

FINAL – APPROVED AS OF NOVEMBER 9, 2005

**STATE ADVISORY COMMITTEE
ON SUBSTANCE ABUSE SERVICES**

August 9, 2005
Holiday Inn Downtown
141 No. 9th
Lincoln, Nebraska

COMMITTEE MEMBERS PRESENT: Jerome Barry, Ann Ebsen, Topher Hansen, Dr. DeLinda Mercer, Brenda Miner, Jane Morgan, Kathy Seacrest, and Ronald Sorensen.

COMMITTEE MEMBERS ABSENT: Dr. Subhash Bhatia, Linda Krutz, Wehnona St. Cyr, Laura Richards.

HHS STAFF PRESENT: Dennis Snook, Barbara Thomas, Laurie Sutter, Kathleen Samuelson.

GUESTS PRESENT: Kate Speck, Kris Chiles, Leslie Buhl.

**INTRODUCTIONS/
WELCOME**

Chairperson, Kathy Seacrest called the meeting to order. Committee members and staff present introduced themselves.

ATTENDANCE – DETERMINATION OF QUORUM

A quorum was present at today's meeting.

RECOGNITION OF GUESTS

Guests who attended today's meeting were asked to introduce themselves.

APPROVAL OF MAY MINUTES

MOTION: Dr. DeLinda Mercer made a motion to approve the May 10, 2005 minutes.

SECOND: Ann Ebsen.

Minutes were approved as mailed.

APPROVAL OF AGENDA

The agenda was approved.

OPEN FOR PUBLIC COMMENT: None

DISCUSSION: Response from Substance Abuse Committee recommendations May 10, 2005

Letter dated August 5, 2005 from Ron Sorensen, Administrator, to Kathy Seacrest and Substance Abuse Advisory Committee members was distributed to Committee members today.

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 that updates be sent as needed.

This recommendation will be part of the recommendations from today's meeting. Ron discussed that the Division is still working on these issues and feels communication with Medicaid has improved.

Q: Kathy Seacrest stated that there has been some confusion in communication between what Medicaid has discussed with provider and what the Division has offered as guidance.

A: Kathy offered that it may be helpful that this recommendation stay on the list and that it also be addressed to Mary Steiner to insure that communication continues to improve.

Recommendation #2: We recommend that Medicaid and the Division meet with the Tribal Behavioral Health Management team before any implementation of the waiver with the tribes.

A meeting has not occurred but Medicaid and the Division are on the schedule for the next Tribal Behavioral Health Management team meeting.

Recommendation #3: We recommend that a joint affiliation agreement be created and signed by the HHS Division of Behavioral Health and HHS

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Finance and Support to put in writing the relationship and the decision making process.

Ron stated that the affiliation agreement has been presented to the Policy Cabinet. No further discussion.

This recommendation will be part of the recommendations from today's meeting.

Recommendation #4: 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.

Laurie Sutter stated that the next survey for prevention will happen between October 17th and the 28th. No further discussion.

Recommendation #5: We recommend and request that Regulation and Licensure send a representative to our meetings. We recommend that this representative report on the up-to-date data related to our substance abuse counselor workforce. We would like this report to include: Licensing Board Report, Data specifying the number of LADCs, PLADCs, Dually credentialed individuals who are PhD or LMHP, (If this report could be by region, it would be very helpful to us in our work) and a report on applications, written exams, and oral exams update.

Kris Chiles from R&L is present today and will be attending future meetings to discuss the new licensure process for LADC's, PLADC's, etc. Kris is happy to present information that may be helpful to the group.

Recommendation #6: We recommend that training in the substance abuse contract include training in screening and referral for primary and specialty physicians.

The training contract has been signed for this year. The Division and LMEP will look at including it next year.

This recommendation will be part of the recommendations from today's meeting.

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Recommendation #7: We recommend that our members who terms expire in 7-05 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. We have had 100% attendance.

This item is on the agenda, so it will be discussed later.

Other questions. None

PREVENTION REPORT – Laurie Sutter

Laurie provided the committee with information relating to the First Annual Prevention Leadership Institute in November and a listing of evidenced based practices in prevention from the 2001-2002 Compendium. Prevention is in the final stages of finishing and expanding this work

She indicated that the new survey of schools will happen between October 17th and the 28th. This year's survey will have three additional questions to clarify concerns raised last year from the Gambling questions. The survey will also address interest in steroid use and prescription drug abuse. The community reports should be done by January and may be available statewide shortly following.

Q: How were the Metro area schools involved?

A: Laurie reported that last years did not include any OPS or Lincoln schools and the expectation is similar for this year. It did however collect information from private schools and surrounding community schools in Omaha.

Q: Does the survey ask questions to clarify Hispanic ethnicity?

A: The survey does not deeply explore the ethnicity question.

Q: Does anybody have questions about the FY06 SICA grant process?

A: All of the awardees got renewed and plans were updated with funding for most remaining at previous level. Some coalitions did request less funding. One outcome has been a drop in sales to minors.

LMEP REPORT – Leslie Buhl

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Over the past two years TAP has made some changes based on feedback. They have added homework requirements to increase the expectation of quality training. The test and presenters are evaluated to ensure that students are learning the key components.

The year end report on training and participants was provided to the committee. Leslie stated this was the first year that LMEP has not had to cancel a core course. In November they will have the largest group of individuals taking the Oral test.

CEU courses have continued to remain low in numbers but there has been an increase in those attending the CASI, ASI, and Criminal Justice training. The average class size has been around 10. In FY07, LMEP will look to reduce the number of ASI and CASI trainings based on the number of individuals who should have already received this training.

Q: Is it possible to have a refresher class in the ASI or CASI as it has been a considerable amount of time since the training and implementation of these assessment tools?

A: LMEP will look at providing a CEU training to address this. Core classes are scheduled until December, so it could possibly be provided in January.

LMEP has offered three trainings so far this year and 2 CEU classes. They have received good feedback on electronic mailings. They are attempting to broaden dissemination of training through regular catalogs and monthly updates through email. TAP is also looking at how they can provide training for the LMHP groups.

Q: In the rewrite of the 209 regulations LADC will need 30 of 50 hours relating specifically to substance abuse. How do we meet this expectation and still address the increase in co-occurring diagnosis?

Q: What are we currently doing to prepare counselors for dual diagnosis issues?

A: The core classes have clinical treatment pieces that look at these issues. For example, Charles Thiessen provides CEU on co-occurring diagnosis.

Q: Does LMEP have any requirement of their teachers to have experience in dual diagnosis populations?

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A: LMEP requires that they are a LADC, but most of the trainers are dually credentialed or PhD.

Discussion continued around the possibility of changes in regulations to allow dual training to count toward substance abuse CEUs. This included the role of LADC's in diagnosing Mental Health issues. There was some concurrence that there needs to be a change in mind set as the reality is most consumers have multiple issues.

Q: Will there be additional training offered utilizing national consultants to address co-occurring issues and tools for working with these populations?

A: The Division has to request for additional trainings to be made available.

The recommendation was made for Jerome to visit with the Division about training.

BREAK

Regulations and Licensure – Kris Chiles

Kris presented a packet of information related to the changes made in moving the credentialing process to licensure and how the Board of Alcohol and Drug Counseling has addressed these issues.

- Regulation 209 will change to Chapter 15 Title 172
- Application will no longer need notarized authorized signature to be submitted
- Counselors will be allowed to take the test when they are ready
- There will be due process added to the application and testing procedures

The group recommended that the list of acceptable training be revised to address the “must” criteria so other appropriate agencies could provide training.

The process for approval of regulations is approximately six months on the short end.

Q: Is there a way to find out who is supervising provisional licensed staff?

A: Yes, you can contact Kris or the office for this information.

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Q: Can you post the supervisors on the web?

A: That may be something that could be requested.

Q: Glad to see you are recognizing other programs like NAADAC. If you have someone who is supervised, or they are in the process of being supervised, what happens if they leave?

A: If supportive documentation can be shown why the supervisor left and that supervision had occurred this can be address on a case by case basis.

Q: Is this built into the regulations?

A: No

Q: Who has the authority to make decision if there is no agreement?

A: Regulation and Licensure

Motion: Brenda recommended that the committee write a letter that asked the CEU hrs to be similar to those of LMHP's, Physicians, etc. The recommended change was to 40 hrs with 20 hrs from non-substance abuse related training.

Second: Ann Ebsen

MOTION CARRIED.

Recommendation that supervisors be approved by R&L up front during the application process and the supervisors is listed publicly on the web.

Q: Would provisional counselors have only one supervisor?

A: Sometimes it changes and they could have multiple supervisors.

The committee endorses bringing all three boards together in a timely manner to get feedback related to the regulations.

Endorse changes in the Examination, Initial Education and Application Review changes as movement in the right direction.

TRIBAL REPORT – Kathy Samuelson

Kathy presented handout of funding to Tribes for MH and SA services.

Q: Why does Omaha Tribe get Prevention money separately?

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A: The Tribes all decide to let the Regions operate the prevention as part of the Substance Abuse program except for the Omaha Tribe.

REGIONAL REPORTS

A member from the council presented information related to substance abuse services in there region. Region 1 has seen an increase in need, Region 2 Crisis Response teams are busy starting, Region 3 – Columbus is getting a Dual Diagnosis program through Catholic Charities, Region 5 – the PEIR (ACT) program admitted a few people.

COMMITTEE APPOINTMENTS – CONSUMER REP

The memo from Senator Jensen was provided to the group for clarification on meeting the Consumer requirement.

There was discussion about how consumer is defined and at what point this information should become public. The group had strong feelings in relation to family not being considered as a consumer.

Brenda Miner and Ann Ebsen both disclosed that they have been consumers.

MOTION: Kathy made a motion to reiterate the approved motion from the last committee meeting to reappoint all four members whose terms expire.
SECOND: Topher Hansen

ANNUAL REPORT TO GOVERNOR & LEGISLATURE

The Committee discussed what should be included in the report to the Governor. The committee decided that the report should include all of the recommendations from the quarterly meetings. All of the recommendations should be included with the response from the Division. They also would like those recommendations that were not answered to be emphasized. The second piece of their report will include the committee's suggestion that the position of Substance Abuse Director be reinitiated to ensure there is a mechanism for maintaining a primary focus related to substance abuse within the Division.

RECOMMENDATION REVIEW FOR BEHAVIORAL HEALTH COUNCIL AND BH ADMINISTRATOR

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The committee recommendations were sent to Ron Sorensen by Kathy Seacrest on August 29th.

OTHER

None

MEETING ADJOURNED.

NEXT MEETING DATE: November 9, 2005

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