



pennsylvania

DEPARTMENT OF PUBLIC WELFARE

OFFICE OF MENTAL HEALTH AND
SUBSTANCE ABUSE SERVICES

The OMHSAS Advisory Structure is comprised of three committees and two subcommittees: Children’s Behavioral Health Advisory Committee, Adult Behavioral Health Advisory Committee, Older Adult Behavioral Health Advisory Committee, and Youth Subcommittee. The Youth Subcommittee provides youth representation to the Children’s and Adult Behavioral Health Advisory Committees. The Persons in Recovery Subcommittee will advise OMHSAS and Bureau of Drug and Alcohol Programs on Drug and Alcohol/Co-occurring issues. These committees will advise on a broad behavioral mandate to include, but not be limited to, mental health, substance abuse, behavioral health disorders, and cross-system disability. All workgroups and committees of OMHSAS work to support the objectives developed by the OMHSAS Advisory Committee.

Workgroup/ Committee	Advisory Connection	Participants	Expected Outcome
Cross Systems Workgroup	Children’s	Family members, youth, OMHSAS staff, Sunshine members, and other Stakeholders.	To support increased awareness, understanding, and communication across Pennsylvania’s child servicing systems at local, county, and state-wide levels.
Public Health Workgroup	Children’s	Family members, youth, OMHSAS staff, Sunshine members, advocates, Provider’s, and other Stakeholders.	To identify a framework for implementing mental health promotion efforts for children and families.
Youth and Family Advocacy Workgroup	Children’s	Family members, youth, OMHSAS staff, Sunshine members, and stakeholders.	To develop and promote a statewide strategy to build capacity for youth and family advocacy at the local level.
Best Practices in Children’s Prescribing Practices	Children’s	Consumers, families, advocates, providers, Child Psychiatrists	<ol style="list-style-type: none"> 1) There are 4 subcommittees to address key areas that were identified by the committee members; Family Education; Informed Consent; the needs of Special Populations and the actual prescribing practices oversight/guidelines 2) Improved quality of BH prescribing practices for all children and adolescents in the BHMCO/PHMCO/FFS of Health Choices 3) Identification and resolution of problems that interfere with excellence in service provision 4) Innovation and communication as to current services and creative ways to address challenges

<p>Keystone Pride Recovery Initiative Workgroup</p>	<p>Adult</p>	<p>Consumers -- preferably behavioral health consumers who identify as LGBTQI Families, LGBTQI community, Providers , LGBTQI issues Counties, Behavioral Health Managed Care Organizations, Advocates/Universities /Others</p>	<ol style="list-style-type: none"> 1) Provide advice, encouragement and people-power to OMHSAS for the implementation of the recommendations on training, consumer support, data collection and reporting practices. 2) Provide advice and encouragement to OMHSAS on the recommendations for policy changes. 3) Develop measurement and evaluation systems to track the impact of the recommendations. 4) Publicize the recommendations within and outside the PA behavioral health system. 5) Secure funding from public and private sources to support this implementation.
<p>PATH RFP Workgroup</p>	<p>Adult</p>	<p>Consumers (2) are represented on the workgroup, OMHSAS Staff,</p>	<p>The purpose is to identify and help select additional counties serving homeless populations and to target limited additional funding to those areas.</p>
<p>Peer Leadership</p>	<p>Adult</p>	<p>Certified Peer Specialists, up and coming recovery leaders with OMHSAS partnership.</p>	<p>Purpose to promote Peers in the workplace, as a fundamental shift, in how Pennsylvania's behavioral health system does business</p>
<p>BH-PH Think Tank</p>	<p>Adult</p>	<p>Consumer, Advocacy Groups, Foundations, PH-BH Providers Currently in development</p>	<ol style="list-style-type: none"> 1) Identify / describe BH-PH collaborative efforts and initiatives in PA 2) Identify best or promising practices around all aspects including, billing. 3) Contrast with SE/SW Connections initiatives 4) Create learning collaborative
<p>State Hospital Chief Medical Officers</p>	<p>Adult</p>	<p>All Chief Medical Officers in the state hospital system, together with the Chief of Psychiatry if they are not the same person; there are also OMHSAS staff and others that attend to discuss issues of concern or provide education on relevant issues</p>	<ol style="list-style-type: none"> 1) Unification of state hospital medical policies and procedures 2) Coordination and timely communication of clinical service concerns that occur across the system and impact medical care to consumers, families and advocates 3) Provides the opportunity for grassroots feedback from CMOs and Chiefs of Psychiatry who forward innovative ideas and novel ways to address challenges that arise as they strive for excellence in the delivery of clinical services

Peer Support Services Monday am workgroup	Adult	OMHSAS staff, CPS trainers,	Communication Clearinghouse to fill role of NFI objective 3 workgroup Task Groups- Determining and inviting broader stakeholder representation, CPS employment survey, OVR/MOU, Establishing CPS as profession, Ethics, PSS Training Forum,
County Plans	All Committees	Consumers— individuals interested in county plan development Families Provider representatives, Counties, Behavioral Health Managed Care Organizations , Advocates/Universities /Others, OMHSAS staff,	The Purpose of this workgroup is to develop the county plan guidelines- the county plan is a plan for the implementation of a unified system strategy and the consolidation of the mental health planning process. The plan should describe the status of and any modifications to the county's efforts to enable adults.
Block Grant	All Committees	Consumers, Families, Provider representatives, Counties, Behavioral Health Managed Care Organizations , Advocates/Universities Others, OMHSAS staff	The Groups primary purpose is to assist in development of the block grant application and preparation for block grant reviews.
Persons in Recovery Subcommittee	All Committees	Consumers /Family members with a D&A advocacy focus	The purpose is to articulate a consumer and family voice concerning substance use issues and to assist with prioritizing initiatives to address them
Crisis Intervention	All Committees	OMHSAS Staff, County, Crisis Association, Consumer representation	The group is surveying counties on current status of crisis intervention services. The Goal is to have sufficient Crisis intervention and prevention services throughout Pennsylvania regardless of county.
Psych Rehab	All Committees	Consumers-individuals interested in county plan development Families Provider representatives, Counties, Behavioral Health Managed Care Organizations , Advocates/Universities /Others, OMHSAS staff	Development of the Psych Rehabilitation Regulations. Group is focusing on development of regulations, moving current practice from standards to regulations and development of action plans for providers of psych rehab for implementation.

D&A Coalition	All Committees	Bureau of Drug and Alcohol Programs, Department of Corrections, Probation and Parole, Department of Public Welfare, Persons in Recovery, County Partners	To identify and build a coordinated system of care in Pennsylvania capable of collaboratively offering quality healthcare that addresses the needs and priorities of Pennsylvanians as relates to substance use and co-occurring prevention, intervention, treatment and recovery. All care designed shall be safe, effective, person-centered, timely, culturally competent, efficient and equitable.
Behavioral Health Clinical Committee	All Committees	Consumers/ Advocates/Family Members/Providers/O MHSAS	The purpose is so that every Pennsylvanian with Mental Health Disorders shall have the prescription medications they need to keep them well in their community. The Committee will focus on priorities developed by the members: <ul style="list-style-type: none"> • cross-systems realignment • quality of prescribing practices & policies
Quality Management Committee	All Committees	BH-MCOs, Consumers, Counties, Families, OMHSAS staff, Providers	The OMHSAS Quality Management Committee (QMC) provides informed external stakeholder advice on current and proposed OMHSAS quality management activities. Reports from the OMHSAS Advisory Committees are a standing part of each QMC meeting agenda. <ul style="list-style-type: none"> • <i>This is an ongoing committee (meets face-to-face on a quarterly basis in Hbg. for 2 hours).</i>
Integrating Consumer Satisfaction Methodologies workgroup	All Committees	BH-MCOs, Consumers, Consumer/Family Satisfaction Teams, Counties, Families, OMHSAS staff, Providers	The Integrating Consumer Satisfaction Methodologies (CSM) workgroup has 3 expected outcomes: <ol style="list-style-type: none"> 1) To advice on a plan to use CST/FSTs to implement the use of the ROSI adult survey statewide. 2) To develop a set of 5-10 adult survey questions and 5-10 family survey questions to be asked by CSTs and C/FSTs statewide. 3) To revise HealthChoices behavioral Health contract Appendix L to reflect updated consensus on survey measures.
BH MCO Medical Directors	All Committees	Medical Directors for all BH-MCOs in Health Choices; OMHSAS Staff for updates on their Bureaus & OMHSAS policies & procedures; Occasional meetings with PH MCO Medical Directors to coordinate services	<ol style="list-style-type: none"> 1) Coordination of OMHSAS with the BH MCO Medical Directors to provide an open forum for discussion of issues that require policy decisions/problem solving or discussions with the Deputy Secretary and/or impacted Bureau Directors within OMHSAS 2) Provides the opportunity for grassroots feedback from Health Choices providers and timely communications between OHMSAS and the BH MCO

			<p>Medical Directors on all clinical services</p> <p>a) Improved coordination of clinical services and quality of services, particularly the oversight of BH prescribing practices</p>
PA Psychiatric Leadership Council	All Committees	Consumers, families, advocates, psychiatrists and OMHSAS Staff	<ol style="list-style-type: none"> 1) Promote Recovery focused service delivery to consumers and their families 2) Continue Community Psychiatry Fellowships to educate psychiatrists in Recovery principles and skills necessary for their success in the public sector 3) Develop best practices in training new psychiatrists in working with families and advocates 4) Recruit and retain psychiatrists in the public sector 5) Provide a voice for the consumers, families, advocates, providers and psychiatrists to address system issues that impede their ability to provide excellence in care