

## COMMUNITY ALLIANCE OF SARASOTA COUNTY

*“Partnering Assets Together for Human Services”*

*Sarasota School Board chambers, 1980 Landings Blvd.*

### MEETING SUMMARY

September 19, 2005

#### STEERING COMMITTEE MEMBERS PRESENT:

Karen Bogues	Community Youth Development
P.J. Brooks	Manasota Safe Children Coalition Advisory Council
Rose Chapman	Jewish Federation of Sarasota and Manatee Counties
Lynore Dickinson	Loveland Center
Ginny Donovan	Department of Juvenile Justice
Kay Glasser	Community Planning
Stanley Godleski	Seniors Advisory Council
Eric Jahn	Suncoast Partnership to End Homelessness (SPEH) (for Mike Schneiderman)
Janet Kahn	Early Learning Coalition of Sarasota County
Frank Kovach	School Board of Sarasota County
Kim Kutch	Department of Children and Families – SunCoast Region
Curtis Lavarello	Sarasota Coalition on Substance Abuse (SCOSA)
Renee McQueen	Vocational Interagency Council
Janice Mee	SCOPE
Elliott Metcalfe	Public Defender - Twelfth Judicial Circuit
Scott Moore	Economic Development Corporation of Sarasota County
William Newell	Salvation Army--Sarasota Corps (for Bert Tanner)
Tom Pfaff	Sarasota United for Responsibility and Equity (SURE)
Bob Piper	First Step of Sarasota (for Dave Beesley)
Sherri Reynolds	Juvenile Justice Council
Daniel Schmelzinger	Office of Housing and Community Development
Stewart Stearns	Community Foundation of Sarasota County
Dennis Stover	Senior Friendship Centers (for Bob Carter)
Jerry Thompson	Coastal Behavioral Healthcare (for Christine Cauffield)
Jessica Ventimiglia	Mental Health Community Centers
Tammy Zappa	National Alliance for the Mentally Ill

**STEERING COMMITTEE MEMBERS NOT PRESENT:**

Ken Alexander	Sarasota Memorial Hospital
Steve Brett	United Way of South Sarasota County
Vanessa Carusone	City of North Port
Tony Cornish, Jr.	NAACP
Kirstin Fulkerson	Gulf Coast Community Foundation of Venice
Eva Goodwin	STAR
Nancy Hanshaw	Twelfth Judicial Circuit Court
Peter Howard	Florida Center for Child and Family Development
Sarah Gorman	Healthy Start Coalition of Sarasota County
Bill Little	Sarasota County Health Department
Capt. Richard Montemagno	Sarasota County Sheriff's Office
Jim Myers	City of Venice
Steve Queior	Sarasota Chamber of Commerce
Nancy Shoemaker	Diocese of Venice
Shannon Staub	Sarasota Board of County Commissioners
Beverly Stockton	SunCoast Workforce Development Board
Alberto Suarez	Manasota 2-1-1
Alex Young	United Way of Sarasota County

**OTHERS PRESENT:**

Leslie Clark	Community Health Improvement Partnership (CHIP)/Sarasota County Health Department
Rena Hunkeler	Department of Juvenile Justice
Gee Dee Kerr	FIND – SW Regional Director

**STAFF PRESENT:**

Kathleen Marie Hall	Sarasota County Health and Human Services
James Schulz	Sarasota County Health and Human Services
Chip Taylor	Sarasota County Health and Human Services
Pauline Tracy	Sarasota County Health and Human Services

The Community Alliance of Sarasota County met on September 19, 2005 at the Sarasota School Board chambers, 1980 Landings Blvd. at 1:30 p.m.

Chair Stewart Stearns welcomed the members of the Steering Committee and guests and introductions were made.

**COMMITTEE AND WORK GROUP UPDATES**

**Medicaid Reform and Changes to Medicaid/Medicare**

Chip Taylor reported that in the last legislative session a bill was passed authorizing the Governor of Florida to submit to the Federal government a Medicaid Reform Waiver

request. One of the key provisions in this bill was that before the waiver request could be submitted to the federal Centers for Medicare and Medicaid Services (CMS), it must be posted for public review and comments for a 30-day period. The Medical Reform Waiver is available for review and comment until the end of September at [http://ahca.myflorida.com/Medicaid/medicaid\\_reform/index.shtml](http://ahca.myflorida.com/Medicaid/medicaid_reform/index.shtml).

Chip noted several handouts in member's packets with information on the Medicaid Reform:

- Press release from the Governor's office describing the posting of the plan. The plan is on [myflorida.com](http://myflorida.com) and very easy to get to. The pilot programs for Broward and Duval counties will begin in the spring of 2006, with the potential to expand throughout the rest of the state two years following that if the pilots are successful. Sarasota County will not be affected by this plan for at least a couple of years.
- Reaction articles: *Medicaid reform plan faces a snag* and *Conflict could delay Medicaid changes*. Tom Arnold, the Deputy Secretary for the Agency for Health Care Administration (AHCA), has stated that the issues outlined in these two documents are very real. The issues at hand in these articles are as follows:
  - The state is in agreement with the plan except for the hospitals' Upper Payment Limits provision, because of the large number of uninsured people that the hospitals provide services to and the concern that under the Medicaid Reform they will not be able to provide the same services.
  - The mechanism in getting the Medicaid money to the hospitals is called the Disproportionate Share Program and is what they call the Upper Payment Limit. The Federal government wants to cap the Upper Payment Limit as part of the waiver, which would only give the hospitals a set amount of funding even though the number of uninsured people that they would see would most likely increase. Hospitals such as Sarasota Memorial, Tampa General, and Jackson Memorial could end up subsidizing more indigent medical bills due to Medicaid reform.
  - The state has explained to the Federal government that they need to increase the Upper Payment Limits over the course of the waiver; otherwise the hospitals will struggle to survive. The Federal government, however, is trying to limit Medicaid spending and, in fact, roll it back.
  - Michael Leavitt, Secretary of Health and Human Services, announced a plan to roll Medicaid back \$50 billion over the next 5 years and the vote by Congress is scheduled for next week.
  - The Federal government's fear is that since Florida will be the model state for Medicaid Reform, if they allow the Upper Payment Limit movement, every other state will want to do the same and then they won't be able to accomplish their national agenda of controlling Medicaid costs.

As it stands right now, the state is at a standstill. Governor Bush has been to Washington twice to personally argue the case with CMS and has been turned down both times. The idea of posting the plan for the 30-day period was in hopes that people would review it, support it and make a stand with the Federal government. What the state might do is delay sending it to Washington until the issue is resolved.

## **Legislative Advocacy Committee**

Elliott Metcalfe reported that he has received an e-mail from Bill Broughton, Intergovernmental Relations Coordinator for Sarasota County, in reference to preparing the county's legislative agenda for the next session. The critical dates that were attached to this agenda are as follows:

- October 7 – Deadline for proposals to be sent to Bill Broughton.
- October 26 – Final review and approval of legislative priorities by the Board of County Commissioners.
- November 3 – Sarasota County's 2006 Legislative Proposals presented to the Legislative Delegation at their meeting in the Sarasota County Commission Chambers.

Elliott asked that anyone who has legislative proposals to please forward them to him by e-mail at [emtc@verizon.net](mailto:emtc@verizon.net) within the next two weeks. Elliott mentioned that the Legislative Advocacy Committee will meet prior to the October 17 Steering Committee meeting to discuss the list of suggested legislative priorities. Elliott stated that there will be three types of proposals as follows:

- Appropriation Issue or New Budget Issue - requesting money for a project.
- Legislative Initiative Issue - requesting a bill or amendment(s) to a statute.
- Policy or Program Issue - requesting support or opposition for a bill or amendment which is or may be proposed by another entity during the 2006 legislative session.

Chip Taylor mentioned that the Community Alliance will take the county's legislative priorities form and modify it according to the specific issues of the Community Alliance and then parallel them with the county at the November 3 meeting with the legislative delegation. Prior to October 26 the Community Alliance should advise the County of its issues and ask for consideration when the County considers its issues.

It was mentioned that the Legislative Advocacy Committee may want to discuss the Community Alliance making a statement of support for the Tobacco Prevention Initiative for our youth.

## **Health Coverage for Uninsured Children Subcommittee (HCUC)**

Janet Kahn reported that their community forum, *Community Solutions to the Challenge of the Uninsured*, will be on November 10 from 8:00 a.m. to 1:00 p.m. This will include a working lunch with small group discussions. Invitations will be sent out this week to all Community Alliance Steering Committee members along with 125 others. There will be four speakers who will present their model for responding to the issue of the uninsured in their communities and possible solutions for this ongoing issue. Dr. Duncan Finley has agreed to be the moderator for this event.

Leslie Clark stated the USF Center for Research on Healthcare Systems and Policies has agreed to support this forum. They are hoping that the Chamber of Commerce will also agree to support this event as well.

## **Substance Abuse and Mental Health Stakeholders' Consortium (SAMHSC)**

Bob Piper reported that the Community Alternatives Residential Treatment (CART) Initiative has been launched:

- Phase I will be located at First Step's Detox Facility on 18<sup>th</sup> Street and will be a 30-bed secure Marchman Act facility. The facility will open sometime in January, 2006.
- Phase II is a 45-bed, 10-week residential treatment program located at the Salvation Army on 10<sup>th</sup> Street. This program is scheduled to open on October 1.
- Phase III will create sober affordable housing for the individuals leaving the above programs in Phases I and II.

This CART Initiative will provide a variety of social services to a population that has historically fallen through the cracks, homeless persons with substance abuse issues and/or co-occurring mental health issues. The VIP program will be operated by a coalition of five agencies who are partnering together:

- The Salvation Army is providing the facility on 10<sup>th</sup> Street at the Center for Hope.
- First Step is providing a day treatment model of 10-weeks addiction program by Certified Addiction Professionals (CAP).
- Jewish Family and Children's Services will provide family counseling and therapy for people who have a chance for reunification with their families.
- Coastal Behavioral Healthcare will provide psychiatric services and/or medication for those who have a co-occurring disorder.
- JOBS, Etc. will provide job training, acquisition and maintenance skills for this population.

Bob stated that last year there were 800 people placed into the county jail under the Marchman Act. Over 600 were brought in by city police officers. Once the secure Marchman Act facility is completed, the only people that will need to be placed into the jail under the Marchman Act will be those who are behaviorally out of control, even in a lockdown facility. After the first year of operation, Florida Mental Health Institute will come in and evaluate the project. This will give the partners data to bring to the Community Alliance as well as a plan for improvements. Sarasota County will be the first community in the State of Florida to provide this type of partnership and project.

## **Community Disaster Preparedness Committee (CDPC)**

Pauline Tracy reported that the main focus for their committee at this time is on the Internally Displaced Persons (IDP) who are in our area from Hurricane Katrina. Several agencies have been assisting these individuals but no one had taken on the role of case managing the families and it was becoming a problem. Sarasota County Human Services stepped up to the plate and within 24 hours pulled together a One-Stop Center for the IDPs at the Health and Human Services Business Center (HHSBC), operated by county staff, volunteers from Friendship Volunteer Center and the Medical Reserve Corps. So far the One-Stop Center has received the following information:

- Red Cross has served 170 families with an average of 3 persons per household. Some of these families have already moved on, but most are still in Sarasota County.
- 2-1-1 has logged in 60 calls into their HSIS system.
- There are several churches who have offered to adopt a family.

A press release will be going out to announce the One-Stop Center to the community. The hours of operation will be from 9 – 5 at the health department, 2<sup>nd</sup> floor auditorium. 2-1-1 will still take calls and make referrals, but involved cases will be forwarded to the One-Stop Center.

Tom Pfaff asked if a church had a family that needed a case manager, which phone number would they call? Pauline stated that they could call 2-1-1 or the One-Stop Center at 861-2955.

A question was asked regarding whether families have to go to Red Cross or FEMA before coming to the One-Stop Center at the Health Department. Pauline stated that they could come directly to the One-Stop Center, but one of the first questions they will be asked is whether they have registered with either of those two agencies. Red Cross is hoping to have a liaison available at the center soon. Jobs, Etc. has sent a representative to the center to assist the families.

Housing for IDPs beyond the emergency housing provided by the Red Cross will be an ongoing concern. The Volunteer Task Force will meet on September 21 to discuss this issue.

Chip Taylor mentioned that what they are doing at the One-Stop Center is essentially the same as what they did for the model, *Stay-n-Play*. The difference is that with Stay-n-Play, the FEMA travel trailers were all parked on the lots in the same location. FEMA would not share who was there or what their needs were, so representatives had to go door-to-door to find out how they could assist them. With the Katrina IDPs, we know there are many people in Sarasota County, but they are dispersed all over the county. There is no way of knowing where they are, how many there are, if they are getting any services or what their needs are at this time. The school system has reported that there are 58 children enrolled, but we are not sure if those are children whose families are getting housing vouchers from Red Cross or if they are getting services from the health department. So by taking advantage of the HSIS system, the One-Stop Center will be able to case manage and determine how many people are in the school system, how many people have been assisted and what services they have received thus far. There are families that literally have nothing to go back to in Mississippi or New Orleans and are frustrated because they are looking for work and housing to move on in their lives. By having all the core services together in one place, it will make life much easier for these people and will assist the county in keeping track of them.

Chip stated that if someone calls for assistance the procedure should be as follows:

- Ask them to call 2-1-1 and they will do a screening.
  - If it is a single specific need, 2-1-1 will get them where they need to go and will generate the IDP's information into the HSIS system.

- If it is a multiple need, 2-1-1 will take the information, input it into the HSIS system, and refer them directly to the Health Department's center.
- The agencies that are already serving IDPs have been asked to input the information into the HSIS system.
- The school system created a letter that is going out to the 58 families who currently have children enrolled. This letter will welcome them to Sarasota, thank them for enrolling their children, and inform them that if they have any other needs to go to the health department's One-Stop Center for assistance.

Sherri Reynolds mentioned that through the case management contract with the YMCA, they are providing clothing to the children.

### **Planning and Outcomes Work Group (POWG)**

Chip Taylor reported that the Planning and Outcomes Work Group has been meeting over the last few months reviewing the CTC survey data and placing it in a user friendly format. In December 2002 and again in December 2004, a survey was conducted of 9<sup>th</sup> and 11<sup>th</sup> grade high school students which identified their usage of drugs, alcohol, violent behaviors, and how they felt about their community, parents and schools support. In 2003, the same survey targeted 6<sup>th</sup> and 8<sup>th</sup> graders in the middle schools and it is planned to have the middle school students surveyed again in November or December 2005. This will give data for two points in time for the middle school students.

The statistics show that there were modest changes in some areas of the high school youth, that there are areas where the change is outside the possibility of statistical error with some progress being made and that the high school youth are more involved in the various categories than are the middle school age youth.

Chip commented on the Protective and Risk Factors report. He stated that it showed what factors protect a youth or put them at risk. In other words, a youth who is supported and surrounded by protective factors would have the ability to cope and withstand the risk factors such as the seduction of drugs or alcohol.

Protective factors would be things such as strong nurturing families, a sense of discipline that is instilled by the school system or reinforced by the parents or vice-versa, community attitudes that are intolerant of violent behavior, and other factors that support and assist a youth to stay on the straight and narrow.

Risk factors would be things such as a family, school or community that does not care, a youth that does not value to do the right thing, moving around a lot, associating with the kids that use drugs, and being around youths that carry weapons or engage in social behavior.

These two reports show data from three surveys over three years in time where the Sarasota County youths are compared to the National average. The national norm is always set at 50. Therefore, for protective factors the numbers should be above 50 and for risk factors the numbers should be below 50.

The Protective Factor Scale report shows areas where the youths are doing better by at least one standard deviation, where they are predominantly well protected, where the older youth protective factors are dropping away, and where the youth are making progress even though they are not a standard deviation above the national average.

The Risk Factor Scale report shows the same patterns where in the younger age groups the youth are doing fairly well but then in the other age groups it indicates that the risk factors are beginning to come into play.

Once there is another year of data on the middle school students the group should be ready to set some targets in those areas.

This information is very complicated and hard to interpret and the work group should be commended for their efforts on making sense of this information. The intent is to take this information to the Board of County Commissioners and explain it to them in detail and then seek a joint meeting with the school board and the county commission to move on the areas that would be within the purview of the school system or the county. If this data just sits on a shelf, the group would not be doing anything but enriching the folks that do the survey. This report gives the work group the statistics about our youth, both positive and negative.

Some of the comments during the discussion of these reports were as follows:

- Even though there has not been a great decrease in substance abuse, this does not mean that the county has not made progress. If you look at the general numbers in Sarasota County, they continue to rise in the adult population whereas they do not continue to rise at the same level in the youth population.
- Many youth drop out of school after the 9<sup>th</sup> grade and therefore they are not included in subsequent surveys.
- The Juvenile Justice Council is in the process of gathering data in their Planning and Prevention Committee to determine how they can make decisions beyond the scope of looking at the expulsion rates, drug related expulsions (which are at a consistent rate of 300 per year), and other areas. Once their three-year plan is updated they will report back to the Community Alliance.
- The mentoring initiative was discussed as a valuable asset in trying to improve our performance in a positive youth development area.
- The community has a culture of having alcohol served at almost every social and fundraising event. This sends out mixed messages to our youth that it is okay for them to drink. This issue needs to be addressed at a future forum.
- A suggestion was made that perhaps there should be a national youth anti-alcohol campaign similar to the anti-tobacco campaign.
- The accuracy of this report was discussed. Although students say that there are a lot of kids that intentionally answer questions incorrectly on the test, survey administrators have built in enough precautions in the test that they can eliminate

those responses. About 5% of the surveys were thrown out because it was obvious that these students did not take the survey seriously.

- A suggestion was made to utilize the faith-based community, Health and Human Services and the school system to form a partnership and have a forum on what can we do to create a healthy community environment for our youth.

## **NEW BUSINESS**

### **Free Adult Clinic**

Kay Glasser asked everyone to please assist in spreading the word that there will be a free health screening clinic for adults at the Health and Human Services Center in the children's clinic on Saturday, September 24 from 8:00 a.m. to 12:00 noon. The hope is that if this program does well then there will be likelihood that they will be able to have a free clinic at least once or twice a month in the near future.

### **Florida Family Day**

On Monday, September 26 there will be a national initiative called "Florida Family Day" to encourage parents and their children to have dinner together. Statistics have shown that this has an impact on substance abuse. Community Youth Development (CYD) is participating in this initiative identifying 5 different locations around the county targeting middle and high school students and their parents to have dinner with them and participate in activities. To get further information you may go to their website at <http://cydonline.org/> or call 922-5126.

### **Public Comment**

There was no public comment.

### ***NEXT MEETING:***

**October 17, 2005, 1:30 p.m. The meeting will be at the Sarasota School Board Chambers, 1980 Landings Blvd.**