Members Present: Amanda Bialas, Brenda Stout, Carolyn Yeaman, Cassie Crumpton, Cheri Kreitzmann, Donna Sedey, Jessi Westling, Jo Ann Numoto, Kat Campbell, Laura Griffith, Michaela Tscherhart, Rob Johnston, Sam Borbely, Sharon Puccillo, Sue Wilson, Sunny Goggles, Trudy Funk

Members Excused: Carol Day, Kyle Gamroth, Lori Burns, Paul Demple, Sherry Mercer, Wayne Graves

Members Unexcused: Chassity Wiederspahn, Christy Misplay, Jeff Wasserburger, Kellie Webb, Kim Hair, Martin Kury, Scott Erickson, Tammy Cooley

Guests: Melissa Salvato, Dan O’Dell, Amanda Jones

1. Rob Johnston called the meeting to order at 8:30 a.m.; welcomed the new members; and asked each person to introduce themselves & to state which population or group they served for on the Council.

2. The meeting minutes from the August meeting were approved as presented.

3. Block Grant Update: Dani Sullivan reported that the Annual Reports were at the Director’s office for review and approval. She will send copies to the Council membership once it has been approved by the Director’s office. The Behavioral Health Division received supplemental funding for technical assistance from SAMHSA. The Mental Health Block Grant received $141,000 and the Substance Abuse Block Grant received $265,000 for a grand total of $406,000. The funds must be expended by September 30, 2019. The Council discussed the hope that some of these funds could be used to support a Consumer/Advocate Conference. Rob will work with NAMI and Recover Wyoming to submit a proposal to Carol Day.

4. State Opioid Response Grant Update: Melissa Salvato, Clinical Unit Manager, MHSA, informed the Council that SOAR grant provides $8 million dollars over the biennium to the state to address the opioid epidemic. The funds will support the following:
   a. 83% of the funds will support treatment services in
      i. 4 outpatient medical assistance grants to Central Wyoming Counseling Center, High Country Behavioral Health, Northwest Wyoming Mental Health, and Southwest Counseling Services
      ii. 2 healthcare grants will be going to Cedar Mountain Health Center and the Wyoming Institute of Population Health
      iii. 2 court programs in Albany and Sweetwater counties
      iv. $700 - $750,000 to the Department of Corrections to support the Bridges to Community Program
   b. Additional funds will support:
      i. Media contract
      ii. Recover Wyoming in providing peer specialist certification, and opioid overdose training
      iii. WYSAC for program evaluation components
iv. WIND ECHO program for rural outreach and training

v. Hiring of the Statewide Opioid Coordinator to be housed at the Governor’s Office (this is a requirement of the SAMHSA grant)

c. The Governor’s Opioid Task Force is primarily focused on looking at possible legislation on prescribing requirements through the Prescription Drug Monitoring Program.

d. Council members requested that the State’s Prevention Program provide an update on how the counties are addressing prescription drug use/opioid access in local communities (perhaps at the March 2019 meeting).

5. **Overview of Peer Specialist Services:** Michaela Tschirhart, the new Council member representing Peer Specialists, provided information of being a Peer Specialist at one of the state contracted substance abuse/mental health treatment centers—Fremont Counseling Services. Peer Specialist scope of responsibilities vary by site & most Peer Specialists help bridge some of the gaps between clients and program staff. Peer Specialists focus on client engagement and peer support and primarily offer “HOPE” as they share their recovery journey with the clients they serve. Laura Griffith, who’s organization—Recover Wyoming—provides the peer specialist training/certification in Wyoming, relayed to the Council that peer specialist services is part of a national movement. Recover Wyoming provides the 40 hour training twice a year for between 16-18 people per training. The curriculum used in Wyoming was developed by the peer specialists. Recover Wyoming will present a forensics peer specialist training of trainers (3 day training) in the spring. In addition, a web-based peer specialist supervisor’s training is scheduled for January 2019.

6. **IRIS Clubhouse Presentation:** Dan O’Dell, Executive Director of the IRIS Clubhouse, in Casper provided an overview of the history and development of the Casper Clubhouse. The first Clubhouse was started in the early 1940’s in New York City. Currently, there are 341 Clubhouses around the world. Clubhouses provide a place where people with mental illness can go to get their lives back. Clubhouse International focuses on the following areas:

   a. Expansion of more Clubhouses to reach people in need;
   b. Ensure successful member outcomes through Clubhouse accreditation;
   c. Ensure new and mature Clubhouse sustainability through ongoing training and mentoring;
   d. Educate the public and the media to help end the stigma surrounding mental illness and promote awareness of how Clubhouses save lives and livelihoods;
   e. Initiate and coordinate advocacy efforts globally to build more government funding for mental health programs; and,
   f. Develop and enhance research approaches to measure Clubhouse member outcomes and the effectiveness of the Clubhouse model.

In Casper, there are currently 30 members, and an average of ten members are there for lunch on the days that they are open. Dan’s presentation is attached. The web address for the IRIS Clubhouse in Casper is [www.Irisclubhouse.org](http://www.Irisclubhouse.org).
The recommendation was made that the Council look at the Community Support Program that was developed in Wisconsin as a companion model. In Wisconsin, each county has a mental-health coordinator, who works with teams that provide outreach to persons living with mental illness. Cheri Kreitzmann provided an overview of the program.

7. National Alliance on Mental Illness Wyoming Presentation: Amanda Jones, Executive Director of NAMI Wyoming led a discussion on the need for comprehensive mental health services in Wyoming; she focused on the role stigma plays in creating barriers for people in need of treatment; and, she discussed the need for more comprehensive suicide prevention training focusing on creating service linkages in communities around the state. Amanda also reviewed the following NAMI evidence-based programs which could be offered around Wyoming:
   a. **Ending the Silence** features individuals and family members whose lives have been affected by mental illness, who visit high schools to provide "real-life" perspectives based on personal experiences. Free 50-minute presentations are designed to complement health, science or psychology classes and are typically presented in the freshman or sophomore year of high school. Each trained presentation team includes a young adult in recovery. Approximately 20 percent of youth ages 13 to 18 experience mental illness in any given year. About 50 percent of mental illness begins by age 14 and 75 percent by age 24. The program provides real faces and real-life stories that help high school students learn more effectively. Students get a rare opportunity to ask questions about mental illness that are too often surrounded by silence. Topics covered in the presentations include: signs and symptoms of mental illness; statistics on how mental illness affects youth; personal perspectives on the experience of living with mental illness; recovery and coping strategies; ways to help reduce the stigma associated with mental illness; and, how to help friends.

   b. **NAMI Peer to Peer:** Peer to Peer is a free, 10-session educational program for adults with mental illness who are looking to better understand their condition and journey toward recovery. [https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Peer-to-Peer](https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Peer-to-Peer)

   c. **NAMI Basics** is a free, 6-week education program for parents and family caregivers of children and teens who are experiencing symptoms of a mental illness or whom have already been diagnosed. NAMI Basics is offered in a group setting so you can connect with other people face-to-face. [https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Basics](https://www.nami.org/Find-Support/NAMI-Programs/NAMI-Basics)

   d. **Family to Family** is a free, 12-session educational program for family, significant others and friends of people living with mental illness. It is a designated evidenced-based program. Research shows that the program significantly improves the coping and problem-solving abilities of the people closest to an individual living with a mental health condition. [https://www.nami.org/Extranet/Education-Training-and-Outreach-Programs/Classes/NAMI-Family-to-Family](https://www.nami.org/Extranet/Education-Training-and-Outreach-Programs/Classes/NAMI-Family-to-Family)
e. **Homefront** is an on-line program to provide education and support to families of Military Service members and Veterans affected by major mental health conditions. [https://www.nami.org/About-NAMI/NAMI-News/SAMHSA-Sponsored-Webinar-On-the-Homefront](https://www.nami.org/About-NAMI/NAMI-News/SAMHSA-Sponsored-Webinar-On-the-Homefront)

f. **Faithnet:** The National Alliance on Mental Illness (NAMI) has expanded its "FaithNet" outreach program for faith communities with the inauguration of a new Web site, [www.faithnetnami.org](http://www.faithnetnami.org)

g. **Friends and Families** is a 4-hour seminar that informs and supports people who have loved ones with a mental health condition.

For more information on NAMI programs, please contact Amanda Jones at (307) 462-1520 or email her at [AmandaNAMIwy@gmail.com](mailto:AmandaNAMIwy@gmail.com).

The Council requested that there be a NAMI update at each meeting. Dani and the Council Chair will coordinate how this will occur (either in person or via conference call).

8. **Officer Elections:** The Council recommended moving forward with the following officers:
   a. Paul Demple, Chair
   b. Laura Griffith, Vice-Chair
   c. Kim Hair, Membership Chair
   d. Rob Johnston, Past Chair

The vote on the slate of officers was tabled at this time due to not having a quorum.

9. **Meeting Schedule for 2019:** Rob suggested, that budget permitting, the Council explore the feasibility of 4 meetings in 2019: 2 in Cheyenne, 1 in Casper, and 1 in Riverton. Dani will see if there are enough funds to support this schedule. Several Council members were hoping that we could have a meeting at the State Hospital. Given current staffing and construction issues, it was decided to hold off on this at the current time.

10. **Other items:**
   a. Possible invitee for future meetings: Antoinette Brown from RAS; Title 25 Gatekeeper Update w/ 1 or 2 county attorneys and impact of directed outpatient treatment; representative from the Governor’s office as a liaison to the Council
   b. There was no public comment.
   c. Meeting adjourned at 3:00 p.m.