

This meeting was not recorded. Six members are needed for a quorum.

5/9/2022

Adult State Program Standing Committee Minutes

DRAFT

**Present Members:**  Bert Dyer (he/him)  Malaika Puffer (she/her) (ex)  Ward Nial (he/him)  Kate Hunt (she/her) (ex)  
 Marla Simpson (she/they) (ex)  Dan Towle (he/him)  Lynne Cardozo (she/her)  Zach Hughes (he/him)  
 Christopher Rotsettis (he/him)  Ann C Cummins (she/her)  Erin Nichols (they/she) (ex)  Michael McAdoo

**DMH/State Staff:**  Eva Dayon (they/them)  Steve DeVoe (he/him)  Dr. Trish Singer (she/her)  Katie Smith (she/her)  
 Emily Hawes  Dr. Kelley Klein  Mourning Fox

**Public:**  Joanna Cole  Alexis McGuinness  Dillon Burns

**Agenda**

12:30 SPSC Business:

- Standing items: choose new facilitator, introductions, review agenda, announcements, vote on April minutes and public comment, reminder for applications
- New items: member retention and wellness, SPSC system of care priorities 2022, MHAM content input, AMH SPSC Annual Report

1:30-2:30 Review Northeast Kingdom Human Services Reports, discussion with DMH Quality Team & Forming of questions/themes for designation visit

2:30 DMH Leadership Update: Emily Hawes, Commissioner, and Dr. Kelley Klein Medical Director: Welcome to Kelley, Legislative Update

3:00 Public comment

3:05 June draft agenda

3:30 Adjourn (at or before)

Agenda Item	Discussion (follow up items in green) Facilitator: Zach                      Timekeeper: n/a
<b>Opening and AMH SPSC Business</b>	<b>Meeting convened at 12:33pm</b> Update on membership process: <ul style="list-style-type: none"><li>• Reapplications only need an updated resume</li><li>• Turn around time for governor’s decision should be quicker</li><li>• SPSCs get to still define their own membership process</li><li>• No other major changes to the application form at this time</li></ul> <b>Motion</b> to allow public comment through the meeting with discretion. Marla motions, Dan seconds. All in favor. Passed. <b>Motion</b> to approve April minutes. Ann motions, Dan seconds. All in favor, two abstentions. Motion passes. <ul style="list-style-type: none"><li>• Follow up with Steve and loop back to the committee.</li></ul>

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	<p>Move member application voting to next month. Member retention and wellness – no longer needed to discuss</p> <p>Discussion: SPSC System of Care Priorities 2022- The committee would like to have new priorities every year, potentially to align with the fiscal year. This will be a two-part process.</p> <ul style="list-style-type: none"> <li>• Step 1: List all items and a one-two sentence description of what they mean, have a chance to add new items.             <ul style="list-style-type: none"> <li>○ Eva to send out a survey to collect this information.</li> <li>○ Add 'Trauma' to the list- given current war Russia/Ukraine, potentially 'trauma-informed'</li> </ul> </li> <li>• Step 2: After the next meeting, members use a second survey to rank priorities</li> </ul> <p>Members discussed how/when to use the priorities to center committee work. Could be used in annual report, centered during designation visits, used to form schedule for DMH leadership updates.</p> <p>Discussion: Content input on MHAM Newsletter: members appreciated the content so far, especially the specific updates about work being done at agencies in the week 2 edition.</p>
<p><b>Update from Mourning Fox</b></p>	<p>Worked for two months at the Community Health Center of Burlington. Then was offered opportunity at Department of Public Safety in the newly created role of Director of Mental Health Programs.</p> <p>Main responsibilities are in coordinating Embedded Mental Health Crisis Specialists. Two barracks with no embedded worker (St. Johnsbury region and Orange county region), one barrack (Williston- serving Chittenden and Lamoille county) with 1 of 2 positions filled. All other positions filled. Individuals in these positions have lots of supervision- they meet with their barrack commander, Fox, and supervisors at the designated agency they are employed by.</p> <p>The Department of Public Safety is looking for alternate models with someone is in crisis without an armed law enforcement response. This work began last week with a broad group of stakeholders, including advocates, peers, NAMI, law enforcement and EMS community. This was well received from attendees. There will be two subgroups from this work:</p> <ol style="list-style-type: none"> <li>1) how do we evaluate the current program (embedded MH specialists) to know if it is successful? What data should we be monitoring? Suggestion to monitor connections to other interventions, since being more connected to services can reduce the need to rely on police intervention.</li> <li>2) what kinds of programs do we want to create?</li> </ol> <p>Ask for group: as this work progresses- can questions/drafts/ideas be brought to this group? There was agreement from the AMH SPSC members.</p>

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	<p>AHS has hired a consultant (Health Management Associates – HMA) to understand how to maximize Medicaid reimbursement and improve mobile crisis response in the state. By mid-summer, this group is trying to submit recommendations to the state. This may inform what an alternative crisis response could look like.</p> <p>Fox will be reviewing the training materials at the Police Academy to make recommendations for Crisis response. Officers and troopers will always be a responder to some calls- so we want to make sure everyone have baseline skills. Fox is also in conversation with Fire Academy to train the trainer on violence prevention/de-escalation training to share through state. EMH/Fire are also common first responders to crisis.</p>
<p><b>NKHS Reports and Question Formation</b></p>	<ul style="list-style-type: none"> <li>• Eva discussed the history of Designation processes, the seriousness of the current Designation status (provisional, <u>without</u> intent to dedesignate) which is an improvement over the status from January-August of 2021 (provisional, <u>with</u> intent to dedesignate). We also discussed the timeline of work with the agency since the previous designation cycle and the compounding challenges of the pandemic statewide. Eva will send committee members the 2018 NKHS Designation Report.             <ul style="list-style-type: none"> <li>○ Members shared concerns about the quick change between the previous designation status (2018) and the concerns developing for NKHS in 2019 that led to the additional agency review. There was interest expressed for an analysis of this process to try to prevent the need for an additional agency review in the future.</li> <li>○ Members discussed the need for more time to form questions/themes for NKHS. In collaboration with DMH, members agreed to stay on track with meeting with the NKHS at the scheduled June meeting. Members agreed to add an additional reimbursed meeting between now and June to:                 <ul style="list-style-type: none"> <li>▪ Discuss the process for NKHS visit with the agency</li> <li>▪ Form questions and/or question themes for the visit</li> </ul>                 Eva will send meeting time options             </li> <li>○ Some members are interested in visiting NKHS in person for the standing committee visit. <b>Eva will reach out to NKHS</b> to explore if they have the space/tech capacity to host the meeting (June 13, 2022).</li> </ul> </li> <li>• <b>Questions to include for agency:</b> about staff training, given the high turnover and high need in pandemic</li> </ul>
<p><b>DMH Leadership Update</b></p>	<p>Emily Hawes and Dr. Kelley Klein Intro to new medical director at DMH. Dr. Klein gave a quick background of her previous employment.</p> <p>Legislature Update:</p> <ul style="list-style-type: none"> <li>• Peer certification bill—there will be a process over the next few months to review what certification could look like. There is \$30,000 planned to help the workgroup do the planning work. DMH is aware this will not be enough to</li> </ul>

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	<p>stand up statewide peer certification. DMH has heard the concern that there is need for peer certification immediately, and by not legislating the certification process DMH is hopeful this can happen quicker. DMH is open to finding other funding streams to stand up peer services. DMH may also ask for support form of Office of Professional Regulation.</p> <ul style="list-style-type: none"> <li>• Have collaborated with Department of Education on how to support youth and educators</li> <li>• In the ‘big bill’ DMH is asking for a coordinator for suicide prevention work as well as funding to expand mobile crisis projects (similar to the RMHS project). Hoping to expand to four more areas- linked to Home Based Community Services (HCBS) funding. Crisis response expansion could include a Pediatric Urgent Care for Kids (PUCK) like UCS has created.</li> <li>• There is now an Interim policy director at DMH – Nicole DiStasio (Shayla Livingston moved to the Secretary’s office). Recently hired a new policy team member as well.</li> <li>• Working to fill open positions at Vermont Psychiatric Care Hospital and Middlesex Therapeutic Community Residence. One step to fill these is switching from eight hour shifts to twelve-hour shifts- this was temporary in March 2020 but the department is working to make this permanent, at the request of staff.             <ul style="list-style-type: none"> <li>○ Members discussed twelve-hour shift and shared concerns about how this may impact staff.</li> </ul> </li> <li>• Mental Health Integration Council work is ongoing. There is also good work occurring in subgroups. Alison Krompf and Dr. Levine are the leads on this work.             <ul style="list-style-type: none"> <li>○ Member shared ‘a lot of talk and no action’ – feels more process than movement. DMH: Will pass this feedback along to the organizers. Can be challenging to move to action with a group this multifaceted.</li> </ul> </li> <li>• Health Management Associates (HMA)- is helping to move forward some of the (crisis response) work.             <ul style="list-style-type: none"> <li>○ Member expressed concern about hearing national organization chosen for this work instead of Vermont organization. No one from HMA project team with peer experience.</li> </ul> </li> <li>• Update on Suicide Grant- would need to invite Nick Nichols or Alison Krompf. Could hear an update on Governor’s challenge and VA grant.</li> </ul>
<p><b>Public Comment</b></p>	<p>Alexis submitted an application – will be shared with recruitment committee.            Comment of appreciations for the committee working well together.            Impressed with Tara Gudett’s (sp?) presentation on Arkansas work at the Mental Health Integration Council</p>
<p><b>Closing Meeting Business</b></p>	<p><b><u>June Draft Agenda</u></b>            12:30 SPSC Business:           <ul style="list-style-type: none"> <li>• Standing items: introductions, review agenda, announcements, vote on minutes</li> <li>• New items: NKHS prep, AMH SPSC FY23 priorities</li> </ul>           1:00 NKHS Q&amp;A with SPSC            2:30 BREAK            2:40 Draft Letter to Commissioner re: NKHS</p>

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	<p>3:10 Public comment 3:15 Draft agenda DMH leadership update will be expanded, focused on suicide prevention, moved to July meeting- inviting Alison and Nick</p> <p><b>Motion</b> to Adjourn made by Lynne second by Marla passed 3:27pm</p>
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