

**Adult Behavioral Health Planning Council
Meeting Minutes**

Meeting Day/Date:	November 10, 2022 2:00 – 4:00 PM	
Location:	Teams	
Members Present:	Peter Tolisano, Jennifer Abbatemarco, Allison Fulton, Ellen Econs, Pamela Mautte, Maureen O’Neil-Davis, Bill Halsey, Laura Watson, Kathy Flaherty, Mui Mui Hin-McCormick	
Staff Present:	Kyle Barrette, Chrishaun Jackson, Elsa Ward, Dana Begin, Kim Karanda, Molly Machado	
AGENDA ITEM:		ACTION
FFY23 Block Grant updates: Kyle Barrette, Director of EQMI (DMHAS)	<p>DMHAS is currently reviewing the FY23 federal budget being considered in congress to identify the proposed increases to the block grants. The proposed budget includes an overall increase of \$150 million to the Mental Health Block Grant and an increase of \$50 million to the Substance Abuse Block Grant. However, state level allocations will not be calculated until the budget is passed. A vote on federal budget is scheduled for December 15th but there may be another continuing resolution at this time. <i>(Proposed Budget attached)</i></p> <p>The combined biennial block grant application is due October 1, 2023. This block grant application involves a full assessment of the behavioral health services system in CT, as well as identification of gaps and needs across the system. The Regional Behavioral Health Action Organizations are currently preparing regional priority reports that will help to identify gaps and needs across the service system. Once these reports are prepared, these will be presented to the Planning Council for their review/feedback.</p>	
<p>DMHAS Updates: Elsa Ward, Director of Community Recover Affairs (DMHAS)</p> <p>Dana Begin, Director of Evidence Based Practices (DMHAS)</p>	<p>Elsa Ward presented on two new projects that are currently being supported by the COVID-19 Supplemental Block Grant.</p> <ol style="list-style-type: none"> 1. New Life II, located in New Britain CT, is the first Black/BIPOC run faith-based recovery organization in the state. They were awarded funds to train community members and stakeholders in integrated healing. Through this initiative they will conduct 5 trainings (each with 15 people maximum) targeting the New Britain community. Interested residents of New Britain (or stakeholders working in New Britain) can reach out to Elsa for more information about the trainings. 2. Advocacy Unlimited (AU) is a peer run non-profit organization based in Connecticut that provides education, advocacy and support through non-clinical and holistic engagement. AU was awarded funds to conduct two training series. The trainings, 	

	<p>titled “Alternatives to Suicide” and “Breath, Body, and Meditation Management Program (BBM)” provide resources to individuals to help manage their emotions and symptoms.</p> <p>Dana Begin provided updates on the statewide crisis services system.</p> <ol style="list-style-type: none"> 1. DMHAS has received additional funding for statewide Mobile Crisis Teams to expand to 24/7 operations and DMHAS is working with providers to scale up their services to 24 hours a day. The teams are working hard to recruit new staff to scale up services and welcome referrals from community providers. 2. As of July 2022, 988 was officially launched in CT. This three digit crisis hotline will not replace any existing hotlines in CT and all calls will be routed to the same call center where they will be triaged and handed off to the most appropriate call specialists. The National Suicide Prevention Lifeline (1.800.273.TALK) will continue to be in existence. United Way, which operates the statewide call center, has reported a significant increase in the number of individuals calling 988 since the launch. <p>Additional funding from SAMHSA has been awarded to the state of Connecticut for the 988 grant. This additional funding will be used to help support the Chat and Text services for 988.</p> <ol style="list-style-type: none"> 3. There have been discussions with the local LMHA’s and CEO’s around the Crisis Continuum. There are three components to this crisis care system: someone to call, someone to respond, and somewhere to go. DMMHAS has been looking to expand our continuum of care services around “somewhere to go” for individuals in crisis. DMHAS is in discussion with our LMHA’s and CEO’s on how to expand these services and exploring the development of crisis stabilization units as an alternative to emergency departments. 	
<p>New Programs/Services/Initiatives:</p> <p>Kim Karanda, Director of Statewide Services (DMHAS)</p> <p>Mollie Machado, Behavioral Health Program Manager (DMHAS)</p>	<p>Kim Karanda and Mollie Machado presented on the Transit Homeless Outreach Program (Transit HOP). This program is a partnership between DMHAS and the Department of Transportation (DOT) which came about as a way to engage and support individuals experiencing homelessness and/or substance use or mental health disorders who regularly ride the Fastrack or spend time at one of its stations. Through this program, 2.5 FTE Outreach Workers will canvas, provide referrals, and provide education to people at various DOT and CT Transit locations around the state. Outreach has begun in Hartford and New Britain train stations and Fastrak locations. Outreach workers are providing educational information, harm reduction supplies, linkages to emergency shelters, and linkages to substance use and mental health treatment programs.</p>	<p>Kyle to send out PPT presentation</p>

<p>Membership discussion: Kyle Barrette, Director of EQMI (DMHAS)</p>	<p>Kyle Barrette brought up discussion about how to expand membership of the planning council. Kyle shared draft informational document that provide an overview of the planning council and answers to common questions. This document is intended to be disseminated to individuals who may be interested in joining the planning council.</p> <p>Earlier this year the Planning Council narrowed its focus to mental health to reduce overlap with other state advisory/advocacy bodies working on substance use. However, this has limited the scope of the council and created some challenges in recruiting members who are interested in advocacy related to behavioral health more broadly or substance use specifically. As such, DMHAS proposed to expand the planning council back to a behavioral health focus (Adult Behavioral Health Planning Council).</p>	<p>Members to review draft document and provide feedback by 11/18/2022. Kyle to finalize document and disseminate to council members, for dissemination to stakeholders and interested parties.</p> <p>Expand focus of planning council to behavioral health and update name of council to Adult Behavioral Health Planning Council.</p>
<p>Planning for 2023: Open Discussion</p>	<p>Kyle Barrette opened discussion on priorities and potential topics for 2023 Planning Council meetings.</p> <ul style="list-style-type: none"> ▪ Expand membership of Planning Council and identify new Planning Council Chair ▪ Review results of regional prioritization reports completed by the RBHAOs ▪ Identify/review block grant priorities/goals for biennial application 	<p>DMHAS staff and Planning Council members will outreach to individuals with potential interest in joining the council.</p> <p>Planning council members to submit ideas for meeting/presentation topics to Kyle Barrette</p>
<p>Next Meeting:</p>	<p>March 9th, 2023 2:00-4:00pm</p>	<p>Kyle to send out calendar invites for 2023 Planning Council meetings</p>