

**BOARD OF MENTAL HEALTH AND  
SUBSTANCE ABUSE SERVICES**

**January 28, 2022**

**Department of Mental Health  
and Substance Abuse Services  
Oklahoma City Oklahoma**

Board members present: Courtney Knoblock, MPA, Chair  
Kim Holland, APRN-CNP  
Shannon O'Doherty  
Gina Pazzaglia, Ph.D.  
Kristin Stacy, J.D.  
Kari Stomprud, M.Ed.  
Carisa Wilsie, Ph.D.

Others present: Carrie Slatton-Hodges, Commissioner ODMHSAS  
Durand Crosby, Ph.D., ODMHSAS  
Carol Ladd, ODMHSAS  
Joey Mickey, ODMHSAS  
Michelle Lane, ODMHSAS  
Dustin Robins, ODMHSAS  
Adam Wyatt, Hefner CTC  
Nellie Meashintubby, Ahni Wakaya Counseling  
Javier Ley, Arcadia Trails  
Jeff Cantey, Second Chance Recovery  
Dewayne Moore, ODMHSAS  
Erin Engelke, Calm Waters  
Wendy Larson, ODMHSAS  
Heath Hayes, ODMHSAS  
Latrisha Jackson, The Prevention Center, L.L.C.,  
Jessica Lewallen, ODMHSAS

**CALL TO ORDER**

Chair Knoblock called the meeting to order at 9:01 a.m. and stated that a quorum was present.

Chair Knoblock reminded everyone that Rebecca Newman German rolled off the board recently and introduced and welcomed Dr. Gina Pazzaglia, new ODMHSA Board Member; she will be referred to as Dr. Gina from this point on.

Dr. Gina stated that she has been licensed since 1996 and started her first mental health practice with the 7th Day Adventist Hospital in Tennessee in 1993. She has been in the mental health field for many years. She stated she was a midwife and childbirth educator in her early 20s, which began her journey on understanding

body/mind and medicine. She then had a non-profit for 9 years in Oklahoma City. Since 2012, she's been the CEO and Senior Clinical Director of Restorative Alternative Wellness.

**APPROVAL OF MINUTES OF THE NOVEMBER 19, 2021, BOARD MEETING**

Dr. Wilsie moved to approve the November 19, 2021, minutes. Ms. O'Doherty seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Abstain	Dr. Wilsie	Yes
Dr. Gina	Abstain		

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

Dr. Durand Crosby presented the programs recommended for approval listed on Attachment A as follows:

**Alcohol and Drug Treatment Programs**

**A. Permit for Temporary Operation**

Permit for temporary operation was recommended for: Ahni Wakaya Counseling & Consulting, Inc., Wilburton [OP: Adol., Adult]; Second Chance Recovery Center, Inc., Pryor [Res'l, Co-Occ Res'l, Med Detox: Adult]; Shepherd's Recovery and Counseling Services, Inc., Oklahoma City [OP: Adol., Adult]

Ms. Holland moved to approve permit for temporary operation for the above-referenced programs. Dr. Wilsie seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**B. Certification with Special Distinction**

Certification with special distinction was recommended for: Arcadia Trails Integris Center for Addiction Recovery, Inc., Edmond [OP, Res, Intensive Res'l, Co-Occ Res'l, Med Detox: Adult]

Ms. Knoblock asked if this is the fairly new facility?

Dr. Crosby answered no this is not a new facility; it is a renewal for Arcadia Trails.

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**C. Two-Year Certification**

Two-year certification was recommended for: H. Chandler & Associates, L.L.C., Shawnee [OP: Adol., Adult]; People, Inc. of Sequoyah County, Sallisaw, Tahlequah [OP: Adol., Adult]; Youth and Family Services, Inc., El Reno [OP: Adol]; Youth and Family Services of North Central Oklahoma, Inc., Enid [OP: Adol., Adult]

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**D. One-Year-Certification**

One-year certification was recommended for: HomeCare Advisors, L.L.C., dba Pinnacle Care, Durant [OP: Adol., Adult]; RiverBend Counseling Services, L.L.C., Durant [OP: Adol., Adult]; Unity Point Counseling and Resource Center, Inc., Ada [OP: Adol., Adult]

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**Opioid Substitution Treatment Programs**

**A. Two-Year Certification**

Two-year certification was recommended for: Mission Treatment Centers, Inc., Oklahoma City (W. Hefner Rd.); Mission Treatment Centers, Inc., Tulsa

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**Outpatient Mental Health Treatment Programs**

**A. Permit for Temporary Operation**

Permit for temporary operation was recommended for: Ahni Wakaya Counseling & Consulting, Inc., Wilburton; Calm Waters Center for Children and Families, Inc., Oklahoma City; OU Health Partners, Inc., Edmond, Oklahoma City

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Dr. Gina	Yes	Ms. Stomprud	Yes
Dr. Wilsie	Abstain		

**B. Certification with Distinction**

Certification with distinction was recommended for: Associated Therapeutic Services, P.C., Enid, Hennessey; Bright Eyes Family Services, L.L.C., Oklahoma City; Cherry Tree Counseling, P.L.L.C., Poteau; Chris King Counseling Services, L.L.C., Owasso, Tulsa; Clear View Professional Counseling, Inc., Edmond; Family Hope House, Inc., Tulsa; Full Life Family Resource Center, L.L.C., Broken Bow; Penny Lane Therapy, L.L.C., Oklahoma City, Norman

Ms. Knoblock stated that certification with distinction is always wonderful news but two of these providers, Associated Therapeutic Services in Enid and Hennessey and Clear View Professional Counseling in Edmond, are 100% compliant on all of their standards and will be eligible to receive a refund of their certification fee.

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

Ms. Knoblock thanked the organizations for a great performance.

**C. Two-Year Certification**

Two-year certification was recommended for: Discovering You, Inc., Oklahoma City; Foundations Behavioral Health, L.L.C., Claremore; HomeCare Advisors, L.L.C., dba Pinnacle Care, Durant; Kiamichi Youth Services for McCurtain County, Inc., Idabel; Oklahoma Mental Health Collective, L.L.C., Eakly; The Prevention Center, L.L.C., Oklahoma City

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**Community-Based Structured Crisis Center Programs**

**A. Two-Year Certification**

Two-year certification was recommended for: Lighthouse Behavioral Wellness Centers, Inc., Ardmore [CBSCC and URC], Durant [URC], Ada [URC]; Oklahoma Crisis Recovery Unit, Oklahoma City

Dr. Wilsie moved to approve two-year certification for the above-referenced programs. Ms. Stacy seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**Community Mental Health Center Programs**

**A. Certification with Special Distinction**

Certification with special distinction was recommended for: Creeks Mental Health Services, Inc., Broken Arrow, Catoosa, Okemah, Okmulgee, Sallisaw, Sapulpa, Stilwell, Tahlequah, Wagoner

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes

Dr. Gina Yes

**B. Certification with Distinction**

Certification with distinction was recommended for: Lighthouse Behavioral Wellness Centers, Inc., Ada, Ardmore, Durant, Pauls Valley, Seminole, Sulphur, Tishomingo

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**C. Two-Year Certification**

Two-year certification was recommended for: Counseling & Recovery Services of Oklahoma, Inc. [CCBHC], Tulsa

Ms. O'Doherty moved to approve two-year certification for the above-referenced programs. Dr. Wilsie seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**Community Residential Mental Health Programs**

**A. Certification with Distinction**

Certification with distinction was recommended for: Sugar Mountain Retreat, Inc., Welling

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**B. One-Year Certification**

One-year certification was recommended for: Chase E. Inc. dba 3C Old Fashion Boarding Home, Prague

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

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

Ms. Knoblock thanked all the board members for taking the time to review certification reports and the staff at ODMHSAS for reviewing all the materials in order to award the certifications.

**DISCUSSION REGARDING REPORT FROM INTERIM COMMISSIONER**

Commissioner Slatton-Hodges presented her report as follows:

Henry Hartsell, Executive Director, Clayton Morris, Director of Residents, Griffin Memorial Hospital; Jessica Wisdom, Chief Clinical Integration Officer, Durand Crosby, J.D., Ph.D., ODMHSAS - Commissioner Slatton-Hodges stated a considerable amount of time has been spent on two ongoing projects. Also having continued meetings regarding planning should the Agency receive ARPA funds for a new Griffin Memorial Hospital.

Sheriff's Association Board Meeting and District Attorneys Council (Speaker). Commissioner Slatton-Hodges stated there were great questions and discussions with both groups explaining the crisis continuum of care.

Commissioner Slatton-Hodges stated the Department is a member of NASMHPD (National Association of State Mental Health Program Directors). She stated that other states may hear a presentation of the work we are doing here in Oklahoma and reach out to ask questions. Commissioner stated recently she spent a considerable amount of time with Ohio explaining to them the CCBHC program as they are interested in creating this program within their state. She also stated a considerable amount of time was spent with Iowa regarding the use of technology to deliver services as well as for law enforcement.

Steve Harpe, Chief Operating Officer – Mental Health Deep Dive; Chief Financial Officer Amanda Rodriguez– Commissioner Slatton-Hodges stated she met with the Chief Financial Officer for the Governor's Office as well as Steve Harpe to go over the budget with them. As well, there was also the House budget meeting and the Senate budget hearing. She stated there was many great questions and good dialogue.

Director Jari Askins, Debra Charles, and Diana O'Neal, Administrative Office of the Courts – Drug Courts – Commissioner Slatton-Hodges stated that Jari Askins had asked to look over the drug court statutes and recommend any changes needed. She stated that the recommended changes have been turned in to Senator Thompson for him to review and decide what is of interest to him to move forward in terms of a Bill with any changes.

Commissioner Slatton-Hodges met with Representative Jon Echols regarding changes around Oklahoma County jail and what is going on there.

Commissioner Slatton-Hodges shared that a virtual Department employee appreciation celebration was held. She stated that everyone had a good time and were able to acknowledge staff and the good work that they did and feed everybody across the facilities as well.

Mayor David Holt, Oklahoma City Council; Clayton Taylor, The Taylor Group; John McPhetridge, Deputy Fiscal Director, OK House of Representatives, Senator Wallace – Commissioner Slatton Hodges stated she met with Mayor Holt and Senator Wallace to discuss issues around the new transportation law. There have been some bumps in Oklahoma County regarding the 30-mile piece and this meeting was to see if any Bill amendments were needed moving forward.

Traylor Rains and Melody Anthony, Healthcare Authority – Commissioner Slatton-Hodges stated a goal to have physicians, starting with all Medicaid physicians utilize the string grief intervention and referral to treatment when they see persons, which is a CDC best practices prevention tool. She stated they also met to discuss suicide screenings at physician's offices. She stated that there was very good dialogue and the plan being developed should be moving forward and completed rather quickly.

Commissioner Slatton-Hodges stated that she has been invited to speak to The National Council around the implementation of CCBHCs on two different occasions. She stated that the last month was around workforce and CCBHC where she presented for them as well.

Commissioner Slatton-Hodges stated she meets with numerous provider directors and providers each month. She also spoke about the NASHMHPD TTI 2022 Orientation. She stated that NASHMHPD awards some grants around specific areas. She stated that there are three different categories for the grants and Oklahoma was fortunate enough to receive 1 in each category; ODMHSAS received 3 grants from them and recently had the first orientation to get those grants going. All of the grants are around workforce initiatives in behavioral health and there are some pretty exciting upcoming projects.

Commissioner Slatton-Hodges asked if there were any questions.



Ms. Knoblock asked if there were any best practices from other states that Commissioner Slatton-Hodges has on her radar to implement regarding the NASMHPD event.

Commissioner Slatton-Hodges answered that people are looking to Oklahoma for ideas because Oklahoma is not afraid to try or implement new things. She stated a good example is Oklahoma started doing mental health urgent cares about 12 years ago.

Ms. Knoblock congratulated Commissioner Slatton-Hodges on the traction that she was getting around SBIRT, and that she overheard high praise for the ODMHSAS budgetary process in front of our legislators.

Commissioner Slatton-Hodges agreed that both the House and Senate made wonderful comments.

#### **DISCUSSION REGARDING THE REPORT FROM CORPORATE ACCOUNTABILITY SUBCOMMITTEE**

The Corporate Accountability Subcommittee met on Wednesday, January 19, 2022.

#### **DISCUSSION AND POSSIBLE ACTION REGARDING THE INTERNAL AUDITOR'S REPORT**

Dr. Crosby presented the Internal Audit report and updated the committee on the status of ongoing audits being conducted by the division. (The report has been included in your Board book.)

There were a few questions regarding the Internal Auditor's report that Dr. Crosby addressed.

Dr. Crosby is present and available to answer any questions regarding the report.

The Corporate Accountability subcommittee recommends that the Board accept the Internal Auditor's report.

Ms. O'Doherty made a motion to approve the Internal Auditor's report. Dr. Wilsie seconded the motion.

#### **ROLL CALL VOTE**

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

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

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

The Department's Advocate General, Joey Mickey, presented the Advocate General's report to the Subcommittee and updated the committee on the work being conducted by his division. (The report has been included in your Board book.)

There were no questions regarding the Advocate General's report.

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

The Corporate Accountability subcommittee recommends that the Board accept the Advocate General's report.

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

**ROLL CALL VOTE**

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

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

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

The Department's Inspector General, Dewayne Moore, presented the Inspector General's report to the Subcommittee. The Inspector General's report was reviewed by the Subcommittee. (The report has been included in your Board book.)

There were a few questions regarding the Inspector General's report that Mr. Moore addressed.

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

The Corporate Accountability Subcommittee recommends that the Board accept the Inspector General's report.

Ms. O'Doherty made a motion to approve the Inspector General's report. Dr. Gina seconded the motion.

**ROLL CALL VOTE**

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

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

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

Dr. Crosby presented the Legal report. (The report has been included in your Board book.)

There were a few questions regarding the Legal report that Dr. Crosby addressed.

Dr. Crosby is present and available to answer any questions regarding his report.

The Corporate Accountability subcommittee recommends that the Board accept the Legal report.

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

**ROLL CALL VOTE**

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

There was no further business discussed.

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

Dr. Wilsie provided the Performance Improvement (PI) Committee report as follows:

The Performance Improvement Committee met on January 20, 2022 via Zoom.

There was one presentation for the January meeting.

Teresa Stephenson, Director of Medication, Stimulant Use, Women & Family Specific Treatment Services/State Opioid Treatment Authority presented on the SAFER Initiative.

A summary of her presentation is as follows:

Safely Advocating for Families Engaged in Recovery or SAFER, is an initiative that aims to improve services, supports and outcomes for infants with prenatal substance exposure and their families. SAFER goals include enhancing access to recovery supports for pregnant and parenting individuals, addressing stigma and isolation for individuals with a substance use disorder and reducing family separation. Community partners representing health care, social services, treatment providers, the legal community and community-based organizations have produced three recommendations to create a collaborative and systemic response to families experiencing a substance use disorder that will decrease despair and increase hope.

The recommendations are to:

1. Enhance upstream options to increase recovery during pregnancy and reduce prenatal substance exposure.
2. Change the definition of an "infant affected by substance abuse" to include all substance exposed newborns
3. Develop an alternative to reports of child abuse and neglect for infants with prenatal substance exposure by creating a CAPTA notification pathway for lower risk cases.

Dr. Wilsie accepted the role as Chairperson of the Performance Improvement Committee.

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

Dr. Durand Crosby reviewed the Critical Incidents Report Summaries and circumstances surrounding these incidents.

The Performance Improvement Committee recommended approval of the Critical Incidents Report.

Dr. Wilsie moved to approve the Critical Incident Report. Ms. O'Doherty seconded the motion.

### ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

There was no further business discussed.

There is no further action required from the Board.

Ms. Knoblock thanked Dr. Wilsie for chairing the committee.

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

Ms. O'Doherty stated that the Finance Committee met on January 19, 2022.

**DISCUSSION AND POSSIBLE ACTION REGARDING THE MONTHLY FINANCIAL REPORT**

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

For FY-22 revenue collections are trending below projections by 2.7% or \$15 Million, some under spending in newly awarded grants led to lower than projected revenues. Expenditures are trending under budget by 11% or \$59 million due to a delay in encumbering funds for newly awarded grants. The year-to-date net variance for the agency is a positive 8% or \$43.9 million.

The Finance Committee recommended approval of the FY-22 December Financial Reports.

Ms. O'Doherty moved to approve the Financial Report. Ms. Stomprud seconded the motion.

**ROLL CALL VOTE**

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

**DISCUSSION AND POSSIBLE ACTION REGARDING BUDGET REVISIONS**

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

**SFY 2022 Budget Revisions**

Mr. Edwards presented revisions #5 and #6 to the FY-22 budget work program. The revisions added additional budget to recognize revenues from new federal grants, interagency revenue and revenue from the ETPS supplemental payments. In total, the revisions added \$6,925,667 to the FY-22 budget work program.

The Finance Committee recommended approval of revisions #5 and #6 to the FY-22 budget work program.

Ms. O'Doherty moved to approve budget revisions #5 and #6 for the FY-22 budget work program. Dr. Gina seconded the motion.

**ROLL CALL VOTE**

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes

Ms. Stomprud  
Dr. Gina

Yes  
Yes

Dr. Wilsie

Yes

## **PRESENTATION**

Commissioner Slatton-Hodges introduced Ms. Kelly Earles, Senior Manager for Family Treatment Court Programs and Women & Family Specific Treatment Services, who will present on Family Treatment Court.

A summary of Ms. Earles presentation is as follows:

Ms. Earles is going to go over the impact of parental substance use and the role of the family treatment courts. She gave a little background on substance use in foster care, the impact of SU on reunification, specifically in Oklahoma County and then an overview of the FTC model and its effectiveness. Ms. Earles also provided an overview of the national research on family treatment courts, as well as current research occurring in Oklahoma.

- Prevalence of Substance Use in Foster Care
- Impact of Substance Use on Reunification - A Look at Oklahoma County
- Overview of the FTC Model
- Overview of the FTC Effectiveness
- Outcome data

Ms. Earles went over the scope of the problem. She stated the big picture is that 1 out of 8 children in the US live in households with at least one parent who has had a substance use disorder. Further data indicates, in terms of prevalence, roughly 12% of children in the general population have at least one parent with a substance use disorder. Those rates are much higher in the child welfare system, where estimates are as high as 79% of children in foster care is due, at least in part, to parental addiction.

Ms. Earles stated the most recent national data available is from 2019. That year, Oklahoma ranked 8th in the proportion of removals that are due, at least in part, to parental alcohol or drug use. The national average is 38.9% and Oklahoma is 15 percentage points higher than the national average. When preparing for the presentation data was reviewed from 2015. That year, Oklahoma was ranked 14th with 46% of removals due to substance use). This is showing an 8% increase over just a 4-year period.

Ms. Earles went over the impact of substance use on reunification, specifically for Oklahoma County. Dr. Margaret Lloyd-Sieger who is one of the outside evaluators from the University of Connecticut ran a complex analysis from AFCARS from 2014-2018 to understand whether substance use impacted children's likelihood of removal. She found that children with a substance use as a reason for removal were 15% less likely to reunify. After controlling for race, ethnicity, age, disability,

and case characteristics children were and additional 13% less likely to reunify. Dr. Lloyd-Sieger did find that children were significantly more likely to reunify if they were older, white in a single-mother headed family.

Ms. Earles stated in addition to the effect on reunification, families with substance use removals who do reunify are at increased likelihood of re-entry. Ms. Earles highlighted a 2009 study from Oklahoma that found that 36% of families with substance use removals had re-entered foster care within 12 months. At the time of this study, Oklahoma had one family treatment court and it was in Tulsa County.

Ms. Earles stated that although the statistics mentioned appear bleak, research over the last 10-15 years has identified interventions associated with improved outcomes for this population. As it relates to foster care placement and reunification, it was found that access to substance use treatment is associated with improved outcomes and in fact based on current knowledge, treatment completion is one of the most reliable and robust predictors of reunification.

Ms. Earles stated the family treatment court (FTC) model is a multidisciplinary team approach designed to address poor outcomes from traditional family reunification programs. These programs aim to increase reunification through increasing treatment completion and compliance among parents with substance use disorders. These programs started in 1995 after the peak of the crack/cocaine epidemic that was putting thousands of children into foster care. There are now around 500 FTC across the US with 5 in Oklahoma serving 6 counties.

Ms. Earles further clarifies that this model includes the judicial oversight and comprehensive services with treatment services. This brings together Child Welfare, courts, substance use and mental health treatment agencies as well as other services in support to partner in a setting, which is a civil docket versus a criminal docket. She stated that families in a family treatment court are two times more likely to reunify than a traditional child welfare docket.

Ms. Earles reviewed 12 publications that compared the percent of parents who completed treatment. All but one study found that parents within a FTC completed treatment at much higher rates. One study found no difference and one study found just a slight increase for the comparison parent.

Ms. Earles also stated that in 2019 after almost 30 years of operations within a family treatment court, the FTC best practice standards document was developed and available to help provide a guide for the family treatment courts. The FTC standards reflect a rigorous research and rich practice experience from the treatment courts, dependency/deprived court, child welfare, SUD treatment, mental health treatment, children's developmental services, and related health, education, and social services. These standards provide a shared definition, establish a common language and they provide a foundation to adopt the

standards across systems. There is no single agency has the skill or capacity to meet all their needs.

Ms. Earles stated the FTC Best Practice Standards provided a good outline of what a court should look at when they are identifying cases:

- Substantiated child welfare case.
- Child welfare plan for reunification (if children removed)
- Assessed substance use or co-occurring disorder
- Require increased supports to successfully close child welfare case

Ms. Earles stated that when a jurisdiction incorporates a FTC, there are improved system outcomes across several systems, which includes Child Welfare, Court, and Treatment Systems. What this means is:

- Higher Treatment Completion Rates
- Shorter time in foster care
- Higher family reunification rates
- Lower termination of parental rights
- Fewer new child protective services petitions after reunification

Ms. Earles went over the Benefits of Family Treatment Court compared to a Traditional Child Welfare Case: On a Traditional Deprived Docket may have review hearings every 90 to 120 days - so these cases are heard every 3-6 months. What has been heard from our national TA partner, Children and Family Futures, is that individuals on a regular docket tend to NOT initiate judicial orders until about 9 days before the court hearing. (This is just observational data, not actually studied). With a FTC docket, there is an increased hearing frequency. The hearings take place weekly to bi-weekly and then can move monthly as the case progresses. The benefit of having more frequent hearings as part of the family treatment court is that if something happens with the case, the team can add them to the next hearing and address challenges and provide support more quickly to these families.

Ms. Earles continues by stating other continued benefits of the FTC include family involvement. Family members are encouraged to participate in a family treatment court with the FTC caregiver. The individual defines what "family" means to them. So, they could include their significant other, grandparents, foster parent, aunts, uncles or even a child that is not involved with the case. The FTCs take a family centered approach to the cases because what is known is that Recovery occurs in the context of family.

Ms. Earles went over the Principles of Family-Centered Treatment, which is a key concept of family treatment court.



- Treatment is **comprehensive** and inclusive of substance use disorder, clinical support services, and community supports for parents and their families
- The **caretaker defines "family"** and treatment identifies and responds to the effect of substance use disorders on every family member
- **Families are dynamic**, and thus treatment must be dynamic
- **Conflict within families is resolvable**, and treatment builds on family strengths to improve management, well-being, and functioning
- **Cross-system coordination** is necessary to meet complex family needs

Ms. Earles stated that Family Treatment Courts work cases differently. In addition to a family centered approach to the child welfare case, the FTC has a multi-disciplinary approach to layer needed services that meet the needs of the entire family. The FTC provides quality services, supports and treatment not just to the parent or not just to the child but to the parent, child and family unit. All parties of the case are a part of the staffing and the FTC Team, which provides the opportunity for all members of the team to discuss the case and stay on the same page. The FTC uses motivational responses that are coupled with therapeutic responses to help guide behavior.

Examples of incentives with a FTC would include:

- Applause in court, tokens, household items, gift cards, graduation from the program and sometimes decreased court appearances as the case progresses.

Examples of consequences would include:

- Verbal reprimand by the judge, reflection paper, increased court appearances.

Ms. Earles gave an additional look at the FTC data on a national level. A systematic review of 18 FTC studies found that FTC children were 6% to 40% more likely to reunify than children in TCW (Lloyd, 2015). Additionally, the review found that FTC children spent 37 to 307 fewer days in care on average (Lloyd, 2015).

Ms. Earles reviewed the evaluation outcomes from our local courts.

- The 2010-2014 SAMHSA Children Affected by Methamphetamine Grant in Tulsa County found that FTC cases were 178% more likely to reunify compared to TCW and that children in the FTC spent 227 fewer days in out of home care than the comparison group.
- This grant also completed a cost analysis of the program and found that there was a cost avoidance of over \$5 million.

- In 2015, DMH received another FTC enhancement grant from SAMHSA and included an evaluation of the program as part of the grant.
- This evaluation of the Okmulgee County FTC found that from the date of removal, FTC children were 170% more likely to reunify. But, when you look at the time from FTC start date, children were 292% more likely to reunify. This particular study found that children in the FTC spent an average of 361 fewer days in foster care. So as a part of this grant, we also completed a cost analysis of the program and found that there was a cost avoidance of over \$2 million.

Ms. Earles stated that currently a similar study is being performed in the Oklahoma county Family Treatment Court. In 2017, a 5-year SAMHSA enhancement grant was received. This is the final year of the project, so the matching procedure has not been conducted. Near the conclusion of the study, the evaluation team will run the matching procedure and conduct a full analysis. Currently we are seeing very positive trends with a high rate of reunification. Regarding reunification, since the start of the project, 173 children in the foster care have been served. Fifty-four of them were still in foster care at the end of Year 4 (September 2021). Of the children who exited care, which was 199, 61.3% reunified and 37% were adopted. At the end of year four, of the 119 children that exited, 117 of those exited to some sort of permanency. Currently there is a very low re-entry into foster care in Oklahoma county. 119 children have exited after FTC participation and of those, only one child or less than 1% has reentered care.

Ms. Earles showed raw data from the DC (drug court) web system for January - December 2020. 92% of the cases that reunified (trial reunification) did so in under a year. The average time from entry into the FTC to reunification or trial reunification in that same timeframe was 192 days or just a little bit more than 6 months. Specifically in Oklahoma and Kay counties - 100% of cases that reunified in 2020, did so in under a year. Other data from our FTC Web systems through SFY-21 shows that our FTCs have 125% decrease in out of home placement days and 76% decrease in unemployment from entry to exit. Also of specific note is that 45 babies were born not substance exposed.

Ms. Earles gave a look at current FTCs in Oklahoma and a look at proposed expansion.

- Current counties with FTCs are: Custer/Washita, Kay, Oklahoma, Okmulgee, and Tulsa)
- The jurisdictions identified due to their interest in implementing a FTC are: (Beckham/Roger Mills, 3rd Judicial District, Muskogee, Rogers, Johnston, Marshall, and Murray)

Ms. Earles recapped her presentation by giving the Family Treatment Court Outcomes

- **Higher** Treatment Completion Rates
- **Shorter** Time in Foster Care
- **Higher** Family Reunification Rates
- **Lower** Termination of Parental Rights
- **Fewer** new CPS Petitions
- **Lower** Criminal justice recidivism
- **Cost savings** per family.

Dr. Gina asked who can be a treatment provider with the Family Treatment Court?

Commissioner Slatton-Hodges states she will get clarification of the answer for the board.

**NEW BUSINESS**

There was no further business discussed.

**ADJOURNMENT**


Dr. Gina moved to adjourn the meeting. Dr. Wilsie seconded the motion.

ROLL CALL VOTE

Ms. Holland	Yes	Ms. O'Doherty	Yes
Ms. Knoblock	Yes	Ms. Stacy	Yes
Ms. Stomprud	Yes	Dr. Wilsie	Yes
Dr. Gina	Yes		

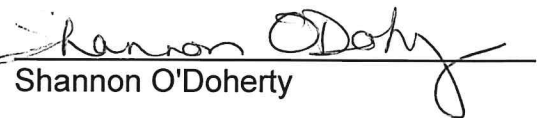
  
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 Courtney Latta Knoblock, MPA


  
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 Kim Holland, APRN-CNP

  
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 Gina Pazzaglia, Ph.D.

  
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 Kristin Stacy, J.D.

  
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 Kari Stomprud, M.Ed.

  
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 Shannon O'Doherty

  
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 Carisa Wilsie, Ph.D.

