NM BEHAVIORAL HEALTH PLANNING COUNCIL
Minutes of Wednesday, August 23rd at Traditions!
106 West Frontage Road – Room 309 in Algodones, New Mexico

Members in attendance

<table>
<thead>
<tr>
<th>Martin Arriola</th>
<th>Susy K. Ashcroft</th>
<th>Becky Beckett</th>
<th>Kelsi Clayton</th>
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<tr>
<td>Patricia A. Collins</td>
<td>Brenda Crocker</td>
<td>William C. Daumueller</td>
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<td>Leslie Dozzo</td>
<td>Woods E. Houghton</td>
<td>Erin Hourihan</td>
<td>Kathleen Hunt</td>
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<td>Steve Johnson</td>
<td>Robert Love</td>
<td>Carolyn Luna-Anderson</td>
<td>Jane Ann Oldrup</td>
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<td>Lynn Pedraza</td>
<td>Cecilia L. Riley</td>
<td>Ophelia Rinaldi</td>
<td>Kimberly Ross-Toledo</td>
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<td>Rachel Saiz</td>
<td>Frankie Scofield</td>
<td>Rosemary Silversmith</td>
<td>Susie Trujillo</td>
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<td>Debra Van Horn</td>
<td>Marlene Velarde</td>
<td>Mario Vigil</td>
<td>Catherine H. McClain</td>
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Unexcused Absent

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<tr>
<th>Angelique Chavez</th>
<th>Justin Friedman</th>
<th>Sue Gronewold</th>
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<tr>
<td>Rick Gilsdorf</td>
<td>Anna J. Garcia</td>
<td>Georgia Glasgow</td>
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<td>Lionel Holguin</td>
<td>Carrie L. Willey</td>
<td>Melody Lykins</td>
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<td>A. Greer McSpadden</td>
<td>Kristine Meurer</td>
<td>Katherine Miller</td>
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<td>Maxine Nakai</td>
<td>Patsy Trujillo-Knauer</td>
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Excused Absent

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<tr>
<th>Jackie Cooper</th>
<th>Martha J. Gorospe-Charlie</th>
<th>Sherry Helwig</th>
<th>Marilyn Rohn</th>
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<tr>
<td>Patrice Tyrrell</td>
<td>Rebecca Ballantine</td>
<td>Sam Vigil</td>
<td>Nancy Koenigsberg</td>
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<td>Jenny Rodgers</td>
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Proxies

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<tr>
<th>Deborah Fickling</th>
<th>Karen Courtney-Peterson</th>
<th>Michele Franowsky</th>
<th>Debbie Hambel</th>
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<tr>
<td>Dee Martinez</td>
<td>Karen Meador</td>
<td>Pam Sanchez</td>
<td>Rodney L. Tahe</td>
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State Staff

| Letty Rutledge | Tom Smith | Liz Urioste | Valeria Vigil |

Guest

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<tr>
<th>Jean Howden</th>
<th>Karan Northfield</th>
<th>Consuelo Mondragon</th>
<th>Charles Salle</th>
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<tr>
<td>Suzanne Pearlman</td>
<td>Lisa Driscoll</td>
<td>Lucille Ross</td>
<td>Nicholas Ossorgin</td>
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<td>Pamela Galbraith</td>
<td>Dee Durant</td>
<td>Sally Kroner</td>
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➢ Equals REQUEST FOR ACTION

I Sign In and Introductions of guests.
• Quorum established

II Approval of Agenda
• Katie Falls, HSD Deputy Director, was approved for inclusion on the agenda. The BHSD report, scheduled for 12:45 today, was approved to be moved up on the agenda.
III Approval of Minutes – June and July
- Robert Love was excused in June and July.
- Deborah Fickling was not a proxy at the July meeting.
- Dee Martinez sent a proxy in July. Change to excused.
- Ms. Ashcroft reminded the Council and others present to sign in and to make note if they are proxies for another regular member.
- **Motion made by Kathleen Hunt to approve the June and July minutes with said changes.**
  Motion seconded by Jane Ann Oldrup.
  Minutes were approved.

IV Announcements
- Susy Ashcroft introduced Letty Rutledge as new staff of the Behavioral Health Planning Council (BHPC). Letty passed out her cards to members.
  - Comments on subcommittee goals are due to Tom Smith (email: Tom.Smith1@state.nm.us) by September 30th.
  - Subcommittee reports are due to Letty (Leticia.Rutledge@state.nm.us) by September 30th. No subcommittee work plans have been received as of August 23, 2006.
- Ad hoc committees will fold into subcommittees 12/31/06 unless they are working on very specific objectives.
  - Tom will send out electronic copies of the letter sent to the Governor by the BHPC.

V BHSD Update – Karen Meador and Katie Falls
- Discussion on transition of BHSD to the Human Services Department (HSD) with an emphasis that service delivery will not be affected.
- Katie discussed her role as Deputy Secretary in HSD.
- The new physical location for BHSD is not known at this time.
- The goal of the Legislature, the Purchasing Collaborative, the Department of Health, and the Human Services Department is to improve efficiency and efficacy in behavioral health services.

VI Comprehensive Community Support Services - Karen Northfield- HSD, Norma Faries -ValueOptions, Nick Ossorgin-BHSD, and Jean Howden-HSD

Karen Northfield
- Comprehensive Community Support Services (CCSS) is a new collaborative service being introduced. Peer Specialists and Family Specialists are new provider positions that will be included in this service. Service Definition and Letter and training application (see handouts) were distributed.
- CYFD will assist with licensing Peer Specialists for children and DOH will assist with licensing for the adults. This process is an outgrowth of best practice activities and is supported by fidelities.
- This is a shift from residential services to community based services. Community-based service providers have seen an increase in positive outcomes. CCSS is an enhancement of our current Psychosocial Rehabilitation week to Case
Management. The target population for this all inclusive wrap around service is: adults, children, and co-occurring.

- This is not a therapeutic service. 60% of the services are expected to be in the community, e.g., school, family, etc.
- There will be 8 in-depth trainings statewide.

Concerns and questions from the Council members included the following:

- Are deaf interrupters provided by this service?
- Will services be available to families other than Monday through Friday 8 am to 5 pm hours?
- Interpreters are necessary to overcome language and cultural barriers.
- Agencies that supply this service are in transition. Within that context, is something available under case management?

In response to questions and concerns, Karen Northfield responded with the following:

- The intent is to provide services at times convenient to consumers.
- Consumers should identify the needs they have. The CCSS program is the consumer voice.
- There will be education for the parents to explain the services and potential advantages.
- Medical necessity is a basic consideration in Medicaid, generally related to a diagnosis. The CCSS program must meet the treatment plan goals and there should be a good fit between the schools and community. There is one service plan per client. A client has one practitioner related to one treatment plan and CCSS is the hub.
- Service Plan vs. Treatment Plan - The keeper of the plan is the service provider or core agency. The goal is to have one service plan.
- Travel is a reimbursable expense and is included in the rate.
- There is a shortage of bilingual and bi-cultural interpreters. Interpreters cannot be used all the time. The system needs to look at the workforce issue and hire bilingual and bi-cultural work force staff.
- This is a two year transition.

Norma Faries -

- Consumers must apply to become a peer specialist and acceptance is based upon recovery, an interview process, evaluation, and reference review. Being in recovery does not necessarily make one capable of helping others. Training and study to become a Certified Peer Specialist provides credibility and skills.
- Two classes are being planned in the northern and southern regions. The application process was just finalized and will be sent out to the Local Collaboratives and distributed by Citizen Coordinators. The Human Services Department website has more information.
- Regarding eligibility, consumers convicted or involved in the criminal justice system are eligible to apply but this excludes sex offenders and those convicted of domestic violence. Other criminal charges are evaluated based upon circumstances.
Nick Ossorgin –
Certified Peer Specialist Program
- 24 consumers have been trained in the Peer Certificate Program. Part of their duties are to identify needs in their communities. Trainers will go out to train consumers beginning in January 2007.
- Applications for the program go through a review committee for selection.
- Trainings will be held in November in Albuquerque and Las Cruces.

Jean Howden-
Family Peer Specialist Program
- Family members and parents are all professionals. A couple of goals established were: to staff this team with family members and youth, (new candidates from the community) who are still struggling in the community, and to maintain the integrity of the process to develop a wrap around service. A consultant has been hired.
- The team will be 51% youth and new candidates.

VII Value Options Report- Pam Galbraith
- Reinvestment checks have been signed and are out.
- Chris Carson has resigned and VO is recruiting for a Medical Director.
- ValueOptions went through significant processes to obtain authorization to hire those with a criminal background. VO encourages providers not to be judgmental of consumers with correctional records.
- Norma Faries reports that the Recovery and Resiliency Department has had an opportunity to make a difference. ValueOptions now has a standing invitation to go to Grants to talk with the men, women, and staff at the prison. Corrections is embracing the concept of recovery and resiliency.
- The men's facility was interested in transitional discharge planning.
- Person-centered training is a good model and will be mandated and applied. Family Child Specialist training will be done in each region.
- Trainings will include teaching providers and staff how to keep them selves well.
- Work is being done to finalize the consumer survey. The plan is to conduct focus groups and include that in the satisfaction survey. They are developing a project on Advanced Directive and working with consumer and family members as options are presented.

VIII BH Purchasing Collaborative Report - Steve Johnson
- Steve will shift to full-time work in September.
- The Steering committee meets the first Friday of every month and is an arena for specific dialogue with representatives from VO and state agencies.
- August 31 Purchasing Collaborative Meeting – Manadated Community Treatment discussion. Council members are urged to attend.
- Priorities are: Comprehensive Community Support Services, children's residential services moving to community based care; substance abuse expansion of independent outpatient services for residential care; pushing the Legislature to build housing funds (loan assistance, low income housing); school success for kids; cognitive disorders and behavioral needs.
- Evaluating quality brings up the issue of data. The goal is to determine if what we are doing is actually making any difference to consumers and service providers.
During this organizational change we must identify which quality measures determine how well the system is working.

- Advocating for complete and correct data will require coming to agreement on what this means. We want to be able to track data on a monthly basis to address how much money is being spent, how many claims are being paid, how many grievances have been filed and the nature of those grievances, and evaluate trends by county and demographic data.

IX Native American Subcommittee – Terrelene Massey

- Jeanette Arquero has held a key leadership role for this subcommittee.
- This committee meets every last Friday of the month.
- The Native American subcommittee workgroups include:
  - Work Force development
  - Domestic Violence
  - Cultural Competence
  - Technical and Training
  - After Care Services
  - Data
  - Employment
- The subcommittee legislative priorities include initiatives for educating people about behavioral health issues.
- Rodney Tahe, Policy Analyst at Department of Indian Affairs, on Native American issues will be working with the subcommittee. Susan Pearlman is the Region 6 Local Collaborative coordinator.
- Karen Meador recommended that rural and frontier areas recruit students to become behavioral health professionals.
- There is a mental health crisis in Native American land. They are working on access to higher education and a draft proposal is being developed and prepared.

X ValueOptions Reports- Sally Kroner

- Council members requested the opportunity for the Council to look at three or four ValueOptions reports prior to Planning Council meetings to allow for comments in advance.
- Four of the ten requested reports were provided. It was suggested that 2-3 reports be presented with VO personnel available to assist in the discussion. The reports need to be explained to understand the data.
- These are reports in progress. The quarterly report is an analysis by VO. The Managed-Care Organizations and Regional Care Coordination data were moved to VO on July 1, 2005. Agency data comparison is done by base line from the previous year. The study on VO, conducted by the NM Council Review Audit, is not a public document but can be made available to the Council when it has been completed.
- Brenda Crocker moved to take the reports home and review them. Next month the Council will decide how to review the reports, limited to 30 minutes with the appropriate VO and state staff.
  Jane Ann Oldrup seconded the motion.
  Motion passed
XI BHSD Priorities – Karen Meador
- There are approximately 30 legislative priorities offered by the Planning Council and the Local Collaboratives, which include the common themes of quality of life and continuum of services. It was suggested that a list be provided showing which priorities will be taken forward and which will not.
- Dates for a collaborative meeting with consumers and families have been scheduled for October 18, 2006 (consumers) and December 7, 2006 (families). The structure of meetings will be determined by family and consumer members. Funding may be available for family members to travel.

XII Screening Brief Intervention Referral Treatment Program (SBIRT) – Elaine Benavidez
- A Microsoft PowerPoint presentation describing the SBIRT was provided. SBIRT is a treatment program and uses elements of prevention to ensure success. The consultants use referrals for treatment to ensure appropriate treatment, not to replace treatment. This adds to the continuum of care.
  - Elaine requested a formal endorsement of this project from the Planning Council.
- **Motion was made by Carol Luna -Anderson to accept the report with high praise and that the BHPC endorse the report as presented.**
  Motion was seconded by Frankie Scofield.
- Amendment proposed by Woods Houghton to make this a resolution which is stronger than a letter of support:
  - Whereas New Mexico has a large need and;
  - Whereas New Mexico is a very diverse state; and whereas, New Mexico has a higher than national average of substance abuse and whereas; the New Mexico SBIRT program’s research base has a positive results in rural and frontier areas for the past three years. Therefore let it be resolved that on 23rd of August 2006 the Behavioral Health Planning Council supports the SBIRT program to become sustainable.
  - Seconded by Jane Ann Oldrup.
  - Motion amendment passed with one nay vote
- Original motion passed with one nay vote.

XIII Comprehensive Behavioral Health Plan Update – Pam Sanchez, HSD
- The Comprehensive Plan, due September 30th, is driven by consumers and families. The Plan was reviewed at the August retreat, in which 5 BHPC members attended. A draft copy of the Plan will be available prior to the September 27 Collaborative meeting. The next comprehensive plan committee meeting is September 7, 2006.
- Key Initiatives (see document) to complete the Comprehensive Plan are structured by the Presidential Commission Goals. These were reviewed at the retreat and the following needs were identified:
  - Transportation is a key issue.
  - Accountability is a huge issue across all the counties and Native American services.
  - System change needs to include care plans and treatment plans.
  - Cultural competency needs attention.
XIV Behavioral Health Day during the Legislative Session –Becky Beckett

- It was proposed that the Behavior Health Planning Council have a Behavioral Health Day during the Legislative Session.
  - The Executive Committee will plan the behavioral health day; will pick a day and invite agencies, providers, Senator Papen and someone on the House side to get on a schedule. All people that want to be part of this will be invited. There will be no agenda but we will be there as a force.
  - A planning committee must be put together to have something by early September to get on the legislative calendar as an event.
  - Recommendations were made to: identify a Democrat and a Republican to endorse this idea on both sides of the aisle, to set up on the first floor to handout materials for better outreach to people and representatives and find out who their senators and representatives are.
  - **Motion made by Woods Houghton that the BH Planning Council support and develop an ad hoc planning committee to plan a legislative day at the Legislature.**
    - Second by Carolyn Luna-Anderson
    - Recommendation that CAT members distribute information to Local Collaboratives and Native Americans.
  - **Motion Passed – Unanimously**

XV Reinvestment Draft – Susy Ashcroft

- From the list of seven identified priorities, the Planning Council needs to choose two legislative recommendations for the Purchasing Collaborative.
- Six and five can be combined and become one priority.
- **Motion made by Robert Love that priorities number 4 and number 5 be chosen as the top two priorities.**
  - Motion seconded by Frankie Scofield.
  - **Motion passed unanimously.**
  - Abstained: 4

XVI Public Input

- None.
- Future planning – it was suggested that the Planning Council consider meeting in Santa Fe for the January and February meetings.
- Meeting adjourned at 2:30 p.m.

Respectfully submitted by Patrice Tyrrell.