



BEHAVIORAL HEALTH COUNCIL MEETING- Minutes
March 24, 2017 10:00 a.m. - 12:00 p.m.

Call to Order, Chair Department of Behavioral Health, Behavioral Health Council (DBH/BHC)

This was a regularly scheduled meeting of the Department of Behavioral Health Behavioral Health Council (DBH/BHC). The BHC was called to order by the Chair, Senora Simpson at 10: 02 a.m.

A quorum was present

The Chair appointed Ms. Copeland to record Minutes in absence of a permanent Secretary.

Meeting Participants:

The in-person participants included: Senora Simpson, Mark LeVota, Donna Anthony, Nicole Denny, Jocelyn Route, James Wotring, Senior Deputy Director, Juanita Reaves, Yair Inspector, Donna Flenory, Tamitha Bland, Laura Heaven, Jennifer Lav, Colin Anthony, Donna Anthony and Cheryl Doby-Copeland.

Dial-in participants included: Doris Carter, Julie Kozminski and Effie Smith

Agenda approved with Ms. Devita Crockett reporting instead of Ms. Jones.

The 1/27/2017 Minutes were approved unanimously.

Standing Committee Reports- No standing committee reports available.

Unfinished Business

- Applied Research and Evaluation Unit**
(See January Minutes Action item 4)

Laura Heaven/Mr. Wotring

The data analysis will guide the work of the DBH/BHC. The report entitled *Mental Health and Substance Use Report on Expenditures and Services* (MHEASURES) January 15, 2017 is available on line. The report is updated bi-annually and covers issues related to the numbers of people receiving both mental health and substance use services. The report is limited only to claim services, therefore Free Standing Mental Health services (FSMS) data is missing along with private insurance data. Children's National Medical Center (CNMC) or data post hospitalization is not included. CNMC is not required to give DBH data. We also need to collect data on outcomes; however outcomes have not been defined. It was suggested that CAFAS/PECFAS data can be used in the future.



Additional data that would be useful included discharge data, i.e., administrative, successful completions/unsuccessful, etc. Also, how can data be captured that reflects interventions/input from natural and/or family run organizations. All of the additional information could inform gaps in the provision of mental health services as well as provide support to grass roots organizations that are seeking grants.

□ **Office of Legislative/Public Affairs**
(See January Minutes Action item 1)

Davita Crockett

The DBH Office of Legislative/Public Affairs purpose is to provide education/outreach while working with the Mayor's Office and the D.C. City Council. This office responds to constituent complaints and handles special projects assigned by Dr. Royster. Representatives from this office attend Advisory Neighborhood Commission (ANC) meetings, and work with other entities/constituents to provide an overview of DBH. In consultation with the Mayor's Office and the D.C. City Council the Office of Legislative/Public Affairs track hearings and legislation. For example, during January this office worked with several faith-based groups (Bishops/Ministers from D.C.) to sponsor Behavioral Health Sunday, a Sunday on which sermons were geared toward mental health services.

Ms. Crockett suggested that the BHC's role with regard to the Office of Legislative/Public Affairs might involve testifying at hearings, supporting the public outreach, and suggest meetings to support providing the community with information about DBH. For example, does the community know about the DBH/BHC? What should the BHC advocate for? How can social media assist? Should this group provide training for uninformed individuals on applying for grants? Is training something that the Block Grant Committee could do?

Ms. Crockett indicated she would attend the BHC meetings and provide updates as needed.

□ **DBH Block Grant Policies, Procedures, Updates**

Juanita Reaves

Dr. Reaves monitors the sub-grantee progress reports. The DBH fiscal program staff monitor the expenditure reports. Progress reports were provided to the DBH/BHC for the 10 sub-grantees. The SAMHSA Draft FY18-FY19 Mental Health Block Grant Application was forwarded to the DBH/BHC for review on 3/23/17. The document included changes to the Block Grant requirements. It also added a provision for Behavioral Health Planning and Advisory Councils to identify a project for inclusion in Block Grant. The DBH/BHC will need to decide on a project. The current Block Grant ends on 9/30/17, if money is available the current 10 sub-grantees will be funded for a second.

The DBH/BHC noted that the draft application could be used by the Council for a BHC project; however the Council felt it needed clarity on the direction DBH is taking.



Department of Administration and Management

Mr. Wotring

- Unable to report on the budget until the Mayor's office releases it.
- Realignment - An all staff meeting is scheduled for 3/28/17. The realignment was approved by the District. There will be diagrams/pamphlets at the next BHC meeting to aid in the discussion of the realignment. The realignment will be phased in with different units reporting to different places over the summer. Some Departments have been renamed.
- A small percentage of staff will move offices -3%. The realignment will impact about 17% of staff. Majority of staff will not have a job change.

Action Items

1. The Block Grant Committee should review all 10 sub-grantee reports and provide an assessment on the progress and make comments and suggestions to the BHC. Uniform reporting may be a suggestion. In addition, all BHC members should review the reports and provide comments to the Block Grant Committee.
2. The Data Analysis Committee should review reports on the fiscal aspects of the applications and report findings to the BHC.
3. Share data from OSSE, which would provide information on the numbers of children receiving services under IDEA, 504 Plans.

New Business

- A draft BHC Self-Assessment was disseminated and the Chair and requested feedback on the form and consideration for adopting this as an annual assessment and report.
- Open DBH discussion to reach consensus regarding:
Role/Expectation of the BHC- to participate and gain a deeper understanding of DBH to provide information to Mr. Wotring and advise on big policy issues.
Current/Future Directions- Person-centered care, peer support, making it clear what it is and what it is not.
- Fully integrate the old clinic services, outpatient services from Health Care financing with DBH. Data is currently being gathered on the Free Standing Clinics, which should be presented to the Council.

New Grant Announcement

Jocelyn Route

- Coordinating services for the 18-25 population who have intellectual disabilities, substance use, and mental health needs. A provider will be brought on that will work with the court system. Hospital for Sick Children works with his population.
- Investigate ways to better integrate health and mental health services- Health Home projects. There is a national initiative to investigate integrating whole health and mental

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health services for the adult population. Discussions are underway to place a mental health clinician in the doctor's office.

- Explore Medicaid Options.** Meeting monthly with the Department of Health Care Finance to re-design the State Plan. There is a need modernize, therefore over the next year input is requested from providers and consumers.

Announcements -No new announcements

Public Comments -No Public comment and none in attendance

Next scheduled BHC meeting is June 2017, and the date will be determined after polling of the members by DBH.

Meeting Adjourned at 12:10 PM.

Cheryl Doby-Copeland, PhD, ATR-BC, LPC, LMFT