

**New Jersey Behavioral Health Planning Council
Meeting Minutes,
February 13, 2019 10:00 A.M.**

Attendees:

Phil Lubitz	Darlema Bey (vice-chair)	Winifred Chain	Julia Barugel
Michael Ippolitti (p)	Joe Gutstein (p)	Cheri Thompson	Alice Garcia
Damian Petino (p)	Maryanne Evanko	Pam Taylor	
Suzanne Smith	Chris Lucca (p)	Michele Madiou (p)	
Thomas Pyle (p)	Patricia Matthews	Robin Weiss (p)	

DMHAS, CSOC, DDD & DMAHS Staff:

Geri Dietrich (p)	Mark Kruszczyński	Sue Ricigliano	Jonathan Sabin (p)
Heather Reid	Shanique McGowan	Suzanne Borys	

Guests:

Nina Smuklavshaya	Lisa Negrón	Wendy Rodgers	Elena Kravitz
Louann Lukens			

(p) Indicates participation via conference call.

- I. Welcome / Administrative Issues / Correspondence / Announcements**
 - A. Quorum Reached: 17 out of 40 members (43% attendance).
 - B. Minutes from January 9, 2019 meeting approved.

- II. 2017 DMHAS Adult Consumer Perception of Mental Health Care Survey: 2017 URS Data Tables & Cursory Summary** (Dr. Mark A. Kruszczyński, DMHAS) [PowerPoint Presentation presented in-person to the Planning Council]
 - A. Survey administered in hard copy to a 6.6% stratified random sample of then-current adult consumers of DMHAS-contracted providers of non-acute, community, based mental health services, November 2017-January 2018. [Survey distribution was delayed due to DMHAS physical administrative relocation from NJ DHS to NJ DOH in Fall 2017.]
 - B. The survey instrument was a 66 question, expanded version of the MHSIP Adult Consumer Survey (containing 41 questions, arranged in eight domains).
 - C. N = 136,389, n = 8,983, Count of responses = 1,310, Response rate = 15%. Sampling strata were 717 separate service locations. Error ranges at 95% confidence level were between 3.8% and 4.6% (depending on the domain).
 - D. Results reported for SFY2017 Implementation Report of the SAMHSA Community Mental Health Services Block Grant, in URS Data Tables 9 & 11
 1. Social connectedness: 93% positive responses
 2. Functioning: 95% positive responses
 3. Access: 97% positive responses
 4. Quality & Appropriateness of Services: 98% positive responses.
 5. Participation in Treatment Planning: 97% positive responses
 6. General Satisfaction with Services: 98% positive responses.
 - E. The 2018 DMHAS Consumer Perception of Care Survey was recently completed, and the results report to SAMHSA. The results of that survey can be presented to the BHPC.

III. State Partners Involvement

- A. NJ Division of Medical Assistance and Health Services (DMAHS) (Shanique McGowan)
 - 1. Peer Services for SUD are not currently Medicaid reimbursable
 - 2. Recent/upcoming DMAHS workgroup to develop Medicaid benefit policy for Peer Services for Substance Use Disorders (SUDs).
 - 3. NJ FamilyCare is going to convene two separate Stakeholder Workgroups as part of the State's efforts to cover Peer Supports and Case Management services under the Substance Use Disorder (SUD) Waiver authority.

- B. NJ Division of Developmental Disabilities (NJ DDD) (Jonathan Sabin):
 - 1. Community of Care Program from Community Care Waiver, for DDD consumers who need higher levels of support to serve more people in home settings, age 21≤.
 - 2. Support Coordination Programs: All consumers receive assigned Support Program Coordinator to facilitate independent community living. (8,520 approved Individual Service Plans (ISPs), 10,150 consumers with assigned Coordinators).
 - 3. There are approximately 9,000 consumers in the DDD Supports program.
 - a. Review of consumers in Support Coordination Program; make sure that Support Coordinators give consumers the support they need to successfully reside in the community.
 - 4. Disaster Response: NJ Register Ready Program allows consumers and families to voluntarily put themselves/loved on a list that is shared with emergency response Services (i.e., firefighters, EMTs), to facilitate the care/evacuation/disaster relief of consumers with special needs during crises & public safety emergencies.
 - 5. Provider Recruitment: Webinars have been held to solicit new and current providers to develop additional capacity for individuals with intense behaviors, medical needs requiring on-site nursing, or a combination thereof. Services requested include those received in an individual/family's home (e.g. employment/day services, respite, behavioral supports) or in a provider managed setting (e.g. group home or supervised apartment

Additional capacity to serve DD consumers is being actively sought by NJ DDD.

- C. NJ Department of Education (DoE), (Damian Petino)
 - 1. Special Education Medicaid Initiative. (SEMI) [Damian has been asked to facilitate a presentation by DoE to the Council on SEMI].
 - 2. DoE will be encouraging participation in Children's Interagency Coordinating Councils (CIACC)

IV. Subcommittees

- A. Membership
 - 1. BHPC still needs greater representation among families with young children with SED.
 - a. NJ Department of Children and Families, Children's System of Care (NJ DCF CSOC) are making direct efforts to recruit more families of children with SED onto the Planning Council.
 - 1. The NJ DCF CSOC representative to the Planning Council (G. Dietrich) reported that she recently met with the CSOC contracted system administrator (PerformCare) as well as with the individual who facilitates the quarterly family meetings, to aid in recruiting SED family members. Both entities were provided with the updated BHPC "Call for Members" letter with DCF cover letter.

2. The NJ DCF CSOC representative to the council is in active contact with the VP of the NJ Statewide Parent Advocacy Network (SPAN) and will be speaking about this issue on 2/14/19.
 3. The NJ DCF CSOC representative to the council is to work out with the newly formed NJ DCF Office of Family Voice to recruit more families with children with SED to the Planning Council.
 4. The NJ DCF CSOC representative to the council attended CIACC several recent meetings and explained the Councils need for family/caregiver of child with SED.
 5. All 21 county-based CIACCs have been provided with Call for Members letter.
 5. The NJ DCF CSOC representative to the Planning Council will be attending future Family Support Organizations (FSO) and Care Management Organization (CMO) meetings.
- b. Certified Community-Based Health Homes (CCBHCs) serve approximately 400 children in seven CCBHCs. Efforts are ongoing to interact with consumer families to recruit families with young children with SED.

B. Housing (L. Lukens, M. Ippoliti):

1. List of housing resources planned for posting on SHA's *Journey to Housing* website will be updated. D. Riley (Executive Director, Supportive Housing Association of NJ) has agreed to post the Planning Council's link to housing resources on their website.
2. Subcommittee would like DMHAS to post the link to SHA's manual within the BHPC section of the DMHAS website. L. Lukens has a draft letter to solicit Asst. Commissioner Mielke for permission to do so.
3. Once this task is complete, the Housing Subcommittee will be put on hiatus (as was decided at the 1/9/19 Advocacy Subcommittee meeting.)

C. Advocacy (L. Lukens, R. Weiss, Co-Chairs)

1. L. Lukens will be ending her activity with the BHPC and its Housing, and Advocacy Subcommittees, effective today, due to preparation for her upcoming retirement from DRNJ early this summer.
2. At the 1/9/19 meeting of the Advocacy Subcommittee there was sustained discussion for BHPC to host a "[Case Worker] Resource Training Conference" with the goal to increase the general knowledge of behavioral health workers contracted by DMHAS in subjects of importance to consumers and families (i.e., entitlement information, transportation, legal services, primary medical care, housing resources). This idea was originally proposed by Chairman Jim Romer, and discussed again in January's general meeting, and at the 1/9/19 subcommittee meeting.
 - a. It was decided at today's general meeting that such a Resource Fair might be an end to a means (i.e., increasing knowledge among social workers that would benefit consumers/families), but not an end in itself. There may be other, more effective methods to disseminate similar information (e.g., newsletters, webinars, publications). The overall goal is desirable by the Council, but the Advocacy Subcommittee will meet at 12:00, 2/13/19 to discuss next-steps.

V. Open Public Comment and Announcements

- A. The Planning Council would like to thank and acknowledge the contributions and work of Luann Lukens (Disability Rights of New Jersey) with the BHPC. Luann's advocacy and dedication to improving the lives of individuals with Serious Mental Illness through her work with the Council

(and elsewhere) was tireless and efficient. Her work with the Council is even more impressive given the fact that Luann was not an official “voting member” of the Council. Her accomplishments with, and on behalf of the Council serve to remind all of us that the Council is an open, inclusive, and public forum. Involvement is based on commitment and effort, not on ‘membership status’. Today is Luann’s last meeting at the Council—therefore the Council, DMHAS, and all the consumers we serve would like to thank her for her efforts, we and wish her all the best.

- B. Chairman Jim Romer is expected to return to the Planning Council at its next meeting in March.
- C. The Coalition of Mental Health Consumer Organizations (COMHCO) will have a meeting on Saturday, 5/4/19 in Long Branch NJ. The topic will be “Mental Health: Language Makes a Difference”.
- D. Request for possible agenda topic on staff training at Greystone Park Psychiatric Hospital conducted by Rutgers/University Behavioral Healthcare’s Department of Psychiatric Rehabilitation.
- E. Request made for Elena Kravitz (DRNJ) to give presentation on the Interdepartmental Serious Mental Illness Coordinating Committee (ISMICC).
 - 1. ISMICC was created by the US Department of Health and Human Services in 2017 to “was established by the 21st Century Cures Act to improve federal coordination of efforts that address the pressing needs of adults with serious mental illness and children and youth with serious emotional disturbance.
 - 2. A goal of ISMICC is to “on advances in research on serious mental illness among adults and serious emotional disturbance among children and on federal outcomes related to measures of suicide, drug overdoses, emergency hospitalizations, criminal justice involvement, homelessness, unemployment, and other issues”.
 - 2. [See <https://www.samhsa.gov/ismicc>]

VI. Meeting Adjourned

- A. Next meeting of the NJ BHPC will be held on Wednesday, March 13, 2019 at 10:00 am at DMHAS Headquarters, 5 Commerce Way, Suite 100, room 199a.
 - 1. Subcommittee Meetings on 3/13/19:
 - a. 9:00 AM, TBD
 - b. 12:00 PM, Advocacy