



**Behavioral Health Clinical Advisory Committee
(BHASC) Agenda
June 10, 2020
8:00- 9:30 AM**

Chair: Lucy Zammarelli

§	Agenda Topic
1	<p>Welcome and Introductions – Please share your name and organization and one thing you are looking forward to doing this summer!</p> <p>Britni D’Eliso, PacificSource Community Solutions Carlyn Wierda, Looking Glass Cynthia Fisher, Lane County LaneCare David Dodson, Lane County Choice Program John Jones, Eugene Vet Center Laurel Anderson, Cascade Behavioral Health Linda Keenan, Trillium Community Health Plan Kay McDonald, Lane County Older Adult BH Specialist Rustie Anderson, Center for Family Development Shawn Murphy, Laurel Hill Center Tara McCullers, Lane County TBH Whitney Walker, Lane County Veteran Services Jeanne Savage, Trillium Community Health Plan Hayley Van Horn, Lane County TBH Rhonda Busek, Lane Community Health Council Virginia Hassel, Lane County TBH Roger Brubaker, Lane County Public Health</p>
2	<p>Discussion of Minutes (attached to invite)</p> <p>The group approved the minutes by consensus. No one was opposed or had changes to the minutes. The May minutes will be posted online at LaneCounty.org/BHASC</p>
3	<p>Clinical Advisory Panel Updates from CCOs</p> <p><u>Trillium Clinical Advisory Panel (CAP) Report</u> TCHP Cap met last month and was focused on COVID-19. Lucy reported out the work that the BHASC is doing. Opioid issues will be discussed at the next CAP.</p> <p><u>PacificSource Clinical Advisory Panel (CAP) Report</u> PSCS had their first CAP meeting this month. Pauline Martin from Lane County BH is one of the chairs. The next meeting will be on the 17th with strategic planning. Lucy asked for Britni/Rhonda to add a standing BHASC update item to the PSCS CAP agenda. Britni agreed to hold this work and provide BHASC updates at the CAP.</p>
4	<p>BHASC Monthly Champions-recognizing some of the outstanding work accomplished this month!</p> <p>Lucy introduced a new agenda item that will be added to celebrate those members of the BHASC that have done great work. This is a chance to display gratitude on a virtual platform – for now.</p> <p>Lucy gave a shout out to Shawn Murphy for her work in stepping up and re-energizing the SPMI workgroup of the BHASC.</p> <p>Leilani recognized Britni D’Eliso and Anne Harris for their work in the ECMH as</p>

co-facilitators.
Lucy recognized **Terra Ralph** and **Rustie Anderson** for their contributions to the CRW task teams.
Laurel gave a shout out to **Chris Eilers** for sending out information/resources to the older adult stakeholders.
Come to the next meeting with your shout outs!

Discussion of Workgroup Reports

a) Early Childhood Mental Health Workgroup (ECMH)

5 The group met yesterday (6/09) and presented an action plan based on what the OHA is asking providers to accomplish. Training and integration into pre-existing service settings are focuses. A mapping session is one of the first steps on the action plan to occur in July. Call to providers (OHP and Private) who are stakeholders of the early childhood population to join the July meeting to provide input on the mapping process which will specifically look at PCIT, CPP, and other evidence-based practices being offered to this community. A gaps analysis will be done to inform training needs and next steps for integration and program development.

b) Substance Use Disorders Workgroup (SUDS)

Britni was at this meeting and confirmed that that group met and discussed COVID-19 impacts and changes to agency procedures.

c) Adult/Severe Persistent Mental Illness/Crisis (Adult SPMI)

This group met and talked about the impacts of COVID-19 and the social distancing orders – contributing significantly to people presenting at the emergency department due to being at home for such a long time. Looking at what adult wraparound services would be needed to support and sustain this population. Also discussed potential impacts to budget cuts as well as the State Hospital access issues – resources discussed included crisis beds for safety when the state hospital does not have beds. Looking at collaborating and coordinating with agencies that provide intensive services as systems are disjointed for many reasons at the moment. The group is also looking at the unhoused population which is struggling as many/all of their normal supports have been taken away and have very limited/no access to telehealth resources.

CHOICE: David was able to speak to the limits on residential treatment for those with SPMI as the Coordinator for the CHOICE Program. For those in residential, group, or foster homes additional supports are being put together for the providers and clients. The OHA is slowing down the process of ending residency/evictions for clients. Creative solutions are in the works

Suicide Prevention: Roger spoke on vital statistics reports on suicide/self-harm, overdoses or drug toxicity. From all data reporting levels it looks like Lane County has not seen any significant increases or decreases. A decrease has been seen for those who have had a suicide attempt resulting in hospitalization or presenting with drug overdoses at the ED.

d) Older Adult Workgroup (OAW)

Offered first virtual meeting on 5/22. Prior to the meeting a link was sent out to a video regarding a meditative approach and grounding techniques to treating depression as well as a link to a podcast for developing meditation to treat stressors that come with this time. The group was given updates from the CRW task team and suicide prevention. Monday 6/15 is Elder Abuse Awareness Day and the OABHI are hosting training. Flyer is attached [here](#). Registration link [here](#).

e) Transition Age Youth Workgroup (TAY)

The group continues to meet and is sharing resources via email. Training has been placed on hold for this year due to the current environment.

f) Community Resilience Workgroup (CRW)

Lucy shared the information grid that all of the task teams are working on filling out with information and resources which will be translated into a virtual toolkit (print will be available in some rural areas). The Family, Children and Youth group is working on education and the impacts that will come with the changes in this sector – especially for those with

	<p>developmental disabilities or low-income. Some task teams (older adult) are completing their work. The unhoused task team is looking at how to support folks who were utilizing the Lane County shelters that are now closed (camping has also been removed) eventually the River Ave facility being used for COVID-19 cases will eventually be a resource center. The racial and ethnic minority group is looking at language access, Black Lives Matter, and recognizing that ethnic minorities are lacking access to care and resources.</p>
6	<p>Healthcare Integration Collaborative</p> <p>Working through an action plan for each focus (THW; Integration). Currently narrowing focus on THW towards integration and connection between THWs. For integration the group is working on outside meeting “chats” with the three disciplines (PCPs/Hospitals, BH, and SUDS) to gain better understanding of systems and create some bridges for communication. If you are interested in this work please visit LaneCounty.org/HIC to find the current chair’s contact info.</p>
7	<p>Lane County Pain Guidance & Safety Alliance</p> <p>Discussed micro-dosing for non-withdrawal induction to medication assisted therapy which uses very small doses of buprenorphine/ Suboxone while the patient is still taking opiates/heroin to engage in treatment without the undesirable effects of waiting to be in withdrawal. Many of the treatment providers are doing well with the telehealth transition and many methadone patients were able to switch over to “take-home” medication instead of coming in every day. The group also looked at the PRAPARE (click) demographic data tool which generated a conversation about the State of Oregon’s MOTS system and how this group can get this data that all state-funded BH and SUDS providers are required to input back from the State for a needs analysis.</p>
8	<p>System of Care Update</p> <p>The SOC serves children age 0 to approximately mid-20’s (a youth must enter the wraparound system before they turn 18 and can continue until completion of the program). One goal of this group is to bring forward barriers within the child system and work through the barrier to find solutions that are then passed up the committee governance structure to eventually be submitted to that state for next steps and resolution. Some current barriers include: planned respite care for foster parents/parents with I/DD or challenged children; lack of peer support workers available for persons with I/DD or other mental health diagnosis; and retaining and utilizing skill builders. One of the SOC groups is completing a mapping on systems and service process – looking at how and when a child enters the system and how long it takes for them to receive services/requirements for each service/barriers to accessing services (primarily for provider use).</p>
9	<p>Other</p> <p>What are some ideas of things the BHASC/BH system can do to help with racial equity/awareness during this time?</p> <p>OAW: looking at demographic information and reaching out to people of color to join the group.</p> <p>CFD: supporting clinicians to create safe spaces to have discussions and to voice any concerns/ supportive needs that clinicians need to support their clients of color.</p> <p>ECMH: intentionally reaching out to people of color to participate in the mapping session. A new free early learning program with LaneKids was shared available for Black children (0-5)</p>

the link is [here](#).

CBHC (consortium): met with local NAACP members to share work that the NAACP is doing – a document about healthcare and behavioral health regarding needs which will be sent to the CBHC for review.

This topic will be put on the next agenda for continued discussion.

Lucy Zammarelli, Chair, LaneCare, Lucy.zammarelli@lanecountyor.gov

Leilani Brewer, LaneCare, Leilani.brewer@lanecountyor.gov

Our next meeting will be virtual on July 8, 2020

*Going forward if you would like to promote your agencies events or trainings please bring information to scheduled meetings as Trillium administrative staff will no longer be able to accommodate listserv email distributions.

**In order to assist with meeting compilation, this meeting will be recorded. Once the minutes have been reviewed by chairs or approved by committee, the recording will be deleted.

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