Tuesday, June 11, 2019

Council Members Present: Michaela, Donna, Carolyn, Sam, Amanda, Kat, Chassity, Valerie (for Jessi), Paul, Laura, Brenda
BHD: Megan, Dani
On the Phone: Trudy (and unknown others); technical difficulties.

Excused: Jessi Westling, Lori Burns, Sherry Mercer, Trudy Funk, Carol Day

Guests: Eric O’Neill, Tiffany Dickey, Becca Helfand (WICHE), and Bethany Rigles (WICHE)

No additions to the agenda

Meeting Minutes - no quorum;

Consumer/Advocate Conference Debrief

Overall thoughts were it went more than well; people were moved. The conference was very powerful. The information presented was relevant, valuable, and great to hear. Kudos were given to Recovery Wyoming for a great conference. Great job, it is hard work!!

Suggestions for next conference: Ability to attend all the sessions (remove breakouts). A long time frame for discussions at the end of each session. Would like to see a partnership between the Council and NAMI for the next conference. Suggested an annual conference – open to the public, students, medical professionals, etc. Listening session of some kind at each conference – such as, WICHE. This gave people chance to let their voices be heard and was a safe place to express themselves. Mike Veny was a great choice; as he opened up the doors for these conversations, made it a safe place, and had the ability to bring joy and laughter into said space.

Carolyn presented on Rights and Responsibilities and was concerned how to blend in the information for the audience. She got a great response with lots of important questions and shared important information.

Each session ended with an evaluation form; would like to see the results once combined.

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MHSAS Update – MHSA Staff

Block Grant Application will be available July 1st for Megan to start the application process. The application is due September 3rd, fully submitted with public and council comments included. Once the application is ready for Council review; we will send it out for input, follow-up with a zoom meeting, as the application public/council comments needs to be completed before our August meeting.

A message from Carol Day, “thank everyone on the Council for the hard work they put in for those in the State.” Carol has been with the State for 40 years and will retire June 17th, 2019. She will be missed, as she is considered a pillar of the system. Chris Newman, Senior Administrator, is currently interviewing potential candidates.

Janet Jares retired in May. Her position is currently under reclassification and currently not available for applicants.

Melissa Salvato announced shortly after Janet’s retirement, she was leaving the Division for an opportunity she couldn’t turn down. Her position is posted on the website for those who would like to apply.

Dani, Nicole, and Marla have picked up a majority of the tasks left. As expected, some things have been put on the backburner. Hopeful to be fully staffed by fall.

Approximately the Division has 39 contracts for SOR; 18 treatment contracts, and multiple PATH contracts. With the data collection different, everyone is trying to figure out how and what is needed to collect the required data. SOR grant/MAT grants come with extraordinary amount of reporting. Heavy lifting is required by the Department and the facilities.

WICHE Listening Session for Needs Assessment

Overview of the system. Information and recommendations on the data system: Wyoming Client Information System (WCIS), as it needs to be replaced. In addition, WICHE is part of the Mountain Plains Mental Health Technology Transfer Center (MHTTC), they are listening to those of the Consumers and Advocates; now the Council on strengths, gaps, etc. Better idea of the system and where we need to focus for the next few years.

Strengths: dedicated and loyal staff; good connection to staff and accessible to staff; rural state with small communities and figure out how to take care of their own. Care about neighbors and friends. Wyoming has an ombudsman program; many states do not have one;
med providers for kiddos have been great (even though not many of them), local MH centers need a lot of credit; understaffed-- work above and beyond. Free or subsidized legal services.

**Struggles/Services missing:** Can people get the services they need? - No, women’s treatment SUD residential beds. Fremont = residential; prescribers; for younger kids. PCP not willing to prescribe. There is nothing in Fremont County; access in community or not to have to wait for more beds; transitional services. Somewhere where they can be safe. Local hospitals not equipped/don’t want to. Emergency Trainings need to be offered. Turnover needs to have transition from one to the other. There is no buffer when transferring. Sage West -- close down (rumor); open crisis (rumor). Lack of psychiatrists = adult and children. No transitional care. IMH in Laramie doing a good job with working with the community; they are trying.

**What do people do if they cannot get local services?** Self harm/self-treatment; break the law; end up in the ER. Not enough acute beds; crisis centers in a couple of places. When needed it, it was there; open access has been successful; go to other states.

**Gaps in BH services in the state:** Recovery housing and support (beyond an hour away); crisis intervention (mobile), suicide prevention; therapeutic foster care; adult MH waiver; elderly and addiction; more support people (nonclinical billed) children are lost; peer support teens, peer led suicides. Can’t do until people are trained and can’t trained without funding; Medicare/insurance not able to bill for peer services. Co-occurring (MH/SA) services. More MH providers within schools. Stop using school resource officers for mental health issues. Criminalizing MH in school, even within elementary school. All resources officers should be Crisis Intervention Training (CIT) trained; NAMI in Laramie is working to train the officers. Issue of access; Casper has taken it internally; CIT was the major function of the funding from the state - went away with budget cuts. Need to have it but need funding. Complexity of law enforcement within WY; each county determines rules and regulations. Need for MH services for emergency and law enforcement; whole population not been served.

**Most helpful services:** Peer services; EMDR (limited); HFW family support; online family support group led by Magellan staff; discussion on how a kiddo coming from PRTF can access HFW. NAMI offers Family to Family

**What services are not effective?** Acudetox; using ER’s for services; system is broken when someone is in crisis; fragmented.

**What crisis services are available?** If lucky, an individual lives in an area with a crisis stabilization center; CASA safe house; 24 hour hotline from PEAK. Others go to ER, jail, WBI, juveniles go to WBI. Usually get held for days, until cleared. On average 9 beds are full; nationally an issue. Quite often adults will go to jail; many prefer because it is easier to get into the system from jail. Sam pointed out people are going to prison to access services; straining the system. Kat also pointed out, families with children struggling with MH issues - multiple
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WCA Regional Training Center

courts (tribal, city, county) no one recognizing each other’s authority. Leaving the issues to the family to figure out.

**Primary barriers/challenges** - Cost, communication/public awareness, antiquated laws, communication between the players in the system; listening to the parents; not enough information readily available, rural/frontier state, having to drive long distances; telemedicine -- infrastructure - sometimes you need to be seen face to face.

**Changes to improve the system in WY** - Communication between all of the different entities, providers, etc.; not billable, put it in their contracts, more money; change to the funding system; job availabilities for peer specialist. Not all providers know about peer specialists - need education. More Peer Support.

Paul said, “Requirements for Peer Specialists is very onerous; position cannot function like other positions” within the agency; Medicaid explored making Peer Specialists more available. Suggested agenda item - Facilitating Peer Specialists. Barrier - hospital doesn’t want to be in the mental health game; 35% cost on benefits - only pay sources are state funds and Medicaid; educate our legislators. Continual battle. One of the best positions with legislators/governors.

**Integration:** Even though we meet the check points, not getting it. Integration between primary is not getting the right data for legislation.

**Access to medication** -- barrier. Transition from WSH, PRTF meds don’t always get sent along; refills; unwilling to give an Rx for 90 days due to transfer of care issues/concerns. Medication issue -- having to wait for Medicaid coverage.

**Break**

**Legislative Interim Committees**

**Joint Labor, HSS Meeting Update – Paul Demple**

There are three main topics, aging and mental health are in those topics. Three meetings taking place – June, September, and November. Highly recommend tuning into the LIVE stream (can find on the LSO’s website) and subscribing to receive notifications of gatherings/meetings. Carol will give an overview of the WICHE project.

Licensing/Credentialing/Workforce Services (License Medical Board): Hold up at the board. Training, classes, degrees - people are not getting in due to classes/degrees do not match. Say someone from 1989 with lots of experience; not able to hire due to lack of level of degree/classes. Good standing = you are in. This road block will be removed. Social Services (30 years ago, transcript doesn’t have one certain class). Have to find ways to fund. Licensing board is difficult. People have proven track reason and licensed, they don’t make the cut due to “picky-ness” of choice of classes. Even though the offer and benefits are awesome, no one
wants to move to Wyoming. Rules are posted. Providers should provide services when giving the scope of work. Competition does not work in terms of this.

**Judiciary Committee Update – Paul Demple**

Bob Lampert, “good to go. They’re engaged in phase II.” Implement with outcomes in a 7% increase in recidivism; new prison intake 50% are probation revocation and drug use, not for new crimes. Streaming LSO meetings, but not always available. House Bill 83 moving forward; Diversion effort, short term sanctions where people are able to get treatment. Gillette and Casper; outpatient treatment. Residential programs - contracts are in process. 90 day programs. Contracts in process. RFPs going out for provider to apply to team up with jails -- IOP within the jails. PREA problems, but think that it has been resolved. There are 3-5 pilots around the state.

**Bylaws Subcommittee**

Two or three people recommend changes on the By-Laws. Sam, Donna, and Kat have volunteered will do via Zoom Conference with Paul and Megan. Consider in reviewing process: Are we doing this? If not, what are going to do to change it to reflect what we are doing? How is it really operating? Discussion -- Paul Demple will send out a Zoom Meeting. Simple is better. Get it to the Committee to pick apart before next meeting.

**Public Comment**

Brenda - new role: Benefit Control Manager - Congrats Brenda!
Projects:
1. School based services
2. Clubhouse services

Dani - Meetings minutes *not* voted and/or approved - no quorum previous meetings. Including the official vote on positions. Member list included. Will create a Google poll for votes.

**Nominees:**
Membership Chair: Kat Campbell;
Vice Chair: UNKNOWN (still needed);
Chair: Paul Demple

**Topics Suggested for next agenda:** Human Trafficking (Tiffany), Facilitating Peer Specialist (Paul)

**Adjourned**

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# Behavioral Health Advisory Council
## Meeting Minutes
### June 11, 2019
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WCA Regional Training Center

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### STATE EMP./PROVIDERS/LEGISLATORS
- AMANDA BIALAS: DIVISION OF VOC REHAB
- SAM BORBEY: DEPT. OF CORRECTIONS
- CAROL DAY: MHSAS ADMINISTRATOR
- BREND A STOUT: DIVISION OF HEALTHCARE FINANCING
- SHARON PUCILLO: DEPT. OF FAMILY SERVICES
- JO ANN NUMOTO: DEPT. OF EDUCATION
- SUE WILSON: LEGISLATURE/HOUSE
- JEFF WASSERBURGER: LEGISLATURE/SENATE
- TRUDY FUNK: WAMHSAC/ SA
- PAUL DEMPLE: WAMHSAC/ MH Chair*
- MEGAN NORFOLK: BLOCK GRANT COORDINATOR
- MARLA SMITH: COMMUNITY SYSTEMS UNIT MGR

*Updated 6/20/19*