

Behavioral Health Advisory Council (BHAC)

April 21, 2021 Minutes

DRAFT

MEETING DETAILS	
Date and time:	April 21, 2021 from 10am to Noon
Venue:	Virtual through Google Meet due to the ongoing pandemic
COUNCIL DEMOGRAPHICS	
Present	Patrice Beard (Parent and Partnership for People with Disabilities); Elizabeth Bouldin-Clopton (PEER); Hilary Piland (VACSB); Bruce Cruser (MHAV), Quyen Duong (DOE); Livia Jansen (DJJ); Heather Pate (Robin’s Hope); Nathanael Rudney (DBHDS); Tara Belfast-Hurd (DBHDS); Karlyn Clevert-Smith (Private Provider); Sarah Wilson (NAMI-VA); Dreamel Spady, LCSW (Private Provider); Ron Pritchard (VSIAS/VAAP/VA Recovery Coalition); Mary McQuown (DBHDS); Deidre Johnson (VOCAL); Katharine Hunter (DBHDS);
Guest(s)	
Unexcused Absences	Gail Taylor (DBHDS)
Excused Absences	Patricia Parham (DOC); Oketa Winn (DMAS); Jean Hoyt (VDH); Shatada Floyd-White (Private Provider); Heather Orrock (VOCAL) – Deidre Johnson attended for VOCAL
Minutes Taken By	Hilary Piland
Presiding Officer	Patrice Beard, President
Order Called	Council convened at 10:00 AM

Quorum **was** present in today’s meeting (requires 13 members, a majority [7 out 13] of these members need be consumers/peers, advocates, and family members)

	Item	Discussion/Action	Responsibility/Follow-Up (if applicable)
Welcome, Introductions, Public Comment:			
		<ul style="list-style-type: none"> Patrice began the meeting with an icebreaker where everyone at the meeting shared what karaoke song they would sing if they had to. There were no public comments 	

Approval of Minutes from Previous Meeting			
		<ul style="list-style-type: none"> Ron Pritchard made the motion to approve the February minutes and Heather Pate seconded that motion. The council voted to approve them. 	
Committee Reports/ Nominating Committee Report			
		<ul style="list-style-type: none"> No update from the nominating committee 	
Treasurer's Report:			
		<ul style="list-style-type: none"> Bruce Crusser shared that the BHAC has a balance of \$10,070. There were no expenditures in last quarter. Bruce reminded council members to reach out to him if they wanted to attend a virtual event and/or training and want to request funds from BHAC. Bruce will then send an email to the executive committee for approval. Some opportunities will be coming up through the VOCAL and VSASIS conferences. 	
Executive Committee Report:			
		<ul style="list-style-type: none"> Patrice Beard share that the Executive Committee met in March. The committee reviewed the two letters from the Adult and Elder Committee. One letter will go to certain colleges and universities across Virginia to request that they let the Adult and Elder Committee know what MH services the college/univ. provides and how those services are advertised to students. All public institutions are required to have mental health and clinical information listed on its website for the students to access. The other letter is to request information from the Office of Aging Services to find out more about elder services currently being provided in Virginia. The Executive Committee made some revisions to the letters and sent the letters back to the Adult and Elder Committee with the BHAC letterhead. 	
Membership Report:			
		<ul style="list-style-type: none"> Sarah Wilson notified the council of a new applicant to the council that was referred by Heather Pate. She shared that Nick Pappas is a great candidate. He has served on the board for Chesterfield County CSB and is involved with other organizations. He is passionate about MH services and has personal experience. Sarah motioned that the council vote to approve Nick Pappas as a member of the council. Ron Pritchard seconded that motion. There was a unanimous vote to approve Nick Pappas as a member. 	

		<ul style="list-style-type: none"> • Sarah shared that the membership committee would like to add the categories of race, creed, religion, national origin, sexual orientation, gender identity, age, ability, and geographic location to the membership application. The council wants to have a diverse membership and tracking these categories will allow the council to improve its diversity. <ul style="list-style-type: none"> ○ Changing the membership application means a change to the bylaws. Sarah had notified the council weeks in advance of this meeting of the membership committee’s intention to change the bylaws, so it is now allowable for the council to vote to change the bylaws to allow the change to the membership application. ○ A member does not have to fill out these categories. This part will be voluntary. ○ This change does not change the federally mandated categories that SAMSHA tracks. That is separate. ○ Ron Prichard asked that the word “proactive” be added to the membership application so that it is clear that the council is intentional in having a diverse membership. The council should be “proactive” in inviting full participation within the council. ○ The motion was made to approve Ron’s suggestion and to approve the changes to the membership application related to diversity. Heather Pate seconded that motion. The council unanimously voted to approve that motion. ○ Sarah will send a diversity survey to the BHAC members to fill out if they choose to. This will help the council to see what diversity it currently has. • Sarah shared that she is looking into the rules around term limits for BHAC members. The council was not clear which members have term limits and whether terms can be extended. <ul style="list-style-type: none"> ○ Ron Pritchard expressed that if the rules are set so that state employees do <u>not</u> have term limits, but other members do, then that should be changed. The concern is that it is not fair if a state employee on the council does not have to rotate off while other members do. 	<p>OUTCOME: Sarah will send a diversity survey to the BHAC members to fill out if they choose to. This will help the council to see what diversity it currently has.</p>
<p>DBHDS Report:</p>			
		<p><u>Margaret Steele from DBHDS gave a report on the COVID relief funding that is coming through the MH and SA Block Grant.</u></p> <ul style="list-style-type: none"> • This will be additional funding to the normal MH Block Grant and SA Block Grant funding. This is one time funding, but DBHDS does expect more COVID relief funding to come after this relief, which will be one time as well. The time frame for both these amounts of funding combined may run till 2025. 	

One-Time COVID Relief Block Grant Funds for Substance Abuse & Mental Health:

The following are special one-time funds for COVID relief that are in addition to the regular, reoccurring Substance Use and Mental Health Block Grant funds.

- COVID Relief Substance Use Block Grant Funds:
 - \$39,348,104.00 – over 2 years (Budget Period – 3/15/21 – 3/14/23)
 - Funds from this should be going to Community Providers – it is not known yet how much or how those funds will be distributed.
 - Set Asides
 - Prevention - 20%
 - Administration - 5%
 - Pregnant and Parenting Women - \$3,869,867.00
- COVID Relief Mental Health Block Grant Funds:
 - \$20,718,461.00 – over 2 years (Budget Period – 3/15/21 – 3/14/23)
 - Funds from this should be going to Community Providers – it is not known yet how much or how those funds will be distributed.
 - Set Asides
 - Administration - 5%
 - Crisis NEW - 5%
 - Children - \$1,501,623.00
 - EBP SMI (First Episode Psychosis/Coordinated Specialty Care) - \$2,071,846.00

Expenses Allowed and Not Allowed:

- The expenses NOT allowed will be similar to what is NOT allowed for the MH block grant. Vehicles, building expenses, cell phone are some of the items that are not allowed.
- Areas that can possibly be allowed: standing up mobile crisis for adults; additional services for priority populations like women and children; coverage for individuals uninsured to have access to MAT; infrastructure needs related to antiquated existing networks; improving workforce needs related to impacts of COVID.

One-Time COVID Relief Mental Health Funds from SAMSHA directly to Community Mental Health Centers

- This is \$20M in funds for up to a two year period.
- Due date for application is **May 21, 2021**

Bruce Cruser brought up the bed census crisis at state psychiatric hospitals and asked Margaret if she knows if her department at DBHDS is working on addressing the immediate needs for the census crisis.

- Margaret shared that DBHDS has worked diligently to fund positions and programs to reduce capacity at state hospitals. The issue is 2 fold: There is an intake issue where there are many people going to state hospitals that do not always need to be at the state hospital and then there is the discharge issue in that there are too many people on the Extraordinary Barriers List (EBL). These are people that are ready for discharge, but placement into proper care or housing for that individual is not available yet. There are not enough community services available to serve all the individuals ready to leave the hospital. Housing is the largest need.
- The mobile crisis roll out, funding of additional crisis stabilization, rebuilding of the detox and residential environments for people coming in ED for SUD are all areas that can divert people from coming to a state hospital.
- DBHDS meets every week to discuss people on the EBL and tries to come up with a solution for getting those people properly discharged.
- Margaret shared that DBHD did try to create a partnership with nursing homes where a mental health case manager could work in nursing homes to address the mental health needs of some of the geriatric population. SAMSHA did not allow DBHDS to do this because SAMSHA does not view nursing homes as a community based provider so SAMSHA would not fund that.

Patrice asked if there are many funds going to Prevention

- Margaret shared that historically prevention has received funding for SUD and not MH. DBHDS did move some money to be used for MH prevention efforts. This was to expand the MH First Aid program and Suicide prevention. Also, DBHDS is working on providing support to the mobile crisis program. This will be a statewide call center for the family, friend, or the individual to call and a team will be dispatched to do immediate intervention at the home or wherever the individual is. This is to avoid accessing the ED. Then, during that 72 hr. period of support there would be a secondary team that would come to the individual's living environment to help sustain the individual's stability and connect them with services. This mobile crisis plan is based on the Crisis Now Model. Heather Norton is managing that initiative.
- Sara Wilson asked how the Crisis Now Model will work with the Marcus Alert co response teams and the federal 988 number. Margaret shared that the large part of

		<p>the children’s mobile crisis step of STEP-VA is funded by the state, so the children’s mobile crisis part is funded. DBHDS is hiring for a Crisis Director position right now. The mobile crisis, the Marcus Alert co response teams and the 988 call center will need to all collaborate. Margaret suggested that the BHAC invite Heather Norton to speak to the council on those long term goals.</p> <p><u>Office of Child and Family Services at DBHDS</u></p> <ul style="list-style-type: none"> • Katharine Hunter shared that the Office of Child and Family Services has a new substance use specialist. Her name is Mia McCoy. • In April the office had a two day symposium on substance use geared toward providers that work with youth and young adults. Once those videos are posted Katharine will share those with the council members. • DBHDS has applied for a System of Care Grant and a grant on Screening Brief Intervention and Referral to Treatment (SBIRT). • DBHDS will be promoting Children’s MH Awareness Week. Katharine is working on 5 videos that will be posted online. The theme this year is Resiliency in Times of Adversity and Uncertainty. 	
Block Grant Report:			
		<ul style="list-style-type: none"> • Nathanael shared that the Block Grant committee met in March. The committee will continue to keep the council updated and involved in the block grant process. The committee will ask the council to review sections of the block grant sometime during July or August. The block grant is due to SAMSHA September 1st. The applications for the block grant will be around \$20M. Some sections will go to different offices within DBHDS to review. For example, the office of housing is reviewing sections relating to housing. Peer related funding will be reviewed by the Office of Recovery Services. Margaret Steele and Nathanael will review the block grant and provide an overall narrative of the snapshot of how the BH system is looking and provide updates since the last submission. There will be new areas to report because of COVID. 	
Committee Reports:			
		<p>Children and Youth Committee Update:</p> <ul style="list-style-type: none"> • Katharine Hunter shared that the Children and Youth Committee is continuing its work on documenting all the MH services available in school. Last month the 	

committee reviewed all the data that shows what mental health services are provided in schools. This is data that DBHDS receives. The committee has identified a group of CSBs to ask some follow up questions regarding mental health services in schools.

Adult and Elder Committee Update

- Tara Belfast-Hurd shared that the committee has gathered the information it needs to send the letters to colleges and universities. The committee has gathered contact information for counsellors and mental health clinician offices at these colleges and universities. The committee plans to send letters to 1 public and 1 private university/college from each region of Virginia.

Explanation of this initiative from February 2021 meeting: One letter is to send to 1 public colleges/university and 1 private university from each of the 5 DBHDS regions across Virginia to start a conversation with college administrators on the MH services these colleges provide and the accessibility of those mental health services. The committee wants to make sure college students are aware of the services. All public institutions are supposed to have some type of policy in place for mental health services for students. Also, each public institution is supposed to have mental health and clinical information listed on its website for the students to access. What is not known is what agency or organization is responsible for policing the public universities and what are the universities' tracking systems as far as how students are engaging in those services. As well, the committee would like to find out if there is data on when students are being referred to services off campus. The committee knows that more and more college students could very well need services. Students are having an alternative experience because of COVID-19 because they are not having the college experience they had looked forward to. The committee has looked at Community Colleges but has not found as much on MH services on the Community College sites. The committee plans to section out this project by region. This way the committee can provide local resources to universities and colleges that need them. The other letter is to inquire more about elder services. The committee plans to send the letter to the Office of Aging Services which is a state organization that is part of DARS. Isolation for the elderly was a large problem before the pandemic and has increased with the pandemic.

New Business

		Notes taken by Hilary Piland
	Meeting was adjourned at: 11:50 AM	

Next Meeting(s):
June 16, 2021

Location of meeting: via Zoom

MINUTES APPROVED BY COUNCIL ON _____

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