**Behavioral Health Advisory Board**

**Date:** Friday, August 19th, 2022

**Time:** 12:00pm – 1:15pm

**Location:**

Virtual – Zoom Meeting

https://us06web.zoom.us/j/89661572865?pwd=SlN1WUFTYmNEeUxzdGJLWlFqMHRKUT09

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| Agenda Items | | |
| 12:00PM - 12:10PM | * Welcome and introductions * Approval of the July 15, 2022 BHAB Meeting Minutes   Jessica moved to approve the minutes as written  Pattie second.  Minutes approve | Roger Olson |
| 12:10PM – 12:40PM | * Michelle Adams   + SUD Services Presentation Questions:   Q: What are teams doing regarding the Fentanyl crises?  A: It’s a very scary situation as it might be found in any substance at this point. Their teams have been relying on Harm Reduction Program to develop training clients to test for fentanyl using the strips. Though it has its limitations, it’s better than nothing. Test strips are available throughout the community and teams have been handing them out to clients once they are trained. Also, Janice added that Measure 110 funding came in from the state. DCHS is going to the board on Aug 29th to inform them that the funding is in and ask for the FTE. So supports will expand significantly in the harm reduction program including recovery mentors, peers, CADC. These supports with work closely with Michelle’s and other teams om outreach, including teaching clients how to use test strips and Narcan. If you know of anyone who has lived experience and is far into recovery, please let them know of these impactful roles that will be coming available.  Q: Are you encouraging staff to get a CADC?  A: To work in co-occurring therapist people  have to have some level of education  specifically about substance use, however  we are encouraging they go beyond that to get their CDAC.  Q: What are you using to determine readiness to change?  A: Currently using URICA to assess. There may be some alternatives to use in the future, but right now, teams generally use the URICA.  Q: Is there a discussion around the right approach to helping those who are not ready to seek services?  A: Yes, we are talking about ways to both save lives and maintain a livable community as there is a strong interest in both. Some law enforcement are worried about the effects of measure 110. We do know that a lot of people have gotten into recovery because of an encounter with law and through diversion programs. We do know that harm reduction helps saves lives for sure which will mean they’ll have an opportunity to recover at some point. What we don’t know is if this helps public safety or the houseless issue. This is very new and we will know more over time. | Michelle Adams |
| 12:40PM-12:55PM | * Media Update   + This group met a while ago and discussed what we need and want to do and one suggestion was that we needed to get it out to the community that we are a board and are here to receive the voice of the community and relay their input to health services to help them move forward and solve problems.   + Robert put us in touch with Mckenna Cervelli from The Bulletin and she gave us ways to publicize the board using some digital platforms that they use. She provided us with a media kit to give a general idea of what was available and pricing. Now it’s up to us to decide the message we want to get out to people and how we want to utilize those services.   + There is a health fair at the Riverhouse in Bend on September 24th. Roger noted that he did not see health services or PacificSource. Please see website here: <https://bendhealthfair.com/>     - * Deschutes County Behavioral Health doesn’t always know of the events where this group would like them to be present please let them know as soon as possible. A lot of these events take place on nights or weekends (outside of staff’s regular hours) so will need to find staff to either add to their schedule or flex hours which may be a little difficult to do with the staffing shortage, however will do their best to find someone. If they cannot find someone, DCBH can always give materials to be handed out as well.   + Holly added that they have really been trying to get the word out about the Stabilization Center. They have a new booth kit and have attended the events they knew about including a recent one in Drake Park that was pretty well attended.   + Julie volunteered to help at the September OSU health fair at the Stabilization Booth. Holly will send the information to Julie. | Roger Olson |
| 12:55 PM-  1:05PM | * BHAB Scope, Bylaws, Goals   Are the requirements for PHAB the same as BHAB in terms of needed to be guided by consumer input? Yes they are. The difference is that PHAB is not require by Oregon statutes, but BHAB is. Not all counties have a PHAB, so DC is very fortunate to have such an active one.   * Christina expressed that she really enjoyed the last discussion around our scope and purpose. * Christina shared that she spent some time looking at the Bylaws and noted a few things: * They were last revised 2014. * There is some language that could be revised. * She consulted with Jessica and Roger and determined were some outdated functions listed such as the advisory board no longer approves new providers, it’s been moved towards integrated care piece. * Areas such as IDD and SUD were left out. * How are people feeling about revising the bylaws to reflect who we are currently and where we want go?   + - The group agreed that we should take some time to update the bylaws and a few people have expressed interest in helping: Roger, Christina, Lorelei, Jessica, and Robbie.     - Janice, Dana, and Jessica had some gathered some information to help start this process.     - Dana will set up a meeting for this group begin working on this project; this could be in person as well. It was decided that we would speak with CAC and PHAB prior to the first meeting. * Janice stated that the changes that have occurred since the original bylaws were written, including the creation of the Community Advisory Council (CAC) allows this group to think more broadly and have more freedom to make this group what they want. | Christina Lee |
| 1:05PM – 1:15PM | * Future Agenda Building   + Health Council Speaker   + Facilitator of CAC | Roger Olson |
| **Parking Lot:**   * Opportunity for subgroups/subcommittees for how we want to be more present in the community. * Staffing issues: Measure 110 funds are being released. There is a worry that the funding will be there but people may not be able to deliver on promises due to lack of applicants and staffing shortages. When DCHS designed their 110 application, it was designed around positions that can be filled for this reason. * A BHRN presentation was requested. | | |