

**NEW JERSEY BEHAVIORAL HEALTH PLANNING COUNCIL**  
**August 11 2021, 10:00 am**

**This meeting was conducted exclusively through MS Teams video teleconference & conference call**

**Participants:**

Phil Lubitz (Chair)	Darlema Bey(ViceChair)	Patricia Matthews	Lisa Negron
Julia Barugel	Winifred Chain	Connie Greene	Joe Gutstein
Suzanne Smith	Donna Migliorino	Damian Petino	Robin Weiss
Heather Simms	Francis Walker	Connie Greene	Barb Johnston
Rachel Morgan			

**DMHAS, CSOC, DDD, DMAHS & DoH Staff:**

Yunqing Li	Jonathan Sabin	Wyndee Davis
Mark Kruszczyński	Helen Staton	Suzanne Borys

**Guests:**

Nina Smukuluvasky	Wendy Rodgers	William Cole
Anne Smullen-Thieling		

**Minutes:**

**I. Administrative Issues/Correspondence, Review of Previous Meeting Minutes Phil Lubitz**

- A. Attendance: Quorum reached (17/39 = 43.5% attendance)
- B. Review of Minutes of Minutes of 7/14/21, Minutes approved.
  - 1. Clarification of discussion that block grant funds cannot be used for incarcerated populations.
- C. Consent Decree between US Department of Justice and NJ Dept. of Corrections about Edna Mahan Correctional Center for Women  
(See <https://www.justice.gov/usao-nj/pr/justice-department-reaches-proposed-consent-decree-new-jersey-resolve-claims-edna-mahan>)

**II. Community Mental Health Services Block Grant And Substance Abuse Prevention Treatment Block Grant (Donna Migliorino, Yunqing Li, Suzanne Borys, Helen Staton, Mark Kruszczyński, Nick Pecht**

Public Access to Block Grant Applications (WebBGas)

<https://bgas.samhsa.gov/Module/BGAS/Users>

User name: citizennj

Password: citizen

- A. Overview
- B. Submission Deadline 9/1/21
- C. Review of FFY 2022-2023 Block Grant Application: CMHSBG / Mental Health (YL)
  - 1. Discussion in WebBGas

2. Comments from public
  - a. How are we moving along with quality improvement (continuous measurement)? [See below, III.F.2]
  
- D. SAPTBG (Suzanne Borys)
  1. Gaps Observed by Council (SSA)
  2. Overview Previous Issues
    - a. Key Barrier to MATI is transportation and homelessness
 

Q: Are agencies being given extra funding for transportation for MAT and Mental Health? A: Block Grant does not allow for transportation to/from private providers. Medicaid does allow transportation via MotiveCare. [Anecdotally members of the Council report that MotiveCare is not a satisfactory transportation provider.] Agencies are given state funds and they should incorporate in their budget funds for transportation
    - b. Block Grant should include mention of question “Is Fee for Service payment by the state sufficient to handle transportation costs to/from care for consumers to/from agencies not covered by Medicaid?”
    - c. Additional housing resources to consumers receiving MAT and additional MAT services for consumers residing in homeless shelters.
    - b. Services to older adults about opioid abuse
  
- E. Children’s System of Care (W. Davis)
  1. Integration of SED/SUD & Primary Health. Targeted towards Block Grant funded programs but there is a much larger set of resources. **Behavioral Health Homes**, look to engage the number of youth. BHHs are in CMOs in five counties. Pre-Pandemic baseline will be used to measure use and growth of service. The C19 pandemic impacted baseline numbers. BHHs are in CMOs and are incorporated by wraparound model.
  2. Expand Systems Capacities to serve **Youth/Infants and Early Childhood mental health**. Focusing on 0-5 Helping Families Thrive. Expanding staff in intensive in community resources and mobile response. Increased reflected supervision for new staff. Increased in EBPs for Child Parent Psychotherapy—cohort of 24 clinicians and 8 supervisors who can provide that specialty level of care. Plan to expand this to 400-450 mobile response staff are to be trained plus 70 supervisory staff. Development of Advisory Stakeholder Group to land on outstanding elements to define success in this area.
  3. Increase access to evidence-based services and supports across the CSOC service continuum by continuing to evaluate and plan to expand the In-Home Recovery Program (IHRP), which supports families with substance use disorders, child welfare involvement, and children ages 0-3, and enhancing our Intensive In-Community services providers’ ability to provide healing-centered, evidence-based interventions, by collaborating with the CARES Institute to train clinicians in Trauma Focused Cognitive Behavioral Therapy.
  4. Increasing competency in trauma informed care.

5. Q&A: Q: Concerns about Staffing across the children’s system of care. A: For Mobile Response there are many decisions to make. Mobile’s role will remain the same but additional considerations must be made. There are no new initiative nor populations but agencies will be given flexibility to bolster staffing challenges. CSOC will help agencies troubleshoot when needed.
- F. Comments and Questions from Planning Council, Citizens Advisory Board and General Public
1. A focus should be made on continuous quality improvement, and total quality management for purposes of improving. Recommendation that CCBHCs capture additional client feedback on consumer outcomes. (See Minnesota Community Outcomes: depression remission)
  2. The Block Grant documentation should reflect the fact that DMHAS has solicited providers of the First Episode Psychosis / Coordinated Specialty Care (CSC) to encourage families of youth/adolescents to participate in and apply for membership on the Planning Council.
- G. No additional feedback is expected from SMHA/SSA within the next two weeks (as the Fiscal Information/Tables is forthcoming). Chair of the Council makes motion that the Council has discussed and has unanimously approved the FFY 2022-2023 Block Grant Applications (both CMHSBG and SAPTG) with one abstention.

### III. State Partners Involvement Phil Lubitz

- A. DCF Needs Assessment  
[https://www.nj.gov/dcf/about/divisions/opma/hsac\\_needs\\_assessment.html](https://www.nj.gov/dcf/about/divisions/opma/hsac_needs_assessment.html)
- B. Dept. of Education (Damian Petino)
1. <https://www.nj.gov/education/broadcasts/>
  2. Mask Mandates for all school students and staff, in consultation with NJ Department of Health. Decisions are expected to be made in coming weeks that will impact September
  3. Update on PerformCare's website specifically for Educators.  
<https://www.performcarenj.org/educators/index.aspx>
  4. Q&A Sessions for Districts on State Funds for Mental Health.
- C. Division of Developmental Disabilities (J. Sabin)
1. Effective August 16, 2021, in-person face-to-face visits shall resume as outlined in Support Coordinator Field Visits. For important visitation details please visit (<https://www.nj.gov/humanservices/ddd/documents/covid19-support-coordinator-field-visits.pdf>).
    - a. For the period from August 16, 2021 through December 31, 2021:
      - i. Support Coordinators are directed to resume in-person face-to-face visits.
      - ii. During this period, in-person face-to-face visits shall be

attempted for as many assigned individuals as possible. If an individual declines an in-person face-to-face visit the reason shall be documented on Record.

b. For the period beginning January 1, 2022:

i. Support Coordinators are directed to resume in-person face-to-face visits for all assigned individuals, scheduling as necessary to ensure this waiver requirement is met. 100% of individuals are expected to receive their in-person face-to-face visits in calendar year 2022.

D. Office of Aging (P.Matthews)

1. Elder Justice Reauthorization and Modernization Act of 2021

Specifically, the legislation directly appropriates a substantial investment of \$4 billion for new and existing Elder Justice Act programs and activities through fiscal year (FY) 2025, including a total of:

- \$1.6 billion for post-acute and long-term care worker recruitment and retention;
- \$1.4 billion for APS functions and grant programs;
- \$172.5 million for long-term care ombudsman program grants and training;
- \$500 million for supporting linkages to legal services and medical-legal partnerships (MLPs); and
- \$250 million to address social isolation and loneliness.

2. State Plan on Aging (2022-2025) was submitted recently to the Administration on Community Living for approval.

3. NJ Department of Health has designated specific staff members who have been assigned as Vaccine Ambassadors. The County Ambassadors are limited to 11 high risk counties. NJDOH would like to increase the percentage from 65 to 85. The Ambassadors will collaborate with the Area Agencies on Aging (AAAs). This initiative will complement the extraordinary effort achieved in assisting consumers with getting vaccinated.

**IV. Open Public Comment and Announcements** Phil Lubitz

A. NJ Legal Services did presentation on NJ Poverty, showing the real costs of living in the state of New Jersey. NJ Legal Services can be contacted to do/share this information.

B. The Burlington County Mental Health Administrator is working our NAMI's Mental Health Resource Guide for Burlington County

C. NAMI Walk is set for October 9, 2021 at a variety of locations.

**V. Adjournment** Phil Lubitz

A. Next meeting of the Planning Council is September 8, 2021

**Microsoft Teams meeting**

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