<u>New Jersey Mental Health Planning Council (MHPC)</u> <u>Meeting Minutes</u>

June 13, 2012

Notices to announce the date, time and location of this meeting were sent out to the following news outlets: *Newark Star-Ledger*, *Asbury Park Press*, *The Times* (Trenton), *Bergen Record*, *The Press* (Pleasantville), and the *Courier-Post* (Cherry Hill)

Attendees:

Jacob Bucher
Annette Wright
Karen Carroll
Angel Gambone
Devin Fox
Michael Ippoliti
Carolyn Davis
Patricia Matthews
Thomas Pyle (phone)
Shauna Moses

Lisa Negron Damyanti Aurora Patricia Dana Bianca Ramos Joseph Gutstein (phone) Barbara Johnston Phil Lubitz Joanne Oppelt Robin Weiss (phone) Marie Verna Helen Williams Donna Best Gregory Karlin Marilyn Goldstein Renee Ingram (Phone) Gail Mesavitch Christopher Lucca Hazeline Pilgrim (phone) Harry Coe

DMHAS, DCBHS & DDD Staff:

Pat Bernabe	Suzanne Borys	Robert Culleton
Geri Dietrich (phone)	Mark Kruszczynski	Vicki Fresolone
Yunging Li	Dona Sinton	

Guests:

Rachel Morgan (phone)

I. Administrative Issues/Correspondence/Review of Previous Minutes A. Minutes from the May meeting were reviewed and approved as is

II. Announcements

- A. The next meeting will be on July 11, 2012 and will include guests from the federal government for a site visit
- B. The Future of Psychiatric Rehabilitation celebration is on June 15
- C. The Mental Health Planning Council forums website is active if anyone is interested in signing up for it.
- D. The Division of Mental Health and Addiction Services will be moving offices this summer. While the July meeting will be in this room, the August meetings and forward will be at 222 South Warren Street.
- III. SMI Definition and survey information Suzanne Borys and Vicki Fresolone
 - A. A survey regarding income eligibility for clients will be administered in order to get an adequate sample. It will start in September and run through November.

- B. Vicki is in the office of care management that is developing the ASO. They have developed a clinical workgroup and developed a revised definition of SMI. They reviewed Medicaid and other definitions of SMI in 15 other states based on multiple criteria. They had Technical Assistance from Mercer Consulting and the Center for Health Care Strategies on the definition development.
- C. The definition is in draft and one way to further its development is to know how many people in our system currently would meet that criteria. So DMHAS will be including a clinical component to the survey in which providers will identify which of the consumers admitted to their agency would be determined SMI based on the draft definition.
- D. They are going to be asking providers to administer the survey to the sample people so income and clinical information can be matched.
- E. The survey is one way to vet the draft SMI definition. We will be reviewing it with the Clincial Group of the ASO Stakeholder Group. We will also be sharing it in other venues and with many stakeholders to receive feedback and incorporate any changes that might be required.
- F. Once completed this definition will become the definition to implemented for the block grant probably about two cycles from now. We will obtain technical assistance from CMHS on how this will impact our Block Grant and how to make that transition.
- G. The definition will be used for eligibility for behavioral health homes. It's role in the ASO has not been finalized. But one possible use would be to eliminate prior authorizations for those individuals with SMI for some services.
- H. We want to establish and implement simple criteria that is readily applicable and can be administered at an agency so we can use funds for more services.
- I. IT is programming the surveys now. We will have a webinar in August to train on how to administer the survey. The plan is that in December the Research unit will analyze results and have a final report in January.
- J. Administrative staff will complete the first portion of the survey and then clinical staff will fill out the clinical side of the survey. Program and financial eligibility will both be surveyed.
 - 1. Q- Barbara Johnston What is the target sample size? A- Its flexible.
 - 2. Q- Marie Verna will the survey affect the timing for when the RFP will be released? Answer The survey will not affect the RFP.
 - 3. Q- Harry Coe In determining eligibility for SMI is it with our without intervention/services? Answer It is understood that some individuals are not meeting functional criteria for SMI because they are receiving services. We are taking that into account in the definition. As it is written so far individuals will not be moving in and out of the SMI determination.
 - 4. Q- Tom Pyle will the definition in DSM V have an impact on this process? Answer Not 100% sure yet. Most changes to DSM probably won't impact diagnosis of individuals with SMI. We will have to revisit that at that time. The definition can be flexible and we want tit to be efficient to assist consumers and make the system work more effectively.

- 5. C- Tom Pyle- This is really important at the moment and we need to make sure we fully understand the mechanics of the definition.
- 6. Suzanne and Vicki will come again in August to update the group.
- IV. Subcommittee Reports
 - A. Advocacy Subcommittee
 - 1. We had a presentation today by John Whiteneck on Hagedorn and of the 100 transfers, most went to Greystone
 - a. A patient survey and RFP is going out for follow up tracking of patients. S-COPE program will be in place for those transferred as a priority group
 - i. Most staff were placed in jobs
 - 2. We are inviting Steve Fishbein to talk in August about CIT and other trainings for law enforcement regarding mental health clients
 - 3. We are compiling a list of questions for DCA and hoping to have them do a presentation in the fall.
- V. Services for the Aging Population Pat Matthews
 - A. A PowerPoint and additional handouts were distributed and reviewed/discussed
 - B. Currently aging services are in the Department of Health and Senior Services but this will move to DHS in July
 - C. The goal is to help elderly to age where they currently are so as not to be prematurely placed in nursing homes.
 - D. The Office of Area Agency on Aging (AAA) Administration in DACS is the State Unit on Aging (SUA). We oversee the 21 AAAs; one in each county.
 - E. There are 7 titles in the Older Americans Act and the act is reauthorized every 6 years and is up for renewal right now.
 - F. The target population for services is all persons 60 and up and services are not means tested.
 - G. Discussed each of the topics in the various titles, including home and community nutrition program, disease prevention/health promotion/ national family caregiver support program
 - 1. Q- Tom Pyle- What percentage of State residents who qualify would have SMI? I'm wondering how much overlap there is. A Pat-Unfortunately I don't have that information. Mark K asked Tom to send him an email and he will try to obtain that information
 - 2. Is the Ombudsman office is in your office? (There is a major component of your office that will be involved in mental health issues.)? A- Our Office works closely with the Ombudsman Office, however the Office of the Ombudsman is in the NJ Department of the Treasury. I am not sure if they provide oversight of boarding homes or group home, I know that they provide oversight of nursing homes. I will find out and get back to you.
- VI. Mental Health Block Grant Monitoring Visit Mark Kruszczynski
 A. The visit is July 10 through July 12, 2012 and the Planning Council will meet

- B. Materials were handed out for review/discussion
- C. Dona will email the annual reports of the Planning Council to members this week which are a review of the various meeting topics
- D. Pat Bernabe asked for a link to the SAMHSA 8 initiatives. Yunging Li will send to Dona to distribute
- E. Q- Chris Lucca- It's an open forum? A- Yes
- F. Q Jack Bucher What about public who are not involved actively in the Planning Council? Since it's an open meeting will they be permitted? A I think so but I can check. It is an open public meeting.

VII. Planning Activities and Recommendations – Phil Lubitz

- A. Topics for future meetings
 - 1. We could consider having an annual forum with County Mental Health chairpersons to talk about topics of interest to them
 - 2. Geri D. suggested bringing in someone to speak about traumatic brain injury since they are associated as affected individuals often have PTSD, depression and withdrawal
 - 3. Steve will be asked to present on final budget in August
- B. Hazeline suggested the group should include even more children's representatives beyond the FSO's. Geri/Pat will bring in additional information next meeting.

Next Meetings on 7-11-12 10:00-12:00, Room 336