**Meeting Date & Start Time:** June 22, 2016 – 2:00 PM  
**End Time:** 3:30 PM  
**Location:** HP Conference Room, Metro Center Blvd, Warwick, RI  
**Call In Info:** 508-856-8222 Passcode 6642

### MEETING INFORMATION

**Meeting Purpose/Objective:**
- Advice to the Rhode Island Department of Behavioral Health, Development Disabilities and Hospitals regarding mental health and substance use needs, interventions and tools for support of completion of the CCBHC application for the two-year demonstration program due October 31, 2016.
- Attachments/Handouts: Meeting Agenda, Evidence Based Practice Summary Sheet, PowerPoint Presentation Update to CCBHC certification, adult breakout summary and child break out summary.

### ATTENDEES

<table>
<thead>
<tr>
<th>Facilitator</th>
<th>Scribe</th>
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<tbody>
<tr>
<td>Ann Detrick</td>
<td>Laurieann Grenier</td>
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<tr>
<td>Jason Lyon, OHHS</td>
<td>Michelle Brophy, BHDDH</td>
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<td>Rich Leclerc, Gateway</td>
<td>Richard Sabo, BHDDH</td>
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<td>Jamie Lehane, Newport MHC</td>
<td>Jim McNulty, MHCA Oasis RI</td>
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<td>Wendy Phillips, Family Service RI</td>
<td>Alicia Parker</td>
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<td>Dennis Roy, East Bay</td>
<td>Charles Higgins</td>
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<td>Lisa Tomasso, ProvCtri</td>
<td>Ira Hammer</td>
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<td>Lisa Conlan, PSN RI</td>
<td>Jeff Walter, TAC</td>
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<td>MaryAnn Ciano, Elder Affairs</td>
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<td>Dan McCarthy, MH Association RI</td>
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<td>Sarah Smith, DCYF</td>
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<td>Liz Koinbree, Kent Ctri</td>
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<td>Louis Cerbo, DOC</td>
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**Advisory Group Agenda - CCBHC -6-22-16.docx**  
**EBP Summary - Advisory Group - 6.22.16.docx**  
**Adult EBP breakout summary.docx**  
**Child EBP breakout summary.docx**  
**Advisory Group PP - June 22 2016 - Final.pdf**
Welcome & Introductions

Ann asked the members present if there were any comments to the July 8, 2016 minutes. There were none. The minutes from June 8, 2016 were accepted and approved by all present.

Ann then gave an update on the CCBHC Planning activities. She stated that the “Needs Assessment” survey has been sent out through ProvPlan. As of the time of this meeting there have been approximately 300 responses to date. Ann stated that if anyone at the meeting knows of or wants to send the survey out, it was encouraged that they forward this link. [https://www.surveymonkey.com/r/CCBHCNeedsAssessment](https://www.surveymonkey.com/r/CCBHCNeedsAssessment)

Ann thanked those who provided support in getting the focus groups set up. She highlighted that she has attended three focus groups already and that there are eight set up between this week and next week at the following locations:

<table>
<thead>
<tr>
<th>Location</th>
<th>Site Details</th>
<th>Date</th>
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<tbody>
<tr>
<td>Woonsocket HEZ SC meeting</td>
<td>Landmark Medical Center</td>
<td>6/22/16</td>
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<tr>
<td>Anchor Homecomings</td>
<td>Attended by Ann</td>
<td>6/23/16</td>
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<tr>
<td>The Providence Center</td>
<td>528 N. Main Street Oster Board Room</td>
<td>6/24/16</td>
</tr>
<tr>
<td>West Warwick HEZ SC meeting</td>
<td>1229 Main Street W. Warwick RI</td>
<td>6/27/16</td>
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<tr>
<td>Newport County Community MH Center</td>
<td>127 Johnny Cake Hill Middletown,</td>
<td>6/30/16</td>
</tr>
<tr>
<td>The Providence Center</td>
<td>528 N. Main Street Oster Board Room</td>
<td>7/1/2016</td>
</tr>
<tr>
<td>The Kent Center</td>
<td>Kent Center Board Room</td>
<td>7/1/2016</td>
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<tr>
<td>East Bay Community Action Program</td>
<td>Adams Farley Conference Room at EBCAP, 610 Wampanoag Trails, East Providence, RI.</td>
<td>7/5/2016</td>
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Ann stated that she is currently working with Rich Leclerc for Gateway’s focus group dates and locations. Rich asked if the input from the Health Equity Zones’ (HEZ) needs assessment as well as the needs assessment from the RI Coalition will be incorporated into the CCBHC needs assessment. Ann will follow up on the question asked.

Ann then asked Ira Hammer and Charles Higgins from Clinical Services Management (CSM) to discuss the base cost year report and upcoming events.

Ira stated he received base year reports and is providing assistance to the Centers. Specifically, CSM is helping the Centers understand outlier issues so that the final cost reports are consistent across the board. Charles summarized next steps which include a mock survey to run from 7/25 to 8/8. The survey’s purpose is to assess the Centers’ readiness for certification and what additional work needs to be done to prepare for final State certification in September.
Comments from the Centers followed: There is a lot of work to be done, in terms of updating MOIs/MOUs, work plans, etc. There was a concern expressed from one Center regarding the self-assessment on readiness. Where they scored themselves as needing improvement has been the focus of their activities. If there are other areas which they scored higher on than they really are, there will additional work not anticipated. Jeff Walter of the Technical Assistance Collaborative (TAC) was introduced. He pointed out that the mock survey will identify those areas and there will be no new areas or surprises. Joanne praised the Centers for their efforts, lots of work has been done and all are on track with meeting the milestones.

Ann presented an update to the last Advisory Meeting’s introduction to CCBHC certification via Power Point slides (see attached). She noted new areas of the presentation which include the four population tiers. Ann then highlighted the nine required services needed to become certified as a CCBHC. The nine services are:

- Crisis mental health services including 24-hour mobile crisis teams, crisis intervention and crisis stabilization
- Screening, assessment and diagnosis including risk management
- Consumer-centered treatment planning
- Outpatient mental health and substance use services
- Outpatient primary care screening and monitoring of key health indicators and health risk
- Targeted case management
- Psychiatric rehabilitation services
- Peer support, counseling services and family support services
- Intensive, community-based mental health care for members of the armed forces and veterans; care consistent with minimum clinical mental health VA guidelines

Service delivery values were summarized. These include: Consumer and Family Voice and Choice; Recovery Focus; Protection of Rights and Advocacy; Bridge Building with Communities; Single Point of Accountability for Care; Whole Person Approach: Health, Housing, Education, Jobs, Relationships, Spirituality, Arts, Recreation; and a Continual Emphasis on Consistency and Quality.

BHDDH is recommending the inclusion of core service activities within each tier. These include: In-depth Assessment and Personalized Treatment Planning; Integration of Treatment, Rehabilitation and Support; Team Work; Suicide Assessment and Interventions; Early Intervention and Relapse Prevention; Co-occurring Mental Health and Substance Use Services. She identified core approaches which included: Culturally Specific and Relevant Services; Trauma Informed Care; Motivational Interviewing; Cognitive Behavioral Therapy (CBT); Family Psychoeducation and Support; Peer Support; and Individualized Assistance with Symptoms and Use of Medications.

Next there was a break out session where members were asked to split into two groups: one representing adults and the other children. Within the groups, members discussed answers to these questions: “What core Evidence-Based Practices should be provided?” And “What other Evidence-Based Practices are missing?” They used an EBP summary list provided by BHDDH as a starting point Embedded in the top left section of the minutes (Meeting
Also embedded are the responses from the Adult and Child break-out sessions and the list of Evidence Based Practices as compiled by Jeff Walter from TAC.

<table>
<thead>
<tr>
<th>Jeff Walter, TAC</th>
<th>Jeff Walter from TAC stated that he is here to assist the Centers in demonstrating that they are competent in the areas required for certification.</th>
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| Additional Comments from Members | • Rich Leclerc asked if there is a format and what the process will be to get the request for expanded service. BHDDH staff indicated that they would follow up.  
• Jim McNulty expressed concern that there has been limited consumer community input; that the consumers have been out of the loop and he recommended that the consumer community review the Evidence Based Practices list before he comments. Ann recognized and appreciated his concern. She noted that three focus groups with consumers, including peer staff and peer supervisors have been held. Another focus group with consumers will be held June 23.  
• Efforts should be made to help elderly persons stay in the community and out of facilities especially persons with dementia.  
• Services should be provided to help reduce prison usage and put the savings back into the community for other needs.  
• Jason suggested that the Care Transformation Collaborative (CTC) be extended an invitation to participate in these discussions. Jason offered to contact CTC members. BHDDH staff will follow up. |
| Ann Detrick | • Members were encouraged to attend the next meeting of the group, and thanked them for their participation.  
• Next Meeting Date: July 6, 2016 at HP Conference Room, 301 Metro Center Blvd, Warrick RI from 2-3:30pm. |