



State of Maryland Behavioral Health Advisory Council

Larry Hogan, Governor – Boyd K. Rutherford, Lt. Governor – Dennis R. Schrader, Secretary, MDH

THE MARYLAND BEHAVIORAL HEALTH ADVISORY COUNCIL

Minutes

July 18, 2017

Maryland Behavioral Health Advisory Council Members Present:

Barbara L. Allen, Dori S. Bishop, Karyn M. Black, Kelby Brick, Reggie Burke for Sylvia Lawson, Marian Currens, Stevanne Ellis, Robert Findling (**by phone**), Ann Geddes, Lauren Grimes, Elaine Hall, Shannon Hall, Carlos Hardy, Dayna Harris, Virginia Harrison, Vanessa Khoo for Jonathan Kromm (**by phone**), Susan Lichtfuss, Sharon M. Lipford, Theresa Lord, Dan Martin, Dennis L. McDowell, The Hon. Dana Moylan Wright, Nick Napolitano for Jonathan Martin (**by phone**), Luciene Parsley, Mary Pizzo, Charles Reifsnider, Linnette Rivera, Erin Shaffer for Stephen T. Moyer, Catherine Simmons-Jones, Jeffrey Sternlicht, Tracey Webb (**by phone**), Anita Wells (**by phone**), Albert Zachik

Maryland Behavioral Health Advisory Council Members Absent:

Makeitha Abdulbarr, Barbara J. Bazron, Lori Brewster, Mary Bunch, Kenneth Collins, Jan A. Desper Peters, Catherine Drake, The Hon. Addie Eckardt, Kate Farinholt, Christina Halpin, The Hon. Antonio Hayes, Japp Haynes, IV, James Hedrick, Michael Ito, The Hon. George Lipman, Kathleen O'Brien, Keith Richardson, Clay Stamp, Brandi Stocksdale, John Winslow

BHA Staff Present:

Cynthia Petion, Erik Roskes, Anna Barefoot, Robin Poponne, Hilary Phillips, Larry Dawson, James Yoe, Lori Mannino, Michele Fleming, Richard Ortega, Marian Bland, Darren McGregor, Leslie Woolford (**by phone**), Greta Carter

c/o Behavioral Health Administration

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Guests and Others:

Thomas Werner, Community Advocate-Frederick, MD (**by phone**);

Jackie Pettis, Beacon Health Options Maryland;

Vernon Spriggs (**by phone**);

Birch Barron, Opioid Operational Command Center;

Jordan More, Maryland Department of Legislative Services;

Jennifer Lowther, University of Maryland, School of Social Work;

Julia Jerscheid, Mid-Shore Consumer Advocate;

Cathy Howard, Anne Arundel County Health Department, Behavioral Health;

Terrence Morgan, Baltimore County Department of Health, BBH;

Lisa Lowe, F.A.C.E. Addiction MD;

Virginia Spence, Consumer Advocate;

Jessica Honke, NAMI Maryland

WELCOME

Dan Martin, opened the meeting and welcomed all members and guests. The minutes of the July 18, 2017 meeting were approved. The minutes will be posted on the Behavioral Health Administration's (BHA) Web site at <http://bha.dhmh.maryland.gov/Pages/Maryland-Behavioral-Health-Advisory-Council.aspx> .

ANNOUNCEMENTS

Maryland Department of Disabilities (MDOD) representative, Linnette Rivera, wanted to inform Council of the following initiatives that are impacting areas of the state and the nation as well:

- “This is my Brave” partners a playwright (who is in recovery from post-partum depression) and local individuals with a story to tell to develop a unique show that depicts issues such as mental health or substance use. Montgomery County recently hosted an event that emphasized issues of youth and of women. The shows are currently on a city to city tour and also traveling internationally in countries such as Australia.
- “Written Off” is an award winning film that was recently hosted by Second Genesis and is based on issues concerning opioid addiction.
- The film is also promoting “Community of Concern” which disseminates a pamphlet put together by Georgetown Preparatory school in Rockville that is a parent’s guide to prevention of alcohol and drug abuse. The pamphlet is easy to read, comprehensive, talks about legal consequences, and even shows parents what paraphernalia to look for and how to proceed if found.
- One Mind Campaign – a national initiative with a police chapters. The number of deaths by police in the nation number beyond 1000 individuals with mental illnesses. This is a national effort to encourage awareness and training for police. In Annapolis the campaign efforts support results such as 35% of Annapolis police are CIT trained and all are trained in Mental Health First Aid.

While there may not be specific dates or events, Ms. Rivera wanted the Council to be aware and informed. More information is available on MDOD’s website at <http://mdod.maryland.gov/Pages/Home.aspx> .

INTRODUCTION – Birch Barron, Deputy Director, Office of Opioid Operational Command Center

The Hogan’s Administration’s 2017 Heroin and Opioid Prevention, Treatment, and Enforcement Initiative included the creation of a statewide Opioid Operational Command Center (OOCC) to assist in the coordination of federal, state, and local resources.

Birch Barron gave the Council an update and discussed the process of choosing priorities for the initiative.

The four main goals that OOCC wishes to address this year are:

- 1) Prevent new cases of opioid addiction and misuse
- 2) Improve early identification and intervention of opioid addiction

- 3) Expand access to services that support recovery and prevent death and disease progression
- 4) Enhance data collection, sharing, and analysis to improve understanding of and response to the opioid epidemic

OCC focusing on Prevention, Enforcement, and Recovery/Treatment. Efforts include Social marketing campaigns, Naloxone project expansion, creation of a warm line, peer recovery specialist, harm reduction outreach, and expansion of crisis beds and residential services, just to name a few. A large percentage of funding will be distributed to local Opioid Intervention Teams (comprised of local emergency managers, health officers, representatives of EMS, schools, the Justice system juvenile justice, corrections and probation, local executive government, etc.) for each jurisdiction to have input and determine how best to address the opioid crisis.

Mr. Barron can be contacted at birch.barron@maryland.gov

THE DIRECTOR'S REPORT – BHA's designee for the Director's Report – Marian Bland, Director, Clinical Services

Ms. Bland provided the following updates:

- **State Targeted Response (STR), also known as the Maryland Opioid Rapid Response (MORR)**
Maryland has received funding under the auspices of SAMHSA's CURES Grant, created through an Act requiring federal support to states to address the opioid epidemic. Maryland has renamed the grant the MORR grant, which will assist in initiatives that coordinate with the efforts of the OCC such as: IT support for specific data collection and analysis; creation of a "Talk to Your Doctor" module that reduces stigma and empowers people to talk to their medical professional about prescribed opioids; a Warm line; expansion of the Naloxone initiative; and expansion of crisis beds and capacity within residential facilities. These efforts will involve individuals system-wide and across the lifespan.
- **Transfer of Grants – Substance Use Disorders (SUD) IMD Residential Treatment Services**
Under the Department's 1115 Waiver Renewal Initiative, community residential clinical services for individuals with substance use disorders (SUD) were transferred from grant-funded to fee-for-service (FFS). On July 1, 2017, Medicaid began provisions for reimbursement for up to two nonconsecutive 30 day stays in a rolling year for ASAM- (American Society of Addiction Medicine) levels 3.7WM, 3.7, 3.5, and 3.3. The Department, in collaboration with BHA and Beacon Health Options will lead Phase 2 in January 2018 which will include pregnant women with children and individuals who are court-ordered under 8507 legislation.

Recovery Residences

In 2016, the legislature passed HB 1411 requiring the Department to approve a credentialing entity to develop and implement a certification process for community

recovery residences. This includes approximately 1200 beds /136 houses. Recently, trainings began on June 19 and 20 for Recovery Residences Certification. Additional trainings will be held in the upcoming year.

COUNCIL BUSINESS/UPDATES: CRISIS SERVICES REPORT – Dan Martin, Co-Chair, the Maryland Behavioral Health Advisory Council; and Hilary Phillips, Director, Office of Planning, Behavioral Health Administration

The Behavioral Health Advisory Council (BHAC), in consultation with various stakeholders, is required by House Bill 682/Senate Bill 551 to develop a strategic plan for ensuring that clinical crisis walk-in services and mobile crisis teams are available statewide and operating 24 hours a day and 7 days a week. The Executive Committee of the Behavioral Health Advisory Council serves as the Steering Committee to guide the process for the development of the Maryland Crisis Services Strategic Plan.

As a primary step in the process to implement SB 551, the Steering Committee developed a survey designed to generate feedback related to the availability of clinical crisis walk-in Services and mobile crisis teams as well as to help identify priorities that will be used in the development of the strategic plan. Initially, the survey was piloted for Council members and then went live for the public from mid-October 2016 to January 31, 2017. In early 2017, the survey results from the more than 1,000 respondents were completed and the analysis informed an environmental scan that gathered information on gaps, training requirements, best and promising practices, what crisis services currently existed in Maryland and nationally, as well, use of incentives, existing collaborations such as connections with Crisis Intervention Teams (CITs), and what and how staff can best be utilized.

The Crisis Committee is currently using the results of the Survey and Environmental Scan to inform components of the Plan. A draft plan is being developed for public comment and a final Strategic Plan will be submitted to the Governor and to the Legislature by December 31, 2017.

The Committee has been meeting for a year and has had the benefit of a BHA Consultant, Dudley Warner. However, Mr. Warner's contract ended this fiscal year. He has been replaced by Donna Wells, former Director of Howard County Core Service Agency. Additionally, this Committee has tied its work to the Department's/BHA Forensic Services Advisory Council to further support the recommendations to increase the availability of community crisis services.

The next meeting is scheduled for August 11. Anyone interested in participating or adding feedback to the Committee may contact Greta Carter at greta.carter@maryland.gov

The Council Co-Chairs took some time to give members an opportunity to talk, to express what was what was on their minds. Council members have been quite active both outside of the Council and within the committees and Barbara Allen said that sometimes in the “chaos of progress” it is good to take a moment to simply talk with each other.

During this discussion, the following was shared:

- The Eastern Shore is observing an increase in opioid addiction. The area is in need of more providers.
- Frederick County has received additional funding for treatment in the detention center and the Core Service Agency is leading the CIT training of police. Behavioral health integration is progressing. It is a challenge to maintain a balance of meeting needs of both mental health and substance-related disorders. There is a need for more crisis beds.
- It would be helpful if the Council and the Committees had a comprehensive list of the various advisory councils/task forces throughout the state and their goals to help the Council committees to be in alignment and not duplicate activities.

Cynthia Petion added that to keep informed of activities locally and across the state, it was important for Council members to connect with their local advisory councils – local mental health advisory committees (LMHACs), local drug and alcohol committees (LDAACs), and other local boards.

The discussion moved into short reports from the Council Committees:

- 1. Cultural Linguistics and Competency Committee** - This committee is in need of a Co-chair as it moves forward in further planning activities.
- 2. Criminal Justice-Forensics Committee** – Members continue to look at the number of individuals who are court-ordered for treatment under 8507 in state facilities and experiencing delays in placement. Members are awaiting answers to questions submitted to BHA regarding how 8-507 beds will function in the future and the effective use of the Justice Re-investment Act funding (manages and allocates services to criminal justice populations in a more cost-effective manner, and reinvests the savings)
- 3. Planning Committee**- The Planning Committee is in the midst of the process of reviewing the draft of the FY 2018 State Behavioral Health Plan. The timeline is a bit later this year because the planning process has been more inclusive of all levels of BHA staff as new goals and priorities are being established. Some of the goals are a result of input from the Governor and the MDH Secretary. However, the format is still driven by current concerns and federal mandates. Moving forward from the April Stakeholders meeting and recommendations, the Planning Committee held a preliminary teleconference in July 12 and will review a draft document after today’s meeting.

4. **Prevention Committee-** Committee continues to identify risk factors, mindful of needs of mental health, substance use, and other addiction disorders. Also defining prevention and wellness opportunities to address issues behind these risk factors in schools, families, individuals. Members are glad to see steps being taken to address prescribing practices of opioids
5. **Life Span I Committee** – Mary Bunch has agreed to join Ann Geddes in co-chairing this committee. They will continue to focus on crisis beds/services needs, especially in Baltimore City, for children and adolescents and will share recommendations with the Crisis Services Committee. The members have concerns over the large number (34) of youth who are placed out of state for residential treatment services, particularly after the closing of three residential providers. Also, a consultant came to a meeting to discuss BCARS and some of the barriers it faces while serving the youth in Baltimore City after a decrease in funding. The Committee will be looking into what type of supports will be helpful. Members will also be learning more about block grant funded projects for children and adolescents.
6. **Life Span II Committee-** Members have been looking into the role of peer specialists and have recommendations such as expanding the role of peers in prevention work and encouraging the wide-spread sharing of personal experiences.

Dan Martin requested that Committees that have not yet turned in a written report please do so and that, in the future, each committee submit a one page report prior to the meeting to give the full Council an opportunity to read and formulate questions. This written report is also important to have for input into the Annual Report to the Governor in December. In noting that a few committees needed a co-chair, Mr. Martin asked all Council members to step up and consider filling these vacancies.

The meeting was adjourned.