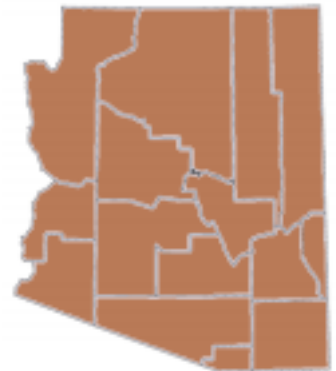


AHCCCS SOUTH  
INDEPENDENT OVERSIGHT  
COMMITTEE

2020 ANNUAL REPORT



# ARIZONA

INDEPENDENT OVERSIGHT  
COMMITTEE

February 2, 2021

The Honorable Karen Fann  
President, Arizona State Senate  
1700 West Washington Street  
Phoenix, Arizona 85007

The Honorable Russell Bowers  
Speaker, Arizona House of Representatives  
1700 West Washington Street  
Phoenix, Arizona 85007

Dear President Fann and Speaker Bowers:

On behalf of the Arizona Department of Administration (ADOA) Southern Arizona Independent Oversight Committee, it is my pleasure to present to you the Annual Independent Oversight Report for Southern Arizona. The report has been prepared in accordance with the requirements of A.R.S. § 41-3804(G).

Please contact me at 520.730.8763 or Barbara Carling, Vice Chair at 206.909.9093 if you wish to discuss the contents of this report. Thank you for your support of our work.

Sincerely,

Ken Karrels, Ph.D.  
Chairperson  
Southern Arizona Independent Oversight Committee

## **Responsibilities**

As outlined in A. R. S. 41-3804 E:

Each Committee shall provide independent oversight to:

1. Ensure that the rights of clients are protected.
2. Review incidents of possible abuse, neglect or denial of a client's rights
3. Make recommendations to the appropriate department director and the legislature regarding laws, rules, policies, procedures and practices to ensure the protection of the rights of clients receiving behavioral health and developmental disability services.

2020 was a challenging year due to Covid 19 reaching Arizona in late February-March. The virus greatly hampered the Committees' ability to perform many of the duties required, in particular the ability to conduct site visits, conduct in person meetings, and, in many cases, recruitment efforts.

With the assistance of ADOA, the Committee was able to move quickly from in-person means to an online platform. Consequently the Committee was able to meet 10 times during 2020. Eight of those meetings were held virtually. The online platform has been successful and will remain in place as long as the dangers of the virus are present. This will be essential in recruiting new members from outlying areas.



## Membership

The Southern Arizona IOC currently has 9 all volunteer vong members. The members are diverse, extremely committed and dedicated an average of 3-4 hours monthly to their IOC work. We are fortunate to have representatives from ADOA and AHCCCS serve in the role of liaisons and support. Regular representatives from numerous Behavioral Health organizations and our monthly meetings which has proved invaluable.

Ken Karrels, Ph D. Chair/Medical

Barbara Carling, MSW Vice-Chair/Professional

Joe Mucenski Family Member

Joanna Keyl Coyote Task Force/ Cafe 54

Sharon Faulkner-Gillespie Foster Care Licensing Coordinator

Phyllis Grant Children and Young Adults Foster Parents

Susan Hyder Family Member/Advocate

Sergeant Jason Winsky Mental Health Support Team, Tucson Police Dept. Susan

Moreno LOA/Family Member

Tyson K. Gillespie, MSC, LA Executive Director, Desert Rose & ACT Teams

Community Partners

In addition we are grateful for the continued support from guests representing numerous organizations:

AHCCCS Division of Community Advocacy and Intergovernmental Relations

Arizona Complete Health

Mercy Care

Banner University Health Plan

United Healthcare

Various Provider Agencies

Larry Allen ADOA liaison

Fredreaka Graham AHCCCS liaison

## **Site Visits**

Due to the virus only one site visit was conducted during 2020. Members were understandably concerned about visiting facilities both for their own and client safety.

### Dempsey House

Unlicensed facility housing clients referred by La Frontera.

Areas of concern were communicated to facility management and the IOC:

1. No heang in bedrooms.
2. One client reported feeling unsafe.

## **Special Populations**

COVID has impacted the children significantly. Children have not received behavioral health services in person. In addition foster care families receiving virtual visits have caused barriers in the reunification process. There are also concerns that DCS is prolonging supervised visits with Bio parents even aer the Bio parents have progressed well into their case plan. In addition this creates a problem with a shortage of staff to supervise them.

## **Crisis Intervention Team**

The Crisis Intervention Team (CIT) is a community partnership of law enforcement, mental health professionals, individuals who live with mental illness, their families and other advocates. It is a police-based crisis intervention training program provided to Tucson Police and Sheriff Departments.

In 2020 as part of the program over 50 additional Police and Community Service Officers were trained in mental health first aid and deescalation.

In coordination with the Pima County Sheriffs' Department, CIT was converted to an online format and will be delivered in 2021.



## **Crisis Response Center**

The Crisis Response Network provides crisis call center services to help individuals and families get connected to the help they need. They run a 24-hour peer-run Warm Line, Serious Mental Illness (SMI) determinations, mobile team dispatches, crisis transportation services, emergency room-based assessments, Department of Child Services (DCS) rapid response and crisis stabilization services in Pima County.

In 2020 there was a notable increase in Crisis Calls due to the pandemic, however the network expanded their hours and were able to stay open throughout the year, thus enabling them to manage the increase in patients brought to them by the Tucson Police Department.

There are numerous planned changes to Title 36 including expanding the language to allow for clients with substance use disorders to receive more services. This should be a deliverable in 2021.

## **Training**

1. Trauma Informed Care Training -- *Training given providers to aid in understanding the impact of trauma on clients. Condensed version given to IOC.*
2. QM Portal training provided by AHCCCS
3. Mental Health 1st Aid



### **Top Objectives for 2021**

1. Increase site visits once health restrictions are removed.
2. Assign one committee member to manage each sub-committee.
3. Increase review of IAD reports. Assign committee members a sub-category to review i.e., SMI, SMI-Special Assistance, Child/Adolescent, Death, Accidents, etc.
4. Re-institute monthly meetings of the 3 IOC's chairs. These meetings will be coordinated by ADOA.
5. Actively recruit from outlying areas. Develop sub-committees to focus on two of those areas.
6. Develop Annual Report sub-committees under the lead of an Annual Report "manager".