

MARION COUNTY HEALTH ADVISORY BOARD
Meeting Minutes
October 15, 2013
5:30 P.M. to 7:30 P.M.

Present: Tim Murphy, Patrick Vance, Mike Mann, Sandra Echavarria, Katherine Fleury, Judy Scott, ,
Josh Sandeman

Absent: Hanten Day, Renee Stewart, Melinda Veliz

Staff: Rod Calkins, Cary Moller, Lisa Duerksen (Recorder), Pam Hutchenson, Scott Richards

Guests: Tammy Brister

Call to Order/Introductions/Approval of Minutes – Patrick Vance, Chair

Patrick called the meeting to order, introductions followed. Patrick entertained a motion to approve last months meeting minutes, members voted, motion carried, minutes were approved. Introductions followed.

Announcements/Updates:

Pam announced the Public Health Accreditation Board (PHAB) visit should be the 9th & 10th of January and we should have the exact date by November. We will need to have a couple of HAB members attend a meeting with the PHAB people, Mike Mann Volunteered. PHAB would like to meet with community partners and we may bring in some people from the CHIP. Pam hopes to have a the PHAB schedule by the next HAB meeting. Pam announced that the PH Annual plan is coming due. Pam will be sending something out for HAB member review via email and stated that all comments are welcome.

OHA's RFP's – Rod, Cary, Scott:

Rod stated that the health department receives a couple of major contracts from the Oregon Health Authority (OHA), one is our financial assistance agreements for mental health and the other for Public Health. What's going to be happening is that there is a request for application at the OHA and DHS, instead of making amendments to current contracts, they are requiring a response as to what would we do with the new investment money that is coming available. The funding is coming from the legislation and the other from the special session and the cigarette tax. Scott stated that we have currently received one request for application (RFA) for supported housing assistance funding. Cary added that they are really starting to think innovatively around some of the proposals and what's in store. The supported housing links specifically with peer support services to the residential support services. Application for this funding has to do with rent vouchers and peer supports to help people be successful in the community and will help those people with lower levels of care. The RFP's are asking for applications for thirty housing vouchers with one coordinator and one peer support attached to those vouchers. This will be a much more competitive process and the state is looking for us to partner with other counties and out CCO's.

Scott reported that Jail diversion includes crisis intervention training that is an unfunded service; we are looking at this as another way to support those training efforts. Along with that and under crisis services we have been in conversation with the sheriff's office and thinking about how do we can hit all the different areas partnering with law enforcement for good outcomes. We have the CORT team which is contacting people before they have actually been arrested, so they are having frequent police contact, the deputy and mental health person go out and sees them in the community and finds out if there is anything they can do to help them. For people in jail we have mental health people in the jail, re-entry projects like SOAR for people coming out of the prison. One thing we don't have is a mobile response, one to think or

consider would be something like the “Portland Project Respond Model” who has a van with a nurse practitioner and a mental health specialist who are responding to people when dispatched by the police or another model that is less expensive but as affective would be to partner a deputy and a mental health specialist to ride along in the same patrol car usually in the evenings responding to the calls that dispatch think involve mental illness. Clackamas and Washington counties are following that model. We have been in conversations with crisis services with addictions and mental health and drafted a budget that helped them decide on the amount of dollars they may put out there which is a positive for us to possibly add that to our spectrum of collaboration with law enforcement. Cary discussed the EASA funding, these dollars would support this program throughout the state. We will be looking at School access to mental health services. The turn around time on the RFA’s are really fast, on the supported housing one we only had 30 days to respond. We will apply for systems wrap around and the trauma initiative which is a really big area for focus and development. Scott mentioned that a question they have had is if this is more of a regional effort. A question was asked about the families in need up the canyon and how do we address that. Cary responded that they figure out the best way to provide services to these families and also partner with Linn County. It is driven by the family and child needs. Rod added that this may be a school based health center model of assisting kids in school like opening a center on the school grounds but are not sure of that level of detail. We are not sure how the funding information will be coming out but we have received the one for supported housing and PH will be applying for one focusing on chronic disease prevention and will be meeting with the CCO and other agencies. In order to even apply either the CCO or health department has to be the lead fiscal agent with policies that meet certain standards.

New Solutions/MV Wrap Presentation: Tammy Brister, Family Support Partner

Rod explained that before 2005 there were a lot of kids who were deemed needing intensive services, which meant largely residential services in those days. There were none in Marion County, the nearest one was the farm home in Corvallis and was often full, and kids often waited 6 months before they got to go to the farm home. The average stay was about eighteen months. When they come back to their home community they didn’t fit in very well because they had been gone and a lot of natural supports had changed which was a very disconnecting experience. There were many families that were helped but many others on average it was more disruptive then beneficial so there was a notion that there must be a better way of doing this which was the children’s system change initiative which is now known as New Solutions. A problem was that many many kids were removed from their homes. We needed to figure out how to get natural supports and a voice in conjunction with this. They came up with MV Wrap and to this day they have a team stationed over at child welfare. What you will hear a lot is that part of that treatment involves high fidelity wrap around services from New Solutions and MV Wrap and has been a very successful way to help kids stay in their communities and with their families and natural supports. Tammy is a person that does that.

In 2003 Tammy had a 10 yr old son who was going into the children’s farm home, she was a single mom with three children who were unsafe due to the 10 yr old son’s behaviors. He was on a wait list on the farm home, the other children went to live with other family members and she was taking care of her son, she never had a child with mental health needs and was not sure what to do to support him. He went into the farm home. He already had stays in psych hospitalizations and challenges with DD services. She wanted to see her son but the farm home was not accustomed to having family members be a part of the process. She was approached by someone who asked her if she was interested in helping with planning for the Children’s system change initiative. She took her son out of the farm home after eight months, quit her job and took care of her son full time and got the doctor to write a letter to the state to get TANIF and food stamps to help take care of her son so she could also keep her daughter and son safe in her own home. During this time Tammy was strongly advocating for the family voice. She sat on the committee which started in the development of New Solutions. In order to get into NS the children have to have severe mental health needs. They developed a team off of the adult model. The mission of NS is to do this and keep the children in their own community. The children in MV Wrap don’t necessarily have mental health needs but have had multiple placements or are higher risk kids with no family to go back to. Some

kids step down into forever homes. This is driven with family voice and choice, there will be things that community members can't do but they listen to the family and let them pick which way they want to go. They are team based and work with the family to find out what is important to them. They don't make any plans without the family. Natural supports are a huge component. On top of being a family support partner Tammy is also a wrap around family support partner coach, she went to Colorado for training in the order to do high fidelity wrap around with the family support partners. The strength based approach at New Solutions helps focus on the individual's strengths and builds on them to meet the needs they may have. In all of the teams they start with asking what went well. A recent study shows that they experience reduced overall costs for higher levels of care relative to those without wraparound. The wraparound model is extremely effective with youth who won't participate in traditional mental health therapy, families coming together and making one plan and families who are very committed to their child/youth. The family decides who is going to be the decision maker. Tammy helps the families learn to advocate for themselves. One goal made today is they are going to focus on getting the parents refreshed and focus on their self care and help them feel stronger and more able. It is less effective when there is no family or natural supports especially in MV Wrap. A natural support can be anything and not talking about child welfare kids could mean the building a relationship with the people at the corner store or with a neighbor, a sports coach to mentor and support, youth groups with a paid mentor. When parents are struggling with their own mental health issues they really have to beef up the natural supports around them and it is also less effective when people come in and want a service but do not want to work in the wrap around program. When children entered the project only 14% are able to live with immediate family or relatives and not in a foster care setting, after the wraparound program 51% were living with family rather than in a therapeutic setting or residential treatment. Josh added that there is some research and opinion and likeness of thinking about at what point is the medication a support or robbing the person of their coping skills. Tammy stated that her son went from a pretty emotionless kid to a lot of emotion after being taken off some of his medication and better reaction time and can now play sports which is now another healthy outlet for him that has also helped build his self confidence

Tammy presented the outcome of a survey that they take for New Solutions and MV Wrap. The survey is asking whether or not they would recommend this agency to another person or not. All staff are moving toward tier two credentialing which is a high fidelity. A family can find MV WRAP if they are referred by case worker or New Solutions could be by, word of mouth, their therapist or their schools. They are currently serving 86 youth the youngest being a set of twins age 2 ½ who were in the program longer than usual due to developmental issues.

Patrick discussed the need for the public health and mental health subcommittees to meet. Rod added that some of the RFA's might be appropriate for the mental health advisory committee and that it is important for the HAB members to be aware of what is going on. Pam added that if we knew who wanted to volunteer for the PHAB visit they could discuss that amongst the public health advisory committee and also discuss the public health annual plan at the next meeting.

Michael Mann asked if we could have a future topic about healthy eating/food safety. Pam thought it would be a good topic to talk about after the first of the year. Patrick added that it would be good to discuss restaurant inspections/scores at some point as well.

The chair motioned to adjourn, members voted and approved.

HAB Meeting Adjourned.

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2013 Meeting Schedule:

January 15, 2013	June 18, 2013
February 19, 2013	September 17, 2013
March 19, 2013	October 15, 2013
April 16, 2013	November 19, 2013
May 21, 2013	December 17, 2013