

# IN-ABC

Indiana Association of Behavioral Consultants  
www.inabc.org

Through professional advocacy, support and development, IN-ABC promotes effective,  
ethical and quality behavioral services.

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## 4/16/10 IN-ABC Meeting Minutes

### **2010 Board Members Present:**

**President:** Gail Kahl  
**Vice President:** Sandra Miller-Givan  
**Director (At Large):** CJ Gallihugh  
**Treasurer:** Rob Westcott  
**Secretary:** Sue Bauer

**Members present:** 32

**Call to order:**

**Introductions:**

**President's Report:** Gail Kahl

### **Announcements/Updates:**

- **Leadership Expo.** As per the Strategic Plan, we identified a need to have a time for provider CEO's to come together and have a discussion on what it's like to be in that role. Survey sent out and 30 responses back expressing interest. There is a plan to meet in August. Contact Gail if you have not responded to the survey but are still interested in coming to the Expo.
- **July meeting.** Glendale Library is on the docket to be closed. At this point we have the conference room reserved, if not we might be meeting somewhere else. Look out for a possible change in location for July meeting!

**Treasurer Report:** Rob Westcott (see attachment)

**Secretary Report:** Sue Bauer (see attachment)

**Liaison Report:** Kelly Hartman

- Themes from DDRS perspective, “accountability and change”. New leadership is less willing to let people slide. People are going to be held accountable. The good news is, our part of the industry is seen very positively. Our relationship with DDRS is fantastic right now.
- HSPP supervision. The only service that is not required to be a directly deliverable service. Put in place to make the consultant better not the individual. Put into place after the DOJ reviews. The idea of removing HSPP was presented as a solution to budget woes.
- Bottom line, our revenue from state taxes funds our budget. If we are spending less money and the state is not meeting their budget for state revenues, there is less money available to pay for us. The Federal government matches state funds. For 17 straight months, we did not meet even revised projections of revenue. February 2010 was the first month that we came even close to the projections.
- The state is paying \$44 million a month for RHS services. This week, therapies and day services were saved, RHS, Respite, CHIO were cut by 7%. See state memo.
- Funding cuts. Although we are not set for cuts right now, it is possible that the industry funding woes will get more difficult before they improve. We encouraged everyone to be preventative fiscally to assure we could all survive any potential cuts in the future.
- In California providers have not been paid for months and months, people were put in danger, lawsuits were filed. This bought us some time to consider how budget cuts would impact and what providers could absorb without putting people in danger.
- Make sure you go to team meetings!!!
- Changes at the State:

Peter Bisbecos, Director of DDRS has submitted his resignation.

Julia Holloway- will be promoted from Deputy Director to Director  
Doug Elwell- who has subcontracted with the state and has knowledge about medicaid, medicare, policy, reimbursement issues, is coming to DDRS to be Julia's support.

Mike Hedden - has retired and Greg Macaloon has replaced him as VR Director  
Greg Jinks - is now in charge of BDDS

Kelly Calitsa- left and Tracy Myszak has replaced her as Director of Client Services.

"Retooling" Possible you will see some structural changes at the state level

- **Transitions from state operated facilities** (Logansport, Richmond State, etc.)  
There are reportedly still 139 people ICF/MR (certified) beds. These people will be considered for waiver services. If you've had experiences in transitioning individuals, please send Kelly input. She would like specific feedback on transition protocols.
- **Care Select.** Care Select allows individuals to be assigned a doctor and a nurse is supposed to be assigned to coordinate care of needs. If you have feedback on Care Select, contact Kelly.
- **Dual Diagnosis Task Force.** We work with a lot of people who are dually diagnosed. Depending on which state, whether DD or MD as primary diagnosis depending on what funding available. The task force wants to see if there is opportunity for blended funding. This could be especially helpful for people who don't fit on either side and could get better care from both sides. John Dickerson and Steve McCaffrey are co-chairing the task force and will be meeting monthly on how to best serve people with dual diagnosis. If you have any ideas, send to Kelly.

### **Committee Reports:**

#### **Ethics Committee:**

Fritz Kruggel

Received one complaint at the beginning of the week. The committee is looking into that now.

#### **Professional Credentialing Committee:**

Kim Adkins

- We are at 65 RBC's. Welcome committee members. CJ, Jim, Kim
- Present plan is to continue talking about the next steps for certification and licensure. At this time waiting for the right opportunity. Possible theme for first e-letter. Can do presentations at the conference on this.

**Professional Development Committee:**

**Kelly Howard**

- Conference dates October 28th and 29th. Tentative schedule created. Very positive and useful feedback from last years conference. Room rates went up to \$81 a room (\$2 increase). Five groups committed.
- Erasing the Distance is set to present at the conference. "Shedding Light on Mental Illness through Theatre". For further information on this organization see: [erasingthedistance.org](http://erasingthedistance.org)
- We need 9 seminars and already have 4 of the 9 filled. A lot further along than we have been in years past.
- Will try to get registration out in May.

**Risk Management:**

Steve O'Dore:

- Met a few times since the conference. Have taken several steps toward looking toward physical interventions and the risks it puts us and the clients in. Throughout last year, we have spent time on that subject, but we also need to look at other risk areas.
- One topic discussed was Human Rights Committees and how they function, the whole concept of state wide HRC's. Discussions indicated non-interest in HRC's and what's going on there. Most people felt satisfied with current HRC situation.

- Focus efforts back on physical interventions piece. Surveys completed of membership and providers. Survey results showed a lot of concern about the idea of physical intervention and how we deal with it or don't deal with it in the state. Took this feedback to the Residential Facilities Council. Ready to take it to the next step and work through it a little bit. Hope to meet a few more times before the next meeting and hope to have some steps on how to move this forward. Very interested in feedback and happy to have people come to meetings.
- Feel that physical intervention issues is a tremendous liability and carries risk that causes concern. A lot of contacts made (outside of IN-ABC) through the Autism society, Res Facilities council, etc. People have concerns about how things are done, no system, no uniform approach. See a lot of benefits of being a catalyst for the state to work on this issue and would be a positive effect. Some skeptics such as companies that provide services to people with serious behavioral concerns that believe physical interventions are never required.
- Agencies often take individuals that are currently being served by someone else. Required to attend transition meetings. There are changes being made in the transition format regarding things that are to be taken care of before the person moves. Provider has to ensure that all these things are in place. The next step is asking that form to be modified, that certain things need to be in place for people who may have difficulties with transitions or dangerous behaviors. Will probably be hearing about what the committees actual proposals are. Hoping to go to the residential facilities council and add certain items to the transition form. Trying to avoid inappropriate placements. This is a very large project, need to focus and be very specific. Finding a good amount of support but need to define.

**Marketing committee:**

Newsletter (from strategic plan)

Looking for members, send e-mails to Gail or [indianaabc@aol.com](mailto:indianaabc@aol.com)

*Respectfully submitted by: Sue Bauer, Secretary*

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**April 16, 2010**

## **Treasurer Report**

### **Current Balance / Funds as of 4/16/10:**

**Checking:       \$13,274.47**  
**Savings 1:       \$ 5022.12**  
**Savings 2:       \$ 2000.00\*\***

**Total Funds:   \$20,296.59**

**[\*\*Rainy Day Fund opened 1/11/10 with a \$1000 deposit for 2009 and 2010]**

### **Membership Revenue for 2010:**

**Membership Revenue 2010 = \$ 9,115**  
**Membership Revenue 2009 = \$11,776**  
**Membership Revenue 2008 = \$10,968**  
**Membership Revenue 2007 = \$ 9,450**  
**Membership Revenue 2006 = \$ 6,782**

### **Expenditures for the Previous Quarter:**

**\$120 for Liaison business cards, \$2500 for liaison stipend, \$500 for web fees stipend, and \$50 CEU authorization from Indiana Professional Licensing.**