Carbon-Monroe-Pike Susue 17 Winter 20/21 Mental Health & Developmental Services

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The Year 2020 was a whirlwind!
It started out like any other:
as advocating for Mental Health and

I was advocating for Mental Health and Early Intervention budget increases and additional waivers in Developmental Services; we were pushing hard to get our new Forensic Programs up and running; and there was an approved moratorium on the closure of White Haven State Center.

Our departments were humming along and our staff was out in the community doing their best to support people and get the services they need. Then, by mid-March, all of our lives were turned upside down! The COVID-19 Pandemic was upon us. None of us were prepared for this situation.

Facemasks became a must-have accessory. We went into full response-mode and pulled together our resources. We mobilized our staff of 125 and worked together to develop a tele-work platform. Those who were office-based had to learn to function in a virtual world. Our Information Technology Department patched together ancient laptops and immediately began ordering new equipment to ensure that all our staff could work from home. Our Fiscal Department created electronic processes to guarantee the bills, providers, and staff got paid! Our Human Resources Department created new policies and procedures from constantly changing state and federal government guidelines, and tenaciously acquired our essential PPE. All the while, our program staff were doing whatever it took to continue serving the families and individuals in our communities! In the beginning, case managers made weekly calls to them. Then we

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took cues from these individuals and families on what level of support they wanted and needed from us. We continued with our case management efforts, with our Crisis Intervention Team Meetings, planning meetings, System of Care work, Quality Assessments, monitoring, wellness plans and everything else that doesn't stop because of a pandemic.

After all, we had people depending on us. We had regulations to follow and timelines to meet. Most of our services were

delivered virtually through phone or video visits. We, along with the rest of the country, adapted. Our state, county, and managed care partners stepped up to the plate to ensure that we could continue providing services. They created regulatory reform and bridge payments. Everyone pulled together to make it work

Throughout all of this controlled chaos, we survived a delayed budget, which ended up flat funded. Our Mental Health Department received a grant to begin a First Episode Psychosis Program. They continued developing a Residential Treatment Facility for Adults in the forensic system and were invited to participate in A Garret Lee Smith Grant. Early Intervention's Home Based Coaching Program and Plan of Safe Care projects continued. Risk Management and Communities of Practice moved forward in our Developmental Services Department. Even more, the Regional Collaborative developed virtual programs to keep people engaged (virtual sing-along programs and talent shows). Our departments worked together to make sure our community was aware of our services. We did a drivethrough consumer holiday event and participated in the Green Light Campaign for Mental Health Awareness Month. The commissioners in all three counties presented Proclamations declaring September 10th Suicide Awareness and Prevention Day, and September Suicide Awareness Month! In the midst of all that, we said good-bye to Kim Chern and welcomed Kristy Trautman as our new Deputy Administrator for Developmental Services. Kristy's promotion and the resignation of our Waiver Coordinator brought more change within the department. Nevertheless, we are a resilient group. The team has moved forward without missing a beat.

Collectively, as a community, we all are experiencing COVID Fatigue. We are tired of being isolated. We long to meet with people in person. We have started the vaccine process with our staff and encourage those who can safely do so, to get vaccinated when available. We value the virtual world and everything this pandemic has taught us. We also recognize the toll it has taken. There have been losses, terrible losses. We are here for those we serve, for our community, and for each other. We got through 2020. We have persevered. I cannot say it was always a smooth ride, but I can say with 100% certainty that it

has been, and continues to be, a ride that we are all on together.

Hang in there. You are not alone. You matter. Stay safe. Stay well. Sincerely,







CMP HealthChoices



Fiscal Year 2020 has been a challenging year for the CMP HealthChoices (CMP HC) Program on many levels. We began the year with our traditional fiscal year being extended another six months to bring our contract with the Department of Human Services (DHS) onto a calendar year cycle. This necessitated the need to alter a variety of contracts and working relationships from our actuary to our solicitor to our managed care partner, Community Care. We were able to

shift and adapt accordingly and were prepared to continue to expand our work with Community Care to meet ongoing program changes and demands.

With the onset of the COVID-19 pandemic, CMP HC and Community Care were first and foremost concerned with our Members. We wanted to insure that our provider network would remain intact in order to continue to provide treatment services throughout the pandemic. We also wanted to insure that our provider networks would stay solvent and able to serve the needs of new members and any pent-up demand when the pandemic was over. In order to accomplish this goal, we created Alternative Payment Arrangements (APAs) with our ambulatory, inpatient (mental health and substance use) and children's residential treatment providers. Our goal was to insure that the programs did not close; continued to pay their staff/reduce any need for layoffs/terminations; and were able to provide treatment services to our Members. With DHS approval, we began to implement these APAs in April 2020 and are continuing to do so through the end of 2020. In addition to the APAs, providers were still allowed to submit regular billing for services rendered with APA payments adjusted accordingly. We are pleased to report that our providers made use of technology to ensure that treatment was delivered and have remained open during the pandemic.

During this same time period, our first three-month delay in capitation payments from DHS was implemented fully. We received no payment for April, May and June 2020 and tapped into existing financial resources and a line of credit to insure that the APA payments were made to providers; that providers were paid for the billing they were still able to provide; and pay Community Care for their administrative costs. The catch-up payments were made in July 2020 from DHS and all financial resources have been replenished/line of credit paid back by the end of that month.

Finally, we are pleased to announce that DHS has extended the opportunity to the commissioners of the three counties to enter into a new contract to continue to operate the HealthChoices Program. The commissioners approved this contract and we are pleased to announce that beginning January 1, 2021, CMP HC will be starting a five-year contract for the HealthChoices Program – with the ability to extend the contract by an additional three years in 2026. The new contract brings new requirements and keeps our priorities on meeting our Members' needs. The focus on the social determinants of health and our coordination with all community stakeholders will be intensified through new value-based contracting requirements; community based care management implementation; and participation in Regional Accountable Health Councils.

Mission Statement

Facilitate access to quality behavioral health and developmental services that empower individuals and families on their journey toward independence and wellness.

C-M-P MH/DS Advisory Board recognized the following recipients for their **Outstanding Community Service Award** at our meeting held on October 20th.

Donna BuccieroJamie KovacsCMP MH/DS Clerical SupervisorSalisbury Behavioral HealthChris CioniValerie VazquezCMP MH TCMFitzmaurice Community Services

Vísion Statement

Promote an environment where all community members receive the supports they need to be self-sufficient and to maintain quality of life in a community that fosters acceptance and embraces recovery.

PROGRAM DIRECTORS

Tina Clymer, MS, LPC - Administrator
Kathleen Peterson, CPA - Chief Fiscal Officer
Jeff Hartzell, RN - HealthChoices - Deputy MH Administrator
Jennifer Williams - Deputy MH Administrator
Kristy Trautman - Deputy DS Administrator
GeorgeAnna Ferrara, PHR, SHRM-CP - Human Resources Director
Sheryl Shay - Information Systems



Mental Health

CHIPP

This coordinator facilitates and participates in many diversion and discharge meetings for individuals who are either in a State Hospital or being referred to a State Hospital. Throughout the course of 2020 we were able to meet our State Hospital bed capacity of 11 which was designed for our 3 county joinder. This is the first time since 2009 that we have been able to accomplish this.

Housing

The Housing Coordinator continues to receive referrals for Mental Health Housing by tracking open referrals and meeting with providers regarding openings, admissions and discharges. This coordinator also participated in many community meetings regarding housing concerns in all three counties. In Pike County, a work group was established to focus on housing issues. They developed a strategic housing plan and a fair housing survey that was shared with agencies, providers and the community.

Housing For All



Targeted Case Management (TCM)

The TCM department has been predominantly working from home since March 2020 by providing telehealth to consumers during the COVID-19 pandemic. Weekly telephone contacts have been occurring and a "Case Manager Check-in for Well-Being Tool" has been implemented to provide support relating to the Public Health goal that each consumer has. These have been challenging times, but our TCMs have risen to meet that challenge keeping our consumers engaged and safe. The Behavioral Health Home Plans (BHHP) program met the hypertension, smoking cessation, and diabetes screening goals of their 2020 contract.

Administrative Case Management (ACM)

Our ACM Department works primarily virtually with a rotating office-based schedule to answer calls and provide face to face services if necessary. ACMs have also been utilizing the Well-Being tool to assess consumer needs during the COVID-19 pandemic.

Outreach

During 2020, our Community Outreach program experienced many changes as we began to provide outreach and conduct our CIT Meetings through a virtual model. Through the CARES grant money, MHDS was able to sponsor virtual trainings to law enforcement offices focusing on *Reimaging Police*. MHDS plans to hold multiple 6-hour virtual trainings in early 2021 for all three counties. Our Consumer Supports Program (CSP) in partnership with Community Outreach, facilitated by Advocacy Alliance, started to hold virtual monthly meetings. To gain attendance as well as staying connected with those who need additional supports during this time, we've offered a variety of different virtual activities such as yoga and trainings.

Child & Adolescent Service System Program (CASSP)

The Behavioral Health Works Tool was implemented in 2020. Our CASSP Coordinators utilize this tool for assessments & data collection for the Student Assistance Program (SAP) during the 2020-21 school year. Our Monroe CASSP Coordinator organizes the CASSP team meetings that provides presentations on the different services offered by various agencies throughout the counties. She continues to be involved in the school/ education subcommittee of the Suicide Prevention Coalition of Monroe County. Partnering with the local school districts, she developed ideas on how to bring education regarding suicide prevention. Working together with Monroe County Children & Youth, she facilitates on-going discussions with Community Care Behavioral Health (CCBH) regarding complex cases. She is currently working with CMP System of Care Juvenile Probation Forum exploring services that could be brought to Monroe county which would assist with our unmet needs.

In Carbon, our CASSP Coordinator has also been working with CMP System of Care on the Handle with Care program. Due to COVID, the implementation of this program has been postponed, but in November she was able to hold our Stakeholders meeting with Jim Thorpe School District and Police Department. Training for schools and police is being scheduled for early 2021 in hopes to jump start the program.

Our Pike CASSP Coordinator partnered with the Karen Ann Quinlan Foundation to provide grief trainings to community members and professionals throughout the year. This program is also funded through our System of Care program. Additionally, the CASSP Coordinator became a Youth and Adult Mental Health First Aid virtual/blended trainer and has facilitated several virtual trainings in 2020.





Developmental Services

The Early Intervention Department quickly adapted to a new way of providing quality services as a result of the pandemic. El leadership restructured their thought patterns and were challenged to develop strategies to keep the department operational during such an unprecedented time. The department started to provide services via tele-health and were thankful for their experiences as a result of the Coaching Award to assist with a smooth transition.



The department is excited and committed to moving forward with the phases of the Coaching Award. The Exploratory Phase has been completed and the department is now in the Installation Phase. The philosophy behind the coaching model is that families can take away strategies and techniques so that they can apply them when the early interventionist is not present. This process will prepare Early Intervention for the implementation of home based coaching over the next few years.

Early Intervention is also an active participant in the Plans of Safe Care which is a multi-system collaboration that supports infants born affected by substance use. El leadership participated in a Plans of Safe Care Technical Assistance State Meeting this year. In addition, a collaborative meeting was held in Pike County with representatives from Wayne County Memorial Hospital, Pike County Children and Youth, Carbon Monroe Pike Drug and Alcohol Program, and Nurse Family Partnership to name a few. We are excited to see what the new year brings as Pike County moves closer to the implementation of this program.

This year was a year of change for the Developmental Services Department. Not only did the department experience staffing changes, they were also challenged to provide person centered services via tele-health and offer technical assistance to the provider network in such a fluid climate. The department did not allow this to slow them down, as they continued to move forward keeping our mission and vision in mind. Our Regional Collaborative was extremely active throughout the year. The Collaborative made it a priority to research and meet the needs of families and individuals. The results of a needs assessment indicated that our community lacked social opportunities for people with disabilities as well as information on local resources. The Regional Collaborative responded by hosting an art contest, a virtual variety show, monthly virtual sing-a-longs, and a destination scavenger hunt. An extensive resource guide was created and a monthly calendar of social events was developed and shared with stakeholders. The Regional Collaborative will continue to assess the needs of our community and offer resources and activities that promote community inclusion and connectivity.



The Employment Coalition is dedicated to increasing awareness and sharing the benefits of hiring people with disabilities. This year, the coalition recognized local businesses who hire individuals with disabilities by presenting them with certificates of appreciation. The coalition hopes that through outreach and increased awareness we can locate more employers who are willing to hire individuals with disabilities.

Moving into 2021, the department will focus on mitigating risk for individuals through a variety of methods including the Provider Risk Screening Process, utilization of the Health Risk Screening Tools, continued training on the Fatal Four, and updating

Individualized Service Plans to include strategies for risk mitigation. We will continue to work closely with providers, individuals, and families to promote health, safety, and wellness.

Thank You

This past year has been particularly challenging for all of us. I would like to send a special **THANK YOU** to our staff and our Provider Network for their dedication and commitment to serving this community. All have gone above and beyond to ensure that those we serve have what they need. I would also like to thank the County Commissioners and our MHDS Advisory Board for their

continued support and trust. Finally, I would like to thank the individuals and families that we serve for their patience and flexibility during this pandemic. Your safety and wellbeing are our first priority.

Jina