CARVER COUNTY LAC Meeting

DATE: 05/11/2021 Chair: Derek Gunderson

TIME: 4:00 p.m. -6:00 p.m. RECORDER: Courtney Iverson

COUNCIL MEMBERS				GUESTS		
Р	Α	Name	Р	Α	Name	
Х		Beth Fagin	х		John Magnuson – Executive Director MARRCH	
	Χ	Melissa Hanson	Х			
Х		Sam Deweese	Х			
Х		Melanie Warm	Х			
Х		Michelle Faith, Nystrom and Associates ARMHS		х		
Х		Tim Lynch	Х			
Х		Stephanie Combey	Х			
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Agenda	Activity/Discussion	Decision/Action
Agenda Item 1:	Call to Order: 4:05 PM	

Agenda Item 2:	Approve May Agenda:	Approved by
	The motion was made by Mary to approve the April agenda; Beth seconded	consensus
Agenda Item 3:	Approve April Minutes:	Approved by
	Approval of April Minutes change	consensus
	Approval of agenda-motion approved	
Agenda Item 4:	Guests:	Information
	John Magnuson-Executive Director MARRCH	
	MN association of resources for recovery and chemical health	
	Member of the National Council of Behavior Health	
	Works a lot with NAMI on issues at the capitol	
Agenda Item 5:	John worked with Jim Ramstad and the Kennedy's, Paul Wellstone made the landmark Mental Health and Addiction Act	Information
	Increasing speeds to connect people to resources & assistance	
	Mobile response and crisis response	
	75 members, a workforce that's 5000 people	
	Licensed 245G facilities	
	Medically Assisted Treatments 245F	
	Partnership with hospitals, clinics, corrections	
	Sandy Question-how does one contact John?	
	612-599-0053	
	email: <u>Johnm@marrch.org</u>	
	www.marrch.org	
	They are primarily funded by their addiction care providers	
	Access/Workforce/Sustainability	
	From crisis to opportunity-the benefits of telehealth	

Agenda Item 5: cont	John had testified on the importance of provider reimbursement for calls & telehealth	Information
	Value Based Care	
	John Magnuson would be willing to help with drafting legislative documents & get things on agendas	
	There are monthly policy forum meetings	
	They are a political group representing the party of people who are in need of help 🔞	
	Stigma-some of the biggest stigma is with our medical professionals	
	Sandy feels medical professionals are trained to fear people with mental health issues and there are major issues with insurance	
	Insurance companies get sued and lose all the time but it is cheaper for them to just pay the fines the properly conform to the rules/common sense health decisions	
Agenda Item 6:	New Business: Implicit Bias Test (Lindsey) Harvard put this out Self-awareness This is a good place to start because of self awareness The George Floyd murder stimulated a lot of people questioning this about themselves Google "Project Implicit" Tests on age, race, sexuality It is common for white people to get defensive about this Our nation as a collective is quite racist Ana-Do they have one for mental illness? That would be very relative to our group, no they do not it sounds like How is this scored? It is a speed/response test.	Information

Agenda Item 6: cont	A lot of bias is the way we are raised	Information
	Derek will send the link out to us	
	Staff Demonts	
	Staff Reports Melissa:	
	Community Support Program update:	
	Mary, RN, is retiring at the end of the month-has been so helpful during the Pandemic	
	Position is posted for a PT registered nurse	
	LPN's at first street will keep the service going until RN is hired	
	New position for a separate case manager so they can do treatment coordination in addition to	
	AMH-TCM	
	DHS is forming an AMHI Reform workgroup to determine formula for future grant amounts in	
	each AMHI region – meetings will occur over the summer	
	Beth	
	Schools are desperately looking for in person services for kids	
	They are anxious to find spaces to meet	
	This is the case with many clinics, there is a waitlist for children	
	Kids need to engage with adults in environments other than therapy	
	Shortage of providers is statewide	
	Problem is waitlist	
	People aren't attracted to a big shiny building, they are attracted to the work	
	We need to support them	
	We need to pay them	
	Are we limited by the space we have	
	Are we able to pay providers better-Beth is referring to the county on that one, this often driven	
	by the insurance industry	
	ARMHS program said how hard it has been to hire people who are qualified. Agencies take a	
	percentage-if they were willing to share a little more incentives.	
	Sue's daughter Kristy may donate her time to get her hours in for her PHD?	
	Would have to contact the specific unit	

Agenda Item 6: cont	Agencies are required to have a lot more infrastructure, electronic health records, business	Information
	operating costs	
	Stephanie Combey has worked to try and get MA rates to change	
	Children's Therapuetic Services and Supports-a standard cert at the state	
	Give flexibility of children's mental health, in 16 years, all they do is keep adding on compliance	
	measures and changes to what is done in a standard diagnostic has shifted dramatically	
	They are looking for fraud or ways we are not meeting the requirements	
	Some of the clinical oversight is objective based on who the reviewers are	
	Haven't seen a service yet that hasn't involved more and more documentation	
	Manual for this is 92 pages	
	Oversight is not a bad thing, but it becomes a lot	
	Stephanie Combey	
	Still looking at the reopening plan	
	Adding a supervisor to the crisis team	
	Melanie Warm	
	Starting to move social workers back into 911 dispatch center so they can consult and take over	
	phone calls when it is appropriate	
	2 new social workers	
	A lot of good collaboration with law enforcement	
	Number of kids and adolescents attempting suicide is way up	
	Is there a belief the rate will go down or stay up?	
	Is this a budget item	
	Melanie feels this will continue to be a risk	
	Spring is always the highest time for mental health crisis & suicide	
	There a lot of people without jobs. There is a lot of schedule	
	Kids are in particular high risk because of not having the structure in the summer	
	All crisis teams around the state will have an increase	
	Can we use call stats to isolate location hotspots to turn around to the state?	
	Calls are currently being tracked by DHS	
	NAMI sent a letter to the Chiefs around the deadly force statute	

Agenda Item 6: cont	QPR training May 18 th	Information
	Key warning signs of EO Mental Illness	
Agenda Item 7:	Chairs Report:	Information
	May is mental health month so whatever we can do to put it on the forefront of our	
	conversations, do	
	Victoria recognized May as mental health month	
	Crisis call center-we are so happy that is back in MN	
	June/July/August to do a meeting outside	
Agenda Item 8:	Old Business:	Information
	SF193/HF269 PSYPACT, County & School districts partnerships and overlap, Rural/Farming	
	Family Mental Health	
	It is easier for schools to meet in the summertime	
	Derek has not been able to do anything with rural/farming mental health outreach	
Agenda Item 9:	LAC Member To Do's:	
	What are our top priorities?	Discussion
	What do we want to see?	
Agenda Item 10:	Upcoming Events:	
Agenda item 20.	Received an email from the sheriff that they will add another co-responder to the budget	Information
	We have gotten good results from Alison	
	Open Forum	
	Sandy's church St. Joe's hired Andrew Hay and are offering parishioners and anyone outside of	
	the church to come to grief sessions	
	They are open to anyone free no charge	
	It is just good to talk to someone, so you know you are not the lone ranger	

Agenda Item 10:cont	June meeting-commissioner budget meeting Tim Lynch-they are looking at everything now for potential budget items The earlier the better-will try and push this up if we can Outline: Technology brings a big role (budget for LAC members) Highlight some programming ideas we have Space needs What can we do to keep our mental health initiatives on track? Can meet at Courtney's farm? Derek will send a survey to ensure we are all comfortable Would like the answer by May 31st	Discussion
Next Meeting	Will need to post a notice and allow the public there Motion to adjourn June 8 th at 4 p.m.	Next Meeting
Adjournment:	Adjourn	Adjourned