

**Joint Mental Health & Substance Abuse Subcommittee**  
**April 7, 2017**

**Present:** Theresa Alvaro, Jennifer Hill, Kara Fanniff, David Saffer; Amanda West, Sue Roberts, Cliff Green, David Alloy, Julia Beebe, Ashley Townsend-Burch, David Klippel, Eric Planck, Stephanie Ball, Susan Dornan

**Staff:** Robert York; Crystal Lawrence; Linda Wright, Carrie Wright

Agenda Item		Action
<b>Introductions</b>	Introductions were made around the table and the meeting began at 10:05am.	N/A
<b>Agency/Program Presentation: GFH Crisis Center – Theresa Alvaro, Service Line Administrator, Emergency Department</b>	<p>T. Alvaro conducted a power point presentation outlining their participation in the Crisis Stabilization Project (DSRIP Project 3.a.ii.). Through the establishment of the Crisis Care Center, volume will shift away from costly inpatient admission, readmissions and ED (emergency department) visits, and focus on integrated and coordinated outpatient services. They received a DSRIP Capital award of approximately \$2 million to be used to renovate existing hospital space into a community-based Crisis Care Center, including seven 23- hour crisis stabilization beds.</p> <p>Currently patients are held in a small, less-than-desirable 4-bed holding area that is managed by security personnel. Emergency behavioral health assessment services are provided by a clinical team located outside of the ED and behavioral and physical health services are not well integrated. The current ED care model is too fragmented. This new model will improve integration and coordination.</p> <p>Throughout this transformation they hope to establish a 7-bed Crisis Center with the ability to separate patients by age and acuity. They aim to provide dedicated psychiatric RNs, clinicians, therapy aides and to require all staff including the ED personnel to be trained in Non-Abusive Psychological and Physical Intervention (NAPPI). They will also utilize additional screening methodologies, including Columbia Suicide Assessment Scale &amp; Screening, Brief Intervention, Referral to Treatment (SBIRT). They hope to incorporate a robust triage unit, mobile crisis services, 24/7 crisis line and use of telehealth/ telemedicine.</p> <p>Charts were provided in the presentation showing a draft of the Crisis Stabilization Center, Bridging the Gap Integrated Service Delivery and a Next Steps Timeline. Beginning now, April 2017, they are providing the NAPPI training to ED, Inpatient Behavioral Health Unit (BHU), Security &amp; Crisis staff. During the month of May they are going to initiate recruitment</p>	N/A



**Joint Mental Health & Substance Abuse Subcommittee**  
**April 7, 2017**

Agenda Item		Action
<ul style="list-style-type: none"> <li>✓ <b>DSRIP BH-related project updates continued</b></li>   <li>✓ <b>HCBS Services updates</b></li>   <li>✓ <b>Regional Planning Consortium (RPC) updates</b></li> </ul>	<p>approximately 3000 in Suicide Prevention. They are also offering Trauma-informed trainings, including one coming up on April 26, 2017 (handout provided in meeting packet).</p> <p>S. Roberts updated on inclusion of Ambulatory Detox as a DSRIP focus for our sub-region. They had applied for Innovation Funds last year and have not heard if it has been approved or not. E. Planck stated AHI only has two interested partners in the 9-county region, so staffing and availability is needed.</p> <p>R. York provided a handout about a Town Hall Meeting April 12, 2017 for Rest of State Adult BH HCBS providers. C. Wright talked about a HCBS provider forum for local providers, care coordination agencies and MCOs, which will be held April 24, 2017, here at 230 Maple St.</p> <p>R. York reviewed handouts of the North Country Regional Planning Consortium. The regional Board has been seated. Each stakeholder group has been charged with community outreach to identify issues and proposed solutions for issues related to the transition to Medicaid Managed Care. There will be two action agendas developed for each RPC: a regional-issues agenda and a State-issues agenda. Workgroups will be formed around regional issues, and there will be a quarterly meeting with Executive leadership of the State agencies to examine the identified State-level issues (policy, regulations, etc.). A handout was provided showing the HARP Eligibles, by county for the RPC region. Also handouts on the RPC and State MMC Timeline, RPC Logic Model and list of North Country Board Members. They will be having their 3rd RPC Meeting in May. The first quarterly Co-chair meeting with the State is June 8th.</p>	
<p><b>Hometown vs. Heroin and Addiction Updates</b></p>	<p>R. York passed along some positive comments from local School Superintendents on the breadth of work the Council for Prevention is doing in the community.</p> <p>D. Saffer stated Hometown vs. Heroin and Addiction Forums have been held and well attended with parents and students being very involved. Neo-Natal Abstinence group meets every month covering 4 counties and has been going well. A Boating While Intoxicated (BWI) campaign is</p>	

**Joint Mental Health & Substance Abuse Subcommittee  
April 7, 2017**

Agenda Item		Action
<b>Hometown vs. Heroin and Addiction Updates continued</b>	starting in a couple weeks. They have received funding for an Opioid Diversion Program, together with the Center for Recovery, using the Challenge program. They are hoping to start accepting referrals within 30 days.	
<b>Informational Items</b> <ul style="list-style-type: none"> <li>✓ <b>Recovery Center updates</b></li>   <li>✓ <b>Sequential Intercept Model (SIM)</b></li>   <li>✓ <b>SA Residential Services updates</b></li> </ul>	<p>A. West informed us that they are in the process of signing a lease starting May 1<sup>st</sup> for a Satellite Recovery Center in Hudson Falls. They received a portion of funding from Saratoga Prevention Council, as a sub-contractor.</p> <p>R. York talked about a meeting with S. Miccio of PEOPLE Inc regarding Sequential Intercept Mapping (SIM). The SIM Model (included in the meeting materials) provides a visual depiction of various points of potential 'intercept' (opportunities to serve individuals with mental illness/SUD better and potentially divert from further involvement in the criminal justice system). More information to follow, if funding can be secured for facilitated workshops with all parties.</p> <p>R. York stated NYS OASAS has discontinued funding to PYHIT (Peter Young Housing Industry and Treatment), including our state aid previously allocated for 820 River St. They have asked the counties to issue a RFP for a new provider that must be approved by OASAS for these services. The Counties and the CSB no longer have access to the State Aid in order to contract for the services at this point. We can only contract with OASAS-approved providers once the funds are no longer restricted. 820 River St. continues to provide residential services (21 beds at Crandall St. men's residence and 13 beds at Granville women's residence). OASAS has provided assurances that they have backup plans for relocation of current participants, if that were to become suddenly necessary. 820 River St. has provided assurances that services have continued as usual, with no reduction in staffing or services.</p>	



**Joint Mental Health & Substance Abuse Subcommittee  
April 7, 2017**

Agenda Item		Action
<p><b>Liberty House continued</b></p> <p><b>Council for Prevention</b></p> <p><b>Center for Recovery</b></p> <p><b>WWAMH Dual Recovery</b></p> <p><b>NYConnects</b></p>	<p>are not just limited to one-time purchasing expense, but significant ongoing licensing and maintenance fees. This may make provision of HCBS services by smaller agencies not fiscally-viable.</p> <p>Cost of services continues to be evaluated. Student substance abuse surveys are being analyzed, data coming soon.</p> <p>S. Roberts discussed staffing changes, they are now allowed more billable services, and have started fine tuning their Open Access model. She would like to look at retention numbers next.</p> <p>C. Green has a housing committee now and Dual Recovery Council may re-initiate to get Substance Abuse providers and Criminal Justice together in a regular meeting.</p> <p>S. Dornan had 71 people attend their Long Term Care Council meeting on March 1<sup>st</sup> and the next meeting is in June. She provided their current newsletter.</p>	
<p><b>Adjournment and Next Meeting</b></p>	<p><b><i>Meeting adjourned at 12pm. The next meeting of the Mental Health / Substance Abuse Subcommittees of the Warren and Washington County Community Services Boards is scheduled for Friday, July 7, 2017 10a-12 noon at 230 Maple St., Glens Falls.</i></b></p>	<p>N/A</p>

Minutes respectively submitted by Crystal Lawrence, Secretary to the Boards