Governor’s Task Force on Mental Health

TASK FORCE MEETING SUMMARY

Monday, July 25th, 2016
8:30 a.m. – 4:30 p.m.
Orville Freeman Building - Room B144
625 Robert Street North, Saint Paul, MN

Governor’s Task Force on Mental Health - Members Present: Commissioner Emily Piper, Melissa Balitz, Brantley Johnson, Kim Stokes, Sue Abderholden, Shauna Reitmeir, Pahoua Yang, Dr. Paul Goering, Dr. Bruce Sutor, Sara Suerth, Chief Rodney Seurer, Hon. Jamie Anderson, Commissioner Ed Ehlinger, Cathy ten Broek, Roberta Opheim, Representative Roz Peterson, Representative Clark Johnson and Senator Tony Lourey

Governor’s Task Force on Mental Health Members Absent: Senator Julie Rosen, Commissioner Jim McDonough, Commissioner Tom Roy, Crystal Weckert, and Liliana Torres Nordahl

Governor’s Task Force on Mental Health Staff Present: Susan Koch and Mariah Levison

Presenters: Deborah Cavitt, Mindy Grieling, Suzanne Renfroe and Virgil Sohm

8:30 a.m. Welcome

- Commissioner Piper welcomed the Task Force members and guests to the Governor’s Task Force on Mental Health meeting.
- Commissioner Piper called the Governor’s Task Force on Mental Health meeting to order at 8:35 a.m.
- Commissioner Piper asked the Task Force members to review the agenda for today’s meeting.
- The summary of the July 11th Task Force meeting is posted on the Task Force website at: https://mn.gov/dhs/mental-health-tf/

8:35 a.m. Follow-up from first meeting

- Commissioner Piper asked Task Force members to review the 2nd draft of Principles to Guide Our Work document.
- Handouts of the Second Draft of Principles to Guide Our Work was provided to the Task Force members and guests. It is posted on the Task Force website at: https://mn.gov/dhs/assets/Principles-July20_tcm1053-250268.pdf
- Sue Koch reviewed the changes to the document that were made based on comments at the July 11th meeting.
- Comments from Task Force members:
  o Cathy ten Broek: In the housing section, identifying the housing gaps should be included.
○ Paul Goering: A principle around stewardship should be added somewhere in the document, if it is not currently in the document.

○ Roberta Opheim: Supports stewardship be added to this document.

○ Rodney Seurer: Under the anti-stigma section, can we identify law enforcement in this area? Can everyone in public safety get the same training to respond to individuals with a mental illness?

○ Sue Abderholden: Can we put the public safety training suggestion under the criminal justice system section rather than in a principle? (Group agrees)

○ Melissa Balitz: Employment may need to be called out as separate principle within this document. It is currently mentioned in the “Resilience and recovery –driven” section but it needs to be expanded further that individuals with mental illness can/should work even before they are in their recovery.

○ Roberta Opheim: Supports that employment needs to be added as a separate principle in this document.

9:00 a.m. Presentations from family members of people with lived experience of mental illness followed by questions & answers

• Deborah Cavitt: Discussed her experience being a parent and navigating the mental health system. Discussed the importance of being able to expunge criminal records for individuals living with mental illness as those people recover. Focusing on co-occurring disorders and treating co-occurring disorder simultaneously is important in addressing treatment needs for individuals with a lived experience of mental illness and chemical dependency. Encouraged the Task Force members to keep in on mind that this is a health care issues that impacts the person as a whole not just a mental health issue.

• Mindy Grieling: Discussed her experience as parent. She discussed the importance of affordable housing and advocating for changes at the federal level. Discussed the importance of criminal records having significant impact on employment opportunities and access to housing for individuals with a lived experience of mental illness, and called for the possibility of expunging criminal records for people in recovery. Shared a recent experience she had with her son’s mental health care and crisis in a state-operated Intensive Residential Treatment Facility (IRTS) facility.

• Suzanne Renfroe: Discussed the Certified Family Peer Specialists Program and its importance in the recovery process for children and families that are impacted by mental illness. While case managers and social workers can be very helpful, she has found that Certified Family Peer Specialists can also be useful, especially at the point that parents lose their legal rights to shape their children’s care (because the children age into adult services and rules).
• Virgil Sohm: Discussed his experience as a family member and navigating the mental health system on behalf of family members. He called for more cooperation among county staff and family members to support people with mental illnesses, especially young people who might be facing multiple challenges.

• Questions and answers
  - Dr. Sutor: discussed the issue of in-network and out-of-network benefit differences in private insurance for mental health care and how complex this can be in navigating the mental health system. Comments from presenters:
    - We need to think long term and not short term. The mental health system is a revolving door - from hospital to shelter to homelessness and back to the hospital, etc.
    - Roberta Opheim: You have to fail to access the services and be admitted to one place and then need to be discharged to go get another level or services. There are issues with enforcing quality and appropriate discharge planning.
    - There are issues with hospitals focused more on efficiency at the expense of the quality of care for individuals receiving services.
    - It is important to look at flow of mental health services. We currently treat mental health as a static illness.
  - Sue Abderholden: How many case manager have the panelists worked with while they were involved with the care of their family members? Answers from presenters:
    - Too many case managers throughout years to count
    - Every case manager doesn't have the same/standardized information. This is confusing for parents and family members when
    - Being from communities of color also escalates some of the above mentioned issues; people of color seem to be shunted more quickly into the criminal justice system than white people.

  - Dr. Goering: There are some issues with HIPPA and being able to provide information to parents and family members. If you had the information about your family member and had been included in your son's mental health care, how would your experience be different? Comment from presenters:
    - Not including the family was disastrous and a lot of the issues would have been prevented if family members had been involved.

10:15 a.m. Break
Commissioner Piper called the Task Force meeting back to order from break at 10:30 a.m.

10:30 a.m.  Mental health system overview presentation and discussion- Claire Wilson and William Conley
  • Claire Wilson and William Conley presented the mental health system overview presentation.
  • The PowerPoint presentation is posted on the Task Force website at: https://mn.gov/dhs/assets/Overview-Mental-Health-Presentation-ppt_tcm1053-250266.pdf

  • Questions and comments from Task Force members:
    o MN is one of the few states that has county administered mental health services. Why does MN have this and how does this benefit us?
    o What prevents us or enables us to have a structure that has a continuum of services that are comprehensive?
    o What does Dialectical Behavioral Therapy (DBT) look like for individuals receiving these services?
    o Mental health services are not like the health care continuum.
    o We need to keep addressing prevention and prevent people from going into Serious Mental Illness and Serious and Persistent Mental Illness status.

12:00 p.m.  Lunch
  • Commissioner Piper asked the Task Force members to have a working lunch so that the Mental Health System Overview Presentation & Discussion can be concluded before the next agenda item. Task Force members were dismissed for a lunch break and asked to return at 12:15 p.m. to continue the meeting.

12:30 p.m.  Exercise to begin defining scope and focus of the Task Force work
  • Mariah Levison explained this exercise is meant aid the Task Force members in defining the scope and focus of the task force work. The Task Force members divided into 3 groups to complete the exercise.
  • Scope of the exercise
    o Create list of biggest challenges
    o Group discussion
    o Create list of criteria for prioritizing issues
    o Reconcile 3 lists (outside of meeting)
    o Prioritize list based on criteria (email)
    o Discussion to finalize scope (next meeting)
  • Report out from small groups to the task force members and discussion
    o Sue Abderholden reported on Group 1's list of biggest challenges
    o Dr. Paul Goering reported on Group 2's list of biggest challenges
    o Sue Koch reported on Group 3's list of biggest challenges
• Comment from Task Force members
  ○ Roberta Opheim: What should/would the Mental Health system look like if we had unlimited resources?
  ○ Dr. Bruce Sutor: What is achievable and feasible to look at for 2017 legislative session?
  ○ Sue Abderholden: We should examine barriers and areas that can be improved.
  ○ Cathy ten Broek: Recommendation about the conditions necessary for success, moving up stream and focusing on more prevention efforts should be included.
  ○ Representative Clark Johnson: Vision of being able to talk about mental illness in a way that we are all comfortable with. Also need to look for a new paradigm in payment for mental health care.
  ○ Commissioner Ed Ehlinger: Using the equity lens when talking about mental health should be included.
  ○ Kim Stokes: How do we measure success and remove barriers? We should focus on short term, medium term and long term.
  ○ Senator Tony Lourey: How do we have measurable outcomes? What measurements are we going to use to make the system accountable?
  ○ Melissa Balitz: Streamlining in the mental health care payment system. Mental health service are available but accessing them is complicated.
  ○ Dr. Paul Goering: There needs to be a new measurement system.
  ○ Shauna Reitmeier: Can some of the recommendations be medium term pieces and long term pieces? And can some be administrative rule writing/policy reform instead of legislative recommendations?
  ○ Commissioner Piper: The recommendations from the Task Force can include changes in practices or changes in rules, not just legislative recommendations.
  ○ Melissa Balitz: We need to get away from the grant funding in the mental health system. Grants are disincentives for communities. Grants should be used for innovative pilots or programs, not to fund the majority of the mental health system.

• Criteria for Ranking Challenges: The Task Force was asked to brainstorm criteria by which the challenges could be evaluated.
  ○ Magnitude - number to people affected
  ○ Does it increase equity? Racial/ethnic and geographic equity
  ○ MN locus of control
  ○ Solution is known
  ○ Low hanging fruit
  ○ Sense of urgency (immediacy)
Children's issues vs. adult issues
• Moves us upstream
• Reduce and get rid of silos
• How do we engage the community?
• Short term and long term cost
• Consensus
• Ability to measure outcome
• Person and family centeredness
• Challenging the status quo
• Increases access
• Assess community readiness

2:45 p.m. Break

Commissioner Piper called the Task Force meeting back to order from break at 3:00 p.m.

3:00 p.m. Public comment period and next steps
• Commissioner Piper introduced the public comment period and Mariah Levison facilitated the public comment period.
• Virgil Sohm introduced himself to the Task Force members. Virgil stated he is from the Lake Superior Band of Ojibwe in Bois Forte, serves on the Region 3 Adult Mental Health Initiative and serves on the American Indian Mental Health Advisory Council as Chair of the council. Virgil stated that there is a need for cultural advisors in mental health care and asked the Task Force members to consider the possibility of establishing these as Medicaid services as they move forward with their work. Virgil asked the Task Force to also consider more housing resources for communities in greater MN, especially for the American Indian/Native American communities. Additionally, Virgil requested that the Task Force allot 30 minutes for the American Indian Advisory Council on Mental Health to give a presentation at the next Governor’s Task Force on Mental Health meeting.
• Christy McCoy introduced herself to the Task Force members. Christy represents the Minnesota School Social Workers Association and is the Legislative Chair for the Association. Christy discussed the importance of understanding the roles schools play in prevention, early prevention and evidence based practices for children and their families in regards to mental health. Christy is a school social worker and school based mental health provider and school linked mental health providers are available in her districts to meet some of the mental health needs of students. Christy informed the Task Force members that she is hoping the Governor’s Task Force on Mental Health can focus on the need for enhanced communication between systems and throughout the health systems. Additionally, there is a need for culturally competent mental health services,
honoring individuals’ cultures and being able to provide culturally responsive as well as appropriate services throughout the state.

- Emailed public comments: Commissioner Piper asked Sue Koch to summarize the public comments that were sent to the Task Force via email. The public comments are posted on the Task Force website at: https://mn.gov/dhs/assets/Stakeholder-Comments-Received-June24-July21-Public_tcm1053-250269.pdf. The comments were sent to Task Force members verbatim but the comments posted on the Task Force website do not identify the individuals that sent in the comments unless the individual specifically states that he or she is representing an organization.

- Next steps:
  - Commissioner Piper informed the Task Force members that representatives of each of the small groups will be meeting with Mariah and Sue to reconcile the three lists of challenges (generated during the 12:30 exercise) into one list. Those included Dr. Paul Goering, Dr. Bruce Sutor, Pahoua Yang, and Brantley Johnson.
  - Commissioner Piper asked the Task Force members for their feedback and input on having the meetings outside the metro area. Task Force members were asked to connect with Sue Koch if they have feedback or input on other places outside of St. Paul/Twin Cities to host the Task Force meetings.

3:20 p.m. **Adjourn:** Commissioner Emily Piper adjourned the meeting at 3:20 p.m.