

**Substance Abuse and Mental Health Stakeholders' Consortium and Acute  
Care System Monthly Report  
September 21, 2007**

Acute Care System Task Force (ACSTF)

- The last meeting was September 18.
- Sarasota Memorial reported a change in the Special Emergency Care Unit (SECU). This unit will now be staffed with ER nurses instead of psychiatric nurses.
  - The Addictions Receiving Facility (ARF) reported that there have been some issues with this transition, from their perspective.
- The ARF reported that the ERs are not completing the Marchman ACT paperwork correctly or completely. The ARF admissions staff have been instructed not to accept transfers with incomplete paperwork. The ARF will continue to educate the ERs.
- Ambitrans is now breaking out Marchman Act data from Baker Act data for a clearer picture of the utilization of this County funded transportation service.
- The Crisis Stabilization Unit (CSU) reported that they have changed their screening documents and procedures to be more efficient and to partially address the wait time.
- Doctors Hospital, Englewood Community Hospital, and Venice Regional Medical Center were not in attendance.
- Susan Nunnally, DCF, reported that she has met with the ER Directors and the CSU over the last several weeks to find solutions for the timeliness of transfers.
  - Medical exclusionary criteria are being reviewed.
  - An electronic system is being explored that will cut down on wait time.
  - This system would be available to law enforcement.
- There was continued discussion about whether there is duplication/overlap with the DCF meetings. Susan explained that the meetings she is now conducting are to deal with specifics and details that would not be appropriate for this forum.
- There was continued agreement that this task force cannot be effective unless ALL acute care providers get involved and stay involved in the conversation and solutions.
  - There was a suggestion and all agreed that a letter needs to be sent to all of the hospital CEOs encouraging them to make it possible for their ER Directors to attend this very important meeting.
    - The group agreed that the letter should come from Bill Little, as the Chair of the Consortium.
- The group agreed to continue to meet every other month.
- The next meeting is scheduled for November 13 at 9:00 a.m.

## Community Alternative Residential Treatment (CART) Initiative

- Phase 1- The Addictions Receiving Facility (ARF)
  - Admissions
    - As of August 31 there were 1,929 admissions.
    - 889 involuntary - 46% and 1,040 voluntary - 54%
    - 334 (37%) involuntary admissions resulted from Protective Custody Orders initiated by local law enforcement officers.
      - 201 were initiated by SPD
      - 95 were initiated by SSO
      - 30 were initiated by VPD
      - 7 were initiated by NPD
      - 1 New College Police Dept.
    - 416 (47%) involuntary admissions resulted from emergency admissions initiated by local ER physicians (SMH, Venice Hosp., Doctors Hosp.).
    - 114 (13%) involuntary admissions resulted from *ex parte* orders (court orders) for involuntary assessment and stabilization.
    - 25 (3%) involuntary admissions resulted from a “pick up order.”
    - **The average wait time for law enforcement officers at the ARF was 5 minutes in August.**
  - Discharges
    - The average length of stay for participants was 4 days, in August.
    - 98% of involuntary participants admitted to the ARF have successfully completed medically-supervised detoxification to date.
    - 83 (9%) of involuntary participants discharged from the ARF were referred to the VIP-ER Program.
    - 468 (53%) involuntary participants discharged from the ARF were referred to outpatient treatment programs in the community.
    - Other referrals were made to halfway houses, shelters, homes/families.
    - Alcohol is the drug of choice for most ARF admissions (79%).
    - Prior to the ARF opening on August 1, 2006 an average of 70 Marchman Acts were brought to the jail monthly. The monthly average now is 13- mostly due to combativeness.
- Phase 2- 10-week Residential Treatment (VIP-ER Program)
  - 19 classes have graduated to date with a 76% completion rate.
  - Class 20 will graduate October 5 at The Salvation Army at 7:00 p.m. and the community is encouraged to attend and show support.
  - 100% of participants needing psychiatric services are receiving assessments and medications when necessary.

- 54% of participants are receiving co-occurring psychiatric services.
- 96% of participants referred for primary care services received a comprehensive physical exam.
- 87% of participants are receiving family reunification services.
- 47% of participants have been reunited with their families before graduation.
- 100% of participants received job counseling and job referrals.
- 100% of participants are involved in vocational activities (jobs, supported employment, job training, or education) at discharge.
- 25 participants have graduated to date that were referred to the VIP-ER Program from the ARF.
- Program clients average 40 years of age, with the youngest client being 18 and the oldest being 62 at time of admission.
- Only 36% report having a high school diploma or GED, 5% have attended a vocational school, and 9% have a post-high school degree.
- Over 90% of the clients report that they are homeless at the time of admission.
- 78% of clients report that they are “unemployed” at the time of admission.
- The most commonly reported “primary” substances used were alcohol (49%), cocaine/crack (38%), heroin (4%) and marijuana/hash (3%).
- For clients who successfully completed the program and who could be located at the time of 3-month follow-up, 59% indicated that they were still sober; at 6-month follow-up, 52%; and at the 12-month follow-up, 45%. These are remarkable results—the national average for sobriety at 12 months out is only 10%.
- 48% have been arrested and convicted in Sarasota County prior to program admission.
- 35% of VIP-ER clients were arrested and convicted in Sarasota County within 2 years of entering the program and 24% were arrested and convicted in Sarasota County within 1 year of entering the program.
- 19% of VIP-ER program graduates were arrested and convicted in Sarasota County within the one-year follow-up period.
- Phase 3- Transitional Housing
  - A Transitional Housing contract was executed with Transitional Resources, Inc. (TRI) in June for the remainder of FY 2006/2007 (4 months) to fund start-up costs and a management fee to include a vacancy allotment for one 6-bed sober house (pilot).
  - The budget cuts that were anticipated will not affect this program as originally expected—the BCC has given the go ahead for opening up more sober houses as needed.

- VIP-ER Program graduates, Mental Health and Drug Court participants, and certain persons released from jail with a commitment to recovery will be eligible for referral.
- To date, TRI has not been able to obtain rental housing to start transitional housing in Sarasota County (see the flyer that was distributed).
- Negotiations are underway with Habitat for Humanity to possibly collaborate with TRI and the County.

#### Crisis Intervention Team (CIT) Training Committee

- The most recent CIT Class (#9) graduated 28, July 20, at the Criminal Justice Academy at SCTI.
  - To date, 245 law enforcement officers, call staff, school resource officers, Department of Corrections (probation and parole) staff, and corrections staff have completed CIT Training.
- The final 2007 class, October 15-19, will be an advanced/refresher course for officers who were trained before the salary incentive was approved.
- 2 classes are planned for 2008.
- A CIT brochure and newsletter have been developed by the CIT Committee and are now being distributed.
- Members from the CIT Committee have started attending the quarterly Florida CIT Coalition meetings held in Orlando.
  - This group is exploring data collection and measuring outcomes
  - Most areas in Florida are struggling with implementing CIT as is Sarasota.
- Pam Meunier attended the National CIT Conference August 28-30 in Memphis.
  - Pam will be sharing the information from this conference with the CIT Committee at their next meeting, September 24, 2007 at 3:30 at the Health Department, Room 227.
- The next CIT Committee meeting is scheduled for Monday, September 24 at 3:30 at the Health Department in Room 227

#### Partnership for Children's Mental Health

See the separate report at the end of this document.

#### Substance Abuse and Mental Health Stakeholders' Consortium Meeting

- The last meeting was August 17.
  - The Community Alliance Mental Health/Substance Abuse Strategic Planning Workgroup being led by Dave Beesley and Carolyn Eagen (Alliance members) which includes several members of the Consortium, NAMI, DCF, and consumers met May 31, June 18, July 11, August 20, and September 17.
  - See the meeting summary that was distributed.

- There was discussion about the Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant. There is \$4 million allocated - \$3,850,000 for matching grants with counties, \$30,000 for the Substance Abuse and Mental Health Corporation to administer the grant process and \$120,000 to the Florida Mental Health Institute to start a technical assistance center.
  - The purpose would be for planning, implementation, and expansion of initiatives that will increase public safety, avert increased spending on criminal and juvenile justice, and improve the accessibility and effectiveness of treatment service for adults and juveniles. Services should be made available to adults and juveniles who have a mental illness, substance abuse disorder, or co-occurring disorder and who are in or at risk of entering the criminal justice system.
  - Two types of grants will be supported:
    - One-year planning grants with a maximum grant award of \$100,000 with funds being used to support the development, creation, and submission of a strategic plan that will initiate systematic change.
    - Three-year implementation/expansion grants with a maximum award of \$1,000,000 that would be used to implement and/or expand the strategic plan which should include public-private partnership models and the application of evidence based and/or best practices.
  - The expectation is that these grants will demonstrate that investment in diversion strategies and in treatment efforts will result in a reduced demand on the criminal justice and health and human services systems.
  - The RFA was released August 21
  - Applications are due November 1
  - The County is considering submitting an application
- The next Consortium meeting is scheduled for September 21

*The next meeting of the **Community Alliance Mental Health/Substance Abuse Strategic Planning Workgroup** is scheduled for Friday, October 5 at 1:30 at the Health Dept, Room 1127.*

*The next meeting of the **Acute Care System Task Force** is scheduled for Tuesday, November 13 at 9:00 at the Health Dept, Room 226.*

*The next meeting of the **Substance Abuse and Mental Health Stakeholders' Consortium** is scheduled for Friday, October 19 at 9:00 at the Health Dept, Room 226.*

**Videoconferencing will be available for participants in the southern part of the County at the Venice Health Dept., 7810 Tamiami Tr., in the Healthy Start suite. Please note that this is a change in room location.**