



**Metropolitan Human Services District  
Board of Directors Meeting  
May 28, 2020 | 12:30pm**

Conference Call information/ Zoom Meeting: <https://us02web.zoom.us/j/85344654811?pwd=VWtmY0c3cEpiY2paeXFGV0thanRyZz09>

Meeting ID: 853 4465 4811; Passcode: 157255;

One tap mobile +16468769923,,85344654811#,,,,\*157255# US (New York)

*MHSD fulfills its statutory role as the planning body for the behavioral health, addiction and intellectual/developmental disability services for the residents of Orleans, Plaquemines and St. Bernard Parishes by ensuring that eligible residents in these parishes have access to person centered and recovery focused supports designed to optimize their role in the community.*

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## Minutes

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- I. Call to Order
  - A. Meeting was called to order 12:33 p.m. by Vice Chair Michael Pechon through the Zoom conference call and it was determined that a Quorum was present.
  
- II. Attendance
  - A. A quorum was present consisting of Michael Pechon, Dr. Cathy Lazarus, Dr. Ariel Lloyd, Mike Miller, Charlotte Parent, Dr. Sarintha Stricklin, Dr. Brian L. Turner, and B. Gerard Woodrich
  - B. Absent from the meeting were Gary Mendoza, Tenisha T. Stevens, Leslie Prest, Stanley Simeon, and Dr. Marcus A. Bachhuber
  - C. Other individuals in attendance were Rochelle Head-Dunham, MD, DFAPA, FASAM, MHSD Executive Director/Medical Director; Traci Brown, MHSD CFO; Sharon Barnett-Starks, MSW, MHSD Deputy Director of Programs; Steven Farber, MHSD Deputy Director; Karen Canales, Executive Staff Officer to MHSD Executive Director/Medical Director and Julie Olsen, Plaquemines Community CARE Centers Foundation, Inc.
  
- III. Approval of the March 25, 2021 Minutes
  - A. Minutes were reviewed and approved by motion of Mr. Miller, seconded by Ms. Parent, all voted in favor.
  
- IV. Monitoring Reports
  - A. Monthly Dashboard

Dr. Dunham reviewed the Dashboard in detail for the new Board members, which encompasses the following along with the top numbers for each category/ section:

## **Dashboard Page 1 - Utilization**

Persons Served by Clinic Location (YTD unduplicated by clinic): Chartres serves the largest number of individuals. YTD Central City has served 3386 adult individuals and no child/youth is seen at this location. Chartres Pontchartrain has assisted 847 child/youth individuals and this location does not serve adults. Plaquemines is a contracted agency managed by Plaquemines Care.

Priority Populations: Number of Persons Identified at Point of Entry (POE) with the highest category of 144 Persons Seeking HIV/AIDS Services.

Top Diagnoses: SUD Adult YTD: Opioid Use, severe: 558; Top Diagnoses: MH Adult YTD: Schizoaffective, bipolar type:1379; Top Diagnoses: SUD Child YTD: Cannabis Use, mild: 42; Top Diagnoses: MH Child: ADHD, combined:754

Care Center handled 4151 calls during the month and the average talk time was 2 minutes and 43 seconds. MCRT served 241 adults and 35 child unduplicated calls for the month and the follow up involved 214 calls to adults and 40 calls for child follow up contact. Top category for final disposition of these calls were 164 adults and 25 child calls were referred to community providers.

Access to Services – How did you hear about our services? places the top response category at 4045 individuals responding from the doctor or provider. Dr. Dunham would like to review these responses since this data does not seem to capture the public relations (PR) done by MHSD.

Top Referral Source YTD is 2084 as self-referred

Days to 3<sup>rd</sup> next available appointment for a psychiatric evaluation is 13 days, new med management appointment is 27 days.

The average Calendar days from time of contact to eligibility determination for IDD services is 2.4 days

## **Dashboard Page 2 (Top) – Services**

Top Services MH Programs YTD: Top activity is Medication Management with 3154 services; Top Services SUD Programs YTD: Top activity is Alcohol/Drug Assessment: ASI Audio with 181 services. These services have been provided via audio and Dr. Dunham reported the expected shifting of services by offering face to face appointments or the telehealth option to decrease the audio modality. More foot traffic will be observed in the clinic as of the beginning of the new FY in July 2021.

IDD Number of Persons Served by Program: Waiver 926, Individual Family Support 314, Flexible Family Funds 127.

Show Rate by program YTD detailing the number of services, number of appointments and the percentage show rate by each. The highest percentages coming from Adult MH Treatment at 66.8% and Child MH Treatment at 57.2%

Number of Peer Support Interactions: 148. Dr. Dunham addressed the decrease in these interactions and the efforts to increase them. Before COVID these numbers were in the 300s and 400s. Number of Persons Referred by Resource Coordination: TBA and Number of Persons Connected to IDD Transition Services:24.

## **Dashboard Page 2 (Bottom) – Outcomes**

Mental Health National Outcome Measures FY21 YTD. TOMS evaluations are reflected in this section and they must be done in person, so the N/A reflect the decrease in foot traffic.

IDD Outcome Measures (Quarterly) meeting all outcomes apart from employment, which is a national and statewide problem.

Mental Health Persons Served Satisfaction (FY20)

SUD Persons Served Satisfaction (FY20)

MHSD Telehealth Survey Responses: Adult April YTD

MHSD Telehealth Survey Responses: Child/Youth April YTD

Dr. Dunham paused the review to allow time for questions. Ms. Parent asked what the national no show rate is, and Dr. Dunham responded it was about 30-40% in average for Behavioral Health.

Dr. Dunham addressed the delay in implementing the Navigator at the hospital and she informed the board that she is strongly considering for MHSD applying to become a Certified Community Behavioral Health Clinic (CCBH) so that we can increase show rates with this model. Dr. Lazarus inquired about the model discussed and if it included IDD. Dr. Dunham clarified that it includes adults and child/youth only.

Dr. Lazarus also inquired about Donna's retirement as the IDD Director. Dr. Dunham informed of the smooth transition of Carlos Amos who was promoted from within. He was invited to introduce himself to the Board and join the meeting.

Mr. Farber informed that the current IDD report used by the state only includes persons served by the waiver program and does not accurately reflect all the IDD persons served that are currently employed. Dr. Dunham noted that even if the formula they use is adjusted the numbers continue to be low as Dr. Lazarus commented.

Mr. Woodridge inquired about the difference between audio and telehealth and Dr. Dunham clarified the language that MHSD uses to differentiate the modalities. Dr. Dunham then provided an overview of the telehealth report where services have been provided 44.9% via audio (phone only), 31.8% in the office and 23.3% via telehealth (video). Our goal is to reverse the telehealth and audio modalities since the audio modality will be discontinued eventually.

The utilization report for the month of April and the past two Fiscal years was reviewed to compare service utilization services at MHSD. Notice that in the past year, MHSH has had more billable services very month compared the last 2 FYs except for 2 months (Aug. and Oct. 2020).

Dr. Lloyd inquired about the increase in foot traffic in the clinics and the screening for COVID.

Dr. Dunham clarified that since we are a State agency, we cannot require persons served to be vaccinated, but MHSD strongly recommends it and staff has approved language to encourage vaccination. We have heard immunity within our staff at MHSD. Ms. Parent inquired about apprehension from staff about returning to the environment and Dr. Dunham explained about the measures taken by MHSD to increase security for our patients, staff, high risk persons served and the elderly.

The telehealth Report was also reviewed, and the services provided and their modality during the month.

B. April Reports

Mr. Pechon requested feedback from the members including any specific data to address for the March Ends Report. He also inquired about page 4 of the report where SubEnd III, Indicator B addresses the show rate minimum goal of 30% and the quarterly performance was 25%. Dr. Dunham updated the board with the Navigator position which will increase the show rate and how this has moved to be a July 1st effort for FY22. The MOU with the hospital is 50% show rate from discharge, so it should address this indicator when fully implemented.

C. May Reports

1. Human Resources Annual:

a) Unclassified Employees Salary

The Human Resources Reports include the Unclassified Employees Salary. Dr. Dunham reported that Dr. Kramer will be resigning at the end of the FY and Dr. Porter will be retiring as of July 22, 2021. The LSU contract providing Prescribers has been very useful to MHSD due to difficulty hiring Civil Service (CS) Psychiatrists at the CS rates.

b) Civil Service Audit Results (None)

No civil service audits were conducted this year

2. Human Resources Semi-Annual Reporting:

a) Report on Personnel Policies

No updates in HR policies this year

b) Staff turn over

The turnover rate for FY21 is 4.22% which decreased from 6.59% during FY20

The retention rate for FY21 is 95.76% which increased from 93.33% during FY20

c) Civil Service Hearing and Outcomes Report (None)

We have not had any civil service hearings this year

3. Quarterly Reports

a) Communications Report between Executive Director and Executive Team

Agendas were reviewed to support continuous communication between Dr. Dunham and her staff.

b) Listing of Purchases/Contracts and commitments over \$300K

A listing on contracts to be in effect for July 1st over \$300,00 was presented to the board for approval. CFO Traci Brown went into detail about the funding source and the description for each of the contracts presented

c) Report on Request for Proposals (None)

d) Incident Reports

The Incident Report for the 3<sup>rd</sup> Quarter of FY21 was reviewed, and no questions arose from it.

Mr. Pechon requested a motion to accept all reports Dr. Lazarus made a motion and it was seconded by Mr. Miller, all voted in favor.

V. Decision Information

No decision information was presented for review.

VI. Consent Agenda.

No consent agenda items were presented

VII. Self-evaluation: Board Performance Review

Not all members have completed the survey. Mr. Pechon requested that Karen Canales sends a reminder to the Board members who have not completed it to do so for the information to be reviewed and presented at the next meeting. Mr. Farber commented on the importance of CARF reviewing that the board completes this survey.

Dr. Dunham informed the board that the order from the Governor will be ending and that Steven was researching if we can continue to meet virtually or if in person meetings will need to resume. Ms. Parent commented that the Board may need to continue to meet in person just as the persons served are now coming back into our buildings. Dr. Lazarus expressed that although she has no opposition to meeting in person, the virtual environment has allowed for flexibility to get to the meeting without the extra hour of driving for an in-person meeting. Mr. Pechon requested for Steven to research the options available. Dr. Strickland asked if a Hybrid option is available. Steven clarified that the law does not allow a public meeting other than in person and the only thing that could stop it was an Executive Order.

VIII. Adjourn

A motion to adjourn the meeting was made at 1:26 PM by Dr. Lazarus, seconded by Ms. Parent; all in favor, motion passed.