

Lackawanna County Human Services Advisory Board

Minutes of the August 27, 2014 Meeting

Submitted September 11, 2014

Attendees

Commissioners:

Jim Wansacz, chair
Corey D. O'Brien
Patrick M. O'Malley

Human Services Advisory Board members:

Susan Mancuso, Accountant
Molly Dempsey Clark, Esq., Fellerman Ciarimboli
Gary Drapek, President and CEO, United Way of Lackawanna and Wayne Counties
James G. Gavin, President and CEO, Community Care Behavioral Health
Dipti S. Pancholy, MD, COO, North Penn Cardiovascular Specialists
Marilyn Vitali Flynn, Independent

Joseph X. Garvey, Vice President, Business Affairs, Marywood University, is a member of the board but was unable to attend.

Human Services leadership:

William Browning, Executive Director, Human Services and Office of Youth and Family Services
Kerry Browning, Court and Community Services Director, Office of Youth and Family Services
Bo Hoban, Administrator, Drug and Alcohol Programs
Colin Holmes, Executive Director, Area Agency on Aging
Adrian Maillet, Chief Administrative Officer, Human Services
Patricia Sack, Assistant Director, Human Services
Gayle Sensi, Administrative Assistant, Human Services
Jeremy Yale, Acting Administrator, Behavioral Health/Intellectual Disabilities/Early Intervention

Facilitators:

Angela Bell and Bill Davison, The Davison Group, Inc.

***Note:** The following are full context minutes rather than abbreviated notes. This allows meeting participants to revisit the meeting in a more comprehensive way, to consider comments more completely in the context in which they were made, and to provide detail to board members unable to attend. Comments are attributed only when the speaker's identity and role are key to their understanding. General discussion, such as comments, questions, or responses to questions posed by the chair or a facilitator, as a rule, is purposely not attributed to promote collaboration and teamwork. Last names are used the first time an individual is mentioned in the notes, and to distinguish participants with the same first name. Comments and questions regarding the minutes are always welcome and should be addressed to angela@thedavisongroup.com.*

Welcome and opening remarks from the Lackawanna County Commissioners

Commissioner chair Corey O'Brien welcomed the new board members, saying that the county is at the most critical time in human services history, moving from a system that had simply allocated funds irrespective of results to a much more outcome driven system.

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He said that the hope is a system that deals not just with the single person who enters the system, but also to that person's entire family, making sure that anyone else is involved and that all needs are identified.

He cited an example: a juvenile comes into the system. He is living with elderly grandparents who have terminal illnesses and a younger sister in the mental health system; his parents are incarcerated. No one has the full picture because it is not being communicated. Commissioner O'Brien said the county's objective is to break down the barriers among all the departments with one central intake system, so that when that juvenile comes into the system, he is seen by a team, with everybody from Human Services at the table. The team lead could be from Drug and Alcohol, but others will be there to address the additional family needs. At that point, with a full picture, Human Services can direct funds in a way to best deal with the juvenile's situation. The county will need to make sure, at the end of the day, that the programs being funded deliver the best result and have the biggest impact. The board's role will be to assist in deploying or implementing that type of system, one that provides the best treatment and delivers the best result—and thus is the best investment. He described that as a challenging mission but one that will be meaningful to many families and to the county for many years to come.

Commissioner Wansacz pointed out that there are no providers among the advisory board appointees, and said that was intentional. The state has put Lackawanna County into a pilot program, and the county now has the ability to put the funds where they are most needed. He said the Commissioners are hoping to utilize board members' expertise, experience, and guidance on how they can best address the needs of the county. He thanked all of the new board members for their willingness to volunteer their time, which he said would have a real impact.

Commissioner O'Malley thanked the board appointees for coming forward and giving their time to be involved with the advisory board. He restated the purpose of the work they would do on the board: to make sure that each of the Human Services agencies is on the same page with those who enter the system, rather than fixing one problem and sending that individual back into a household where the problem is likely to recur because of other issues and needs that have not been addressed.

Board and Human Services leadership then introduced themselves and briefly described their experience and specific areas of interest or responsibility.

At Commissioner O'Brien's request, Bill Davison explained that the role of The Davison Group is to assist the board in making informed decisions by providing facilitation, preparing and distribution of documents and resources, and interacting with members and Human Services leadership between meetings.

Successful meeting outcome

Bill Davison went through the agenda and packet of information provided for orientation purposes: board member list, overview, fiscal overview, acronyms list, and preliminary list of frequently asked questions (FAQs). He said that this approach to informational materials will be typical of most meetings—the goal will be to provide members with information at the earliest possible time to allow time for consideration and members' best thinking.

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Angela Bell noted that these documents are high level and are works in progress, particularly the FAQs, which will be added to/edited over time and posted on the county website with a designated link, along with minutes and other advisory board information, to assure public access.

One of the things that distinguish high performance meetings from pro forma ones, Bill continued, is to identify expectations for a successful meeting at the start of each meeting, and then to circle back at the end to see if expectations were met. No one wants to spend valuable time in meetings that don't have value, he said, and then posed these questions: When you came here today, what did you expect the outcome of the meeting would be? When you leave the meeting, if it has been successful, what will you have learned that will help you in your role as an advisory board member?

Responses from the board included:

- The wealth of talent that is here is amazing. I am hoping to learn more about the different agencies and what we can do for the community.
- I have no understanding of the separate agencies, so I need knowledge of what exists now and how they all interact.
- For me there are three levels—one is personal, one is board, one is community. What am I supposed to do and what am I expected to provide, what does everybody else expect, and what is the greater good that is supposed to come out of this? I came into this for a greater good. Coming from New York City, I have some experience with what the worst could be. To be able to come to a table that is going to listen to that (what I have come to over the years) is exciting.
- I thought we'd be getting to know everybody. I was hoping we could all get acquainted and learn what our purpose could be, and what I could do to contribute to the community as well.
- I have been convinced that we spend too much time creating agendas and not enough in dialogue. The concept of listening is lost. The agenda should come from agility. Share freely, openly, honestly from our backgrounds and what we bring to the table. I think this gives us the freedom to do things that weren't available before and has to be done properly. We think of providers sometimes as the problem, but without them there is no solution. For me, today is just getting to know people and what the communication aspects will be. I worry when I see consensus.

Bill Davison said that some of the comments relate to the short term and some are process comments. We will come back periodically and map them to see how we are doing.

Purpose of the advisory board

Bill Browning said that he had been a caseworker in New York and an investigator with the DA's office in Manhattan, with assignments that included child homicide cases with the medical examiner. He said he had seen the danger of having all of those separate silos and sometimes saw children in all of those systems—abused, becoming perpetrators, in need of services, and sometimes in the medical examiner's office. The primary responsibility for the board is to help to achieve, on the service delivery end, a system in which there is no wrong door for the user, independent of what category the service need may fall into, Bill said. That can't be done without money and the knowledge of how to best allocate the dollars. The latter will depend to a large extent on looking at the data, Bill

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continued, noting that “anecdote doesn’t pay the bills.” The board will need to generate the best ideas and an objective assessment of everything that it will hear. Public hearings start some time in October and may be devoted to needs of the drug and alcohol community or the homeless community. Bill said that recorded testimony would be taken from both providers and consumers. The board in turn will try to prioritize these needs and come up with ways to address them, with the assistance of Human Services leadership.

Gary Drapek noted that United Way went down the same path (i.e., seeking to allocate funding based on outcomes) about seven years ago. The organization is now about 60% there, and it has not proved an easy task, he said. In the interim, United Way had moved from deficit funding to program funding. About six years ago, Gary said, United Way went to 40 partners instead of member agencies. The partners fund services in the community. When they come back to the group at the end of the year, the partners have to demonstrate how they achieved their outcomes. This has been a tough road, he emphasized, noting that some agencies weren’t funded, and that significant data collection is involved. Commissioner Wansacz noted that United Way partners with the county.

Jim Gavin said that the concept of coordinated, centralized services dated to 1973, after the Agnes flood, when the United Services Agency was created under Katherine McKenna’s leadership and housed in the Office of Public Assistance. He said that although the concept was good, the execution (“one door”) was very difficult and ultimately didn’t work, for a myriad of reasons. Nonetheless, he said he is excited about this new opportunity and happy to serve on the board. He noted that he serves on the same advisory board in Allegheny County.

Bill Browning said that it would be important not to lose sight of some things that are outside of our purview. The Homeless Assistance Program (HAP) funding is a good example: an agency wants to do case management or try to get clients into permanent housing, but only wants funds for the population that it serves (women, or families with children). Nobody’s ever sat at the table asking whether there are other entities that may be able to pick up pieces of this, Bill said. At the end of the day, if that were done, it would be possible to increase the number served because the need has been clearly identified, which is a total reversal of how things are typically done in government, which is fraught with bureaucratic restrictions. There are so many different pieces of funding streams that go all over the map; the money to serve the people is there, but sometimes the restrictions prevent us from spending it effectively. It is important to have faith in this new approach and process, Bill said, because the advisory board will help us to fund programs that work—which is the purpose, in a nutshell.

- We are not age restricted, right?

Bill Browning said no, and noted that some 60% of HealthChoices dollars are spent on children’s services.

- Recently I was consulting on a case, for a patient who was a substance abuser. There were residence issues, and the patient kept getting readmitted for diabetic complications. The patient was non-compliant and kept missing follow-up appointments. If you can see a patient within seven days of discharge, studies show

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that you can avoid readmission. There should be a caseworker who could assure follow-up for an appointment.

Bill Browning noted the importance of such coordination and follow-up. He said the board would be looking very closely at drug and alcohol issues, the impact of which is tremendous in that they touch on behavioral health, child welfare, and corrections. Up to 400 people are being detoxed in the prison per month, Bill said, and there has been an increase in the child welfare population because of drug addiction.

Part of the whole philosophy of engagement, Bill continued, is to use natural supports—the people who can support the individual. Friends, family, or others who have been through the same problem can provide support between the meetings and appointments and lead to other resources and avenues. Bill said the point is to try to create a community. The fiscal piece of doing so is that sometimes so much time is spent on this service and this provider when the support an individual needs is from the aunt next door. The planning process will look at all of that, to see what the community has to offer. Bill said that a number of providers were very concerned when the county decided to become a pilot in the block grant program. Providers may be asked to do something differently or partner in ways they have not before, and to identify needs and target to the individual in a more focused way than ever before. He added that The Davison Group will be sending board members journal articles and other information to assure that they are well informed, and that Human Services leadership will be an excellent resource for them.

Orientation materials

Bill Davison referred members to the orientation documents—a board member list, a high level overview of Human Services and the three largest categorical areas, a fiscal overview, “process” handouts on consensus decision-making and vision/mission development, the first draft of frequently asked questions (FAQs) on the block grant and the advisory board, and a list of common acronyms. These documents are also being provided to attendees electronically. Discussion began with the Human Services overview, which Bill described as a very high level “fly-through.” More in-depth information will be provided over time, he said.

Human Services integration. Bill Browning explained that Human Services’ program areas (also referred to as categorical areas) had previously operated as independent silos. If there were cases that overlapped, they did so at such a level that they were very high priority, he said. Behind the scenes, however, there has now been an effort at coordination. For example, there is now one fiscal officer to collect all of the information. Integration of the separate programs will also require coordination of quality assurance (QA). This is underway to assure that everyone is looking at the same data packages. Bill called on each of the leadership team members to describe their specific areas.

Kerry Browning described how Youth and Family Services utilizes the family engagement approach for children who enter placement or are removed from their parents. Within 30 days, the caseworker invites the family and all of the natural supports (teachers, relatives, etc.) to a family team conference. The range of Human Services is there: drug and alcohol, the managed care entity, etc., so that, for example, clearing things for medical necessity can be done at the conference. The quick response assures that people are on the right

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path from the beginning. That same model is the goal for other cases in the Human Services system, she said, so that there is “no wrong door.”

Bill Browning said that in the Human Services field, sometimes it would takes months to get people to appointments, and the process would involve many callbacks and emails for staff, going through all the hoops, over and over. In child welfare, that time could mean the difference between keeping the family together and losing the child. When the consumer gets the service quickly, he continued, there are also tremendous organizational efficiencies, and, if needed, he is available to approve something unusual, since a few dollars spent at the front could save very expensive family deterioration later.

- The United Services Agency was not a “no wrong door”; it was a single door, and that’s why it failed. You can’t get all that expertise in one place.
- The county’s Criminal Justice Advisory Board (CJAB) was looking at central intake at the point of booking for the same reason—to assure that needs were identified as early as possible in the process.

Behavioral Health/Intellectual Disabilities/Early Intervention (BH/ID/EI, serving Lackawanna and Susquehanna Counties). Jeremy Yale said that about three years ago, the program recast its name, moving from “mental health” to “behavioral health.” In March 2014, Lackawanna County Department of Human Services submitted a request to the PA Office of Drug and Alcohol Programs to reorganize the structure of the Lackawanna/Susquehanna Single County Authority (SCA) from a Public Executive Commission model to a Planning Council model. This change, which was approved effective July 1, 2014, incorporates the administrative functions of the SCA within the BH/ID/EI Department.

Jeremy pointed out that there are mental health needs and drug and alcohol needs that come under behavioral health, and that this change will help to “knock down some walls” and work more collaboratively. The mission could be part of the mission of the advisory board, he said—how do we know we’re effective? For many years in social services, Jeremy said, we thought that because it felt good, it must be effective. There hasn’t been much talk about big data, but it is very important now to determine how to capitalize on the rich data that is available.

Pointing to the expenditures in the handout, Jeremy said they include the extension of HealthChoices, at \$55 million. There is about a 60-40 split across the counties, but more specifically across children and adult services.

“Base Service Unit,” he continued, is an old term that drives the authority of the county to meet the needs of the individuals in the community. Scranton Counseling Center (SCC), then Tri-County, and now NHS do assessment and evaluation so that individuals can gain access to the community. That works, but there are areas to strengthen. We are critically thinking about no wrong door and how that interplays with Behavioral Health and Drug and Alcohol. He said that BH/ID/EI is fortunate to have its own active, participating advisory board within our office, and noted that Gary is a long-standing contributor to that board.

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Jeremy clarified that BH/ID/EI itself is not a provider; a provider is defined as any agency that provides either an administrative function or a direct service (such as Scranton Counseling Center or the Advocacy Alliance, which does some of the quality assurance work).

Drug and Alcohol Programs. Bo Hoban said the program is tasked with coordinating and hopefully enhancing the drug and alcohol system of care. Its roles include administration, as the funding source for its provider network; and data collection and analysis. Drug and Alcohol is looking for collaborative partnerships and can serve as a kind of insurance agency in its own right for people who don't qualify for Medical Assistance (MA) and don't have health insurance—essentially, the working poor. There is also a case management component. Bo said the program is also the designated lead Substance Abuse Professional (SAP) training provider in about an eight-county area. There is a need for different points of access and care and innovative ways of treating people. If you've been an inpatient 12 times you are probably not getting the kind of treatment you need, he added, noting that drug and alcohol has historically been underfunded.

Area Agency on Aging (AAA). Colin Holmes explained that the AAA is a multi-service advocacy and protection agency on behalf of senior citizens. It is an administration and contracting agency and also has a protective service unit that is a direct service provider. That unit, he said, investigates claims of abuse, neglect, and disenfranchisement to determine whether they can be substantiated. In addition, the administrative services that the agency provides insure the funding of providers in certain types of services—e.g., contract-based home-delivered meals or personal care services (for which there are nine providers) to support the elderly in their own homes. Aging staff assess individuals' clinical need and financial eligibility for a service. He said that the AAA has less lateral sprawl with some of the other Human Services categoricals and clarified in response to a board member's question, that AAA does nothing directly with nursing homes and can only advise individuals of what they can do to reach the financial level necessary for nursing home admission.

Bill Browning said that Aging will be integrated later because its funding is separate from the other program areas, which share funding. He noted, however, that the county is now seeing an aging population that is addicted, in some cases to prescription medication, and that the overlap will need to be addressed.

Youth and Family Services. Bill Browning said that Youth and Family Services looks at the family unit, as it makes no sense to deal with a child in isolation. Removing the child from the home takes away all of their resources and can destroy the child. The office conducts investigations related to the safety of children that are required for intervention, he said. Any action that Youth and Family Services takes has to be substantive and meaningful—being in a child's home a minute longer than they have to be can have an extremely negative effect on the family. Bill said that the Human Services Advisory Board will also serve as the Child Welfare Board as well and will be discussed in future meetings.

Fiscal. Adrian Maillet reviewed the consolidated financial summary for Human Services, budget and spending level for ten months, noting that county is presently in the midst of budget season. Youth and Family Services pays for all children and youth services and also

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for purchased services for Juvenile Probation and Juvenile Detention. Adrian said that the second spreadsheet is broken out by expense type, with about 25% of the \$51 million budget allocated to salaries and benefits and 60% to purchased services.

Bill Davison reiterated that the FAQs in the orientation packet are to be considered a work in progress, with questions added as they come up. The same is true of the acronym list that was distributed. He referred to a process document on consensus decision making, noting that consensus doesn't mean agreeing on everything—no one would expect that—but that it is a way to talk about things so that hopefully everyone can support the ultimate decision even if they disagree. He emphasized that everyone at the table has important contributions to make.

Mission development

Bill said the board does not have the time to do a full vision/mission process. Even though the advisory board is more of a virtual organization, and board members are in a somewhat unique role, it is still important to have a shared sense of purpose. He asked board members to send The Davison Group their perception of the mission of the board. The Davison Group will then compile the suggestions into a draft mission statement for presentation at the September meeting. Prior to the September meeting, The Davison Group will also be sending out a set of draft operating principles for board consideration and adoption. They will describe how the board wishes to conduct itself during meetings.

Further discussion

- The finished plan is due the Wednesday before Thanksgiving.

Bill Browning, acknowledging the extensive responsibilities and time commitments of a voluntary board, agreed that the time frame is very aggressive and said that it would be important to discuss how much of the work can be done electronically. He said the hope, ultimately, is to have quarterly meetings. He said, however, that the board may have to compromise this year; if the November deadline can't be met, at least procedures will be in place. Bill said they hope to take testimony some time in October to identify key issues and subject areas.

- You are obviously moving ahead with this document.

Bill responded that for this time only, working on the plan would occur out of necessity. He asked members if their preference would be to react to a document or to identify a topic area and then focus on that.

Looking at the available data now, he said, the drug and alcohol system is probably in greatest need of rehabilitation as it is driving all of our systems for the most part and traditionally receives the least funding. Bill said that drug and alcohol is "truly a public health concern" in that it affects the community at large and all the different Human Services categoricals.

Adrian noted that of the \$51 million for human services, the flexible block grant portion is only about \$11.8 million. The flexibility, Bill Browning replied, is in how it can be allocated across the system.

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- So there are a lot of overlapping of services?

Bill Browning said that consumers may touch on another system but may have a housing need. There is flexibility on how Human Services coordinates the activities.

- I started in drug and alcohol and you never had to prove that something was successful. We just did good things. Now it's "Show us, and don't just tell us that you're serving 322 people. What happened to them? How many times did they come back?" The hardest thing was change because of the silos. Breaking down that barrier took forever. Now we are at a point where it works. It's a long process and we are not completely there yet.

Bill Browning said that part of the plan could be devoting more resources to determining what the outcomes should be, since it's possible that the surface of what needs to be measured isn't even being scratched.

- We need more efficient use of the budgeted monies.
- And to see if there's a change in allocation of funding that's required in allocation of the block grants. That's the first short-term goal, right?

Bill clarified that 50% is flexible for this year. A waiver can be requested, he said, but that would require justification. Pat Sack noted that next year, 75% is flexible, and the next, 100%.

- Let's try to eliminate the overlapping services.
- That is important, but the volatility of the environment isn't going to slow down soon. Decisions will be directly affected by the election and Medicaid monies. I don't think we ever could write a document that had some longevity.
- It has to be fluid. What do you think the outcomes should be? You have to have a give-and- take.

Bill Browning said the goal is a living document.

Next meeting:

After some discussion, consensus was reached on the next meeting date: Friday, September 26 from 8 to 10 AM in the Commissioners' conference room.

Next steps:

- The Davison Group will send a test email to all board members before sending the minutes of the first meeting and the electronic copies of the orientation documents.
- Board members will review the vision and mission documents provided in the orientation packet. Each board member is asked to email The Davison Group his/her sense of what the mission statement for the advisory board should be no later than September 22 (angela@thedavisongroup.com).
- The Davison Group will send members a draft set of operating principles for feedback and consideration at the next meeting.
- Substance use information will be provided to the board.