

Utah Behavioral Health Planning and Advisory Council
Preliminary Meeting Minutes
September 5th, 2019, 12:00 p.m.
Multi-Agency State Office Building, Room 2026
195 N 1950 W, Salt Lake City

“Our mission is to ensure quality behavioral health care in Utah by promoting collaboration, advocacy, education, and delivery of services.”

COUNCIL MEMBERS PRESENT: Lisa Hancock, Ron Bruno, Rob Wesemann, Jeanine Park, Joann Cleveland, Donald Cleveland, James Park, Ken Rosenbaum, Dan Braun, Jane Lepisto, Rafael Montero, Sigrid Nolte, Peggy Hostetter, Andrew Riggle, Jennifer Marchant, Emily Bennett, Lori Cerar, Aubrey Myers (R), Jacob Russell (R), MaryJo McMillen, Kylee Porter, Dave Wilde,

DSAMH STAFF PRESENT: Pam Bennett, Shanel Long, Robert Snarr, LeAnne Huff, Heidi Peterson, Jeremy Christensen, Heather Rydalch

OTHERS PRESENT: Nettie Byrne, Olivia Shakespeare, Kimberly Mueller, Richard Lovato, Terry Harrison, Marc Gunderson, Sarah Miles, Julia Martinez, Emma Chacon

COUNCIL MEMBERS EXCUSED: Adam Scherzinger

Welcome, Introductions, August meeting minutes review, new member applications, and announcements:

Rob began the meeting and introductions were made around the room.

Rob asked for a motion to approve the minutes from August. MaryJo made a 1st motion to approve the minutes, Jeanine made a 2nd, all were in favor and the motion passed unanimously.

The Council took a vote, and all were in favor to approve the new member application of Joann Cleveland. Welcome to UBHPAC Joann!

Nettie let the Council know we will be reviewing the results of the FAM-VOC pilot program survey we participated in with FREDLA at the next meeting. Nettie also asked if any members are bringing others with them to let her know so she can make sure there is enough food for everyone.

A flier was passed around to the Council about the upcoming 2109 SLC Recovery Day on Sept 14th from 9-3 at the Gallivan Plaza. For more info visit www.recoveryday.org

Emma Chacon- Medicaid Operations Director: Expansion updates

Emma informed the Council that there were 4,500 individuals enrolled in Medicaid, so far, and they have been able to apply for another 115 waivers. Two provisions in the waiver and won't be implemented until January is self-sufficiency engagement (aka "work requirement"). Wanting Utah to make Community Engagement Lite, like the Snap Program, and apply to 48 places in a three-month period. Substantial exemptions (typically will follow the Snap Program: over 60, dependent adult with a child under six, no internet access in rural areas, or any medical/behavioral reasons). State will pay 100% of the cost sharing, Medicaid will provide all wraparound services. We don't know whether people will have to pay up front and get reimbursed, or if it's taken from their paychecks. Coordination of benefits will be completed through the Medicaid company; the clients won't have to.

SV-92 requires that we have a per capita cap model. Hoping for a 90-10 match with the federal government. Process goes through a due process and goes through the state, so there might be as many as

500 people a year to have been denied based on criminal records, etc. SV-96 states that if the government doesn't approve certain expansion ideas, a fallback plan will be put in place to amend existing waver. We would love to open it up for public comment on our website and review it as a committee to ask for suggestions and ideas. Waver will be posted on our website, as well. We're hoping we can get the amendment approved before the first of January. We are still trying to figure out how to make this Expansion as sustainable as possible. There are over 25,000 providers that Medicaid will be working with, but we need people to get the word out. Race/ethnicity is an option to report on the application, so we don't have solid data to determine how the Latino community is affected. We just partnered with three outreach specialists, but we really need everyone's help.

Numbers to call for Medicaid Expansion questions/concerns/comments:

(801) 533-6155

1 (800) 662-9615

Ron Bruno- CIT Utah Program Director & Jeremy Christensen- Assistant Director
Division of Substance Abuse and Mental Health: CIT Code proposal updates

Jeremy talked about CIT programs in Utah, the history of it, and what they are all about. "Crisis Intervention Team' means a law enforcement, mental health provider, and advocate collaborative program. 'CIT' is used to describe primarily a program the community and a training in law enforcement, including collaboration with mental health providers and advocates, to help guide interactions between law enforcement and those living with a mental illness or related conditions." The best research we know of is CIT international. Jeremy said we are looking to create legitimacy throughout the board.

From document: "A program and standards for crisis intervention training as required under this section. Approved local collaborations must use initial CIT training through POST or a Committee approved CIT training or curriculum to facilitate the training. The committee shall consider Best Practices and geographic training needs when considering programs, and standards and curriculum; Standards for successful qualification for and completion of the initial Crisis Intervention Team Training as well as annual crisis intervention continuing education training. The standards shall include, at a minimum, the requirement of 40 hours of initial training and successful completion of an approved exam."

Ron Bruno introduced himself and talked about CIT, in which he has an executive position in the international program and has many other roles; end goal is to create safe practices for the state of Utah. CIT isn't just an organization that just "trains cops," it's a program that "provides the foundation necessary to promote community and statewide solutions to assist individuals with a mental illness." It is a public-private partnership and began in 1988. Ron passed around manuals of information for the Council to review. Went through more of the program's history; to 2015 when CIT Utah, Inc., was formed. In 2016, CIT was awarded the program to use in the state of Utah.

De-escalation training should be used for every officer; they are trained in virtual reality. We give the proper amount of training to the right officers. CIT trained 25% more officers in the past three years than they have in the last five years. Certified 709 officers as CIT officers, but trained an additional 381 in CIT de-escalation techniques. Also trained 510 community members in de-escalation. We need to demand a larger mobile outreach team. Mary Jo believes that they need to have an advocate for their part of the training that can go into the community and has background knowledge.

Next meeting will be October 3rd, 2019, 12:00 P.M.

Thank you for your support of the UBHPAC!

Accommodations to the known disabilities of individuals in compliance with the Americans with Disabilities Act. For accommodation information or if you need special accommodations during this meeting, please contact the Division of Substance Abuse and Mental Health at (801) 538-3939 or TTY (801) 538-3696.

The State has adopted a stipend policy that will pay for reasonable travel expenses related to consumers and advocates attendance at UBHPAC meetings. For more information please visit www.dsamh.utah.gov – Initiatives – Behavioral Health and Advisory Council – Information & Forms – UBHPAC Stipend Policy.

All meeting minutes and recordings are posted on the Public Notice website at:
<https://www.utah.gov/pmn/sitemap/publicbody/51.html>