## NEW JERSEY BEHAVIORAL HEALTH PLANNING COUNCIL Minutes October 14, 2020

## Attendees\*:

Phil Lubitz (Chair)	Darlema Bey (Vice Chair)	Suzanne Borys	John Tkacz
Winifred Chain	Barbara Johnston	Pamela Taylor	Julia Barugel
Lisa Negron	Heather Simms	Damian Petino	Shauna Moses
Connie Greene	Robin Weiss	Tracy Maksel	Shawn Buskirk
Mary Abrams	David Moore	Michele Madiou	Patricia Matthews

## DMHAS, CSOC. DDD, DMAHS & DoH Staff:

Morris Friedman	Mark Kruszczynski	Jonathan Sabin	Irina Stuchinsky
Nicholas Pecht	Chris Morrison	Yunqing Li	

## **Guests:**

Nina Smukuluvasky Heather Simms Rachel Morgan Kurt Baker

Stuart Waldorf Shauna Moses

## **I. Roll Call/Administrative Issues/Correspondence** (Phil Lubitz)

- A. Welcome
- B. Mark K. was able to host this meeting using the MS Teams platform. Phil announced the BHPC will now meet monthly starting in November via MS-Teams
- C. Roll call & Attendance (20 out of 39 attended; attendance rate of 51%). Quorum exceeded.
- D. Review of Minutes of July, 2020 meeting, approved.

## II. COVID19 Update at NJ State Psychiatric Hospitals (Chris Morrison)

- A. State hospitals are doing fairly well. Last positive COVID 19 patient was 8 days ago at APH. There has been some resurgence at APH and GPH but no one is critical. There is weekly testing of staff. Contact tracing is done when positive cases are identified. Everyone is screened when they enter the hospitals. Admissions are being maintained and discharges continue. Patients are quarantined for 14 days in one unit when admitted. They are not isolated socially or emotionally and there are meetings with patients.
- B. Chris reports they are balancing social distancing and telehealth. PPE is provided to patients and staff. All staff wore surgical masks. Patients can wear surgical or cloth masks. All patients are tested upon admission and prior to discharge; high risk are tested weekly.

<sup>\*</sup> Due to the COVID19 pandemic this meeting was conducted via MS Teams.

# **III. Preliminary DMHAS Budget Update Funding/Attestation of COVID19 Efforts** (Morris Friedman)

A. Due to enhanced Federal Match (FMAP) there have been no cuts for DMHAS.

## IV. 2021 Block Grant Implementation Report

- A. Mental Health (Dr. Yunqing Li, DMHAS)
  - 1. Yunqing gave an overview of the Block Grant Implementation Report
    - a. Major components of the Block Grant Implementation Report:
      - i. priority areas/indicators,
      - ii. fiscal tables, and
      - iii. URS data tables.
    - b. It is a joint effort involving different divisions and different offices in DMHAS.
  - 2. Yunqing also covered mental health priority areas/indicators, fiscal tables, and explained what data sources are needed for populating the URS data tables.
- B. Substance Abuse (Suzanne Borys)
   Suzanne reported on the components to be completed for the SABG listed below.
   Sections were sent to relevant staff in early September and are due November 6.
  - 1. **Synar Report-** This is due December 31, 2020. Survey was just completed. DMHAS is waiting for the forms from DOH. They will be scanned and analyzed by DMHAS.
  - 2. **Coverage Study-** DOH will hopefully start this soon which will be analyzed by DMHAS.
  - 3. Section I. State Information
  - 4. Section II. Annual Report
    - a. Table 1 Priority Areas and Annual Performance Indicators Progress Report
    - b. Step 3: Develop objectives, strategies and performance indicators.
    - c. The following Priority Areas, Populations and Goals will be updated:
    - TB: TB Persons with or at risk of tuberculosis who are receiving SUD treatment services, Increase compliance rate of DMHAS' SAPT Block Grant contracted agencies offering every client a tuberculosis evaluation.
    - Tobacco: Persons aged 12 17, Reduce the percentage of persons aged 12
       17 who report using any type of tobacco product in the past month
    - Alcohol: Persons aged 12 17, Reduce the percentage of persons aged 12 17 who reported binge drinking in the past month
    - Marijuana: Persons aged 12-17, Decrease the percentage of persons aged 12 17 who report Marijuana Use in the Past Year.
    - Prescription Drugs: All residents in New Jersey, Decrease the percentage of persons who were prescribed opioids in the past year.

- Heroin: Persons aged 12-17, Increase the percentage of persons aged 12 17 who report perceptions of Great Risk from Trying Heroin Once or Twice
- Persons Who Inject Drugs (PWID): PWID, To expand access to comprehensive treatment, including Medication Assisted Treatment (MAT), in combination with other treatment modalities, for individuals with an opioid use disorder, including PWID, through mobile medication units and other innovative approaches.
- Pregnant Women/Women with Dependent Children: PWWDC, To expand the capacity of existing programs to make available treatment services designed for pregnant women and women with dependent children.

## 5. Section III. Expenditure Reports

- a. Table 2 State Agency Expenditure Report
- b. Table 3a Expenditures for Syringe Services Program (SSPs)
  Program Information –Table A
- c. Table 3b Expenditures for Syringe Services Program (SSPs) rogram Information –Table B
- d. Table 4 SAPT Block Grant Expenditure Compliance Report
- e. Table 5a Primary Prevention Expenditures Checklist
- f. Table 5b Primary Prevention Expenditures by IOM Category
- g. Table 5c SABG Primary Prevention Priorities and Special Population Categories
- h. Table 6 Resource Development Expenditure Checklist
- i. Table 7 Statewide Entity Inventory
- j. Table 8a Maintenance of Effort for State Expenditures for SAPT
- k. Table 8b Expenditures for Services to Pregnant Women and Women with Dependent Children

## 6. Section IV. Populations and Services Reports

- a. Table 9 Prevention Strategy Report
- b. Table 10 Treatment Utilization Matrix
- c. Table 11 Unduplicated Count of Persons
- d. Table 12 HIV Designated States Early Intervention Services (no longer required for DMHAS)
- e. Table 13 Charitable Choice

## 7. Section V. Performance Indicators and Accomplishments

- a. SAMHSA's Treatment Episode Data Set (TEDS) data are used to pre-populate the tables that comprise SAMHSA's National Outcome Measures (NOMs) and include Table 20 Retention Length of Stay (in Days) of Clients Completing Treatment. All indicators for Tables 15 to 19 are presented for Outpatient, Intensive Outpatient, Short-Term Residential, and Long-term Residential. Table 20 is for all levels of care.
- 8. Tables 14-20 Treatment Performance Measures (pre-populated)
  - a. Table 14 Employment/Education Status

- b. Table 15 Stability of Housing
- c. Table 16 Criminal Justice Involvement
- d. Table 17 Change in Abstinence Alcohol Use
- e. Table 18 Change in Abstinence Other Drug Use
- f. Table 19 Change in Social Support Of Recovery
- g. Table 20 Retention Length of Stay (in Days) of Clients Completing Treatment
- C. Tables 21-35 Prevention Performance Measures (pre-populated)
   Most items come from the National Survey of Drug Use and Health (NSDUH)
   Questionnaire. Others are from different Federal surveys.
- D. Children's System of Care
  - 1. Nick is the new children's planner. He reported there were no reductions for the SFY21 Budget. \$41M was added to support the increase in rates. After January
  - 2. DCF will implement CMS changes. He updated the BHPC on DCF's three Priority Areas: Infant Mental Health (0-3 years), Integration of Behavioral Health and Health, and Increased Access to Evidence Based services. Preferred Behavioral Health is implementing an in-home recovery program based after the Yale program.

#### V. State Partners Involvement

- A. NJ Department of Corrections: No report.
- B. Department of Education
- C. Supportive Housing Association (Damian Petino, DoE)
- D. Division of Developmental Disabilities (J. Sabin, NJ DDD)
  - 1. The Division released Congregate Day Program Re-Opening Requirements on September 3, 2020.
    - a. Congregate Day Programs can elect to re-open as early as September 21, 2020.
    - b. Some programs may open later than that date or elect not to reopen at this time.
    - c. The decision to return to a congregate day program is solely the decision of the individual/guardian
- E. Division on Aging (Patricia Matthews, Div. of Aging)

## **VI. Open Public Comment**

A. Connie Green (St.Barnabas/RWJ) reported her agency received a grant from FEMA to provide COVID non-clinical support. They are targeting five populations.

## VII. Adjournment

- A. Next Meeting: November 11, 2020, General Meeting at 10:00 am.
  - 1. The general meeting and any subcommittee meetings will be conducted via video conference using MS Teams. See below for the following information to participate.

## Microsoft Teams meeting

Join on your computer or mobile app Click here to join the meeting

Or call in (audio only)

+1 609-300-7196,,946099531# United States, Atlantic City

Phone Conference ID: 946 099 531#

- 2. Subcommittee meetings to be announced.
- B. Lisa N. made motion to adjourn meeting, which was seconded by Tracy M.