Commission Member(s) Present: Brian L. Posey, Chairman; Karen E. Gallagher; Senator Bethany Hall-Long; Pat Engelhardt; and Lisa A. Furber.

Commission Member(s) Absent: Yrene E. Waldron; Joe DiPinto; Wayne A. Smith; Vicki Givens; Kyle Hodges; Chief Kenneth McLaughlin and Representative Valerie J. Longhurst. Peter FeliceAngeli, DOJ, was also not in attendance.

Others Present: Margaret Bailey; Renee Walton, Aide to Karen Gallagher; Roger Connell, NHA Serenity Gardens; Rob Smith, DLTCRP; Victor Orija, State Ombudsman; Dr. Galluci, DSAMH; Dr. Tanner, DSAMH; Dave Bolton, Nursing Home Administrator; Sandy Dole, Advocate; Bill Love, DSAAPD; Dave Ciamaricone, DSAMH; Patricia Justice, DSAAPD; Valesta Tejan-Kamara, Advocate; and Andi Wozny, DSAAPD.

1. Call to order

The meeting was called to order at 9:43 AM by Brian Posey, DNHRQAC Chairman.

2. Approval of the Minutes for the meeting of:

January 10, 2012 meeting minutes were not voted upon due to lack of quorum.

3. Discussion of:

Mobile Crisis Unit

David Ciamaricone, Crisis Intervention Services (CIS) Director (DSAMH), spoke to Commission members regarding psychiatric and behavioral crisis intervention in Delaware.

CIS offers the following:

- **Hotline Services**-provides 24-hour assistance including referrals and consultations by phone/video, crisis counseling and well-being calls/visits.

- **Community Outreach**- provides emergency psychiatric and substance abuse assessments, evaluations, assistance with hospital admissions and training to public/private agencies.

- **Office Visits and Follow-up Services**-provides crisis counseling, hospital screening, referrals to other agencies and psychiatric coverage.

- **Crisis and Psychiatric Emergency Services**- provides emergencies services to individuals.

- **Crisis and Psychiatric Assessment Center**- provides assessment to individuals.
There is a 24-hour unit located at the Herman Holloway Center that provides consultation services for various community agencies. A Psychiatrist is available at the NCC location and often assists Adult Protective Services (APS) and the Division of Aging and Adults with Physical Disabilities (DSAAPD). Individuals are seen in the office (about 1400 individuals per year) or the unit travels into the community to provide education for law enforcement and other agencies.

Crisis and Psychiatric Emergency Services (CAPES) is located at the Wilmington Hospital (since 2004). There is a locked unit within the emergency room department to assist 3k residents yearly for psychiatric and substance abuse issues. An individual can remain 6-8 hours and be evaluated.

St Francis Hospital and CIS have an agreement that should an individual need a psychiatric evaluation, the unit will go to the hospital to complete an evaluation.

The Ellendale location (opened February 2011) maintains a 24-hour mobile outreach unit and office- open 1:00-9:00 pm. The Delaware Psychiatric Center also offers this service.

September 2012-The Ellendale site plans to add a K-PAC Unit (Crisis and Psychiatric Assessment Center) where individual’s that do not need emergency room services can go directly for an evaluation and spend 4-5 hours with staff. The hope is to have the individual assessed and then go back to the community. This program expects to work with individuals that would normally go to Nanticoke, Milford Memorial, Kent General and other Kent/Sussex medical centers for psychiatric service or assessment.

Chairman Posey asked whether the K-PAC Unit can be a resource for hospitals for individuals experiencing minor issues. Mr. Ciamaricone shared that once a medical screen has been performed and the person is cleared by the ER, the individual can be directed to the K-PAC site for a psychiatric evaluation.

CIS is partnering with Beebe Medical Center (Fall 2012) to provide services. They currently assist with evaluating 40-50 individuals per month. If a person comes into the emergency room, a CIS staff person will be on-site to provide a psychiatric evaluation, if needed.

July 2010, the Horizon House Delaware opened the Empowerment, Choice, Hope and Opportunity Centers (ECHO) located on Chapman Rd (Newark) and the Ashley Center located on Main Street (Middletown). The Newark location is currently assisting with more mental health-related issues and the Middletown location is working with more substance related issues.

Mental health training is currently available for law enforcement, and the annual first time responders workshop. Mr. Ciamaricone mentioned that there isn’t much training at this time with hospitals or nursing homes. Contact the Division of Substance Abuse and Mental Health if you are interested in training, please go to: http://dtool.dhss.delaware.gov.

Dr. Gallucci added that DSAMH will soon be sponsoring four individuals (to go to Washington) to be trained in the Mental Health First Aid Program-a 12-hour certification course to help communities better understand mental illness and respond to psychiatric emergencies. Currently there aren’t any Delaware based instructors. The goal is that the four individuals (from Del Tech, law enforcement, and two others), once trained, will be able to hold mental health first aid classes state-wide.

The Crisis Intervention hotline can be reached by contacting: New Castle County- 1(800) 652-2929 or Kent/Sussex-1(800) 345-6785.
Drs. Galluci and Tanner presented to the Commission regarding the Geropsychiatric Outreach Team. The team was developed to transition 31 long-term care residents, formerly living at the Delaware Psychiatric Center (DPC) Carvel building, to state and private facilities because the building was closed due to environmental issues. The majority of the residents were transitioned to the Delaware Hospital for the Chronically Ill (DHCI) in Smyrna. A few of the residents were transitioned out of DPC and returned for a short period of time – then transitioned again to the new facility.

Dr. Galluci mentioned that most of the residents did well with the transition. The Geropsychiatric Outreach Team wanted to help reduce anxiety and assist the “new” staff with managing behavioral health, as many of the residents have a variety of diagnoses to include: dementia, schizophrenia, bipolar disorder, and other psychiatric diagnoses. Staff from DPC worked side by side with DHCI staff to mentor about the individual personal care needs and behavioral conditions.

The team continues to assist with psychiatric consults, medication management, and providing recommendations to the facilities (after identifying needs and treatment). The recommendations included: medical, nursing and physical therapy needs.

Dr. Tanner shared that both formal and informal education is critical and continues, as needed. The team provided daily rounds, for the first six months, to assist with the transitioned residents. The rounds are now weekly.

Dr. Tanner shared that she spends a few days a week with the Geropsychiatric Outreach Team and the remainder at DPC in the Geropsyche Unit (Sussex II). She is therefore able to provide assistance should a resident be transitioned out of the DPC Geropsyche Unit and follow their care.

Drs. Galluci and Tanner stated that Cynthia Steele, Assistant Professor at John Hopkins University, helped with developing a nurse to nurse mentoring program. To learn more about Ms. Steele: [http://www.crinstitute.org/index.php/faculty/cynthia-d-steele/](http://www.crinstitute.org/index.php/faculty/cynthia-d-steele/). Ms. Steele also published Nurse-to-Nurse Dementia Care, A Pocket guide for Excellence in Care.

DSAMH will co-host a conference (with several other agencies) called “Demystifying Dementia-Creative Approaches to Care” May 23, 2012 at the Embassy Suites Hotel (Newark). The conference is free and offers CEUs. More information will be forwarded to the Commission as it becomes available. In addition, DSAMH will also host the Summer Institute July 30- August 3, 2012 at the Embassy Suites Hotel.

Dr. Galluci added that Mary Rodger, Quality Insights of DE, was instrumental in helping to build a relationship with long-term care facilities.

Currently the team does not provide psychiatric service to other private LTC facilities, but hopes to expand in the future. Dr. Galluci stated that a memorandum of understanding would need to be prepared in order to expand their service to other LTC facilities. He also mentioned that the residency program at DPC might be able to help expand psychiatric outreach services.
QART Report

Rob Smith, DLTCRP Administrator, presented the fourth quarter 2011 QART Report to Commission members. There were four “G” level deficiencies reviewed by the team. The team made no changes to the citations.

Staffing Report

Rob Smith, DLTCRP Administrator, presented the January 2012 and March 2012 Staffing Report. The hours per resident per day were 3.77 in January and 3.74 in March. It was reported that all facilities were in compliance with Eagles Law (3.28).

4. Old Business/New Business:

2011 DNHRQAC Annual Report

Members were asked to review the proposed goals (distributed and previously discussed) and be prepared to vote on finalizing the 2011 Annual Report during May 8, 2012 meeting.

Governors Commission on Community-Based Alternatives for Individuals with Disabilities (GCCBAID)

Bill Love, DSAAPD Director, spoke to DNHRQAC members about the Governors Commission on Community-Based Alternatives for Individuals with Disabilities.

Mr. Love mentioned that GCCBAID meets quarterly to develop plans and increase or improve community-based supports and services for individuals with disabilities. The Commission consists of 19 members and is open to the public. Most of the Commission's work is done via committees: housing, employment development, health care and transportation. Mr. Love will forward the GCCBAID meeting schedule to DNHRQAC.

Mr. Love shared that GCCBAID has accomplished many community-based services and supports to include: Direct Support Professional Certificate Program (will forward); Respite Care Network; increased funding and access to Personal Attendance Services; implemented Aging and Disability Resource Center (ADRC); established Family Support and Healthcare Alliance Delaware (SHADE); created housing coordinator position; created State-wide Rental Assistance Program (SRAP); created Div. of Transitional Care (Nemours); scheduling changes with DART; Medicaid Buy-In Program; Money Follows the Person (MFP); and more.

Chairman Posey suggested that there is concern regarding the safety for individuals living in a community setting. Senator Bethany Hall-Long concurred and asked what measurements have been put into place to ensure there is minimal risk. Mr. Love stated that there is Dignity of Risk-appropriate alternatives provided to individuals living in the community.

Mr. Love further added that programs such as senior roll call and community networks (like Brandywine Village Network) that provide a support system and other means to build a strong community.

Mr. Love shared that DSAAPD plans to add additional community ombudsman and Adult Protective Services (APS) workers in the community.
Chairman Posey mentioned that it appears the Governors Commission on Community-Based Alternatives for Adults with Disabilities is doing what DNHRQAC considered expanding upon. DNHRQAC members present will share with members absent about today’s discussion during the next DNHRQAC meeting.

5. Public Comment:

Ms. Bailey shared that Easter Seals is partnering with the DE MS Society and DE Family Voices for the third Annual Caregiver and Respite Conference April 27, 2012. The event is an informational conference for caregivers caring for individuals across the life span. Please contact Erin Warren at: (302)221-2087 for more information.

6. Next meeting will be **Tuesday, May 8, 2012** at 9:30 AM. The location:

   Legislative Hall  
   House Majority Caucus Room  
   411 Legislative Avenue  
   Dover, DE 19901

7. Adjournment

The meeting was adjourned at 11:06 AM by Brian Posey, Chairman.

Attachments: January 10, 2012 meeting minutes draft  
March 13, 2012 meeting agenda  
QART Report- December 2011  
Staffing Report- January 2012 & March 2012  
DNHRQAC Goals (proposed)  
Save the Date flyer- Demystifying Dementia  
Crisis Intervention Services  
Commission on Community-Based Alternatives for Individuals with Disabilities  
DLTCRP Organizational Chart