

Region 4 Recovery and Wellness Minutes of Meeting Feb 4, 2016

12:09pm Called to Order

Present: Ken Williams, Ginny Gobel, Vanessa Johnson, Trini deMarco

Withdrawn: Michele McTiernan-Gleason

Absent: Terrence Sharrer, Monica Forbes?

Previous Minutes Accepted by all present

NEW VICE CHAIR NEEDED:

Ken: Michele has been absent for several meetings due to occupation in other areas so we are in a position to need to elect a new Vice Chair.

Vanessa: accepted nomination. She starts her internship at BH&W in April and will be able to attend both this committee and Youth and Provider Committee meetings as well as the greater Behavioral Health and Welfare Board meetings.

REACHING OUT TO YOUTH AND PROVIDER COMMITTEES:

Ginny will send a short letter about who we are and what we're working on in an attempt to establish a relationship. And Ginny will take over submitting the minutes of each meeting to the webmaster for Behavioral Health & Welfare website.

QUARTERLY REPORT TO BH&W BOARD:

Ken will report Feb 11th at 11 a.m. to greater board of BH&W

NEW MEMBER RECRUITMENT:

Vanessa has a couple of people in mind.

Vanessa will ask Jeanna Westcott (spelling?) for assistance in finding more members to bring skills to this committee.

Ginny and Ken will invite Alex Borman of the Idaho Veterans Wellness Center

GAPS AND NEEDS:

Ken requested **feedback by FEB 17th at the latest** re: the gaps and needs analysis which serves as a guide to the Idaho State Planning Council on Mental Health. He will forward it to Heather who is compiling it the complete gaps & needs analysis.

Ken: only Regions 1 & 5 reported needing both faster access to SOAR, but Reg 4 needs this also. And who can get the training and carry out the tasks? H&W ought to train para professional to do it. Idea: put on a free training for anyone so they can work with the people, NOW, and bill for it. Especially this training and umbrella supervision and billing system is needed for Peer Specialists.

RECOVERY COACHES GETTING PAID AND SUPERVISED:

Trini: where can someone currently practice as a Recovery Coach and be under an umbrella of billing and supervision?

Vanessa: Access Behavioral Health can hire recovery coaches, oversee the supervision and billing of a RC but that person must work enough hours to make it worth the administrative infrastructure . Unfortunately the billing code for Peer Specialists and Recovery Coaches is the SAME CODE – this will lead to confusion and lost data sometime in the future. Peer Spec. base rate starts at \$12/hr. SUDS case management can use Recovery Coach Experience to keep their SUDS experience hours up.

VANESSA'S ATTENDANCE AT UNITED WAY/ST LUKES ROUNDTABLE:

Jennifer "Y" (Yturriondobeitia) of St Lukes is interested in working on outreach into rural Idaho for mental health care. Vanessa will keep us informed from her presence at this continued round table.

Vanessa: had written some feedback to Ken (in blue) but forgot to send it to remainder of group. She will.

Vanessa: will pick 3 gaps and write a narrative of a real life situation that exemplifies this need where a Case Manager cannot effectively help a client: remarked that there is no billing code for case managers (??), that the Face-to-Face requirement gets in the way of connecting with a person when a phone call would be possible. Case mgrs. cannot advocate for clients (they can link a person to a new resource, but cannot advocate to help keep an existing resource that is threatened.)

Ken: Requested of Tammy Ray of Idaho Home Choice that she share the Quality of Life Survey and the model for analysis of this data from her program as it could be used as a template for the program we are proposing to start with grant funding. Tammy Ray responded that Ken would need to submit a form requesting that info. Ken will

Idaho Home Choice is a Demonstration Project: the money follows a person as they leave a hospital, and it's the function of the advocating case manager, on their behalf, to decide where the money is spent. There is a \$2,000 ceiling that may be spent at the discretion of the case manager within certain parameters to help build the scaffold of supportive environment around that person: EX: meals on wheels, home health care, essential furniture, equipment. After this money is spent the case mgr. should have connected the person to sustainable services.

THINGS TO CONSIDER WHEN WE DEVISE THE PROGRAM WE HOPE TO FUND:

Vanessa: EX: who will be eligible? People who have been incarcerated or in a state institution for mental illness, or a hospital – and for how long, how many repeat admissions/incarcerations? We'll want to provide a caveat not to exclude a person who is incarcerated ... will this mean if they are an out of state resident but were released into Idaho they are eligible because Idaho social services will be serving them Or consider the incarcerated person in another state who was an Idaho resident but was sent to an out of state prison

ASSIGNMENTS FOR NEXT TIME:

Vanessa: will bring a skeleton of a mission statement and group will work on it with her.

Vanessa will lead us through a Logic Model next time: a logic model has a timeline with tasks and their date of proposed accomplishment.

Vanessa: will pick 3 Gaps and write a narrative of a real life situation that exemplifies this need where a Case Manager cannot effectively help a client because of either a gap or an inefficiency in the system or a contradiction in the rules.

Ginny will post the last several minutes on BH& W website and write letter to Youth and Provider committees.

Ken will continue to pursue Quality of Life Survey tool and analysis method from Tammy Ray of Idaho Home Choice.

ALL will look for more members to join this committee

Meeting adjourned 1:36pm

Minutes recorded by Ginny Gobel