

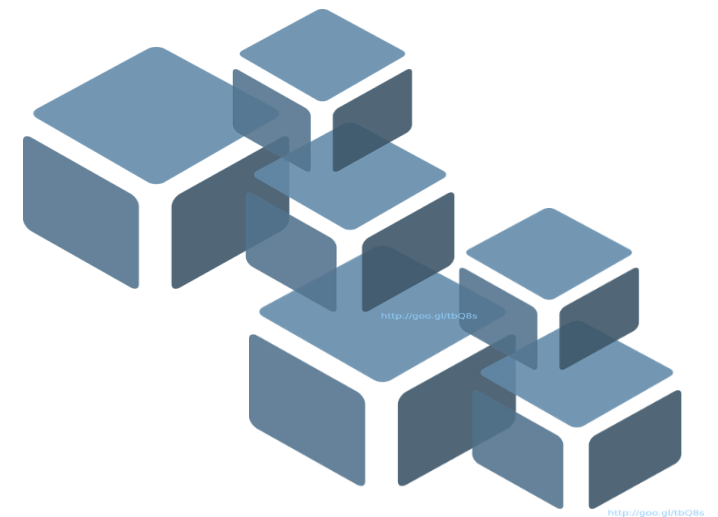
PLANNING AND ADVISORY COUNCILS

NCMHA Learning Collaborative

*How SAMHSA Block Grants Can Support
Older Behavioral Health*

Session 1

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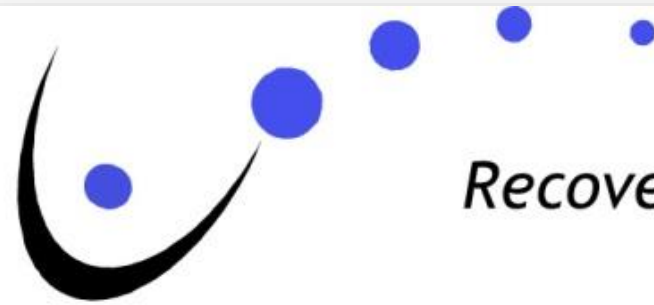
Vice Chair

**National Coalition on
Mental Health and Aging**

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Chair

**Oklahoma Behavioral
Health Forum on Aging**



Recovery has no age limit.

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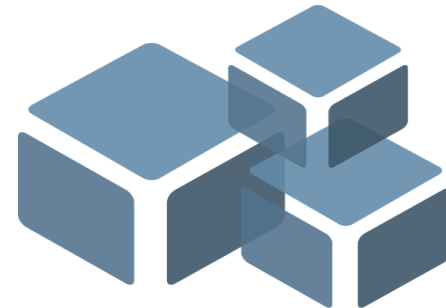


NCMHA

National Coalition on Mental Health & Aging

Planning Councils Defined

- Required under federal law as a requirement of receiving Community Mental Health Services Block Grant (MHBG) funding from SAMHSA
- Many states have formed integrated Councils, to include SAMHSA's Substance Use Prevention, Treatment, and Recovery Services Block Grant (SUPTRS BG) funding



PURPOSE

Under federal law, the planning councils have three primary duties

- To **review** the state's MHBG application and report and **make recommendations** to the agency receiving the grant
 - may be a mental health agency or behavioral health agency also having responsibility for substance use disorder (SUD) prevention and treatment.
- To serve as **advocates** for people with mental illness, including adults with serious mental illness (SMI) and children and adolescents with serious emotional disturbance (SED)
- To **monitor, review, and evaluate** the adequacy of mental health services in the state

COUNCIL MEMBERSHIP REQUIREMENTS

- At least 50% - individuals who are not representatives of State agencies or services providers (persons in recovery, and family members)
- Must reflect balance of representatives of state agencies, service providers and other participants such as people with lived experience
- Ratio of parents of children with a serious emotional disturbance and/or addiction to other members of the Council - sufficient to provide adequate representation of such children in Council deliberations
- Term of membership – defined in Council By-Laws

Membership Appointed By

- Authorizing statute requires states to “establish and maintain” a planning council, suggesting that planning council not entirely independent of state government
- **States take a variety of approaches to appointing members to the council, including:**
 - All members are appointed by the governor
 - All members are appointed by the director of the behavioral health agency
 - All members are appointed by the secretary of the agency within which the behavioral health agency is situated
 - Representatives of state agencies appointed by a director or secretary of the department in which they work; the remainder appointed by the governor
 - Agency heads are identified in state law as planning council members, but they may designate an alternate; the remainder of the council members are appointed by the governor
 - Voting members are appointed by the governor, but planning council chair may appoint others to serve on subcommittees

MEMBERSHIP

- Council composed of State residents, including representatives of—
- the principal State agencies with respect to
 - mental health
 - education
 - vocational rehabilitation
 - criminal justice
 - housing
 - social services
- public and private entities concerned with the need, planning, operation, funding, and use of mental health services and related support services;
- adults with serious mental illnesses who are receiving (or have received) mental health services; and
- the families of such adults or families of children with emotional disturbance

Bylaws

- Some states - council members elect all officers, including the chair
- Other states - governor, health secretary, or behavioral health agency director appoints chair; other officers such as the vice-chair and secretary elected by council members
- States differ on level of independence the planning council has in adopting bylaws and setting meeting schedules
- Some states - bylaws and meeting schedules established by law; other states - planning council empowered to adopt its own bylaws, set its own meeting schedule
- Most, if not all, states have open meeting laws requiring meeting notices be posted, sessions be open to the public, and minutes and correspondence be made available to the public

Council Members

- Diverse membership – improves ability to evaluate adequacy of mental health services across the state, particularly for **underserved populations**
- Membership recommendations for consideration
 - Representation from all geographic regions; urban, suburban, and rural communities
 - Diversity of race, ethnicity, and primary language
 - Tribal communities
 - Youth representative
 - **Older adult representative**
 - LGBTQI+ community, including youth

STATUTORY CRITERION FOR MHBG

- **Criterion 1:** Comprehensive Community-Based Mental Health Service Systems
- **Criterion 2:** Mental Health System Data Epidemiology
- **Criterion 3:** Children's Services

Criterion 4: Targeted Services to Rural and Homeless Populations and to Older Adults

Provides outreach to and services for individuals who experience homelessness; community-based services to individuals in rural areas; and **community-based services to older adults**

- **Criterion 5:** Management Systems



DUTIES



to **review plans** provided to the Council by the State and to submit to the State any **recommendations** of the Council for modifications to the plans



to serve as an **advocate** for adults with a serious mental illness, children with a severe emotional disturbance, and other individuals with mental illnesses or emotional problems



to **monitor, review, and evaluate**, not less than once each year, the **allocation and adequacy of mental health services** within the State

<h2 style="text-align: center;">PLANNING</h2>	<h2 style="text-align: center;">MONITOR- REVIEW- EVALUATE</h2>	<h2 style="text-align: center;">ADVOCATE</h2>
<ul style="list-style-type: none"> <li data-bbox="81 277 784 705">❑ Mental Health and Substance Abuse Services Block Grants are federal sources of funding for mental health, substance use disorder and prevention services <li data-bbox="81 815 721 986">❑ MHBG Plan reflects proposed areas of focus for these funds <li data-bbox="81 1068 746 1308">❑ Plans provided for review and Council submits any recommendations for modifications to the plan 	<ul style="list-style-type: none"> <li data-bbox="828 277 1559 1022">❑ Regular review and evaluation each year of the allocation and adequacy of mental health, substance abuse and prevention services within the State <ul style="list-style-type: none"> <li data-bbox="922 658 1498 829">▪ Annual review and evaluation of Block Grant Plan outcomes <li data-bbox="922 848 1541 1022">▪ Biannual review and evaluation of the State Block Grant application <li data-bbox="828 1100 1531 1400">❑ In conducting its review, the planning council should focus on whether the state plan fulfills the five statutory criteria 	<ul style="list-style-type: none"> <li data-bbox="1620 277 2313 951">❑ The Council serves as an advocate in promoting quality of life for all adults with serious mental illness and/or addictions, children with a severe emotional disturbance and their families, and other individuals with mental illness, emotional issues and/or addictions <li data-bbox="1620 1036 2328 1276">❑ The Council also serves as an advocate for promotion of prevention of these disorders

EXCHANGE INFORMATION



Provides opportunity to exchange information and develop, evaluate and communicate ideas about mental health, substance abuse and prevention planning and services

- Can include presentations on key topics
- Public comment during meetings
- Sharing information via e-mail in between meetings
- Agenda items can be requested by Council members



Process serves to review and evaluate the adequacy of mental health, substance abuse and prevention services within the State

Criterion 4: Targeted Services to Rural and Homeless Populations and to Older Adults

Provides outreach to and services for individuals who experience homelessness; community-based services to individuals in rural areas; and community-based services to older adults



ADVOCACY OPPORTUNITIES

- **Attend meetings**
- **Review qualifications - If you qualify, request consideration as a Council member**
- **Develop contacts – Council Chair - officers, Agency Liaison**
- **Invite others in your network**
- **Every meeting has “public comment” – advocate for inclusion of older adults as an underserved population**

- **When info/programs/strategies are presented, inquire if they include older adults**
- **Develop your ask/recommendation - what can be accomplished in your state, available/needed resources, strategies**
- **Additional advocacy**
 - **MHBG is posted for public comment – involve your network in sending comments/recommendations about the behavioral health disparities for older people**



QuestionTime





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<http://goo.gl/tbQ8s>

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