

**BOARD OF MENTAL HEALTH AND  
SUBSTANCE ABUSE SERVICES  
January 9, 2009  
Department of Mental Health  
And Substance Abuse Services  
Oklahoma City, Oklahoma  
Minutes**

**Board Members Present:**

Larry McCauley, Ed.D., Chair  
Henry Haynes, Ed.D.  
Robert McDonald  
Jack Turner  
Ronna Vanderslice, Ed.D.  
Gail Wood  
Brent Bell, M.D.  
Bruce Fisher

**Others Present:**

Commissioner Terri White, ODMHSAS  
Durand Crosby, ODMHSAS  
Angie Patterson, ODMHSAS  
Ray Caesar, ODMHSAS  
Kim Poff, ODMHSAS  
Jeff Dismukes, ODMHSAS  
Lynette Kennelly, Multi County  
Counseling, Inc.  
June Elkins-Baker, ODMHSAS  
Johnny Johnson, Valley Hope  
Jessica Hawkins, ODMHSAS  
Carol Ladd, ODMHSAS  
Tonya Salazar, ODMHSAS  
Don Bowen, ODMHSAS  
Richard Bowden, ODMHSAS  
Todd Crawford, CRC  
Kelli Epps, ODMHSAS  
Mike Miller, Valley Hope  
Jack Kelly, ODMHSAS  
Wendy Hanifin, ODMHSAS  
Shawn McCarty, ODMHSAS  
Stan Ardoin, M.D., ODMHSAS/GMH  
Deneka Cain, ODMHSAS  
Carrie Slatton-Hodges, ODMHSAS

Steven Buck, ODMHSAS  
Caletta McPherson, ODMHSAS  
Gretchen Geis, ODMHSAS  
John Hudgens, ODMHSAS  
Joyce Ihde, ODMHSAS  
Bob Mathew, ODMHSAS  
Michaelle Statham, ODMHSAS  
Nancy Gibson, YWCA Reflections HWH  
Susan Hughes, ODMHSAS  
Kimberly Watson, Clay Crossing for  
Women  
Sharon Fernandez, ODMHSAS  
Karina Forrest, NAMI Oklahoma  
Janice Hiner, NAMI Oklahoma  
Margaret Bradford, Bill Willis CMHC  
Rene Ryan, TSHA, Inc. – Interpreter  
Marty Simpson, Clay Crossing for  
Women  
Hazel Love, TSHA, Inc. – Interpreter  
Rusty Gillette, Tulsa Boys Home  
Jeremiah Sisovsky  
Mary Maple, CCSO  
Lawrence Ellis, Open Options, Inc  
Connie Motley, OSASA

**CALL TO ORDER**

Dr. McCauley called the January meeting to order at 9:00 a.m. and declared a quorum was present.

**APPROVAL OF MINUTES**

Dr. Vanderslice moved to approve the minutes of the November 14, 2008, meeting. Mr. McDonald seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Dr. Haynes	Yes	Mr. McDonald	Yes
Mr. Turner	Yes	Dr. Vanderslice	Yes
Ms. Wood	Yes	Mr. Fisher	Not Present

Mr. Fisher entered at 9:02 am.

**DISCUSSION AND POSSIBLE ACTION REGARDING CRITICAL INCIDENT REPORT**

Mr. Hudgens had no additional information to add to the Critical Incident Report.

Ms. Wood moved to accept the Critical Incident Report. Dr. Haynes seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Dr. Haynes	Yes	Mr. McDonald	Yes
Mr. Turner	Yes	Dr. Vanderslice	Yes
Ms. Wood	Yes	Mr. Fisher	Yes

**DISCUSSION AND POSSIBLE ACTION REGARDING PROGRAM CERTIFICATION RECOMMENDATIONS**

**Alcohol and Drug Treatment Programs**

**A. Temporary Certification**

Temporary certification was recommended for: Cornerstone Clinical Services, Inc., Fresh Start Treatment Center, Inc., Multi-County Counseling, Inc.

Dr. Vanderslice moved to approve temporary certification for the above-referenced programs. Dr. Bell seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Dr. Haynes	Yes	Mr. McDonald	Yes
Mr. Turner	Yes	Dr. Vanderslice	Yes
Ms. Wood	Yes	Mr. Fisher	Yes

**B. Conditional Certification**

Conditional certification was recommended for: ActionSteps Counseling, Inc.; Bill Willis CMH and Substance Abuse Center; Camelot Community Services of Oklahoma, L.L.C. dba Counseling Center of Southeast Oklahoma; Clay Crossing for Women, L.L.C., Mid-Del Youth & Family Center, Inc.; Open Options, Inc.; Rogers County Drug Abuse

Program, Inc.; Southern Oklahoma Treatment Services, Inc. dba Transitions Treatment OKC; The Center for Therapeutic Interventions, P.L.L.C.; Valley Hope Association dba Oklahoma City Valley Hope; Valley Hope Association dba Tulsa Valley Hope; Valliant House, L.L.C.

Ms. Wood moved to approve conditional certification for the above-referenced programs. Mr. Fisher seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**C. Certification**

Certification was recommended for: Effective Transitions, Inc.; Family Crisis & Counseling Center, Inc.; Hands of Hope, Inc. dba Shekinah Counseling Services; Northwestern Oklahoma State University – Community Services Program; Oklahoma Treatment Services, L.L.C. dba Rightway of Roland; Tulsa Boys’ Home, Inc.; Youth Services for Oklahoma County, Inc.; YWCA Reflections Halfway House.

Mr. Turner asked how many universities have programs. Mr. Hudgens stated that the medical college in Tulsa has one, which is the basis of one of the PACT programs, and some other universities may have prevention programs. The Northwestern Oklahoma State University – Community Services Program has a certified outpatient counseling center, but there aren’t many universities certified to provide treatment. This program is particularly designed to serve a prison-based program in the community. Mr. Turner asked if they are part of an overall educational program. Mr. Hudgens stated that he didn’t have an answer for that but could find out more information. Commissioner White answered that most of the colleges and universities do not have certified programs where they serve the public. Alva and OU in Tulsa are an exception; however, several colleges and universities have counseling programs available only for their students. UCO in Edmond has become a very prevention-oriented campus after the Virginia Tech incident. Deputy Commissioner Steven Buck has been working very closely with them to make sure that prevention programs and education programs are in place, and other campuses are interested in doing the same thing. ODMHSAS is also working very closely with the Governor’s Class Task Force, created after the Virginia Tech incident, and the Department is providing information to career techs, colleges and universities about how to do more services for their students and how to look at prevention issues. Hopefully, this is an area that will expand in the future, but at this time, there are very few programs that actually do programs for the public.

Dr. Bell moved to approve certification for the above-referenced programs. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**Gambling Addiction Treatment Programs**

**A. Certification**

Certification was recommended for: Family & Children’s Services, Inc.

Mr. Fisher moved to approve certification for the above-referenced program. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**Community Residential Mental Health Programs**

**A. Conditional Certification**

Conditional Certification was recommended for: Alternative Opportunities, Inc. dba Northfork Residential Care.

Dr. Haynes moved to approve conditional certification for the above-referenced program. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**B. Certification with Commendation**

Certification with Commendation was recommended for: Burdine, Inc. dba New Beginning Residential Care Home.

Dr. Vanderslice moved to approve certification with commendation for the above-referenced program. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**C. Certification**

Certification was recommended for: Chase E. Inc. dba 3C Old Fashion Boarding Home; Mental Health and Substance Abuse Centers of Southern Oklahoma, Inc.

Mr. Fisher moved to approve certification for the above-referenced programs. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**DISCUSSION AND POSSIBLE ACTION REGARDING ODMHSAS ADMINISTRATIVE RULES**

**CHAPTER 21. CERTIFICATION OF ALCOHOL AND DRUG SUBSTANCE ABUSE COURSES (ADSAC) ORGANIZATIONS AND FACILITATORS**

Ms. Deneka Cain reported each year the Department presents rule changes to the Board for approval. Ms. Cain stated the Department must file a Notice of Intent with the Secretary of State, and hold a public hearing and public comment session. Ray Caesar was available to answer questions from the Board.

Ms. Wood asked about the administration of methadone by dissolving in water rather than by giving a tablet. Mr. Caesar stated that there are two uses for methadone in Oklahoma. One is for addiction treatment and the other is for pain management. Pain management treatment is always done by tablet. Addiction treatment is done by liquid form in a diskette which is somewhat divertible. The DEA entered into an agreement with the drug manufacturers that no pharmacy is allowed to sell the diskettes anymore for prescription. They can only sell the tablets, which are only about five to ten milligrams, and diskettes are 40. In an effort to reduce diversion further, the diskettes must be dissolved before they leave the clinic. There will only be liquid methadone which is not impossible to divert, but it is very difficult.

Dr. Vanderslice asked about the assessment timeframe change from 30 days to 72 hours. Ms. Cain commented that it should not be a significant hardship. The requirement is that once an assessment is done, they must go into the computer, enter a date and click on a button. They are not required to submit a big report within the 72 hours.

Mr. Fisher moved to approve Chapter 21. Ms. Wood seconded the motion.

Mr. Fisher asked why these providers have concerns regarding the change in timeframe. Ms. Cain stated that she believed that these providers thought that the reporting would take more time, and the Department didn't feel that it would take much time. She also stated that the online system has been in place for a while, and the Department is easing people into going paperless to reduce fraud, to help go green and streamline the process.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**CHAPTER 22. CERTIFICATION OF ALCOHOL AND DRUG ASSESSMENT AND EVALUATIONS RELATED TO DRIVER’S LICENSE REVOCATION**

Ray Caesar was available to answer questions from the Board.

Mr. Fisher moved to approve Chapter 22. Dr. Vanderslice seconded the motion.

Mr. Fisher commented that providers must report to the court system within 72 hours after assessment, and if this only takes about 30 seconds, why not do it at the same time.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**CHAPTER 70. STANDARDS AND CRITERIA FOR OPIOID SUBSTITUTION TREATMENT PROGRAMS**

Ray Caesar was available to answer questions from the Board.

Dr. McCauley asked for an explanation of gooseflesh. Mr. Caesar stated that it is the pimpling effect when the skin rises around the follicles which is also known as goose bumps.

Dr. McCauley asked about the changes to the list of symptoms one must have to be admitted to opioid substitution treatment. Mr. Caesar stated that the order of the scale had been altered, and on the previous page of the chapter, the requirement states that at least two of the symptoms must come from numbers one through seven on the list. The intent is to make sure the physical symptoms are within those numbers because they are not as easy to fake.

Mr. McDonald asked about the language regarding the treatment of individuals who are not assessed as appropriate to receive a single take-home dose. Mr. Caesar stated Opioid Treatment Programs are required to be open six days a week, and can be closed on Sundays and holidays. The clinic must make arrangements for those individuals who are not stable enough to be given a take-home dose for the days that they will be closed. The clinic can either have a skeleton staff come in or make arrangements with another treatment facility. That is a safety measure.

Dr. Haynes moved to approve Chapter 70. Ms. Wood seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**DISCUSSION AND POSSIBLE ACTION REGARDING REPORT FROM COMMISSIONER**

Commissioner White reported on the following items:

The 4<sup>th</sup> Annual Re-entry Conference, sponsored by ODMHSAS and the Department of Corrections is designed for staff to learn about offenders re-entering the community. At the conference, the Commissioner spoke about how the Department's services can prevent people from going into the corrections system, but the main focus of the conference was on re-entry, because individuals who leave the criminal justice system without receiving the appropriate mental health and substance abuse services needed are the most likely to return to the criminal justice system.

2008 Suicide Prevention Conference - Suicide is an area that we need to work on in Oklahoma. Oklahoma is ranked 14<sup>th</sup> in the nation in suicides. It is the second leading cause of death in Oklahoma for individuals between the ages of 10 and 24. The largest group of individuals who commit suicide is males over the age of 65. The Department is working on suicide prevention across the life span not just youth suicide.

Crystal Darkness - Crystal Darkness will air January 13, 2009, from 6:30 to 7:00 pm. This event is co-chaired by Oklahoma's First Lady, Kim Henry and Wes Lane of the Burbridge Foundation. This is an important opportunity to take the discussion about addiction to a whole new level. She encouraged everyone to get the information out and remind people to watch. There will be 243 watch parties throughout the state. The big watch party in Oklahoma City will be at the Cox Center. There will be a panel discussion afterwards for questions. 211 volunteered to take the calls from across the state that will be generated from Crystal Darkness. There will be extra volunteers that night to help with referrals. Providers will be staying open extra hours that evening. AA, NA and Celebrate Recovery have been excellent partners and making sure their 1-800 numbers are available. They can help bridge the gap until people can get into treatment and recovery services, if additional services are needed. Ms. Wood asked if the DVD of Crystal Darkness will be available from the website. Commissioner White stated that they will be available from the website for purchase. The Department is trying to get the price lowered so that more people will be able to get it. The Department will have a few copies available to those with a real need who don't have the resources to purchase it.

Oklahoma Bar Association – Lawyers Helping Lawyers Counseling Assistance Program. The Commissioner did a two-fold presentation about helping lawyers recognize when someone is in trouble and what to do about it and how to help.

Leadership Oklahoma and Leadership Oklahoma City - These programs are excellent. They take individuals who are already identified as leaders in the state or Oklahoma City and provide them with new information to help them help them to become better

leaders in their state or community. The Department has been invited to speak at their functions every year for the last several years.

KTLR AM morning radio show with host Robert Grupe, Ph.D. and Donna Woods-Bauer, Executive Director of OCARTA - This is one of the only full-segment radio talk shows devoted specifically to recovery from addiction. The show takes calls from listeners, and it is amazing how much information one has the chance to share.

Children's Recovery Center - Oklahoma Youth Center and Norman Adolescent Center combined to become the Children's Recovery Center. The name change became official November 1, 2008, and there was a press event to make sure everyone knew who we are and what the name change meant.

College Connection radio interview – Commissioner White spoke about the need for prevention and awareness. In particular, early intervention is needed by the time students reach college age.

National Association of State Alcohol and Drug Addiction Directors (NASADAD) and the National Association of State Mental Health Program Directors (NASMHPD) meetings - These are associations for Commissioners in each of the 50 states. It is nice to have these associations to be able to talk to other Commissioners to learn from one another and gain information. The Deputy Commissioners participate as well. Commissioner White and Deputy Commissioner Carrie Slatton-Hodges just returned from the NASMHPD meeting in Washington D.C. It was a great opportunity to share and shine about what is going on in Oklahoma, but it is also important to learn about great programs in other states that we can do here.

ODMHSAS Employee Recognition Banquet - There are approximately 2000 ODMHSAS employees throughout the state, most of whom are providing direct services. They are critical to the adults and children in need in Oklahoma. This is the first time the Department has recognized the folks that work for us with this type of event. It was a great success, and its impact was completely underestimated. Durand Crosby headed up the planning of the event and put quite a bit of work into it. It was phenomenal.

Dr. Vanderslice moved to approve the Commissioner's Report. Dr. Bell seconded the motion.

**ROLL CALL VOTE**

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

Dr. McCauley commented that we are lucky to have a Commissioner that has the energy and support staff to be able to do all the things that she does.

**DISCUSSION AND POSSIBLE ACTION REGARDING REPORT FROM CHIEF OPERATING OFFICER**



Chief Operating Officer Durand Crosby reminded everybody about the Second Annual Combined Mental Health, Prevention and Substance Abuse Conference at the Embassy Suites in Norman, OK, February 11-13, 2009. Last year was the first year the Department combined these conferences, and it was very well received. Substance Abuse and Mental Health providers appreciated that they could go back and forth between trainings and presentations.

Mr. Crosby reported on Johnson Controls. Johnson Controls has a statewide contract to help state facilities save money through various energy savings plans. They are doing an analysis of all of the Department's facilities, and we will take a look at all of those analyses and pick and choose which of their plans the Department will participate in to save money.

Mr. Crosby stated that all of the consumer artwork on the walls of the conference room, second floor hallway, and first floor hallway now has the artist's name and descriptions of them. The Department hopes to be able to get more consumer artwork and cycle them out and continue to move them around so people can see them.

Mr. Crosby reported on the first ever employee recognition banquet called the B.E.S.T. (Building Excellent Services Together) Employee Appreciation Celebration. It is part of an overall project that leadership is working on to try to make this the best agency with the best facilities, not only in the state of Oklahoma, but also in the nation. The Department is working to recruit the best employees, retain the best employees and recognize the best employees. Mr. Crosby thanked Mr. Fisher for presenting at the training program prior to the banquet. Mr. Fisher did an excellent presentation on the history of African Americans in the state of Oklahoma. Mr. Crosby also thanked Deneka Cain, Jeff Dismukes, Donnita Heck, HRD division, Communications division, Legal division and Leadership team for their help. There were 600 individuals who attended from all over the state. Mr. Crosby announced the winners of the awards.

Central Office Employee of the Year – Tracy Leeper

Award for Excellence in Changing Attitudes – James Stone (TCBH)

Good Samaritan Award – Chaplain Charles Darland (OFC)

Award for Overall Facility Employee of the Year – Ricki Rickard (NCBH)

Award for Innovation and Quality Improvement – Steve Graham (JTCMHC)

Award for Customer Service – Liz Parker (CO)

Commissioner's Award for Excellence – Teresa Capps (COCMHC)

Mr. Crosby reported the story of Chaplain Charles Darland, winner of the Good Samaritan award. Mr. Darland was employed by the Department until he was laid off, due to a reduction in force. Because the relationship Mr. Darland had with the people at the OFC, Mr. Darland continues to work with them and minister to them on a volunteer basis.

Mr. Fisher stated that this employee recognition program was outstanding and one of the best that he has ever seen. He particularly liked the video segments on the contributions of the employees that gave a chance for people to see why they were being recognized.

Mr. Crosby stated that he was very proud of the fact that no state appropriated dollars were used to put on this program. It was all done through donations. Mr. Crosby recognized Deputy Commissioner Steven Buck for being instrumental in raising private donations for this program.

Commissioner White added to Mr. Fisher's comment and explained that the awards ceremony was set up like the Academy Awards. Each award category had five nominees, and there was a two-minute video segment for each nominee that was done by the facility director or by a member of leadership if the nominee was from the central office. By doing this, multiple people were recognized not only the winner.

Mr. Crosby turned the floor over Deputy Commissioner Steve Buck for the Legislative update. Deputy Commissioner Steve Buck also reported on additional items.

Deputy Commissioner Steve Buck reported on the following items:

State Charitable Campaign - This year the combined agency contributions were up 30% over last year. This is the first year for the Commissioner's Challenge which challenged employees to donate over \$500 per year. Last year three employees donated over \$500, and this year that number was in the teens. Those that met the Commissioner's Challenge will be invited to a breakfast cooked by Mr. Crosby and Deputy Commissioner Buck.

Oklahoma County Jail Task Force - Deputy Commissioner Carrie Slatton-Hodges, Dr. Ardoin, Chief Operating Officer Durand Crosby and Deputy Commissioner Buck had the opportunity to participate in the Task Force and give expert advice. Some of the concerns expressed are remaining proactive with the people who are incarcerated with mental health and addiction issues. The preliminary findings have been released, and it is anticipated that the Department will have the opportunity to participate in the future.

The Oklahoma Academy's official release of the recommendations from the October 2008 Town Hall summit - Included in their recommendations is an endorsement of the Smart On Crime Initiative which is a cornerstone of the Department's budget request. The recommendations will be released on Tuesday, January 13, 2009. The Town Hall summit included citizens of the state of Oklahoma not just mental health and corrections officials. The Department made their appeal based upon economics and doing the right thing as far as humanitarianism goes. He encouraged everyone to watch the media outlets closely for the release of the Academy's recommendations.

Budget Hearing cycle - In mid-November, the Department completed their budget hearing with the Office of State Finance and Treasurer Meacham. Both the Senate and House Budget Hearings will be on Wednesday, January 14, 2009. It is a very exciting and nervous time due to the current budgetary outlook. It is very important for the Department to stay consistent with its message that treatment of people with mental illness and addiction and prevention and early intervention pays dividends for the state of Oklahoma. It alleviates the pressure on other more costly systems such as corrections, homelessness, and emergency department utilization. Investment in ODMHSAS saves the state significantly elsewhere. The state legislature will have \$309 million less than they had last year to appropriate. The Governor's budget will be based

upon that number and released in early February. In late February, the final report of the Equalization Board that will give the legislature their final number that they can appropriate, will be released. There is some uncertainty at this time not as to how these budgetary figures will finally settle. The state's budget is based on oil prices, and oil prices are not that good right now. Governor Henry wants to do surgical cuts to the budget and keep healthcare services, including ODMHSAS, in tact. It has been very encouraging in talking with current appropriations chairs, Dr. Cox on the House side and Senator Brian Crain on the Senate side. As an agency, the Department will continue to promote those items presented at the September Board meeting. One of the focal points will be that maintenance is absolutely essential to this agency. The legislature must provide the Department the resources to continue providing services at the same level as before. The Department believes that Smart On Crime and the Children's Coordinated Budget are the type of programs that will provide more value for the state as a means of saving Oklahomans significantly in other more expensive systems of care. Deputy Commissioner Buck stated that last year's total state budget was just over \$7 billion. The budget this year is expected to be around \$690 million, based upon the first equalization estimate.

Legislative update - Due to the importance of the budget discussion, leadership has worked very hard to put forth only those bills they feel were absolutely essential, as far as agency request bills. Last year they put forth six or seven bills. This year they are putting forth only one 43A bill. There is input from the coalition of advocates, General Counsel Dewayne Moore and Deputy Commissioner Slatton-Hodges which relates to the treatment of individuals who are in need of treatment and might not be capable of making their own decisions. There are some technical aspects of the bill that relate to how the Department does business and are minor changes. Deputy Commissioner Buck will also report on other bills introduced by others not at the Department's request but will impact the Department as well. Some of the bills are optimistic, and some are concerning to the Department. At the time of this meeting, only about 10% of bills had been filed. By the time of the March Board meeting, Deputy Commissioner Buck will be able to provide a thorough list of bills the Department is tracking.

The federal stimulus package - Included in the stimulus plan are discussions related specifically to federal participation in state Medicaid payments. There are several scenarios on how this could play out. One of them being that they could choose to fund Oklahoma in a way that could significantly relieve pressure on the Oklahoma Health Care Authority, and state money needed for that program could be freed up to support initiatives like ours. Our Medicaid match percent could go up. The federal government could increase their level of participation which means that the state would not have to pay as much.

Mr. Fisher moved to approve the report from the Chief Operating Officer. Mr. McDonald seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**DISCUSSION REGARDING THE REPORT FROM THE CORPORATE ACCOUNTABILITY COMMITTEE**

Mr. McDonald reported that the Corporate Accountability Committee met and went over both the Advocate General and Inspector General's report. Mr. McDonald commented that they discussed a particular provider agency but didn't see anything compelling them to recommend executive session. He also commended the Department on the fact that there were no allegations against staff in either October or November. He stated that it is incredible how far we've come.

**DISCUSSION AND POSSIBLE ACTION REGARDING THE OFFICE OF CONSUMER ADVOCACY REPORT**

Ms. Salazar stated that there is one update to her report. The plan of correction for Investigation 89, page two of her report, had been submitted and accepted. There were no other updates or additions to her report.

Dr. Vanderslice asked about the plans of correction, why they would not be accepted and what is looked for in a plan. Mr. Crosby responded that, generally, the plan of correction, submitted by the entity to Provider Certification, must address all of the allegations and show a satisfactory response. This could mean training, personnel action or change in policy or procedure. If Provider Certification does not feel that the plan of correction adequately addresses all of those allegations, Mr. Hudgens will then let that provider know and they have to make those changes. If, ultimately, the provider doesn't make those changes, then the Department will look at revoking their certification. Dr. Vanderslice asked if it is a team of people that look at the plans of correction or just Mr. Hudgens. Mr. Hudgens stated that it is definitely a team that includes the Consumer Advocate's office and Provider Certification that looks at the plans of correction submitted. He added that one of things required in plans of correction is an explanation of what their ongoing system will be to monitor continued compliance so that the allegation does not re-occur.

Commissioner White explained that when a plan of correction comes in and it is not accepted, Provider Certification works with the provider and gives them technical assistance and lets them submit a second plan of correction.

Mr. McDonald moved to approve the Office of Consumer Advocacy report. Dr. Haynes seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

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

Mr. McDonald reported on the Performance Improvement Committee meeting. He stated Oklahoma County Crisis Intervention Center (OCCIC) had been tracking injuries to staff. OCCIC used the P-D-S-A model to reduce staff injuries.

P – Plan a change aimed at improvement

D – Do the change

S – Study the results

A – Act on the change. Adopt, abandon or run through the cycle again.

OCCIC made some changes, trained more CAPE trainers and added a nurse manager to every unit. Staff injuries went down from 31 in FY02 to four in FY04, but they went back up to 18 in FY05. There appears to be a three-year cycle, and turnover is a contributing factor to the increase in staff injuries. They adopted the change but continue to monitor. When the problem arises again, they go back to the Plan phase and begin the process of improvement. Dr. McCauley stated that it is not surprising at the high turnover rate due to the stress of the environment.

This concluded Mr. McDonald's report.

## **DISCUSSION REGARDING THE REPORT FROM THE FINANCE COMMITTEE**

Mr. Turner stated that the Finance Committee met on January 6, 2009. Mr. Turner stated that the committee is very blessed to have Mr. Carson and Dr. Haynes who are very insightful and ask good questions. Mr. Turner reported that collections by some of the state facilities billing the federal government are behind but efforts are being made to catch up. There is a new billing system that should be available in the summer that should be very helpful. He also stated that it is time for the state's annual audit.

This concluded Mr. Turner's report

## **DISCUSSION AND POSSIBLE ACTION REGARDING MONTHLY FINANCE REPORT**

Commissioner White introduced Richard Bowden as Interim Chief Financial Officer. He has been with the Department for many years as the Federal Funds Administrator. As the Federal Funds Administrator, he has been responsible for accommodating the state's auditors when the Department is audited. Commissioner White stated that the auditors fight over who gets to audit ODMHSAS because Mr. Bowden keeps our federal funds in such impeccable order, and it is easier to audit.

Mr. Bowden stated that there were no additions to the Finance Report. He explained budget revisions one and two. Budget revision one is the reallocation of unused funds from the prior fiscal year. Budget revision two is new money from new federal grants and some budget corrections. Mr. Bowden reiterated that the state audit of the Department is underway and very active at this point.

Dr. McCauley asked if there is anything that the Department can do to prevent losing money from the legislature. Commissioner White explained that the Department goes to the legislature and explains that if ODMHSAS services are cut then it will cost the state elsewhere, either in Corrections, emergency room visits or foster care. The

Department is also very good at writing for federal grants as well. Dr. Bell asked about how the agency promotes its needs and commented how other agencies are releasing big press stories about their needs right now. Commissioner White stated that she believes ODMHSAS has better timing. There will be a big release regarding the State of the State Children's Behavioral Health closer to the time that the legislature is in session. Many of the stories being released now are during the holidays and not as many people read during that time. Policymakers are bombarded with information, and it is important to talk to them early, but it is equally important to be one of the last people they hear from.

Dr. Haynes asked about the Department of Corrections and its request for new staff and beds. Commissioner White responded that the legislature only has so much money to spend, and the Department must make the case that they can invest less money more effectively with ODMHSAS and shrink the need at the DOC. Hopefully, the Smart On Crime initiative will make that clear and show that early investment and early tools in those communities will keep individuals from entering the corrections system. The Director of the Department of Corrections has been very clear and has written editorials that mental health and substance abuse is a huge cause of the prison population, which sends the same message as ODMHSAS. Dr. Haynes asked how far along the DOC is in their building program. Commissioner White stated that, to her knowledge, they are just in the planning stages and have not started building anything, but there are some facilities that they are rehabbing.

Mr. Turner commented that now is the time to raise taxes on alcoholic beverages to give the state a solid foundation to fund programs for prevention and early intervention in young people.

Dr. Haynes moved to approve the Monthly Finance Report. Mr. McDonald seconded the motion.

**ROLL CALL VOTE**

Dr. Bell	Yes	Dr. McCauley	Yes
Dr. Haynes	Yes	Mr. McDonald	Yes
Mr. Turner	Yes	Dr. Vanderslice	Yes
Ms. Wood	Yes	Mr. Fisher	Yes

Mr. Fisher asked about discharge planning done by the Department of Corrections with regards to mental health. Commissioner White stated that a portion of that planning is already done by ODMHSAS. The Department has placed discharge planners in the three largest prisons. There is not enough so DOC is doing their own as well, but ODMHSAS has placed co-occurring therapists who can treat both mental health and addiction as well as discharge planners that link them with our network of providers. The discharge planners also help them find a place to live and find work.

**DISCUSSION AND POSSIBLE ACTION REGARDING THE NOMINATION AND ELECTION OF BOARD OFFICERS**

Dr. McCauley stated that he, Mr. Turner, Dr. Haynes, and Gail Wood were on the nominating committee for nomination of the chair and vice chair. He stated that the

nominating committee would like to present to the Board the nomination of Joel Carson as Chair and Dr. Vanderslice as Vice Chair. Dr. McCauley indicated that these were the nominations that came forth from the nominating committee.

There were no nominations from the floor.

Mr. McDonald moved to accept the nomination of Joel Carson as Chair and Dr. Vanderslice as Vice Chair. Dr. Bell seconded the motion.

**ROLL CALL VOTE**

Dr. Bell	Yes	Dr. McCauley	Yes
Mr. Fisher	Yes	Dr. Haynes	Yes
Mr. McDonald	Yes	Mr. Turner	Yes
Dr. Vanderslice	Yes	Ms. Wood	Yes

**PRESENTATION**

Deputy Commissioner Steve Buck introduced Jessica Hawkins, Director of Prevention Services. Ms. Hawkins presented the Oklahoma Prevention Needs Assessment Survey.

Ms. Hawkins stated that the survey is coordinated at the community level with the Department's network of prevention providers. The Area Prevention Resource Centers work very closely with the schools to recruit them to participate. They help administer the survey and collect the surveys and submit them back. They are also the users of the data. It gives the communities the capacity to know what is going on with young people in their areas so they can design prevention programs that fit their areas.

The OPNA surveys are conducted in the spring semesters of even years. It is done in collaboration with the Department of Health who administer the Youth Risk Behavior Survey in odd number years. The survey is free of charge, and it is offered to all public, private, or charter schools. The survey is designed for sixth, eighth, tenth and twelfth grade.

This survey is different because it is based on a risk and protective factor model. The process was developed by the Social Development Research Group out of the University of Washington. The survey instrument itself was developed as part of a collaboration of several states funded by the Center for Substance Abuse Prevention. The survey really looks at risk and protection which is not currently collected with any other instrument on a statewide basis. Those in the prevention field are trying to change is the way that prevention programs are selected. They are looking at what risks exist in their communities, how do we reduce those risks and how do we select programs that are specific to each risk category not just generically across the board. This survey allows us to do that.

This report is generated on the state, regional, county and school district level. All of these reports are kept anonymous except for the state level report. ODMHSAS provides some technical assistance to these communities once the report is released to make sure that communities use the data in a way that is meaningful to them. It is also

to make sure that the programs implemented are effective and aimed at the right population for the right needs.

There are risk factors and protective factors for substance abuse. Programs can be designed and measured on how certain communities are doing on each level of risk.

Some of the risk factors are:

- Drug use
- Delinquency
- School dropout
- Teen pregnancy
- Violent behavior

They are organized into domains. It is important to select prevention programs for the correct domain. The domains are as follows:

- School
- Community
- Family
- Peer/Individual

Listed below are some of the protective factors.

- Bonding to family, community and school
  - Develop skills
  - Provide prosocial opportunities
  - Reinforce prosocial involvement
- Healthy beliefs and clear standards by family, community, school, and peer group.
- Individual Characteristics
  - Academic achievement
  - Resilient temperament

By measuring these factors, communities can see what they are doing well and increase activities in those area. There are prevention programs that increase protective factors.

There was an increase in participation in the survey throughout the state of Oklahoma in 2008. In 2008, there were 60,720 students who participated in the survey which is an increase of 18,183 over 2006. Participation is further broken down by grade, gender and ethnicity demographics. There were 686 school sites that participated which included large, small, rural and urban districts, as well as charter and private schools. Dr. McCauley asked if there were any homeschoolers involved in the survey. Ms. Hawkins stated that she did not believe that the survey was offered to those exclusively homeschooled, but if a homeschooler was participating in some level of structured school through a district, then it is possible that he or she did participate.

Ms. Hawkins stated that due to the agreement with the school districts that she can not report the data for specific school districts. Commissioner White explained that one of the reasons is because school districts won't participate if they think the data will be publicized because they think it makes them look bad. ODMHSAS had to agree to



publicize the data only on the state level to get participation. She encouraged everyone to get involved at their school district and educate them that if they choose to publicize their own data that it won't make them look bad. It will make information known that will help with prevention. Deputy Commissioner Buck clarified that schools can voluntarily choose to publicize the results themselves to the community so the community can help them meet their needs. Ms. Hawkins stated that the Department strongly encourages them to do so and works closely with the Area Prevention Resource Centers to break down the stigma.

#### Key Highlights for Substance Use:

- Alcohol is still the number one drug of choice for all participants
- Alcohol use in a lifetime was indicated among half of 8th graders (50.8%), 67.1% of 10th graders, and 75.5% of 12th graders.
- Past 30-day alcohol use was indicated among nearly a quarter (23.4%) of 10th graders, 35.6% of 10th graders, and 45.9% of 12th graders.
- Binge drinking was indicated among 21.8% of 10th graders and 29.6% of 12th graders.
- 13.2% of 12th graders demonstrate alcohol treatment needs by answering "yes" to at least 3 alcohol treatment questions and using alcohol on 10 or more occasions.
- Average age of onset for alcohol use is around 12 years old (12.5 for males, 12.9 for females).
- Social sources are the main source of alcohol for survey participants, and most consume alcohol at a home (theirs or a friend's) and/or party setting.

#### Notable exceptions to 2006 data:

- Lifetime and past 30-day use of inhalants among students in all grades has increased.
- Past 30-day prescription drug use (without a medical need) is higher than marijuana use among 6th and 8th graders, second only to alcohol in grade 8.

Oklahoma risk factor profiles are generally consistent with the 8-state norm group. Students in all grades fall within a range of 49% to 51% as being at "high risk" meaning that they have more than a specified number of risk factors operating in their lives. This range of risk represents an increase in all grades from 2006.

- Notable risk factors include:
  - An increase in 10th and 12th graders reporting community disorganization.
  - An increase in 12th graders reporting favorable parental attitudes to anti-social behavior and drugs.

This information will be disseminated to the Area Resource Prevention Centers that will receive a regional report of what is going on in their area. It will also be put on the ODMHSAS website, and there will be a media release. There will be some key stakeholder presentations as well. Ms. Hawkins stated that there will be printed copies of the results of the survey available at the Resource Center.

Prevention planning includes working the State Epidemiological Workgroup. They will look at the data and give it meaning so that we can provide analysis to the community. The communities will be able to use the information and choose prevention programs that relate to their needs.

Dr. McCauley asked if the Commissioner could get the next set of data for the Board when it comes out.

**NEW BUSINESS**

There was no new business.

**ADJOURNMENT**

Dr. McCauley announced that the next Board Meeting would be March 13, 2009.

Dr. Vanderslice moved to adjourn the meeting. Mr. Fisher seconded the motion.

ROLL CALL VOTE

Dr. Bell	Yes	Dr. McCauley	Yes
Dr. Haynes	Yes	Mr. McDonald	Yes
Mr. Turner	Yes	Dr. Vanderslice	Yes
Ms. Wood	Yes	Mr. Fisher	Yes

The meeting adjourned at 11:03 am.

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Larry McCauley, Ed.D., Chair

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Joel Carson, Vice-Chair

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Brent Bell, D.O.

\_\_\_\_\_  
Bruce Fisher

\_\_\_\_\_  
Henry Haynes, Ed.D.

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Mary Anne McCaffree, M.D.

\_\_\_\_\_  
Robert McDonald

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J. Andy Sullivan, M.D.

\_\_\_\_\_  
Jack Turner

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Ronna Vanderslice, Ed.D.

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Gail Wood