State Advisory Councils for Division of Behavioral Health Department of Mental Health Meeting Minutes October 4, 2017

Members Present: Amanda Pearl, Carrie Rigdon, Daniel Cayou, Denise Mills, Eric Martin, Page Nichols, Rebecca Maynard, Sarah Earll, Toni Jordan, Angela Reynolds, Christine McDonald, David Stoecker, Jean Sokora, Kathi Grose, Malva Yocco, Mark Smith, Nancy Johnson, Richard Kenney, Sean Adams and Stephanie Washington

Members Present via Conference Call: Sandra Jackson and Susan Scott

Members Absent: Amy Stevens, Barb Scheidegger, Liz Hagar-Mace, Mindy Ulstad, Karah Waddle and Randall Robb

Department of Mental Health/Division of Behavioral Health (DMH/DBH) Staff: Michelle Gerstner, Mark Rembecki, Tim Rudder, Rhonda Mealy, Carolyn Conus, Natalie Erickson, Amanda Baker, Karen Will, Jessica Bounds, Susan Blume, Rebecca Seitz, Lori Franklin Angie Stuckenschneider, Rosie Anderson-Harper, Lexy Thompson, Dr. Rick Gowdy and Susan Leonard

Guests: Alicia Ozenberger, Brenda Schell, Susan Depue, Patty Henry, Scott Breedlove and Tim Conroy

TOPIC/ISSUE	DISCUSSION	ACTION/PENDING Responsible Due Date
Call To Order	Comprehensive Psychiatric Services (CPS) Chairperson, Sarah Earll, called the meeting to order. Self-introductions were made.	
Budget Update	 Fiscal Year 2018 Revenues: The fiscal year started with several months of increased general revenue; however, in September 2017, the net general revenue collections decreased 1.8% compared to September 2016, from \$891.1 million last year to \$874.4 million this year. Spending Restriction: 1.5% provider rate increase that was appropriated. Senate Bill 509 was triggered. We hope no additional spending restrictions will be necessary. We assume the budget will be tight for the next few years. 	
	Fiscal Year 2019	

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	 Department request submitted to Governor on October 1, 2017 can be found at https://oa.mo.gov/budget-planning/budget-information/2019-department-budget-requests. The Governor has rolled out performance-based budgeting to begin this year. Office of Administration Budget & Planning will review the Department's efficiency and effectiveness measures to determine funding levels. We are looking at our program measures and updating them. Supplemental funding (Fiscal Year 2018 to finish the current year) include civil commitment 	
	legal fees, lease of third ward at Metropolitan St. Louis Psychiatric Center (MPC) by Barnes Jewish Hospital (BJH), and additional authority for increased county commitments. New Decision Items: Mandatory items only.	
	Core adjustments include transferring non-emergency medical transportation to Department of Social Services, Benton and Crossroads Group Home privatization and transfer from Mental Health Trauma Treatment for Kids to MO HealthNet Division (MHD) for case management fee portion of the House Bill (HB) Section. This will allow the appropriate providers to see the increase in reimbursement.	
Division Director Update	Dr. Richard Gowdy, DBH Division Director	
Opuale	Kate Wieberg, Director of Operations, updated the council on the Certified Community Behavioral Health Clinic (CCBHC) Prospective Payment System (PPS) demonstration project, implemented July 1. DMH is designing the new payment system; however, since it was not ready on July 1, DMH adjusted our current billing system. All CCBHCs are receiving PPS payments through the modified system. The new Claim Validation System (CVS) will be ready July 2018. In addition, DBH staff hold conference calls twice a month for CCBHC staff who have questions about the project.	
	Timothy Rudder, Billing and Services Review Team Manager, Medication-Assisted Treatment Prescription Drug and Opioid Addiction (MAT-PDOA) Grant Project Director, updated the council on the State Targeted Response (STR) to the Opioid Crisis Grant. Missouri was selected as one of a few states to take part in the national evaluation of state Opioid STR programs. We will be working with Substance Abuse and Mental Health Services Administration (SAMHSA) and Mathematica (technical assistance contractor) for	

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MO CIT Council Overview	this evaluation. Providers contracted with so far include Southeast Missouri Behavioral Health (SEMO-BH), Preferred, Center for Life Solutions, West End Clinic, Truman Medical Center, Gateway Foundation and Queen of Peace Center. Our focus now is on providing targeted technical assistance to those agencies that have expressed interest but have identified certain needs (i.e. physician services, telehealth equipment). We will also have site visits with a number of agencies to assist with technical assistance. We have expanded the telehealth network by purchasing equipment for SEMO, Assisted Recovery Centers of America (ARCA), Gateway and Gibson Recovery Center, and will continue to help agencies expand their telehealth capabilities. To date, we have enrolled 297 consumers in the Opioid STR program. Our six-month update meeting is Friday October 6 at DMH Central Office. We began our Opioid Crisis Management Team (OCMT) trainings in St. Louis, Kansas City, Jefferson City and Springfield, and will continue with future dates in October and November in Miner, Moberly and Kirksville. We have distributed our Provider Implementation Guide which includes the following sections: General Overview of Grant and Grant Requirements; Important Points to Remember; Clinical Guide for Intake and Psychosocial Supportive Services; Clinical Guide for Medical Treatment of Opioid Use Disorder (OUD); Customer Information Management, Outcomes and Reporting (CIMOR); and Guide for Data Reporting. Our STR web address is https://missouriopioidstr.org Tim Conroy, Council Member/Trainer, Missouri Crisis Intervention Team (MO CIT) Council The Missouri Crisis Intervention Team (MO CIT) Council is a state collaboration of law enforcement and community partners dedicated to helping individuals with behavioral health disorders by implementing the Missouri Model of CIT and expanding it throughout the state. MO CIT's goals are to promote and support collaborative efforts among law enforcement, mental healt	

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	justice system to the mental health care system. In turn, the behavioral health care system assumes "custody" of the individual and provides directed and non-restrictive accessibility to a full range of health care and social service options.	
	CIT officers utilize their training to de-escalate crises and connects individuals to behavioral health resources. The 40-hour curriculum includes mental health and substance use disorder experts, legal experts, individuals/family advocates, and experienced CIT officers. Once trained CIT officers are in place, high-risk crisis calls are directed to an on-duty CIT officer. The CIT officer, employing a de-escalation intervention strategy, may access Access Crisis Intervention (ACI) services, or transport the individual to a partnered hospital emergency room. The behavioral health system assumes "custody" and provides a "police-friendly" efficient turnaround time for the officer to return to normal patrol duty.	
	Police are often the first to be called for a crisis situation involving persons with a behavioral health concern. These crisis situations can and have involved officer and citizen injuries or deaths. Additionally, persons in a behavioral health crisis are diverted to the mental health system and treatment rather than to jail or to return to the streets. Community members become more confident in reporting crisis situations and police officers are better prepared to respond safely to those situations.	
	Law enforcement officers who have demonstrated their commitment to the core elements of CIT wear the official CIT pin.	
	MO CIT Conference 2018 will be held March 19-20, 2018 at the Holiday Inn Executive Center, Columbia, Missouri. For additional information visit www.missouricit.org .	
	For more information about creating a CIT Council in your area, please contact: Sgt. Jeremy Romo, MO CIT Coordinator, at (314) 581-5459 or ifromo@stlouisco.com	
MO-HOPE Project	David Stoecker, Missouri Recovery Network	
	The goal of the MO-HOPE Project is to reduce opioid overdose deaths in Missouri through expanded access to prevention, public awareness, assessment, referral to treatment, overdose education and Narcan® (naloxone) for those at risk of experiencing or witnessing an overdose event. Treatment admissions, hospital visits, and overdose deaths have been rising steadily. Heroin and fentanyl drive the overdose rates. Around the world, prevention,	

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	treatment and harm reduction is taking place. Narcan® (naloxone) is a medication that reverses the effects of an opioid overdose. It is possible for someone to slip back into an overdose state, which is why it is important to get immediate medical attention. Naloxone laws in Missouri include House Bill 2040, enacted August 28, 2014 and House Bill 1568, enacted August 28, 2016. Missouri Good Samaritan Law (RSMO 195.205) was effective August 2017. Education, trainings or treatment resources may be accessed at www.MOHOPEproject.org .	
Reports and Announcements	 Scott Breedlove, Missouri Credentialing Board It is renewal season with around 1,400 people renewing their credentials. Online and paper renewal options are available. We are in the process of moving all our applications to strictly online. We are in the process of redoing our board membership and will have five or six new board members. We are working in collaboration with DMH staff to move toward one peer credential for the State of Missouri, in place after the first of the year. We are working on raising the bar on ethics issues and ethics training and supervision, in place the first of the year. Brenda Schell, Missouri Recovery Network (MRN) David has been very busy providing Narcan trainings due to our work with DMH, STR and Missouri Institute of Mental Health (MIMH). In the last two months, we have provided 15 trainings to educate individuals on lifesaving Narcan and rescue breathing. We trained 654 people in August and September. We currently have five trainings planned for October. We will be offering a Missouri Recovery Support Specialist-Peer (MRSS-P) Training the week of Oct. 23-27 in Sikeston at Mission Missouri. I emailed an announcement out this week. Space is limited. If you have peers who are interested in attending, please have them sign up. One peer credential will be offered in 2018, the certified peer specialists. The Certified Missouri Peer Specialist (CMPS) and MRSS-P curriculum will be combined into one-weeklong training. Those that currently hold the CMPS and MRSS-P will be grandfathered in. Twelve trainings will take place across the state in 2018. Those training sites have been set and will be announced. MRN co-sponsored six recovery events across Missouri last month, during recovery month. We would love to see more events take place next September. As a State Advisory Council (SAC) member, it would be nice if you would talk to your 	

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	organization and/or employer about hosting an event next September. We are working with DMH and Missouri Institute of Mental Health (MIMH) on the 3 rd Annual Peer Leadership Summit in conjunction with the DMH Spring Training Institute. The peer summit will take place May 29-30 and focus on the certified peer. They will receive a discount to attend the Spring Training Institute May 31-June 1. MRN will assist recovery community centers in the St. Louis, Southwest and Southeast regions by offering educational opportunities, setting up prosocial events and starting a peer regional network. We have hired three recovery peer ambassadors through the STR grant. We have someone hired in ST. Louis, Cape Girardeau and Springfield. These individuals will be working with providers, treatment courts, recovery housing and community groups, to grow the peer movement and to provide education on peer supports and Substance Use Disorder (SUD) recovery. MRN will be working on an SUD parity bill this upcoming legislative session. We will be partnering with many other statewide organizations. MRN will be hosting our annual recovery advocacy day event in February. Once I have more information on the parity language, I would really like the SACs to consider making an official statement and having each of you, as SAC members, join us at the capitol in February to fight for SUD parity. Alicia Ozenberger, ACT Missouri We continue to monitor the petition initiatives submitted and circulated for signatures to legalize marijuana, watching to see which group is going to take the lead. Many groups have submitted petitions to legalize marijuana. Our Substance Use Prevention Conference will be held November 28-30 at the Lake of the Ozarks. Daniel Cayou, Missouri Protection & Advocacy (MO P&A) As it is the end of the fiscal year, we are crunching numbers. Missouri Department of Corrections (DOC) will be implementing a smoke-free policy so we expect to receive many contacts from DOC after the policy is implemented. An issue I believe	

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	representative.	
Approval of Minutes	Denise Mills motioned to approve the August 2, 2017 SAC meeting minutes. Toni Jordan seconded motion. The August 2, 2017 meeting minutes were approved as written.	
Proposed Changes	occorded metern the ragget 2, 2011 moctally minuted were approved as imitem	
in Membership Status and Process	To meet state and federal regulations and eligibility for Block Grant funding, it is the recommendation of the Integration Steering Committee to merge the councils. The vote to merge the Councils was tabled.	
Councils' Individual Meeting Session Reports	SUPR SAC	
•	Council members voted on new name for their council, Substance Use Prevention and Recovery (SUPR). Jean Sokora motioned to approve. Christine McDonald seconded motion. Motion passed.	
	At the Mental Health Commission Meeting scheduled December 14, Christine McDonald, Heather Gieck and Scott Johnston will present on the National Alliance for Recovery Residences (NARR) and the importance of recovery housing, which is to provide people in recovery with a safe place to live.	Brenda Schell will contact Heather Gieck.
	The membership committee process, previously emailed to SAC members, is designed around the idea that councils will nominate a membership committee to review membership applications then present applications to councils for vote and submit to division director to approve and appoint nominees. The membership committee consists of the following council members: Jean Sokora, Nancy Johnson, Mark Smith, Richard Kenney and possibly Malva Yocco, Denise Mills, Sarah Earll and Toni Jordan. Committee will meet once a month to review applications. They discussed having 35 members between both councils with focus on recruiting parents, individuals with lived experience and transition aged youth. Lexy handed out document with proposed SAC membership counsel guidelines.	Lexy will let people know we are looking for new members with an email distribution. Lexy will email Jean Sokora,
	Stephanie Washington, Missouri Department of Health and Senior Services Bureau of HIV, STD and Hepatitis, stated that the Comprehensive Prevention Planning Group for HIV is currently focusing on HIV and hepatitis C co-infection as it relates to the opioid and methamphetamine epidemic. Her vision for their upcoming November 17 meeting is to have a credentialed speaker with lived experience in longterm recovery present information on	committee co- chair, committee member names and email addresses.

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	hepatitis C infection.	
	Council continued discussion on publication of white paper consisting of facts about marijuana and its legalization. Angela Reynolds, Sean Adams, Richard Kenney and Alicia Ozenberger will assemble data and present to council at December meeting.	
	The Prevention Committee plan to meet at the December SAC meeting.	
	Jean Sokora motioned to adjourn meeting. Stephanie Washington seconded motion. Meeting adjourned.	Lexy will contact Randall Robb to provide update and contact
	MHS SAC	information for
	Council continued discussion on the creation of mental health educational videos/public service announcements (PSAs). Page Nichols, Missouri Department of Corrections, Division of Offender Rehabilitation Services, provided the Suicide Prevention video. Patty Henry, Missouri Mental Health Foundation (MMHF), and Brandon McElwain, Prime Time Marketing, were present and joined council members in providing feedback. All agreed that the video was well done and provided a powerful message. The Council will continue to collaborate with MMHF on the creation of these videos.	Patty Henry and Brandon McElwain. Goal of MMHF is to begin running commercial television ads/PSAs in
	At the Mental Health Commission Meeting scheduled December 14, Sarah Earll will present on Suicide Prevention.	January 2018.
Adjourn	Denise Mills motioned to adjourn meeting. Toni Jordan seconded motion. Meeting adjourned.	
Next Meeting		
	December 6, 2017	
	10:00 a.m. to 3:00 p.m.	
	Department of Mental Health	
	1706 E. Elm Street, Jefferson City, MO Conference Rooms A & B	