

Behavioral Health Advisory Council

May Agenda

Wednesday, May 3, 2023 9:30 AM- 2:15 PM

Attendees:							
\boxtimes	Keri Waterland (DBHR)		Susan Kydd	\boxtimes	Christal Eshelman		
\boxtimes	Michael Langer (DBHR)	\boxtimes	Richelle Madigan	\boxtimes	Bridget Underdahl		
\boxtimes	Teesha Kirschbaum (DBHR)		Tana Russell		David Musser		
\boxtimes	Robert Hopkins	\boxtimes	Vanessa Lewis		Michelle Tinkler		
	Jeff Spring	\boxtimes	Shawn Brannan		Michelle Burchett		
	Jenni Olmstead		Clarissa Fletcher		Guest Presenter: David Dickinson (SAHMSA)		
\boxtimes	Jolie Ramsey	\boxtimes	Ruth Leonard		Guest: Peggy Dolane		
\boxtimes	Josh Wallace	\boxtimes	Nathan Lusk (DBHR)	\boxtimes	Guest: Mary O' Brien		
	Katie Mirkovich	\boxtimes	Janet Cornell (DBHR)		Guest: Lois Gilmore (SAHMSA)		
\boxtimes	Nelson Rason	\boxtimes	Tori McDermott Hale DBHR)	\boxtimes	Guest: Nanci Watson		
\boxtimes	Kielan Lynch	\boxtimes	Kim Wright (DBHR)	\boxtimes	Guest: State Representative Lisa Callan		
\boxtimes	Marcia Mongain-Finkas	\boxtimes	DBHR Guest: Diana Cockrell		Guest: Nicole Chaskin (DBHR)		
\boxtimes	Guest: Paul Davis (DBHR)	\boxtimes	Guest: Todd Jensen (DBHR)		Guest (DOC): Cecil B Smith		
	Guest: Enos Mbajah (DBHR)		Guest: Esperanza Ocegueda		Guest: Carolyn Cox		

#	Agenda Items	Time	Lead	Decisions and Summary of Meeting
1.	Welcome & Call to Order • Attendance • Approve March minutes	9:30am	Josh Wallace, Richelle Madigan	 Quorum Reached. Nelson motion to approve minutes. March minutes passed unanimously. Richelle- Went over BHAC meeting expectations welcoming different voices but making sure this is a safe space for ideas to be shared.
2.	Council Member Roundtable	9:45am	Roundtable	 Richelle Madigan (co-chair)- Attended a two-day children behavioral health summit, side by side with peers and parents, making meaningful impact in our state. Josh Wallace (co-chair) - Peerpocalypse - next week in Seaside Oregon DBHR - Say it Out Loud Conference May 22nd in Spokane. Peer Washington is in the process of launching a new site, not ready to announce yet. Susan Kydd- (vice co-chair) Completed training as a SMART recovery facilitator, an alternative to AA. Also working on getting more services for trauma. David Dickinson (Guest- SAMHSA)-



 Region 10 Director of SAMHSA is here to present on the role and responsibilities of planning and advisory councils.

Christal Eshelman (member) Works with Carelon Behavioral Health (formerly Beacon health options.)

- Oversees federal block grant funds for North Central, Southwest and Pierce County.
- Works closely with their community engagement team who convenes the local behavioral health advisory boards in those regions. Working a lot on our block grant plans for next year, have really engaged the advisory boards in that work this year.
- Recently did an RFP for assisted outpatient treatment in Southwest and North Central, exciting to potentially get those programs up and running in those regions.

Tessa Clements (guest)-

- Behavioral health program lead for the administrative office of the courts. liaison between the courts and the behavioral health system.
- Working on supporting HCA and the regional AOT coordinators in communicating with judges about AOT
- \$20 million appropriated to support therapeutic courts at the limited jurisdiction level- district and municipal courts.

Nelson Rascon (member)-

- Organization (Dad's Move) has gone through explosive growth in the last year. We just hired our 20th staff member
- Put in a slew of funding proposals that if they come through, we may triple our staff again by September.

Michelle Tinkler (member)-

 The Office of Behavior Health Advocacy has developed a forum for each region so anybody's able to log in gives a safe place for people to express their needs and what's going on in their community.

Jolie Ramsey (member)-

 representing the Washington State Rehabilitation Council, which is a council that's situated within the division of Vocational Rehab, helping adults with disabilities find and maintain employment. And we are the voice of the DVR customer. So that's the hat that I wore today.

Bridget Underdahl (member)- mental health systems program lead at OSPI.



•	Oversees Project AWARE- reminder of the continued work
	we're doing, building school based mental and behavioral
	health systems with our grantees.

 more than just using the funding to increase the number of counselors and social workers, which is obviously vital, but we're thinking about "how does a systems design help build what all students need?".

Nanci Watson (guest)-

• Raised awareness that problem gambling is also a mental health and mortality issue.

Lisa Callan (guest, 5th district state representative)-

- Represent the 5th legislative district.
- Co-chair along with Keri Waterland the Children Youth Behavioral Health Work Group for the state
- Serve on the Human Services Early Learning Committee education, K12 Committee and the Capital Committee
- Working hard to make sure we've got our behavioral health investments and moving through.

Mary O'Brien (guest) - clinical service director here at Yakima Valley Farm Worker Clinic-

- Co teaching again, new workforce.
- Working to expand social workers and clinicians in our area.

3.	SAMHSA Presentation	10:15pm	David Dickinson	See attached presentation- SAMHSA MHBG 101 Presentation
4.	Short Break	11:36am	All	
5.	Peer Review Recommendations Discussion Legislative update	11:41am	Keri Waterland, Michael Langer, Teesha Kirschbaum	Peer Review update will be sent via email. Legislative update: Look at section 215 of the budget: That focuses directly on Behavioral Health. Could have ongoing budget discussions for the council. If you have specific budget questions about a specific program, please reach out to DBHR to follow up. Ongoing conversations with state legislature regarding block grant funding and what its requirements are federally.



					 Look out for the email Nathan will send regarding the Surgeon General around loneliness. Directly touches behavioral health. Michael Langer- The state budget was passed last week, had about \$5.1 billion for behavioral health and about 124 individual provisos. That's about \$360 million more in the budget than the previous so are appreciative of that. The state legislative has asked to do certain things with the block grant that have already been planned how to use. If we change what we said we would do, we need to go back and communicate that. The same thing has happened with the state opioid settlement sessions. Some funding has also been tied up with the Blake bill that didn't pass. Trying to decipher how much is changing, communicate in the clearest way possible and add clarity ourselves. Teesha Kirschbaum- Bill 5624 problem gambling bill passed- affects how problem gambling is funded. It allows us to pull more money and get more funding. It also looks at gambling prevention not just treatment. Also looking to making Problem gambling a Medicaid reimbursable service. PHE unwind: HCA is in the process unwinding the public health emergency. As it ends Medicaid is starting to redetermine apple healthcare recipients' eligibility which will mean some people's coverage will end. HCA is doing a big push to let the public know. If any council members have ideas on how to reach vulnerable populations about PHE Medicaid coverage ending, please reach out. Keri Waterland- The Blake Bill did not pass regular session. Special sessions can last up to 30 days.
6.	Lunch		12:08pm	All	
7.	•	Family Initiated Treatment (FIT) Presentation	12:15pm	Diana Cockrell	See Presentation- 2023 DBHR FIT Presentation



8.	 Family Initiated Treatment (FIT) Presentation 	12:40pm	Peggy Dolane	See Presentation- P. Dolane FIT BHAC Presentation
9.	Short Break	1:08		
10.	FIT Discussion	1:18		 What the details including scope such as geography regarding # of FIT admissions and why SUD is so much lower. Diana Cockrell- Will get more details and send them back to the council, there are also federal confidentiality requirements around SUD that limit data. Tessa Clements- There are also SUD professionals that work inside the schools, and so there's a bit of prevention, intervention and treatment that the parents don't have to know about. Michelle Tinkler- The SUD being reported is that co-occurring or is it strictly SUD? Diana Cockrell- when someone gets a co-occurring. our system requires a primary diagnosis to be built under, so if the primary diagnosis is SUD and they're also getting some mental health support around that, it would look like SUD, if their primary diagnosis is mental health but they're getting SUD support around that, it would look like mental health treatment. Michelle Tinkler- Do kids get to direct their own recovery? Diana Cockrell- Generally, care is supposed to be centered around what that young person's goals are and how to get them there in combination and the support of the family. So that whole unit should be part of that with fit. Sometimes what happens is that the focus initially is on getting that young person engaged, so it looks like help, and then as they're ready, bringing in the family for those conversations that can bring that family back together on a same page to move forward. Peggy Dolane:



• Have you considered training for families in how to parent some of these kids with issues?

Richelle Madigan-

• One of the biggest impacts I have had with my journey with my child is SED Was family therapy. We had a profound lack of trust with anyone in a professional capacity because my children had been told by a CPS worker that they would be removed from our home if my son harmed any of our other children. There was a period of time where we had to overcome that as a barrier to the therapeutic process. And so finally, through a lot of therapeutic process in child setting treatment center, we were able to receive dialectical behavior, DBT skills training which was so impactful because when a kid is learning coping skills and coping strategies to manage their own behavior. We need a preventive approach that attempts to acknowledge what families experience when an individual has a serious emotional disturbance.

Nelson Rascon-

 worked for three years at a CLIP facility and one of my complaints, where this fails in the whole process is there were families, we had that just wouldn't engage. We had no mechanism for making them engage. So, what ended up happening was we were just sending the youth right back into the same home, the family didn't get any help and often that youth would end up back in the system.

Diana Cockrell-

 We are setting up with Patty King's leadership, the center for parent excellence Which does create the avenue for parents to get connection with people who have lived experience as a parent.

Diana Cockrell-

 The other thing I would say is I'm looking forward to this strategic plan subgroup of the children behavioral Health Work Group because I think Medicaid and federal dollars can be used for deep end supports and services, but that early intervention and prevention to engaging in deeper and services can be harder to fund and part of that.

Peggy Dolane-

 There are all these workgroups and forums around FIT so there is a lot of confusion in the public about where to go to bring these issues and who is in control/ where the buck stops for these issues.



Richelle Madigan-

 I just completed attending the form and this was a topic of discussion where there should be a more streamlined process on where to go when there are issues. It would be so cool to see if BHAC could maybe hold a summit or forum on this.

Carolyn Cox-

 BHAC used to look at regional places of what the regional block grants were doing in their areas. It should be more out in the open as to what regions are doing and where the funding is going so it is more out in the open. Instead of it having be a stamp of approval where things have already been decided.

Peggy Dolane-

• I've seen issues with this with King County where I am unable to see where the money is going and what is being funded.

Christal Eshelman-

 I love Richelle's idea of holding a summit of decision makers and those receiving services and providers. Also having a regional focus where we see where the funding is going.

Peggy Dolane-

• I want to find ways to bring the conversations together and know what's going to happen next. I presented about information sharing knowing that information sharing has been problematic.

Keri Waterland-

 So, I want to make clear to folks that we have been working with our attorney generals on this and am understanding that you have a disagreement with our attorney generals and the way that they're interpreting the law.

Peggy Dolane-

• For me, that was also about realizing and we don't have any residential treatment in our state. The clip facilities are being treated as inpatient facilities.

Keri Waterland-

 If the attorney generals still lead to us having conversations where we don't agree, that is absolutely a time where it is not the healthcare authority or a state



				agency. We are done at that point. Then the legislature has to take over.
11.	Vote to approve new BHAC member Tessa Clements Next steps, review action items, review July agenda items. Call for volunteers for • Membership Committee • Bylaw Committee	2:00pm	Josh Wallace and Richelle Madigan	 Tessa gave a brief bio and interest in joining BHAC. Josh motioned to approve Tessa, Susan seconded, Unanimous approval. Tessa agreed to join the membership committee. Call to the Council to send ideas as to what that would want a listening session/ summit would look like, executive committee will then take to their meeting with leadership in June. Opioid settlement/Special Session/ budget update Ask Nicole Mims on Trueblood settlement and how BH treatment is being assessed and provided in jails. Ask Prevention to present in July
12.	Adjourn	2:15pm	All	

Action Items/Decisions								
#	Action Item	Assigned To:	Date Assigned:	Date Due:	Status			
1.	Nathan to forward surgeon general email on loneness from Keri to Council	Nathan	5/3		completed			
2.	Nathan to pass along TA listening session information to David (which part of SAHMSA is leading it)	Nathan	5/3		completed			
3.	Nathan will send the council information about PHE ending and who to call to keep Medicaid.	Nathan	5/3		completed			