

**COMMUNITY ALLIANCE OF SARASOTA COUNTY**

**SUBSTANCE ABUSE AND MENTAL HEALTH  
STAKEHOLDERS' CONSORTIUM**

**ACUTE CARE SYSTEM TASK FORCE**

**December 19, 2006**

Members Present:

Ken Alexander	Sarasota Memorial Hospital/Bayside Center
Elaine Charyn	First Step of Sarasota
Ron Grognet	American Red Cross
Cheryl LaFlame	Coastal Behavioral Healthcare
Marlene Minzey	First Step of Sarasota
Bryan Pope	The Salvation Army
Brian Ryals	First Step of Sarasota
Bill Tracy	Sarasota County Sheriff's Office
Ann Voorhees	Department of Children and Families
Joe Whitehead	Venice Police Department

Staff Present:

Rik Jimison	Sarasota County Health and Human Services
Pam Meunier	Sarasota County Health and Human Services
James Schulz	Sarasota County Health and Human Services
Chip Taylor	Sarasota County Health and Human Services

**Crisis Intervention Team (CIT) Training Update**

James Schulz advised the group that over 200 officers have been CIT trained to date. There are now enough trained officers on the street to start developing standard operating procedures and data collection tools to support the CIT effort. The CIT Committee meetings held in December, January, and February will focus on the future of CIT in the community. This committee will be considering the development of annual refresher training for officers and creating a CIT newsletter to provide periodic updates to the trained officers. The latest CIT class has been certified by the Florida Department of Law Enforcement (FDLE) and will allow for an incentive bonus to the officers who completed this class. Using the FDLE approved "Memphis Model" for the refresher classes the previously trained officers who elect to participate will also be eligible for the salary incentive. There will be three or four classes scheduled for 2007 (one being the refresher class). The next class is tentatively scheduled for March 19 through March 23, 2007 at the Sarasota County Technical Institute (SCTI), Criminal Justice Academy. If Keiser College can be certified by FDLE the

committee would like to hold the classes there because the surroundings are better suited for this type of learning for law enforcement officers.

James also updated the group on the progress in relocating the Juvenile Assessment Center (JAC). The City of Sarasota, Sarasota Police Department, Sarasota Sheriff's Office, and Coastal Behavioral Healthcare have been working together to resolve this issue. A facility has been located to temporarily house the JAC until the existing facility is remodeled. The program will be there approximately one year while permanent offices are being constructed at the jail.

### **Forensic Mental Health Issues**

Ken Alexander discussed the issue of the lack of forensic beds available for Sarasota clients. Recently, a forensic client from DeSoto County was referred by a judge to the Crisis Stabilization Unit (CSU) at Coastal Behavioral Healthcare. This client's condition required an incredible amount of resources thereby reducing those available to other clients. Ann Voorhees, the Department of Children and Families (DCF), discussed the classification of "itp" (incompetent to proceed). This means that the individual falling under this classification may be able to be restored to health. If after five years in a mental health facility, they are unable to be restored, they will be referred to a more appropriate permanent facility for care. The term "ngi" (not guilty by reason of insanity) falls under a different statute that does not have the five-year timeline.

Marlene Minzey, First Step of Sarasota, asked Ann how many Sarasota residents are in these categories at the present time. Ann said she did not have that information. Pam requested that Ann ask Susan Nunnally for that information for the next meeting. Discussion ensued regarding asking Susan Nunnally to come to the next meeting to discuss this pressing issue in detail.

### **Addictions Receiving Facility (ARF) Update**

Elaine Charyn gave an update on the ARF. They have had 515 admissions from August 1 through November 30, 2006 (228 were involuntary and 287 were voluntary). Of the 228 involuntary admissions, 102 were referred by law enforcement, 94 were from emergency rooms, 30 were *ex parte orders*, and 2 were pick-up orders. The drugs of choice for the involuntary admissions were alcohol (79%), crack (12%), opiates (7%), and methadone (2%). Chip asked for data on how long law enforcement is spending in the ARF for an admission. Lieutenant Bill Tracy, Sarasota Sheriff's Office, estimates 15 to 20 minutes per admission. Marlene said she would provide more detailed data at a later date.

Discussion ensued regarding the status of Baker Act/Marchman Act training being provided to law enforcement. The training has been extremely successful according to Officer Joe Whitehead, Venice Police Department. The major concern arising from the discussion was the lack of services available in the

southern part of the county. All Baker Act/Marchman Act detainees have to be transported to Sarasota and that takes officers off the road for a minimum of two hours.

### **Baker Act/Marchman Act Transportation Update**

Rik Jimison advised the group that they now have 1,500 cards printed and available for distribution to law enforcement officers. He offered to provide the training to any agency that wished to schedule one.

Discussion ensued regarding making CIT training part of the law enforcement academy so all officers are trained before going on the streets. Pam indicated that there has been discussion about that with Captain Matosky.

Rik informed the task force that the cards for distribution to emergency rooms are being developed. He estimates that it will be the end of February before these cards will be available to emergency rooms. There is a priority to get this information to Venice Hospital. There have been several situations where glitches in information sharing have occurred and the appropriate paperwork has not been completed. It was requested that Ambitrans check when they transport a Marchman Act that both pages of the paperwork are complete. Rik advised that they are not supposed to be transporting without seeing the proper paperwork (Ambitrans staff were not present at this meeting). Several have slipped through causing significant problems at the other end.

Pam reminded everyone of the meeting that immediately follows this task force each month to discuss these very issues.

### **Data Collection Update**

Ken updated the group about a meeting that was held with County Information Technology (IT) to discuss the data that a work group of this task force determined would be useful if collected, shared, and analyzed across the acute care system. A concept document was submitted by IT from that meeting and will be reviewed by Bill Little and Chip Taylor to receive approval to commit the resources to the project. It was suggested that Ambitrans data should be included in this effort. Another meeting will be held with IT and the work group to discuss the exact method of gathering the data and the various reports that will be generated. At the present time IT is considering a web-based program for storing and managing the data. The Human Services Department will manage the data that will be submitted by each acute care provider on a monthly basis.

### **Next Meeting**

The next meeting of the Acute Care System Task Force will be January 16, 2007 at 9:00 a.m. at the Sarasota County Health Department, 2200 Ringling Blvd., Room 226.

All summaries of Community Alliance meetings and its committees (including the Acute Care System Task Force) can be found at [www.sarasotaalliance.net](http://www.sarasotaalliance.net)