

Pause & Reset Meeting Minutes

Date and Time:	9/16/20 11:00A – 1:00P	Location:	Virtual Meeting
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Attendees

Lt. Governor, Mary Kane, Dr. Avani Virani, Senator Hansen, Dave Humes, Dr. Thomas, R.L. Hughes, Traci Bolander, Carolyn Petrak, Kate Brookins, Karyl Rattay, Jennifer Smolowitz, Annie Slease, Jennifer Graber, Joe Aronson, Becky King, Emily Vera, Susan Holloway, Wade Jones, Pam Price, Tamera Fair, Dr. Ellison, Alexis Teitelbaum, Sandy Gibney, Matthew Swanson, Jennifer Graber, David Bentz, Cheryl Doucette, Dr. Terry Horton

Staff: Sydney Garlick, Tanner Polce, Keith Warren

Topic: (1) Welcome

Discussion/Comments

Lt. Governor thanked and welcomed the Consortium members to the meeting. Mary Kane from Concept Systems was also introduced as she would be co-leading the meeting.

Review of previous meeting notes: Previous Meeting Minutes were approved

Topic: (2) Meeting Objectives

Presentation: Mary Kane

Discussion: Revolved around resetting the course of action the BHC. Goal was to confirm priorities of the group and to reiterate the responsibilities of each committee.

Individual Introductions & Interests

Erin Booker: wants to look into harm reduction strategies such as safe consumption sites and stabilization centers.

Dr. Avani Virani: ensure all Delawareans have equal access; has seen a reduction in new initiation of MAT. Also wants to focus on the flow of illicit drugs flowing through the state

Senator Hansen: want to make sure that the opioid impact fee money is being dispersed and that there are clear objectives

Dave Humes : Hiring practices and business relationship developed for those in recovery. Would like to have an Opioid Impact Fee subcommittee created. Also need to create a recovery high school program through DOE

Dr. Thomas: Would like to create stronger relationship to employers as that will be crucial due to the times

R.L. Hughes: mental health providers connected with law enforcement, need to build stronger programs surrounding this. Also need to work on helping people experiencing homelessness

Traci Bolander: work on improving access; beyond OUD to addressing the underlying MH conditions. Want to ensure that telehealth changes become permanent

Carolyn Petrak: Mental Health Parity and getting the report and working on the needed legislation that stems from the report. Would like to review the legislation that the Consortium has already passed and see

the impacts that has had. COVID has impacted community providers and want to see what supports can be provided to help them make it through. Also would like to look into homelessness

Kate Brookins: working through OCHR which was delayed by COVID but is picking back up. Want to ensure access

Karyl Rattay: Naloxone distribution is important as well as ensuring that those with overdoses or acute events get connected to care. Prevention is a focus as well and looking at ACES identification, referral and connection to resources

Jennifer Smolowitz: MHA wants to work with the BHC to bring people together to build coalition

Annie Slease: connecting families to education, resources and support. Also providing support to industries that have been specifically impacted to care

Jennifer Graber: Education and workforce are important to her

Joe Aronson: want to focus on harm reduction

Becky King: want to continue to improve education but want to focus on an upstream approach and provide education in relevant settings. Engaging other communities as well

Emily Vera: focused on increasing peer services

Susan Holloway: Increase access to treatment and wraparound services. Leveraging partners and fighting stigma

Wade Jones: equality and social justice; overdoses epidemic; focus on social and emotional needs addressed

Pam Price: telehealth and expanding access; interested in social determinants of health

Tamera Fair: addressing the impact of trauma and violence. Mental health of justice involved individuals; approval and acceptance of diversion

Dr. Ellison: Psychiatric Advance Directive legislation, addressing the welfare health needs of the older population

Topic: (3) Two Question Activity

Presentation: Mary Kane

Discussion: Mary Posed two questions to the Committee Members:

1. How does Covid-19 and its effects, influence the work of the BHC?
2. What else has changed that has affected the work of the BHC?

Open discussion occurred: Group discussed importance of focusing on Telehealth, and to identify those who may have access to Telehealth.

Significance of having a heightened awareness of vulnerable populations, particularly the elderly.

To support online schools with their Behavioral and mental health services.

The impact of Isolation and resultant Mental health concerns.

Carolyn Petrak: Strengthening telehealth but also allowing for face to face interactions. Trying to meet clients where they are at and filling in the gaps. Want to ensure that people are still engaging in treatment in ways that they are comfortable with.

Dave Humes: Noted that there may be federal legislation that may have funding to help pay for devices

Erin Booker: identify an activity or program to engage people around isolation as there has been a lost of connection

It was mentioned the importance of heighten awareness of vulnerable populations, particularly the elderly. Also the need to provide support to online school with their behavioral and mental health services

Topic: (4) Group Discussion & Reporting

AT 4- Reduce disparity between costs of Medicine Assisted Treatment (MAT) for Medicaid v. private insurance.

Erin suggested that yes, there needs to be policy related to drug costs, collaboration is key for lobbying and there are many gaps, but the most important tissue is to have a collective voice

AT 7- Evaluate and change reimbursement strategies for behavioral health, including for therapy and counseling services.

Carolyn Petrak reported that reimbursement does not meet the cost of services and that a collective voice is required, and that all mental health services must be included in reimbursement.

FCR2: Evaluate current efforts, review evidence, and offer educational programs to support families with a loved one in active addiction, with mental illness, or with behavioral health issues.

There was discussion around issues with family and community education and needing to break out into populations such as SUD community, school-based wellness centers, correctional facilities, underserved community and elderly. Should parcel out resources and maybe do a needs assessment to fill gaps.

Housing and Transportation has not been identified.

EP: Shared the importance of working on upstream prevention through education with HMA.

DP2: Create a statewide MOU for nonprofits and entities that contract with the State to better share critical data related to behavioral health trends and statistics.

Discussed that the state side of this task was taken on by the Family Services Cabinet Council and that the nonprofit side was more of an ask. Also have not worked on the health claims data but the mental health parity report could fill that gap.

CLE2: Develop and increase stronger partnerships and coordination between police departments, school districts and school resource officers to offer trauma informed training.

This would require policy work and a new model would be needed. There would also need to be a change in funding. Need to ensure the right person to outreach to people. There could be a link to Trauma Matters Delaware.

CP2: Ensure behavioral health resources are culturally competent, utilizing evidence-based approaches.

Need to work with state agencies and provide conferences and trainings on this. May need to make policy changes.

Topic: (4) Closing/ Main Takeaways

Presentation Mary Kane

Discussion

Intention of this meeting is to Stir the Pot and a way to connect leaders and harmonize thoughts.

To determine if Policy is required and to decide how the consortium can best direct the committees.

Bethany Hall Long shared a story of helping save lives through Naloxone distribution initiative and helping to get someone from a hotel in Sussex County into a recovery program

Next Meeting: October 13th 2020