BOARD OF MENTAL HEALTH AND
SUBSTANCE ABUSE SERVICES
September 24, 2021
Department of Mental Health
and Substance Abuse Services
Oklahoma City Oklahoma

Board members present: Courtney Knoblock, MPA, Chair
Kim Holland, APRN-CNP
Hossein Moini
Rebecca Newman-German
Shannon O’Doherty
Kristin Stacy, J.D.
Kari Stomprud, M.Ed.
Carisa Wilsie, Ph.D.

Others present:
Carrie Slatton-Hodges, Commissioner,
ODMHSAS
Durand Crosby, ODMHSAS
Angie Patterson, ODMHSAS
Melissa Miller, ODMHSAS
Misty Capps, ODMHSAS
Robin Moore, ODMHSAS
Edith Llanos, Creative Life
Counseling, L.L.C.
Kathy Carnes, Purposeful Play
Family Enrichment Center, L.L.C.
Lorien Holmen, Seasons of Change
Behavioral Health Services, Inc.
Cari Renfro, Stages of Recovery, Inc.
Jeanette Moore, Hope Community Services, Inc.
Heather Helberg, Hope Community Services, Inc.
Todd Palmer, Inward Bound Health Solutions, L.L.C.
Donna Duyne, Jim Taliaferro Community Mental Health Center
Terri Lee, Jim Taliaferro Community Mental Health Center
Autumn Nickelson, Northwest Center for Behavioral Health
Joey Mickey, ODMHSAS
Heath Hayes, ODMHSAS
Michelle Lane, ODMHSAS
Rich Edwards, ODMHSAS
Dewayne Moore, ODMHSAS
Carol Johnson, ODMHSAS
Tony Stelter, ODMHSAS
Jennifer Stump, ODMHSAS
Kelli Reid, ODMHSAS
Dustin Robins, ODMHSAS
Carol Ladd, ODMHSAS
Julie Waite, ODMHSAS
Jessica Lewallen, ODMHSAS
Samuel Taylor, ODMHSAS
Connie Schlittler, Northcare
Lacinda Daugherty, Northcare
Stephen Medley, Stages of Recovery, Inc.
Darren Dry, Jack Brown Treatment Center
Melanie John, Gary Miller Canadian Co. Children’s Justice Center
Ron Lobato, Alliance Mental Health Community Partnership, Inc.
Candice Morrison, Alliance Mental Health Community Partnership, Inc.
Alysan Smith, Deaconess Pregnancy & Adoption Services, L.L.C.

CALL TO ORDER
Chair Courtney Knoblock called the meeting to order at 9:00 a.m. and stated that a quorum was present.

Chair Knoblock introduced and welcomed Ms. Kim Holland, new ODMHSA Board Member.

APPROVAL OF MINUTES OF THE JUNE 25, 2021, BOARD MEETING
Mr. Moini moved to approve the June 25, 2021, minutes. Ms. Stacy seconded the motion.

ROLL CALL VOTE
Ms. Holland
Ms. Knoblock
Mr. Moini
Ms. Newman-German
Abstain
Yes
Yes
Yes
Ms. O'Doherty
Ms. Stomprud
Ms. Stacy

DISCUSSION AND POSSIBLE ACTION REGARDING APPROVAL OF PROGRAM CERTIFICATION RECOMMENDATIONS
Kelli Reid, Director of Provider Compliance and Assistance, presented the programs recommended for approval listed on Attachment A as follows:

Alcohol and Drug Treatment Programs
A. Permit for Temporary Operation
Permit for temporary operation was recommended for: Alliance Mental Health Community Partnership, Inc., Claremore; North Oklahoma County Mental Health Center, Inc. dba Northcare, Piedmont; SequelCare of Oklahoma, L.L.C., Antlers, Broken Bow, Durant, Hugo, Idabel, Poteau, Tulsa; Stages of Recovery, Inc., Oklahoma City; and Valliant House, L.L.C., Valliant, Konawa.

Ms. Newman-German moved to approve permit for temporary operation for the above-referenced programs. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE
Ms. Holland
Ms. Knoblock
Mr. Moini
Ms. Newman-German
Yes
Yes
Yes

B. Certification with Special Distinction
Certification with special distinction was recommended for: Gary E. Miller Canadian County Children's Justice Center, El Reno; Jack Brown Treatment Center, Tahlequah;
Northwest Center for Behavioral Health, Lighthouse Substance Abuse, Woodward; and Oklahoma Families First, Inc., Holdenville, Seminole.

Mr. Moini moved to approve certification with special distinction certification for the above-referenced programs. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O’Doherty Yes
Ms. Knoblock Yes Ms. Stomprud Yes
Mr. Moini Yes Ms. Stacy Yes
Ms. Newman-German Yes

Ms. Reid stated that Northwest Center for Behavioral Health Lighthouse out of Woodward scored 100% on all their standards. They aren’t eligible for a refund because they are state-operated, part of the ODMHSAS.

C. Certification with Distinction
Certification with distinction was recommended for: Rob’s Road to Recovery Ranch, L.L.C., Purcell.

Ms. Stomprud moved to approve certification with distinction for the above-referenced program. Ms. O’Doherty seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O’Doherty Yes
Ms. Knoblock Yes Ms. Stomprud Yes
Mr. Moini Yes Ms. Stacy Yes
Ms. Newman-German Yes

D. Two-Year Certification
Two-year certification was recommended for: A Positive Direction, Inc., Tulsa; Arbuckle Life Solutions, Inc., Ardmore; Country Road Operations, L.L.C., Tecumseh; Creoks Mental Health Services, Inc., Tulsa; Deep Thoughts and Wellness Center L.L.C., Spencer; Lanai P, P.C. dba Spring Eternal Behavioral Health, Oklahoma City, Perry; Latino Community Development Agency, Inc., Oklahoma City, Tulsa; Life Recovery Services, Inc., Del City; North Oklahoma County Mental Health Center, Inc. dba Northcare, Piedmont; Quapaw Counseling Services, Miami; Quest MHSA, L.L.C., Antlers; Serenity Counseling, Inc., Poteau; Southern Oklahoma Treatment Services, Inc. dba OK Behavioral Health Services, Ada, Ardmore, Tishomingo; and Youth and Family Services of Washington County, Inc., Bartlesville, Nowata.

Ms. Stomprud moved to approve two-year certification for the above-referenced programs. Ms. O’Doherty seconded the motion.
ROLL CALL VOTE
Ms. Holland Yes Ms. O'Doherty Yes
Ms. Knoblock Yes Ms. Stomprud Yes
Mr. Moini Yes Ms. Stacy Yes
Ms. Newman-German Yes

Comprehensive Community Addiction Recovery Center Programs
A. Two-Year Certification
Two-year certification was recommended for: 12 & 12, Inc., Tulsa.

Ms. Stacy moved to approve two-year certification for the above-referenced program. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O'Doherty Yes
Ms. Knoblock Yes Ms. Stomprud Yes
Mr. Moini Yes Ms. Stacy Yes
Ms. Newman-German Yes

Opioid Substitution Treatment Programs
A. Certification with Special Distinction
Certification with special distinction was recommended for: The Center for Therapeutic Interventions, P.L.L.C., Tulsa.

Ms. O'Doherty moved to approve certification with special distinction for the above-referenced program. Mr. Moini seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O'Doherty Yes
Ms. Knoblock Yes Ms. Stomprud Yes
Mr. Moini Yes Ms. Stacy Yes
Ms. Newman-German Yes

Chair Knoblock recognized The Center for Therapeutic Interventions for being 100% compliant on all standards, and they are eligible to receive a refund of their certification fee.

B. Two-Year Certification
Two-year certification was recommended for: Life Recovery Services, Inc., Del City; and Oklahoma Treatment Services, L.L.C., dba Tulsa Rightway Medical, Tulsa.

Ms. Newman-German moved to approve two-year certification for the above-referenced programs. Ms. O'Doherty seconded the motion.
**ROLL CALL VOTE**

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**Outpatient Mental Health Treatment Programs**

**A. Permit for Temporary Operation**

Permit for temporary operation was recommended for: Alliance Mental Health Community Partnership, Inc., Claremore; Perceptions Counseling and Consulting, L.L.C., Oklahoma City; and SequelCare of Oklahoma L.L.C., Antlers, Broken Bow, Durant, Hugo, Idabel, Poteau, Tulsa.

Ms. O'Doherty moved to approve permit for temporary operation for the above-referenced programs. Ms. Newman-German seconded the motion.

**ROLL CALL VOTE**

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**B. Certification with Distinction**

Certification with distinction was recommended for: Absolute Confidential Counseling, P.L.L.C., Oklahoma City; Center for Psychological Development, Inc., Atoka, Coalgate, Durant, McAlester; Creative Life Counseling Services, L.L.C., Lawton; Deaconess Pregnancy and Adoption Services L.L.C., Oklahoma City; Growth Counseling and Consulting, L.L.C., Wilburton; Healing Hearts Counseling & Consulting L.L.C., Hugo; Integrated Therapy Solutions of Oklahoma L.L.C., Moore; New Horizons Treatment Services, L.L.C., Coalgate; and Seasons of Change Behavioral Health Services, Inc., Edmond.

Ms. O'Doherty moved to approve certification with distinction for the above-referenced programs. Ms. Stacy seconded the motion.

**ROLL CALL VOTE**

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Chair Knoblock recognized Healing Hearts Counseling & Consulting for being 100% compliant on all standards, and they are eligible to receive a refund of their certification fee.
C. Two-Year Certification
Two-year certification was recommended for: A Balanced Life Therapeutic Services, P.L.L.C., Moore; Abundant Life Today Services, L.L.C., Guthrie; Caring Hearts Professional Counseling Services L.L.C., Tulsa; Inward Bound Health Solutions, L.L.C., Oklahoma City; Perceptions Counseling and Consulting L.L.C., Oklahoma City; Purposeful Play Family Enrichment Center L.L.C., Oklahoma City; Shepherd's Recovery and Counseling Services, Inc., Midwest City; Tate Counseling Services, L.L.C., Tulsa; TD Behavioral Health, L.L.C., Tulsa; Tri County Behavioral Health, L.L.C., Hugo; and Youth Services of Creek County, Inc., Sapulpa.

Mr. Moini moved to approve two-year certification for the above-referenced programs. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O'Doherty Yes
Ms. Knoblock Yes Ms. Stomprud Yes
Mr. Moini Yes Ms. Stacy Yes
Ms. Newman-German Yes

D. One-Year-Certification
One-year certification was recommended for: Fundamentals Counseling Services, L.L.C., Westville; Healing Hearts Counseling Service, P.L.L.C., Ardmore; and Mi-Win, Inc. dba Achieve Recovery Services, Tulsa.

Ms. Newman-German moved to approve one-year certification for the above-referenced programs. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O'Doherty Yes
Ms. Knoblock Yes Ms. Stomprud Yes
Mr. Moini Yes Ms. Stacy Yes
Ms. Newman-German Yes

Community-Based Structured Crisis Center Programs
A. Permit for Temporary Operation
Permit for temporary operation was recommended for: Hope community Services, Inc., Oklahoma City.

Ms. O'Doherty moved to approve permit for temporary operation for the above-referenced program. Ms. Stacy seconded the motion.
ROLL CALL VOTE
Ms. Holland        Yes               Ms. O'Doherty    Yes
Ms. Knoblock       Yes               Ms. Stomprud     Yes
Mr. Moini          Yes               Ms. Stacy        Yes
Ms. Newman-German  Yes

Dr. Wilsie arrived at this time.

Programs of Assertive Community Treatment
A. Two-Year Certification
Two-year certification was recommended for: Jim Taliaferro Community Mental Health Center, Lawton.

Ms. Newman-German moved to approve two-year certification for the above-referenced program. Ms. Stomprud seconded the motion.

ROLL CALL VOTE
Ms. Holland        Yes               Ms. O'Doherty    Yes
Ms. Knoblock       Yes               Ms. Stomprud     Yes
Mr. Moini          Yes               Ms. Stacy        Yes
Ms. Newman-German  Yes               Dr. Wilsie       Yes

Community Mental Health Center Programs
A. Permit for Temporary Operation
Permit for temporary operation was recommended for: Central Oklahoma Community Mental Health Center, Norman; Jim Taliaferro Community Mental Health Center, Lawton, Altus, Duncan; and Northwest Center for Behavioral Health, Woodward, Alva, Enid, Fairview, Guymon, Fort Supply.

Ms. O'Doherty moved to approve permit for temporary operation for the above-referenced programs. Ms. Stomprud seconded the motion.

ROLL CALL VOTE
Ms. Holland        Yes               Ms. O'Doherty    Yes
Ms. Knoblock       Yes               Ms. Stacy        Yes
Mr. Moini          Yes               Ms. Stomprud     Yes
Ms. Newman-German  Yes               Dr. Wilsie       Yes

B. Two-Year Certification
Two-year certification was recommended for: Family and Children's Services, Inc., Tulsa, Broken Arrow; and Jim Taliaferro Community Mental Health Center, Lawton, Altus, Duncan.

Ms. O'Doherty moved to approve two-year certification for the above-referenced programs. Ms. Stomprud seconded the motion.
ROLL CALL VOTE
Ms. Holland  Yes  Ms. O'Doherty  Yes
Ms. Knoblock  Yes  Ms. Stacy  Yes
Mr. Moini  Yes  Ms. Stomprud  Yes
Ms. Newman-German  Yes  Dr. Wilsie  Yes

Per Chair Knoblock's request, Commissioner and Ms. Reid provided an explanation on what constitutes a CCBHC facility.

Community Residential Mental Health Programs
A. Certification with Distinction
Certification with distinction was recommended for: Copp's Residential Care, Inc., Claremore; Edna Lee's Room & Board, Inc. dba Edna Lee's Residential Care, Vinita; Homestead Residential Care, L.L.C., Vinita; Miller's Residential Care, L.L.C., Vinita; Santa Fe Residential Care Home, L.L.C., Vinita; Spears Management Co., Inc. dba Boley Residential Care Home I, Boley; and Spears Management Co., Inc. dba Boley Residential Care Home II, Boley.

Mr. Moini moved to approve certification with distinction for the above-referenced programs. Ms. Stacy seconded the motion.

ROLL CALL VOTE
Ms. Holland  Yes  Ms. O'Doherty  Yes
Ms. Knoblock  Yes  Ms. Stacy  Yes
Mr. Moini  Yes  Ms. Stomprud  Yes
Ms. Newman-German  Yes  Dr. Wilsie  Yes

Chair Knoblock recognized Edna Lee's Room & Board, Inc. dba Edna Lee's Residential Care and Spears Management Co., Inc. dba Boley Residential Care Home II, Boley for being 100% compliant on all standards, and they are eligible to receive a refund of their certification fee.

B. One-Year-Certification
One-year certification was recommended for: HAV-Tap, Inc. dba The Harbor, Oklahoma City.

Ms. O'Doherty moved to approve one-year certification for the above-referenced program. Mr. Moini seconded the motion.

ROLL CALL VOTE
Ms. Holland  Yes  Ms. O'Doherty  Yes
Ms. Knoblock  Yes  Ms. Stacy  Yes
Mr. Moini  Yes  Ms. Stomprud  Yes
Ms. Newman-German  Yes  Dr. Wilsie  Yes
DISCUSSION REGARDING THE ADMINISTRATIVE RULES SUBCOMMITTEE
Dr. Wilsie stated that the Administrative Rules Subcommittee met Friday, August 27, 2021.

Dr. Wilsie stated that Ms. Melissa Miller, Director of Medicaid Behavioral Health and Policy Planning presented rule changes to Chapter 1 and discussed Chapter 75, a new Rule. (The Chapters have been included in your Board book.)

Ms. Miller explained the Rule Revisions for Certified Problem Gambling Treatment Counselors as follows:

- Emergency rules to implement HB 2006 in required timeframe of the bill; informal public comment July 26-Aug 6; no comments received
- Chapter 1 – minor edits to add references to the new certification/chapter
- Chapter 75 – entirely new chapter that implements the new certification requirements, standards and application processes
  - Mirrors language for other individual certifications under title 450
  - Worked closely with OK Association on Problem Gambling and Gaming
  - Certification is not a requirement but promotes the profession
  - Allows for a state process for certification instead of just a national one
  - All must be licensed or under supervision and have training and clinical experience to receive certification
  - Continuing education required
  - Allows certain individuals with national certification to be grandfathered in
  - $50 fee
  - Subcommittee requested edit to allow for other states’ certification to be grandfathered as well; this edit will be made

- Next steps:
  - Board approval
  - Filing of rules
  - Governor approval w/in 45 days
  - Effective date will be Nov 1 or upon Governor Stitt’s approval
  - These will go through permanent rulemaking next session

The Administrative Rules Subcommittee recommends that the Board accept the changes to Chapters 1 and 75.

Ms. Miller will now explain each Chapter Rule change and answer any questions the Board may have.

DISCUSSION AND POSSIBLE ACTION REGARDING APPROVAL OF ODMHSAS ADMINISTRATIVE RULES
Ms. Melissa Miller, Director of Medicaid Behavioral Health Policy Planning, presented the Administrative Rules recommended for approval as follows:
CHAPTER 1: ADMINISTRATION

FINDING OF EMERGENCY: The proposed rule revisions are made in accordance of House Bill 2006, which establishes Certified Problem Gambling Treatment Counselors.

SUMMARY: The proposed emergency rule revisions update language and add references related to Certified Problem Gambling Treatment Counselors.

Dr. Wilsie made a motion to approve the Chapter 1 Administrative Rule changes. Mr. Moini seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O'Doherty Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes

CHAPTER 75. STANDARDS AND CRITERIA FOR CERTIFIED PROBLEM GAMBLING TREATMENT COUNSELORS
Ms. Miller stated that Chapter 75 is a new Chapter that will establish standards and criteria for Certified Problem Gambling Treatment Counselors.

FINDING OF EMERGENCY: In accordance with House Bill 2006, the proposed emergency rules implement provisions to establish standards and criteria for Certified Problem Gambling Treatment Counselors.

SUMMARY: The proposed emergency rules establish standards and procedures for certification of Problem Gambling Treatment Counselors, including criteria for certification and renewal, fees, application requirements, education and training requirements, continuing education requirements, and rules of professional conduct.

Dr. Wilsie made a motion to approve the Chapter 75 Administrative Rule. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O'Doherty Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes

DISCUSSION REGARDING REPORT FROM COMMISSIONER
Commissioner Slatton-Hodges presented her report as follows:

National Conference of State Legislatures and National Council Partnership – CCBH State Policy Webinar – (Speaker) – Commissioner Slatton-Hodges stated that she spoke
at the National Counsel's Conference, which is a large behavioral health national organization.

The National Association of State Mental Health Program Directors (NASMHPD) Annual 2021 Virtual Meetings – (Speaker) – Commissioner Slatton-Hodges stated that she spoke at the National Association of State Mental Health Program Directors annual meeting, her peer organization which consists of all 50 states' Commissioners. She noted that she spoke to this group about the initiatives that the ODMHSAS is doing.

Indian Health Services (HIS) Behavioral Health Conference – (Speaker) – Commissioner Slatton-Hodges stated that she spoke at the IHS conference about the initiatives that the ODMHSAS is doing.

Representative Randy Randleman and Representative Collin Walke – Interim Study on Mental Health – (Speaker) – Commissioner Slatton-Hodges stated that she spoke at this interim study which focused on talking about the impact on the criminal justice system when a person(s) receives appropriate care and treatment.

Senator Kay Floyd and Senator Julia Kirt – Interim Study on Youth Suicide – (Speaker) – Commissioner Slatton-Hodges stated that she spoke at the Interim Study on Youth Suicide.

Representative Jeff Boatman – Interim Study on the Crisis Response System – (Speaker) Commissioner Slatton-Hodges stated that she spoke at the Interim Study on the Crisis Response System. She stated that they spoke at length discussing the crisis response system, what is to come, and improvements that are on the horizon for that.

Commissioner Slatton-Hodges stated that an important thing about interim studies is that it is a way for legislators to gather more information as they think about policy and policy implications that may need to be made in Oklahoma.

Community Mental Health Centers Directors' (CMHC) Meeting and Substance Abuse Contracted Provider (SACP) Directors' Meeting – Commissioner Slatton-Hodges stated that she continues to meet monthly with the CMHC directors and the substance abuse contracted provider directors.

Commissioner Slatton-Hodges stated that she had several individual meetings with various agencies surrounding initiatives, concerns and questions they had.

Representative and Chair of the House Appropriations & Budget Committee Kevin Wallace; Senator John Haste, Senator Roger Thompson and Representative Kyle Hilbert; Senator Paul Rosino; Senator Paul Rosino Agency Meeting – Re: Policy Issues or Requested Budget Items; and Senator Greg McCortney – Commissioner Slatton-Hodges noted that she met with a number of representatives this reporting period regarding conversations and guidance for next year's budget. Commissioner Slatton-Hodges stated that, at this time, the dollar amount that will be available for allocation to agencies
is unknown, but those conversations have begun about the ODMHSAS needs, where the ODMHSAS is at this time, and what things ODMHSAS is looking at, as ODMHSAS continues to progress towards solidifying a budget request.

Senator Paul Rosino – Tour of The Steven A. Cohen Military Family Clinic at Red Rock, Lawton, OK – Commissioner Slatton-Hodges noted that she took a trip with Senator Rosino to Lawton to visit the Cohen Veterans Center in Lawton. She explained that ODMHSAS started meeting with the Cohen Veterans network a couple of years ago. She explained that the organization was started by Mr. Cohen, a philanthropist and businessman. Commissioner Slatton-Hodges stated that his son, a college graduate, decided that he was going to enlist in the Marines where he did two tours overseas, one in Afghanistan and one in Iraq. When he completed his time in the military, he told his father that he felt like if he was going to do philanthropic work, he should do that around veterans. So, with that, they began opening veterans’ centers across the country and approached Oklahoma to open a veteran’s center. Commissioner Slatton-Hodges stated that one of the things that is unique about them is that they serve any post-911 veteran regardless of ability to pay or insurance along with their spouse and children, which is important because oftentimes those folks don’t have an avenue to receive care and treatment through the traditional veteran’s system. She indicated that they made a large investment in Lawton and partnered with one of the ODMHSAS treatment providers, Red Rock, and opened a clinic there. Commissioner Slatton-Hodges stated that Senator Paul Rosino, a veteran himself, is very interested in the Veteran’s Center. She stated that they toured and had great discussion with Dr. Hassan, the head of that organization. Commissioner Slatton-Hodges stated that discussion also surrounded developing a center in Oklahoma City and perhaps Enid. She stated that discussions continue as the ODMHSAS stays engaged with the Veteran’s Network, as they are a great organization doing great work around veteran’s care.

DISCUSSION REGARDING THE REPORT FROM CORPORATE ACCOUNTABILITY COMMITTEE
Ms. O’Doherty stated that the Corporate Accountability Committee met Wednesday, September 15, 2021.

DISCUSSION AND POSSIBLE ACTION REGARDING THE INTERNAL AUDITOR’S REPORT
Ms. O’Doherty continued the report from the Corporate Accountability Committee as follows:

Dr. Durand Crosby presented the Internal Audit report on behalf of Misty Capps and updated the committee on the status of ongoing audits being conducted by her division.

There were no questions from the Subcommittee regarding the Internal Auditor’s report.

Ms. Capps is present and available to answer any questions regarding her report.

There were no questions from the Board regarding the Internal Auditor’s report.
Ms. O’Doherty made a motion to approve the Internal Auditor’s report. Mr. Moini seconded the motion.

**ROLL CALL VOTE**

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**DISCUSSION AND POSSIBLE ACTION REGARDING THE ADVOCATE GENERAL’S REPORT**

Ms. O’Doherty continued the report from the Corporate Accountability Committee as follows:

The Department’s Advocate General, Joey Mickey, presented the Advocate General’s report to the Subcommittee and updated the committee on the work being conducted by his division.

There were no questions from the Subcommittee regarding the Advocate General’s report.

Mr. Mickey is present and available to answer any questions regarding his report.

There were no questions from the Board regarding the Advocate General’s report.

Ms. O’Doherty made a motion to approve the Advocate General’s report. Ms. Stomprud seconded the motion.

**ROLL CALL VOTE**

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**DISCUSSION AND POSSIBLE ACTION REGARDING THE INSPECTOR GENERAL’S REPORT**

Ms. O’Doherty continued the report from the Corporate Accountability Subcommittee as follows:

The Department’s Inspector General, Dewayne Moore, presented the Inspector General’s report to the Subcommittee. The Inspector General’s report was reviewed by the Subcommittee.
There were no questions from the Subcommittee regarding the Inspector General's report.

Mr. Moore is present and available to answer any questions regarding his report.

There were not questions from the Board regarding the Inspector General's report.

Ms. O‘Doherty made a motion to approve the Inspector General’s report. Dr. Wilsie seconded the motion.

**ROLL CALL VOTE**

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**DISCUSSION AND POSSIBLE ACTION REGARDING THE LEGAL REPORT**

Ms. O‘Doherty continued the report from the Corporate Accountability Subcommittee as follows:

Dr. Crosby presented the Legal report to the Subcommittee.

There were no questions from the Subcommittee regarding the Legal report.

Dr. Crosby was present to answer questions.

There were no questions from the Board regarding the Legal report.

Ms. O‘Doherty made a motion to approve the Legal report. Ms. Stomprud seconded the motion.

**ROLL CALL VOTE**

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**DISCUSSION REGARDING THE REPORT FROM THE PERFORMANCE IMPROVEMENT COMMITTEE**

Ms. Newman-German stated that the Performance Improvement Committee met September 16, 2021.

Ms. Newman-German stated that there were two presentations for the September meeting.
Debbie Moran, Executive Director, Carl Albert Community Mental Health Center (CACMHC) presented on the CACMHC Behavioral Health Training Project.

A summary of her presentation is as follows:

CACMHC had many training needs and had objectives on how it needed to happen. The following are the primary needs:
1) Need continuous education opportunities
2) Need a safe delivery environment
3) Need to decrease the amount of time needed to achieve training goals
4) Need it to be cost effective

Integrated care has become the new gold standard for providing services for mental health and the comorbidities that exist in mental health consumers. To provide effective integrated care CACMHC complete a Community Needs Assessment and all training expectations were derived from the outcomes of that Community Needs Assessment. After reviewing their options, Relias was chosen and the rationales for their selection is as follows:
1) Ease of Use
2) User friendly
3) Ability to create a training tracker that was interactive with excel
4) Quick implementation with on-demand-training
5) The capabilities to create training plans tailored specifically to employee needs
6) Continuous education for staff
7) Tracking for Quality Improvement

Relias Learning implementation plan began with bi-weekly team zoom meetings with the Project Director and Project Manager, training plans and learning modules, Relias Connect and creation of reports.

Tracking Relias Learning progress has enabled leadership to evaluate other training modules that would be beneficial for staff. Relias Learning has created a dialogue centered around engagement with employees and inspired employees to review other training modules that would enhance their education and skill set.

The second presentation was provided by Jessica Hawkins, Senior Director, Prevention Services. Ms. Hawkins' presented on the Oklahoma Strategic Prevention Framework for Prescription Drugs (SPF Rx) Grant Project.

A summary of her presentation is as follows:

Ms. Hawkins stated that the Oklahoma Strategic Prevention Framework for Prescription Drugs (SPF Rx) Grant Project was a five-year multi-faceted, multi-staged prevention project aimed at reducing the non-medical use of prescription drugs (NMUPD) by individuals aged 12 and over. The SPF Rx Grant was awarded by the Substance Abuse and Mental Health Services Administration (SAMHSA) Center for Substance Abuse Prevention (CSAP) and managed by the Oklahoma Department of Mental Health and
Substance Abuse Services (ODMHSAS). In implementing the project, staff were guided by CSAP’s Strategic Prevention Framework (SPF), a five-step prevention planning process developed to provide the foundation for systematic, data-driven prevention planning.

The purpose of the Oklahoma SPF Rx project was to continue the work of the SPF PFS (Partnerships for Success) to reduce non-medical prescription drug use and use-related problems and to strengthen state and community level prevention capacity and infrastructure, with a specific focus on medical availability and providers' use of the Prescription Drug Monitoring Program (PDMP). A total of 13 communities were funded to implement these projects via community coalitions. During the project period, the SPF Rx sites conducted outreach and education to medical providers in their areas and community members at large to increase use of best practice opioid prescribing guidelines to improve patient care and prevent harm from opioid medication. SPF Rx sites realized reductions in several key measures, including reductions in high-risk opioid doses, high risk opioid/benzo combinations, and multiple prescription episodes by patients. Of note is that of the policy work by the CAPSTAT coalition in Tulsa that was integral in advancing state policy change during the project period to require use of electronic prescribing.

Before we adjourned, Dr. Durand Crosby reviewed the Critical Incidents Report Summaries and circumstances surrounding these incidents.

DISCUSSION AND POSSIBLE ACTION REGARDING THE CRITICAL INCIDENT REPORT
Dr. Crosby stated that the Critical Incident Report was presented at the Performance Improvement Subcommittee meeting. He stated that he did not have anything further to add to his report.

Ms. Newman-German stated that the Performance Improvement Committee recommends approval of the Critical Incidents Report.

Ms. Newman-German moved to approve the Critical Incident Report. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O'Doherty Yes
Ms. Knoblock Yes Ms. Stacy Yes
Mr. Moini Yes Ms. Stomprud Yes
Ms. Newman-German Yes Dr. Wilsie Yes

DISCUSSION REGARDING THE REPORT FROM THE FINANCE COMMITTEE
Ms. O'Doherty stated that the Finance Committee met on September 15, 2021

Rich Edwards presented the FY-21 finance report for the month ending August 2021. He presented the budget to actual comparison report as follows:
For FY-21 revenue collections are trending below projections by 2.1% or $11.4 Million, some under spending in newly awarded grants led to lower than projected revenues. Expenditures are trending under budget by 5% or $28.3 million due to a delay in encumbering contracts for newly awarded grants. The year-to-date net variance for the agency is a positive 3.1% or $16.8M.

The Finance Committee recommended approval of the Financial Reports.

DISCUSSION AND POSSIBLE ACTION REGARDING THE MONTHLY FINANCIAL REPORT
Ms. O'Doherty moved to approve the FY-21 August Financial Report. Ms. Newman-German seconded the motion.

Chair Knoblock asked Commissioner Slatton-Hodges to discuss the trend line and impact related to the income coming in around the Medicaid Expansion.

Commissioner Slatton-Hodges stated that the July financial report reflect June's billing so there is no indication of expansion on that report. She stated that the Department is beginning to see a slight trend with the August financials. She explained that the ODMHSAS Decision Support Services division has created a report for the Department that shows every person across the state that we serve. That report matches these individuals up as to their eligibility and then it removes them when they have become enrolled. Commissioner Slatton-Hodges stated that at any point in time the Department can see percentagewise who should be enrolled and who has become enrolled. She explained that the Department then pushes the report out to the provider agencies so that they can see the expected number of enrollees. Commissioner Slatton-Hodges noted that there is some variance within the report and that some providers are trending a little behind but, all-in-all, the Department is on track as to where it wants to be in terms of having 60% of those eligible being enrolled this year.

Commissioner Slatton-Hodges explained the slow rate of those being enrolled on the crisis unit but are now becoming eligible at a faster rate. She noted that the Department is tracking the progress and reaching out to provide technical assistance anywhere the trends are not where the Department expects them to be.

Commissioner Slatton-Hodges stated that the anticipated revenue trend will be under expectations the first half of the year, and the second half of the year will be above expectations to balance the revenue expectations that will be set based upon Medicaid expansion.

Mr. Moini asked what the revenue expectation is from the expansion.

Commissioner Slatton-Hodges stated that last year when the Department made its budget request, the Legislature asked for a revenue number that the Department felt it would bring in for persons served versus prior to expansion. She explained that the
estimate given to the Legislature of $30 million was based upon looking at all eligible individuals and then 60% of those eligible individuals acquiring Medicaid for this fiscal year. Commissioner Slatton-Hodges stated that that estimate was based upon several other states who had done expansion and what their enrollment had been the first year. She indicated that the average enrollment the first year was about 50% of eligible which was the bases for the Department's target of $30 million. Commissioner Slatton-Hodges stated that when the Department did the budget last year, $30 million of state funds were swept from the budget to help pay for expansion. The Department was fortunate to have the Legislature give the Department $17 million for targeted investments. Commissioner Slatton-Hodges reiterated that it is critical that the Department meets its expectations in enrollment, which is the reason the Department closely monitors the work the providers and staff are doing. She stated that the Department is on track to meet its expectations.

**ROLL CALL VOTE**

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**DISCUSSION AND POSSIBLE ACTION REGARDING BUDGET REVISIONS FY-21 #22 - #26**

Ms. O'Doherty continued the report from the Finance Committee as follows:

Mr. Edwards presented revisions #22, 23, 24, 25 and 26 to the FY-21 budget work program. The revisions added additional budget to recognize revenues from new federal grants and interagency revenue. In total the revisions added $1,281,000 to the FY-21 budget work program.

The Finance Committee recommended approval of revisions #22, 23, 24, 25 and 26 to the FY-21 budget work program.

Ms. O'Doherty moved to approve budget revisions #22, #23, #24, #25 and #26 to the FY-21 budget work program. Ms. Newman-German seconded the motion.

**ROLL CALL VOTE**

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Commissioner Slatton-Hodges reminded the Board that this is the last time they will see the FY-21 financials; however, the end date to make sure everything is done is November 15th. Commissioner Slatton-Hodges stated that the Department has done its pended run, which is where the Department looks at any uncompensated care that occurred, and then pays for uncompensated care from remaining dollars, which then becomes the final closeout.
DISCUSSION AND POSSIBLE ACTION REGARDING THE MONTHLY FINANCIAL REPORT
Ms. O'Doherty continued the report from the Finance Committee as follows:

Rich Edwards presented the FY-22 finance report for the month ending August 2021. He presented the budget to actual comparison report as follows:

For FY-22 revenue collections are trending below projections by .7% or $3.4M Million, the reduced amount of the first ETPS payment led to lower than projected revenues. Expenditures are trending under budget by 18% or $89 million due to a delay in encumbering contracts for the new fiscal year. The year-to-date net variance for the agency is a positive 16.9% or $85.8M.

The Finance Committee recommended approval of the FY-22 August Financial Report.

Ms. O'Doherty moved to approve the FY-22 August Financial Report. Mr. Moini seconded the motion.

Mr. Edwards made note that the Department has received one ETPS payment this year, which was lower that projection, but the Department found out this week that there was an error in the calculation that the Healthcare Authority made which resulted in approximately $5 million coming to the Agency that wasn't received before. He stated that the revenue will now be closer to what the Department predicted.

Commissioner Slatton-Hodges commended the hard work the Department's staff diligently went through, analyzed and then worked with the Healthcare Authority to point out the inaccurate number.

ROLL CALL VOTE
Ms. Holland        Yes          Ms. O'Doherty    Yes
Ms. Knoblock       Yes          Ms. Stacy        Yes
Mr. Moini          Yes          Ms. Stomprud     Yes
Ms. Newman-German  Yes          Dr. Wilsie       Yes

DISCUSSION AND POSSIBLE ACTION REGARDING BUDGET REVISIONS FY-22 #1
Ms. O'Doherty continued the report from the Finance Committee as follows:

Mr. Edwards presented revision #1 to the FY-22 budget work program. The revision added additional budget to recognize revenues from new federal grants and corrected an error in the patient trust fund budget. In total the revision reduced the FY-22 budget work program by $92,832.

The Finance Committee recommended approval of revision #1 to the FY-22 budget work program.
Ms. O'Doherty moved to approve budget revision #1 to the FY-22 budget work program. Ms. Newman-German seconded the motion.

**ROLL CALL VOTE**

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Ms. Stacy left the meeting at this time.

**PRESENTATION**

Commissioner Slatton-Hodges stated that she was going to present the Department’s overall goals as laid out by Governor Stitt. She stated that the Department reviews its goals on a five-year perspective, but she is presenting them today to show the work that the Department is doing this fiscal year.

Commissioner Slatton-Hodges stated that she was presenting on what the Department calls, “Our big rocks, breaking them down into smaller rocks.” She stated that the ODMHSAS identified three major goals to reach over the course of the next five years. These goals were created using agency-specific mental health and substance abuse challenges affecting the state of Oklahoma, as well as the statewide goal of reducing childhood obesity and creating a healthier family unit.

A summary of Commissioner Slatton-Hodges’ presentation is as follows:

**Become Top Ten State in Lowest Number of Suicides**

To achieve this, the Department will implement multiple strategies including continuation of outreach campaigns, continued work to implement best practices in healthcare settings and workplace engagement initiatives. Additionally, the Department will continue and grow school-based suicide prevention resources along with expansion of training efforts that are already underway. Implementation of a comprehensive crisis system will be a significant enhancement and encourage help seeking opportunities, as will the expanded use of technology, facility upgrades and a continued commitment to the innovative use of peer utilizations.

**Reduce Overall Substance Use**

Efforts to address opioid use and overdose will continue, while successful strategies used over the past several years to address overall substance use issues and intervention. The Department will focus on enhancing treatment infrastructure to effectively and efficiently deliver evidence-based treatment interventions, including medication(s) specifically for the treatment of stimulant and alcohol misuse and use disorders, and/or co-occurring disorders in the continuum of care. These efforts will include recovery supports, employment initiatives and evidenced-based housing. Additionally, the Department seeks to heighten access opportunities including assisting those eligible with enrollment
in Medicaid and billing for newly eligible Medicaid services, along with growth of our partnerships with primary care and integration opportunities.

**Reduce Childhood Obesity**
The Department will credential at least 1,000 wellness coaches to help promote a culture of wellness and provide wellness services to children and families in the behavioral health system and increase the number of health serving organizations that adopt worksite wellness policies that address nutrition and physical activity for employees and consumers. Additionally, the department will establish a BMI data collection protocol for children and youth served within certified community behavioral health centers (CCBHCs) and provide diabetes education, resources, and technical assistance to CCBHCs, CMHCs and CCARCs.

Ms. Holland asked if the Department is conducting any specific initiatives around methamphetamine. Ms. Holland stated that there doesn’t seem to be much treatment or any programs regarding methamphetamine and that the opioid abuse seems to be getting worse in rural Oklahoma as well.

Commissioner Slatton-Hodges stated that there is policy work taking place regarding methamphetamines.

Commissioner Slatton-Hodges stated that in terms of treatment, there is not an FDA-approved drug for the treatment of methamphetamine at this time. Commissioner Slatton-Hodges stated that SAMHSA is coming out with a guidance letter, kind of lessons learned from people who are utilizing medications, not as FDA-approved but kind of what has been seen, which will be very informative.

Commissioner Slatton-Hodges explained that what the Department focuses on is first getting persons into the right level of care. She stated that with methamphetamine, oftentimes that means residential substance abuse treatment due to the brain taking longer to start processing appropriately from the time the person quits using until they can start absorbing the types of things they need to. She said that oftentimes having that time when the person is at risk of using or relapse and getting that time under their belt is very helpful.

Commissioner Slatton-Hodges stated that the Department focuses on contingency management training. She stated that there are new federal rules around continued management coming out soon. Commissioner Slatton-Hodges explained that contingency management is a way to reward people for incremental steps along the path to recovery, and with methamphetamine it seems to be incredibly important. People sometimes look at a tangible reward system as not good or maybe unethical, but the research shows that for methamphetamine treatment it is incredibly important. She stated that there must be a lot of reward and frequent rewards, so contingency management really is the gold standard for the treatment with methamphetamine. Commissioner Slatton-Hodges stated that the Department is providing a lot of training on contingency
management this year. She stated that the Department also trains on the matrix model, which is evidence-based for methamphetamine.

Commissioner Slatton-Hodges indicated that Ms. Holland was right in her assessment that methamphetamine is probably the most challenging substance to treat, as oftentimes when a provider sees a person who needs treatment for methamphetamine that person is in an acute state and are completely out of touch with reality, which is the starting point. She stated that the provider will have to go through the process of getting that behind that person and then keeping them from using again long enough to start the path to doing the work.

Mr. Moini asked Commissioner Slatton-Hodges where the Department is today on the goal of being the top 10 to reduce suicide.

Commissioner Slatton-Hodges stated that she believed the Department was 16th.

Mr. Moini asked how the Department is reaching the different school systems, knowing that there are over 500 school systems.

Commissioner Slatton-Hodges stated that the Department works with whoever is willing. She stated that it starts with outreach, talking about what can be done, how we can partner, and then we rely a large part of the time on community systems. Commissioner Slatton-Hodges noted that, for the most part, the response is good, and the Department is in probably as many small schools as in large schools. Commissioner Slatton-Hodges stated that the information is located on the Department’s website and can be reviewed at any time.

PRESENTATION
Commissioner Slatton-Hodges introduced Samuel Taylor and stated that Mr. Taylor is a certified peer recovery support specialist with the Oklahoma Department of Mental Health and Substance Abuse Services. Joining the Department last September starting first at the Oklahoma Crisis Recovery Unit, he now uses his lived experience to serve our communities as a Mental Health Technician at Griffin Memorial Hospital. Both enthusiastic about the mission of our organization and compassionate for the people we serve, his lived experience story is testimony not only that recovery is possible, but to the importance of Peer Recovery Support Specialist and lived experience employees throughout our department.

Mr. Taylor gave a moving presentation of his journey with substance abuse addiction, through the criminal justice system and his recovery from substance abuse use. He stated that he has been abstinent from all mind-altering substances since March 12, 2018, a direct result of the help he received from the work individuals at the Oklahoma Department of Mental Health and Substance Abuse does.

Mr. Taylor spoke about his childhood growing up in a poor, small rural area in southern Arkansas. He stated that alcohol use was a heavy presence in his childhood and family
unit. Mr. Taylor stated that his childhood was awkward and painful regarding school-age bullying, torment, physical abuse and hurtful words. He stated that he did not have a lot of friends and the people that he knew did not have a whole lot of empathy or understanding for the unique childhood that he led, which put him on the path of his addiction.

Mr. Taylor stated that he came to Oklahoma seeking refuge from the awful path of destruction he was leading.

Mr. Taylor stated that he has been treated with the utmost respect from the Department and has been looked at like he is as capable as anybody else. He indicated that the Department is an awesome place to work and that it will forever be his greatest honor to serve people the way that so many people have served him.

Ms. Knoblock left the meeting at this time.

Ms. O'Doherty thanked Mr. Taylor for sharing his experience with the Board, and she stated that he was an inspiration to others as well.

NEW BUSINESS
There was no new business.

ADJOURNMENT
Mr. Moini moved to adjourn the meeting. Ms. Newman-German seconded the motion.

ROLL CALL VOTE
Ms. Holland Yes Ms. O'Doherty Yes
Mr. Moini Yes Ms. Stomrud Yes
Ms. Newman-German Yes Dr. Wilsie Yes

Kim Holland, APRN-CNP

Shannon O’Doherty

Courtney Latta Knoblock, MPA

Kristin Stacy, J.D.

Hossein Moini

Kari Stomrud, M.Ed.