

Early Intervention Planning Council
November 14, 2007
Minutes

Members present:

Rhonda Allen
John Brandon
Taren Duncan
Patricia Jones
John Kennedy
Brant Ping

Members not present:

Christina Ball
Doris Clark
Lonnell Conley
Judge Marilyn Moores
Marilyn Pfisterer

Staff present:

Eric Wright
Lyndy Kouns
Courtney Federspiel
Kari Christensen
Daniel Clendenning

The meeting was convened at 8:00 am.

Rhonda Allen: The first item on the agenda for today is the minutes from the October meeting and the approval of those minutes. Everyone's already had an opportunity to take a look at those?

Eric Wright: We did make one correction. Kent Burrow was listed as a member not present. He had resigned in July so his name will be removed.

John Brandon: Move with corrections.

Eric Wright: Thank you John.

Rhonda Allen: If nobody has any objections then the minutes will stand as is with the corrections. The next item on the agenda, do you just want to go in order today Eric? I know sometimes we skip around.

Eric Wright: No, lets just charge through.

Rhonda Allen: Let's move forward with Child Welfare Funding Sources.

Eric Wright: We are in the process of finalizing the report. We're still waiting on a couple of pieces of information from a couple of mental health centers and we've gotten actually all the information from the schools and that's being integrated now so we're actually pretty close to having the draft so I'm hoping before we meet next we would have that draft for you to look at and think about. Unless you want to say anything else Daniel?

Daniel Clendenning: That's exactly where we stand.

Eric Wright: OK.

Rhonda Allen: Thank you.

Eric Wright: Should I just go ahead?

Rhonda Allen: Yes please.

Eric Wright: OK. The next item on the agenda is the revised version of the component 1, which is the Coordinating Agency, which you have before you. Basically you will notice this reflects, I think, most of the criticism and comments that were given last time. We tried to elaborate where we were asked to and we also gave a range, a recommended range of funding from \$275-\$360, we felt that gave a minimum and maximum range. That's where we were in terms of what we thought it would cost to provide this function. At the last meeting I believe we agreed we wanted to provide a range but also something that is reasonable. I hoped the Councilors would be here to talk about that, whether they thought that would fit within the budget scheme but it's a little more than the original idea so we felt that needed to have some wiggle room in there because we did actually add some functions to the original idea. Do we have any comments about that?

John Brandon: I was reading through it and I was thinking about if I was looking at this as someone who was going to respond to it. There are some questions that came to my mind. Does the entity that is applying for these funds have to be locally based?

Eric Wright: That's a good question. What could be the sentiment?

John Brandon: I would think it should be.

Rhonda Allen: I think so.

Eric Wright: Locally based means what? Marion County? Their legal address is located in Marion County? Actually, we've been talking about this as we've been preparing for the survey. Some agencies in other counties provide services in Marion County.

Rhonda Allen: I think they should be within Marion County, have an address within Marion County.

Eric Wright: So legal business address in Marion County.

John Brandon: Or I could look at this and say RFP, let's respond to it from someplace...

Eric Wright: I think the argument there would be that because they have to actually interact with the agencies, they have to be local. You don't want some corporation from Washington applying for that. Any other comments? I'm not sure we have a quorum but with that amendment can I ask for an endorsement?

John Brandon: I have one more.

Eric Wright: Oh good. OK.

John Brandon: This is the part where it talks about Financial Plan and Metrics and it lists three main positions and I don't know if we need to put this in there or not but what about administrative support? It has three people doing the task that are described in this operational plan, are we presuming that it's ok for them to build in administrative support as well or is that something that they are going to be expected to integrate into their current budget?

Eric Wright: What is the sentiment of the group?

Rhonda Allen: I would have assumed that they would have built that in since you say it's the three main positions but I think it might be helpful to specify that we realize administrative support would be key.

Eric Wright: Phrased in exactly that way? We don't want to specify an administrative assistant, however they want to route all the administrative support. Good, OK. That's easy enough to fix. Anything else?

Rhonda Allen: I think this is coming along quite nicely. This is a great document.

Eric Wright: So, can we assume it's been endorsed by this group or how shall we proceed? I think we'll come back to Other in terms of reconfiguration of this group given the election results, which I think we need to talk a little bit about, but I guess this is more of a procedural question because basically at this point what would happen is we would actually take this upstairs to the City County Council office and being the process of getting it on the agenda for the Rules & Policy to push this forward. That would be one option, we could just do that with this one. The other part would be to look at the other pieces alongside it and put this up together as a package. I think we originally talked a couple of months ago about putting it up one piece at a time.

Rhonda Allen: I think so.

Eric Wright: But I can also see with the transition teams both in the Mayor's office and Council would want to see the whole package at the same time. I could go either way on this but our original work plan was to put it forward one piece at a time.

Brant Ping: Do you know who to present it to at this point?

Eric Wright: No, that actually is a good point. I had hoped Councilor Pfisterer would be able to be here, she might be more knowledgeable about the Council transition.

John Kennedy: Would she also be able to help you with that answer in terms of what they are trying to accomplish there in the transition?

Eric Wright: It's only a week old so it's not like there's a huge plan yet. We'll assume most of the group here feels comfortable with the way it is, we'll leave it on the table, I'll touch base with Councilor Pfisterer after this meeting, hopefully before our next meeting and we'll make sure we have a plan we can report back before the next meeting on how we should proceed.

Brant Ping: We can send you with an endorsement since we don't have a quorum.

Eric Wright: I think that's true too.

Rhonda Allen: What I have done at the Regional Services Council when we don't have a quorum is the smaller group makes a recommendation for the larger group so I don't know if even that would be helpful. I don't know if you would still want to call that an endorsement but it's at least some sort of positive recommendation to move forward to the larger group to vote on. If that's helpful to you at this point, I don't know.

Eric Wright: I think maybe that is helpful. We can put that in the minutes that the group present today endorsed the proposal and then we can bring back and recognize that it needs to be voted on when there is a full quorum.

Rhonda Allen: Absolutely. I think that is how we should move forward on that.

Eric Wright: Number four, update on – I'm just going to plow through if that's OK?

Rhonda Allen: That's great.

Eric Wright: The update on the surveys. The survey has actually been fairly finalized, we are in the process of computerizing the instrument so it will basically be online and on paper and our goal will be to do what is called laptop administration so the interviewers, Lyndy Kouns will actually be leading the team of our interviewing staff, the team has been enumerated, we're hiring interviewers. We're still actually waiting on IRB approval I believe, right?

Lyndy Kouns: Yes.

Eric Wright: We've responded to all the criticism and issues they had so it should be forthcoming any day. As soon as that arrives our goal here would be to have the agency – there's two levels of the survey, the agency survey to give us some background information on the agencies and they enumerate the programs that they operate and so what will happen, it will take us November and as far into December as we can go before the holidays start making it difficult to schedule anything, we will contact each of the agencies trying to get the enumeration of the programs so we can do the interview of the program leaders in January and February and I'll still keep us on time. Right now we think – how many agencies have we identified?

Lyndy Kouns: 150.

Eric Wright: 150 agencies we've identified. We are using the number three as the figure we are estimating how many different programs on top of that, there will be 300-400 additional interviews with program leaders about specific programs in Marion County. Since we are going to be doing laptop administration we won't have to worry about entering the data, the data will be in the computer already, the turnaround will be a lot faster. I think we are moving along. Did you want to see the survey one more time?

Patricia Jones: Yes.

Eric Wright: Pat said yes so we'll get you a copy of the surveys one more time. Hopefully you don't have too many tweaks and comments to make.

Brant Ping: Is that going to delay implementation of it?

Eric Wright: We are programming as we speak so there wouldn't be major revisions without screwing up the programming but I still think it's good for everybody to see it again just one more time. Can you make a point to send that out this afternoon?

Lyndy Kouns: Absolutely.

Eric Wright: So you'll get that this afternoon.

Brant Ping: So you ask for responses via e-mail so that way we're not going to hold this until the next meeting?

Eric Wright: Right. We'll assume that if nobody responds before Thanksgiving, that gives you a week, we'll push forward. Unless we get other messages somewhere from the City County Council at this late hour.

Rhonda Allen: Can you refresh my memory on the time frame for this being released to the agencies for a response? What's the goal, the timeframe, to get this released? The survey.

Eric Wright: You mean to actually do the survey?

Rhonda Allen: Yes.

Eric Wright: We'll do the agency level survey in November/December and then the program level survey will occur in January/February and if necessary into March but I'm hoping to have everything wrapped up by the end of February. Basically, we're aiming for our March meeting. If I remember our timeline right we're going to present a draft of what we have in February and then you get the final version of the report of the survey in March. Basically there's two parts of the data, there's the data that will become part of the public database which will describe the individual programs, the contact information which we will then share with 211 and then we will also discuss how we want to use that in terms of developing a case management tool which we had talked about and then the second part which will be a lot of the strategic planning kind of information which is what we will actually analyze and then provide some guidance for this coordinating agency in terms of where the major gaps are. Basically the continuum of care, to try to use the data to populate that to help identify concrete gaps so the coordinating agency know where to perhaps develop services, where there is oversupply and then maybe where the mismatches are. I think we're on schedule for that. Any other questions about the survey?

Eric Wright: This is an update on the mental health services, we've been in touch with all the CEO's of the community mental health centers and all were of course very supportive in helping. We're actually killing two birds with one stone, we're getting their financial data at the same time. We're going to be coordinating a meeting probably within the next month with all of the mental health center directors, all of them are going to come. They're having their child services directors come so we're going to have a little think tank and talk about their perception of where the gaps in the mental health system are and how do we fill those gaps. I was actually told in a recent meeting there is a lot of activity in DMHA under what is called the Transformation Initiative that is being headed up by Denny Jones et al and they have actually come up with some funding recommendations. We're going to connect our conversation with that to make sure what the state is coming up with and we're going to think about some of the local implications and some of the ideas that are being floated at the state level because there is a recognition within the transformation group I understand, the need to expand the capacity for children and adolescent services at the state level. So the question would be is can we dovetail to whatever they're doing. But we already understand one of the major issues is simply going to be the supply of child psychiatric works which is unfortunately very minimal. Schools just are not producing as many as we need.

Brant Ping: Dr Wright, are you going to have somebody voice the Medicaid on that think tank? The mental health centers are pretty cognizant of it but I keep hearing a lot of talk about the fact Medicaid is going the exact opposite direction, that they are paring out specifically children's services, they will no longer pay for those things that they view are related to child services within the welfare system and so they in fact are going in the exact opposite of what you have stated on mental health centers and it might be interesting to see how those two systems are viewing.

Eric Wright: So you think add them to the conversation or separate conversations?

Brant Ping: Well, I would add them. They've got to be aware of it. Gina Eckers for the State.

Eric Wright: OK, we'll add Gina. She's DMHA, not Medicaid.

Brant Ping: That's true, but she seems, last I heard, she was really involved.

Eric Wright: OK, well she's also the Coordinator of the Transformation Initiative. They're both working together.

Brant Ping: Can you think of anyone else John?

John Brandon: No, she's your point person.

Eric Wright: OK, I'll get with Gina. Any other questions about the expanding mental health? You should actually see a draft of something at the next meeting I think. That should happen fairly quickly. And the last item on the agenda before other business is the draft of the Indianapolis Early Assessment. We had said agency, I came up with Indianapolis, Indy E-A-R-S. I thought that was really cute, I guess I was in a marketing mood. At our last meeting we had discussed the idea of perhaps using an existing agency so we started the process of working toward a RFP model like we did with the coordinating agency to describe the services. So this is the first flush, a starting point for a conversation. So I guess what I would hope is that we have a conversation about what this should look like. I think we agreed last time that we would make this sufficiently open so that if an existing agency wanted to apply or another agency that wanted to develop something could, either one could, respond to that. The budget is a challenge here because we're not exactly sure of the volume that might be involved here. We can use the epidemiological estimates we created at the beginning of this process as a foundation for coming up with what we think might be the market and then basically get a cost estimate on a case base and then extrapolate out what we think it might cost. I suspect it's one of these things that would grow over time as word of mouth goes so it might be we have a smaller budget at the front end and then a little bigger budget. And maybe they could get into a situation where they project next years budget based on this years. So it's a question of how we want to structure that. I would be open to folk's impressions. But just to refresh everybody's memory, the idea here was to have the early intervention case management program, someone has suggested NACKS was doing something along that line, but the question would be expanding that, whether we want to build on NACKS or another core organization that is doing something similar. But the idea would be to have a 1-800 number where people could go, call, they're not involved in child welfare yet or not involved in juvenile justice yet, maybe not involved in special education yet but have some critical needs so they can get access to professional support services who could then refer them to appropriate services. That was the original idea.

Rhonda Allen: What would be the purpose of creating a separate agency from NACKS.

Eric Wright: Well, I'm not sure it's necessary. The question is do we want to put money out there to offer to fund upscale NACKS, basically. But I think the only reason I was

reluctant to define NACKS because in July when we were told in the first component not to specify an agency but to leave it more open but the political wheels have turned and there's a change in the administration so there might be a new sentiment about that. I could see arguments on both sides.

Rhonda Allen: Any comments? Everybody looks like they're thinking.

Eric Wright: Do we still have agreement that there's a need here?

John Kennedy: It may be being done in different pockets and maybe needs to be coordinated. I mean I know one service is obviously 24/7 call numbers that takes crisis calls all the time, but maybe that needs to be coordinated with agencies who do additional case management services or...

Eric Wright: Do you think that might be covered under the coordinating agency aspect?

John Kennedy: It could be, yes.

Eric Wright: Because I think this idea, actually the genesis of this, was actually in conversations I had with City County Councilors in the spring last year so this was actually not in our original draft plan.

John Brandon: I wonder perhaps both the survey as well as the meeting you're going to have with the mental health center folks might tell us how much this is needed.

Patricia Jones: Or it it's a structural issue.

John Brandon: Right, or if it's a structural issue or if, as John says, it's a matter of coordination. Maybe if we expand particular types of case management services or availability etc, we'll be able to meet the need we have I just wonder, I think that there's obviously need for more of what's talked about in this idea but I wonder if that survey information and the meeting that you're about to have with the mental health folks might give us a better idea of how much of this is needed. So that might make your job easier in crafting this with that information.

Eric Wright: So it sounds to me, to summarize what you just said, was basically collect a little more information, make an assessment at that point, and come back and either make a recommendation that we don't need to do something like this, there's other ways of doing it or come back with a more developed proposal based on the data set. Now the survey data won't be available probably until February or March so it'll may be a while to get there but I can certainly provide feedback from after the mental health centers meeting. Because my sense would be if we could expand the mental health centers capacity, a lot of what they do in terms of case coordinating would actually happen at that level. The question is sort of getting them into it. I think that NACKS and a couple of other agencies that are doing this, people just thought we needed to expand that to make it a little easier.

John Kennedy: And the availability and accessibility needs to include, in some ways accessibility means also timely and I think the frustration with the community is that a lack of coordination and then once you figure out what door to go in, how long you have to wait. And when families are in crisis you do the initial intervention piece but there needs to be some path that I call second order intervention where there is follow-up and I think that is the part where a lot of families fall apart, is that they are waiting to get engaged in services and I think that's the critical piece. I mean a lot of responders but we need to figure out how to work together. What's going to happen when you can't get in, where there isn't much time, what's your next plan for that?

Eric Wright: So just to summarize what I think you said. It may be a problem more of the existing capacities not enough to be able to respond in a timely way.

John Kennedy: Yes, I think the work needs to be done where we're creating a system that is, that know each other well enough to figure out how to respond and do I have your back if you can't get in.

Patricia Jones: Especially in adolescent care. It's not there. And in crisis parents who are looking for help for their children, it's three months. One mother called all the way to Bloomington to try to set up an appointment, child was in crisis. And getting that appointment and as a school we wanted that appointment, we wanted to make sure that child was OK to attend school because the acting out was happening at school and was escalating and was very serious. Found a number of doctors who didn't see anyone under 18. So getting that adolescent care was the key and was hospitalized and they released him immediately of course and the parent is in catch-22. So how do we, what's the protocol for a parent who even with our assistance, wasn't able to get that appointment?

Rhonda Allen: We miss a window of opportunity with families at that critical point when there's a crisis.

Patricia Jones: That's right.

Rhonda Allen: Because in between crisis everything is fine. And then when they are at crisis point and if we don't have the capacity to intervene at that crisis then we lose them. They fall through the cracks.

John Kennedy: Families need to walk out of an initial experience with an idea of what to do the next time it happens again. So that's the piece.

Eric Wright: So if we were to do that what would need to happen?

Patricia Jones: Parent calls this number, you can have an appointment, this is a crisis, the child is in crisis, we can give you the profile of the student, how long we've been working with them – all of that. But they don't know where to turn. What do we do next? And then what happens?

Eric Wright: I think that is where the City County Council were in terms of they don't feel, or at least I got the sense they don't feel, like the phone numbers you were referring to were out there enough so they don't know where to go.

Patricia Jones: Right.

Eric Wright: You were sort of saying they're out there but they just don't have the capacity to respond.

John Kennedy: Well for instance yesterday I was in a task force meeting for early responders and one of the things we were looking at is if a family in crisis if they walk away with nothing except someone just understood they were in crisis and tried to calm them down and nothing happened then the likelihood the crisis would repeat itself quickly was greater than if they family had been able to sit down and had an intervention safety plan extension. We're looking at all our adolescents runaway behavior from facilities where they are staying as a respite or emergency purposes and if intervention was done prior to entering into that shelter, what was the outcome or if the intervention was delayed and made an appointment or whatever the child was placed in that shelter facility, the likelihood, the hypothesis likelihood that the kids going to run again out of distress if there's not, if something's not happening, if there's not a meeting with the parents. We're taking a look at that, believing that the chance of quieting down crisis is greater if we get people to sit down and talk about it and team up on it. And so that task force is looking at that, try to study that.

Patricia Jones: Parents want a safety plan. Step by step, what do I do next.

Eric Wright: Right, so it sounds to me like maybe there's other motion and we don't even need to think about this?

John Kennedy: I think its part of your process of coordinating this. Who is doing what and when is it happening?

Eric Wright: So again, this is more of an action agenda for the coordinating agency as opposed to...

John Kennedy: I think the services are all scattered around there.

Eric Wright: I'm also concerned about your comment about the capacity. I mean, I see it one way as sort of expanding, well something like YES, expanding access to a YES like program where in fact maybe expands to even other kinds of kids that basically would actually do the crisis intervention and deal with the child and then also integrated them into services. Which as opposed to what I think now is more of a referral model. I mean, the 211 number people call and then its three months before they even see a provider. I think we were trying to find some happy medium.

John Kennedy: As a prototype, it's 24/7. It's for people who have entered into the front door first that are offered any kind, it's like once you get in, once you pass through you're allowed to come back as many times as you need. It's those families that may not know they're there or haven't come through, by the way of law enforcement or DCS. Does that make sense? There are families out there that could get crisis intervention without having to be confronted with juvenile justice.

John Brandon: That's the group we want.

John Kennedy: And so what I'm saying is that there are mechanisms in place already it's just that the criteria for accessibility has to be expanded and coordinated with other agencies so that immediate case management can happen pretty quickly.

Eric Wright: OK.

John Kennedy: But you've got the number, you've got the 24 hour service but you need the expansion in coordination with other agencies to participate in the plan where, what's the criteria for the family to be and what's the response time for this agency?

Brant Ping: So, John, you're suggesting like a broadening of the YES?

John Kennedy: The idea, the idea. It's a good model to look at but I think that there's room. I mean we do a lot of work with NACKS and we do a lot of work with other agencies and we'd like to expand that with mental health centers and we invite people to try to figure out how do we access this quicker. I think the urgency question has to be answered in how quickly is the turn around when you identify a crisis. What doesn't happen is that families don't know that YES could be some place that they could come without a referral from law enforcement or DCS. That's the piece that would have to be expanded. And supported by the community if that's what they want YES to do. I mean it's a front door but it's a front door for child welfare and juvenile justice but it needs to also be a front door for everyone else that might be able to provide ongoing services once the family has identified the crisis. Again, when you can get that family to discuss what they're capable of doing for themselves in that crisis and what plan of action they might need to put in place to get to that next level, that's the critical piece, like Rhonda said, the families seem to, when the crisis has abated in the moment, say OK, well. And they live from crisis to crisis and the idea of intervention and the education that families need as well as the providers is, OK, so between these two instances can we reduce the amount of time, actually increase the amount of time between crisis and what do we need to put in place, whether it's services or natural supports and then when it does kick off are you aware of those signs, this is going to happen. Can you identify those trigger points and when that happens what agency are you going to call? And you have a list of five agencies or you have a person's name at an agency that you can call and say OK. I'm seeing the symptoms and we're ready for a booster shot. I know it in my head but I just can't...

Eric Wright: The question I'm trying to get at is if we have the coordinating agency work on that trying to figure out how to paint the system better do we need to invest more funds basically in expanding the capacity of YES or some other organization to provide that crisis management to the non juvenile justice and DCS involvement.

John Kennedy: Well I think there's going to be some, I mean if you're going to expand service, services, you're looking at some investment, some financial investment. I just think its less if you shared those responsibilities among agencies than if you were to bring in a new body, agency to do it.

Eric Wright: That's fine. Then so the question should be is how should we think about this? I mean we could think about this as investing that in the case management system that exists and basically allocate funding.

John Kennedy: In my mind you want your funding to go direct towards direct services and that there would be any expectation that some of the like the infrastructure costs would be absorbed by existing agencies because that's a huge bill right there to try to curry the infrastructure so in my mind yes it would be, the cost would be towards the actual service going toward the family and kids, does that make sense?

Eric Wright: But how would, say NACKS or YES or any of the organizations that currently have the capacity to do this, how should they get funds funneled to them from the city if we were going to do this/

John Kennedy: Well first of all you have to assess what the current capacity is, I don't know. I don't have a full grasp of that.

Eric Wright: OK.

John Kennedy: Because we know, we know the families that have been identified but we just don't know the families that haven't been identified. Does that make sense? We don't know the families that are on the verge of crisis, we don't know who they are yet because they have to have the crisis.

Eric Wright: Right. I understand the volume question will be challenging but I'm trying to figure out the financing structure here. Should the city give the money to an organization that that doles it out to other organizations or should the city maintain a pot of funds where they say OK we're going to say here's the contracted network if you will, the providers, and then they basically bill the city on a case by case basis and get a flat rate to do that service. I mean, there's a lot of ways to do this. You're smiling Rhonda.

Rhonda Allen: The whole pot of money that the city having and paying on a case by case basis doesn't, that just doesn't seem the most effective way.

Eric Wright: I've just put it out there.

Rhonda Allen: Right. I wasn't really smiling. I was in my mind going 'ooh yeah, no'. I mean, I think we're on the right track. I think we've talked a lot and what I've heard is both things. This needs to be a part of the coordinating agency and then we also need to look at how we bump up what we already have or create something new to supplement what we already have to serve those pre-juvenile delinquents, pre-CHINSed kind of families. I've heard both because I think originally you were wondering if this should just fall under the coordinating agency and we don't need to do this.

Eric Wright: Yeah. That was one thing. The other part was trying to make sure we have enough money because I keep hearing capacity as one possibility would be is we could see this as we could set aside a certain amount of funds annually and that gets administered by the coordinating agency to deal with the network so not only do they coordinate the network but then they can pay the agencies that are participating in the network, that way it gets the city out of the nightmare situation of having to deal with the individual case by case billing that I think we were concerned about.

Rhonda Allen: Right.

John Kennedy: You have a plan for crisis intervention. Don't have a plan for early intervention.

Patricia Jones: Right, so school districts would then access those agencies that have been identified?

Eric Wright: Right.

Patricia Jones: So they could call and make that connection or social workers?

Eric Wright: Right.

Patricia Jones: See I think schools could play a major role, we have those students during the day, we have the facilities, we just don't have the resources when we make those calls. If I'm calling 30 calls, think of a parent. So we would be happy to connect with them. I mean I think most school districts would be happy to connect with them and avoid sentencing and all the others things we do because we don't feel like we have a resource.

Eric Wright: And I think that's the gap we're trying to fill.

Patricia Jones: And I'd very much love to have that connection and not get tape recorder after tape recorder after tape recorder after tap recorder and then say we don't serve someone under 18 after you make all those calls. If you will go through some of those books and call those numbers, they might as well be removed. They are not and it is so frustrating and I work with the parent because she said I can't and I said let me sit down, thinking oh no you're wrong. She was exactly correct. We started logging calls and the number of machines. Really, they need a real person, a real intervention immediately.

Brant Ping: Was this like the Rainbow Book?

Patricia Jones: Yes. And she said I've gone through all the pages. She was calling Bloomington at that point and this was a very serious crisis. We excluded the child because we needed to exclude him, he was explosive at school and she was fearful at home. So what do you do?

John Kennedy: How I look, at that point in time they're in crisis.

Patricia Jones: That's exactly right.

John Kennedy: And if we had crisis responders in the city and so there's a little bit of education the parents will need to get to prevent the next one or what I would call the early intervention but then after the crisis, post crisis, you're looking at some sort of follow along services. A lot of agencies will be able to identify those milestones that would have to, where the family is in their own stages of change and where they would need to go. If it's coming down the pike, they see its happening, there's something going on.

Patricia Jones: And the schools social worker sees it.

John Kennedy: The loss of job, they know to contact certain folks because there seems to be a crisis looming but in the middle of it we've got agencies to deal with that. And then if they need to be re-contacted and supported then that falls to follow-up. And the different case management you have are different tiered than intensive checking in.

Patricia Jones: Someone from the southwest side of Decatur being sent up to Carmel for service.

John Kennedy: Yeah and it'd be community based. We have the capabilities in this city to figure out, identify regional areas.

Rhonda Allen: Will capacity be answered in the survey?

Eric Wright: That is a major feature of the questionnaire.

Rhonda Allen: OK, so I think some of that, won't you get to some of those answers once we get the response from the survey?

Eric Wright: Yes.

Rhonda Allen: OK, so maybe tabling the rest of the discussions until we get, because I mean everybody, I think we're all on the same page.

Eric Wright: That's fine. So we'll table that discussion and we'll continue to work on it but we'll wait for the data to roll in for that.

John Kennedy: The deadline for that data is when?

Eric Wright: The end of February.

John Kennedy: But the survey goes out –

Eric Wright: We'll be starting within the next two weeks. In fact, the more you talk about, every time you talk to an agency if you could remember 'by the way, do you know they're doing this?' sort of prep the field for us, the more you could do that would be helpful.

John Kennedy: When is that Council? With all the providers?

Rhonda Allen: We're actually having that meeting on Friday, so it could be something we talk about. Not all providers, I mean it's a very limited scope of providers but we can at least start greasing the wheels for you.

Eric Wright: Just mentioning that we're going to be calling and this is going to be really helpful for strategic planning purposes so that the more buzz we create the higher the response rate will be. Which the higher the response rate the better the data. And I know people are busy, but...

Brant Ping: How are you going to identify yourselves? When you call?

Eric Wright: We'll be Indiana University Center for Health Policy doing the study for the EIPC. That's what we'll be saying.

Brant Ping: Center for Health Policy.

Eric Wright: Yes.

Brant Ping: Rhonda and I have learned very rapidly that people confuse things very rapidly when we open our mouths and we really want to be specific. At least I know.

Eric Wright: IU's doing the study for the EIPC.

John Kennedy: One of the first things on the agency of the Crisis Response Task Force was to identify all the acronyms and so it was passed around and realized that 25-30 weren't enough. The EIPC wasn't on there so I need to add one.

Brant Ping: We have our Marion County system of care meeting this afternoon so I will start with them.

Eric Wright: That'd be really helpful.

Brant Ping: We'll just start putting the word out.

Eric Wright: Other business. Bart Brown had been appointed at the last meeting, he has resigned because of the election. He is going out with the majority on the Council. So anyway we have that resignation. Mr. Connelly was not re-elected I believe as I understand it, so we'll have a vacancy there. So I guess I'm not sure there's much to talk about other than we're trying to figure out what's going to happen with the EIPC in the changeover of administrations and it's obviously way too early to be talking about that but we do have the same structural vacancies that we had before. The one we'd gotten filled is now in fact open again. I'll work with Councilor Pfisterer on trying to figure out what that means and see to that. I'm not sure if we want to have a December meeting. The December meeting would be the 12th. We're happy to have the meeting but I know the holiday's kind of screw things up for a lot of people. I'm not sure we'll have a lot of progress until we have more of the data in there so I guess I'd be open if you'd want to postpone that meeting and wait until the January meeting.

Rhonda Allen: I know that I'm not going to be around.

John Kennedy: I propose that we convene in January.

Eric Wright: OK, so that would make us January 9th. So our next meeting would be January 9th and in the meantime we will work on the mental health expansion report which we'll have done by January 9th and there'll be some capacity issues in the survey for that too I think. And we'll work on developing this idea a little more in the next couple of weeks and then we'll wait for the survey data. So we'll be in touch.

Rhonda Allen: So January will be a big meeting so we need to make sure...

Eric Wright: Well actually my hope would be the transition process would sort of worked it's way through because we'll have to have the Council nominate another Council member because I think we have to have, the statute says we have to have a Republican and a Democrat. So the Democratic caucus, I'm not sure if that's the right word, would have to put up their nominee. Councilor Pfisterer I think will hopefully continue. Given the leadership change she may need to take on other roles. I don't know. But I will work on working with the City County Council to figure out what's going to happen. We should know what's going to happen by the January meeting so that's help. December's going to be a lot of organizational stuff for the incoming folks.

Rhonda Allen: If there's nothing else, we're adjourned.

The meeting was adjourned at 8:45 am.