

New Jersey Behavioral Health Planning Council
Meeting Minutes,
July 10, 2019 10:00 A.M.

Attendees:

Darlema Bey (Co-Chair)	Phil Lubitz	Winifred Chain	Julia Barugel
Francis Walker	Tonia Ahern	Michele Madiou	Suzanne Smith
Tracy Maksel	Robin Weiss	Pamela Taylor	Suzanne Borys
Damian Petino	Maryanne Evanko	Patricia Matthews	Cindy Aviles
Joe Guttstein (p)	Barbara Johnston (p)	Marie Snyder (p)	Rachel Morgan (p)

DMHAS, CSOC, DDD, DMAHS & DoH Staff:

Geri Dietrich	Mark Kruszczyński	Donna Migliorino	Heather Reid
Irina Stuchinsky (p)	Yunqing Li	Summer Kellers	

Guests:

Kurt Baker	Nina Smuklavskaya	Wendy Rodgers	Erin Muehleisen
Anne Smullen-Thieling	Maria LaQuaglia	Rachel Morgan (p)	

(p) Indicates participation via conference call.

I. Welcome / Administrative Issues / Correspondence / Announcements

- A. Introductions
- B. Quorum Reached: 20 of 38 member-participants (53% attendance).
- C. Darlema Bey (Co-Chair) ran the meeting.
- D. Minutes from June 12, 2019 meeting approved (with minor edits)

II. Community Mental Health Services Block Grant Application 2020-2021: Adult Services (Donna Migliorino, DMHAS) [The Public can view the Block Grant Applications via <https://bgas.samhsa.gov/Module/BGAS/Users>, Username: CitizenNJ, password: citizen]

A. Planning Step1: Assess the strengths and organizational capacity of the service system to address specific populations

- 1. Priority/services must be given to adults with serious mental illness (SMI) and youth/ adolescents with serious emotional disturbances (SED).
- 2. Target Populations include:
 - a. Individuals with co-occurring disorders (SMI and substance use disorders (SUDs)
 - b. Deaf and hard-of-hearing populations with SMI/SED
 - c. Individuals of diverse ethnic, demographic, socioeconomic and lifestyle groups. Multicultural service to be provided

B. Planning Step 2: Identify the unmet needs and critical gaps within the current system

- 1. Data Systems
- 2. First Episode Psychosis (FEP)/ Coordinated Specialty Care (CSC)
 - a. Coordinated Specialty Care is a collaborative, recovery-oriented approach to treating First Episode Psychosis based on the Recovery after an Initial Schizophrenia Episode (RAISE) Model.

- b. As of State Fiscal Year 2019 the New Jersey CSC programs have served over 266 clients total that prompted an expansion of service per agency from serving a caseload of 35 clients to up to 70 clients. An increase of clinical staff from 5.2 FTE to 6.8 FTE was also added to accommodate the increased client service. The increase in the block grant dollars, specifically the 10% set aside, provided NJ with an opportunity to increase funding to the three agencies providing CSC services and expanding caseload capacity.
 - c. Additionally, DMHAS is assessing the options for a “step-down” program for those who either complete the 2 years of service in the CSC program or fall out of the range of CSC program inclusion criteria.
 - 3. Homeless Adults with SMI
 - 4. Older Adults with SMI. To meet this need the SMHA is expanding its Statewide Clinical Outreach Program for the Elderly (S-COPE), S-COPE provides crisis intervention and stabilization, consultation, and training for the management of mental health and behavioral issues in older adults (55+) residing in nursing homes and State-funded residential care facilities.
 - 5. Additional Service Needs for LGBTQ populations
 - 6. Expectant and New Mothers. Moving on Maternal Depression (MOMD) Initiative. In August 2018, New Jersey was one of three states awarded a request for proposal from the Center for Law and Social Policy (CLASP) through its Moving on Maternal Depression (MOMD) initiative. The 18-month grant provides technical assistance, which is administered in the form of monthly calls with CLASP and other participating states; site visits with CLASP; and a conference with other states on promising practices toward serving populations with maternal depression
 - 7. Services for Individuals with SMI and Criminal Backgrounds
 - a. Pre-booking diversion
 - b. Post-booking diversion
 - c. Municipal Court Liaison (MCL) is a case manager/municipal court liaison, stationed at a Municipal Court who provides individual consultations to the judges and attorneys, upon request regarding issues of consumers with SMI.
 - i. This often results in diversion to treatment which the liaison facilitates.
 - ii. Funded in Jersey City and Atlantic City but plans to be expanded to municipalities within Passaic, Essex, Ocean, Monmouth, Mercer, Camden, Gloucester and Cumberland counties
 - 8. Gaps observed by the NJ Behavioral Health Planning Council
 - 1. Older adult populations.
 - 2. Potential barriers to medication assisted treatment (MAT).
 - 3. Resources for youth leaving juvenile detention centers.
 - 4. Increased attention to the knowledge base of front-line staff at contracted behavioral health agencies .

D. Planning Step 3: Priority Areas and Performance Indicators

- 1. Housing services in Community Support Services (CSS)—Consumers who remain in CSS during the fiscal year as a proportion of total consumers served in CSS.
 - a. Baseline: The percentage in FY 2018 was 94%. The percentage in FY 2019 is not known at the moment.
 - b. First Year Target: The percentage of consumers who remain in CSS during FY 2020 will be no less than 85% of total consumers served in CSS.

- c. Second Year Target: The percentage of consumers who remain in CSS during FY 2021 will be no less than 87% of total consumers served in CSS.
 - 3. Olmstead Access to Service/Occupancy Rate-- Improved Utilization of Housing Service Slots measured by occupancy rates of Community Support Services (CSS) housing units.
 - a. Baseline: SFY18, 96.6% occupancy rate. SFY19: 95.9% occupancy rate
 - c. First Year Target: SFY2020: 96% targeted occupancy rate.
 - d. Second Year Target: SFY2021: 97% targeted occupancy rate.
 - 4. First Episode Psychosis (FEP)/Coordinated Specialty Care (CSC)
 - a. the three CSC programs had over 520 referrals and have treated 266 clients in their programs.
 - b. New Jersey plans to continue utilizing the 10% set-aside funding in the FY 2020-21 to support these three CSC teams in providing evidence-based services for individual with FEP.
 - c. With increased demand for FEP services, the CSC programs expanded from serving 35 clients to 70 clients per agency and increased clinical staff from 5.2 FTE to 6.8 FTE levels in FY 2019.
 - d. Performance Indicator: Medication adherence among clients who need psychotropic medication prescribed for FEP treatment.
 - i. Baseline: SFY 2018, 78.4% of clients adhered to medication regimen. Approximate 80% of clients adhered to medication regimen in SFY 2019.
 - ii. First Year Target: 80% of clients will adhere to medication regimen in SFY 2020
 - iii. Second Year Target: 82% of clients will adhere to medication regimen in SFY 2021.
 - 5. Systemwide assessment for delivering services to diverse populations—Proportion of agencies that have written Cultural Competence Plans. The goal is for all DMHAS contracted agencies to have a Cultural Competence Plan in place.
 - a. Baseline: The establishment of a baseline is still in process and expected to be completed in SYF 2021.
 - b. First Year Target: 50% of all contracted agencies will have Cultural Competence Plans in place in SFY2020.
 - c. Second Year Target: 100% of all contracted agencies will have Cultural Competence Plans in place in SFY2021.

III. Community Mental Health Services Block Grant Application 2020-2021: Children’s Services (Geri Deitrich, NJ Division of the Children’s System of Care (CSOC)) [The Public can view the Block Grant Applications via <https://bgas.samhsa.gov/Module/BGAS/Users>, Username: CitizenNJ, password: citizen]

- A. New Leadership at CSOC may result in delayed reporting of children’s services information in the Block Grant.
- B. Expansion of Behavioral Health Home to integrate mental health and physical health.
- C. Ensure equitable access of services.
 - a. CSOC is working with NJ State Medicaid (DMAHS)
 - b. Increasing services to populations age 0-5 years.
- D. Increase in use of evidence-based practices (EBPs), at Child Protection and Permanency (CPP),

both in terms of the number of EBPs and in the number of children served by those programs.

IV. Substance Abuse Block Grant (Suzanne Borys, DMHAS) . [PowerPoint sent via email to all members/associated of the Council on 6/7/19], hard copies distributed at the meeting itself.].

A. Increased federal funding for substance use disorder initiatives, which will be used in part to support some of the following:

1. Support Teams for Addiction Recovery (STAR)
2. Peer-Run Phone Check-in Service
3. New RFPs coming for recovery services for college-aged/college-based populations
4. Three regional SUD Family Support Centers, based on evidence-based practices
5. State Opioid Response (SOR) Funds to be used for SUD services for older adult populations
6. Creation of Peer Addiction Recovery Network, (Medicaid rolled out, eff. 7/1/19)
7. Maternal Wrap Around Program. Six centers across the state to provider SUD recovery and prevention services for expectant and new mothers.
8. Prison population: Pre-release and post-release, using performance-based payment system
9. Office Based Addictions Treatment (OBAT) to be in 40+ agencies
10. Replacement of HIV population performance indicator (due to low HIV infection rates in NJ) with an indicator to measure that increased use of MAT.

B. Comments from Council Members

1. [Despite federally acknowledged decrease in the state HIV infection rate] there are anecdotal reports of an increase in HIV infection rates in Camden County.
2. What about prevention and services for those with cocaine and methamphetamine addictions?
3. Anecdotal reports of prisoners whom are participating in state-funded SUD treatment programs being released from incarceration without sufficient MAT prescriptions.
4. What is the viability of DMHAS using the DCF “CYBER” [i.e., client level tracking] system?

V. Presentation of the Family Support Organization (J. Barugel) [Postponed to August 14, 2019) to give the presenter ample time to share information about this important topic]

VI. State Partners Involvement

A. NJ Department of Education (Damian Petino)

1. Assistant Commissioner C. Marano will be retiring 8/31/19. Peggy McDonald will be Acting Assistant Commissioner effective 9/1/19.
2. Upcoming Conference on School Equity, 7/31/2019.

B. NJ Department of Health (as reported by P. Lubitz)

1. The previously planned listening sessions on the state psychiatric hospitals will be postponed indefinitely due to the departure of the DoH Commissioner and Assistant Commissioner.
2. The NJ Public Defender’s Office will have court date on NJ state psychiatric hospitals on 7/19/19 at 11:00 am in the Newark Court Building, on South Walnut Street, Newark, NJ. [This proceeding was subsequently cancelled.]

B. Juvenile Justice Commission (JJC), (Francis Walker)

1. September 2019 JJC will be honoring Recovery Month. A “Recovery Walk” will take place in September.

VII. Subcommittee reports

A. Block Grant

1. Met on 7/10/19. See today's minutes from the General Meeting (see above) for more information on the 2020-2021 CMHBG and SABG Applications. The federal deadline is 9/1/19. However other internal state deadlines are much earlier
 - a. Draft must be vetted with the Planning Council, with DMHAS Assistant Commissioner, then with DHS Commissioner, and then with the Governor's Office.
 - b. Writing is ongoing,
 - c. Progress can be tracked via the WebBGas federal website (see above).

B. Advocacy (D.Bey)

1. Working on draft letter from the Council to Assistant Commissioner Mielke to advocate for improved, consistent knowledge base of all front line staff at behavioral health agencies contracted by DMHAS.

C. Membership (M. Kruszczyński)

1. Application materials received from two individuals. Both applications are approved by the subcommittee on 7/10/19 for submission for the Assistant Commissioner for deliberation. Information on those decisions will be sent out at the appropriate time.

VIII. Announcements, Adjournment & Next Meeting

A. Phil Lubitz is to receive NAMI NJ's Ann Klein Advocate Award.

B. Winfred Chain has recently received an award from NAMI NJ Act Now Program.

C. Darlema Bey recently attended the ISMICC Meeting in Bethesda, MD.

D. Next meeting of the NJ BHPC will be held on Wednesday, August 14, at 10:00 am at DMHAS Headquarters, 5 Commerce Way, Suite 100, room 199a.

1. Anticipated Subcommittee Meetings on 8/14/19:
 - a. 9:00 AM, Block Grant
 - b. 9:15 AM Membership
 - b. 12:00 PM, Advocacy

E. Meeting Adjourned