

**New Jersey Behavioral Health Planning Council**  
**Meeting Minutes,**  
**August 9, 2017 10:00 A.M.**

**Attendees:**

Christopher Lucca	Connie Greene	Ksenia Lebedeva	John Calabria
Marie Verna (P)	Michael Litterer	Phil Lubitz	Rocky Schwartz
Pamela Taylor	Winifred Chain	Marie Snyder	Lisa Negron (P)
Michael Ippoliti	Damian Petino (P)	Cheri Thompson	

**DMHAS, CSOC & DDD Staff:**

Geri Dietrich	Mark Kruszczyński	Donna Migliorino
Donald Hallcom	Yunqing Li	

**Guests:**

Alric Warren (P)	Julia Barugel (P)	Roderick Bell (P)	Nick Loizzi (P)
Louann Lukens	Rachel Morgan		

**I. Welcome / Administrative Issues / Correspondence**

- A. Quorum reached.
- B. Announcement of the letter that Phil sent to the legislators regarding the proposed merge of DHS/DMHAS with Department of Health
- C. Details of Minutes
  1. Discussion on the desirability of the Planning Council minutes to contain de-identified statements of participants (when possible).
- D. Minutes from July 12<sup>th</sup> meeting approved.

**II. Subcommittee**

- A. Housing/Data/Advocacy
  1. SHA will be putting The Planning Councils Housing Data in their publication.
  2. Discussion on next steps
    - a. Marketing: to who?
    - b. We must first mobilize Planning Council to distribute document to stakeholders
    - c. Idea for members of the Planning Council to test the contracts/links in the draft SHA document.

**III. Community Mental Health Block Grant (CMHBG) Application- Mental Health [Dr. Yunqing Li]**

- A. Draft of 2018-2019 application is almost done
- B. SMHA welcomes input and feedback on the CMHBG from the public and Planning Council.
- C. Review of 4 levels of care see WebBGAS
- D. Planning Steps
  1. Criteria 1: Comprehensive Community-Based Mental Health Systems
  2. Criteria 2: Mental Health System Data Epidemiology (Unmet Needs)
  3. Criteria 3: Children's Services
  4. Criteria 4: Target services to rural older population and homeless
    - a) 25 PATH entities
    - b) Supportive Housing (SH) service expansion
    - c) Rural counties: 25%< of a county's population lives in a "rural" data as defined by US Census Bureau

- i. 7 Certified Community Behavioral Health Clinics (CCBHCs), 1 is in rural part of Atlantic County.
    - ii. S-COPE and MLTSS programs are for elderly populations; Eligibility age is 55 or older.
  - 5. Criteria 5: Description of management systems of SMHA
    - a) Training programs
- E. Planning step 2: Unmet needs
  - 1. Surveys
  - 2. CLD
  - 3. Obtain input from stakeholders
  - 4. Prevalence and Incidents of SMI
    - a. 5.4% adult population has Serious Mental Illness (SMI) (median estimate)
    - b. 3.71% (lower range estimate )
    - c. 7.11% (upper range estimate)
  - 5. 2016 - 375,825 Adults w/ SMI; of those 128,608 unduplicated consumers with SMI served (34.2% of individuals w/ SMI)
  - 6. 2016: 291,258 older adults in NJ
  - 7. 2015: 2,523,146 adults age  $65 \leq$  ; this is an increase of 291,258 between 2010 – 2015.
  - 8. Homeless, Older adults, , LGBTQ, Criminal Justice
  - 9. Need for client level data (CLD) system.
  - 9. Suggestions
    - a.) Homeless services: Exclusionary criteria for IOC, PACT
    - b.) Increase in demonstratively proven improvements in cultural & linguistic competence
      - i.) Comment on importance of Linguistic competence in system of care
      - ii.) Comment: 26% possible reduction in Block Grant
      - iii.) Comment: Importance for increase resources
      - iv.) Comment larger discussion is about gaps

**IV. Substance Abuse Prevention and Treatment Block Grant (SAPTBG)- [Dr. Donald Hallcom (see hand-out)]**

- A. Client Table 3: Those served vs. in those in-need of substance abuse (SA) services.
- B. Significant gap between “need” and “served”.
- C. Planning Table 5C
  - 1. Alternate pain relief prescriptions
  - 2. Target populations
- D. Table 1
  - 1. Comment: Lack is attention of drug problem in suburban Camden Co.; recommendation to target suburban population. [ Suggestion that this comment could be placed in SAPTBG application in the “Critical Needs/Unmet Gaps” section.
  - 2. Comment: Challenge of WebBGAS is that SAMHSA sets up [somewhat arbitrary] categories of data entry that must be checked-off.
  - 3. Suggestion that the (NJ Single State Agency (for substance abuse treatment and prevention) Substance (SSA) edits the Block Grant Application “Planning Section” 1 and 2 to include unmet needs in suburban areas

**V. Children System of Care Block Grant [G. Dietrich]**

- A. 2007: 300 youth received out-of-state care in residential treatment centers (RTC), by 2017 there was one child receiving out-of-state RTC services
- B. 2003: Average length of stay [in RTCs] was 407, by 2016 the average length of stay was 267 days.
- C. Decrease in use of youth detention centers.

D. Review of utilization management data found on DCF website. See <http://www.nj.gov/dcf/childdata/continuous/index.html> and <http://www.nj.gov/dcf/childdata/interagency/index.html>

E. Block Grant

1. Continue- to be trauma-informed system of care
2. Behavioral Health Homes
3. Suicide Prevention Methodology: SAMHSA asked DHS/DCF not to include this as a goal/objective within the Mental Health Block Grant. DCF will continue to track suicide prevention activities  
However, the outcomes will not be included under “Goals/Objectives”. The data will appear in the Environmental Factors narrative under Suicide Prevention.
4. CSOC will add a goal and objectives to address substance use services and supports.
  - a.) Question: Plan for transition youth; this is an issue/ major gap; families are unsure of what the DCF transition plan is; the stated DCF plan does not run smoothly.  
Answer: The DCF Office of Adolescent Services plans to present an overview of services and supports to the Planning Council. Transitions will be discussed.

**VI. Review of WebBGAS [M.Kruszczyński]**

A. See <https://bgas.samhsa.gov/> The public can view the application, using the credentials provided during the meeting/conference call.

**VII. BHPC Approval**

A. Motion made and carried to allow the Chairman of the BHPC to approve CMHBG/SABG application w/the caveat that the SMHA will consider all reasonable suggestions for revision.

**VIII. Comments**

- A. Affordable Care Act (ACA): concern over federal cuts to staffing to help people enroll in healthcare exchanges; time to register in healthcare exchanges has been reduced.
- 1.) The 3yr grants have run-out and haven't been renewed
- B. Elimination of carve-out for ACA registration replaced w/ First Episode Psychosis (FEP) / CSC set-aside.

**IX. Meeting Adjourned**

A. Next Meeting of the Planning Council,  
Wednesday, September 13, 2017, 10:00 am  
222 South Warren Street, Trenton NJ 08625, Room CR-1000

B. Proposed agenda topics:

1. Overview of DMHAS's substance abuse services and programs.
2. Overview of DCF Office of Adolescent Services (OAS).

C. Planned Subcommittee Meetings (9/13/17):

9:00: Membership subcommittee  
12:00: Housing/Advocacy and Data