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

#### V. **Information Technology**

## Technology Plan

1. Sub-topic:

> Discussion: No discussion Outcome, Actions, Timeframe:

## VI. Clinical/Program

#### Medical and Medication Issues A.

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

#### Counseling and Programming Issues <u>B.</u>

1. Sub-topic:

Discussion: No discussion Outcome, Actions, Timeframe:

### VII. Other Business:

1. Sub-topic:

Discussion:

Outcome, Actions, Timeframe:

2. Sub-topic:

Discussion:

Outcome, Actions, Timeframe:

3. Sub-topic:

Discussion:

Outcome, Actions, Timeframe:

Respectfully submitted by: