

**Planning Council  
Meeting Minutes  
State Library of Ohio  
Friday, March 18, 2016**

**Present:** Daniel Arnold, Walter Asbury, Jane Byrnes, David Caperton, Greg Collier, L. Craig Comedy, Cheryl Crayden, Bob Cross, Liz Gitter, Janice Mader, Diane Mang, Meghan McNeil, Barbara Miller, Jennilee Mohler Jody Morgan, Sarah Nerad, Mickey Scoville, Sara Sheline, Mark Smith, Sara Smitley, Donna Thomas, Deborah Wilcox, Sue Williams

**Guests:** Sharon Fitzpatrick, Teri Gardner, Rosaland Gatewood-Tye, Kristen Henry, Tracy Plouck, Mindy Vance

**Recorder:** Lynette Cashaw-Davis

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**Welcome, Introductions and Meeting Minutes**

Review of January 23, 2016 Meeting Minutes

- Correction: add Jody Morgan to attendance
- Correction: correct spelling - Diane Mang (page 3 – Membership Committee)
- Mark Smith moved and Walt Asbury 2<sup>nd</sup> to accept minutes with the above corrections; motion passed.

**Disability Rights Ohio: Kristen Henry, PAIMI Program Liaison**

- Disability Rights Ohio (DRO) – Non Profit entity formerly Ohio Legal Rights Ohio
  - Protection and advocacy system for Ohio also designated as CAP client assistance program
  - Mission is to advocate for the human, civil and legal rights of people with disabilities in Ohio
  - Governed by a Board of Directors (primarily people with disabilities and family members)
- PAIMI (Program and Advocacy for Individuals with Mental Illness) Program
- PAIMI Advisory Council
  - Monitoring activities (advisory council members attend along with staff)
  - Meets 4 times/year in Columbus
  - Seeking new members from all areas of the state and all backgrounds
- PAIR (Protection and Advocacy for Individual Rights) Program - SUD, other chronic medical conditions
- CAP Program (Client Assistance Program)
- PAVA Program: Protection and Advocacy under the Help America Vote Act
- Voter hotline on all election days
- PABSS Program: Protection and Advocacy for Beneficiaries of Social Security
- WIPA Program: Work Incentives Planning and Assistance
- VOCA Program: Victims of Crime Act
  - Funded through federal court fines and penalties
  - State funds directed by Ohio Attorney general
- Other Grants
  - DRO provides legal advocacy and right protection to a wide variety of people with disabilities.
  - Information and Referral

- Technical Assistance
- Short term assistance
- Representation
  1. Negotiations
  2. Mediation
  3. Court
- Current Priorities:
  - Community Integration (undue segregation, housing discrimination, voting rights, other accessibility issues)
  - Employment – including higher education
  - Education – Transition , restraint & seclusion, student discipline
  - Abuse and neglect – death investigations, abuse and neglect complaints, seclusion and restraint issues, monitoring institutions, criminal justice issues, guardianship reviews
  - Health care
  - Policy and communication

**Trauma Informed Care: Teri Gardner, Training Officer, OMHAS**

- Trauma is a common event in which someone perceives a life threatening experience. The experience often impacts people’s mental health and substance abuse.
- Potential traumatic events: abuse, loss, chronic stressors
- Experiences of trauma: how, when, where, how often
- The science on ACE (Adverse Childhood Events)
- Prevalence of trauma
- Traumatic Events
- Ohio’s TIC (Trauma Informed Care) Initiative
  - Implementation of TIC at all six Regional (state) Psychiatric Hospitals including consultation from the National Center for TIC and Clinical Safety Initiative
  - Trauma Informed Care is an evidence based practice (listed on SAMHSA website) includes outcomes
  - Third Annual Trauma Informed Care Summit and Institute – June 22 & 23 (recovery panel on 2<sup>nd</sup> day) Registration opens May 1<sup>st</sup>
  - Regional Trauma-Informed Collaborative: Six Regional TIC coalitions formed
  - Outcomes with TIC
  - What can we do
  - Things to Remember: Underlying question (what happened to you); Symptoms (adaptations to traumatic events; Healing happens (in relationships)
  - Tina Evans (Regional Team Liaison)
  - MHA.ohio.gov – Initiatives - TIC – resources - Collaboratives
  - Email specific questions to Teri Gardner

### **Planning Council Executive Committee Report: Conference Call with OMHAS Director Tracy Plouck**

Sarah, Mark & Jody met with Director Plouck to address the issue, how can Planning Council become more effective. This was a follow-up conversation to a question that Jody Morgan asked at the previous Planning Council.

- Mark .....Potential of doing a field trip
- Jody: As a council we don't have autonomy; don't have anything outcome oriented. Tracy responded – you tell me what you want to do and I will support you.
- Sarah: Wants us to be empowered – Tracy very open to what we want

### **Department Updates: Tracy Plouck, OMHAS Director**

- Children's Services & Medicaid:
  - Investing additional 10 million identified in children's services (cost neutral approach).
  - Looking at ways to have better assurances as to getting what they're paying for.
- Wraparound and high fidelity wraparound is supported generally speaking
  - Discussion: how do you pay for it?
  - Instead of billing as a specific service, will be providing guidance on how to bill for specific services included in wraparound services.
- IHBT (Intensive Home Based Treatment) for children – we've been seeking to add to State Plan for last 20 years.
- Folks have been expressing concern about the inadequacy of the reimbursement rates for services – the plan is to implement targeted rate adjustments.
- Deaf and Hard of Hearing advocates gathered together last summer to discuss:
  - Making treatment and various supports more accessible to that population
  - Engagement
  - Workforce
- Dept. has begun producing videos on various behavioral health topics in ASL (American sign language). Looking to do training for ASL interpreters to enhance behavioral health (including trauma ) knowledge
- Trauma Informed Practices: Community Transitions Program – in collaboration with ODRC (Ohio Department of Rehabilitation & Corrections).
- Hospital System:
  - 1050 beds across 6 sites; 65% of patients in forensic status; 350 non-forensic beds; typically at 96% capacity.
  - Looking at ways to address capacity challenges: jail on-site treatment availability; community based competency restoration; addressing barriers with regional forensic psychiatrists; working to treat people in least restrictive environment (i.e. SUD folks)
- Housing:
  - Partnerships with boards and local partners for recovery housing; supportive housing for SPMI (serious & persistent mental illness; Capital bill expected to be introduced April 11 (community capital will be addressed)

### **Update on Peer Support: Mindy Vance, Chief of Recovery Supports, OhioMHAS**

Mindy provided an update on pending approval for peer support rules.

- Divided into 2 rules - Peer Services Rule for providers; Peer Services Rule to give authority to certify Peer Recovery Supporters. Have submitted 2<sup>nd</sup> version of rule to CSI (Common Sense Initiative). Planning to go live with certification July 1. Actively being reviewed by CSI. And we plan to file on April 15<sup>th</sup> anticipation of certification rule effective July 1. Will be releasing communications at that time (April 15) about how folks can apply. Peer center will be reviewing applications for completeness – forward to Sharon & Mindy in conjunction with Communications office to create certificates in preparation for July 1 distribution.
- Recovery Conference happening in June
- Will have Peer Conference in the fall (40,000 for CFPT) on our website and OACBHA website.

### **Youth Recovery Supports: Sarah Nerad, Program Director, OSU Collegiate Recovery Community and Planning Council Vice-Chair**

Sarah Nerad described collegiate recovery programs which support students in recovery from substance use disorder, including the one at Ohio State.

- Collegiate Recovery Programs: A supportive environment within the campus culture that reinforces the decision to disengage from addictive behavior.
  - Institutionally sanctioned and supported program
  - Continuing care paradigm
- Scope of Problem:
  - Campus is a recovery hostile environment
  - Acute care doesn't work
- Barriers to Recovery on Campus: balancing recovery and school; recovery has to come first; leaving behind recovery supports
- 150 CRPs across the country
- Benefits of Collegiate Recovery Programs – extends the continuum of care; parents can worry a little bit less; change campus culture; retention and graduation rates improve.
- Student data: average age 25; average length of recovery 16 months
- How you can support your local Collegiate Recovery Community (CRC):
  - Refer students in recovery to them
  - Help advertise the CRC
- Recovery High Schools
  - Mission is to educate students in recovery from SUD (substance use disorder)
  - Students must be in recovery and working a program of recovery
  - Best time to intervene
  - May 26 Association of Recovery Schools meeting
- Alternative Peer Groups
  - Integrates peer connections with clinical practice through intervention, support, education and parent involvement
  - Created to address the emotional, psychological, spiritual and social needs of young people
  - Foundation of the model – peer relationships are necessary for recovery
  - Key factors – Parent super invested, work a program of recovery

- Differ in format, location and cost
- Traditionally focused on adolescents
- Need to have full continuum of care

**State Auditor’s Report (ORC 11726): Rosaland Gatewood-Tye, Assistant CFO, OMHAS**

The State Auditor annually reviews OhioMHAS’ fiscal practices, and makes recommendations for improvement. Planning Council has been designated as a stakeholder group to receive a summary of the findings.

- Overview: financial audit, performance Audit, special audit
- AOS (Auditor of State) Management Comments re: noncompliance and internal controls
- Results of Audit (SFY 2014 vs. SFY 2015)
- 2014 – 5 results and findings; 2015 3 were resolved – 2 results left
  - Lack of monitoring timely submission of fraud reporting acknowledgements for new employees
  - Confidential Personal Information (CPI) – required forms were not completed correctly
- Office of Management and budget circular A – 133 requirements
  - SFY 2014 – 3 findings; in SFY 2025 cleaned up all but one (DUNS number for sub awards, a federal grant identification number, is not consistently collected)
  - New grants management process will also address this number being including from the outset

**Planning Council Business: Jenni Mohler, Chair**

- SAMHSA Technical Assistance: Jody – phone conference 3<sup>rd</sup> call
- Through the BRSS-TACS Initiative, SAMSHA has offered this technical assistance (TA) to Planning Council
  - Creation of member recruiting and marketing communications
  - Orientation information for new members to Planning Council
  - Identification of projects for us to partake in
  - Potential onsite meeting with TA consultants
  - Proposed TA products – looking for feedback from Planning Council members as to what they want to pursue and how they can participate
- State agency employees may need to provide a different role in advocacy
- Advocacy work (OEC/OCAAR Advocacy Days) Liz will send the flyer out to everyone along with information about the Recovery Conference in June
- Ideas for Planning Council participation – issue development
  - advocacy
  - trauma
  - diversity
  - multicultural competency
  - person-driven care
  - news article
  - town halls
- Suggestion to send out a survey (Survey Monkey) to allow input – Core group will identify one issue to discuss with the TA consultant
- Meeting was adjourned by the Chair at 3:20pm