

**Region 3 Behavioral Health Board  
Meeting Minutes – November 20, 2013**

**Region 3 Mental Health Board Members Attending:** Chuck Christiansen, Joy Husmann, Todd Hurt, Ross Mason, Elda Catalano, Jeri Gowen, Phyllis Vermilyea

**Scribe:** Joy Husmann

**Region 3 Board Members Absent:** Chris Allgood, Barbara Harkins, John Hill, Mark Shigeta, Carlos Bilbao, Linda Dripps, Lisa Koltes, Jose Valle, Penny Jones, Steve Rule

**Regional Advisory Committee Attending:** Joe Langan – Co-Chair, list of RAC members and guests available upon request, Rosie Andueza-DHW Central Office BH, Aaron Darpli-Optum Idaho, Gina Westcott-DHW-BH-Hub Administrator for Region 3, 4, & 5, LaDessa Foster-BPA

Agenda Item	Discussion	Action/Next Steps
Introductions, sign-in, distribute handouts	Chuck Christiansen called the meeting to order and welcomed everyone at 10:05 AM. Sign-in sheet and handouts were provided. Chuck asked for introductions around the table.	
Review Agenda and Previous Meeting Notes	Review minutes from October 30, 2013. No corrections.	Motion to approve, seconded, motion passed unanimously.
State Planning Council	Elda will forward a draft document onto the Board for review regarding SPC's integration and transformation plan. There hasn't been a final decision on the legislative event combined with a RAC. Some of the Regions are doing local legislative events with their Boards.	State Planning Committee Meeting is January 14-16, 2014 <a href="http://www.mentalhealth.idaho.gov">www.mentalhealth.idaho.gov</a>
Division of Behavioral Health Regional Update	Todd welcomed Gina Westcott to our meeting. Todd reviewed the Dashboard. Mental Holds are stabilizing back down to around 90 per month. There have been a few snags in getting signed orders from the judge's, however, these have been worked out. Todd reported that we have scheduled a CIT Training on December 9 <sup>th</sup> in Payette; however, there hasn't been a great deal of response. Gem County is very interested in this training; therefore we will probably shift the training to Gem County. Todd reported that they jointly trained in Region 3 & 4 on CIT for St. Luke's ER's. Todd is also working with Phyllis to provide CMH CIT Prevention training at the Nampa School District. Jose will present on it at the next meeting. Joy wanted to clarify that this training would also be available to Vallivue as requested by Jeri. Todd reported yes they could begin the discussions. Joy reported that the Gem County Police Dept. was requested by the State Dept. of Education to present at the Prevention Conference on crisis training they provide to schools	<a href="http://www.mentalhealth.idaho.gov">www.mentalhealth.idaho.gov</a>

	<p>when there is a bomb threat or other emergency situation. Jeri explained that there is a comprehensive team at Vallivue that has requested crisis training. Todd reported that his team has transitioned around 35 clients out into the community who have Optum. There has been a Peer Advisory Committee in Region 3 to assist clients and there is some trauma informed care being developed. The 18-211/212 project has been finalized on the procedural side and the final project should be implemented within the next few months. Todd briefly reviewed the 18-211/212 process. Todd is also working with Phyllis and the Nampa School District to strengthen the process for Child Welfare.</p>	
Commissioners Update	<p>Commissioners were not in attendance. Joy reported that Commissioner Bilbao is very excited about CIT Training coming to Gem County.</p>	
RAC – Regional Advisory Committee on Substance Use Disorders	<p>Joy reported that the RAC website is updated. Joy explained that there has been a \$4,000 RAC Budget that is set aside for member education. Joy will be asking the Board for ideas on how to best to allocate that budget for education. The Prevention Conference and ICADD are both building robust programs. The Prevention Conference April 17-18, 2014 in Sun Valley, ICADD will be held May 12-16, 2013 in Boise at the BSU Student Union Building, the Northwest Alcohol Conference will be held July 16-18, 2014 in Boise at the Grove. CIT 40 hour Training will be held March 31-April 2, 2014. There is also an Idaho State Liquor Division \$10,000 grant available and the application is attached to the packet. Anonymous People will be playing on December 3<sup>rd</sup> at the Capitol at 10am. Todd inquired about the status of the Juvenile Drug Court as well as the movement towards a Juvenile Mental Health Court. Elda reported that there are currently nine participants in Juvenile Drug Court and they are looking to add more participants as funding increases. The Juvenile Mental Health Court is still in the development phase.</p>	<p>Please send your ideas to Joy as to budget allocation for scholarships to the listed conferences.</p> <p><a href="http://www.rac3.dhw.idaho.gov">www.rac3.dhw.idaho.gov</a>  <a href="http://www.beinparents.org">www.beinparents.org</a>  <a href="http://www.substanceabuse.idaho.gov">www.substanceabuse.idaho.gov</a>  <a href="http://www.preventionidaho.net">www.preventionidaho.net</a>  <a href="http://www.spainidaho.org">www.spainidaho.org</a>  <a href="http://www.samhsa.gov">www.samhsa.gov</a></p>
IDHW SUD's Central Office	<p>Due to the transition into WITS, the budget numbers aren't correct; however, PWWC is still trending high. Rosie reported that Commissioner Tom Stroschein from Latah County will be reporting on Recovery Centers to the DHW Board. Rosie reported that they will be showing Anonymous People at the Capitol on December 3<sup>rd</sup></p>	<p>If you are interested in becoming part of the planning process/committee for a Recovery Center, please contact Joy.</p> <p>Recovery Oriented System of Care: <a href="http://www.ccar.us">www.ccar.us</a></p>

<p>at 10am and she would like to move forward with a Recovery Center planning committee for Region 3. 10 copies of Anonymous People will be allocated to the CRDS' in each Region. Joy reported that there has been significant interest in Region 3 for a Recovery Center planning committee. Rosie said there is some discussion going on to have a mental health and SUD's Recovery Center. Ethics Training for Recovery Coaches is occurring right now statewide via video conference. Region 3 has 10 in attendance. Rosie reported that the grant for Recovery Coaching also includes money for trauma informed care education. She is hoping that in early Spring they will be able to launch something.</p>	<p>www.recovervcoaching.dnwidaho.gov</p>
<p>Greg Lewis reported that the budget is in the packet and that they are also transitioning into WITS successfully. The budget is separated by the old model and the new model with WITS billing. Providers are still learning WITS so there may be claims that are not currently showing up yet. WITS allows for direct client referral to treatment and expedites the process. Joy inquired about housing referrals and IDOC uses both in-network providers as well as many faith-based housing providers. John Carroll reported that Allan West is out in the field trouble-shooting any WITS problems that providers are encountering. Please contact John or Allan with any questions. Todd inquired about the discharge planning process and contact information. Greg will provide the information to Joy via email.</p>	<p>Greg will provide the Re-entry Manager's contact information to Joy via email.</p>
<p>It was decided to cancel the December 2013 Behavioral Health Board Meeting. The November 2014 meetings will be held on November 19, 2014 and the December 2014 meeting will be cancelled.</p>	<p>No Board meeting in December 2013. November 19, 2014 Board meeting will be held and the December 2014 meeting is cancelled.</p>
<p>Joy prepared a list of potential sub-committees that have been included in the Board packet. Joy will put together a survey tool for members to choose from and provide input. She will include those results at the January 2014 meeting. Joy would like to allow all RAC and MH Board members to have the opportunity to provide feedback on sub-committees and will be contacting them during the months of December and January. It was decided to have only 2 or 3 sub-committees with goals, objectives, and time limits.</p>	<p>Joy will develop a survey tool, provide that via email, and provide results at the January 22, 2014 meeting.</p>
<p>Recovery and Resiliency Training will be planned for January 2014.</p>	<p></p>
<p>The voice recorder battery went dead so this is from recollection.</p>	<p></p>

	<p>Gina Westcott provided information from Region 4's Board meetings where a PowerPoint presentation was developed based on the proposed legislation for 2014 through their Transformation Sub-committee. There was a lengthy discussion surrounding what the various regions are doing with regards to transformation. The current proposed legislation allows for the Boards to stand alone or join with another agency such as a Health District where there would be immediate overlap in Board members. Gina has agreed to provide this presentation at the January 22, 2014 meeting.</p>	
Next Meeting	<p><i>No December 2013 Meeting! Next meeting is January 22, 2014 from 10:00 am to 12:00 pm. Meeting adjourned at 12:00 PM.</i></p>	<p>Motion to adjourn, seconded motion passed unanimously. Meeting adjourned.</p>

## Region III Dashboard Report

	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13
<b>Crisis</b>											
After hours and Weekend calls	220		242	316	272	330	295	239	297	223	216
Calls requiring DHW response	205		182	250	235	342	273	225	223	167	142
Number Holds	81	80	88	94	86	104	93	79	85	76	92
Diverted	3	7	7	4	2	6	4	2	1	0	3
% Diverted	4%	9%	8%	4%	2%	6%	4%	3%	1%	0%	3%
Number 1st DE's (DHW)	78	73	81	90	84	98	89	77	84	76	92
Negative	24	27	29	23	25	27	39	24	36	26	34
% Negative 1st DE's	31%	37%	36%	26%	30%	28%	44%	31%	43%	34%	37%
Number 2nd DE's (Private)	54	46	52	67	59	71	50	41	48	46	58
Negative	19	24	19	25	23	37	30	21	27	30	27
% Negative 2nd DE's	35%	52%	37%	37%	39%	52%	60%	51%	56%	65%	47%
Number 3rd DE's (DHW)	36	18	25	30	24	31	13	15	16	6	20
Negative	18	13	13	20	16	19	9	12	9	0	15
% Negative 3rd DE's	50%	72%	52%	67%	67%	61%	69%	80%	56%	0%	75%
Number committed	14	8	15	22	15	15	10	9	11	7	14
Hospital Admissions (SHN, SHS)	13	7	11	12	4	6	8	4	3	6	13
% of Holds Committed	17%	10%	17%	23%	17%	14%	11%	11%	13%	9%	15%
<b>Intake</b>											
Non-Episode contacts total	173	165	139	177	155	143	151	133	178	184	181
Intake Assessments	18	13	21	26	25	19	17	18	27	27	17
18211's.		5	4	5	2	5	4	2	0	2	3
18212's	3	10	8	4	2	2	5	5	5	6	4
19-2524 Evals Ordered											
Completed 19-2524 Evals- Central Office					38	33	44	35	45	44	51
Completed 19-2524 Evals- Regio	21	20	21	16	4	1	58	53	63	50	57
Hospital Discharges(SHN,SHS)	5	12	8	17	9	3	7	6	16	11	17
Regional Admissions	14	16	17	19	14	17	13	16	25	11	14
Regional Discharges	17	20	18	18	17	15	17	18	49	38	19
<b>Caseload by Team</b>											
ACT	56	57	55	55	54	54	53	53	56	55	51
FACT	18	17	18	19	19	20	20	22	21	21	25
NP clinic	117	130	130	168	133	135	139	135	136	127	129
Doctor Kimsey Clinic	158	162	166	133	167	164	165	157	129	125	124
Doctor Banta Clinic	19	4	0	0	0						
Caldwell Total	368	370	369	375	373	373	373	367	342	328	329
Payette Total	113	116	118	118	124	125	124	124	119	115	115

	Feb-13	Mar-13	Apr-13	May-13	Jun-13	Jul-13	Aug-13	Sep-13	Oct-13	Nov-13	Dec-13
Med Only Clinic Total											
Program Total	601	607	622	634	614	623	619	599	593	565	577
Fact+ACT+Med-Only						498	501	491	461	443	444
Appointments Kept	437	332	359	316	327	303	365	263	379	229	341
Prescriber No-Show	42	38	39	46	36	51	52	36	60	28	64
% No-Show	10%	11%	11%	15%	11%	17%	14%	14%	16%	12%	19%
# Of Applications	119	100	73	106	131	144	163	136	126	116	154
# Of Clients	79	64	66	72	94	101	109	96	92	87	103
\$ Value of Meds	\$168,754	\$143,855	\$131,593	\$132,699	\$175,948	\$209,796	\$229,566	\$196,896	\$167,523	\$202,125	\$244,528
Stock Meds	\$1,228.13	\$ -	\$1,792.82	\$ -	\$2,650.74	\$ -	\$8,228.59	\$ -	\$2,446.58	\$ -	\$5,288.88
Lab Costs	\$ 400.46	\$ 193.60	\$ 132.63	\$ 163.92	\$ 124.36	\$ 200.88	\$ 142.97	\$ 301.16	\$ 356.55	\$ 425.96	\$ 312.47
PATH Funds	\$ 950.00	\$ -	\$ 525.00	\$2,195.00	\$ 700.00	\$ 431	\$ 1,195	\$ 300	\$ 1,410	\$ -	\$ 2,385.00
# of Applications			113	113	109	1 per	2	1	3	0	4
# Medicaid Clients						109	112	89	62	43	42
% Medicaid						22%	22%	18%	13%	10%	9%

IDOC FY14 Substance Use Disorder Utilization Report  
Pre WITS Paid Expenditures 6/7/13 - 9/30/13

Treatment	D1	D2	D3	D4	D5	D6	D7	Grand Total
Assessment ONLY	\$11,780.48	\$4,953.56	\$15,961.32	\$31,522.27	\$930.04	\$9,474.00	\$9,126.78	\$83,748.45
Institution Assessment	\$7,773.51	\$2,430.49	\$23,932.88	\$7,700.71	\$0.00	\$8,357.92	\$5,158.60	\$55,354.11
Institution Assessment - Travel	\$130.27	\$561.33	\$2,223.50	\$27.68	\$0.00	\$162.92	\$138.62	\$3,244.32
IDOC - Pre-Treatment Services	\$7,062.63	\$4,987.66	\$22,562.65	\$33,062.30	\$6,329.22	\$12,521.84	\$9,007.04	\$95,533.34
IDOC - Stage 1: Level I - Outpatient	\$20,896.69	\$16,433.23	\$40,211.04	\$103,295.63	\$13,275.05	\$23,099.76	\$20,849.66	\$238,061.06
IDOC - Stage 1: Level II - Intensive Outpatient	\$2,934.26	\$15,419.22	\$20,842.16	\$34,808.70	\$5,701.67	\$23,618.46	\$11,165.89	\$114,490.36
IDOC - Stage 2: Level I - Outpatient	\$20,057.55	\$17,883.81	\$46,384.14	\$65,061.10	\$28,648.84	\$30,031.28	\$16,405.28	\$224,472.00
IDOC - Stage 2: Level II - Intensive Outpatient	\$1,424.30	\$23,477.97	\$9,835.88	\$25,919.33	\$1,700.18	\$12,166.20	\$7,910.10	\$82,433.96
Education (Medicaid Clients)	\$0.00	\$0.00	\$99.30	\$0.00	\$0.00	\$0.00	\$0.00	\$99.30
Level III.2 - Adult Detoxification	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total</b>	<b>\$72,059.69</b>	<b>\$86,147.27</b>	<b>\$182,052.87</b>	<b>\$301,397.72</b>	<b>\$56,585.00</b>	<b>\$119,432.38</b>	<b>\$79,761.97</b>	<b>\$897,436.90</b>

**Support Services**

Child Care	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Drug Testing	\$7,924.50	\$9,220.50	\$16,051.50	\$35,032.50	\$7,553.40	\$3,294.00	\$526.50	\$79,602.90
IDOC - Case Management (Basic & Intensive)	\$1,262.55	\$2,030.81	\$5,775.09	\$27,742.07	\$3,284.40	\$12,278.78	\$5,231.83	\$57,605.53
IDOC - Life Skills (Individual & Group)	\$0.00	\$112.88	\$93.56	\$1,226.24	\$0.00	\$393.60	\$104.96	\$1,931.24
Oral Interpreter / Sign Language (includes travel)	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$200.00	\$0.00	\$200.00
Staffed Safe and Sober Adult Housing	\$18,469.00	\$12,653.00	\$11,535.00	\$60,703.00	\$7,348.00	\$2,985.00	\$1,552.50	\$115,245.50
Transportation	\$94.98	\$2,513.04	\$1,855.28	\$20,528.10	\$1,648.86	\$5,953.92	\$3,873.90	\$36,468.08
<b>Total</b>	<b>\$27,751.03</b>	<b>\$26,530.23</b>	<b>\$35,310.43</b>	<b>\$145,231.91</b>	<b>\$19,834.66</b>	<b>\$25,105.30</b>	<b>\$11,289.69</b>	<b>\$291,053.25</b>

**Administrative Cost**

Direct Client Services - Screening & Chart Review								\$144,252.67
<b>Total</b>								<b>\$144,252.67</b>
<b>Grand Total</b>	<b>\$99,810.72</b>	<b>\$112,677.50</b>	<b>\$217,363.30</b>	<b>\$446,629.63</b>	<b>\$76,419.66</b>	<b>\$144,537.68</b>	<b>\$91,051.66</b>	<b>\$1,332,742.82</b>
Average Cost per Unit of Care	\$50.23	\$48.88	\$42.32	\$29.90	\$40.26	\$44.82	\$42.06	\$4.56
Average of Length of Stay	220	274	220	190	243	242	228	214

Unique Client Count 6/7/13 - 9/30/13	
19-2524	795
19-2524 Medicaid	72
Risk of Revocation	369
Risk of Revocation Medicaid	35
Rider Re-Entry	271
Rider Re-Entry Medicaid	6
<b>Total:</b>	<b>1,548</b>

Report is based on BPA's Claims Report for period of 6/7/13 to 1/2/14.  
Expenditures reported are based on provider region and may not reflect district expenditures

**IDOC FY14 Substance Use Disorder Utilization Report**

Post WITS Paid Expenditures 10/1/13 - 12/31/13

Treatment Services	D1	D2	D3	D4	D5	D6	D7	Out of State	Grand Total
Alcohol or Drug Assessment	\$ 35,464	\$ 8,432	\$ 23,538	\$ 45,471	\$ 3,869	\$ 7,341	\$ 8,056	\$ 7,787	\$ 139,957
Education (Medicaid Supplemental)			\$ 66						\$ 66
Intensive Outpatient (Education)			\$ 33				\$ 58		\$ 91
Intensive Outpatient (Individual)	\$ 1,550	\$ 2,678	\$ 1,575	\$ 5,213	\$ 1,381	\$ 4,567	\$ 4,977	\$ -	\$ 21,941
Outpatient (Education)				\$ 87					\$ 87
Outpatient (Individual)	\$ 8,462	\$ 7,291	\$ 9,833	\$ 18,514	\$ 2,670	\$ 8,348	\$ 6,883	\$ 149	\$ 62,151
OP and IOP (Group)	\$ 18,531	\$ 35,062	\$ 66,598	\$ 178,813	\$ 23,203	\$ 36,790	\$ 31,602	\$ 932	\$ 391,530
Pre-Treatment Services (Education)	\$ 840		\$ 1,292	\$ 646	\$ 70	\$ 41	\$ 918	\$ 224	\$ 4,031
Pre-Treatment Services (Individual)	\$ 6,250	\$ 2,564	\$ 7,799	\$ 11,144	\$ 1,918	\$ 4,614	\$ 6,366	\$ 816	\$ 41,471
Travel for Professionals	\$ 158		\$ 372	\$ 1,876	\$ 485	\$ 459	\$ 10	\$ 17	\$ 3,376
<b>Total</b>	<b>\$ 71,255</b>	<b>\$ 56,028</b>	<b>\$ 111,106</b>	<b>\$ 261,763</b>	<b>\$ 33,596</b>	<b>\$ 62,160</b>	<b>\$ 58,870</b>	<b>\$ 9,924</b>	<b>\$ 664,701</b>
<b>Recovery Support Services</b>									
Adult Safe & Sober Housing	\$ 18,700	\$ 10,075	\$ 11,077	\$ 71,216	\$ 10,847	\$ 4,566	\$ 2,426		\$ 128,906
Case Management (Basic and Intensive)	\$ 372	\$ 384	\$ 1,376	\$ 13,997	\$ 900	\$ 6,225	\$ 2,625		\$ 25,879
Drug/Alcohol Testing	\$ 2,673	\$ 3,537	\$ 7,236	\$ 15,309	\$ 1,350	\$ 567	\$ 756	\$ 122	\$ 31,550
Life Skills (Individual)	\$ 20					\$ 656			\$ 676
Staffing (Planned Facilitation)				\$ 8		\$ 89	\$ 19		\$ 116
Transportation of Client	\$ 50	\$ 30	\$ 654	\$ 7,352		\$ 508	\$ 543		\$ 9,138
Transportation pick up	\$ 84	\$ 8	\$ 470	\$ 5,158		\$ 617	\$ 8		\$ 6,346
<b>Total</b>	<b>\$ 21,899</b>	<b>\$ 14,035</b>	<b>\$ 20,813</b>	<b>\$ 113,039</b>	<b>\$ 13,097</b>	<b>\$ 13,228</b>	<b>\$ 6,377</b>	<b>\$ 122</b>	<b>\$ 202,610</b>
<b>Grand Total</b>	<b>\$ 93,154</b>	<b>\$ 70,063</b>	<b>\$ 131,919</b>	<b>\$ 374,803</b>	<b>\$ 46,692</b>	<b>\$ 75,388</b>	<b>\$ 65,248</b>	<b>\$ 10,045</b>	<b>\$ 867,312</b>
Percent of Total Expenditures	11%	8%	15%	43%	5%	9%	8%	1%	100%
Number of Offenders Served	194	71	258	439	70	95	97	35	1,259

FY14 Budget Appropriation:	\$ 4,716,700
Total Expenditures Processed**:	\$ 2,110,630
% of Budget Expended:	45%
Target Expenditure %:	54%

Data as of 1/16/14

\*Number of Offenders Served: Number of unique offenders with a billable event in this report period.  
 \*\*Expenditures processed includes BPA administrative fees, direct payments to providers, and miscellaneous treatment expenditures external to



# IDAHO DEPARTMENT OF HEALTH & WELFARE

C. L. "BUTCH" OTTER – Governor  
RICHARD M. ARMSTRONG – Director

ROSS EDMUNDS – Administrator  
DIVISION OF BEHAVIORAL HEALTH  
450 West State Street, 3rd Floor  
P.O. Box 83720  
Boise, Idaho 83720-0036  
PHONE 208-334-6997

## Behavioral Health Transformation Legislation

**Issue:** The behavioral health system of care in Idaho has been studied and evaluated several times in the past decade. Each evaluation has resulted in recommendations for improvements. While there has been progress made, it has focused on small refinements to the existing system. It is time to make meaningful changes to the behavioral health system in Idaho that reflects the recommendations from the hundreds of stakeholders that have contributed to these recommendations.

**Proposal:** This legislation modifies I.C. Title 39, Chapter 31 to achieve three (3) major steps in the transformation of Idaho's behavioral health system of care. First, it eliminates the silos that separate the existing mental health and substance use disorders systems by integrating them into a single, unified behavioral health system. Second, it establishes Regional Behavioral Health Boards to provide communities the opportunity to have greater influence over their local behavioral health system and increased responsibility if they choose. Lastly, the legislation establishes clearly defined roles and responsibilities for the Regional Mental Health Centers, the Regional Behavioral Health Boards and the State Behavioral Health Planning Council.

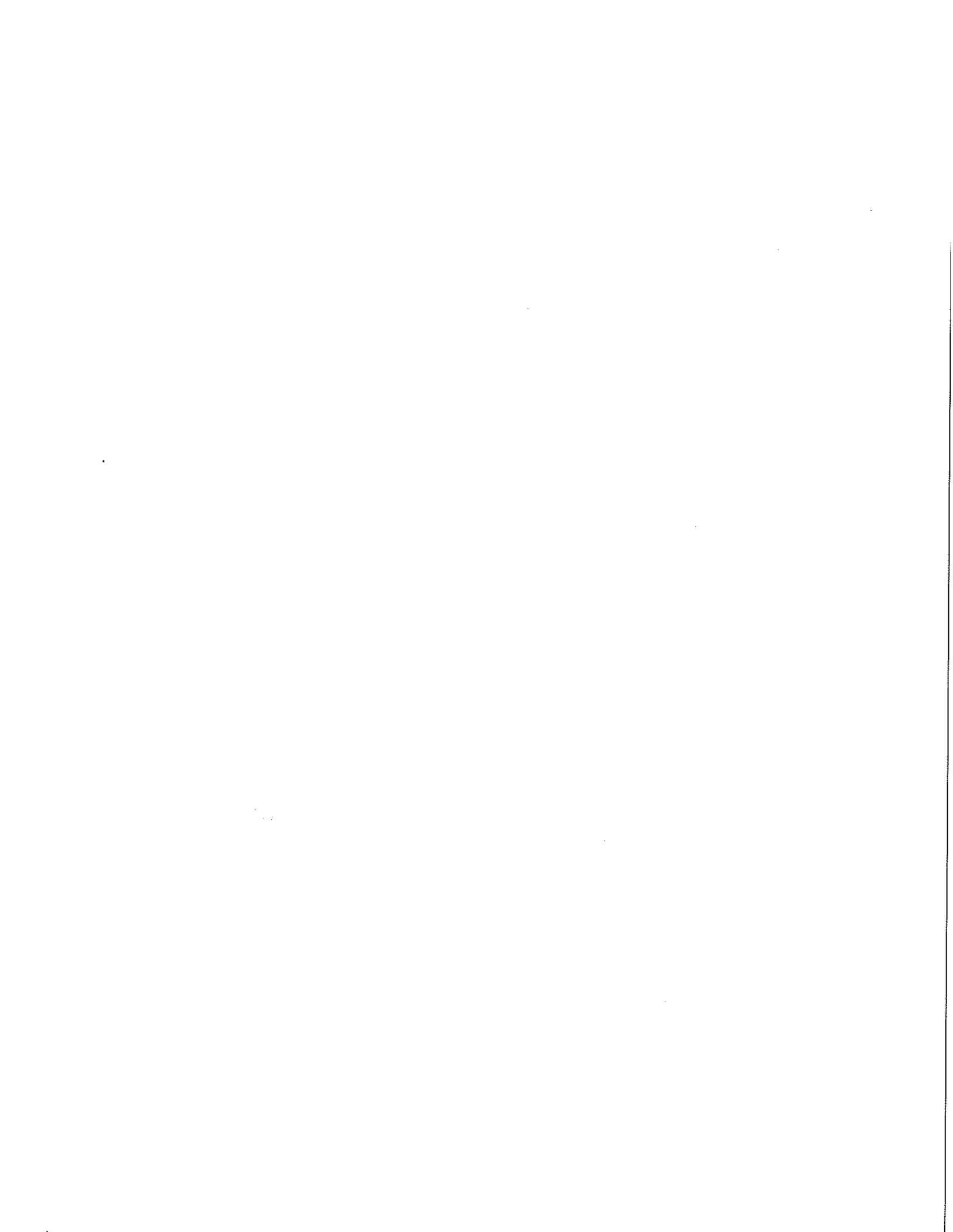
### Specifics:

- The legislation will create a Behavioral Health Interagency Cooperative to advise the Department on issues related to individuals with behavioral health concerns who are involved with the criminal justice system.
- The legislation combines Regional Mental Health Boards and Regional Advisory Committees on substance abuse into a comprehensive Regional Behavioral Health Board.
- The Department will provide \$45,000 in base funding per Regional Behavioral Health Board out of existing funds, and will contract with the boards for the organization and delivery of recovery support services.
- The legislation modifies the existing State Mental Health Planning Council to include substance use disorders. It will become the State Behavioral Health Planning Council.
- The legislation defines the responsibilities of the Department's Regional Behavioral Health Service Centers.

### Benefits/Value of Proposal:

- Prepares Idaho for the changes in health care to ensure there is a safety net to assist those in need of behavioral health services.
- Develops a system of recovery support services, which are typically not covered by insurance.
- Moves some of the leadership and influence over the behavioral health system to the community level.
- Clearly articulates the appropriate role and responsibility of the Department in Idaho's behavioral health system of care.

For more information contact Ross Edmunds at 208.334.6997 or [edmundsr@dhw.idaho.gov](mailto:edmundsr@dhw.idaho.gov).





# IDAHO DEPARTMENT OF HEALTH & WELFARE

C. L. "BUTCH" OTTER – Governor  
RICHARD M. ARMSTRONG – Director

ROSS EDMUNDS – Administrator  
DIVISION OF BEHAVIORAL HEALTH  
450 West State Street, 3rd Floor  
P.O. Box 83720  
Boise, Idaho 83720-0036  
PHONE 208-334-6997

## Behavioral Health Regional Community Crisis Centers

**Issue:** People with mental illnesses and/or substance abuse issues are taken to hospital emergency rooms or jails when they suffer a crisis or exhibit severe behavioral problems that put themselves or others in danger. Hospital ER and incarceration are frustrating, expensive and sometimes inhumane alternatives that do not effectively address the illness or addiction. However, ERs and jails are often the only options available.

**Proposal:** Develop three regional crisis centers that serve area communities 24/7. The request will provide the initial startup funds with a goal of developing community partnerships for long-term sustainability. The crisis centers can be modeled from the best practices developed by other states' successful crisis centers. Based on outcomes, efficiencies and partnerships, centers could be expanded to subsequent regions of the state over the next several years.

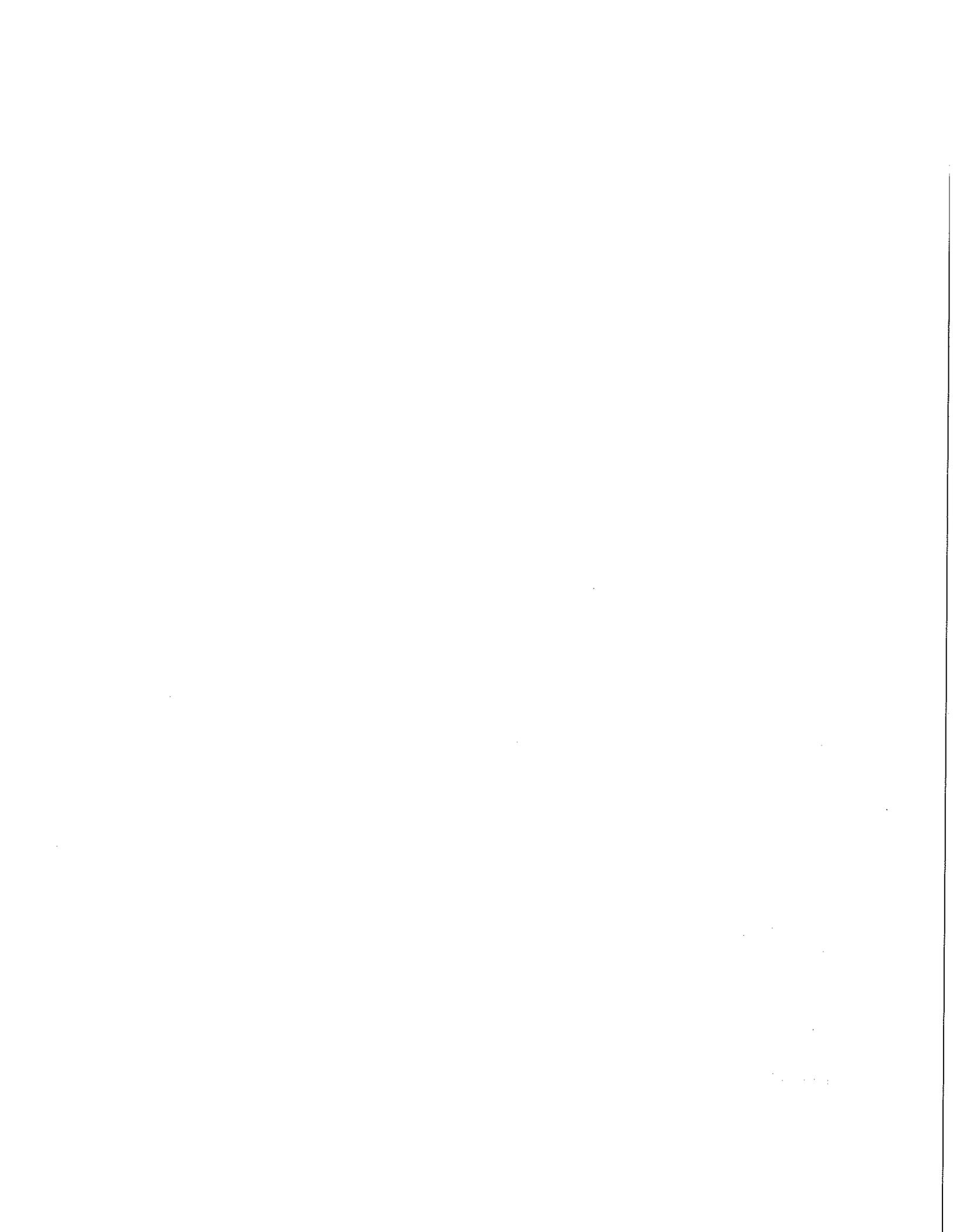
### Specifics:

- **Location:** One crisis center in the Coeur d'Alene area, one in the Idaho Falls area and the third in the Boise area.
- **Capacity:** Each center will maintain 15 to 25 patient slots per day, with episodes of care less than 24 hours.
- **Administration:** Daily operations will be contracted with community partners, with oversight from regional behavioral health boards.
- **Cost:** \$5,160,000, with \$600,000 in one-time costs and \$4,560,000 in ongoing operating costs.
- **Sustainability:** Centers will leverage community financial and in-kind support. Other states have generated sustainable funding as they reduced hospitalizations, incarcerations and emergency room use.

### Benefits/Value of Proposal:

- Reduce the wasted resources and frustration of cities and counties who constantly deal with these situations.
- Reduce inappropriate ER use, preserving resources for people with medical emergencies.
- Reduce inpatient psychiatric hospitalizations that are unnecessary and wasteful.
- Reduce the risk of litigation related to inadequate publicly funded mental health services.
- Provide more effective and humane treatment for people suffering from severe mental illnesses or addictions.

For more information contact Ross Edmunds at 208.334.6997 or [edmundsr@dhw.idaho.gov](mailto:edmundsr@dhw.idaho.gov).





# IDAHO DEPARTMENT OF HEALTH & WELFARE

## Defining Behavioral Health Crisis Centers vs. Recovery Community Centers

### What is a Behavioral Health Crisis Center?

Behavioral Health Crisis Centers are an unrealized component of the Idaho Behavioral Health System. Once established, these centers will be accessible to all citizens on a voluntary basis. Established as a brick and mortar facility, these centers operate 24/7/365 and are available to provide evaluation, intervention and referral for individuals experiencing a crisis due to serious mental illness or a co-occurring substance use disorder.

#### Key Points:

- An episode of care at a behavioral health crisis center is no more than 23 hours and 59 minutes.
- Crisis centers are voluntary. Working with law enforcement, these centers will be a resource for individuals who are willing to seek services but lack the essential resources. These centers will help individuals in crisis get the assistance they need without going to the emergency room or being taken to jail.
- Proposed eligibility for the centers: a) be at least eighteen (18) years of age, b) demonstrated impairment and or symptom(s) consistent with a DSM-V diagnosable condition, c) be medically stable, and d) be in need of frequent observation on an ongoing basis.
- The staff of the center will be comprised of three levels of behavioral health professionals: a) Certified Peer Specialists, b) Clinicians, & c) Nurses
- Capacity: The estimated need is approximately 1 bed for every 10,000 Idahoans in the community. As pilot sites launch we will be evaluating the need, capacity and outcomes achieved to help inform additional project outcomes.
- Initially, three centers will be established, one in each hub, with plans to expand to the entire state in subsequent years.
- We anticipate local centers leveraging local partnerships once established to assist in the ongoing operation and service needs of those served (for example: donated meals, laundry service).

The Department of Health and Welfare has promulgated rule (New Chapter 16.07.30) in addition to a budget request to fund these centers in the coming fiscal year.

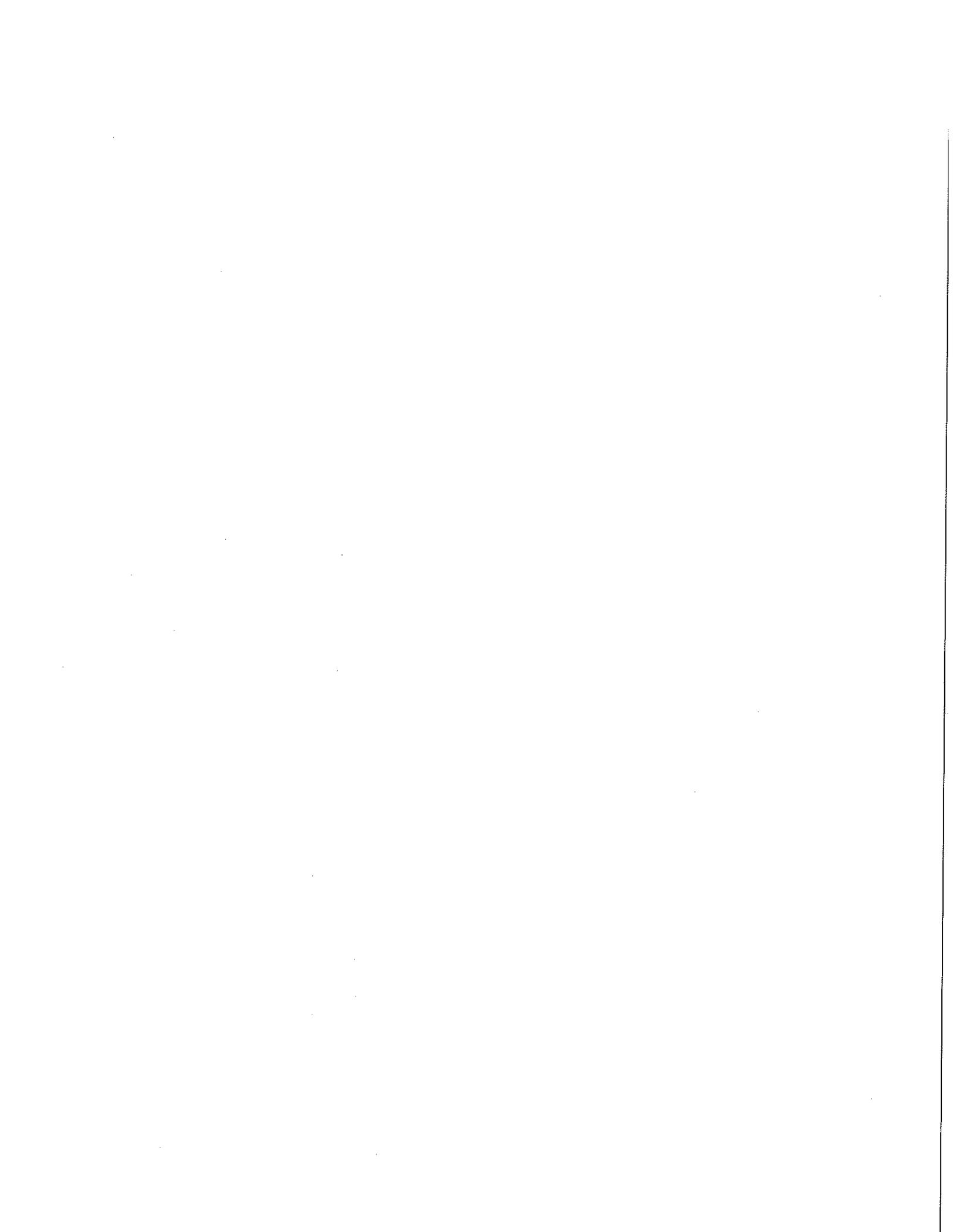
### What Is a Recovery Community Center?

Recovery Community Centers provide a meeting place for those in recovery from alcohol or drug addiction and act as a face for recovery to the community as a whole. Building meaningful and healthy relationships is key to successful recovery and these centers offer the venue for that to happen. Ideally, the centers are located as close to the heart of a community as possible, and are very visible. The center doesn't need to be large to have a huge impact on those who use it.

A variety of activities can originate at the Recovery Community Center:

- A center is a welcoming meeting place where others can be counted on to provide support when an individual's recovery is feeling shaky.
- Reliable information is made available on services needed by those new to recovery, such as housing and transportation assistance.
- Computers with internet services are made available to enhance recoverees' computer skills as well as to provide them with the connectivity that may be needed to do job searches or to stay in touch with family and friends.
- Classes are provided to enhance recoverees' ability to live their lives clean and sober and can cover areas such as job skills and how to socialize with others without getting high.
- Phone banks are provided for volunteers to make requested check-in calls to people in recovery. Knowing someone is going to call every week to see how they are doing may be what it takes to keep an individual in recovery.
- It is a place to give back. These centers rely heavily on volunteers to function. Experience tells us that giving back is as powerful to the person volunteering as it is to the recoveree receiving the help.
- It can become an information source for those who are seeking help for themselves or those they care about.

A Recovery Community Center should not be confused with a 12-step clubhouse, and it is not a drop-in center. It isn't meant to be a place to hang out, but is meant to be a place where a person can go to work on improving their life and that of those around them. It could also be expected to take on the personality of the people who use it and the community that is its home.





IDAHO DEPARTMENT OF  
HEALTH & WELFARE

C. L. "BUTCH" OTTER – Governor  
RICHARD M. ARMSTRONG – Director

ROSS EDMUNDS – Administrator  
DIVISION OF BEHAVIORAL HEALTH  
450 West State Street, 3rd Floor  
P.O. Box 83720  
Boise, Idaho 83720-0036  
PHONE 208-334-6997

## Electronic Nicotine Delivery Devices

**Issue:** According to the 2011 and 2012 National Youth Tobacco Survey, underage use of electronic nicotine delivery devices doubled in the US in a two year period. Electronic devices such as e-cigarettes do not contain all the contaminants found in tobacco leaf-based products, but they do include the most addictive component, nicotine. Under the current statute, sellers of electronic nicotine devices are not required to: hold a permit, be included in the Idaho's compliance inspection system, and are not prevented from distributing samples to the public at events such as a fair.

**Proposal:** Modify the current Idaho Prevention of Minors' Access to Tobacco statute to include the "electronic devices" in the definition of a tobacco product. This will simplify the statute making it clear that sellers of electronic devices must comply with the same requirements as sellers of tobacco products.

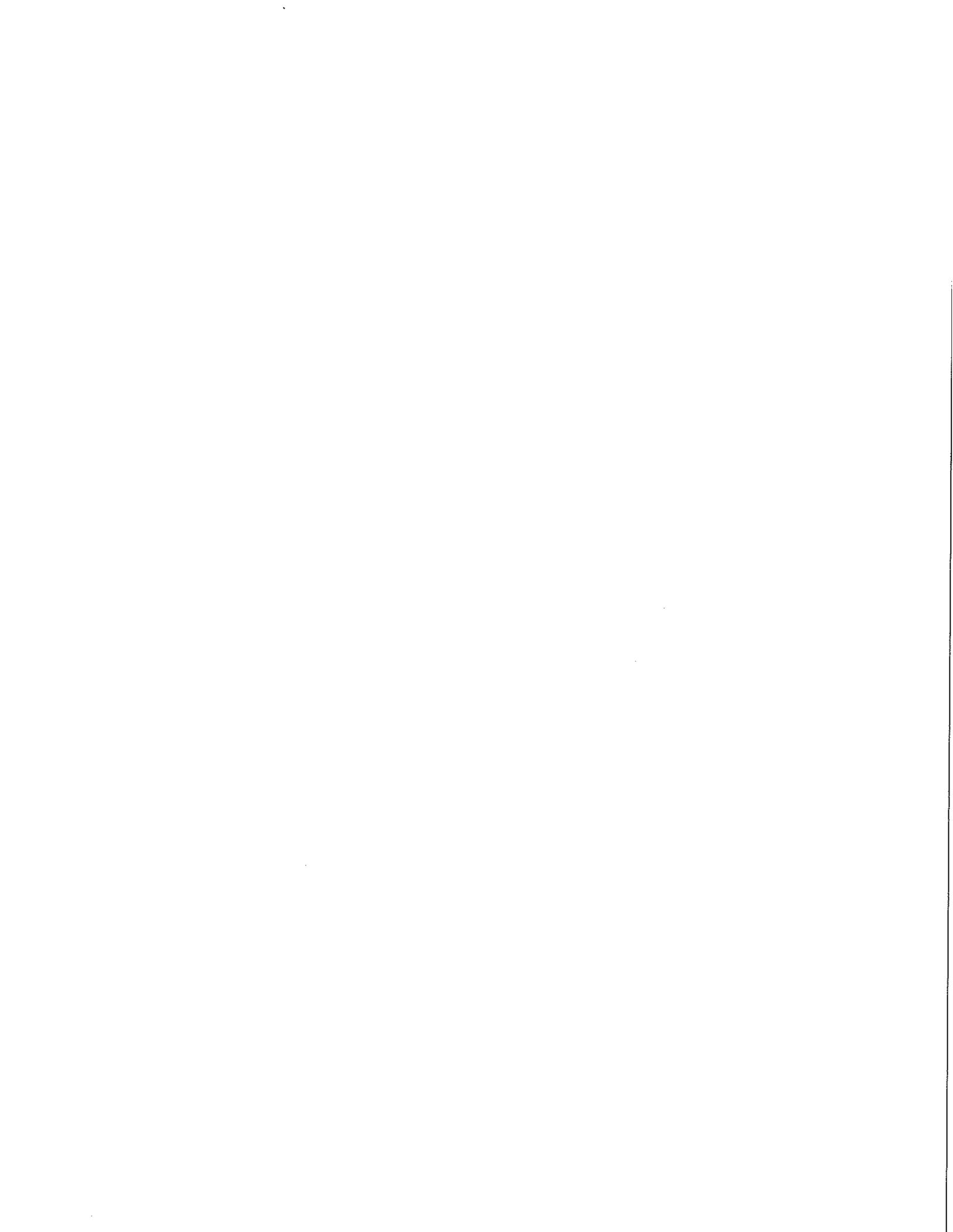
### Specifics:

- All electronic nicotine delivery device sellers will:
  - Be required to acquire a permit;
  - Be subject to random compliance inspections; and
  - Receive all training resources and the monthly newsletter currently provided to tobacco sellers
- **Cost:** \$3,500, based on the estimated number of electronic nicotine delivery device sellers. Cost will be absorbed by the program.

### Benefits/Value of Proposal:

- Reduce minors' access to electronic nicotine delivery devices.
- Increase minors' age initiation of all tobacco-based products.
- Hold sellers targeting youth accountable.

For more information contact Ross Edmunds at 208.334.6997 or [edmundsr@dhw.idaho.gov](mailto:edmundsr@dhw.idaho.gov).



**You're Invited!**  
**Community Recovery Center Planning Meeting**

February 14, 2013: 11 am – 3 pm

Caldwell DHW Office

3402 Franklin Road, Caldwell, ID 83605

Sawtooth/Grand Teton Room

Please RSVP via this invite, email or phone

[husmannj@dhw.idaho.gov](mailto:husmannj@dhw.idaho.gov) or 208-455-7108

We are working on the development and implementation of a Community Recovery Center located in Canyon County and would love to have your participation. The draft agenda is as follows:

11:00 – 11:20 Welcome and Introductions

11:20 – 12:50 **Lunch** and a Movie ~ *The Anonymous People*

12:50 – 1:10 Break

1:10 – 1:30 Recovery Center Overview and Parameters

- Recovery Center must be community driven
- Consumers must be involved in every step along the way
- Center will serve adults only at this time
- Center will be capable of helping people with substance addictions and/or mental health issues

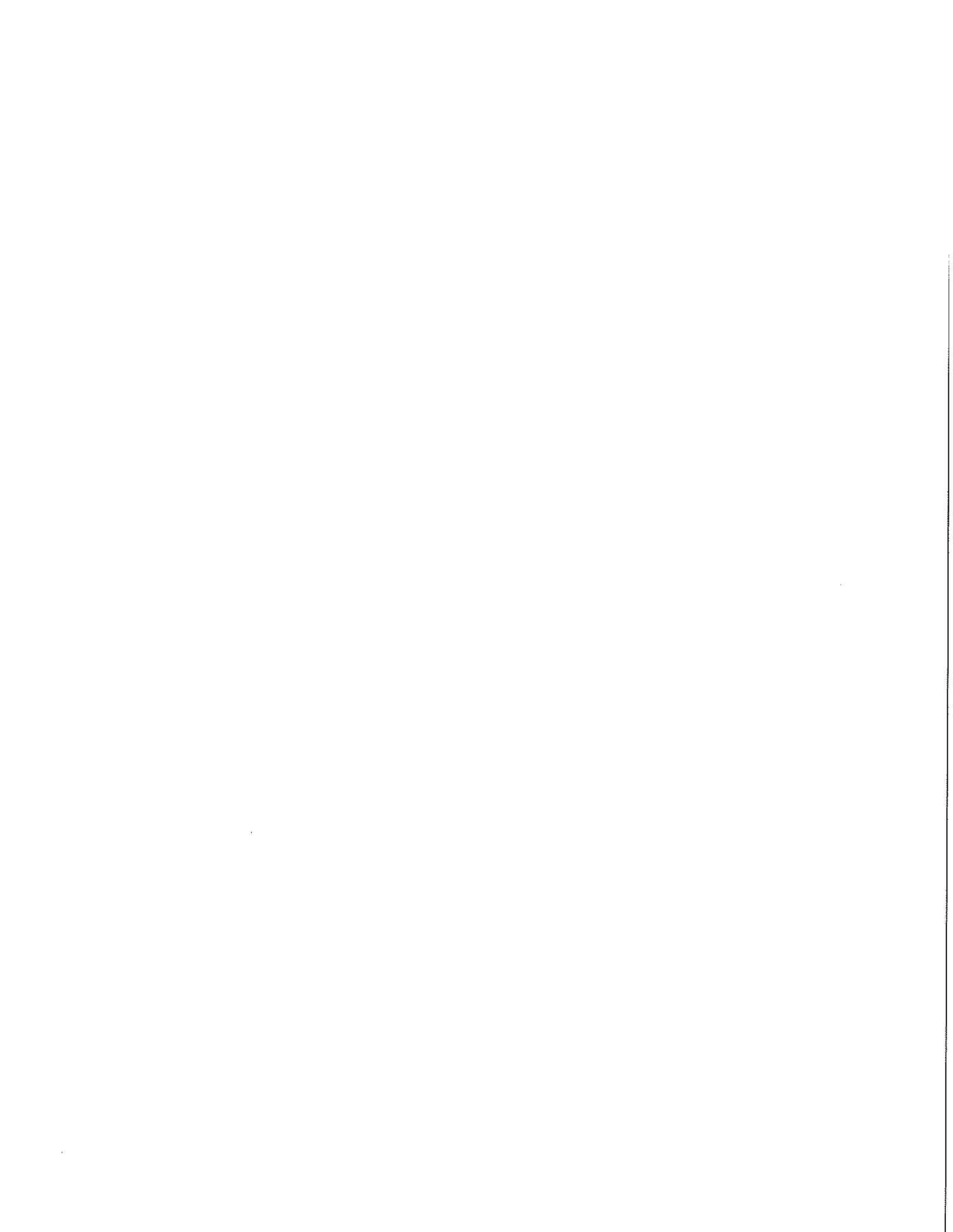
1:30 – 2:30 Open Discussion

2:30 – 3:00 Next Steps

To view the Community Recovery Center model we would like to follow, please visit: [www.ccar.us](http://www.ccar.us) As always, I truly appreciate your support and we look forward to seeing you there (even if only for a portion of the time) with your ideas and enthusiasm!

*Joy Husmann*  
*Community Resource Development Specialist*  
*Division of Behavioral Health*  
*Dept. of Health and Welfare - Region 3*  
*3402 Franklin Road, Caldwell, Idaho 83605*  
*Tel: 208.455.7108*  
*Fax: 208.454.8351*

Please visit the websites: [www.rac3.dhw.idaho.gov](http://www.rac3.dhw.idaho.gov) or [www.mentalhealth.idaho.gov](http://www.mentalhealth.idaho.gov)



You Can't Stop What You Don't Know!!!

# High in Plain Sight... New, Current and Ongoing Trends in Drug, Violence and Alcohol Abuse

## Caldwell, Idaho (Best Western Plus Hotel)

This class will breakdown all the new drug, alcohol, party, synthetic technology, violence and concealment trends in today's ever evolving world of substance abuse. With the drug, violence and alcohol changes across the country including in some of the states surrounding Idaho we really have to stay updated with what is out there. This class will test your knowledge on the youth and adult alcohol and drug culture. Whether in grade school, high school, or a college community, the culture is frequently changing. It is difficult for all who are attempting to prevent, enforce, educate, supervise, treat alcohol and drug abuse in our schools and on our streets. **Not only are there national trends that we need to keep up with, but local Idaho & Washington trends that are frequently changing.** During the past couple of years, new clothing, drugs, concentrates, alcoholic drinks, technology, concealment methods and items, clothing lines have arrived in our local retail stores. With these new methods have come new problems. Knowledge is power, and if we don't know the local and regional establishments that are selling these items, and what a certain logo "truly" stands for, we are only making it that more difficult to stop! **This class will provide over 100 visual aids along with photos, videos and detailed descriptions of the different items and trends.**

You will also be provided with tools and handout forms to prevent, create policies, and enforce the many different items in your community. **The Class is limited to the first 75 registrations.**

**Who Should Attend: Educators, Law Enforcement, SRO's, Coalitions, Prevention Personnel, Counselors, Treatment, Medical Personnel, Probation Officers and State Employees**

**Location: Caldwell, Idaho-The Best Western Plus Caldwell Inn & Suites at 908 Specht Ave, Caldwell**  
*For overnight travelers contact the Best Western or the LaQuinta Inn in Caldwell. There is no sleeping room block*

**Date: Friday April 25<sup>th</sup>, 2014**

**Cost: \$75.00 per person (includes resources & visual aids)**

**Registration: 8:00-9:00 AM Class Times: 9:00 AM-4:00 PM**

*\*Course is Idaho POST certified & CEU's & PD Credits Offered Through NNU*

### Course Topics:

- Youth, Adult & Community Alcohol Trends and Practices
- Drug Concentrates, Tobacco, E-Cigarettes & Technology
- Spice, "Bath Salts" & Other Synthetic Drugs
- Drug Concealment, Paraphernalia and Identification
- Alcohol & Energy Drinks, Binge Drinking & Drinking games
- Non Traditional Ways of Alcohol Consumption
- New Clothing & Logos Worn/Identified by Drug Users and Abuse
- Logos, Music & Common Violence Identifiers
- Local Impact of Changing Drug, Violence & Alcohol Culture Prevention Policies and Procedures



### Class Contact/Payment Information (checks only):

**Email:** [jermaine@tallcopsaysstop.com](mailto:jermaine@tallcopsaysstop.com) / **Website:** [www.TallCopSaysStop.com](http://www.TallCopSaysStop.com)  
c/o J. Chad Professional Training at P.O. Box 170121 Boise, Idaho 83717  
**Phone:** (208) 371-1283 / **Fax:** (208) 922-1328



\*\*\*\*\*  
**Instructor Officer Jermaine Galloway:**

Officer Jermiane Galloway is an Idaho Police Officer who is also a highly recognized nationally presenter on Alcohol and Drug trends. Officer Galloway has trained over 50,000 people nationwide. Officer Galloway also spends countless hours conducting research at local and national retail stores, smoke shops and liquor outlets. Fromm this research Officer Galloway provides an in debt look into the evolving alcohol and drug world. Whether you have previous attended one of Officer Galloway's classes or this is your first time you will gain in debt knowledge into the world of substance abuse. Officer Galloway has been an Idaho law enforcement officer since 1997. Officer Galloway provides nationwide training to thousands of coalition members, law enforcement, probation officers, doctors, prevention personnel, alcohol enforcement officers, parents and educators on school and community substance abuse prevention. For his efforts Officer Galloway has been recognized with awards from the National Office of Juvenile Justice and Delinquency Prevention and MADD Mothers against Drunk Driving.



# ***High in Plain Sight...New, Current and Ongoing Trends in Drug, Violence and Alcohol Abuse***

## ***\*\*Class Registration Form-Caldwell, Idaho***

**Date:** Friday April 25<sup>th</sup>, 2014

**Registration:** 8:00 AM Class: 9:00 AM – 4:00 PM

**Location:** Best Western Plus Caldwell Inn & Suite

**Address:** at 908 Specht Ave, Caldwell, Idaho

**Registration Fee: \$75 made to:**

J. Chad Professional Training

PO Box 170121

Boise, Idaho 83717

Fax: 208-922-1328

**Registration Contact:**

Officer Jermaine Galloway

Phone: 208-371-1283

Fax: 208-922-1328

[jermaine@tallcopsaysstop.com](mailto:jermaine@tallcopsaysstop.com)

***Please Print Legibly- Complete Entire Form***

**LAST NAME:**

---

**FIRST NAME:**

---

**SCHOOL / AGENCY:**

---

**TITLE:**

---

**ADDRESS:**

---

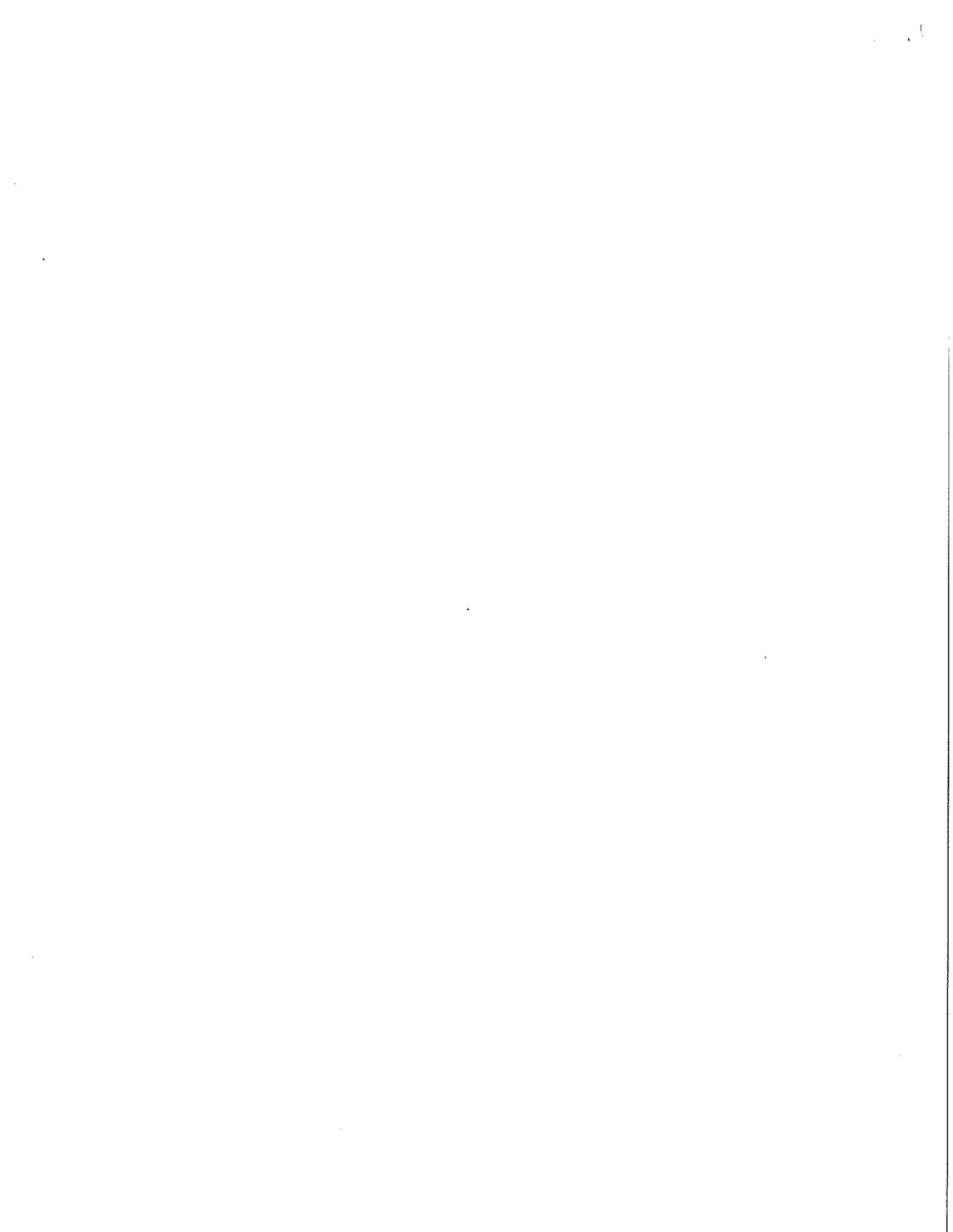
**PHONE:**

---

**E-MAIL:**

---

**Website: WWW.TALLCOPSAYSSTOP.COM**





## OPTUM Idaho Recovery and Resiliency Training

### Training Objectives:

- Become familiar and aware of the origins and definitions of recovery and resilience
- Become familiar with the fundamental components of recovery and resilience
- Become familiar with empowerment tools that can be used to support and encourage consumers
- Become familiar with community based resources that can be used to help consumers move toward recovery
- Become familiar with person-centered language

**Length:** The training lasts two hours and includes time for questions at the end of the presentation.

**Format:** Instructors will lead participants through a series of presentations, hands-on activities and group discussions to learn and practice principals of recovery and resiliency.

**Supplies:** Participants are asked to bring writing utensils and paper for taking notes. The facility needs to provide a projector.

## RECOVERY...

**“Mental health recovery is a journey of healing and transformation enabling a person with a mental health problem to live a meaningful life in a community of his or her choice while striving to achieve his or her full potential.”**

—SAMHSA

