COUNTY OF MORRIS

DEPARTMENT OF HUMAN SERVICES DIVISION OF COMMUNITY & BEHAVIORAL HEALTH SERVICES

P.O. Box 900 Morristown, New Jersey 07963-0900

Board of County Commissioners

Director Tayfun Selen

Deputy Director Stephen H. Shaw

Douglas R. Cabana John Krickus Thomas J. Mastrangelo Christine Myers Deborah Smith



County Administrator
Deena Leary

Department Director Katharine A. Errico 973.285.6863

> Deputy Director Gary L. Denamen 973326.7240

Division Director Amy Archer 973-285-6852

MENTAL HEALTH ADDICTION SERVICES ADVISORY BOARD (MHASAB) Thursday, June 12, 2025, 5:15 PM – Hybrid Meeting Minutes

I. Call to Order and Attendance

Mr. DeVito called the meeting to order at 5:15 PM. A quorum was established and attendance was as follows:

Board Members:

Gregg Benson, Citizen Representative

Brenda Budd-Dunn, Municipal Alliance Coordinator, Borough of Rockaway

Chris Chernick, Citizen Representative – Vice Chair (virtual)

Linda Csengeto, Citizen Representative (virtual)

Victor DeVito, Citizen Representative – Chair

Danielle DiSessa, Citizen Representative (virtual)

David Martinak, Citizen Representative

LaJuan Tucker, Morris County Prosecutor's Office

Chelsea Whiting, Morris County Sherriff's Office (virtual)

Brian Young, Citizen Representative (virtual)

Board Liaisons:

Rose Brown, Mental Health Association of Essex and Morris (virtual) Cynthia Gatica, NJ DHS, Division of Mental Health & Addiction Services (virtual)

Morris County Staff:

Amy Archer, Division of Community & Behavioral Health Kasey Errico, Department of Human Services Kensie Fosko, Division of Community & Behavioral Health Anna Marie Hess, Division of Community & Behavioral Health Louise Lichtenberg, Division of Community & Behavioral Health Cherish Robinson, Division of Community & Behavioral Health

Page 1 of 9

Others in Attendance:

Nicholas Diaz, Safe Place Counseling and Therapy Center (virtual) Peter Morley, New Hope Integrated Behavioral Healthcare (virtual) Lori Ann Rizzuto, LCSW, Behavioral Health, Atlantic Health System

II. Approval of May 8, 2025, Minutes

Mr. DeVito, Chair, asked for a motion to approve the May 8, 2025 meeiting minutes. Ms. Tucker made a motion to approve the meeting minutes, and Mr. Young seconded. All were in favor with no opposition and two abstentions. Motion carried.

- III. Presentation Meeting Community Need for Behavioral Health Services for Morris County Alantic Health System Ms. Rizzuto
 - **A.** <u>Introduction</u> The presentation will cover Atlantic Health System's (AHS) behavioral health services in numerous counties and how those towns are working together as a system.
 - **B.** Goals The goals for redesigning and investing in AHS' behavioral health services are having more timely, affordable, and accessible care, early identification, and evidence-based best-in-class care.
 - C. <u>Solutions</u> Solutions described are integrating behavioral health (BH) training into different services with an emphasis on primary care physicians, investing more in BH outpatient services with a preventative and proactive approach, and consolidating beds into one building in Morristown. At the moment, they have 10 voluntary and 6 involuntary beds in Newton, 24 beds in Morristown, and 24 beds in Overlook.
 - **D.** <u>AHS Behavioral Health Vision</u> AHS focuses on creating a respectful environment of care and having patients receive care at the right time and right place rather than only being treated at an emergency department (ED).
 - **E.** <u>AHS Current Services for Morris</u> Ms. Rizzuto discussed the following services available in Morris County:
 - i. Primary Care AHS implements a collaborative care model where they embed a behavioral health clinician at a primary care practice to screen patients for mental health intervention services. Once screened, the BH clinician will have caseload supervision with one of the psychiatrists. The psychiatrist will review the clinical needs of the patient, make medication management recommendations, and the primary care physician will then handle medicating. AHS provides educational services to their physicians to cover variability in medication management knowledge.
 - ii. Traditional Outpatient Approximately two years prior, AHS opened a Behavioral Health Assessment Center in Morristown where they currently perform evaluations and assist individuals with therapy or medication management for up to 30 days until they are connected to the appropriate services. The Center accepts both referrals and walk-ins. It is also connected with schools to

- ensure that students are not experiencing long wait times to be evaluated by a child psychiatrist.
- iii. Intensive Outpatient & Acute Partial Hospitalization Morristown has both intensive outpatient (IOP) and acute partial hospitalization programs for adults, and they provide co-occurring programs for substance use disorder (SUD). There are no programs at the Morristown location for children/adolescents.
- **iv.** Crisis & Emergency Crisis intervention services are available at all AHS emergency departments. Newton is the only location that is a designated screening center.
- v. Observation In 2024, AHS implemented an EmPath Unit at Overlook Medical Center. Patients will enter the emergency department, receive screening for medical complexities, signs of being actively violent, or signs of cognitive impairments, and be admitted to the EmPath Unit if appropriate. The EmPath Unit is similar to inpatient. There is an open nursing station, bathrooms and showers, an open nourishment area, and patients sleep on recliners instead of beds. Length of stay has been estimated to be approximately 32 hours. The intention is to stabilize patients on medication and then move them to an IOP or partial program.
- **vi.** *Inpatient* There are no involuntary or child/adolescent beds located in Morristown.
- **F.** Proposed Network of Services for Morris AHS would like to invest in outpatient areas and create a Behavioral Health Center of Excellence that would consolidate the beds from three AHS hospitals into one building within a short distance of Morristown Medical Center.
- **G.** <u>Integrating BH into Primary Care</u> AHS would like to expand their collaborative care model.
- **H.** <u>Outpatient Services</u> Proposed services include expanding the child/adolescent programs and geriatric programs for psychiatric treatment.
- **I.** <u>Urgent Care</u> Current staff at urgent care centers are not adequately trained to manage behavioral health. Ms. Rizzuto stated that she proposes to implement telepsychiatry at the urgent care centers.
- J. Future State Behavioral Health Center of Excellence for Inpatient

 Acute BH Care The Center of Excellence would be a freestanding psychiatric facility. It would include involuntary beds and likely be located in Morris County.

K. Questions

- i. Ms. Budd-Dunn asked who schools should contact regarding behavioral health assessments. Ms. Rizzuto stated that schools may contact her directly if they would like to work with the BH Assessment Center in Morristown.
- **ii.** Mr. Benson asked if the staff psychiatrists are American Society of Addiction Medicine (ASAM) certified. Ms. Rizzuto responded that they are ASAM certified. The child psychiatrists are not all ASAM

- certified but they do have SUD collaboratives for physicians to learn from one another.
- iii. Mr. Young asked if they have seen any resistance from primary care physicians to the collaborative care process. Ms. Rizzuto stated that there is no resistance and physicians are very interested in implementing collaborative care in their practice. AHS' five-year plan by 2027 is to expand to 30 adult practices and 15 pediatric practices. Mr. Young asked for clarification that primary care physicians screen for behavioral health and Ms. Rizzuto confirmed that physicians are required ask several questions regarding behavioral health at annual visits.
- iv. Mr. DeVito asked about transporation services for patients. Ms. Rizzuto stated that transporation is an aspect of care that they are currently in the process of looking into. In several campuses, AHS has contracts with Lyft.
- v. Mr. Young asked for information regarding the potential two-week wait for a behavioral health intake assessment. Ms. Rizzuto responded that not every individual goes through the BH Assessment Center, but at the moment, there is not a sufficient amount of staff to shorten the wait time.
- vi. Ms. Tucker stated that the Morris County Prosecutor's Office has clients in jail and it is difficult to provide them with assessments for behavioral health conditions. She asked if AHS has thought about serving the population of individuals in jail. Ms. Rizzuto stated that they have not considered working with that population, but it is something they have done in years prior and could look further into this.
- vii. Ms. Hess asked how they care for those who are experiencing either sheltered or unsheltered homelessness. Ms. Rizzuto stated that if an individual experiencing homelessness entered their facility, AHS would reach out to organizations, such as the Mental Health Association, who provide case management.
- viii. Ms. Brown asked for clarification regarding the payment structure for individuals who do not have insurance. Ms. Rizzuto stated that uninsured individuals go through the presumptive eligibility process and work with financial counselors to determine how to pay for their treatment. AHS also has a certain amount of charity care available.
 - ix. Ms. Gatica asked if the plan for the BH Center of Excellence has already received approvals and funding or if it is still a proposal. Ms. Rizzuto clarified that the proposal has not been formally endorsed or approved by executive leadership. AHS is currently looking for support and feedback.
 - Mr. Morley commented that he would support a consolidation of inpatient care. He asked about potential funding sources. Ms.
 Rizzuto stated that AHS always ensures they are honorable to the

requirements and deliverables of an RFA when deciding where to apply for funding, limiting their options.

IV. Open to Public – no comment

V. Chair Report – Mr. DeVito

- A. Mr. DeVito welcomed new board member Brenda Budd-Dunn to the MHASAB.
- **B.** Mr. Chernick and Mr. DeVito attended the Morris County Commissioners meeting on May 14, 2025, where the Commissioners presented a procalamation in honor of May being Mental Health Awareness month.
- **C.** There will be no MHASAB meetings during July and August to allow time for funding reports, monitoring, and ranking.
- **D.** The next MHASAB meeting will be held September 11, 2025.

VI. Closed Session

Mr. DeVito, Chair, asked that anyone with a conflict of interest leave the room. No one was required to leave the room. Ms. Lichtenberg moved Mr. Diaz, Mr. Morley, Ms. Brown, and Ms. Gatica into a separate online room via WebEx. Mr. DeVito, Chair, requested a motion to close the open portion of the meeting. Mr. Martinak made a motion to close the open portion of the meeting. Mr. Young seconded. All were in favor with no opposition or abstentions. Motion carried.

According to the P.L. 1975 Ch.231 of the Open Public Meetings Act, the board closed the open portion of the meeting at 6:15 PM.

Return to Meeting

Mr. DeVito, Chair, requested a motion to begin the open session. Mr. Benson made a motion to begin the open session, and Mr. Martinak seconded. All were in favor with no opposition or abstentions. Motion carried.

The session reopened at 6:38 PM. Mr. Diaz, Mr. Morley, Ms. Brown, and Ms. Gatica were brought back into the meeting via WebEx.

Action Resulting From Closed Session – CFY2026 Priorities

Mr. DeVito, Chair, stated that the group discussed funding priorities for CFY2026 Opioid Settlement Funds, GIA-Substance Use/Mental Health Services, and Chapter 51. Let the record reflect that the Board voted to approve the priorities in closed session.

As discussed in closed session, Mr. Benson motioned to approve the priorities and Mr. DeVito seconded. All were in favor with no opposition and two abstentions.

Action Resulting From Closed Session – 2025 Municipal Alliance Supplemental Funding

Mr. DeVito, Chair, stated that the group discussed 2025 Supplemental Funding for Municipal Alliance Programs. Let the record reflect Ms. Budd-Dunn left the room during

discussion and voting of Supplemental Funding due to conflict of interest, and the Board voted to approve the 2025 Municipal Alliance Supplemental Funding in closed session.

As discussed in closed session, Mr. Benson motioned to approve the 2025 Municipal Alliance Supplemental Funding and Mr. DeVito seconded. All were in favor with no opposition and two abstentions.

VII. State Liaison Report:

A. Division of Mental Health and Addiction Services – Ms. Gatica

- i. The last Quarterly Provider meeting was held June 12, 2025 at 10:00 AM. All presentations and shared materials will be accessible from the DMHAS website for those who were unable to attend.
- ii. DMHAS is in the process of FY2026 contract renewal. They have been contacting agencies to set up contract renewal meetings and prepare to have contracts signed by July 1, 2025.
- iii. The next Residential Provider meeting is June 26, 2025 at 1:30 PM. Topics covered will include cultural competency training and language barriers in residential settings.
- iv. September 10, 2025 will be New Jersey's 10th Annual Suicide Prevention Conference. It is a free all-day virtual event with keynote speakers, breakout sessions, and continuing education credits.
- **v.** The Opioid Summit will be held on September 17, 2025. It is an all day virtual event with education credits available.
- vi. There is a Behavioral Health Integration Phase One information session for the integration with managed care organizations (MCOs). The session will be held June 17, 2025 at 10:30 AM.
- vii. Governor Phil Murphy announced the release of the Responsible Gambling Task Force Report, which outlines a comprehensive strategy to address problem gambling and promote responsible gambling across New Jersey.

VIII. Staff Reports:

A. Municipal Alliance Coordinator – Ms. Robinson

- **i.** The FY2025 quarter one municipal and county reports were submitted to the state and received approval.
- **ii.** The FY2026 Municipal Plans were approved by the state. The funding period runs from July 1, 2025 June 30, 2026.
- **iii.** Morris County's FY2026 Letter of Agreement was signed and submitted to the state.

B. Addiction Services Coordinator – Ms. Fosko

- i. The Division of Community & Behavioral Health Services posted a Request for Proposals (RFP) for recovery support services. It is available on the platform BidNet and is due by June 24, 2025. For more specific information, applicants may go to bidnetdirect.com.
- **ii.** Designations for the Intoxicated Driver's Resource Center (IDRC) were approved by DMHAS. This will cover the years of 2025 to 2026. New

- Hope Integrated Behavioral Health Care is the 48 hour IDRC provider, and Morris County IDRC is the 12 hour IDRC provider.
- **iii.** Ms. Fosko has reached out to several individuals regarding their interest to speak at Overdose Awareness Day. If anyone knows of an individual who may be interested in sharing their story, they may contact Ms. Fosko.

C. Mental Health Administrator – Ms. Archer

- i. Several advisory groups made a request for an acronym list to reference during meetings. The Division will be working on creating a comphrensive list to be finalized by September.
- **ii.** It was mentioned at the State Mental Health Administrators meeting that 988 is currently working with the Office of Communication Services, which manages 911. They are looking to facilitate warm transfers from 911 to 988. 988 lifelines are also seeing an increase in chat and text services.
- **iii.** At the State Mental Health Administrators meeting, DMHAS gave a brief announcement that they are in discussion to consider budget reductions and cost saving efforts.
- iv. The PY2025 Community Development grants Community Development Block Grant (CDBG), Emergency Solutions Grant (ESG), and HOME Partnership Program (HOME) were released and advertised in March, and they were due by April 2025. The Office of Community Development has discussed recommendations in their respective subcommittee groups. They conducted a regional vote and the recommendations were then voted on at the full Community Development Revenue Sharing (CDRS) Committee meeting.
- v. The Office of Community Development is working on publishing their annual action plan. It will cover all of Community Development, including CDBG, ESG, and HOME, as well as the funding recommendations for PY2025.
- vi. Project Connect presented at the Acute Care Systems Review (ACSR) meeting. They are in discussion with both St. Clare's and Atlantic Health, and Atlantic Health will be holding a larger meeting with representatives from Project Connect to further discuss the implementation of their program.
- **vii.** The 2025 Morris County Youth Plan was submitted to the state, has been approved, and is awaiting final signatures.

IX. Subcommittee Reports:

- **A.** Funding no report
- **B.** Planning no report
- C. Legislative/Advocacy no report
- D. County Alliance Steering Subcommittee (CASS) no report

X. Joint PAC Report – Ms. Archer

i. The last Professional Advisory Committee (PAC) meeting was held Friday, June 6, 2025.

- ii. Elizabeth Nuss from the Office of Resource Families presented to the PAC and several members offered to connect Ms. Nuss to different community-based and faith-based oragnizations.
- iii. Ms. Archer and Ms. Gatica presented their county and state reports.
- iv. There was a representative from Greystone Park Psychiatric Hospital (GPPH). The GPPH May 2025 statistics were as follows:
 - a. Admissions: 17
 - b. Discharges: 8
 - c. Morris County Admissions: 2
 - d. Morris County Discharges: 1
 - e. Hospital Census: 387
 - f. Total Morris County Residents: 92
 - g. Conditional Extension Pending Placement (CEPP): 62
- v. The Department of Child Protection & Permanency reported the following statistics:
 - a. Morris East Cases: 107
 - b. Morris West Cases: 88
- vi. Ms. Gatica added that a PAC member had asked the GPPH representative if an individual would be given quicker admission into GPPH if they had just been discharged from the hospital less than 30 days prior. Ms. Gatica stated that all individuals looking to be admitted must receive screening and begin the process of admission from the beginning regardless of their last discharge date.

XI. HSAC Report – Ms. Hess

- i. The last Human Services Advisory Council (HSAC) meeting was held Tuesday, May 27, 2025.
- **ii.** There was a presentation on the topic of childcare from Children & Family Resources and the Shared Services Alliance. They reported the following statistics:
 - **a.** The licensed center capacity meets 42.8% of the total childcare demand in Morris County.
 - **b.** Infant and toddler tuition to attend a full-time childcare Monday to Friday averages \$1400-\$2100 per month.
 - **c.** The childcare centers need to leave rooms closed due to lack of staffing.
- iii. The HSAC By-Laws Subcommittee reviewed their By-Laws. Minor modifications were made, such as changing the term "Freeholder" to "Commissioner" and updating rules to include those who participate and vote remotely. The Legislative/Advocacy Subcommittee and the Committee on Women were added as standing sucommittees in the By-Laws. Members will be voting on the adaptations made at the upcoming June meeting.
- **iv.** Members discussed the Social Services for the Homeless funding priorities and minor language adjustments were made.
- v. All provider site visits have been scheduled for July. They will be conducted on Tuesdays and Thursdays. Two meetings are scheduled for each day. The first will be at 10:00 AM and the second will be at 2:00 PM. There are 16 agencies and 23 programs total that will be reviewed.

- vi. The ALPN contract will be submitted in the week of June 16, 2025.
- vii. The next HSAC meeting will be June 24, 2025 at 5:00 PM.
- **XII.** Old Business no comment
- XIII. New Business no comment
- XIV. Adjourn Meeting

The meeting adjourned at 7:01 PM.

Respectfully submitted,

Louise Lichtenberg Administrative Professional