



Behavioral Health Partnership Oversight Council

Child/Adolescent Quality, Access & Policy Committee

Legislative Office Building Room 3000, Hartford, CT 06106
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www.cga.ct.gov/ph/BHPOC

Co-Chairs: Steve Girelli & Jeff Vanderploeg

Meeting Summary
Wednesday, October 19, 2016
2:00 – 4:00 p.m.
Beacon Health Options
Rocky Hill, CT

Next Meeting: November 16, 2016 @ 2:00 PM
at Beacon Health Options, Rocky Hill

Attendees: *Jeff Vanderploeg (Co-Chair), Dr. Karen Andersson (DCF), Dr. Lois Berkowitz (DCF), Sean Cronin, Sarah Crowell, Taylor Ford, Beth Garrigan (Beacon), Susan Graham, Adora Harizaj, Susan Kelly, Ann Phelan (Beacon), Donyale Pina, Heidi Pugliese (Beacon), Maureen Reault (DSS), Kathy Schiessl, Stephney Springer, Janessa Stawitz, and Berseford Wilson*

Introductions:

Co-Chair Jeff Vanderploeg convened the meeting at 2:06 PM and introductions were made.

Updates on Collaboration with Consumer and family Advisory Council:

Karen Andersson (DCF) et. al.

- In October, the Beacon Consumer and Family Advisory Council met together with members of the BHP Oversight Council. The purpose was to “meet and greet,” share information about various committees working on behavioral health, and identify opportunities to strengthen family and consumer participation in the Oversight Council and its subcommittees
- Members in attendance at this meeting noted that it was successful event and a good first step
- The meeting included the story of a consumer/family member who shared their insights and their experiences with the system. It was noted that family members may wish to attend these meetings to advocate for their families and to help other families in similar situations.
- Some members noted that in addition to fragmentation in the behavioral health system, there is also fragmentation in the consumer and family advisory movement that could also be addressed
- Members from Beacon, BHP-OC, and Consumer and Family Advisory Council will work together to synthesize the ideas and information and develop recommendations. Possible next steps:

- For the BHP-OC to have a standing agenda item for updates on the Consumer and Advisory Council, and vice versa, in order to promote cross-communication
- BHP Executive Committee meets on Nov. 2 to discuss consumer and family participation
- Use PowerPoint slides from this initial meeting to create a pamphlet to educate consumers, state agencies, legislators, providers, and others about the system
- Continue to engage the State Department of Education and other school representatives and advocates in behavioral health system development
- Child QAP will add a standing update to our agenda on proceedings of the Consumer and Family Advisory Council

Presentation of EMPS Service Delivery: An Examination on Utilization by Race, Ethnicity, and Gender: Adora Harizaj (CHDI)



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- There is increasing emphasis in Affordable Care Act and behavioral health system development to address racial and ethnic disparities in health/mental health care access, quality outcomes
- There is a need to look at services data by race, ethnicity, age, gender and other factors
- EMPS is a brief, crisis stabilization service, not an intensive treatment-oriented service. EMPS often serves as a first point of entry into the behavioral health system, and as an alternative to the use of emergency departments and arrest. EMPS use has increased over the last few years
- Compared to the overall CT youth population, EMPS serves proportionately more African-American and Hispanic youth, proportionately fewer White youth.
- There is a decline in the use of EMPS among adolescent boys of color. Members questioned whether this is due to their being “tracked” into the juvenile justice system at this point
- A small percentage of youth use EMPS four or more times in year; those youth who do are more likely to be White. A question was raised about whether school referrals are contributing to using EMPS four or more times in a year. That has not been done to date, but is possible to examine
- Presenting problems and referral source to EMPS appear to differ according to race/ethnicity. A member asked whether there may be bias in whether to call EMPS, or what the presenting problem is, that is driven by race, ethnicity, age, or gender. The presenter noted that is not possible to determine from these data.
- Members noted importance of looking at data for all behavioral health services in a disaggregated manner to examine access, quality, and outcomes for sub-populations
- Members noted importance of sharing this data with CONNECT Data Integration team, State Department of Education, and Coordination of Care subcommittee of the BHP-OC
- Members encouraged continued family input into interpretation and implications of this data

New Business and Announcements:

Co-chair Jeff Vanderploeg asked for any question, comments, new business, or announcements. Hearing none, he adjourned the meeting at 4:03 PM.

**Next Meeting: Wednesday, November 16, 2016 @ 2:00 PM, 3rd Floor,
Hartford Conference Room, Beacon Health Options in Rocky Hill, CT**