

**MHADA Board Minutes
Cape May County
March 9, 2021**

In Attendance:

Thomas Dawson	Katie Faldetta	Jennifer Wolfson	Frank Garcia	Rob Johnson
Pat Devaney	Majken Mechling	Barry Keefe	Joe Landis	Bridget Deficcio
Amy Dindak	Sueanne Agger	Tom Maletto	Donna Groome	Kathy Reeves
Greg Speed	Renee Pettit	Dave Grusemeyer	Sharon Modzelewski	Tonia Ahern

Call to Order

A virtual meeting was held due to COVID -19.

The meeting was called to order by Vice-Chairperson Barry Keefe at 5:05 P.M.

Approval of Minutes

A motion to approve the minutes of the February meeting was made by Dave Grusemeyer and seconded by Tom Maletto. Motion carried.

Reports and Correspondence

Mental Health: Amy Dindak's report is attached.

Addiction Services: No Report

GCADA: No Report

Old Business

Membership: Jennifer Wolfson expressed a desire to join the Board. Pat will work with her to get the appointment through the County process. The Board welcomed her to the membership.

Heroin Issue Update: Hope One, OORP, Recovery Center, Jail MAT: Joe Landis reported on the Hope One Van and the upcoming schedule. They have had great success with past locations such as the new VA center. They are continuing to give out NARCAN and Cape Assist staff have been trained to provide the informational/training if the nurses are not available. There will be another VOA food distribution with Hope One on 3/18/21 at the Cape Assist office. The Overdose Fatality Review Board will meet again in March. Joe and Ashley went to the Sober High School to visit and were impressed by the students and the staff- it was a very good exchange. Joe will continue to monitor overdose data but there is difficulty deciding which data source to use as they are very different. Sueanne's report is attached. Pat reported that the JAIL MAT grant is extended until June 30, 2021 with the expectation that the program will continue. Also the Recovery Center grant will continue until 9/30/22.

Recovery High School: Katie spoke about Coastal Prep. They have 5 youth, and all have had challenges in their lives. The staff continue to work well with the youth and keep them connected. The school tries to connect the students with supports in the community.

CISM Update: Pat had reached out to the DRCCs to see who was licensed and interested in CISM training. Three people replied.

New Business

Screening Presentation:

Kathy Reeves from Acenda and Amy Dindak from DMHAS explained a new development in the screening process that has been impacted by a lack of inpatient beds. Background information regarding the screening process is provided below.

Documents

The Certified Screener completes a “Screening Document”.

A Screening Psychiatrist or Emergency Room Physician completes the “Screening Certificate”.

Process

Upon entry of an individual to the Screening Service, the individual may be detained for 24 hours from entry to provide emergency and consensual treatment, medical clearance, and conducting an assessment. Within this 24-hour time frame, if a Psychiatrist (or ED physician at CRMC), in review of the Screening Document, and in review of completion of a psychiatric assessment, concludes the individual is in need of treatment, the Psychiatrist or ED physician completes the Screening Certificate.

Upon completion of the Screening Certificate, the Screening Service staff shall determine in consultation with the Psychiatrist (or ED physician), the least restrictive environment for the appropriate level of care. Screening law provides that within 72 hours of the completion of the Screening Certificate, the individual must be:

1. Admitted to a Short-Term Care facility, or special psychiatric hospital
2. A psychiatric at the admitting facility must complete the “Clinical Certificate”, and court proceedings must commence by filing with the court both the “Screening Certificate” and the “Clinical Certificate”.

The issue is that the lack of inpatient beds may extend the person’s stay in the ER for over 72 hours. If the person is to be involuntary committed to an inpatient unit, the law requires that the “receiving agency” complete the second assessment identified in #2 above. If the transfer cannot be made, the person may have to be released into the community in an “unstable” state.

The Board and attendees discussed the impact of this new issue on Cape May County and any options for a solution. A decision will be made regarding future action after the meeting between Acenda, DMHAS and the judiciary.

2020 SUD Plan Goals and Performance: Pat distributed the summary of the program progress for the Substance Use Disorder Grant for 2020. Programmatically most all goals have been reached.

Cape Regional Wellness Alliance Plan: The Plan Update developed by the Alliance was in the packet. This group has made significant accomplishments in the past 4 years, especially in the area of resiliency. Greg Speed, a founding member, highlighted some of the major things that have been planned and brought to fruition.

Mental Health/LE Task Force: Joe reported that on March 24 the Task Force will hold its first meeting. The purpose of the Task Force is to develop a plan that will allow a mental health professional assist the police when they are called onto a situation where an individual who may have cognitive/mental health issues is involved to reduce any trauma associated with the event.

Public Response

Resiliency and Other Trainings: Katie Faldetta reported on the progress of the Administrator Academy which offers school administrators more in-depth knowledge about resiliency and how they can support their school staff as they develop the resiliency teams in their schools. Cape Assist and the CIACC are planning a video on mental health resources for youth.

Safe Community Coalition: Rev. Tom Dawson reported on the activities of the Safe Communities Coalition. They held a virtual event for Black History month and had Dr. Theodore Darden as a speaker. He was well received, and the Coalition hopes to bring him back again. They have distributed about \$8,000 in funds for chrome books and wifi connection to local schools that do not have available funds to assure that all students have access to the virtual learning. In 2021 plans will be directed at a Community Walk with the Attorney General, the Unity in the Community event and the backpack “back to school” effort. He added that the SOAR Church is working with the Wildwood School district to provide backpacks with food as food insecurity has been reported in that area.

Adjournment:

The meeting adjourned at 6:35 pm by Vice-Chairperson Barry Keefe.

DMHAS March Updates

RLI

Training and Supervising of Peer Providers in Cognitive Therapy for Recovery to Assist Consumers Experiencing the Effects of COVID-19 Notification Date 2/9/2021 (*Notification is forthcoming*)

The specific goals of the TTI are as follows:

- To empower peers to work more effectively within their scope of practice while honoring physical distancing and other mandates related to the COVID-19 pandemic;
- To provide state-of-the-art virtual training and supervision in Cognitive Therapy for Recovery (CT-R) to approximately twelve (12) peer providers working in clinical settings in Hudson, Morris, Passaic and Union counties of New Jersey;
- To integrate CT-R and incentivizing¹ as strategies for successful engagement with individuals who have had past difficulties taking advantage of behavioral health services that could be potentially helpful;
- To track identified outcomes associated with the delivery of CT-R and the use of incentivizing, and to provide an evaluation of the overall project. The successful applicant will be responsible for the design and implementation of an incentive program that is consistent with all grant requirements; and
- To propose a “Train the Trainer” model that will sustain and enhance CT-R as part of an essential peer-based competency for peer providers served in clinical settings throughout New Jersey.

The CT-R RLI timeline is as follows:

- January 7, 2021: Release of RLI
- January 26, 2021: Deadline for receipt of Letters of Interest (LOI) – no later than 4:00 EST.
- February 9, 2021: Announcement of selected organization (*Notification is forthcoming*)

¹ *An incentive, such as but not limited to generic gift cards, is offered to Program participants for completing their recovery goals and for participating in activities related to the CT-R. The specific incentive amounts and the plan for its use is determined in conjunction with the peer recovery specialist who is using CT-R along with the incentivizing techniques. This will need to be addressed in the application.*

The organization that is chosen will be required to provide an evaluation of the project and to submit a plan that can allow for sustainability after completion. The evaluation will include subjective and objective outcome measures. The sustainability plan shall include developing a “Train the Trainer” model for teaching peer providers how to properly implement CT-R as a modality.

III. Funding Availability:

Total funding available is \$150,000 for one year. A detailed project budget will be requested upon award.

Grant to DMHAS (NOT providers) regarding the **National Suicide Prevention Lifeline Program and the 9-8-8 rollout** - DMHAS has received a 9-month grant for the State of NJ to plan for closeout of current crisis line in conjunction with the rollout of the new 988-line; the 9-month grant will help to identify gaps that need to be filled in the current system, and how to most effectively implement 988 in NJ to fill those gaps. Implementation of the new 3-digit crisis call line is projected to begin by summer of 2022, and will serve to provide a quick 3-digit number that is easy to remember for mental health crisis and suicide support.

(National Suicide Prevention Lifeline's current number is 1-800-273-TALK (8255), and is a national network of local crisis centers providing free and confidential emotional support to those in suicidal crisis or emotional distress 24/7)

Cultural Competency Plan – DMHAS Letter to Providers 10/22/2019 and 11/4/19; Follow-Up Letter to Providers 2/17/21

Each agency is required to develop a **cultural competency plan** that includes the CLAS (*Culturally and Linguistic Appropriate Services*) standards in their delivery of services. Plans were to be submitted by April 30, 2020 to Liz Conte and Cultural Competency Center staff. DMHAS contracts with two regional cultural competency training centers that provide assistance in the development of plans:

The **Southern Region** counties can contact Clarissa Wheat at the Mental Health Cultural Competence Training Center for Family Services (609-569-0239) x62155 clarissa.wheat@centerffs.org OR the DMHAS Program Monitor Elizabeth.Conte@dhs.nj.gov 609-438-4129.

- **FFS PROVIDERS: (DMHAS)** will be conducting reviews, specifically, for monitoring Provider Agency's compliance with the terms of their Attestation of good faith efforts to provide mental health and substance use disorder treatment and services which were agreed upon as conditions for receipt of payments under the FY20 DMHAS contract.
- **Single License for Co-Occurring;** DMHAS continues to work to Develop of NJ DMHAS regulations for a single license for provision of both mental health and addiction issues.
- **PATH PROVIDERS:** PATH training series are being provided monthly via Zoom. This a collaboration between Community Health Law Project, Rutgers Health and DMHAS. Flyers were emailed to appropriate providers.
- **CSS Training are ongoing.** Please reach out to Deborah Gravely or check DMHAS website for additional information. 609-567-7352
- **COVID 19 vaccines;** DMHAS is working collaboratively with DOH to make sure that the individuals living in congregate care settings like Group Homes and RHCF/BH get their vaccines.
- Anyone in need of mental health services should contact:
NJ Mental Health Cares (866)-202-HELP (4357) or Help@mentalhealthcares.org
- **Helplin**
e for individuals who are deaf and hard of hearing is 973-870-0877. This helpline is operational Monday-Friday from 9 to 5. Now providing services via texts.
- Covid 19 memos and other directives can be found on DMHAS website.
- www.Njhelps.org for social services related assistance.