

Mental Health Connection Membership Meeting Minutes
Monday, August 8, 2011, 8:30 a.m.
The Women's Center

Attendees:

Sue Adams	Susan Garnett	Jackie Miller
Sean Allen	Melissa Gibbons	Jan Miller
Stefan Ateek	Allison Giles	Maureen Odenth
Gwen Bain	Jennifer Gilley	Beverly Ozanne
Joan Barcellona	Estrella Griggs	Carol Nati, M.D.
Kay Barkin	Nancy Hagan	Santos Navarette
Faye Beaulieu	Chuck Hoffman	Justin Nsenga
Stephanie Books	Virginia Hoft	Michael Parker
Gary Buff	Elin Jacks	Sherri Pratt
Deborah Caddy	Carol Klocek	Carolyn Presnall
Wayne Carson	Tracy Koller	Matt Robison
Pat Cheong	Barbara Lamsens	Jane Sanford
Sharlene Christiansen	Lee LeGrice	Jamie Souders
Dawn Dickerson	Cheryl Livesay	Lois West
Jennifer Farnum	Susanne Luebke	Mark Ware
Debbie Fillmore	Sandra Lydick	Lyn Willis
Jan Finch	Jennifer Martin	Brenda Wingo
Sonja Gaines	Becka Meier	Wayne Young
Lydia Garcia	Bart Miller	Lena Zettler

Susan Garnett called the meeting to order at 8:38 a.m. and welcomed attendees. She asked that everyone be sure to sign in, as the time spent at the meeting will count toward in-kind hours for Hand in Hand. She passed the sign-in sheets around for those who had not made note of their attendance.

Carolyn Presnall led introductions.

Creating a Trauma-Informed Community

Wayne Carson reviewed the community's involvement in trauma-informed care over the past several years, beginning with the original Learning Community and continuing through Trauma-Focused Cognitive Behavioral Therapy training for providers. About a month ago, Mental Health Connection gathered a diverse group of professionals (listed on the back of the agenda) to discuss a grant opportunity to build a trauma-informed system of care. However, the group decided the grant was not a good fit for Mental Health Connection. The next step is to determine whether building a trauma-informed system of care should be a part of the next Mental Health Connection strategic plan, which will be developed beginning in the fall. Attendees at today's meeting held small-group discussions to help guide the planning.

Each group discussed two questions and reported out. Results included:

With what issues, problems or conditions would a trauma-informed system help with healing or coping?

- High school kids and administrators (low numbers but high resources)
- Misdiagnosis of trauma
- Training of administrators, other professionals (police) and first point of contact (physicians)
- Prevention
- Early intervention
- Children in the CPS system
- Communication
- Gaps in resources
- Long waiting lists
- Faith-based organizations
- Youth services (school counselors and nurses)
- Education about the link between acting out behaviors and trauma
- Inclusion and expansion of cultural competence in such areas as the military culture or a school's culture
- Generational/family systems
- Addiction communities
- Change approach from "What is wrong with you?" to "What has happened to you?"

What does a trauma-informed community "look like?"

- Know the resources
- Be connected
- Know what current research says
- Clear definition of trauma
- Emergency response teams are trained
- Police receive training focused on trauma
- Standards of care for providers
- Ability to reach out and inform families
- Treatment comes from a family systems perspective
- Reliable assessment
- Involved faith-based and neighborhood groups
- More community education on "What is Trauma"
- Hotlines for easy access
- System navigators/centralized listing of services
- Trauma is included in the health care curriculum in schools
- More/better trained providers – helping providers learn what works for which populations
- Cultural sensitivity
- Language diversity
- Level of certification for hospital emergency departments, similar to Level 1 Trauma Centers
- Team with Red Cross, which has a protocol for people traumatized by disasters
- Explore existing best practices for children who experience abuse

- Review Kaiser's work on long-term impact on kids who experience/observe abuse, including discussion of an assessment tool
- Training/knowledge for teachers, child care providers after-school programs

What different systems need to be trauma-informed for Tarrant County to truly provide comprehensive trauma-informed services? Which of these systems could benefit by developing more trauma-informed services?

- Standards of care for providers that require empirical evidence
- Family systems perspective is important
- Educate community on identification and appropriate responses
- Provider education
- Primary care professionals
- Teachers
- Child care providers
- Protocol for responders
- System navigation

Suggestion: put together a think tank/learning community. Involve MHMR, CPS, APS, schools, healthcare providers, universities, social service providers, court systems (juvenile and adult), CRCG, ECI

What resources do we now have?

- MHMR Mobile Crisis Outreach Team
- Psychiatric Emergency Center at JPS
- Trauma-focused CBT training provided by Mental Health Connection
- Other CBT training from Mental Health Connection
- ARC Mode at ACH Child and Family Services
- TBRI at TCU (attachment issues)
- Cook Children's
- Existing learning communities
- CPS offers some services for victims and perpetrators
- Private hospitals and agencies
- Advocates for Children in Trauma
- North Texas Trauma Therapy Services
- Dr. O at the state hospital who specializes in attachment disorders
- Kathy Boczynski, attachment therapist
- Alliance for Children
- NAMI education groups (Visions for Tomorrow, Family to Family, Great Minds, etc.)

What additional resources does Tarrant County need to develop to become a trauma-informed community?

- Educate the public (forums)
- Educate mental health professionals and other providers
- Include a strong focus on trauma in area universities that educate providers, such as the UTA School of Social Work

- Screen family members and provide services, even when children are not the ones receiving services
- Educate legislators
- Seed dollars
- Get leadership buy-in
- Educate first responders
- Provide parent resources and education
- Address secondary trauma for first responders
- Educate the community about appropriate responses to trauma
- Early identification and intervention
- Services in languages other than English
- Cultural competence
- Access to existing services
- Improved access
- Service providers for 0-6 population
- More support groups for families
- Education about parents' rights
- Education for the school system
- Centralized listing of services
- Services for offending or non-protecting parents
- Lower wait times for services
- Increased services in homeless shelters
- Increased understanding of intergenerational trauma
- Expanded continuum of services
 - Level of care: inpatient, outpatient, respite, short-term residential, etc.
 - Treatment models so treatment can be better matched to client characteristics and needs

Patsy will compile all of the results into a single report.

Wayne explained the next step is a meeting scheduled for Tuesday, Aug. 16, at 2 p.m., at ACH, 1424 Summit Avenue. Anyone interested in continuing to be involved in the discussion should attend. Something similar to the learning communities may evolve. The group also needs leadership from those interested in being in charge of parts of the trauma issue. He said this was a step in pulling together information needed to develop a new strategic plan for Mental Health Connection. Information about the meeting will be placed on the Mental Health Connection Web site.

Utilization Review

Tarrant Cares – Kay Barkin reported that Tarrant Cares has had more than 1 million hits, with 1,097,697 by July 28. There have been 522,755 pageviews, and 80,477 sessions. Chuck brought rack cards, magnets and newly designed business-style cards in English and Spanish. Susan pointed out that Tarrant Cares is an area where the community broader than Mental Health Connection saw a need and found a way to fill it thanks to the leadership and energy of Judge Glen Whitley. Mental Health Connection played a major role in bringing the resource to fruition.

JPS Health System – Wayne Young reported there were 1,104 visits to the Psychiatric Emergency Room in July, which was a little higher than usual for that month. There were 301 admissions to the adult unit, 64 admissions to the adolescent unit and 65 to crisis stabilization.

Cook Children's Medical Center – Carolyn Presnall reported Cook will be able to return to full census of 11 next week because the openings in the nursing staff have been filled. The Partial Hospitalization Program currently has nine enrolled and has stayed full. The number of children with autism who need hospitalization continues to rise, with a 67% increase in the numbers from 2005 to 2010. On a single day two weeks ago, Intake had six parents who called about their autistic children needing inpatient care. The hospital conducted 148 psychiatric assessments in the emergency room during July, which is high for the summer months.

Hand in Hand – Chuck Hoffman reported that Hand in Hand is entering its fourth year of funding, and most activities are up and running. The core team is now looking at the strategic plan to determine the current status, existing gaps and what needs to be done to fill the gaps. The current focus is on sustainability – what will be left when the money is gone. Lydia Garcia reported that CBMCS training is underway. There will be another training in October. The next focus will be to bring CBMCS training to the other four counties served by Hand in Hand to expand the culturally competent system of care. Virginia Hoft said trainers are needed. Lydia sent out a request a little over a week ago, and about eight people have expressed interest. There is a need for Caucasian trainers. To date, 219 people from 12 to 15 agencies have received CBMCS training. By the end of this year, all of Santa Fe Youth Services and The Women's Center staff will be trained, in addition to about half of Juvenile Services and a good percentage of other agencies. Representatives from the National Center for Cultural Competence will be coming to Tarrant County in September.

Jamie Souders reported that three mothers of Hand in Hand children went to the SAMHSA meeting in Chicago. On their return, the mothers gave a presentation to the Community Evaluation team. They are now developing a PowerPoint presentation to go on the road. Jamie also reported that the Federation of Families conference in Washington, DC, will focus on trauma and trauma-informed care.

Kay Barkin reported there are magnets, pens and brochures available for anyone who would like to use or distribute them. Hand in Hand will be holding a training for families on September 15 and 16 that will help them identify their personal stories and then learn to tell those stories in a variety of settings.

Allison Giles reported that she, Lydia Garcia and Estrella Griggs have been participating in health coalitions created through CCHAPS in three counties. They work to ensure an early childhood presence in the discussions. Hand in Hand will be holding an informational meeting on developing a system of care in Parker County. Allison also reported that Hand in Hand met with Pecan Valley MHMR, now called Pecan Valley Centers, about helping to implement Wraparound in the counties it serves. Hand in Hand will hold wraparound training with a national consultant, and Pecan Valley will participate in the trainings.

Reporting for Stephanie Norton, Allison said Hand in Hand has now served 69 families. Referrals are needed in every county, especially Johnson and Hood. About half of all referrals eventually sign Wrap Agreements.

Susan Garnett asked that agencies and individuals send in-kind reports to Hand in Hand. Chuck or Lupe Shanklin can explain how to do it. Attendance at this meeting counts as in-kind time.

Crisis Services – Mark Ware reported there were 15,000 calls to ICare in the previous quarter. The Mobile Crisis Outreach Team served 90 individuals. The Residential Unit provided services to 76 people in the previous quarter. MHMR has added two psychiatrists, and one of them is working with Crisis Services. The agency will also be adding an MCOT satellite facility at the Arlington Adult Clinic, where specialists will be working with Arlington doctors to facilitate calls. It should up and running by the beginning of September.

CCHAPS – Ginny Hickman has asked for feedback on mental health questions in a new survey that CCHAPS will administer in 2012. Please send any input directly to Ginny. The questions can be found on the CCHAPS Web site.

Announcements

Susanne Luebke said the Mental Health Connection Internalizing/Externalizing Implementation Team provided training for more than 25 therapists in Cognitive Behavioral Therapy last year. More CBT training is now needed in the community, and several therapists recently completed a train-the-trainer session, developed with support from Peter Jensen and the REACH Institute. The new trainers are gearing up to conduct more community training in the fall. The three manuals on Disruptive Disorders, Anxiety Disorders and Depression will be offered separately so providers can train in just one area if they wish. The goal is to be able to effectively work with those youth who coe to therapy needing assistance in addressing multiple issues. All of the CBT trainings will be coupled with skills already learned in Trauma-Focused CBT training. The new trainers are from Juvenile Services, Santa Fe Youth Services, Lena Pope Home, JPS, Catholic Charities and The Women's Center.

Melissa Gibbons of NAMI announced that NAMI of Tarrant County can now offer almost every training available from the national organization. The group sent MHMR peer specialists to NAMI training. Two Family-to-Family classes are coming up. NAMI's newsletter will be coming out this week. Melissa also provided everyone with a sponsorship proposal for NAMIWalks. The organization would love to see groups develop teams, even if they cannot serve as sponsors. Funds raised through the walk provide the only income NAMI of Tarrant County has. In addition, the walk raises awareness and provides anti-stigma messages. The NAMIWalks kickoff will be on August 24, and NAMI will be sending out an e-vite. Sponsors at the \$1,000 level receive a table at the event, and all sponsors receive two tickets. The walk itself will be October 15. Please RSVP for the kickoff.

Jennifer Gilley announced that the 2011 substance abuse information is on the Tarrant County Challenge Web site at www.tcchallenge.org.

Lee LeGrice announced the Mental Health Association Run for Life will be held on 9-10-11 (September 10, 2011). The walk focuses on suicide awareness. Brochures are on the table in the room. The walk will begin at 9 a.m.

Sandra Lydick announced the Crime Victims Council will hold a 9-11 Memorial on September 11 at Good Shepherd Catholic Community in Northeast Tarrant County. Many faith groups plan to participate in a memorial service and discussions about the healing process.

Gwen Bain reported the Safe Haven counseling centers are underutilized. Children with any type of abuse or trauma related to abuse are eligible for the free counseling services. Therapists at Safe Haven are trained in TF CBT and EMVR.

Patsy Thomas handed out save-the-date cards for the fifth and final Bridging the Gap Symposium on November 7 and 8. Planning Committee members Lee LeGrice, Virginia Hoft, Chuck Hoffman, Carolyn Hanke, Susanne Luebke and Kris Painter have been working on the program. For the last four years, nationally recognized experts have come to the community to talk about research, practice and policy. Learning Communities took place after the first Symposium, and Implementation Teams from those Learning Communities are still working. Each year, the Symposium has continued to build on knowledge gained. About 200 people attended each Symposium, including many who returned each year. This year's Symposium will wrap up the series while beginning the strategic planning process. On the first day, demographer Steve Murdoch will present information about the impact of census numbers on the future of mental health care in Tarrant County. The second day of the symposium will be completely interactive, facilitated by Ellen Kagen of Washington, D.C., who will be working with Mental Health Connection over the next several months. Ellen has done a great deal of work in systems change. She will be helping Mental Health Connection apply the science and theory learned in the past five years to take the organization to the next level. The result of the Symposium discussion will be the bare bones of the new Mental Health Connection strategic plan. Patsy pointed out that changes in the system have included the way people discuss planning now. At one time, it was about planning for each individual agency. Today, the culture has become one in which agencies see the "big picture context." The only thing that limits us is the willingness to do the work. Virginia Hoft added that no one knows better what the community needs than the people working directly with families and consumers. The Symposium will provide a systematic way for direct care providers to have their voices heard.

Pat Cheong announced United Way will hold a Post-Legislative Program on Sept. 19, from 1:30 to 4 p.m. at the Fort Worth Botanic Garden

Carolyn Presnall announced the next meeting on September 12 will feature a legislative update. It will start at 8:30 a.m. at The Women's Center. There will be no November membership meeting. Instead, members are encouraged to attend the Bridging the Gap Symposium on November 7 and 8. Joan Barcellona explained the December meeting will include a holiday brunch and will feature a minister who works in area homeless camps. Mental Health Connection members will be asked to bring toiletries for him to distribute, including toothbrushes, toothpaste, soap and body wash. Melissa Gibbons suggested inviting churches to participate as well, giving them a place to donate items they may collect at that time of year. She offered to contact churches to invite their ministers to the meeting and provide information on the project

Matt Robison announced that the Child Study Center has been awarded a third grant for its autism program. The program was scheduled for cutbacks, but it is now back to operating at 100 percent. The Child Study Center does not maintain a waiting list, instead prioritizing children who are trying to avoid hospitalization. The agency is working on insurance issues. Families must still fill out the application for services; however, within the next six months, families should be able to complete the application online.

Faye Beaulieu announced United Way Northeast will hold its annual Report to the Community on October 5 at the Hurst Conference Center.

Next Meeting

The next meeting will be held Monday, September 12, at 8:30 a.m. at The Women's Center, 1723 Hemphill.

Adjournment

With no further business, the meeting adjourned at 10:10 a.m.