Local Collaboratives Meeting – March 10, 2006
Minutes/Comments

Facilitated by Secretary Pam Hyde

- Pam is spending time working for future and not focus on past
- This is a new process. Let’s work together
- No one got additional funds to do this. We all have other jobs. We struggle together.
- Resources are being looked at for delivery. We need to find the funds to do our work.
- Pam went to DC and federal government is reducing deficit. This does not make our tasks easier.
- NM needs to elevate the issue in one common voice. The challenge is getting us to that common goal.
- Right now, too many regions have different issues
- Pam’s goal is to create a single voice/issue
- Now that all 6 regions are on board, we may see things go a little faster
- LCs need to think about how they can get their own funding

Participant/LC introductions

Open Discussion

- Douglas/JD1: Who is going to do the data monitoring? Please identify staff or pay for someone to do it.
- Susie/JD3: Can each JD have at least 50% of 1 designated staff’s time to at least help with clerical items?
- Clare/JD7: What specifically do you want from consumers?
- Susie/JD6: There are many agencies that are already gathering data. Let’s be sure to not duplicate efforts.
- Pam does not want to create formal roles. She hopes that by next year we can reduce duplication or competitions with each other. But she really wants there to be an understanding that this is a work in progress.
- Gene?/Region 6: $1.5 mill have been set aside. Those $$ have been divided between the regions. Those $$ specific to Native initiatives should reside in Region 6.
Pam said Regions do not have $. VO has $. Data is an issue that is a work in progress.

Susy Ashcroft/Navajo Nation (NN): It’s difficult to get consumers. Can some health boards or community voices to not duplicate consumer roles.

Pam: We will discuss the roles consumers of the LCs.

Milagro/JD11: Need to get technical assistance so that tasks aren’t duplicated; need structure

Terry/JD?: Concerned in reviewing draft, there are several populations that were not included (i.e., traumatic brain disorders, autism, etc.)

Pam: We are correcting the language proposals for the contract.

Gaye/JD2: Who made the decisions about the Reinvestment $$? Why were the LCs not included in the decision making process?

Pam: We had $ marching along path for sometime. We waited for all of the LCs to be recognized before distributing.

Jack: It’s a work in progress, hoping to better organize and structure.

Peter/JD2: We are not speaking about the main issue. LCs don’t feel that the advisory bodies actually listen to the communities. Some states have LCs in charge of $ and they have more authority. Are we just a Government council? If so, then we just speak to ourselves. Do we have equal say? Do you want us to have any authority?

Pam: Neither. We have been clear from the start before putting $ on the table before LCs were recognized. The current process is unfolding. We need to first have a common voice. None of us have ever designed it to where we own the money. LCs have a significant role in making suggestions. You are not looking at the budget that we are requesting, but the Feds are cutting funds. Think with us. We are evolving and building. You are real. We believe in LC. How that emerges, we are still pushing that agenda forward.

Michelle G: It’s not about pointing fingers. We all get the same pressure. They are still waiting for access. We are utilizing you to try and get these funds. WE all want the same thing. We can’t lose sight of building this system.

Patrick: Budgets are under constraints. Each year there are advocate groups requesting funds. Some level of local political voices to build the bills past. We need to work together. We do ask for more $ each year.
Michael/VO: Process is being developed because in the past it was not working. It's about “we” not “I.” Let’s work together to meet the needs of the community.

Ben/JD1: Providers lost $. We paid to get into this. Too many funds have been cut. Providers don’t have advocates. We go individually. As LCs, how can providers create an advocacy group to increase and stop having funds cut. We need a logistical agenda.

Albert/NN: How effective are the roles of LCs going to be recognized? How much of the LCs voice goes up to the Gov.? Indians don’t want to be forgotten. I believe LCs will work if we share resources together. Thanks for the effort. We need time and patience.

Pam: We felt strongly to give the NN enough time to get organized in order to be at the table.

Nancy/JD?: It has been defined how much power is going to be given to LCs. Where do LCs fit in?

Teresa/JD1: They worked with county government to improve indigent behavioral health services. LCs must partner with counties. Together changes can be made. Come up with changes.

Pam: We don’t control what happens in your communities, but you as LCs can make changes in your communities.

Ophelia/JD13: It’s a work in progress. We must be patient. We are here for the long haul. We need to work together.

Clare/JD7: Our communication network is not working. Who do we talk directly to if we have questions?

Doug/JD1: Is this process really consumer driven? It should be because we are the ones affected. LCs are about providers but LCs should look more to consumers. How do we get consumers without providers? No LC is reaching out to consumers.

Susy/NN: We all have worked very hard. We need more consumers and providers. WE cannot do the same thing over and over again. We have the opportunity for change. We are seeing the changes. We are not all bad guys.

Pam: I am pleased we are talking about this. We need to get more collectively organized to create that one voice to really work on the changes.

Pam: This year BH issues were more addressed than ever (in NM). But there were multiple departments instead of one department. We need to be saying the same
thing. LCs did local things, but they provided what they have done, not waiting for Secretaries.

- Donna Adams/JD6: 505-542-8384 ext. 154 LCs need to share ideas what works and what doesn’t

- Doug/JD1: Part of the problem is to get enough consumers to participate. Getting conference calls for consumers to attend meetings.

- Susie/JD6: Let’s get medical personal providers. Let’s get the medical communities more involved. Too much confusion. Patients are usually more comfortable with medical providers so let’s get them involved.

- Deb/Harding Co: We need to get consumers $ up front, not make them wait 3 weeks for reimbursement. Teleconference and video does not work in most rural communities. Transportation is a huge issue; therefore, videoconferencing does not work.

- Marilyn/Steering Committee: We need to stop stereotyping that consumers are not smart. Create a consumer car pool.

- Pamela/JD11: Give consideration to those consumers that are participating. We need to get the juvenile judicial system to participate.

- Nichole/JD3: They have many consumers participating. They call participating as part of their recovery. It comes down to respecting each other and not labeling them. The extension service is in every single community. They have $ and place so we can see if they can work with us.

- Man – How can the LCs take its request to the legislators? There are a lot of needs. Secretaries need to advocate to the Governor, even if they may not be there the next day.

- Al Long – How effective will the recognition of the LCs be? How much of the voice of LCs will be heard at the Governor’s Office? This is a testing period. Tribes have unique needs, how will this be done? The LCs will work if we work together and share resources. Services can be impacted in positive ways. Thank you for the efforts, give time to develop. This is the beginning.

- Pam Hyde – Felt strongly to give Region 6 the time they needed. Did not want to sit down together until all were recognized. Important not to exclude.

- Nancy Jo Archer – I agree with Michelle. Number of people worked to change the support. Money for administration versus direct services. The dilemma is the recognition of our roles. The concept is a good one – local collaboratives is bottom driven. What’s happening in BH should be done the same way. The sense is that it
is more state-driven. Many planning activities through committees established by
the state. None of the subcommittees have been turned over to the local
collaboratives. Where do the LCs fit into this? Planning should go back to the LCs.
If effective, it has to come from the community.

- Theresa Baca/LC1 – Made sure county got involved with the LCs. Changing its
  indigent guidelines so it can be SCI indigent funds. All LCs should partner with their
  counties. Providers don’t cover mental health and prescription.

- Pam Hyde- Great. Help us help you be more effective.

- Ophelia Rinaldi – Work with the BHPC and LCs are a work in progress. We all have
  skills and knowledge and we want to help. I have a lot to do and I want to be a part
  of this process. We are still young, we started in July. We need to work together.

- Albuquerque LC lady – Our communication network is not adequate. Who do we
  communicate with? Wanted to send some information out but didn’t have an email
  address. It would have been easier if we have staff person.

- Pat Douglas – Consumer, consumer-driven is not being heard. Don’t see any
  outreach to consumers. LCs are about providers and how to make things work for
  providers. The people of LC who come are the faithful. How do we get real-life
  consumers to come to this? If they are not being incorporated, then it is not being
  addressed. Every other word should be consumer….

- Susy Ashcroft - Has been number 1 cheerleader of consumers. If we gripe we can’t
  get anywhere. Navajo LC is a dream and it is working. Think outside of the box and
  get inspired for the consumers and providers.

- Pam – I am hearing we need to get more collectively organized. No one is the bad
  guy. Concerns and move to what we need to do including communications piece,
  and get to finances.

- Peter - Have a written agreement between LCs and the BH Collaborative.

- Sec. Bolson – thank you for all your comments. Overall I think we are concerned
  about the same thing. Look forward to working together to address the issues.

- Sec. Armstrong – thank you for all your comments. There is a model and that is the
  Aging Network. Doesn’t happen overnight. Tracks the six regions, administered by
  AAA, planning comes from the local providers, input from consumers, and comes up
  to the state. Money flows down the same way. Sec. Grisham had a united voice –
  budget and capital outlay. It is a united process. A bill is usually carried out,
  although not at the level they want but work together to identify the priorities and
  have a process to get the funds out. Thank you for hanging in there.
Sec. Hyde – This year we had more attention paid to BH services than ever – came from all over the place, which was hard to manage and hard to react to. Need to figure something out – multiple departments involved. There is a role for Secretaries and advocates together and not conflict with each other. Communications. Local Collaborative 6 did some things locally to share. They have provided each table with some information.

Role of consumers and family – would like specific examples about how we support consumer and families. Have heard so much information and would like to brainstorm about this piece.

Man – Part of the problem is getting consumer and family. Need to set up phone conference and not travel long distance. Here what is being said and get our input in. Still be at the table.

Sec. Hyde – Grant for telecommunications is the HRSA grant. Get more information out about this.

Donna Adams – Consumer and family members asked to be included in a specific part not all the business. Refer their concerns to appropriate persons. Rotate every third month.

Susy Trujillo – Concern as a consumer and family is substance issue – I like medical community to be involved. Community members go to medical community and they are finding that they are not in the loop. We need to make this connection to understand one another.

Sec. Hyde – I heard a presentation about underage drinking and asked how many lcs were a part of this and no one knew about this. What is the DWI connection?

Lady – there is some connection with DWI councils.

Deb Van Horn – represent DWI and Harding County. Doing a meeting in April. Issues in rural communities are very different, difficult to translate. No hospitals, no BH services, and if I want a consumer to come we need the money up front; otherwise people are not going to make it. DWI Council in our county is the longest standing health council. We just got a health council. DWI is the propelling force for this county. Just contact your coordinators. Need the money up front to reimburse consumers and families.

Sec. Hyde – Videoconference concept work?

Deb Van Horn – No electricity at home. School is the only place, but there is limitation.
Lila Doyle – Consumers don’t have means to come here – need transportation and attendants. Most consumers need TLC and videoconference didn’t work.

DWI vans are available sometimes. Become a part of someone else’s agenda instead of doing your own meeting.

Ben Tafoya – All in rural frontier – telehealth and teleconferencing – have a system for providers but for consumers don’t have equipment, don’t know how to use, don’t have transportation. The Local Collaboratives should be funded for newsletters. Once people get the information there will be interest. Put up a little funding.

Marilyn Rohn – Some of the worst stigma that consumers face are within the system – the providers, the people working with consumers. Consumers don’t even know how to use technology. I have educated about half of the people here. How come we don’t have consumers in leadership? Don’t you think a consumer can reserve rooms or put an ad in the paper? This is a part of the problem. Consumers are not stupid. Fine line between insanity and genius. Drove 40 miles to pick up consumers to come to meeting. Pick them up and give them tasks to do. Consider what you think about consumers.

Pamela Holland – I am a consumer and tired of saying need to get consumers to the table. How about those of us who are there already? One point to add for LC 11 – part of the population has compact with juvenile justice systems – we see no participation of judicial systems in LC systems. Is there a director here to tell them?

Sec. Bolson – said she will do that.

Lady – consumers come to their meeting because from day one, they had a bargain with the local community council. Consumers are becoming real advocates and are participating in the discussions. Comes down to respect. We treat them as if there is no line between consumers, providers and families. This is very transparent. There is one agency in this state that is found in every county – the extension service out of NMSU. Perhaps we could work with them. They have money and a place.

Becky Beckett – Four of the 7 officers are consumers. Give consumers a job to do.

Lady with glasses - Echoes what the consumers are saying. I don’t want my medical patients with the mentally ill patients in the same words. System has real challenges and we haven’t gotten far enough to address. What does the State want? What does it need from the consumers? I need to know what tasks you need. What can I do different with added value? A big curtain goes up when I show my consumer.

Peter Cubra – In Bernalillo County, we tried a different system to include “other”. Scheduling meetings for people to participate after 8-5. Pay people a reasonable
wage to have them participate. Train the CAT about what methods work, and they will train other CAT teams. Having the ability to have their chosen support person or mentor.

- Judith – Listen to consumers.
- Sec. Hyde - Next agenda: Roles and communications. Does everyone know that there is state staff and VO staff for each region? Give us explicit suggestion.

- Milagros P (JD 11) – new proposals for programs be involved in lc process so they are involved. Particularly modalities for Hispanics and Native Americans. Review of RFPs includes members of LCs. I worked in other states where consumers are involved.

- Jackie Maez (LC 8) – Community Reinvestment could have caused a rift because the providers knew about it before the LC. Do we compete with providers? Let everyone know of things at the same time.

- Not all the leaders of the LCs are committed to getting the information out ASAP because they have their own jobs.

- Betty Downes – HUD has folks to them directly and they get extra points for being reviewed by LCs.

- Carol Luna Anderson – Appreciate what Peter said about the folks from 1986 who participated as councils.

- Sec. Hyde – How do LC communication with the Collaborative? This is our first effort to do this. We need some thoughts about how we can do this efficiently? Staff will communicate too but as a collective body, we’d like to do that. Extended meeting next Collaborative meeting.

- Steve Johnson – Hearing get LCs an evolutionary strength. Besides giving money to LCs, if they are going to provide advice, they need information. Providers and VO have the information. Everyone is asking VO for data.

- Sec. Hyde – We thought about developing a mock report with data elements that each LC can get from VO and asking you are these the right pieces of data?

- Steve – The BHPC is doing some of that.

- Susy Kimball - Getting meetings notices out timely. We met yesterday the first and told them about this meeting. We need to know about meetings timely. We need time. People speak as members of the LC and not as labels.
Sec. Hyde – Contracts talked about at our past 3 meetings. Will think of how to address this.

Peter Cubra – LCs should talk together regularly.

Sec. Hyde – sounds like being set up.

Peter Cubra – Have the LCs come to the Collaborative. Should have the subcommittees.

Sec. Hyde – Secretaries and Director serve on some “boards” or subcommittees.

Susy Ashcroft – Not feeling like being heard by VO.

Sec. Hyde – We held them off, VO should be at your meetings.

Marisol Atkins – Has representatives from each of the Regions. Michael Bird from Region 6. Currently a staff of 2 with 3 staff persons to be hired. Patsy Romero for Region 2, Liz Harris for Region 5, Alys Willmot in Region 4, Scott Wallace in Region 1, and Tom Sims in Region 3.

Jack Callaghan – Steering Committee is shifting gears. Has been a state agency group. Looking at LC representation. Feb 23 meeting – trying to figure out how to work with LCs. Senior staff persons coming to these meetings.


Marisol – LCs recognized would be sent to Life Link. Talk to Carol.

Fred Sandoval – 2 instruments sent out – guidelines and reimbursement form sent to Life Link. This will be sent out.

Sec. Hyde – at the break, see Carol and Fred. Transformation grant.

Jack – HRSA money to Rebecca.

Rebecca – Received 3 proposals. Purpose: technology to help you communicate. 25% for training for technology use.

Sec. Hyde – extend the deadline to March 17. If there are problems, see Jack and Rebecca.

Is there TA available to help determine what the need is for the LC?

- Peter – Change the number. 3.6 for local collaboratives.

- Pam – Idea was to fund State staff, research. Can change a little but not a lot.

- LCs need more than 30 days to get feedback in.

- Pam – will do what we can. Don’t want to lose the money.

- Tony Danielson – Make the funds available for what LCs need?

- Pam – Good idea.

- Pam – Identify what local resources you use for this process. We are committed to put a budget request for LCs. Not sure how it will be done. How do we do this? Small enough to get funded and big enough to make an impact.

- Man - Can LC be their own 501 C3 so they can look at other grants?

- Pam – Why not? Does anyone not see a reason? Be thoughtful but don’t want to make too much bureaucracy.

- Marisol Atkins – Special Reinvestment funds information went out. 250K pot of money for administrative purposes, etc. See handout. No deadline but until funding is gone. For this FY. And another one next FY.

- Peter Cubra – Invites everyone to comment on draft contract for state to provide VO.

- Sec. Hyde – thank you.

- Christine Jacobus (HPC) – Heard we need to communicate. Clear, timely and concise.

- Judith Reed (PDO) – committed to the collaborative. Want to hear from the regions and the LCs. We can’t get everywhere. We will have an avenue where everyone will be heard.

- Michelle Yazzie (IAD) – new to the discussions as IAD is to other state efforts. Department elevated. Pleased to be hear and is learning a lot. Pleased to see Native American representation.

- Michele Grisham (DOH) – Echoes everyone’s comments. Want to work equal with the LCs. Are we connected in a single and united front? No. During the legislature,
tried to wrap arms around all the legislative activities for behavioral health. All bumps heard are fixable.

- Debbie Armstrong (ALTSD) – working hard to keep this moving. With your partnership and participation, we will get there.

- Danny Sandoval (CYFD) – thank you for all your commitment. There are barriers but together we can overcome them.

- Pat Putnam (DDPC) - Like to thank families and consumers who are not being paid for being here. Local level driven up. Consumer driven model.

- Ricardo Campos (DOT) – Let me know if DWI Councils can be more involved. Park N Ride system is available between Albuquerque, Santa Fe, Española, and Los Alamos. Las Cruces has a new system as well. Train system is in the process. Looking at different transportation needs. Heard how transportation is a deterrent.

- Jack – cake.

- Sec. Hyde - Secretaries tour in the spring. Be ready for those. Newsletters are out. BHSD is working on housing issues. In august, will have hearings on legislative issues.