

GOVERNOR'S TRANSFORMATION ADVISORY BOARD

**State Capitol
Governor's Large Conference Room
June 14, 2006**

DRAFT Minutes

Members Present:

Carolyn Archer
Sara Barry
Dave Been
Susan Boehrer
Gary Bolin
Don Carter
Terry Cline, Ph.D.
Mike Fogarty
Linda Glover
Misty Hamilton
Howard Hendrick
Justin Jones- Vice Chair
Kermit McMurray, Ph.D.
Teresa Peden
Gail Richards
Senator Nancy Riley
Kaye Rote
Dennis Shockley
Jack Turner

Others Present:

Allen Kaufman- SAMHSA
Susan Stromberg- SAMHSA
Tammy Hall- DRS
Gail Anderson- DRS
Debra Anderson- OSDH
Nico Gomez- OHCA
Debbie Spaeth- OHCA
Carol McFarland-OHCA
Anne Roberts-OICA

John Hornik- AHP
Brittany Couch-ODMHSAS
Marva Williamson- ODMHSAS
Windy Normandin- ODMHSAS
Terry Smith- ODMHSAS
John Hudgens- ODMHSAS
Angie Patterson-ODMHSAS
Rand Baker- ODMHSAS

I. DETERMINATION OF QUORUM, CALL TO ORDER

The Vice Chair, Mr. Justin Jones called the meeting to order. Mr. Jones determined open meetings requirements had been met, and a quorum was present.

II. REVIEW OF MINUTES OF PREVIOUS MEETING

Mr. Jones opened the floor to discussion and comments concerning the minutes for the previous Board meeting held on March 24, 2006.

No Comments or Discussion.

Mr. Jones moved to approve the previous Board meeting minutes. Mr. Don Carter seconded the motion.

The following voting action was recorded: *All in favor; none opposed; no abstentions; Board Minutes approved.*

III. INTRODUCTION AND RECOGNITION OF FEDERAL PARTNERS

At this time Mr. Jones yielded the floor to Mr. John Hudgens for the introduction and recognition of our federal partners. Before introducing and recognizing Oklahoma's federal partners, Mr. Hudgens noted that much of what we do in Oklahoma is a direct result of the partnerships and the culture we have in Oklahoma of working together and making sure that these partnerships stay the course. Mr. Hudgens stated that we have enjoyed great fruits from the efforts related to those partnerships. Mr. Hudgens notes that SAMHSA is our federal partner and is the federal agency responsible for the State Transformation Incentive Grant.

Mr. Hudgens then introduced Allen Kaufman. Mr. Kaufman serves as the Technical Assistance Broker for the state of Oklahoma for the State Transformation Incentive Grant. He will assist the state acquiring any technical assistance necessary as it relates to the transformation initiatives.

Mr. Hudgens introduced Susan Stromberg. Ms. Stromberg is an employee of SAMHSA and serves as our Project Officer for the Systems of Care grant and the Connector for this grant initiative. Mr. Hudgens asked Ms. Stromberg if she would like to make comments concerning her previous visits and dealings with the state of Oklahoma.

Ms Stromberg noted that, when the State Transformation Incentive Grants were being awarded, and she heard that Oklahoma had been awarded one, SAMHSA began to look at how they would best provide support to the states implementing the transformation grants. She was delighted to be assigned as a Connector for Oklahoma, since she is currently working with Oklahoma on the Systems of Care project.

Ms. Stromberg noted that this is one of the ways that SAMHSA is attempting to meet the goals identified in the President's New Freedom Commission on Mental Health. Ms. Stromberg continued by stating that she is excited and interested in seeing where this transformation grant will take the state of Oklahoma.

Ms. Stromberg then yielded the floor to Mr. Jones.

IV. NEED ASSESSMENT INTERIM REPORT

A. Report on Initial Workgroup Meeting

At this time Mr. Jones yielded the floor to Dr. Kermit McMurry for a report on the initial meeting of the Needs Assessment workgroup. Dr. McMurry stated that the workgroup met on the afternoon of May 17, 2006.

Enclosed in the materials provided to the Board members is a summary of the discussion that took place during the workgroup meeting. Dr. McMurry noted that much of the material presented to the workgroup during their meeting is going to be presented to the Board today.

Dr. McMurry suggested the Board do three things concerning the Needs Assessment workgroup. First, Dr. McMurray would like the Board to accept the report from the workgroup, enclosed in the materials provided to the Board members. Second, Dr. McMurry would like the Board to empower the Needs Assessment workgroup to serve as a committee of the whole on behalf of the Board. Dr. McMurry noted that, given the requirements and the nature of the Needs Assessment, a workgroup such as the one held on May 17th would be conducive to developing a final report to the Board. Third, Dr. McMurray suggested the Board establish additional workgroups to guide the development of the Comprehensive Plan. In particular, Dr. McMurray would like to propose that specific workgroups be formed to provide guidance and direction to the staff developing the draft plan.

At this time Dr. McMurry concluded his report and yielded the remainder of his time to any Board member for comments.

Mr. Jones opened the floor to any comments or discussion concerning the workgroup's report. *No comments or discussion.*

At this time Mr. Jones yielded the floor to Mr. Terry Smith and Dr. John Hornik for the Needs Assessment presentation.

B. Needs Assessment Presentation

Mr. Smith reviewed the current status of the Needs Assessment through a PowerPoint presentation. Before beginning the presentation, Mr. Smith noted this is a work in progress. He also wanted to stress the breadth and depth of the problems facing the mental health and substance abuse system.

Discussion included: Ms. Sara Berry questioned if the Needs Assessment section titled "Prevention" would address the education of people on the means of how to overcome and recover. Carolyn Archer brought up the need to address a stigma campaign as part of the Inventory report possible under the Education heading.

At this time Mr. Smith yielded the floor to Dr. Hornik for the continuation of the presentation.

Discussion included: Mr. Howard Hendrick had a question concerning the prevalence data presented concerning adults receiving mental health services. Mr. Hendrick noted that from the data given you could not determine what percentage of the population was suffering from severe and chronic mental illness or those suffering from minor mental illnesses. Since this is an issue that directly affects cost of service, Mr. Hendrick then asked Dr. Hornik if he had any idea of the percentage of the population receiving services that are suffering from severe mental illness or minor mental illness. Dr. Hornik stated that at this current time data was not that specific. Dr. Hornik noted that the agencies tend to serve the population with the highest need. Though they may be the smallest percentage as far as size goes, they consume the greatest amount of resources. Dr. Hornik noted that eventually data will contain this level detail. Mr. Hendrick stated that it appears that there has been no assessment to know what the intensity level is on the stratification of unmet needs. Dr. Hornik stated that we have not as a part of this needs assessment tried to stratify the population and say "these people need five outpatient services and then they'll be fine, and these people need something more than that".

Ms. Carolyn Archer mentioned that research has shown when consumers have more upfront basic services and get into a mode of recovery sooner; it saves money in the long run. Ms Archer noted that if you get consumers assessed and treatment provided early on, it may cost a little more up front, but in the long run it will save huge amounts of money because you are not going to have these people in hospitals, in prison, or other types of treatment facilities. Dr. Hornik stated that there definitely is some research that points in that direction, but there has not been extensive research to address that issue.

Mr. Jack Turner questioned if there had been much thought given to the idea that, in this process of early identification through the public schools system and the juvenile justice system, to identify these people early on and reduce the effects later, on the individual and society as a whole. Dr. Hornik stated that this is one of

the things that have been brought up during the data gathering and this is something that the transformation effort as a whole should address.

Mr. Dennis Shockley asked if there was a state, Dr. Hornik was aware of, that implemented early intervention strategies in the public schools system state wide. Ms. Archer noted that California has such a program that tests every sixth grader in order to identify such needs. Ms. Sara Berry noted that such early identification actually needs to take place around five or six years of age, rather than as late as the sixth grade.

Ms. Berry also noted that we tend to look at input versus output when it comes to service delivery.

Mr. Mike Fogarty asked if there where any faith-based organizations providing mental health and substance abuse services. Dr. Hornik noted that many individuals who are in institutions or receiving services have close ties to their faith and it is extremely important to them. Dr. Hornik noted that even if a faith-based organization is not providing services, we should seek to connect the individual needing services to a community of their own faith, along with traditional service providers. Ms. Teresa Peden noted that this falls in line with cultural competency. Ms. Peden also noted that we are not tapping into the faith-based community enough and that she is moving into a faith-based community organization herself and plans on working to see how the connection can be made across the state. Mr. Hudgens noted that there are resource models throughout the state that we can build upon but that there is much more we can do to include faith-based organizations. Mr. Hudgens noted that the Phoenix House's program is very active in the prison's re-entry system.

At this time Dr. Hornik yielded the floor to Mr. Hudgens for closing comments concerning the presentation.

At the conclusion of the presentation, Mr. Hudgens drew the Board members' attention to the workgroup sign-up sheet enclosed in their materials and asked that they keep this information in mind while Board members discuss potential workgroups during this meeting.

At this time Mr. Hudgens yielded the floor to Mr. Jones.

Mr. Jones opened the floor to any further discussion or comments concerning the Needs Assessment presentation. *No discussion or comments.*

At this time Mr. Jones yielded the floor to Ms. Archer to present possible actions for the Board to take. Ms. Archer stated that the first action the Board needed to take was to accept the report as it was presented by Mr. Smith, Dr. Hornik, and Mr. Hudgens.

Ms. Berry asked if the comments and suggestions noted during the presentation be attended to and noted in the minutes and further during the Needs Assessment. Mr. Hudgens answered that the comments and suggestions will be incorporated into the meeting minutes and then possibly into the ongoing progress of the Needs Assessment.

Ms. Archer noted that the proposed formation of workgroups include members of the Board in order to utilize the members' expertise.

Dr. Cline moved to accept the draft report with the understanding that it will evolve and change as new information becomes available. Ms. Peden seconded the motion.

The following voting action is recorded: *All in favor; none opposed; no abstentions; The report is accepted.*

C. Additional Workgroup Recommendations

At this time Mr. Jones yielded the floor to Ms. Archer to address additional workgroup recommendations and possible actions. Ms. Archer suggested that the Board create workgroups on each topic. Ms. Archer suggested having four or five groups, noting that some topics can be combined into a workgroup. Ms. Archer also suggested that each committee write its own corresponding section to the draft, allow the entire Board to read it, and make recommendations and editing before it goes into the final report. A full draft of the report should be sent to the Advisory Board via email for further recommendations and editing before it is sent to the Federal Government.

At this point Ms. Archer opened the floor to discussion concerning the aforementioned recommendations.

Discussion included: Ms. Debbie Spaeth asked if it is possible for some of these workgroups, if they relate, to roll into existing workgroups that have been formed by other collaboratives, to avoid duplicating efforts. Mr. Hudgens noted that some thought has been given to that. Ms. Archer noted that the Consumer Council and the Mental Health Court have a lot of data that the workgroups would find useful. Ms. Barry questioned if a group would be formed around co-occurring disorders, since it was not listed on the sheet provided to the members. Mr. Hudgens noted that there were extra spaces left for the Board members to suggest various workgroups.

Dr. Cline followed up on Ms. Spaeth's comment and agreed that coordination is very important to ensure that there is little, if any, duplication but he cautioned that at this juncture the various collaboratives have very different goals for their workgroups and he would want to make sure that this representation does not impede either workgroups' goals. The purpose for the group is the Comprehensive State Plan and putting it all together. Many of the workgroups for the Children's

Partnership are many steps ahead of that and are looking at implementation and operationalizing which are very concrete things. Dr. Cline wanted to make sure that we don't slow down their process.

At this point Ms. Archer moved that the Board accept the plan of action as previously stated. Mr. Don Carter seconded the motion.

The following voting action is recorded: *All in favor; none opposed; no abstentions; The plan of action is accepted.*

V. NEW BUSINESS

During this time Mr. Jones opened the floor to any new business or discussion of new business.

Dr. Cline noted that it would be helpful to have a timeline concerning the workgroups as it relates to information dissemination, expectations, and involvement in activities and have that timeline sent to the Board members via hard copy or email. Dr. Cline noted, since the final report will be presented to the Board in September, if there are changes that need to be made, there needs to be a process in place to do that.

Teresa Peden informed Mr. Smith that there is a coalition of about 14 members of Mental Health and Substance abuse advocacy agencies and they would be an excellent resource to contact in order to speak with a large number of people at once. Mr. Smith responded that he would get with Ms. Peden after the meeting to get the contact information.

At this time Mr. Jones opened the floor to any discussion of new business not previously noted. *No further discussion.*

VIII. ADJOURNMENT

Mr. Jones motioned to adjourn the meeting. Mr. Carter seconded the motion.

The following voting action is recorded: *All in favor; none opposed; no abstentions; Meeting adjourned.*

Governor Bill Anoatubby

Carolyn Archer

Sara Barry

Dave Been

Susan Boehrer

Gary Bolin

Steve Buck

Martha Burger

Don Carter

Dr. Terry Cline

Dr. Michael Crutcher

Michael Fogarty

Sandy Garrett

Linda Glover

Misty Hamilton

Howard Hendrick

Janice Hendryx

Justin Jones

Dr. Kermit McMurray

Linda Parker

Teresa Peden

Gail Richards

Senator Nancy Riley

Pier Robinson

Kaye Rote

Dennis Shockley

Representative Kris Steele

Jack Turner

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