



# State of Maryland Behavioral Health Advisory Council

Larry Hogan, Governor – Boyd K. Rutherford, Lt. Governor – Robert R. Neall, Secretary, MDH

## THE MARYLAND BEHAVIORAL HEALTH ADVISORY COUNCIL

### Minutes

January 15, 2019

#### Maryland Behavioral Health Advisory Council Members Present:

Barbara L. Allen, Barbara J. Bazron, Dori S. Bishop, Lori Brewster (**by phone**), Mary Bunch, Kenneth Collins, Jan A. Desper Peters, Lillian Donnard, Kate Farinholt, Ann Geddes, Lauren Grimes, Shannon Hall, Rosanne Hanratty, Carlos Hardy, Dayna Harris, James Hedrick, Michael Ito, Sharon M. Lipford, Dan Martin (**by phone**), Dennis L. McDowell, The Hon. Dana Moylan Wright, Luciene Parsley, Keith Richardson (**by phone**), Kirsten Robb-McGrath, Jacob Salem, Dana Sauro, Erin Shaffer for Stephen T. Moyer, Nicholas Shearin, Jeffrey Sternlicht, Tracey Webb (**by phone**)

#### Maryland Behavioral Health Advisory Council Members Absent:

Makeitha Abdulbarr, Karyn M. Black, John-Pierre Cardenas, Kathryn Dilley, Catherine Drake, The Hon. Addie Eckardt, Robert Findling, Christina Halpin, Virginia Harrison, The Hon. Antonio Hayes, Sylvia Lawson, The Hon. George Lipman, Theresa Lord, Jonathan Martin, Kathleen O'Brien, William Patten, Keisha Peterson, Mary Pizzo, Catherine Simmons-Jones, Clay Stamp, Anita Wells

#### Behavioral Health Administration (BHA) Staff Present:

Cynthia Petion, Marian Bland, Sarah Reiman, Richard Ortega, Steven Whitefield, Brendan Welsh, Melissa Barber, Tsegereda Assebe, Darren McGregor, Kim Qualls, Greta Carter, Eleanor Dayhoff (**by phone**), Kathleen Rebbert-Franklin

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c/o Behavioral Health Administration

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**Guests and Others:**

Steve Schuh, Opioid Operational Command Center  
Birch Baron, Opioid Operational Command Center  
Mary Drexler, Maryland Center of Excellence on Problem Gambling  
Julia Jerscheid, Mid-Shore Peer Support Specialist/Consumer Advocate  
Jacqueline Pettis, Beacon Health Options Maryland  
Ann Walsh, CBH of Maryland  
Brooks Robinson, Mid-Shore Consumer Advocate  
Virginia Spence, Caroline County Behavioral Health Services (**by phone**)  
Lydia Aimone, On Our Own of MD  
Kelly Moshogianis, Anne Arundel County CSA  
Vicki Scofield, Stepping Stones  
Linette Rivera (**by phone**)  
Tom Werner (**by phone**)  
Carol Boyer, Adelphi  
Denise Cushmaney, Netsmart  
Sandi Hart, Recovery Centers of America  
Andre Kennedy, Tuerk House  
Vanessa Bright, Maryland *Reentry* Resource Center  
Kelly Moshogianis, Anne Arundel County CSA  
Robert Canosa, Catholic Charities  
Jennifer Lowther, University of Maryland, SSW  
Robert He, ANC Business Management

## **WELCOME AND INTRODUCTIONS**

Barbara Allen opened the meeting and welcomed all members and guests who were in attendance in person and on the phone. Dan Martin in Annapolis today and joining by tele-conference.

The Minutes of November 20, 2018 meeting were approved and will be posted on the Behavioral Health Administration's website at <https://bha.health.maryland.gov/Pages/Maryland-Behavioral-Health-Advisory-Council.aspx>

## **THE DIRECTOR'S REPORT: Barbara J. Bazron, Ph.D., Deputy Secretary, Behavioral Health/Executive Director, Behavioral Health Administration**

### **Behavioral Health Administration (BHA) – Updates**

Dr. Bazron introduced Steve Schuh, the new Executive Director of the Opioid Operations Command Center (OOCC) and noted the importance of having a united front to address the opioid crisis. The number of opioid related deaths has leveled off and the number of opioid prescriptions has reduced by 15%.

- Mr. Schuh thanked the group on behalf of the Governor and Lieutenant Governor for all the work being done to address behavioral health issues. The State will release the 3<sup>rd</sup> quarter numbers that includes an alarming increase in the use of fentanyl which is involved in 80% to 90% of fatalities related to overdoses. There has been a slowdown in the rate of deaths. Most people began with legitimate prescriptions for pain. As noted, prescriptions for opiates are down. It is encouraging that physicians and hospitals are responding with more thoughtful use of opiates. The Governor's Executive Order names the OOCC as the leading agency in the State for coordinating the opioid response. The OOCC works with all 24 jurisdictions and local opioid intervention teams to identify best practices and fill in service gaps. Non-governmental state partners, such as hospital systems, physician groups, non-profit providers and faith based groups are also coordinating with the OOCC. The focus is on education, enforcement (diversion and arrests), and treatment and recovery. Treatment and recovery is where the bulk of the work lays. The OOCC maintains a close relationship with BHA and the Maryland Department of Health (MDH).

Dr. Bazron acknowledged Birch Barron the Deputy Director of the OOCC. Other states are looking at the model of Maryland in particular our cooperation and coordination across agencies, which ensures that the funding that we have is used efficiently and that we are all moving in the same direction. Our main goal is reducing deaths. Secretary Neal and the Governor have agreed to BHA's distribution of fentanyl strips, which can make a difference. We have to work directly with people who are in active addiction, using street outreach to engage people in treatment. Harm reduction initiatives are the focus. We are also looking at what efforts need to be made to improve treatment and intervention in prisons and jails as there is a high risk of overdose when people are released. They will need access to Naloxone and a "warm handoff" in order to get connected to treatment.

- Dr. Bazron reports that she has been tasked by Secretary Neall to increase the number of providers in the community. There are places in the State that have no providers and we must increase capacity. We need providers that treat both mental health and substance abuse as most people have co-occurring disorders. This will be a major area of focus.

**State Opioid Response (SOR):** Maryland's funding for the State Opioid Response (SOR) Initiative has been released. The SOR funding is \$33 million dollars this year and \$33 million dollars next year. We have to report on implementation of services with outcomes by September 30, 2019. The SOR grant for next year's money is due February 4, 2019. Allocation letters have been disseminated to the jurisdictions. Additionally, a Request for Proposals (RFP) for Recovery Residences has been issued. The RFP responses are due by January 30, 2019. Information is posted on the BHA website. Within the SOR grant portfolio there is also a major effort to increase crisis services. The full range of crisis services will be enhanced. There are also activities that will promote efforts to increase and improve services for transition aged youth (TAY). We must get "upstream" and provide some serious intervention to our young people in our school-based health centers, with an emphasis on providing a "hot handoff". Other efforts will include expansion of:

- Screening Brief Intervention and Referral to Treatment (SBIRT),
- Hospital based intervention that includes Peer Recovery Specialists going into Emergency Departments and working with people who have had near fatal overdoses and connecting them to care.
- Naloxone distribution, the saturation rate and need in our communities. Every behavioral health provider should have access to Naloxone and know how to use it.
- Medication Assisted Treatment (MAT). This will give people with substance use disorders access and choices of treatment.

BHA is also exploring specialized recovery housing for adolescents, as providing a drug free environment for 16 and 17 year olds is very different than the needs of 20, 30 or 40 year olds. We are also expanding the use of Adolescent Community Recovery Approach (ACRA) an evidence-based practice (EBP) that address issues of youth who have substance use disorders.

**Commission to Study Mental and Behavioral Health** - A new executive order (01.01.2019.02) establishes a major commission to be led by Lt. Governor Rutherford to study mental and behavioral health in Maryland. The Commission is tasked with advising the Governor on how to improve access to mental health services and the link between mental health and substance use disorders. The commission will conduct regional listening sessions to help inform our recommendations. Committee members will include representatives from the legislature, human services, public safety, and behavioral health as well as people with lived experiences. The Commission will convene by April, have a preliminary report due in September and a final report with recommendations by the end of the year.

**Behavioral Health Integration Project:** We are moving along at our systems integration approach at the jurisdictional level. Progress to date includes: implementation of the Learning Community for the Maryland Association of Behavioral Health Authorities (MABHA). They have completed five sessions that include self-assessments, change management, policies and procedures and peer sharing sessions on the Network of Care portal. We are assisting with working through challenges such as the separate funding streams, blending separate advisory councils for mental health and substance abuse, and limited local staff and budgeting to address integration in addition to their daily job tasks.

The Local Systems Management Integration Plan is completed and will be available on the BHA website soon. The document attempts to clarify the different roles of the Local Behavioral Health Authorities (LBHAs), the Core Service Agencies (CSAs) and the Local Addictions Authorities (LAAs), provides guiding principles for integrated systems management, pathways to achieve integration, as well as methods to ensure accountability for outcomes between BHA and the local jurisdictions. There is also a need for training and technical assistance so the jurisdictions have the necessary resources to be successful with integration. This includes a focus on outcome assessment, data analysis, stakeholder engagement, and cultural competency.

**ASAM Level 3.1 Transition:** As of January 1, 2019, ASAM Level 3.1 Recovering Housing for substance use disorders have transitioned to the fee for service network. The Department in collaboration with Beacon will host weekly Residential Joint Operation Team (RJOT) calls to identify and address any issues related to start-up, implementation or billing.

### **Council Questions and Comments**

Is there a look at spending some of the SOR money on transportation? Yes, but not enough. Also being addressed by other funding and planning.

Dana Harris from the Department of Housing and Community Development (DHCD) pointed out that there is also different language used by sister State agencies. The DHCD wants to use our resources to assist around housing issues, and we are unclear on how to get and share data, and what barriers are identified. Yes, we do have a good relationship with Secretary Holt at DHCD and we do have BHA staff dedicated to housing, so I want to ensure you are connected to Marian Bland and Priya Arokiaswamy here at BHA.

Barbara Allen informed the Council that the 24/7 Walk-In Crisis services report that the Council crafted is now on-line at the BHA website. It includes background on what is happening in this area around the country and what each Maryland jurisdiction is doing around crisis services.

Dr. Bazron will discuss the budget at the next BHAC meeting.

**PRESENTATION BY Dana Sauro, new BHAC member representing youth**

Dana Sauro presented a video and discussed *Active Minds-changing the conversation about mental health*, which is a student run organization, with 470 chapters on college campuses throughout the country. They are raising awareness of mental health and trying to change stigma. She noted that there are 11,000 suicides among college students annually and 2/3 of students deal with anxiety and depression. [www.activeminds.org](http://www.activeminds.org)

**COUNCIL BUSINESS & COMMITTEE REPORTS**

It is council election time, the executive committee to elect new co-chairs will meet after the legislative session. Dan Martin and Barbara Allen will remain as Council chairs until that time. All BHAC members are welcome to assist the executive committee in the selection of new co-chairs and all are encouraged to consider becoming a Council chairperson candidate.

The Cultural & Linguistic Competency report has been released. BHA is looking at additional funding for consumers who are deaf or hard of hearing.

The Planning Committee reviewed the BHA plan implementation report. They will be working on consultation for the upcoming two year plan.

Criminal Justice- no report today and not meeting today

Prevention- no report today

Children, Young Adults, and Families- the committee met with the Recovery Services and Supports Committee in November. We have heard concerns regarding the lack of services for adolescents with substance use issues, as well as hearing there is an increased demand for services as some providers have closed. We want to drill down on this issue to better understand what resources need to be in place. The committee will also follow activities around the Children's Data bill (HB1517/SB977 – *Behavioral Health Services and Voluntary Placement Agreements: Children and Young Adults Reports*) that passed last year, which requires the BHA and the Social Services Administration prepare reports that provide data on the availability of services for children and youth. The report must include various data points, such as utilization of services by age. We are hoping to see what data can be “mined” in order to better inform the system.

Recovery Services and Supports Committee the committee appreciates the approval by BHAC on the committee's name change. There are many good things happening across the State to prioritize recovery and recovery support services, such as housing and the utilization of peers. Barbara reported that the Certified Peer Recovery Specialist program now is offering additional certification to family members. Peers are now welcome into the forensic community as well. There is a request for CPRS training on the Eastern Shore. The committee is also looking at what recovery looks like and how to define it. Recovery can and does happen. The Department of Labor and Labor Relations received \$2 million to provide supported employment services for those in recovery. We are also focusing on seniors as we have learned of a significant increase in substance use among women aged 40 to 50. Additionally, people in recovery are experiencing health issues related to past substance abuse.

Meeting adjourned.

**THE NEXT BHAC MEETING IS SCHEDULED FOR MARCH 19, 2019.**