

**Behavioral Health Advisory Council**  
**Meeting Minutes**  
**July 13, 2016**

Mission Statement:

*The Behavioral Health Advisory Council mission is to advise and educate the Division of Behavioral Health and Recovery, for planning and implementation of effective, integrated behavioral health services by promoting individual choice, prevention, and recovery in Washington State*

<b>Present:</b>	<p>Jeff Aldrich, Carolyn Cox, Ruth Leonard, Tory Henderson, Taku Mineshita, Linda Kehoe, JoEllen Woodrow, Mary O’Brien, Annabelle Payne, Vanessa Lewis, Moira O’Crotty, Susan Kydd, Marci Arthur, Michael Langer, Chris Imhoff, Becky Bates, Dan Halpin, Pamala Sacks-Lawlar, Jenni Olmstead, Phillip Gonzales, Myra Paul</p> <p>By phone: Brad Finegood, Kristina Sawyckyj-Moreland  <i>Visitors: Eric Osborne, Grace Cox, Carla Reyes</i></p>
<b>Members Excused:</b>	Beth Dannhardt, Kimberly Miller, Heather Maxwell
<b>Not Present:</b>	
<b>DBHR Staff:</b>	Martha Williams, Sandra Mena Tyree
<b>Minutes taken by:</b>	Martha Williams
<b>Call to Order</b>	Meeting was called to order at 9:07 a.m.
<b>Welcome; Introductions; Review of agenda; Review, amendments, and approval of previous meeting minutes</b>	<p>It was moved and seconded to approve the May meeting minutes with member initiated amendments. Motion passed.</p> <p>Carolyn Cox advised Council members that she is resigning as BHAC Secretary. Executive Team will be discussing whether to replace or eliminate the position.</p>
<b>Director’s Update: DBHR Strategic Plan Update 6312 Behavioral Taskforce – What does BHAC need to do?</b>	<p>Chris Imhoff reported that lawsuits regarding education will take up most of the budget this year; the state hospitals also will be a budget concern. Chris suggested this council follow Children’s mental health work group, Blue Ribbon Commission, and monitor the possibility of a new Children’s agency. Chris recommends that a member be assigned to check the governor’s website and provide updates to the council.</p> <p>DBHR is currently renewing tribal agreements. It looks likely that the direction for Mental Health will be carved out similar to American Indian/Alaska Native (AI/AN) Substance Use Disorder (SUD) carve out. Chris suggested that regular updates to the council would be advisable.</p> <p>State Hospitals continue to be in the news. A lot of work and effort is being done to train and obtain staffing. The real question is: why are more people needing treatment at the state hospitals? Chris believes that group homes are not the answer. With current challenges, it is difficult to have the opportunity to have practice sessions to integrate patients back into the community. Chris asks</p>

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	<p>the council to provide advice on what would help with current challenges at the hospitals.</p> <p>New legislation has instituted that peer professionals be allowed in local programs. This would be helpful with the workload and other current issues. Peers would be community employees that go into the agencies. Training is being provided. Peer services, currently, are reimbursable on the Mental Health (MH) side, but not on the SUD side.</p> <p>Members asked how the Behavioral Health work group (Workforce Council) works into the big picture of the hospital and local agency challenges.</p> <p>There is a work group discussing a plan to integrate Department of Behavioral Health and Recovery (DBHR) into the Health Care Authority (HCA). The face of this council would be changing, and an iteration of this council would be going with the HCA as well. Current values and language of HCA and DBHR are closer together than in the past. The work group is looking at a 2018 integration. Members wondered if conversations with BHOs, etc. have occurred; Chris responded that yes, the conversations have occurred and are being encouraged. Chris suggested that a presentation on the structure and elements of HCA might help the council adapt to that structure.</p> <p>Members requested that the current DBHR Strategic Plan be sent out again; Sandra agreed to forward that document to the Council.</p>
<b>DDCAT</b>	<p>Website: <a href="http://ahsr.dartmouth.edu/docs/DDCAT_Toolkit.pdf">http://ahsr.dartmouth.edu/docs/DDCAT Toolkit.pdf</a></p> <p>Michael introduced Eric Osborne, the director of the Dual Diagnosis Capability in Addiction Treatment (DDCAT) project. DDCAT is a project that involves integrating SUD and MH dual diagnostic services. DBHR has recruited 50 sites from almost every county in Washington to take part in the four year project. The Network for the Improvement of Addiction Treatment (NIATx) works with the agencies that are split into two cohorts and include both youth and adult agencies. Using assessments, reviewers look at whether the agency is capable of working with both MH and SUD. Assessments are performed by DBHR staff and information is turned in to NIATx</p>

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	<p>for compilation.</p> <p>Members requested to be kept informed regarding the results of the project.</p>
<p><b>BHAC Strategic Plan</b></p>	<p>Susan requested the strategic plan teams look at their portion and contact Susan if an update to their section is needed. The prevention team is missing members due to attrition, however, the Executive Committee is considering Shelli Young’s request continue to serve on BHAC and possible the prevention team. Michael suggested that members could participate on the state-wide prevention group (SPE) to assist with the state-wide prevention plan. Michael also suggested that someone from the DBHR Prevention team to assist the strategic prevention team in clarifying the plan’s prevention section. Susan agreed to send out an email requesting for new members or members who want to switch BHAC Strategic Plan teams. Tory will email Susan updates on the prevention portion of the BHAC strategic plan.</p> <p>Paradigm Shift team will conduct a conference call to update that section. Becky suggested that Kristen Royal be invited to address FYSBIRT at BHAC.</p> <p>Workforce team will need to update their section as well to include tracking and updating actions. Annabelle agreed to update and send to Susan for inclusion.</p>
<p><b>Living Calendar</b></p>	<p>The Living Calendar will be managed by the Executive Team. If members have any additions, please contact Susan Kydd. Members discussed several additional items to consider adding to the calendar such as bylaws, membership committee items, strategic plan, etc. Sandra shared about the peer review process, which this year, started in June. The Executive Team will email BHAC members for a show of interest in the AdHoc Peer Report committee which will meet in September with a report to BHAC in November. Sandra’s final report is due in December.</p>
<p><b>Block Grant Draft Discussion</b></p>	<p>Members were encouraged to make Block Grant comments to Sandra by August 4. Members asked what kind of feedback is being requested. Sandra responded that obvious omissions would be the</p>



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	community voices be heard in these meetings.
<b>Short Reports</b>	<p><b>Carolyn Cox</b> reported Local FYSBIRT services are moving forward: LGBTQ, and homeless. Family First is focusing on youth and working with the local Pasco school district.</p> <p><b>Myra Paull</b> stated that Pierce county and the BHO are working on communicating in an effective way.</p> <p><b>Linda Kehoe</b> informed members that Unity Healthcare was at the Pride Parade.</p> <p><b>JoEllen Woodrow</b> shared conversations regarding affordable housing.</p> <p><b>Mary O'Brien</b> related that Yakima homeless encampments have been established and local area meetings include conversations with SUD and MH providers.</p> <p><b>Annabelle Payne</b> informed members that BHO/Provider changes have been positive.</p> <p><b>Vanessa Lewis</b> reported she is working with several groups in Tacoma/Pierce County regarding homelessness. FYSBIRT meetings have also been attended.</p> <p><b>Susan Kydd</b> expressed concern with recent Opioid deaths.</p> <p><b>Michael Langer</b> relayed that MAT provider patient limits have been increased.</p> <p><b>Brad Finegood</b> informed members about King County Naloxone efforts.</p>
<b>BHA Strategic Plan</b>	<p>Carla Reyes asked the council members to introduce themselves. BHA has been asked to update the current strategic plan. The new plan is going to include the feedback on the old plan and what should be in the new plan. Carla is looking for input from various groups from staff to community members. After this meeting today, if you have suggestions that should be considered as additions or success stories that might be included, please contact Shawna Miller at <a href="mailto:Shawna.miller@dshs.wa.gov">Shawna.miller@dshs.wa.gov</a>. Ms. Reyes indicated that the draft plan will be provided to BHAC for review and suggestions as well. The new BHA Strategic Plan will be published in October 2016. Members expressed concerns with several aspects of current challenges regarding youth, complete integration of SUD/MH, funding streams, opiate crisis, workforce development, clearer goals and measures, consumer's due process if access is denied, and addressing unintended consequences.</p>

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<b>Membership</b>	<b>Regarding the vacant Secretary position:</b> Executive Committee will review bylaws to determine if a new secretary needs to be appointed, or if the secretary position can be eliminated. <b>Nomination Committee:</b> gather names of willing people to serve on Executive Committee. There was no response from the floor to the call for nomination committee members.
<b>Wrap up</b>	<b>November meeting:</b> ask Carla Reyes back <b>September meeting</b> Items and/or presentations: <ul style="list-style-type: none"><li>• Shelli’s membership- Executive</li><li>• Peer Review AdHoc</li><li>• Jennifer – Peer information</li><li>• Executive Team Secretary position vacancy</li><li>• Children’s team presentation</li><li>• Nominating committee members</li></ul>
<b>Adjourned</b>	Meeting adjourned at 2:50 pm.