



The University of Texas at Austin Dell Medical School

MINUTES

ASH Redesign Campus & Continuum Clinical Strategies Work Group

Monday, June 15, 2020 ▪ 1:00-2:00pm ▪ Conference Call

Agenda

1. Welcome
2. Review Steering Committee Feedback
3. Discuss Housing references shared
4. Close

Attendees:

Sydney Harris, Jim Baker, NinaJo Muse, Cory Morris, Rishi Sawhney, Sarah Cook, Colleen Horton, Robert Reed, Kristopher Steinke, Sonja Burns

Minutes

Welcome

Reviewed the agenda and schedule for the meeting.

Review Steering Committee Feedback

Chair presented strategies to the Steering Committee at the last Steering Committee meeting. The strategies were well received, no suggestions for changes or modifications from the committee. Their charge regarding strategies going forward was to prioritize based on funding needs vs statutory or policy changes. Goal is to hold off on moving forward until the other work groups provide their strategies in order to avoid duplication of work or incompatible goals. A member suggested looking at HCBS-AMH qualification requirements which may align with the Competency Restoration work group. The group discussed what this might entail and a member suggested verifying whether the current funding allocation is being fully utilized, a member has volunteered to see if this information is available and will report back to the team. A member agreed and suggested additional data follow up on outcomes in the program. One member mentioned that real time information on HCBS-AMH would be helpful in tracking individuals as they exit the program and reasons why. The member stated a goal of this group should be to create better mechanisms for transparency and accountability in order to improve outcomes for clients along the continuum of care. The group agreed to wait on strategies from the other work groups before moving to the next step. One member will follow up with Dr. Jewel Mullen's team of UT Dell Medical School re: the Strategic Plan for Health Equity so that our efforts can be better aligned.

Discuss Housing references shared

The group was asked for comments and feedback on the housing references shared via email with the group. Group reviewed Common and Key Elements in Community Housing. They discussed how to lay the foundation for adopting some of these programs and/or models and building upon it needing both models mentioned in the Common and Key Elements document. The group discussed SSLC's and how they fit into the step down, both currently and in the future. In discussion of SSLCs, team members shared different possibilities to utilize the SSCL

as a step-down from the state hospital, or possible reallocated funding to improve SSCL in a step-down format. At least one member of the workgroup (Colleen Horton) strongly opposes consideration of the SSLCs as an appropriate housing option for people with serious mental illness. She pointed out that the SSLCs do not provide appropriate mental health services to current residents as indicated by the federal monitoring reports, that it makes no sense to transfer individuals from one large institution to another as that does not prepare people for community living, that the SSLCs are old buildings often in disrepair (one was actually a WW II prisoner of war camp), and that using inappropriate infrastructure just because it is there does not help to build housing options that promote recovery and a return to community living.

Another member (Sonja Burns) pointed out that according to peers and family members, step-down is the key to any continuum for many of those being served in the state hospital system. It is also the missing piece at all state hospitals. Considering the crisis of people stuck in county jails waiting for proper treatment, along with the current economic climate and budget cuts to come (possibly for many years), it is necessary to explore all resources available to the mission of changing the trajectory of those cycling through the revolving door of incarceration, hospitalization, and homelessness. There is a possibility of having step-down at the SSLC campuses, which would be different from anything before as it leverages the opportunities between the SSLC's, the state hospitals, and the greater community. This is a novel opportunity for a more person-centered approach for what this population needs in order to transition safely to their least restrictive and most appropriate setting, utilizing resources already available to the state - resources previously unavailable to, but greatly needed by this population (86th Legislature, HB1, Article 2, Rider 110).

The group, listened to both member's recommendations, however the team did not come to a consensus on the recommendations to move forward. The team agreed a novel funding strategy is needed to support a change in the housing options available, and will continue to think through the options. One member recommended looking at the city zoning options, to have a group living within each zone; this was confirmed it's in a city plan but has not been put into action just yet. The group discussed the difference between community housing and institutional care. The group discussed barriers to housing, including staffing, and funding of staffing.

Close

Chair will update strategies document based on feedback from Steering Committee and share with the group for review and approval. The group will not meet during July to allow the other work groups time to submit their recommendations with the goal to align recommendations.