

NEW JERSEY BEHAVIORAL HEALTH PLANNING COUNCIL

Minutes

July 14, 10:00 am

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

Microsoft Teams meeting

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Notices of the meeting were sent to the Asbury Park Press, The Times (Trenton), Bergen Record, The Press (Pleasantville), and the Courier-Post (Cherry Hill).

Participants:

Darlema Bey (Chair)	Michael Ippoliti	Winifred Chain	Shenal Pugh
Suzanne Smith	Jennifer Rutberg	Harry Coe	Francis Walker
Amanda Kolacy	Heather Simms	Joe Gutstein	
Connie Greene (vice chair)	Donna Migliorino	Shelley Weiss	David Moore
Rachel Morgan	Nick Loizzi		

DMHAS, CSOC, DDD, DMAHS & DoH Staff:

Nicholas Pecht	Brittany Thorne	Helen Staton	Suzanne Borys
Yunqing Li	Mark Kruszczyński		

Guests:

Kurt Baker	Nancy Edouard	Nina Smuklasky	Joe Cuffari
Bernadette Moore	Filomena DiNuzzo		

I. Administrative Issues/Correspondence (Darlema Bey)

- A. Attendance, 17/35, 48.5% attendance, quorum exceeded.
- B. Minutes of June 2023 General Meeting Approved

II. Community Mental Health Block Grant Overview, Priority Indicators Substance Use Block Grant, and Children's System of Care

- A. Performance Indicators: Ideally there should be about 3 for each domain (Adult, SUD, Children's)
 - 1. We are trying to align our indicators with priority populations
 - 2. We are looking to eliminate one of the CSS indicators as it is duplicative. The current block grant has the following CSS indicators:
 - a. Number served in CSS and
 - b. Stability in Housing
 - 3. We are looking to just have one performance indicator for CSS. Stability in housing (consumers who remain in CSS in a SFY). The narrative also includes

the number served in CSS which is needed to determine the number of consumers who remain in CSS.

4. Medication adherence among consumers who need psychotropic medication for Coordinated Specialty Care.
 - a. Comments:
 - i. Tracking medication compliance is not a person-driven performance indicator.
 - ii. Medication is one of many strategies utilized by a CSC team. This performance indicator is a continuation of an indicator from the previous plan. Early Psychosis is a priority population and we can continue to look at other indicators going forward for this program as we go live with the USTF+
5. Behavioral Health Crisis Services: One of the three areas championed by SAMHSA: call centers, mobile crisis outreach and crisis receiving stabilization centers.
 1. Indicator for call centers: Goal is 85% answer rate for 2024 and 90% answer rate for SFY2025. We were at 77% in SFY22 and saw an increase to 79% in SFY 23 = 79%.
6. We are discussing the possibility of removing the cultural competency Indicator which has been in the MHBG for many years since we are adding an indicator for the behavioral health crisis population.
7. Information requested where the SAMHSA evidence-based practice be found:
<https://www.samhsa.gov/sites/default/files/national-guidelines-for-behavioral-health-crisis-care-02242020.pdf>

B. Substance Abuse Prevention Block Grant/ Substance Use Prevention Treatment & Recovery Supports (SUPTRS)

1. All same indicators from last year.
2. Five prevention indicators
 - a. Tobacco use, 12-17
 - b. Bing drinking among youth
 - c. Marijuana use
 - d. Decrease in percent of prescription opioid use.
 - e. Heroin use
3. Priority Population Indicators
 - a. Pregnant women
 - b. Intravenous drug users
 - c. Opioid users
 - c. Increase in MAT use
 - e/ Tuberculosis populations

C. Children's System of Care (N. Pecht)

1. Integration of physical and mental health of kids, by increasing Pediatric Psychiatric Collaborative (PCC). Pediatricians enroll in this. Increase # of pediatricians who make referrals to the system of care

2. Increase access to evidence based services and supports. To provide Attachment Regulation and Competency (ARC) model, and EBP, CSOC is looking to train 40 clinicians in year 1, then in year 2, ten of those clinicians will be trained to be able to train other clinicians (train the trainer model)
3. Expanding system capacity to better serve young youth (age 0 – 5). “Clinical practice Series in Early Childhood Mental Health”. Part of “Zero to Five: Helping Families to Thrive). The indicator is 40 clinicians and supervisors in both year 1 and year two.

III. CCIS Building Capacity Initiative Diana.Salvador@dcf.nj.gov, CSOC Clinical Director., Dr. Mary Beinre, & Cynthia.Kaserkie@dcf.nj.gov , CCIS Clinical Capacity Improvement Project Program Lead:

- A. Complex youth issues. Formal and informal consultation process (500 clinical consultations in 2022).
- B. Goal is to do system overhaul.
- C. Trends found:
 1. Acute care system is really struggling to meet the demands across NJ. Youth languishing in Emergency Rooms. Issue of kids hospitalized with intense needs who are discharge ready but have nowhere to do.
2. Issue is the CSOC does not contract with acute facilities (hospitals, screening centers).
- D. CCIS
 1. Funding for screening centers, medical centers
 2. Goals
 - a. Communication improvements: Medical Directors.
 - b. Ensure that inpatient capacity (for youth and adolescents) can be created, to work with nine units to conduct needs assessment in the children’s inpatient system. Funding made for local, state, and national experts to bring training resources to bear for 24/7 settings. Program begin at end of 2022 and should end in 2025. Several needs assessments will be conducted. Beginning, midway and end of project cycle.

IV. System Partner Updates Chairs of <https://www.samhsa.gov/sites/default/files/national-guidelines-for-behavioral-health-crisis-care-02242020.pdf>

- A. Dept of Education (M. Ingram):
- B. Children’s System of Care (Nick Pecht)
- C. DDD (Jonathan Sabin):
- D. Division of Aging (Jennifer Rutberg)
 1. Legislation was passed to start an Alzheimer’s Long Term Commission.
- E. Division of Juvenile Justice Commission (Francis Walker, Philomena DiNuzzo)
 1. JJC is having its Recovery Walk in September 2023. Dates to be announced.
- F. Division of Vocational Rehabilitation Services (DVRs). No presentation

G. Department of Corrections (K. Connelly)

V. Open Public Comment and Announcements Darlema Bey

A. Comments:

1. Comment of concern of “social isolation” of people who work at home. Is anyone looking into this?
2. Online articles and resources
<https://thelivproject.org/> .

<https://thesunpapers.com/2023/07/02/letting-teens-known-theyre-not-a-burden/?amp&fbclid=IwAR2G8O0qkge9sZqp0gyH-UMakG3p0AGLAIW8AT3uZIrHE9m7wIpL3-Djg2U>
3. Disaster and Terrorism MH training.
4. Housing. Discussion of “balanced billing”. Concerns that landlords became aware of the State voucher programs, so they raised their rents. This puts increased housing stress on consumers.

B. Announcements

1. The Juvenile Justice Commission’s “Recovery Walk” is October 4, 2023. Save the date, more information will be available soon.

VI. Adjournment Darlema Bey

A. Next meeting: 8/9/23

B. Future Agenda Items

1. NJ ABLE Presentation 8/9/23.
1. Needs and Gaps: SUD, Connie Greene
2. Quality Improvement Plan (QIP): Connie Greene
3. Steve Crimando (Disaster & Terrorism)

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C. Future Agenda Items

1. Housing
2. 988 Update
3. Covid Supplemental Grant Initiatives Update

August 2023 Subcommittee Meetings

9:00	None
9:30	Block Grant
12:00	Advocacy