

JOINT MEETING

Substance Abuse and Mental Health Stakeholders' Consortium and Criminal Justice Commission

Friday, February 4, 2005

Present:

Claire Alexander, Sarasota County Health and Human Services
Ken Alexander, Sarasota Memorial Hospital
Mary Beaunoir, Mental Health Community Centers
Dave Beesley, First Step of Sarasota
Denise Bellagumba, Sarasota County Sheriff's Office
Judge Robert Bennett, Jr., Twelfth Circuit Court
Elmer Berkel, Human Services Advisory Council
Mary Berkebile, Sarasota County Public Works
Chrissie Budd, Sarasota County Coalition for the Homeless
Rose Chapman, Jewish Family and Children's Services
Elaine Charyn, Department of Children and Families—Suncoast Region
Kevin Chinault, Mental Health Community Centers
Dr. Richard Coccaro, NAACP
Catherine Clouse, SCOPE
Nancy DeLoach, Sarasota County Health and Human Services
Judge Nancy Donnellan, Twelfth Circuit Court
Capt. Stan Duncan, Sarasota Police Department
Scott Eller, Renaissance Manor
Catherine Emmett, Senior Friendship Centers
Kevin Gooding, Sarasota County Sheriff's Office
Sally Graham, SCOPE Mental Health Implementation Task Force
Tobey Hockett, Public Defender's Office
Bill Little, Sarasota County Health and Human Services
Judge Bob McDonald, Twelfth Circuit Court
Janice Mee, Human Services Advisory Council
Elliott Metcalfe, Public Defender
Pam Meunier, Sarasota County Health and Human Services
Don Ottinger, SCOPE Mental Health Implementation Task Force
Lisa Phillips, SCOSA
Bob Piper, First Step of Sarasota
Bryan Pope, Salvation Army
Colleen Reardon, Salvation Army
Rev. Skip Ritter, Sarasota County Sheriff's Office
Mike Saewitz, *Sarasota Herald-Tribune*
Gary Schroeder, Sarasota County Financial Planning

James Schulz, Sarasota County Health and Human Services
Walt Smith, Court Administrator
Debbie Spellman, Department of Children and Families—Suncoast Region
Beverly Stockton, Suncoast Workforce Board
Paul Sutton, Sarasota Police Department
John Swencki, First Step of Sarasota
Chip Taylor, Sarasota County Health and Human Services
Jerry Thompson, Coastal Behavioral Healthcare
Davis Tornabene, Public Defender's Office
Pauline Tracy, Sarasota County Health and Human Services

Welcome and Introductions

Judge Robert Bennett, Jr. welcomed everyone and introductions were made.

Mental Health Policy Coordinator Position

Pauline Tracy distributed a job description for the Mental Health Coordinator position that will staff the Substance Abuse and Mental Health Stakeholders' Consortium and announced the position would be posted on the state hiring website (Myflorida.com) within the week.

Overview of Joint Work Group Recommendations

Chip Taylor gave an overview of the joint work group recommendations, which is in three phases:

1. Divert Marchman Act patients to a secure adult addictions receiving facility instead of jail. First Step of Sarasota has space available to expand capacity by 15 beds in addition to its 15 existing detoxification beds. Funding of \$1.2 million would be required for the first year, with \$1 million in annual operating costs during the following years.
2. Expand the Salvation Army's existing 60-day "VIP" residential treatment program from 15 to 45 beds and increase the substance abuse treatment overlay provided by First Step of Sarasota from the current 10 hours/week to 20 or more hours/week.
3. Develop additional transitional housing for those persons graduating from the expanded VIP program. Recommendations are being developed on the best use of \$1.2 million in federal Community Development Block Grant (CDBG) and state SHIP funds that are available through the Office of Housing and Community Development.

Secure Adult Addictions Receiving Facility

Dave Beesley presented First Step of Sarasota's proposal to convert its existing 15-bed Detoxification Unit to a secure 30-bed Marchman Act receiving facility. The proposal is summarized below:

Current services

- 15 beds
- Non-secure (voluntary participation)
- The Detoxification program is designed to provide clients with a safe, medically-supervised withdrawal from the effects of alcohol or other drugs.
- Length of stay ranges from 3-10 days.
- Clients are admitted regardless of their ability to pay, 24 hours a day.
- The goal of the program is to save lives and to motivate clients to seek further treatment.
- All clients are screened by a medical doctor and supervised 24 hours per day by licensed nurses.
- Services include clinical assessment, motivational services and referrals for treatment, educational information on substance abuse, and other group counseling.
- The target population served is adults who are under the influence of alcohol or other substances and need a medically-supervised withdrawal.

Problem Statement

- Individuals with substance abuse and/or co-occurring disorders requiring treatment are being arrested or detained under the Marchman Act, taken to the jail, and are subsequently released without receiving appropriate clinical interventions, creating a "revolving door" population.
- Diverts Resources

Stats

- Current Beds = 15
- Number Served = 1110
- Proposed Beds = 30
- Projected Number Served = 1960

Solution: Expand Detoxification Capacity (Phase 1)

- Expand unit to 30 beds and convert to a secure addictions receiving facility
- Entire unit becomes locked
- Beds are interchangeable and can be utilized as a non-secure detoxification bed or a secure Marchman Act bed
- Only tangible difference is the civil rights of the individuals within the unit

Adult Addictions Receiving Facility Program Overview

- An Adult Addictions Receiving Facility (AARF) is a secure inpatient facility with medically and clinically integrated protocols designed to provide acute care services for clients with current and significant substance impairment and/or co-occurring psychiatric disorders.
- The program will be licensed through the Department of Children and Families.
- The AARF will be a 30-bed co-ed facility equipped and staffed to provide safe detoxification, bio-psychosocial assessment, motivational enhancement and recommendations for further care based on the individual's needs and preferences.
- Treatment interventions and services are provided by a team of interdisciplinary professionals including psychiatrists, qualified professionals, counselors, nurses and direct care staff.

Services will include

- Medical/ Mental Health Screening
- Nursing Health Assessment
- Physicians Examination and Medical Monitoring
- Medication Management
- HIV Education
- TB Screening and Testing
- Pregnancy Tests
- Urine Drug Test
- Medical Withdrawal Protocols
- Bio-Psychosocial Assessment
- Therapeutic Group Curriculum
- 12 Step Support Groups
- Recreational Activities
- Psycho-educational Groups
- Case Management Services
- Psychiatric Consultation
- Interdisciplinary Case Staffing
- Individual Discharge/Transitional Planning
- Court Liaison Services

Renovation of Existing Facility

- Convert existing 2,642 square feet to accommodate secure unit
- Construction Cost: \$237,000
- Architect/Engineering Fees: \$23,700
- Total Project Cost: \$260,700 (Estimate based on \$90/square foot cost)

Residential Treatment

Bob Piper reported on the resources that will be needed beyond Phase 1.

Post Detoxification Service Continuum

Some members of the described target population will not respond favorably to any intervention/treatment setting. An ideal continuum of care would include the following:

- Case management services similar to those provided to people with severe and persistent mental illness. A modified “FACT” team concept could be adapted to deliver recovery services to the client.
- A treatment continuum consisting of the following:
 - Outpatient Counseling
 - Intensive Outpatient Counseling (multi-night per week programming in a treatment community concept)
 - Intensive Residential (28-day model, or VIP type overlay program)
 - Extended Stay Residential (6 to 12 months in length)
 - Long-term Therapeutic Communities (12 plus months)
- Housing services including short-term transitional housing (half way houses etc.); long-term supportive housing (domiciliary, faith-based initiatives); and, permanent, affordable sober housing.

Transitional Housing

Dave Beesley described the Salvation Army’s VIP residential treatment program which is a 10-week curriculum operated by a licensed substance abuse counselor. The VIP program, which has been in operation since 1995, is a collaboration between the Salvation Army and First Step of Sarasota. The program’s focus is on the homeless population, with referrals received primarily through First Step’s detoxification program. After the client goes through the detoxification program, part of their treatment plan is to participate in the VIP program. Currently, 15 beds are dedicated to this program at the Salvation Army, with counseling provided in the facility by a counselor from First Step. The curriculum works on behavior, attitude, anger management, goal setting and recovery. This program would be a cost-effective way to expand the residential treatment services provided in Sarasota County.

Bryan Pope stated that the Salvation Army has the capacity in their facility to expand the VIP program from 15 to 45 beds in a very short timeframe. The program would be co-ed as well, with males and females segregated in the same manner as the current VIP program. There has not been a problem with the co-ed aspect of the program in the past.

Stakeholders’ Consortium Actions:

Jerry Thompson moved and Scott Eller seconded, motion passed unanimously, for the Substance Abuse and Mental Health Stakeholders' Consortium to support First Step of Sarasota's proposal to convert the existing 15-bed detoxification unit to a 30-bed Marchman Act Receiving facility.

Scott Eller moved and Lisa Phillips seconded, motion passed unanimously, for the Substance and Mental Health Stakeholders' Consortium to support the expansion of the Salvation Army's VIP residential treatment program from 15 to 45 beds and increase treatment time to more than 10 hours.

Lt. Paul Sutton moved and Tobey Hockett seconded, motion passed unanimously, for the Substance and Mental Health Stakeholders' Consortium to support the development of expanded transitional housing for persons exiting the VIP program.

Criminal Justice Commission Actions:

Elliott Metcalfe moved and Walt Smith seconded, motion passed unanimously, for the Criminal Justice Commission to support First Step of Sarasota's proposal to convert the existing 15-bed detoxification unit to a 30-bed Marchman Act Receiving facility.

Elliott Metcalf moved and Kevin Gooding seconded, motion passed unanimously, for the Criminal Justice Commission to support the expansion of the Salvation Army's VIP residential treatment program from 15 to 45 beds and increase treatment time to more than 10 hours.

Tobey Hockett moved and Walt Smith seconded, motion passed unanimously, for the Criminal Justice Commission to support the development of expanded transitional housing for persons exiting the VIP program.

It was agreed that representatives from First Step of Sarasota, The Salvation Army, the Suncoast Workforce Board, Coastal Behavioral Healthcare and Jewish Family and Children's Services would meet to further develop the design of the program for Phase 2 and develop a budget. This group will report back at the next meeting.