Maryland Department of Human Resources
Advisory Council for Alternative Response

Meeting, November 13, 2012
Minutes

**Council Member Attendees:** Dr. Pamela Brown via teleconference, Scott Krugman via teleconference, Janet Forrester Hartge, Dick Paulman, Melissa Rock, David Thompson, Dr. Albert Zachik, Claudia Remington, Sabrena McAllister (for James Trent), Tracy Watkins-Tribbitt via teleconference

**SSA Representatives:** Steve Berry, Carnitra White, Debbie Ramelmeier, David Ayer, Audrey McLendon

**Other attendees:** Sandra Barnes, Allyson Black, Carol Spigner, Lisa Dameron, Paul DiLorenzo, Angela Lagdameo, Megan Lucy, Leslie Rozeff, Brian Schleter, ML Wernecke

**Welcome and Introductions**
Secretary Ted Dallas was unable to attend the Council Meeting. ML Wernecke welcomed the members to the meeting. She commended the Council and the workgroups for the great momentum of the accomplished work.

**Agenda Review**
Facilitator Carol Spigner gave an overview of Agenda items. The October 9, 2012 minutes were approved.

**Workgroup Updates**

**Practice Overview / Feedback**
Carnitra White reviewed that Alternative Response is a change in the current system and investigators mindsets. Some of the changes will include development of new skill sets for internal and external partners and a continuation of skill sets developed for Family Centered Practice. External partners, police, hospitals, etc. will need guidelines and discussion for the change in practice. Local departments should anticipate technical assistance and guidance needed to assist the transition with external partners.

**Practice Workgroup**

**Overview of the Local Collaborative Implementation Planning Process**
David Thompson and Steve Berry, co-chairs presented the Local Collaborative Implementation Plan. The plan to assist jurisdictions with Alternative Response implementation outlined 5 Goals with action steps listed for each Goal. The Co-chairs reviewed there will be 2 types of implementation plans to provide consistency across the state, one plan for larger jurisdictions and one plan for smaller jurisdictions.

*Recommendation from the Advisory Committee: Define success for Goal*
Highlights of each Goal:

**Goal 1 – Build an Implementation Team and Sustaining Community Partnerships**
- Each jurisdiction should define the role of team members. It was recognized that roles will vary depending on the size of the jurisdiction.
- Develop local teams locally as champions of the process. In many cases this is likely to be the Local Care Team or the Citizens Review Panel.

**Goal 2 – Develop a Communications Plan**
- Define message to give internal and external staff;
- Use terminology common for the jurisdiction.

**Goal 3 – LDSS Staffing Decision**
- Provide local jurisdictions with 2 models for staffing
  - Model 1 – for local departments with more than 1 CPS unit: Each unit would be designated as handling either IR or AR cases.
  - Model 2 – for local departments with 1 CPS unit: The unit would handle both IR and AR cases.

*Recommendation from the Advisory Committee: Review current cases with staff to determine if case would have been Alternative Response or Investigative Response.*

**Goal 4 – Practice Development to Sustain Practice**
- Sustain consistent practice and implement in a standard method statewide.

**Goal 5 – Resource Development**
- Each jurisdiction will need to understand the services offered by Local Management Boards.
- Note that new drug / health services will be offered in a year to two.
- Review Community Partners services; could Medicaid services be added?
- What are major services that are missing?

SSA has been keeping staff abreast of the AR practice changes through the Regional Supervisory Meetings, SSA Steering Committee, Affiliate meetings. The LDSS Directors have also been champions for AR.

Once the templates are distributed and reviewed by central SSA staff, technical assistance for implementation will be offered. A standard Power Point presentation and
communications message will be sent to each jurisdiction to assist with stakeholder presentations and education.

Steve Berry’s In-Home Unit staff will be available for technical assistance and the Department will request assistance from the National Resource Center (NRC).

**Update on Training**

The Training Schedule was reviewed (see Alternative Response Training Schedule 2013 handout). Local Teams from all neighboring jurisdictions will participate in the overview session. Specialized training would include risk and safety training that is currently offered to staff. The Alternative Response specialized training is under development.

It was emphasized that the SSA’s first mandate is the safety of the child.

*Recommendations for the Advisory Committee:*
- SSA should develop a coaching role to assist jurisdictions
- Flesh out the training schedule by adding a description of each training activity to include on the matrix and more detail on the intended audience

**Community Partners Workgroup**

Pam Brown and Angela Lagdameao, co-chairs (substituting for Shanda Crowder currently on extended leave) reported on the Community Partners Workgroup’s progress. Five regional forums will be conducted beginning in January 2013 to conclude at the end of February 2013. The Workgroup emphasized a team approach for Alternative Response between the local departments and the stakeholders, building on current relationships.

**Communications**

Brian Schleter reviewed the form letter to share with stakeholders and the map with the implementation phases displayed. A packet of information for the local departments is expected to be available by the end of the year. A Power Point to share with local stakeholders will be available in January 2013. Paul DiLorenzo, Casey Family Programs stated that Casey would be willing to assist with forums or contact a state that has implemented Alternative Response for technical assistance.

**Evaluation Workgroup**

Melissa Rock and David Ayer, co-chairs presented the Progress Report for the Evaluation Workgroup. Draft Recommendations for AR process measures were
reviewed. The measures were developed to ensure that Alternative Response is implemented as it was designed. The Advisory Committee recommended that the evaluation should be developed as a management tool that will provide useful feedback during the implementation period as opposed to a final report in 2014. The Committee also recommended that the evaluation include Focus Groups and Stakeholder groups to give feedback on the implementation.

Policy Workgroup

Dick Paulman and Debbie Ramelmeier reported that the final draft of the policy was distributed and MD CHESSIE changes are under way. Casey Family Programs suggested that DHR present reports to Maryland’s Legislature to show the progress and worthwhile investment of Alternative Response.

Alternative Response Implementation Schedule

The Council reviewed the overall Implementation Schedule and identified several changes to be incorporated in the next version.

ML Wernecke expressed appreciation to the workgroups for their dedication to moving quickly with the changes and plans. The workgroups have been a great asset to the process.

The next meeting will be held Tuesday, December 11, 2012, 1:00 pm – 3:00 pm at 311 W. Saratoga St., Room 1044, Baltimore, MD.