REGION II Behavioral Health Board

Website: riibhb.idaho.publichealth.com

Public Health Building – First Floor Conference Room

Conference Phone Number: 208-748-0414; Conference Room Number: 7002#;
Conference Pin Number: 7002#

I. Roll Call, Welcome, and Introductions

Board Members

	Sara Bennett		Darrell Keim		Lisa Martin	х	Jenny Teigen
	Lisa Bomley		Diane Kovach	х	Mike Ponozzo	х	Glenda Thomson
X	Megan Comstock	Х	Shari Kuther	х	Jim Rehder		
Х	Kathy Connerley	х	Kathie LaFortune	X	John Rusche	х	Dean Allen
X	Beverly Fowler	х	Tom Lamar	х	Teresa Shackelford	х	Todd Hurt
Х	Chris Goetz		Deborah Lind	х	Jennifer Shuffield		
Х	Sharlene Johnson	х	Tammy Lish-Watson	X	Skye Taylor		

Others In Attendance: Sharlisa Davis, Cindy O'Brien, Nathan Foster, Peri Larson, Twila Nelson

By Phone: Sharlene Johnson, Skye Taylor, Shari Kuther

- II. **Approval of September BHB Minutes:** Approval of the September minutes took place. Board members had the opportunity to review and Mike Ponzzo moved for approval with a second from Teresa Shackelford; **Motion carried**.
- III. **Financial report (Carol/Perri):** A review of the BHB budget revealed expenses in the amount of \$500. under the "Community Projects" subcategory. This expense supported a "Community days BBQ" a drug and alcohol free even for youth.
- IV. **Vision/Mission review and Strategic Planning (Chris/Board):** Chris Goetz provided an interactive presentation during which:

BHB mission statement and vision statement was reviewed: he posed to the group, "is this still our mission?" A discussion was facilitated to further examine if the current mission/vision is still relevant. Teresa Shackelford questioned if the "physical" part of the Vision may be "out of our scope", Jenny Tiegan suggested that the vision is more holistic if it encompasses physical needs, Teresa Shackelford didn't disagree with this, but suggested that this may not be something we necessarily address. John Rusche suggested the vision is related to the "how-to". Dean Allen suggested a holistic and integrated behavioral health speaks to the whole person approach, which the board supports. No strong desire to change the current Mission/Vision were expressed by board members.

During this presentation, Chris Goetz provided an overview of the BHB Needs and Gaps from 2013 Mental Health Board to 2019 Behavioral Health Board.

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The board was able to review current needs and gaps as Chris Goetz facilitated a discussion regarding the growth of this board, as seen through these identified areas. Jim Rehder pointed out some of the progress which has occurred during this time, including that SHN currently has 4 psychiatrists on board, a significant improvement from the past. Todd Hurt pointed out that the region now has 3 Oxford Houses in Lewiston and 1 Oxford House in Clarkston, whereas 6 years ago this was not a reality.

Chris Goetz inquired how does the board achieve progress on goals moving forward so as to reduce progress drift. He identified four major priorities for the board:

- Affordable housing
- Children's services both MH and SUD
- Lack of providers
- Transportation

John Rusche suggested that affordable housing continues to be an important issue and suggested that local governments need to understand how this impacts community-wide issues; he feels there's an opportunity to address this issue. Tom Lamar reported that Latah County recently completed a housing needs assessment which revealed a significant need for affordable housing.

Following a review of the BHB Needs and Gaps, Chris facilitated a conversation regarding the BHB's budget over the past three years. He inquired openly, "are the things we are funding truly reducing the gaps we have identified, or are they just supporting areas that we think are important." Chris Goetz suggested, there may not be a right answer, but it does allow for reflection regarding appropriate use of funds. Several board members suggested funding certain efforts allows for a trickle effect of improvement. Jenny Teigen would hate to see a reduction in funding advocacy as this is helpful in reducing stigma. Glenda Thomson wondered if these types of projects could be funded through other monies, not associated with BHB. The Board was able to examine spending during the 2018, 2019, 2020 FY and discuss if spending has been reflective of identified priorities.

Looking at the board's future, a discussion was initiated regarding what can be done to fund efforts, including: legislation, grants, direct funding from Health and Welfare, partnerships and other ideas. John Rusche and Jenny Teigen discussed bringing all community partners together to discuss housing issues. John Rusche discussed that planning could be better facilitated with these partners involved. Dean Allen suggested that Lisa Martin may be looking at this closer, as it has been suggested that there may be other partners with similar goals.

While a formal strategic plan was not developed, there was the opportunity to more closely examine the future direction of the board in a mindful and thoughtful manner. It was suggested

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that board members reflect on the talking points identified and provide feedback regarding next steps during the November BHB meeting.

V. **2020 Legislative issues (Tom/Chris/Jim):** Jim reported the board submits legislative suggestions to central office to help advocate for issues of importance to the board. A list of legislative issues was identified by Tom, Chris and Jim and shared with the team. Chris recommended that the wording be changed to "Fully implement Medicaid expansion", rather than implement Medicaid Expansion with no sideboards and concern for treatment capacity. Jenny Tegan suggested that even individuals who work at 30 hrs a week at 8 dollars an hour you would not qualify for expansion. Teresa also identified making calculation which suggest that many working individuals would not fully qualify for Medicaid and would have co-pays which could make it difficult to access or remain in services. Chris Goetz suggested one more year of fully funded Medicaid would help provide good data regarding how expansion will really work.

These 2020 Legislative priorities included:

- Fully Implement Medicaid expansion
- Fund Study on Housing adequacies and opportunities especially for BH clients
- Fund Study to determine the effectiveness of RC's
- Additional funding for Recovery Center
- Improve broadband for rural/frontier areas
- Maintain Medicaid enrollment when incarcerated
- Develop BH crisis and treatment resources for teenagers
- Involving families as part of treatment team when client is in crisis- in home CIT
- Need for psychiatric youth residential treatment in Idaho
- Funding for Mental Health and You phone app

John Rusche suggested we add Housing as a priority and this was agreed to by members. Jennifer Shuffield discussed potentially adding the need for in-state PRFT for youth, so as to avoid out of state placements. Cindy O'Brien discussed the need for crisis services, similar to the crisis centers, for youth.

VI. Rural Crisis Center Network update (Carol/Darrell/Tammy/Cindy):

Rural crisis center updates included Optum is proposing to provide a per episode fee for crisis center services. Cindy Obrien reported this would not be sufficient reimbursement for sustainability of operations and overhead of the crisis center. A decrease in funding will likely occur when Medicaid expansion occurs in the cost of a 2 million dollar decrease across the state for the next 2 years effective in January 2020. Todd suggested if the board needs help with understanding this change we can have a person from central office attend the next board meeting to provide some additional clarity.



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VII. Recovery Community Center Latah/Nez Perce Counties (Board):

Tammy Lish-Watson: The outreach recovery center in Orofino will be open on Monday October 14th. They will have cross-trained peers, who can assist with BH and SUD issues.

Latah County- No report was provided during today's meeting

VIII. BHB Sub-Committee Reports:

<u>Children's Mental Health</u> – No report provided

<u>Adult Behavioral Health</u> – No report provided

Housing - None

Tele-Healthealth - No report provided

Prevention – No report provided

IX. Public Input:

Sharlisa Davis updated the board on WRAP efforts. Wellness Recovery Action Plan is still going strong. However, some individuals do not like to go to the recovery center for WRAP services due to the stigma related to mental health and substance use. Sharlisa Davis has made efforts to identify other venues but has not found any yet. Regardless this program has been going strong for the last 5 years and continues to meet on a weekly basis.

Twila Nelson traveled from Moscow to attend today's meeting; she introduced herself to the board.

Nathan Foster—Discussed the use of DSM from a consumer's standpoint.

- X. Next BHB Meeting: November 14, 2019
- XI. Meeting adjourned at 3:05pm