1. **SAMHSA Grant Awards**
   The following organizations will be receiving a grant award from the Substance Abuse and Mental Health Services Administration:

   - **Announcement Number: SM-18-015**
     **Announcement Name:** State Opioid Response Grants
     **Grantee Organization:** NM DEPARTMENT OF HUMAN SERVICES
     **Award Amount:** $5,307,273 annually for two years

   - **Announcement Number: SM-17-008**
     **Announcement Name:** Promoting Integration of Primary and Behavioral Health Care
     **Grantee Organization:** NM DEPARTMENT OF HUMAN SERVICES
     **Award Amount:** $2,000,000 annually for five years

   - **Announcement Number: SM-18-013**
     **Announcement Name:** Assertive Community Treatment Grants
     **Grantee Organization:** NM DEPARTMENT OF HUMAN SERVICES
     **Award Amount:** $678,000 annually for five years

   - **Announcement Number: TI-18-016**
     **Announcement Name:** Tribal Opioid Response Grants
     **Grantee Organization:** PUEBLO OF TAOS
     **Award Amount:** $85,115.00

   - **Announcement Number: TI-18-016**
     **Announcement Name:** Tribal Opioid Response Grants
     **Grantee Organization:** OHKAY WINGEH
     **Award Amount:** $87,045.00

   - **Announcement Number: SM-18-017**
     **Announcement Name:** Native Connections
     **Grantee Organization:** OHKAY WINGEH
     **Grantee City:** Ohkay Owingeh
     **Award Amount:** $236,663.00

   - **Announcement Number: TI-18-016**
     **Announcement Name:** Tribal Opioid Response Grants
     **Grantee Organization:** FIVE SANDOVAL INDIAN PUEBLOS, INC.
     **Award Amount:** $772,946.00

   - **Announcement Number: SM-18-017**
     **Announcement Name:** Native Connections
     **Grantee Organization:** FIVE SANDOVAL INDIAN PUEBLOS, INC.
     **Grantee City:** Rio Rancho
     **Award Amount:** $250,000.00
Announcement Number: SM-18-017
Announcement Name: Native Connections
Grantee Organization: PUEBLO OF ACOMA
Grantee City: Acoma Pueblo
Award Amount: $250,000.00

Announcement Number: SM-17-004
Announcement Name: INDIGENOUS - PROJECT LAUNCH
Grantee Organization: PUEBLO OF ACOMA
Grantee City: Acoma Pueblo
Award Amount: $366,775.00

Announcement Number: SM-18-006
Announcement Name: Project AWARE - State Education Agency
Grantee Organization: PUEBLO OF SAN FELIPE
Grantee City: San Felipe Pueblo
Award Amount: $1,351,881.00

Announcement Number: SM-17-006
Announcement Name: Zero Suicide
Grantee Organization: PUEBLO OF SAN FELIPE
Grantee City: San Felipe Pueblo
Award Amount: $400,000.00

Announcement Number: SP-18-008
Announcement Name: Strategic Prevention Framework - Partnerships for Success
Grantee Organization: ALBUQUERQUE AREA INDIAN HEALTH BOARD
Grantee City: Albuquerque
Award Amount: $500,000.00

Announcement Number: SP-16-004
Announcement Name: HIV CBI
Grantee Organization: ALBUQUERQUE AREA INDIAN HEALTH BOARD
Grantee City: Albuquerque
Award Amount: $282,354.00

Announcement Number: SM-18-017
Announcement Name: Native Connections
Grantee Organization: FIRST NATIONS COMMUNITY HEALTHSOURCE, INC.
Grantee City: Albuquerque
Award Amount: $250,000.00

Announcement Number: SM-18-017
Announcement Name: Native Connections
Grantee Organization: ZUNI YOUTH ENRICHMENT PROJECT, THE
Grantee City: Zuni
Award Amount: $249,994.00
Announcement Number: SM-18-012
Announcement Name: Community Programs for Outreach and Intervention with Youth and Young Adults at Clinical High Risk for Psychosis
Grantee Organization: COUNTY OF BERNALILLO
Grantee City: Albuquerque
Award Amount: $400,000.00

Announcement Number: SM-16-011
Announcement Name: Assisted Outpatient Treatment (AOT)
Grantee Organization: CITY OF ALBUQUERQUE
Grantee City: Albuquerque
Award Amount: $957,625.00

Announcement Number: TI-18-008
Announcement Name: SAMHSA Treatment Drug Courts
Grantee Organization: BERNALILLO COUNTY METROPOLITAN COURT
Grantee City: ALBUQUERQUE
Award Amount: $399,974.00

Announcement Number: SP-19-009
Grantee Organization: NATIONAL LATINO BEHAVIORAL HEALTH ASSOCIATION, THE
Grantee City: Cochiti Lake
Award Amount: $500,000.00

Announcement Number: TI-18-012
Announcement Name: Targeted Capacity Expansion Hispanic/Latino Center of Excellence for Substance Use Disorder Treatment and Recovery Program
Grantee Organization: NATIONAL LATINO BEHAVIORAL HEALTH ASSOCIATION, THE
Grantee City: Cochiti Lake
Award Amount: $400,000.00

Announcement Number: TI-18-014
Announcement Name: Providers Clinical Support System- Universities
Grantee Organization: UNIVERSITY OF NEW MEXICO HEALTH SCIS CTR
Grantee City: Albuquerque
Award Amount: $150,000.00

Announcement Number: TI-17-009
Announcement Name: GBHI
Grantee Organization: ST. LUKE’S HEALTH CARE CLINIC, INC.
Grantee City: Las Cruces
Award Amount: $400,000.00

Announcement Number: TI-17-007
Announcement Name: PPW
Grantee Organization: SANTA FE RECOVERY CENTER, INC.
Grantee City: Santa Fe
Award Amount: $523,117.00
The National Safety Council recently released a report assessing state progress in addressing the opioid crisis. The Council prescribes six key actions that states should take to combat the opioid epidemic. NM was recognized as one of only three states (along with Nevada and Rhode Island) to have taken all six actions. The key actions are:
- Mandating prescriber education
- Implementing opioid prescribing guidelines
- Integrating prescription drug monitoring programs into clinical settings
- Improving data collection and sharing
- Treating opioid overdose
- Increasing availability of opioid use disorder treatment

3. Strategic Plan for Children’s Behavioral Health
In an effort to develop the BH Collaborative Children’s Strategic Plan, CYFD conducted a series of focus groups, where more than 70 people were interviewed, and presented to the BH Collaborative in July 2018. On September 25, 2018, the BH Collaborative and CYFD hosted a Children’s Behavioral Health Strategic Plan Convening, with 98 participants in attendance. Participants included the CYFD Cabinet Secretary and Division leadership from BHS, PS, JJS, and ECS; HSD BHSD and Medicaid; DOH; PED; Legislative Finance Committee; community and cultural partners; family members and advocates; youth advocates; behavioral health providers; Managed Care Organizations; and other key stakeholders. Presenters from HSD/BHSD, CYFD, DOH, PED, NM Voices for Children, El Puente, and the NM Black History Organizing Committee shared invaluable data on the current state of children and families in NM. The Convening included important voices from youth, families, and the NM Behavioral Health Providers Association as well as a presentation on the federal Family First Prevention Services Act. The Convening concluded with cross-sector conversations that generated opportunities for collaborating on existing and new initiatives.

The ideas and suggestions generated from the conversations will feed the BH Collaborative Children’s Strategic Plan. Updates on progress will be distributed to an email list serve comprised of Convening participants and will be provided at the BH Collaborative quarterly meetings.

4. National Recovery Month
NM celebrated National Recovery Month throughout September with tremendous success. Recovery Month is a national observance dedicated to educating Americans that substance use treatment and mental health services can enable those with a mental and/or SUD to live healthy and rewarding lives. Recovery Month celebrates the gains made by those in recovery and reinforces the positive message that: behavioral health is essential to overall health; prevention works; treatment is effective; and people can and do recover. This year’s theme was “Join the Voices for Recovery: Invest in Health, Home, Purpose, and Community.” Communities all over the state hosted celebratory events filled with shared recovery stories, positive energy, and
hope for the future. Many thanks to everyone who participated and helped make possible these inspiring community events!

The Medicaid Behavioral Health Rule, with its accompanying Behavioral Health Policy and Billing Manual, is under leadership review. It aligns all policy with Children, Youth and Family Department policy, and contains many key changes developed with input from providers as well as State Departments. Promulgation is now expected early next year. Staff at MAD, BHSD and CYFD are currently working to prepare a Supplement to fill the gap until the rule is promulgated.

6. Administrative Services Organization (ASO)
Falling Colors, Inc. (FC), is now in its second year as the Administrative Services Organization (ASO) for the BH Collaborative. In the first year of operations, the ASO was able to assist with 2,567 provider payments, with an average day-to-payment of less than 6 days and with all payments 100% on time. The ASO was able to process 149,371 claims with a 91% acceptance rate. 197 provider contracts were executed with a total of $44,471,184 paid to providers. $711,902 was recouped from 29 providers for Medicaid covered individuals that were billed to Non-Medicaid funds. The ASO continues to provide outreach and training for providers and has resolved 4,689 support tickets through FY18.
*Source- FC ASO Status Report

7. Behavioral Health Investment Zones (BHIZ)
BHIZs were established in 2016 in two NM counties, Rio Arriba and McKinley, based on high incidence of deaths attributable to drugs, alcohol and suicide: Each county has created its own plan, based on strategic priorities.

Rio Arriba County BHIZ: Rio Arriba County Opiate Use Reduction (OUR) Network continues to serve and track clients. OUR Network case managers made approximately 2,000 outreach contacts and provided intensive case management over 200 clients in FY 2018. The range of services provided included MAT, detox, residential, recovery support, medical care, transport, housing, legal assistance and behavioral health care. OUR Network agencies have begun entering data into the web portal. Monthly care coordination meetings are being held to jointly staff shared clients, and to discuss issues with the VPR/portal. The evaluation team was able to pull data from the Pathways HIT to compile the annual report for the first time, and has been able to evaluate the use of the VPR with recommendations for the developers on improvements designed to tailor the HIT for use with SUDs.

Rio Arriba has focused in this quarter on developing Law Enforcement Assisted Diversion (LEAD, or pre-arrest diversion) in partnership with the Rio Arriba Sheriff’s Office, the Española Police Department and Santa Fe County. It hired a LEAD coordinator, and began developing protocols to divert individuals into intensive case management prior to arrest maintaining fidelity to the evidence-based model. A funding proposal for LEAD funding was submitted to the McCune Foundation and the U.S. Bureau of Justice Assistance. A team consisting of Rio Arriba Health and Human Services (RAHHS), Judge Lidyard, the DA, the Public Defender, RASO and EPD has been meeting twice per month, and resolutions supporting LEAD have been passed by Rio Arriba County and the City of Española.
The City of Española has moved forward with efforts to pass a housing ordinance in anticipation of developing a tax credit affordable housing project. In addition, OUR Network continues to distribute Naloxone in partnership with member organization, Santa Fe Mountain Center. Las Cumbres Community Services is providing home visiting and intensive case management for pregnant women and the families of small children. El Centro Family Health has begun using their interface between their VPR and Pathways. Rio Arriba is providing case management for Las Clinicals Del Norte, a new network partner, increasing their effectiveness and network access to MAT. Ninety-one percent of Network clients received two or more services within 30 days of intake in the final six months of the fiscal year, more than twice the legislative target.

Successful referrals from the jail into treatment increased over 1,000% during the previous fiscal year from four referrals in 2017 to forty-one, and 79% percent had either completed or remained in treatment the second half of the fiscal year, an increase of 29% from the first half of the year.

Rio Arriba has also realized the importance of changing community perception of SUD so that it is understood to be a chronic illness and not a criminal offense. OUR Network has developed a media campaign designed to build empathy and support for SUDs sufferers and their families, as well as awareness of treatment options. With the help of Sancre Productions five TV-ad length professionally produced videos have been created featuring local actors and scenes. The NM Community Foundation is acting as the campaign’s fiscal agent, enabling us to seek corporate sponsors. The Rio Arriba Community Health Council kicked off OUR Network’s “New Normal” campaign at its annual health fair. The fair included over 100 vendors, a lowrider competition, and free bands and food. Hundreds of second-fourth graders were bused in from surrounding schools for a free concert by the nationally renowned band Ozomatli, while high schools students from Rio Arriba and Taos Counties were bused in for a career fair. Events culminated in a free public concert on the evening of August 17th featuring the bands Divino, Strings Attached, Nosotros and Ozomatli. Approximately 4,000 people attended events throughout the day.

The overdose death rate in Rio Arriba County has dropped 30% since the inception of the BHIZ. While figures are not out yet for the current year, it appears that the OD death rate may show a small improvement again in the current year.

McKinley County BHIZ: McKinley County BHIZ had many successes this quarter which include a continuation application for the Prevention Alcohol Related Deaths grant. Nihzhoozhi Center Inc. (NCI) also coordinated and hosted a Red Ribbon Relay run with various community providers and clients. The run focused and celebrated sobriety.

- This quarter July to August (September data will be available in October), NCI provided counseling session to 169 unduplicated clients. There were 69 group sessions held at NCI with over 1,848 social detox clients in attendance.
- The City of Gallup in collaboration with the McKinley County Health Alliance completed strategic planning for Health Priorities. Plans will be finalized in by the end of the year.
- Hosted a team building retreat for NCI Treatment staff.
- Completed a Motivational Interviewing Coaching and Skill building training for NCI Staff. All treatment staff are competent in Motivational Interviewing. We are starting to see an increase in interest and applications for treatment.
- Hosted the City’s Indigenous Peoples Commission meeting. The Commission will work on Indigenous Peoples concerns and solutions.
• Collaborated with Rehoboth McKinley Christian Health Care Services and Gallup Indian Medical to provide a Motivational Interviewing training to 25 health care providers. GIMC is working to implement the Zero Suicide Initiative.

8. CareLink NM BH Health Homes (CLNM)
Twelve BH Health Homes are now operating throughout NM to coordinate an array of physical and behavioral health services for Medicaid-eligible individuals with Serious Mental Illness and Severe Emotional Disturbance. Many of these individuals are also living with complex chronic conditions such as diabetes, high blood pressure, and chronic pulmonary disease, as well as co-occurring substance use disorders. Providers are: UNM Hospital Clinics and NM Solutions in Bernalillo County; Presbyterian Medical Services and Kewa Pueblo Health Corporation in Sandoval County; Mental Health Resources in four locations in Curry, Roosevelt, De Baca and Quay counties; Guidance Center of Lea County; and Hidalgo Medical Services in two locations in Grant and Hidalgo counties.

CLNM providers are comprised of Federally Qualified Heath Centers, Core Service Agencies, Behavioral Health Agencies (BHA), and a Tribal 638 Health Center. Some were already providing both physical and BH services and some have developed agreements with outside providers to form integrated multi-disciplinary teams. HSD is collaborating with CYFD to implement High Intensity Wraparound to serve an anticipated 200 of the most vulnerable children and adolescents with SED, many of whom have been in out-of-state residential treatment centers. Providers implementing Wraparound are the Guidance Center of Lea County and Mental Health Resources in Portales. Because of the complexity of BH challenges in youth recommended for Wraparound, facilitator to youth ratios do not exceed 1:10, and Wraparound facilitators participate in a mandated 18-month training and mentoring process conducted by CYFD Behavioral Health staff. As of mid-September, 51 children and youth were receiving High Intensity Wraparound.

Data collection for return on investment analyses and federally-mandated reporting has begun for the second year of the two original Health Homes sites in Farmington and Clovis and an oversight/monitoring process is being implemented to help assess quality of Health Home services and to develop practice improvement strategies with providers.

9. Clinical Curriculum Development Initiative
Since the fall, 2017, BHSD has been partnering with the faculty in NM State University’s Departments of Social Work and Counseling Psychology, the University of Texas-El Paso’s Social Work Department and La Clinica De Familia’s (LCDF) BH program in a Clinical Curriculum Development Initiative. The purpose of the Initiative is to co-design and deliver training materials for the Master’s level students in these schools. Over the last few years, BHSD’s training experts in Clinical Reasoning and Case Formulation have been sharing these materials with our clinical practitioners across NM.

Our experts, Ray Foster and Kate Gibbons, have restructured the Clinical Reasoning and Case Formulation 2-day training into a modular format suitable for classroom use. We believe the materials, in the newly restructured modular format, will be more useful for their Master’s Social Work and Counseling Psychology Programs. As co-designers, the participants will experience the content and then strategize opportunities for delivery of the materials. We plan to establish a Task Force to continue learning about its use, improvement and effectiveness. This
The initiative will introduce these materials to Masters level students to strengthen their skills and strategies to be applied during their practicum field placements and/or after graduation when working in behavioral health treatment agencies.

Our newest partners are the Social Work and the Counseling Departments at Western New Mexico University. They have become our fastest “early adopters!” Starting in October 2018, the Social Work Department will offer an on-line course in Clinical Reasoning & Case Formulation, taught by our experts. The eight week course will be offered twice to both social work and to counseling students. In addition, the materials will be incorporated into the teaching of the Pre-Practicum and Practicum courses for the Counseling Program. We will be consulting with their Chair to development measures of competency of the student participants. Delivering the materials for distance learners will offer us another opportunity to modify the tools as needed and make the material available to a broader audience of student.

In early Spring, we anticipate engaging with additional universities to determine their interest in partnering on this curriculum in their programs.

10. Consortium for Behavioral Health Training and Research (CBHTR)
One of the main activities this quarter has been planning the NM Behavioral Health Workforce Summit for Oct. 25, 2018. This is a collaborative effort among several providers, educators and others across the state. In addition to establishing and finalizing the agenda, securing speakers and all logistics, CBHTR is partnering with CYFD’s Youth in Transition program to ensure that youth are integrated into the entire day. This is particularly important given what we know about our aging BH workforce in the state. The Division of Community Behavioral Health at UNM has extended an offer to hire an LCSW to expand capacity, through clinical supervision, to increase the number of independently licensed professionals in NM and to improve quality of service provision. This LCSW will also enhance our ability to offer workforce trainings throughout the state. CBHTR has also brought on another interdisciplinary supervisor. Currently, CBTHR-licensed professionals now provide supervision to approximately 20 LMSWs monthly, three of whom have completed their required hours in the last quarter. CBHTR has also worked with the NM Office of Peer Recruitment and Engagement (OPRE) to obtain continuing education credits and create a pipeline to encourage certified peer support workers to take comprehensive community support services (CCSS) training to increase their employability statewide. A CCSS training in Albuquerque with 35 participants from 11 agencies was completed late this quarter.

11. Crisis Triage Centers (CTC)
A CTC is a health facility that is licensed by DOH with programmatic approval by BHSD and CYFD. CTCs provide stabilization of BH crises and detox management, either in a 23 hour outpatient or a 24/7 short-term residential setting. They will provide emergency BH triage, evaluation, and admission, on a voluntary basis. CTCs may serve individuals 14 years of age or older who meet admission criteria. DOH has been working with BHSD and CYFD to draft the licensing regulations for CTCs. Following an amendment in SB220 this last Legislative Session, DOH has revised its previously posted rule on CTCs to cover both residential and outpatient forms of CTCs and held a public hearing on the adoption of the new rule. The final rule will be published following the DOH Secretary’s review of changes following public comments. Meanwhile, Medicaid’s BH rule that includes payment mechanisms for services provided by CTCs is expected to be promulgated early next year. A Supplement is being developed to fill the
gap until rule promulgation.

12. Naloxone Pharmacy Technical Assistance
BHSD’s Office of Substance Abuse Prevention (OSAP) has contracted with the Southwest CARE Center (SCC) under the Opioid STR grant to provide technical assistance to NM pharmacies reimbursed by Medicaid to dispense naloxone for 100 pharmacy trainings over the two-year grant period, to be completed by September 2019. On-site technical assistance has focused on increasing patient/customer access to naloxone, increasing the number of pharmacies carrying and dispensing naloxone, and reducing pharmacy barriers to dispensing and billing for the medication. The two-hour, onsite training provides both pharmacists and pharmacy technicians with CEUs.

On August 1st, SCC pharmacists trained all pharmacy staff at the Haven Behavioral Hospital of Albuquerque. Pharmacy staff at this location are hoping to increase naloxone distribution to patients participating in their intensive outpatient program for opioid use disorder. On August 16th, SCC pharmacists conducted a naloxone training at To’hajiilee Navajo Health Center in To’hajiilee, NM. Pharmacy staff, clinic staff, and members of the community were in attendance. During this first quarter, SCC dispensed 70 Narcan® kits to 12 NM pharmacies previously trained under the program for patients without Medicaid or insurance.

13. Network of Care (NOC)
The NM BH Network of Care (NMNOC) is operating as the official website for the BH Collaborative. This website can be accessed at: http://www.newmexico.networkofcare.org/mh/

For the period of July 01, 2018 to September 30, 2018 there were total of 42,507 site visits. This is an increase of 5159 visits or 7% from last quarter. Average visits per day are 477 and 1032 page views so visitors are navigating through at least 2-3 pages per visit and spending an average of 7:39 minutes on the site. 16,295 visits are coming from mobile phone devices.

The top five keyword searches were: Substance abuse, Depression, Health Care, Housing, and Employment. The overall top six web page views: Home, Residential Treatment Facilities, Find Services, OPRE, Southwest Horse Power, Inc., and NM Opioid STR. The top five agencies for web page views were: Southwest Horse Power, Inc., Courageous Transformations, Samaritan Counseling Center of Albuquerque, UNM Hospital Programs for Children and Adolescents, and Alternative House Inc/La Posada Halfway House.

Development for the Opioid STR pages continues with an emphasis on reviewing and updating content as the program grows and evolves, i.e. more training videos. There have been a few meetings with the STR Public Relations Monthly Team participants, and the group seems to be warming up to the areas of cross promotion and support with messaging around treatment, recovery, prevention and stigma. Some focus areas are:

- Recovery Month has been a big opportunity for shared promotions especially on NOC, OPRE (newsletter and facebook) and A Dose of Reality.
- We are just beginning to look at how to leverage efforts around database development and upkeep.
• The OPRE communications and promotions are starting to be picked up by other groups. A Dose of Reality often reposts the OPRE recovery stories, jobs and trainings to their social networks.
• Strategic areas on NOC have been targeted to link to A Dose of Reality, and this development will happen right away.
• We are working to collaborate more with DOH and DOT and hope to have some mutually supportive efforts.

The OPRE section on NOC will have the new sidebar navigation design (like the STR pages) development should be live by mi- October including an area for CPSWs to post resumes. For the first time, OPRE is sending out a print and email communication to the NOC database of Behavioral Health Organization to solicit support for the CPSW Pre-Req Hours and asking these organizations to be part of the OPRE database of locations for peers to work and get their hours required for certification.

**14. New Mexico Crisis and Access Line (NMCAL)**

As of August 31st, NMCAL has answered a total of 38,489 calls this calendar year. This includes 16,866 crisis calls, 4,175 NM calls from the National Suicide Prevention Lifeline (NSPL), 9,908 calls for the Peer-to-Peer Warm Line, and 7,540 after-hours calls forwarded from NM’s Core Service Agencies (CSAs).

Bernalillo, Curry, Taos, Santa Fe, and Sandoval counties had the highest numbers of callers on the crisis line, with Dona Ana and San Juan Counties being the next top utilizers. Anxiety, suicide, situational stress, and depression were the top four presenting issues. While suicide was not always the presenting issue on a crisis line call, concerns related to suicide were reported on 29.9% of the calls. In August, 16.3% of crisis line callers reported concerns related to drug and/or alcohol use impacting their lives. For the Peer-to-Peer Warmline, the top concern identified is “mental health” at 89.2% in August, with “relationships” at 3.4% being the next highest reported challenge.

NMCAL now offers a texting services for its Warmline, in an effort to reach more youth, and has produced a flyer that describes how the service works. In addition, NMCAL has joined with HSD-BHSD and providers across the State to expand its focus to Opioid Use Disorders by providing specialized OUD training to all Crisis Line Counselors and Warm Line Peer Support staff. NMCAL has also partnered with the Dose of Reality, NM’s social media opioid campaign, to promote NMCAL’s availability. NMCAL is operated by ProtoCall Services, Inc. and is funded by BHSD.

**15. Office of Peer Engagement (OPRE)**

The Office of Peer Recovery and Engagement is continuing with the positive momentum from the close of FY18. OPRE has completed two CPSW trainings since July 1, 2018 and is proud to announce a total of 380 CPSWs in our state currently. In an effort to improve the peer workforce, OPRE will institute new requirements effective January 1, 2019:
• Documented 40 hours of work/volunteer experience before sitting for the CPSW Exam.
• Improved vetting of CPSW applicants via improved interviewing process and letter of reference requirement.

OPRE was successful in utilizing State Targeted Response (STR) grant funding to place Certified Peer Support workers in two new settings: the Taos County Correctional Facility and Christus St.
Vincent Behavioral Health Unit. Both Peers are doing extremely well early on and have made a big impact on their respective facilities. STR funds will continue to be used to present MAT/OUD to Peers across the state as a free CEU opportunity and to organize and facilitate a proposed statewide “Peer Summit.”

OPRE has and will continue to support the efforts of CYFD in ongoing development and implementation of the Family Peer Support Program, Youth Peer Support Program and the Adult Family Peer Endorsement.

Forensic Peer training: 25 new CPSWs were recently trained and certified in the SAMHSA sanctioned Forensic Peer Training, August 28-30, 2018. This was a very emotional and unifying training, led by Liz Woodley and Lester Othal of the Pennsylvania Mental Health Consumers’ Association. OPRE staff looks forward to future contributions from those who received the training and is thankful for their unique qualities and perspectives.

OPRE continues to be active in presenting information as needed in forums such as the Psychosocial Rehabilitation Association of New Mexico annual conference, Tribal Leadership Summit, and State, City and County committee meetings.

And finally, the OPRE-funded Wellness Centers are alive and well in providing supports in their respective communities and are proudly Peer run and Peer led:

- Hozho Center provides recovery services and support meetings for residents in the Gallup NM area.
- Inside Out is a staple of support in Espanola, NM providing food and clothing banks and technical assistance with resumes, registrations and applications.
- Healing Circle in Shiprock, NM specializes in tradition healing practices, Native Women’s supports and assistance.
- Mental Health Association provides much needed transitional housing services, supports and referrals to those discharged from New Mexico Behavioral Health Institute in Las Vegas, NM.
- Carnton County Grassroots Behavioral Health provides a lifeline of services to those in one of the most rural counties of New Mexico.
- Forward Flag/Strait Scoop for Vets provides a much needed outlet and resources for our veterans via the newly opened Veteran’s Wellness Center in Albuquerque and the Veteran’s “Coffee Bunker,” a mobile unit reaching Veteran’s across our state.

16. Opioid Crisis State Targeted Response Grant (Opioid STR)

The goals of this initiative are to increase the number of Opioid Treatment Providers (OTPs) and Office-Based Opioid Treatments (OBOTs), increase the availability of qualified staff and programs to address the needs of persons with Opioid Use Disorder (OUD), and improve access to services for individuals with OUD. The NM Opioid STR Initiative is framed around a centralized hub/regional hub model that will utilize the expertise of regional institutions and community agencies already providing services and integrate them with the newly trained providers and a centralized training hub that is able to coordinate and disseminate trainings and best practice efforts around the state. There are currently over 30 regional hub/community partners participating in the initiative.
August Highlights:
• Motivational Interviewing (MI) and Community Reinforcement Approach (CRA) trainings scheduled for October and November in Las Cruces and Espanola.
• PK Public Relations working with Patrick Stafford at DOH Las Cruces to create messaging for Provider Anti-Stigma Campaign

Performance Activities & Accomplishments:
Treatment Update:
In August, our partners have attended the following trainings:
• ECHO series for Counselors & Social Workers – 40 attendees
• ECHO series for CHWs, CPSWs, & MAs – 4 attendees
• ECHO series for Integrated Psychiatry & Addiction – 6 attendees
• MSG LC4 Matrix Training – 30 attendees

Overdose Reversals:
• During the month of August, a total of 19 reversals were reported from Inside Out and Grants County Fire and Rescue Department.

The STR grant also supports prevention activities, which complement efforts supported by the PDO grant (see below). Since July 1st, 2017 OSAP has coordinated multiple meetings, trainings, and Narcan distribution with key stakeholders throughout the state representing tribal communities, law enforcement agencies, fire departments, health councils, detention centers, behavioral health providers, youth and adult shelters, and local governments.

• As of September 2018, the number of kits distributed has totaled 5,790 with 2,792 people being trained and 35 reported reversals due to grant-funded Narcan being deployed.
• STR-funded Narcan is currently being provided to New Mexico Corrections Department for dispensing to inmates upon their release from state correctional facilities.

<table>
<thead>
<tr>
<th>Data Outcomes – Year 2 (as of August 2018)</th>
<th>Cumulative</th>
<th>Initiative Goals</th>
</tr>
</thead>
<tbody>
<tr>
<td>1) Other workforce trainings (# people)</td>
<td>127</td>
<td>Various Training Partners</td>
</tr>
<tr>
<td>2) Naloxone workforce training (# people)</td>
<td>430</td>
<td>Bernie Lieving</td>
</tr>
<tr>
<td>TOTAL WORKFORCE TRAINED</td>
<td>557</td>
<td>130</td>
</tr>
<tr>
<td>3) Naloxone community training (# people)</td>
<td>278</td>
<td>Inside Out &amp; Serenity Mesa</td>
</tr>
<tr>
<td>4) Naloxone kits distributed to community</td>
<td>341</td>
<td>Inside Out &amp; Serenity Mesa</td>
</tr>
<tr>
<td>5) Naloxone kits distributed to workforce</td>
<td>1730</td>
<td>SW CARE &amp; Bernie Lieving</td>
</tr>
<tr>
<td>TOTAL KITS DISTRIBUTED</td>
<td>2349</td>
<td>9,000 kits</td>
</tr>
<tr>
<td>6) Recovery Support Services (# people)</td>
<td>685</td>
<td>520 per year</td>
</tr>
<tr>
<td>7) MAT Treatment (# people)</td>
<td>123</td>
<td>330 per year</td>
</tr>
<tr>
<td>8) Reported OD Reversals</td>
<td>25</td>
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17. Opioid Treatment Programs (OTP)

There are sixteen Opioid Treatment Programs (OTPs) operating in NM, serving approximately 6200 patients. Of these, nine are located in Albuquerque, including a courtesy dosing clinic at the Metropolitan Detention Center. Clinics are also located in Belen, Santa Fe, Espanola, Farmington, Las Cruces, Roswell, and Rio Rancho. There are currently six provider organizations that have submitted applications to open clinics in Albuquerque (1) Bernalillo (2), Espanola (1), Santa Fe (1) and Gallup (1). Applications are under various stages of completion. Sites in Albuquerque, Santa Fe and Espanola are expected to open in early 2019.

Statute now requires clinics dispensing methadone or narcotic replacement to provide patients with education on opioid overdose and the safe use of Naloxone in the prevention of opioid overdose deaths. To comply with this new requirement, Dr. Joanna Katzman and Monica Moya Balasch from the UNM Pain Center/STR Project continue to provide Naloxone trainings and technical support to the existing OTPs.

The Central Registry provides OTP clinics with a database to ensure that patients are not duel enrolled. Efforts to automate the process whereby clinics would no longer require staff to manually upload patient information are underway. This is another step toward providing real time data to clinics through use of the Central Registry.

Updates to NMAC 7.32.8 Opioid Treatment Programs are underway and will be sent for public comment upon completion.

18. PAX Good Behavior Game

The PAX Good Behavior Game (PAX GBG) has been found to reduce disruptive behaviors, hyperactivity, and emotional symptoms. Its long-term outcomes include reduced need for special education services, reductions in drug and alcohol addictions, serious violent crime, suicide contemplations and attempts, and initiation of sexual activity with increases in high school graduation rates and college attendance. The most recent cost benefit analysis on the PAX GBG conducted by the Washington State Institute for Public Policy has shown that the program returns $57.53 for every $1 invested.

FY19 implementation, begun in July, consists of two projects: the first is a continuation of efforts with the FY16, FY17 and FY18 participating schools, and the second begins a new implementation with Bureau of Indian Education schools in collaboration with the NM Indian Affairs Department.

Beginning in August 2018, 10 school districts continued implementing PAX GBG. These districts participated in an initial teacher training to ensure new teachers received the training: Aztec Municipal School District (3 schools, 65 classrooms) with the school also contributed their own funds to help ensure all staff at their three elementary schools were trained; Bloomfield School District (1 school, 4 classrooms); Chama Valley Independent School District (2 schools, 4 classrooms); Ch’ooshgai Community School (1 school, 7 classrooms); Cobre Consolidated School District (3 schools) training date to be determined; Deming School District (6 schools, 37 classrooms-- some district funds were used to support additional staff to be trained); Espanola Public Schools (11 schools, 12 classrooms); Farmington Municipal School District (6 schools, 31 classrooms); Santa Fe Public Schools had an expansion using district funds adding 10 schools since May 2018 (14 schools, 100 classrooms) with a training scheduled on October 29th, 2018 to
support school-wide implementation; Socorro Consolidated Schools (3 schools, 18 classrooms); and Tucumcari School District (1 school, 4 classrooms). A total of 286 teachers have been trained since August 2018, reaching 5,049 students across the state to date.

Evaluation data was collected August and September 2018, in the form of pre- and post-implementation “spleem” counts, student social competence evaluations, and teacher burnout surveys. Spleems are off-task or inattentive behaviors that are identified and counted discretely by trained observers, known as PAX Partners. The social competence evaluation includes an 8-point scale that measures self-regulation in each student. Core classroom teachers have filled out a survey on each of their students. Teachers also completed a survey on stress and burnout measuring scales related to personal accomplishment and emotional exhaustion.

An outreach effort has been occurring to expand PAX GBG to other communities in the state, reaching Las Cruces Public Schools and Roswell Public Schools. Strategic planning meetings were held with PAXIS Lead Trainer Claire Richardson throughout August and September. Booster sessions for each district are being planned and coordinated. The following dates are confirmed: Aztec Municipal Schools on October 15th, Bloomfield School District on October 3rd, Chama Valley Independent School District on October 19th, Ch’ooshgai Community School on October 10th, Santa Fe Public Schools on October 13th and November 3rd. Socorro Consolidated Schools had their Booster on August 9th for previously trained staff, and Tucumcari School District on October 12th. We are still in process of coordinating Boosters for Cobre Consolidated School District, Deming School District and Farmington Municipal School District. Meetings with administrators have been scheduled to coincide with Booster trainings to ensure Administrators best support their teachers in implementation.

New and streamlined data instruments were created to assist all staff in completing data in a timely and effective manner. PAX Partner in-person and zoom call meetings and support has occurred on an ongoing basis to clarify Partner role responsibilities and troubleshoot and brainstorm partnering issues as they arise. PAX Partners are overseeing the data collection process in each of their school buildings for all data collection methods. A PAX Partner Training for current and newly recruited schools will be held in Santa Fe on November 13th and 14th, 2018.

Indigenous PAX: Each of the three major New Mexico Tribal groups (Pueblos, Navajo Nation, and the Apache tribes) have been approached for participation, with the intent to create three distinct Native projects. The Tribal Liaison conducted outreach this quarter with Ch’ooshgai Community School, Jemez/Zia Education Collaborative, Pueblo of Acoma and Jicarilla Apache, and Santo Domingo/Cochiti Pueblos.

Ch’ooshgai Community School: Residential and middle school staff were trained September 21st. Seven core classroom teachers, 24 special education teachers and three administrators were trained, reaching 114 students; a booster session will be provided on October 10, 2018. Jemez/Zia Education Collaborative: Additional Indigenous PAX presentations are scheduled at the Education Collaborative Meeting for July 19th in Jemez with Collaborative retreat conducted on September 21st. Initial teacher training for Jemez and Zia schools is targeted for October 26th.
**Pueblo of Acoma:** Contact has been made with Gil Sanchez, Principal of the new Haaku Community Academy School and Tribal Secretary, David Malie. A request has been made to present to the tribal Council in October.

**Jicarilla Apache:** Request was submitted to Levi Pesata, Jicarilla Apache President, to present Indigenous PAX to the school board this winter.

**Santo Domingo/Cochiti Pueblos:** Keres Language Teachers have requested teacher training and have been invited to attend the October 26th training at Jemez.

The following 11 schools (mixture of Bureau of Indian Education (BIE)/Tribal Schools/Public Schools with high enrollment of tribal youth) have been approached for participation and are in various stages of communication regarding participation: Acoma Pueblo Schools, Cubero Elementary School, Jicarilla Apache School, Laguna Elementary School, Mescalero Apache School, Pueblo of Isleta Elementary School, San Felipe Pueblo Elementary School, San Ildefonso Day School, Sky City Community School, Taos Community School, Tohatchi Elementary School, Wingate Elementary School, Tohaali’ Community School, and Zia and Jemez Education Collaborative. Some of these communities have been approached and have scheduled presentations and meetings to further discussed PAX and bringing it to their communities.

**19. Prevent Prescription Drug/Opioid Overdose-Related Deaths Grant (PDO)**

BHSD’s OSAP successfully applied for and received SAMHSA’s $1 million annual award for five years: *Grant to Prevent Prescription Drug/Opioid Overdose-Related Deaths (PDO)*, which began September 1, 2016. The purpose of the grant is to reduce the number of prescription drug/opioid overdose-related deaths and adverse events among individuals 18 years of age and older by training first responders and other key community sectors on the prevention of prescription drug/opioid overdose-related deaths and implementing secondary prevention strategies, including the purchase and distribution of naloxone to first responders.

**Overall Grant Update**

All Federal grant carryover activities by Rio Arriba, Santa Fe, Dona Ana, and Bernalillo County have been completed and data will be coming in at the end of September to chronicle the work that was conducted. The counties continue to distribute naloxone in their respective areas. The Metropolitan Detention Center/Resource Re-entry Center (MDC/RRC) has completed data collection training, purchased Narcan and is finalizing the distribution process out of the RCC. Between July 2017 through August 2018, 2,267 individuals received opioid overdose prevention and Narcan training, 5,705 Narcan kits were distributed, and 25 overdose reversals were reported.

**PDO Advisory Council**

The PDO Advisory Council is conducting monthly meetings to provide guidance, recommendations, and oversight over the PDO grant and sub-grantees. The meetings focus on providing updates on the county distribution plans, reviewing PDO membership and scope, and assessing additional needs. This quarter, the PDO Advisory Council met July 13, August 3, and September 7. Local distribution success stories were shared. Presentations were provided on medical practitioner barriers to providing MAT in New Mexico (July 13), the 2017/2018 PAX Good Behavior Game Implementation (August 3), and the PDO Opioid Recognition and Response Trainings in Spanish (September 7).
Contracted Providers
The 3 grantee recipients (Bernalillo County Community Health Council, Santa Fe Prevention Alliance, Dona Ana County Health and Human Services) are continuing the expansion phase by increasing local capacity to distribute Narcan. The counties are actively engaging local agencies and offering training and naloxone with the intention of targeting the priority populations of people who use opioids/heroin, layperson “first responders”, local county jails, drug courts and jail diversion programs, programs that service high-risk youth who use prescription opioids/heroin, homeless shelters and homeless services programs, drug treatment programs, local law enforcement and fire departments, faith-based organizations, etc.

Bernalillo County Community Health Council (BCCHC):
BCCHC has distributed 1,461 Narcan kits and trained 1,011 individuals to respond to an overdose as of the end of August 2018. BCCHC has established training and/or distribution to the following agencies:
- Youth Development, Inc
- NMCD Probation & Parole
- Albuquerque Police Department
- New Season Central NM Treatment Center
- Copper Pointe Church
- Gordon Bernell Charter School
- First Nations Wellness Center
- Serenity Mesa
- Duke City Recovery Toolbox
- New Mexico Corrections Department
- Bernalillo County Sheriff’s Office
- Church of the Good Shepherd
- Bernalillo County Community Health Council
- Feria de Salud Free Clinic Outreach
- First Nations Wellness Center
- New Season Treatment Clinic
- South Valley Celebration Day
- UNM Hospital ED
- MATS Detox Services

Dona Ana County Health and Human Services (DACHHS):
DACHHS has distributed 2,431 Narcan kits and trained 716 individuals, and reported 13 opioid reversals as of the end of August 2018. DACHHS has established training and/or distribution to the following agencies:
- St. Luke’s Health Care Center
- Doña Ana County Detention Center
- Mesilla Valley Community of Hope
- Morning Light Counseling Center
- New Mexico Department of Vocational Rehabilitation, Las Cruces
- American Medical Response
- ALT Recovery Group
- Las Cruces Fire Department
- NMSU Police Department
Las Cruces Police Department  
Alcoholics Anonymous/Narcotics Anonymous  
Burrell College of Osteopathy  
Sunland Park Police Department  
Cedar Hills Church of the Cross  
Kilby Motel  
Serenity Counseling  
Southern New Mexico Homeless Providers Coalition  
Project OPEN  
La Clinica De Familia  
Third Judicial District Court (Drug Court)  
Peak Behavioral Health  
Security Concepts  
Mesilla Marshals  
Unified Prevention (UPI) Coalition  
Union Pacific Police Department  
Forensic Intervention Consortium of Dona Ana  
New Mexico Corrections Department  
New Mexico Mounted Patrol  
Esperanza Guidance Services  
Ben Archer Health Center  
AARP  
Dierson Charities  
Doña Ana County Health and Human Services  
Hatch Police Department  
Mountain View Regional Medical Center  
New Mexico Caregivers Coalition  
Rio Grande Re-entry Council  
Reclaim Wellness  
Southern New Mexico Promatora Committee  
United States Border Patrol  
Animal Service Center of the Mesilla Valley  
Memorial Medical Center Family Practice

Santa Fe Prevention Alliance (SFPA):
SFPA has distributed 1,813 Narcan kits and trained 440 individuals, and reported 27 opioid reversals as of the end of August 2018. SFPA has established training and/or distribution to the following agencies:

- The Life Link
- Santa Fe Fire Department Overdose Follow up Project
- NM 1st Judicial Court
- Pojoaque Police Dept.
- Santa Fe County Reentry Specialist El Centro Family Medicine
- NMCD Mental Health Team
- Edgewood Senior Center
- Santa Fe Police Department
PDO Media Subcommittee
The PDO media campaign is ongoing and continues to utilize advertising strategies, media strategies, social media, and a user-friendly website providing information to the public about overdose prevention and naloxone use. The media campaign has enhanced the websites and social media platforms to be user friendly and to increase visibility regarding overdose prevention and naloxone, while destigmatizing overdoses. The website has been updated to offer an English and Spanish version for site visitors. The media campaign developed mini-campaigns focused on spreading awareness of opioid abuse prevention (prescription and/or illicit drugs), of the various statistics related to Opioid Use Disorder (OUD), the path of treatment and recovery, and to encourage opioid users (licit and illicit) and friends/family to keep naloxone on-hand in order to potentially save a life. Social media campaigns have focused on addressing
OUD and overdose death by running a campaign titled Humans of New Mexico on Facebook and Instagram. The filming of a Spanish naloxone training video has been completed and will soon be made available for communities to use.

20. Prevention “Partnership for Success” Grant (PFS 2015)

BHSD’s OSAP has been awarded this SAMHSA grant of $1.68 annually for 5 years ($8 million total) to address underage drinking and youth prescription drug abuse. Nine providers were awarded contracts in November 2015: Chaves, Cibola, Curry, and Roosevelt counties, and the five schools of the NM Higher Education Prevention Consortium (NMHEPC) - NMSU in Las Cruces, NM Tech in Socorro, San Juan College in Farmington, UNM in Albuquerque, and the Institute for American Indian Arts (IAIA) in Santa Fe.

Eight of the nine PFS 2015 funded providers (Chaves, Cibola, Curry, and Roosevelt counties, and four of the five schools of the NMHEPC (NMSU in Las Cruces, NM Tech in Socorro, San Juan College in Farmington, and UNM in Albuquerque) have completed all Strategic Prevention Framework trainings: Coalition Development, Community Needs Assessment, Community Capacity & Readiness, Strategic Planning & Evidence Based Practices, and Evaluation.

Since August 2017, 8 of 9 sites have been implementing prevention strategies. In December 2017, the NMHEPC identified the Institute for American Indian Arts (IAIA) in Santa Fe as the 5th school to participate in the PFS 2015 grant. In May 2018 they collected data for the New Mexico Community Survey that was used in their needs assessment to prioritize issues for prevention efforts. They received assessment training in August 2018 and submitted the first part of their assessment report at the end of September. IAIA will continue to receive SPF trainings and technical assistance support to develop a strategic plan.

Throughout the quarter, providers received technical assistance (TA) via monthly webinars and in-person visits. To date, webinar topics have included working with school substance abuse policies, engaging community leaders with prevention efforts, an overview of prevention resources, completing the SAMHSA federal reporting requirement (Community Level Instrument), utilizing social media, conducting Town Halls, and the fourth degree felony law for providing alcohol to minors. In-person TA was provided to New Mexico State University (NMSU), University of New Mexico (UNM), New Mexico Tech, and the Institute for American Indian Arts (IAIA). These TA visits focused on the strategic prevention framework, publicizing party patrols in a University setting, and developing medical provider guides for prescribing opioids.

All PFS 2015 sites received carry over funds from federal fiscal year 2017. In this quarter, PFS15 providers utilized these funds to attend intensive social media workshops and conduct two town halls; one on prescription opioid misuse and another on underage drinking. Also in this quarter, PFS 2015 providers submitted their annual OSAP Final Year and Quality Improvement Reports highlighting their progress for each strategy.

State Epidemiological Outcomes Workgroup: SEOW

The SEOW met three times this quarter. On July 19th, the group had a presentation from the Department of Health (DOH) on the results from the 2017 Youth Risk and Resiliency Survey. On August 16th, CYFD and DOH presented on findings from the 2017 Reconnecting Youth Survey conducted in Santa Fe County. On September 21st, the UNM Prevention Research Center
presented on Youth Suicide Risk and Resiliency Factors. The SEOW is conducting a series of data literacy trainings in four regions of the state. The first two trainings were on September 10th in Santa Fe and September 24th in Roswell. These have been well attended by OSAP providers, Health Council coordinators, and DWI directors. Future trainings will be held on October 23rd in Albuquerque and November 29th in Las Cruces.

21. Screening, Brief Intervention, Referral to Treatment Grant (SBIRT)

In August 2013, SAMHSA awarded BHSD with a five-year, $10 million grant to implement SBIRT. SBIRT services integrate behavioral health within primary care and community health care settings. Each medical partner site universally screens adult patients 18 years old or over, at a minimum, on an annual basis to identify those at-risk of or those who have a substance use disorder.

The pre-screen, Healthy Lifestyle Questionnaire (HLQ), includes questions from evidence-based screening tools, such as the AUDIT 10 (screens for alcohol), DAST (screens for drug), and PHQ-9 (screens for depression). The HLQ pre-screen score identifies when a patient is considered positive for NM SBIRT, at risk of having or has substance misuse and/or a co-occurring disorder. The HLQ also includes questions that identify if an individual is at risk of having or has depression, anxiety, and/or trauma. Although the NM SBIRT grant is specific to addressing substance use, screening includes mental health questions to better serve patients’ needs.

The following are the seven NM SBIRT medical partner sites and locations: White Sands Family Medical Practice, Alamogordo; Aspen Medical Center, Santa Fe; Christus St. Vincent Entrada Contenta, Santa Fe; Christus St. Vincent Family Medicine Center, Santa Fe; First Nations Community Health Source Zuni Clinic, Albuquerque; Santa Fe Indian Hospital, Santa Fe; and UNM Hospital, Albuquerque.

NM SBIRT has made significant progress since the project’s inception. By grant’s end, on July 31, 2018, a total of 49,663 screens were conducted with 44,235 individuals screened. There have been 27,901 negative screens and 21,761 positive screens. The positive screens were categorized as needing Brief Interventions (BI), Brief Treatment (BT), or Referral to Treatment (RT) based on the screen scores. Of those screened, 38% screened for as BI, 49% screened BT, and 7% screened RT. NM SBIRT has conducted 8,584 SBIRT Positive BIs; 4,203 Mental Health BIs; served 8,465 individuals with therapy, and referred 263 individuals to treatment services and 1,089 clients to various services, such as case management or family support services.

Post grant, the following five NM SBIRT medical partner sites and locations that remain operational are: White Sands Family Medical Practice, Alamogordo; Aspen Medical Center, Santa Fe; Christus St. Vincent Entrada Contenta, Santa Fe; First Nations Community Health Source Zuni Clinic, Albuquerque; and Santa Fe Indian Hospital, Santa Fe. UNM Hospital, Albuquerque, has hired two permanent part-time SBIRT employees specifically to meet the federal requirements for SBIRT services for Trauma Surgical patients at all Level One Trauma Centers, nationally. The Life Link is assisting with the training for these new UNMH designated SBIRT employees.

NM SBIRT services were included in the Section 1115 Waiver application, which will allow for SBIRT Medicaid billing codes upon approval by CMS and active in January 2019. Services rendered by the existing NM SBIRT sites served as the model of SBIRT to define Medicaid codes.
All primary care clinics, hospitals and emergency departments throughout New Mexico will be eligible for site certification and SBIRT certification for their site staff in accordance with the SBIRT Medicaid 1115 Waiver guidelines.

At the most recent site visit in preparation for the NM SBIRT grant end, Christus St. Vincent administrative staff expressed a desire to have SBIRT in all of their locations once the Medicaid Waiver takes effect in January 2019. The Life Link is also in communications with administrators from Albuquerque Presbyterian Hospital Services who wish to have SBIRT services in their hospital Emergency Department. Additionally, Indian Health Services in Gallup has also reached out to The Life Link expressing their interest in SBIRT training for SBIRT services at their location.

22. Strategic Prevention Framework for Prescription Drugs Grant (SPF Rx)

BHSD’s OSAP successfully applied for and received SAMHSA’s competitive Strategic Prevention Framework for Prescription Drugs (SPF Rx), which provides $371,616 award per year for five years beginning September 1, 2016. The purpose of the grant is to raise awareness about the dangers of sharing medications, and promote collaboration between states, pharmaceutical and medical communities to understand the risks of over-prescribing to youth and adults; bring prescription drug abuse prevention activities and education to schools, communities, parents, prescribers, and users in a targeted community of high need; and promote increased incorporation of Prescription Monitoring Program (PMP) data into state and community level needs assessments and strategic plans.

The grantee’s sub-recipient, the Bernalillo County Community Health Council (BCCHC), completed the Strategic Prevention Framework trainings last quarter. Their strategic plan approved on October 24, 2017 and for implementation began in November. Technical assistance was provided to support BCCHC in planning and implementation for three new pilot strategies being implemented in Bernalillo County: HERO TRaILS, Boot Camp Translation (BCT) and a social media campaign targeting youth.

During this quarter, BCT-related events were held July 8, July 23, August 19 and September 8. The final BCT event is scheduled for September 29. Technical assistance, support and training were held during this quarter on July 6, 11, 17, 23, August 6, 11, 20, 24, September 10, 19 and 25.

In addition to Boot Camp Translation, the BCCHC team has been providing academic detailing on the safe prescribing of opioids to providers in Bernalillo County. Twelve sessions were done with 8 family physicians, 3 physician assistants, and 1 nurse practitioner as well as 10 pharmacy education visits were done this quarter. On September 18, one of the full-time preventionists attended a provider handbook TA training and planning session with other preventionists working on the same strategy in different counties. Planning is underway for the provider handbook and the parent handbook.

BCCHC lost their senior experienced preventionist last quarter but were able to hire a full-time staff preventionist in July to fill the position. Additional support and TA was provided to keep moving the project along while getting the new preventionist up to speed to co-facilitate BCT meetings. The new preventionist received SPF trainings on July 30 and September 6. Additionally, a temporary preventionist was hired in September to fill-in for one of the full-time preventionists now on maternity leave.
23. Supportive Housing

A subcommittee of the Collaborative’s Housing Leadership Group (HLG) worked with the Technical Assistance Collaborative (TAC) to finalize the New Mexico Supportive Housing Plan: 2018-2023. The five-year plan sets ambitious goals and lays out concrete, achievable strategies. The Strategic Plan was presented to and approved by the Collaborative at the January 2018 meeting. BHSD’s Supportive Housing Coordinator has begun meetings in July 2018 with the HLG and all stakeholders to execute implementation of the plan; the next meeting is scheduled for September 19, 2018.

HSD continues discussion with the Center for Medicaid Services (CMS) on inclusion of a supportive housing benefit in Centennial Care 2.0 for Medicaid eligible individuals enrolled in the Linkages Permanent Supportive Housing program. The benefit will include pre-tenancy and tenancy sustaining supports provided by peers of Linkages service providers. Linkages serves individuals with serious mental illness, who are homeless or precariously housed, extremely low income, and functionally impaired.

An additional $100,000 was approved for permanent supportive housing in the state budget during the 2018 legislative session. BHSD is determining how best to utilize the additional funds.

Housing Supports, Health, and Recovery for Homeless Individuals Grant (HHRHI)
This three-year $5.4 million SAMHSA-funded grant program successfully completed its final year, ending September 29, 2018. The program operated in Santa Fe, Bernalillo, & Dona Ana counties and provided permanent supportive housing for chronically homeless individuals with SUD, SMI, or co-occurring SUD and SMI. HHRHI incorporated the use of peers in the recovery model, and integrated the evidence-based practices of Permanent Supportive Housing, Supported Employment, Seeking Safety, and Motivational Interviewing into project implementation. During the last few months of the grant, carryover funds were used to develop a permanent supportive housing training curriculum for peers.

24. Treat First Learning Community

Various Design Teams within the Treat First Learning Community are developing contributions to improving BH practice. Three examples are:

Interdisciplinary Teaming in Behavioral Healthcare:
The Design Team on Teaming developed a “White Paper on Teaming”. This material has been included as an Appendix in the newest Medical Assistance Policy and Procedure Manual and formed part of the conceptual logic for including interdisciplinary teaming as a service.

Highlights of the White Paper include:
- Definition of Teaming
- The 6 C’s of Teaming:
  - Communication
  - Coordination
  - Collaboration
  - Consensus
  - Commitment
  - Contribution
- Core Concepts of Teaming:
- Shared Decision-Making
- Common Purpose
- Unity of Effort

- Teaming as a Central Practice Function

- Considerations for Teaming
  - Teaming Supports Shared Decision Making
  - Teaming is an Engine for Case-Level Learning and Action
  - Teaming is a Process, Not an Event
  - Teaming Should Be Person-Centered
  - Team Formation: Effective Teaming Requires the Right People
  - Team Functioning: Effective Teaming Supports Ongoing Collaborative Problem Solving
  - Team Coordination: Effective Teaming Requires Leadership
  - Effective Team Meetings Require Preparation, Facilitation, and Follow-Up

- Facilitation
- Service Planning and Follow-Up

- Challenges that May Thwart or Disrupt Effective Teaming

Clinical Supervision Implementation Guide:
One of the Design Teams is targeted on Clinical Supervision. As a contribution to the Practice Community, the Team has developed a Clinical Supervision Implementation Guide. Completion is anticipated for early September. It is designed to be a practical tool for community-based providers in NM. And it offers a way for communication and discussion among clinicians as they seek support from their colleagues on clinical supervision issues. The Guide will be available in the MAD Policy & Procedure Manual, the New Mexico Network of Care. In addition, it will have a prominent page on the New Mexico Behavioral Health Provider Association website where clinicians will be able to participate in clinical discussions and make practice contributions to the Guide.

Some of the content highlights include:
- Overview of Clinical Supervision principles, practice, expectations and functions
- The Practice Wheel: Functions in integrated care.
- The Clinical Supervision Experience:
  - Supervision relationship
  - Rights and Responsibilities
  - Supervision agreements and Learning Plan
  - Supervision Log
  - Preparation Worksheet
  - Models of Supervision
  - Supervision Bridging Session Form
- Therapist Evaluation Checklist
- Supervisory Competency Self-Assessment
- Case Discussion Guide for Reflective Practice.
- Annotated references to Licensing and Credentialing Boards’ materials.
**Treat First Talks:**
Another of the Design Teams of providers is building a training program to help new provider organizations learn about Treat First, its philosophy, expectations, tips of implementation and its benefits. The program will also be useful for existing agencies to train their new staff and for orienting new sites where they are expanding the program. The Team has taken a lively, multi-media approach to sharing the ideas and experiences from across the current Treat First providers. MAD will be releasing its revised Rules and a BH Clinical Policy Manual which cites this training as a required part for becoming a Treat First provider. A website [www.treatfirst.org](http://www.treatfirst.org) is being built to facilitate training. Providers will be able to export the materials into their own e-learning agency platforms. Completion of the modules for the website is expected by November 1st.