Kentucky Behavioral Health Planning and Advisory Council: Member Handbook

Kentucky Department for Behavioral Health,
Developmental and Intellectual Disabilities
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TEAM KENTUCKY

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Overview of Kentucky's Public Behavioral Health System

Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities

DBHDID is identified in Kentucky Revised Statute 194.030 as the primary state agency for developing and administering programs for the prevention, detection, and treatment of behavioral health disorders. DBHDID contracts with Kentucky community mental health centers (CMHCs) and other non-profit agencies to provide services.

CMHCs provide a full array of behavioral health services. These services may include the following:

- Prevention Services and Strategies
    - Community Mobilization
    - Information Dissemination
    - Environmental Strategies
- Emergency Services
    - Crisis Intervention
    - Adult and Child Crisis Units
    - Partial Hospitalization
    - Mobile Crisis Services
- Clinical Services
    - Outpatient Treatment
    - Residential Substance Use Treatment
    - Psychiatric Services
    - Community Medication Support
    - School-Based Services
    - Medication Assisted Treatment
- Targeted Case Management Services

    - Case Management
    - Specialized Intensive Case Management
    - Assertive Community Treatment
    - Homeless Outreach
- Recovery Support Services
    - Peer Support
    - Social Club Drop In
    - Individual and Family Support Groups
    - Training and Advocacy
    - Consumer Conferences
    - Supportive Housing
    - Supported Employment

CMHC Regions

Our state is divided into 14 CMHC regions for the purposes of planning and providing community behavioral health services. They are numbered 1 through 15. There used to be 15 regions, but two regions combined. Together, they serve all 120 counties.

For each region, a Regional Behavioral Health and Developmental/Intellectual Disabilities Board or "Regional Board" has been established per KRS 210.370-210.480.

Regional Boards

The statewide network of CMHCs was completed in 1967.

A Regional Board is:

- An independent, non-profit organization.
- Overseen by a volunteer board of directors that broadly represents stakeholders and counties in the region.

- Licensed by the Cabinet for Health and Family Services as a "community mental health center."

The Regional Boards are referred to by any of the following:

- Regional Behavioral Health and Developmental/Intellectual Disabilities Boards
- Regional Boards
- Boards
- Community Mental Health Centers
- CMHCs
- Comprehensive Care Centers
- Comp Cares

Mandated Services

Kentucky Revised Statute 210.410 authorizes the Secretary of the CHFS to make state grants and other funding allocations to Regional Boards to provide, at a minimum, the following behavioral health services:

- Inpatient treatment (typically by referral agreement);
- Outpatient services;
- Partial hospitalization or psychosocial therapeutic rehabilitation;
- Emergency services;
- Consultation and education services; and
- Services for an individual with an intellectual disability.

Substance Use Disorders: Prevention and Treatment Services

Services provided primarily through contracts with community-based service providers (14 CMHCs and their subcontractors, local government agencies and other community-based organizations) include:

- Prevention and early intervention services offered through 14 Regional Prevention Centers (RPCs);
- Clinical services such as: Individual Therapy, Family Therapy, Group Therapy, and Intensive Outpatient Therapy, Withdrawal Management, Medication Assisted Treatment, and Residential Treatment.
- DUI assessment and education programs;
- Consultation with businesses on the development of a drug-free workplace and employee assistance programs; and
- Specialized treatment services for pregnant women, adolescents, and intravenous drug users.

Map of the Community Mental Health Center Regions

Overview of the Kentucky Behavioral Health Planning and Advisory Council

The Kentucky Behavioral Health Planning and Advisory Council (Planning Council or Council) ensures collaboration among state agencies and facilitates consumer input into Kentucky's behavioral health services and activities.

Vision Statement

We believe that all children, adolescents, and adults in the Commonwealth have the right to excellent, recovery-oriented, resilience-based behavioral health services that are affordable, equitable, client driven, and assists community members to achieve their full potential and live and thrive in their community.

Mission Statement

The Council is the active voice promoting awareness of and access to effective, affordable, recovery-oriented, and resilience-based services in all communities.

Federal Mandate for Councils

Behavioral Health Planning and Advisory Councils (PACs) exist in every State and U.S. Territory.

Per federal law 42 USC 300x-3 and 42 USC 300x-4. Link

The law requires States to perform behavioral health planning to receive federal Mental Health Block Grant funds.

Federal Duties of Membership

Federal Duty 1: Review

Review the Mental Health Block Grant and the Substance Abuse Prevention and Treatment Block Grant and make recommendations.

Planning and review should be a year-long process.

The Finance and Data Committee reviews allocations and expenditures of the block grant funded entities as well as annual plan and budget applications from the CMHCs.

The Council reviews activities and initiatives of funded entities.

Federal Duty 2: Advocate

Advocate for individuals in recovery from a substance use and/or mental disorder, children with behavioral health challenges, parents, and family members.

Advocacy can take many forms – letter writing, working with the media, educating decision makers, and more.

Educate yourself about the issues – share information with family, friends, colleagues, and legislators.

Legislative advocacy – informing and educating legislators.

The Council must speak/advocate as one voice.

Data is a powerful tool for making decisions and telling a story.

Planning Councils (and other advocacy groups) can be powerful and strategic allies in bringing about change in behavioral health systems.

Advocates can speak where often state, regional and local employees cannot.

Federal Duty 3: Evaluate

Evaluate, not less than once each year, the allocation and quality of behavioral health services within the State.

Broad mandate with little specificity from federal government.

- Some Councils review the services provided by block grant funded providers.
- Some Councils conduct peer reviews of services.
- Some are involved in data improvement efforts, such as National Outcome Measures (NOMs) and State Performance Indicators.

In Kentucky:

- Council reviews Block Grant allocations.
- Funded entities provide reports to the Council.
- Council reviews state NOMs and Performance Indicators.

Council Duties as Written in Our Bylaws

- Report directly to the Commissioner of the Kentucky Department for Behavioral Health, Developmental and Intellectual Disabilities (DBHDID).
- Assist DBHDID in designing a comprehensive, recovery-oriented system of care.
- Advise DBHDID on the use of Substance Abuse Prevention and Treatment Block Grant funds and Mental Health Block Grant funds and on the quality of statewide, recovery-oriented behavioral health services.

- Review the annual Substance Abuse Prevention and Treatment and Mental Health Block Grant Application and Implementation Reports pursuant to Public Law 102-321, Section 1915 (a) and to submit recommendations to DBHDID, prior to the September 1 and December 1 due dates, respectively.
- Advocate for individuals in recovery, children and youth with behavioral health challenges, and their family members.
- Monitor, review, and evaluate, no less than once a year, the allocation and quality of statewide, recovery-oriented behavioral health services.

Membership

Most state planning council members must be individuals with lived experience of mental health and/or substance use disorders (51% or more). Kentucky's Planning Council has the following 36 members:

6 adults with lived experience of behavioral health disorders;

6 parents/guardians/grandparents/foster parents who care for a child (birth through age 20) with behavioral health challenges;

6 family members of an adult with lived experience of behavioral health disorders;

2 young adults with lived experience of behavioral health disorders (age 18-25);

3 representatives of advocacy organizations that DBHDID contracts with for services:
Kentucky Partnership for Families and Children
Lexington Chapter of the National Alliance on Mental Illness

People Advocating Recovery

2 Provider Organization Representatives:
Kentucky Association of Regional Programs
CMHC Regional Prevention Centers

11 State Agency Representatives:
Department for Aging and Independent Living
Department for Behavioral Health, Developmental and Intellectual Disabilities
Department for Community Based Services
Department of Corrections
Department of Education
Department of Juvenile Justice
Kentucky Protection and Advocacy
Department for Public Health
Department for Medicaid Services
Office of Vocational Rehabilitation
New Beginnings, Bluegrass: Statewide Housing Organization

The ratio of parents of children with behavioral health challenges to other Council members must be sufficient to provide adequate representation.

Officers

The Council has the following officers:

- Chair: The principal officer of the Council. Presides over all Council meetings, calls special meetings as needed, represents the Council at national conferences and meetings, and generally supervises and directs all actions of the Council with the assistance from staff liaison(s) from DDBHDID.

- Vice Chair: Assists the Chair in all duties assigned to the office and presides over meetings in the Chair's absence.
- Secretary: Follows up on attendance matters, serves as the timekeeper for Council meetings, and presides over meetings in the absence of the Chair and Vice Chair.

Officers of the Planning Council must be adults or young adults with lived experience of behavioral health disorders, parents, or family members.

Meetings

Kentucky's Council meets quarterly, generally in February, May, August, and November.

Standing Committees

Most of the Council's work takes place in committees. The Council currently has these Standing Committees:

- Executive
- Bylaws
- Membership
- Finance and Data

All members are encouraged to attend committee meetings and any member may become a committee chair.

Ad hoc Committees

The Council can form ad hoc committees to address a specific issue and dissolve them after the completion of the task or achievement of the objective.

Staff for the Council

DBHDID staff provide administrative and programmatic support for the Council. They are not members of the Council.

The behavioral health representative on the Council is the Director of the Division of Mental Health or Division of Substance Use Disorders or designee.

Mental Health Block Grant (MHBG) and Substance Abuse Prevention and Treatment Block Grant (SABG)

What is a Block Grant?

A block grant is an allocation of funds awarded to States based upon a federally legislated formula.

Purpose of Block Grants

States will use the funds for prevention, promotion, treatment, recovery supports and other services that will supplement services covered by Medicaid, Medicare, and private insurance. Specifically for these four purposes:

1. Fund priority treatment and support services for individuals without insurance or for whom coverage is terminated for short periods of time.
2. Fund those priority treatment and support services that demonstrate success in improving outcomes and/or supporting recovery that are not covered by Medicaid, Medicare, or private insurance.
3. Fund primary prevention by providing universal, selective, and indicated prevention activities and services for persons not identified as needing treatment.
4. Collect performance and outcome data to determine the ongoing effectiveness of behavioral health promotion, treatment, and recovery services.

State Requirements

To be eligible for funds, each state must:

- Have a designated unit of its executive branch that is responsible for administering the grant.

- Submit an annual application, a biannual plan, and an annual report of how funds were used to provide comprehensive, community services.
- Have the flexibility to distribute funds to local government entities and/or non-governmental organizations.
- Comply with general federal requirements for managing grants.
- Cooperate in efforts by SAMHSA to monitor use of funds.
- If receiving MHBG funds, states must form and support a state mental health planning council.

Block Grant Restrictions

States CANNOT use Block Grant funds for:

- Inpatient services
- Cash payments to intended recipients of health services
- Purchase of land/major remodeling of facilities or purchase of major medical equipment
- Providing financial assistance to any entity other than public/non-profit private entity
- To satisfy any requirement for the expenditure of non-Federal funds as a condition for the receipt of Federal funds
- The State will not expend more than 5 percent of the grant for administrative expenses.

SABG Funding

The SABG program's objective is to help plan, implement, and evaluate activities that prevent and treat substance abuse.

Prevention Set-Aside: States must spend no less than 20% of SABG funding on substance abuse primary prevention strategies. These strategies are directed at individuals not identified to be in need of treatment.

MHBG Funding

SABG Target Populations and Service Areas

The **SABG** program targets the following populations and service areas:

- *Pregnant women and women with dependent children*
- *Intravenous drug users*
- *Tuberculosis services*
- *Early intervention services for HIV/AIDS*
- *Primary prevention services*

MHBG Target Populations

The **MHBG** program targets:

- *Adults with serious mental illnesses.* Includes persons age 18 and older who have a diagnosable behavioral, mental, or emotional condition—as defined by the Psychiatric Association's *Diagnostic and Statistical Manual (DSM) of Mental Disorders*. Their condition substantially interferes with, or limits, one or more major life activities, such as:
    - Basic daily living (for example, eating or dressing)
    - Instrumental living (for example, taking prescribed medications or getting around the community)
    - Participating in a family, school, or workplace

- *Children with serious emotional disturbances.* Includes persons up to age 18 who have a diagnosable behavioral, mental, or emotional issue (as defined by the DSM). This condition results in a functional impairment that substantially interferes with, or limits, a child's role or functioning in family, school, or community activities.

Frequently Asked Questions (FAQs)

How can I learn more about the Planning Council?

The Planning Council's web address is http://DBHDID.ky.gov/dbh/kbhpac.aspx. The website includes the Council bylaws, brochure, membership application, member handbook, and an archive of meeting summaries, block grant applications and behavioral health reports.

How can I be a great Council member?

- Advocate for individuals with behavioral health disorders in your community.
- Regularly review Block Grant applications, reports, and other relevant documents and provide feedback.
- Respect one another's views, even if you do not agree with them.
- Educate yourself on prominent behavioral health issues in Kentucky.
- Become familiar with Robert's Rules of Order.
- Commit to advancing racial, geographic, age, diagnostic and other diversity on the Council.

How can I recruit new members for the Council?

Members are encouraged to distribute applications to strong candidates for the Council throughout the year. The membership application is available on the Council's webpage: http://DBHDID.ky.gov/dbh/documents/kbhpac/MemberApp.pdf

How can I assist friends and family members in accessing services?

Behavioral health services are available statewide. The following provider directories can help you locate services:

- Division of Behavioral Health, Developmental and Intellectual Disabilities Provider Directory: http://DBHDID.ky.gov/ProviderDirectory/ProviderDirectory.aspx
- Findhelpnowky.org: https://findhelpnowky.org
- SAMHSA Behavioral Health Services Treatment Locator: https://findtreatment.samhsa.gov/ or call SAMHSA's National Helpline at 1-800-662-4357 or 1-800-487-4889 (TTY).

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