

**STATE ADVISORY COMMITTEE
ON SUBSTANCE ABUSE SERVICES
November 9, 2005
Holiday Inn Downtown
Lincoln, Nebraska**

COMMITTEE MEMBERS PRESENT: Jerome Barry, Ann Ebsen, Topher Hansen, Linda Krutz, John McVay, Dr. Mercer, Brenda Miner, Jane Morgan, Laura Richards, Kathy Seacrest.

COMMITTEE MEMBERS ABSENT: Dr. Bhatia, Wehnona St. Cyr.

HHS/BEHAVIORAL HEALTH STAFF PRESENT: Dennis Snook, Linda Wittmuss, Betty Alm.

GUESTS PRESENT: Leslie Buhl, Christina Peck, Kate Speck, Jack Buehler, Melva Denholm, Chuck Stepanek, Nancy Herdman.

I. WELCOME AND INTRODUCTIONS

Chairperson, Kathy Seacrest called the meeting to order and thanked everyone for attending today's meeting.

II. ATTENDANCE – DETERMINATION OF QUORUM

A quorum was present for today's meeting.

III. APPROVAL OF AUGUST 9, 2005 MINUTES.

The August 9, 2005 Minutes were approved by general consent.

IV. APPROVAL OF AGENDA

Chairperson, Kathy Seacrest explained issues pertaining to public meetings.

- Changes/additions to the agenda have to be made within 24 hours of the meeting. Emergency agenda items on meeting day can be added with agreement of Committee members.
- Agenda times for the Substance Abuse Committee may be changed later on.

The November 9, 2005 agenda was approved by general consent.

V. HOUSEKEEPING

Working lunch – lunch will be available at noon to be brought back into the meeting room.

PUBLIC COMMENT

Chairperson, Kathy Seacrest announced that anyone from the public wishing to speak needs to sign the Public Comment sheet.

Melva Denholm asked the question regarding the process for new employees in the legal system, i.e. ASI/CASI.

Kathy Seacrest added that the Criminal Justice Substance Abuse Treatment Team will be added to UNFINISHED BUSINESS.

Jack Buehler mentioned the meeting notices for today’s meeting did not indicate the location of the meetings.

REPORTS

I. Report from BH Council

-Change in Meeting Structure of Committees and Council

Kathy explained that the times for the committee meetings and BH Council were changed because the Mental Health Committee needs more time and the BH Council doesn’t need as much time.

At the end of the Substance Abuse Committee meeting today, the time issue will be evaluated by the BH Council.

Q: What does the agenda for the BH Council need to look at and what issues?
Commitments issue was mentioned – commitments issue for the whole system. What topics intersect all three groups – substance abuse, mental health, gambling.

- Annual Report to Governor & Legislature

The Committee Chairs met and decided we do not have enough to report yet. The Annual Report will be done at the end of the fiscal year.

Q: When is the Annual Report due?

A: This will be announced at the next Substance Abuse Committee meeting.

II. HHS Response to SA Committee August 9, 2005 Recommendations

Letter dated 11-7-05 from Ron Sorensen, Administrator addressed to Kathy Seacrest and the State Advisory Committee on Substance Abuse was distributed to Committee members today.

RECOMMENDATIONS FROM SUBSTANCE ABUSE COMMITTEE ON 8-9-05:

Recommendation #1: We recommend that the Division on Behavioral Health and Medicaid jointly create and sign a fact sheet on the status and implementation of the substance abuse waiver. We recommend that this be sent to all providers, regions, and our Committee. We request updates be sent as needed.

Response from BH Division:

The Division of Behavioral Health Services and Medicaid are actively working to fully implement the adult substance abuse waiver.

SAC discussion:

- Some programs are doing okay with Medicaid.
- It is helpful to be working with Nyla Helge – fortunate to have her assistance.
- It slows the cash flow.
- Concern is next fiscal year operating about 40% Medicaid substance abuse waiver –60% region – bad situation to be on formula system but this varies – do not want to be on formula next fiscal year – has always been a roller coaster – cannot predict until May.
- Some got lost in the system – Magellan.

Q: Are conference calls working?

A: Yes.

Committee members suggested that if anything changes at end of the FY, a fact sheet needs to be done and notification should go out early – look at private providers and what it looks like, e.g., match, useage.

Q: Open up to non-regional providers?

A: Maybe other providers do not know about Medicaid reimbursement.

Q: Is there enough match?

A: The Division can share it when the Division gets it. You have to be in the regional system to access dollars.

-Need to obtain how many dollars are being spent on substance abuse – do not know match with Division Medicaid.

Q: What is the agreement to coordinate this and what are we doing to merge the system? (listed under Recommendation #2)

Minutes – include financial report on Medicaid match for substance abuse from the Division.

Recommendation #2: We recommend that a joint affiliation agreement be created and signed by the HHS Division of Behavioral Health and HHS Finance and Support to put in writing the relationship and the decision making process.

Response from BH Division:

The Division of BH has developed a draft affiliation agreement that we are continuing on to work on to finalize the working relationship, roles and responsibilities, and other procedures for the implementation of the SA Waiver and MRO. The agreement is awaiting approval and signature from the HHS Policy Cabinet.

SAC discussion:

SAC should review the agreement along with Division leadership and share with substance abuse integrated system.

Q: Are Regional providers required to have Medicaid slots?

A: It is difficult to balance Medicaid empty beds, with needed capacity and still maintain adequate beds to be fiscally sound.

Kathy suggested at the next SAC meeting, we discuss how the Division looks at the Plan of Expenditures.

The best place to keep balance is at the state level – puts providers at risk.

Recommendation #3: We recommend that the Division Prevention System create two or three statewide environmental change goals that respond to the Risk and Protective Factor Survey results.

Response from BH Division:

The prevention program survey recently conducted with local school systems is complete and a draft report is being prepared. There have been additional questions added to the survey.

SAC discussion:

Dennis Snook will check with Prevention Manager, Laurie Sutter regarding clarification of the survey.

SAC requests to see results; better way of tracking.

Recommendation #4: We recommend that training in the substance abuse contract include training in screening and referral for primary and specialty physicians.

Response from BH Division:

The FY 06 substance abuse counselor training contract has already been negotiated, but we will work with the contractor to see if we can make adjustments to reach this audience.

Recommendation #5: We recommend that our members whose terms expire in July 2005 be reappointed since we have only had two meetings since their appointment and we believe we have good representation and that we have developed a good and effective working relationship. Have had 100% attendance.

Response from BH Division:

LB551 established a new membership requirement to have three consumers on this Committee. The Committee currently has three consumers represented and as it meets the requirement of LB551 your recommendation has been forwarded to the Governor's office for approval.

SAC discussion:

-Public disclosure vs. I.D. is a big issue.

MOTION:

Topher Hansen made a **MOTION** add Consumer definition, an emergency item to today's agenda.

SECOND: Jerome Barry.

VOICE VOTE: MOTION carried.

Recommendation #6: We recommend that the Division meet with TAP to discuss additional specialized training in dual diagnosis and treatment.

Response from BH Division:

Dual Diagnosis training would fall under continued education services.

TAP has established the continued education class through January 2006. We Will discuss the need and possibility of providing this training in the third and fourth quarter of FY06.

SAC discussion:

-Jerome Barry mentioned no discussion has been done as yet. Jerome and Topher are working with the Substance Abuse Action Coalition – subcommittee on co-occurring treatment.

Recommendation #7: We submitted several recommendations on the changes in licensure for LADC's to the Board of Alcohol and Drug Counseling.

HHSS Response: We would encourage you as the State Substance Abuse Advisory Committee to take an active role in making suggestions that impact the delivery and quality of substance abuse services in Nebraska.

SAC discussion:

Kathy added that she had sent this to R&L.

SAC members asked to be kept informed by reviewing the draft and be kept informed of the public hearings.

A request will be made to HHSS that the response from HHSS to the Substance Abuse Committee recommendations be done earlier.

III. Prevention – No report.

IV. SA Counselor Training Report – Leslie Buhl, LMEP
(Handout: LMEP/TAP Staff: Core Education, Continuing Education)

- Changes to the new two-year contract:
 - Charges
 - CEUs

Looking at attendance in classes – a lot of cancellations in western Nebraska – working on other ideas and how to notify all providers so they are aware and can coordinate training and how to get the word out to pick up training attendance. Training had to be cancelled in North Platte and Kearney. Sometimes there was no one registered.

Kathy Seacrest suggested LMEP look at core education – have to look at substance abuse counseling and higher education – look at community colleges for curriculum.

Linda Krutz added that the Community Corrections Council is working on a study with Senator Brashear, Dept. of Corrections, Parole.

Issues statewide: BH Issues Statewide
 Treatment Facilities are understaffed
 Training needs to be in colleges
 Hours of supervised training

Kathy mentioned reimbursement for substance abuse services is not great. Linda Krutz agreed to take this info. back to Senator Brashear.

Jerome Barry explained that Title 209 (Title 172) definitions are being rewritten. He announced that the largest number of oral exams are happening – we are bringing in more people.

- Supervised hours – 3,000
- High School diploma – 6,000 hours is for full licensure.

Comment: if you get all the hours the salaries are low – whole system needs to move up.

Jerome Barry mentioned the Licensing Board has a Fact Sheet.

Topher Hansen said he will be meeting with Senators this week regarding business side of BH – career track and services available in one system – bigger picture.

Leslie Buhl provided data on the ASI/CASI classes:

Average ASI attendance:	Year 2002	14
	Year 2003	17
	Year 2004	13
	Year 2005	8
Average CASI attendance:	Year 2002	8
	Year 2003	18
	Year 2004	14
	Year 2005	21

Q: Any refreshers for ASI?

A: Leslie explained it can be done, but cost is an issue. Kathy added that refresher courses are needed.

Q: Any ongoing reliability? This would improve standards.

A: Leslie explained the instrument can be scored.

Jerome Barry referred to the SAC minutes 8-9-05 page 5 which addressed this issue.

-419 professionals have completed criminal justice training.

-Dr. Mercer mentioned the use of technology would help, i.e. teleconference for western Nebraska. Leslie explained the LMEP contract cannot provide for teleconferencing.

Comment: Division has already contracted for the next two years so SAC wants the Division to look at the next contract, but do it now – physicians training.

Thank you to Leslie for her presentation today.

Recommendations to the BH Council this afternoon:

In all professions: Assistance in education.
Assistance in reimbursement, salaries – can be competitive with other professions.
Assistance in mental health, substance abuse, gambling.
Incentives and leveraging can focus on education.
Can people afford the training?

Q: How do core courses compare?

A: 45 contact hrs., 3 semester courses

V. Addiction Transfer Technology Center – Kate Speck
(Handout: PATTC Nebraska 4th Quarter Activities)

-Received Children's Services Mental Health grant in October.

-Doing focus on family groups.

Kathy Seacrest suggested combining with Children and Family Foundation – SAC needs to work with these groups.

Q: Core courses?

A: On-line courses are offered but hours cannot be obtained.

Nancy Herdman added that with the new regulations, all ATTC courses will be approved.

Kate added that she will be working with western Nebraska - need consistency providing continuing education courses. Also working with TAP across the state and the Recovery Network.

-Probation training is scheduled for January 23-27, 2006.

-Omaha Coalition Homelessness is doing a feasibility study on co-occurring disorders – conference call scheduled early next month.

BREAK

Other:

Kathy Seacrest recommended the SAC review the Meth Study.

Linda Krutz explained the study will be out next week and will be sent to SAC members.

There are discussions about a meth treatment center at Norfolk – other substance abuse issues – crack was localized in larger areas.

Q: How was this study conducted?

A: Public meetings were held in Scottsbluff, McCook (no one attended) and Lincoln.

HHS was not represented at the Lincoln meeting.

Kathy added that providers were not notified of the public meetings. Linda Wittmuss mentioned she has read the draft which is supportive of training, matrix model, but not a meth. facility.

-Linda Krutz – Council – deliverables are being met.

-Kathy Seacrest added that SAC looks at:

- Best Practices
- Qualified Staff for any Treatment Services.

-Jane Morgan – substance abuse requirement for probation – client wants it as a condition of probation. Kathy added this has been discussed with the Substance Abuse Treatment Task Force.

-Topher added that treatment should occur while in jail.

-Linda Krutz said with Dept. of Corrections- treatment is not given on front end – if they decline inpatient bed, they are out during their incarceration. Topher said a new system is needed.

-Kathy added that 85% should do treatment while they are in correctional facilities.

-Jane Morgan said they do not want to address the alcohol tax in Nebraska. John McVay added the last alcohol tax in 1983 was an A Bill.

SAC Recommendation: Make recommendation to the Dept. of Corrections to seek treatment with current qualified providers.

-Corrections received \$1.25 million to do fee voucher program for probation and parole officers – pilot six sites based on population need.

-Brenda Miner said Grand Island Probation is looking at this.

-John – will Corrections actually provide programs as opposed to independent providers? Kathy said they have to meet criteria – this will be voucher for service. Voucher will be approved providers – this is still being looked at.

-Linda Krutz added that patience is needed – this is a positive thing. By first of the year this will be worked out – will need some adjustments. Probation is working with Management today regarding the fee voucher.

VI. Licensed Alcohol Drug Counselor (LADC) Licensing Report – Nancy Herdman
(Handout: Draft 172 NAC 15)

Highlights include:

-New regulations will include streamlining definitions for core courses – definitions will be broadened – will not state “must” but “such as”.

-Supervision for LADCs will be required by the State – more work required.

-Supervisor and Provisional will sign form.

-300 hours for practical training – LADC must be licensed and practice for one year.

-Supervision for work experience category – can be a psychologist. A meeting to resolve this was held which included Dr. Jeffers and Dr. Cole.

-50 CEU hours are now required – draft regs. will be 40 hours within two years – of the 40 hours, 20 hours must be alcohol/drug specific.

15-011.02 Department Approval of Alcohol and Drug Specific Continuing Education Programs - will make this easier – counselor has to submit. Applications for approval of alcohol/drug specific continuing education programs which are not approved by or presented by one of the seven organizations listed in 172 NAC must be submitted to the Dept. for approval. This will open up for counselors from those seven organizations.

-ICRC and NAADAC have merged.

-Topher Hansen mentioned the need for better flexibility for those who come back into the system. Nancy suggested inactive status.

Q: When will Draft regs. be done for public hearing?

A: In February the final draft of regs. will be complete and then go to public hearing.

Q: What about inactive status?

A: Nancy explained inactive status info. is included in letters to certified counselors – letter should include reference to the regs.

-If the law is passed, will change to Practice Act – Provisional status will be for six years.

-Jerome Barry added this all has been a smooth process. Nancy Herdman along with Kris Chiles from R&L have worked cooperatively with the Board of Alcohol/Drug Counseling.

-29 applicants are scheduled for the Oral Exam next week.

-As of March 2005, there are 346 LADCs, doesn't include Provisionals. More statistics will be available at the next SAC meeting.

Thank you to Nancy Herdman for her presentation today.

VII. 2006 SA Block Grant Application & 2005 Report – Dennis Snook

-The 2006 SA Block Grant is on the Website. Comments can be sent to the Division – a summary will be available soon. Substance Abuse Committee is not required to sign off on the Block Grant – we want feedback from SAC but it is not required by the Feds.

VIII. Overview of Division funded Substance Abuse Services – John McVay

(Handout: FY06 Mental Health Services Funded; FY06 Substance Abuse Services Funded; FY06 Substance Abuse Services Funded through the Division of BH Services)

-John McVay is the new Deputy Administrator for Behavioral Health – the state authority for Substance Abuse. Ron Sorensen is the Mental Health state authority.

-John expressed that he is pleased to be part of this BH Division. He has been appointed to serve on this Substance Abuse Committee.

Q: What about actual services and what is available?

A: John will E-Mail info. to providers. Funding info. is on the Website for BH Reform Implementation Plan funding. Kathy suggested letting providers know funding info. is on the Website. The Regions would like to review it for accuracy.

Q: Referring to the handout - #11 Page 2 – FY 06 Substance Abuse Services Funded Through The Division of Behavioral Health Services. What is the difference between Statewide Training and Substance Abuse Licensed Counselor Training?

A: Linda Wittmuss explained a pot of money is set aside for counselor training events. The bulk is the LMEP contract. Statewide training includes Peer Review, Women’s BH.

-Kathy added the need to look at formula – substance abuse funds and funded adequately for substance abuse.

-The \$28,400,000 includes prevention.

Q: Can we check on Block Grant information from previous years?

It is important we have money for services. We should have \$\$ figures.

-Topher recommended a look at the history of funds by the next SAC meeting. Linda Krutz mentioned it would be good to know services and capacity.

Linda Wittmuss mentioned Hal Hyde did a history; the Substance Abuse Task Force also did historical info. – showed inflation.

John McVay agreed to work on the historical funding.

Topher added we need to look at total \$\$ vs. rate of inflation – less staff doing more work.

Linda Wittmuss added we will have reductions in Mental Health and Substance Abuse Block Grants.

Q: How is problem gambling funded?

A: Lottery funds.

-Kathy suggested looking at linkages regarding services, e.g. who gets what funds, etc.

UNFINISHED BUSINESS

I. Substance Abuse Treatment Team – Kathy Seacrest

- No meetings have been held lately.
- Other issues – Standardized Model
- Ellen Brokofsky is now the Chief Probation Officer for the State.
- Funding through vouchers will move forward quickly, but differently. Several parts to the Standardized Model
 - Assessment
 - Criminogenic needs together, justice agencies will be working on
- Jerome Barry added that he is working with John Atherton and John Dacy on changes in treatment. They want to include providers - will look at national literature.
- SAC should keep up to date on this.

NEW BUSINESS

I. The Faith Partners Model: Connecting Prevention & Treatment With the Faith Community - Jerome Barry
(Handout: The Faith Partners Model)

-The Substance Abuse Committee is being asked to support this Model – support before and after treatment.

-Training for clergy and lay people to be held in Kearney, Lincoln and Omaha.

Q: How is this funded?

A: Johnson Institute.

Q: Are providers included?

A: Unknown

-This is another way for community involvement. Otto Schultz is highly involved and his judgement is trusted.

Q: Should the State be doing this?

Suggest a recommendation that the Division consider being a part of Faith Partners.

MOTION

Ann Ebsen made a **MOTION** if the Substance Abuse Committee should recommend to HHS that this Committee endorse the Faith Partners Model or is it appropriate for SAC to endorse?

SECOND: Brenda Miner.

VOICE VOTE: **MOTION** failed.

Comment: This is not SAC's role.

II. Statewide Focus for Substance Abuse Committee – Kathy Seacrest

-We need to look at who is being served, etc. and with BH Reform are there pieces of substance abuse system getting taxed?

Transporting issues, mental health commitment and how this impacts services, waiting lists – have to look at the system differently and what is missing in the system?

Q: Any data available on length of stay and STR beds?

A: Topher said he has data. Linda Wittmuss says 60-70 days are length of stay.

Jerome Barry stated we have to keep people longer.

Dennis Snook says the state gives that role to the regions. Linda Wittmuss mentioned this info. is on the Website.

-Linda Wittmuss stated have to have service definition consultation and have co-training and not an expectation of treating mental health included dual capable. John added the State needs dual training.

-Topher – STR in Lancaster Co. requirement – dual enhanced?

Q: What do we mean by dual capable – definition and what it means?

MOTION

Jerome Barry made a **MOTION** recommending dual capable definition be clarified.

SECOND: Topher Hansen

VOICE VOTE: **MOTION** carried.

-Kathy suggested statewide focus issues for agenda for the next SAC meeting.

-Post Ccmmitment

-Women’s Services

-Length of Stay

-Waiting List

-John suggested the State work on how things occur in outpatient programming in women’s programs.

-Linda Wittmuss - have to be specific regarding STR.

-Kathy – do we increase funding?

-Brenda Miner – dual residential..

-Linda Wittmuss added we need to do a better job of assessment in our system.

Need to better measure waiting list.

-Kathy Seacrest asked SAC members to bring these substance abuse issues to the next SAC meeting. John will bring statewide issues.

III. Other – Definition of Consumer

- Comment: Jack Buehler mentioned – a person who has personal interest.
- SAC Attributes: Expectations of Consumers on Committee
 - Experience some form of substance abuse problem and experience recent enough to be relevant.
 - Family member currently receiving services.
 - Too detached.
 - Problem not serious enough.
 - Not serious involvement with treatment.
- Have to disclose system conversation.
- Family members have dealt with this; should not eliminate family members.
- Statute doesn't define consumer
- Have to be careful – state vs. non-state if they have been to someone who is licensed.
- Not intended to be state funded.
- Substance abuse treatment services or addiction related have been in recovery.
- Simple definition to include substance abuse, gambling, mental health.

Q: Professional treatment or 12-step?

A: This involves professional treatment.

- Incredible relapse in definition of consumer - who will monitor that?
- Past or future financial interest an issue? Recovering counselor would have financial interest.
- We are customers of the state – also consumers – many levels of consumers.
- Consumers have to self identify – definition is on application????
- Issue is whether other people asked if they are a consumer.
- Issue is how dual diagnosis is defined, i.e. reimbursement.
- Someone who has served on a committee- individual who has received services and quality of care.
- Consumers can participate and state issues.

MOTION

Ann Ebsen made a **MOTION** the consumer definition should state “an individual who has utilized addiction services from a licensed professional preferably within the last five years with an interest in enhancing/enforcing the accessibility and quality of care. Self identify on the application that applicant meets the above definition.

SECOND: Laura Richards.

VOICE VOTE: MOTION carried.

This Consumer Definition will be presented to the BH Council.

SUBSTANCE ABUSE COMMITTEE RECOMMENDATIONS TO BH COUNCIL

– Kathy Seacrest

-The SAC recommendations dated 12-2-05 sent to Ron Sorensen are attached to these minutes.

Other:

Substance Abuse Committee members today received copies of the Draft (12/31/04) Behavioral Health Service Definitions. Committee members are asked to review the service definitions/guidelines and provide comments on the form to Linda Wittmuss, Division of Behavioral Health Services, HHS West Campus, P.O. Box 98925, Lincoln, NE 68509 by November 30, 2005. For adult substance abuse services, we adopted ASAM levels of care and placement criteria. No change to individual Services Definitions at this time.

AGENDA ITEMS FOR NEXT MEETING – February 7, 2006

- Annual Report
- BH Council issues
- Community Corrections Plan
- Voucher
- POE
- Service Definitions
- History of Funding
- Statewide Focus Issues

ADJOURN

Meeting adjourned.