



Present via Vidyo: Angela Youngerberg, Phil Claussen, Barb Dietz, Chera Sevcik, Suzie Nerison, Sue Rynda, Cassie Sassenberg, Mark Shaw, Naomi Ochsendorf

Others Present: Amy Haas, Jamie Hayes, Teri Herder-Blahnik, Helen Ghebre

Mark Shaw called the meeting to order at 9:11 a.m.

Approval of Minutes: Naomi Ochsendorf moved to approve the minutes of the February 21, 2020 meeting. Sue Rynda seconded. Motion carried.

Approval of Agenda: Sue Rynda moved to approve the agenda. Suzie Nerison seconded. Motion carried.

Public Comment: None.

RMT Report: Amy Haas reported on the March 12th RMT meeting. Several items on the agenda are on the JPB agenda.

- LAC and JPB reports were given.
- Stakeholder Meeting update was provided.
- RMT was updated about the change in meeting location to the Government Center starting with the May meeting.
- Jamie has been receiving bills for 10-County Networking activities, and she asked that Clubhouse Coordinators specify how and to whom the payments need to be remitted.
- The Tamra Rovney Award Committee is asking for one-word descriptions of Tamra to be sent to her. They will be used to define qualifiers for award candidates. Nominations will be accepted in August, and the award be given at the Fall Mental Health Conference. Julie Moniz reached out to Tamra's brother and mother. They were happy to hear about the award but would like to leave the planning to the Committee. They wish to be involved in the presentation, though. The next committee meeting will take place in Sibley County on May 12th to coincide with the clubhouse open house.
- Jamie is still finalizing the dates of the (Mid)West of Somalia screenings/panel discussion. It has been challenging to coordinate the schedules of the panel members.
- Committee updates were given.
 - **Clubhouse Workgroup** - The workgroup reviewed the format of the annual reports submitted by the Clubhouse Coordinators in the fall. They are looking for ways to streamline the report, reduce the narrative section, and add demographic information. They would like to add personal narratives of CH members answering questions such as, "What does the clubhouse mean to you?" and something like, "How would your life be impacted in the absence of a clubhouse?" The challenge is finding a way to ask the question without causing members to panic and think that the clubhouse is going to close. The workgroup is looking at changing the reporting period to coincide with the calendar year, Jan. 1 – Dec. 31. It is currently Oct. 1 – Sept. 30. In the future, the workgroup will look at actual operating costs of each clubhouse.
 - **Integrated Services** – Wellness in the Woods Associate Coordinator, Melinda Shamp, Outreach Associate, Nicole Kveene, and Legislative Advocate/Peer Respite Services, Shelley Quam presented. Launched in 2013, WitW is a statewide mental health consumer-run organization with the mission to "be a voice of individuals with a mental health experience and fortify opportunities that positively impact and inspire communities and support systems." They are not a provider per se. Their offerings are centered around advocacy, education and fostering connections among peers. In 2019, the Peer Support Connection Warmline was awarded a DHS grant that expanded Warmline services across the State of MN and is available to all Minnesotans 18 years old or older. The PSC Warmline is available from 5:00 pm to 9:00 am, 365 days a year by text or phone at 844-739-6369 . The service is delivered by trained and paid Peers who have mutual mental health or co-occurring substance use challenges. 50% of the

Warmline Staff are certified Peer Specialists trained in Intentional Peer Support (IPS). Warmline staff work from home. This opens up employment opportunities for people throughout the entire state of Minnesota, including individuals living in the SCCBI region who may be interested in employment with WitW. The organization is also looking for opportunities to provide technical assistance for providers and Certified Peer Specialists, and they are pursuing the passage of a bill to create the first peer respite home in the state. For more information about services, employment, training opportunities/CEU's or becoming a member of Wellness in the Woods, check out their website at www.mnwitw.org.

- Crisis Committee - There was a record high 106 mobile assessments in February. There was also an increase in the number of children screened and assessed – 19 vs. 7 screened/assessed in January. The committee received an update of the statewide crisis provider meeting. There will be an increase in funding for crisis services, but regions are not guaranteed to receive any additional funding. We will also get monthly MHIS reports. DHS has a statewide crisis line that uses geo-tracking to connect people to a crisis line nearest to them, but it does not work with Verizon. Horizon Homes talked about their strategic plan for the outreach position. Lindsey updated the group about what they've done so far. Horizon Homes will provide quarterly outreach reports. There was conversation about whether to reduce RAP for kids slots at ODHC or continue holding them. It was decided that we will continue with the one slot per week, but if ODHC does not hear from Horizon Homes three business days in advance of the open slot, then they will be free to fill the spot. There was talk about creating a video virtual tour of the crisis center to have available online and on their Facebook page.
- SET Committee – The SET Committee met on March 13. Everything is all set for the April Stakeholders Meeting with one pro speaker and two consumer speakers. Preplanning for the September meeting is already underway. The committee is looking at having two pro speakers. Donna Dunlap is a dietician who works for LSS is interested in speaking. The committee plans to reach out to Wellness in the Woods to see if they would like to present as well.
 - Jamie provided an update about the AMHI Statewide Meeting.
 - Jamie informed the RMT that Blue Earth County Mental Health Center will be submitting a funding request to JPB to purchase technology for a pilot project using the Vidyo platform. Their current equipment is not up to par with clinic standards. Jamie reported that there are funds available in Equipment, but if those funds are used to pay for BECMHC's pilot project, then issues could arise if equipment currently used by the mental health centers breaks down. There is also a question about what to do if the other MH centers wish to upgrade and purchase technology for Vidyo. RMT members supported the idea of piloting the Vidyo platform.

Eide Bailly Final Report: Eide Bailly has completed 2019 fiscal monitoring. There were no major findings; only a \$30 transposition error that can be corrected in the next quarter. Jamie will email members the short version but can make the full report available to Executive Committee members.

February Vendor Report: Sue Rynda moved to approve the February vendor payments. Naomi Ochsendorf seconded. Motion carried.

COVID-19 related DHS response request regarding grant flexibility: Jamie shared her response to the request by DHS as to how they might provide more flexibility in deliverable and budgets in order to prepare for or manage COVID-19. Her response was as follows:

The SCCBI echoes the requests of the other regions that have weighed in so far with a request for flexibility. We are likely to experience a higher volume of crisis service needs, an increase in hold orders, and a decrease in staff ability. Counties will continue to have expenses for staff, however, will likely not be able to draw down the revenues in the same manner.

- Though it is uncertain, it is highly likely we will see an increase in flex funds requests for food and food delivery, for medication delivery, for hygiene supplies, and for housing related expenses.

- Increased expenses for telepresence equipment. Our region's telepresence platform allows us to have increased communication amongst key providers, and with the current recommendations for social distancing, we are receiving increasing requests from hospitals and law enforcement agencies to join in.
- Funding for mobile crisis staffing. Our mobile crisis team was working at capacity prior to this increase in demand and cannot increase in staffing capacity without an increase in funding.
- Flexibility with DNMC as we work to discharge individuals to the community from state facilities, with a likely decrease in staff.
- Eliminate the barrier of three per week for providers utilizing telepresence.
- Allow the DHS allocated training funds to be utilized to address the current pressing needs. I have already requested an extension on the spending of these funds, as many of our training opportunities have had to be canceled or postponed due to safety concerns.
- Consideration of extension of grant application timelines. At this time, we know only of the Crisis Grant timelines. It is going to be very difficult complete this on time if key staff are not available. Please consider flexibility for regions if they need it.
- Flexibility with the BRASS Code 10% changes. It's possible that we will need to make changes to this on a crisis-basis. Please allow regions the flexibility to make these changes, on a reasonable basis, then check in with DHS regarding the change afterward.
- Loosen date reporting mandates. This likely to be something that workers need to put on the back burner when others are out sick, please allow flexibility in reporting.
- Allow flexibility of supervision requirements for some positions.

Regional Telepresence Update/Information/Expansion in Response to COVID-19:

The social distancing, business closures and the probable upcoming "shelter at home" order in response to COVID-19 will necessitate the use of telepresence technology. Jamie said that Integrated Services meetings will probably be cancelled, but other committee meetings could take place utilizing Vidyo. As Jamie is the resident expert on the Vidyo platform, the JPB discussed the scope of her position in light of the need for county staff in the region to be connected to Vidyo. Jamie stated that she would like to remain the point person to get people connected, as she can maintain a list of people who have Vidyo. This will also reduce the amount of calls received by Vidyo helpdesk personnel. However, she will need to know who to prioritize for Vidyo, and who she should not include at this time. Therapists are currently getting connected. It was suggested to start with social services mental health staff. Waiver workers who work with mental health clients could be prioritized. Jamie said that she could put Vidyo technology information on the website. She added that there is no cost for the licenses and obtaining them is not difficult. But setting up the platform is more time-consuming. It would be helpful to have a point person in each county designated to set up Vidyo for their staff. It was suggested that perhaps Jamie could train the point person in each county. Jamie cannot order webcams right now because there is a shortage.

Blue Earth County Mental Health Center Funding Proposal: Blue Earth County Mental Health center is requesting approximately \$3,000 to purchase equipment to pilot the use of Vidyo for tele-psychiatry. Vidyo is cheaper and more effective than ITV, but BECMHC's current equipment does not meet the higher standards needed by psychiatry. Jamie reached out to Freeborn County Mental Health Center and Sioux Trails to gauge their interest in Vidyo. FCMHC is not interested at this time, and Sioux Trails uses a different platform. Although COVID-19 has created a run on equipment, making it unavailable, Jamie has already requested licenses for BECMHC. Jamie reported that the AMHI grant's tech line was underspent in 2019, so there is room to purchase technology, but there may be tech expenses in the future if older equipment fails. Crisis funds have been utilized in the past for urgent care tech purchases. BECMHC staff currently use Vidyo to connect to ITV units, so ITV equipment will not need to be immediately upgraded. Dr. Farnsworth uses Vidyo only. RMT is in support of BECMHC's funding proposal. Barb Dietz moved to approve approximately \$3,000 for

Blue Earth County Mental Health Center to purchase technology to pilot Vidyio telehealth. Chera Sevcik seconded. Motion carried.

Crisis Services Updates: *(February report included in packet)*

- Horizon Homes saw a record high for mobile assessments for the month with 106 mobile responses. Tina reported that this created some pressure for staff, but they are not yet at a point where they are comfortable adding staff. If they start seeing over 100 per month consistently, then they may look at staffing options. Currently, they schedule six staff per day on staggered shifts.
- Stabilization for Children – This is a new category added to the report that indicates when a follow-up connection is made to assist the family with coordinating/connecting them with services.
- There was a significant increase in Children’s Mobile Crisis with 19 who were screened and assessed. This was primarily in response to the deaths of two students in two school districts (one of which was a suicide). HH staff spent two days at Tri-City United.
- The average duration of response in February was 1 hour, 47 minutes. This includes travel time, from the time mobile leaves the building until they return.
- Telepresence Tracking – There were two ED referrals in February from Sleepy Eye Hospital.

Rapid Access Psychiatry – There is one slot per week available for RAP; however, only about one slot per month has been utilized. There was conversation about whether to reduce slots or continue holding them. It was decided that we will continue with the one slot per week, but if ODHC does not hear from Horizon Homes three business days in advance of the open slot, then they will be free to fill the spot. Looking at RAP referral sources, it was noted that Case Managers have not been referring people to RAP and that Intake Workers should be made aware of RAP. Jamie will send Lindsey the RAP informational sheet, and Lindsey will condense it and forward it to county Case Managers and Intake Workers. The first bill for RAP was received for approximately \$1,000 for 9 unutilized slots.

Crisis Center COVID-19 Update – Horizon Homes is not allowing anyone in the building other than staff and clients. They have adapted programming and the physical structure of the building to accommodate social distancing guidelines and have made some staff changes to preserve staff from exposure. They are building a work-from-home/on call system. At this time, they are still accepting referrals and admissions using additional screening questions related to symptoms, but this is very fluid, and they are monitoring things very closely. They have seen a slight decline in numbers, but it is hard to determine whether it is due to COVID-19 or if it is just a slow week. They have been receiving a lot of phone calls from other providers and agencies asking if they are still operating, so it is possible that they may see an increase in numbers if providers start shutting down or limiting access.

As there was no further business, the meeting adjourned at 10:11 a.m.

Next JPB Meeting:

Friday, April 17, 2020, 9:00 a.m. – 12:00 p.m.

Via Vidyio

Respectfully submitted, Teri Herder-Blahnik, SCCBI Administrative Secretary/Office Support