OzMHNetwork Meeting Summary

November 19, 2015

Lutheran Family and Children's Services, 3:30-5:30 pm

2130 N. Glenstone, Springfield

Co-chair Maggie Castrey called meeting to order at 3:30 p.m.

After self-introductions Maggie inquired whether everyone was receiving meeting notes and messages from MailChimp (Debora Biggs of NAMI, Laura of Lutheran Family Services, Crystal Brigman-Mahaney of MO Health Care for All said no)

Maggie asked participants to continue to consider how each person can contribute to OZMHN efforts.

Maggie announced that the Tulsa provider presentation will occur sometime in the spring possibly April to give the Network time to develop a focus and questions of the Tulsa representatives. The Network will need to raise about \$500 for travel expenses. At December meeting we will brainstorm what we hope to learn from them. Visit their website to see their range of services and advocacy, especially http://mhaok.org/what-we-do/housing/

Focus group committee chairs made brief reports and the group discussed Medicaid Managed Care; those discussions are included with the results in the November Discussion Groups below. Groups to date are: Affordable Housing, Education, Affordable Medications and Integrated Care.

Education Discussion Group

Participating: Tracy Keaton (Lakeland), Crystal Mahaney (MO Healthcare for All), Debora Biggs (NAMI), Betsy Curtis (Heartland Behavioral Health Services – Nevada), Lisa C. Hall (LWV), Joye Norris (LWV), Shawna Morris (Burrell), Laura Farmer (Lutheran Family & Child Services), Annie Busch (LWV), Maggie Castrey (LWV)

Medicaid Managed Care. Crystal Mahaney contacted Misty Snodgrass, who is the legislative liaison for the Coalition of Community Health Care Providers. She said, and Shawna Morris of Burrell agreed, that there is a six-month window of opportunity to influence the process, especially if patients and independent providers add their voices. NAMI, Burrell, Heartland (Nevada) and others may be able to connect us with patients. It is understood that there will be public hearings with RFP announcement in 2016 and managed care implementation in 2017. Marsha Haefner is chair of the legislature's Managed Care Task Force and seems open to suggestions. It would be prudent to look at what has happened in other states. Annie Busch suggested we try to connect with people in Missouri (I 70 corridor) who have already experienced managed care. Betsy Curtis, attending the Network from Heartland Behavioral

Health Services, said Nevada has been under managed care for years. She will make her CEO, Allison Harter, aware of the Network. Allison is a potential future speaker for the Network.

Possibility for MSU, LWV and/or OzMHN to co-sponsor with NAMI to bring in speaker John Shuchart, author of a book about eliminating stigma.

Cell Phone Testimony. The Network is encouraging people to make cell phone videos of stories of how managed Medicaid will impact patients. Network members are willing to make cell phone videos (also still photo slide show and written stories with pics) if we provide examples of how to do it. We will send instructions for how to script it, record, and obtain release forms. People should email videos and pics to League member (address to be provided) and we will upload to a YouTube channel. Stories need to tell how real vulnerable people are affected and how managed care needs to be implemented to protect them. Always lead with emotion of real vulnerable person. Save bookkeeping detail for later meeting or a letter.

Testimonies can be from provider perspectives (e.g. independent therapists, Burrell and other agencies) and patient perspectives through NAMI and other individuals (e.g. MO Health Care for All). Providers with Managed Care experience can provide examples from previous experience. There will be an opportunity to record stories at the next Network meeting or it can be done individually and sent to the League member who will be uploading them on YouTube.

For message development, Maggie will email drafts developed so far to Laura, Crystal, Betsy, Tracy, Lisa, Debora, Annie, Phyllis, and Barb at Advocacy center and ask for talking points, stories.

You can also find examples of Missouri Healthcare for All's story banking project and work http://mohealthcareforall.org/health-stories/ or their recently launched Instagram site: http://instagram.com/mohealthcareall

Stigma reduction programs in area include: Heartland's Respect Institute (Nevada), "Faces of Mental Illness," In Our Own Voices" (NAMI), Crisis Intervention Team (police), Mental Health First Aid (CPO).

Debora Biggs (NAMI) made us aware of MSU student groups: NAMI-MSU and Active Minds.

The NAMI service guide is ready to go to print. LWV is buying a half-page ad to support their effort. They will work on an online version that will be easy to update.

Formal Referral System Discussion Group

The referral group will be investigating products including "You Can Book It" software, currently used by MSU Outreach.

Integrated Care Discussion Group

This is a new interest group starting with this meeting. Paul Deal of MSU has an interest in MSU Care Clinic. He supervises students in the College of Health and Human Services, which is interdisciplinary. He is looking for opportunities to merge interests and resources – good for citizens, good for students, good for Network. The focus of Integrative Care is determining how to utilize resources in the best way. One roadblock is sharing information. In Tulsa, providers devised a uniform release of information form for all organizations to use. Burrell received a grant to provide primary care in conjunction with behavioral health care to mental health patients at Cox North Tower. The new integrative care clinic will open next year.

Participating: Lynda Nickle (OCH Integrated Care), Winnie Radier (OCH Integrated Care), Leslie Mullins (Mercy-Marian Center), Gail Cyr (Mercy-Marian Center), Joye Norris (LWV) Julie Macke (AIDS Project of the Ozarks), Paul Deal (MSU)

Education is needed for Network members and the public about what is involved. The group discussed a number of different models of integrated care at various agencies around the Ozarks. Those included the AIDS project of the Ozarks and the Ozarks Community Hospital. There also was discussion about the new clinic at Missouri State University, MSU Cares Clinic, which will have a FT Burrell Case Manager.

Winnie discussed the role she plays at OCH with a load of approximately 250 patients as a Nursing Care Manager. Burrell is operating a Health Care Home in the Cox North tower serving 1800 clients in a setting where Primary Care is being brought to Mental Health Services.

Special populations that prove difficult to serve include individuals with Development Disabilities. There are a number of rules and regulations that often prevent timely service for these individuals. There was optimism expressed that the DMH administrator, Mark Stringer, would be able to have some of those issues addressed.

There was overall agreement and consensus about the need for mental health services to be included in models of primary care service delivery. Various statistics regarding the prevalence of mental health disorders in patients in primary care were discussed. The potential and opportunity for the new MSU clinic also was addressed.

Karen Barrand, from OPH Behavioral Health Clinic, had voiced a desire for the creation of this interest group although she was not in attendance today.

Housing Discussion Group

Participating: Ciara Day (OCH Integrated Care), Lynda Nickle, LCSW (OCH Integrated Care), Carol Thompson (MO Courts), Annie Busch (LWV member, homeless court, school board), Gina Burroughs, MS (Burrell Asst. Admin. Transitions Housing Programs) Tony Wood, (Housing Action Board), Joe Costello, Ed.S. (OCH Behavioral Med.).

Update since October meeting: Joe Costello, affordable housing group, contacted 10 community providers who are willing to consult on the topic. Topics include: youth at risk, those aging out of services

Aims of the housing interest group include:

- developing a formal network of advocates of affordable, accessible and safe housing for at-risk persons with persistent mental illness and co-occurring disorders,
- identifying the most pressing community housing issues affecting persons with persistent mental illness and co-occurring disorders.

Announcements

- Due to previous commitment in the community, Joe will be on coordination/ facilitation hiatus from December 7 through March 14. Gina Burroughs and Ciara Day have agreed to co-facilitate and coordinate the housing interest group during that time.
- Joe will work on developing a housing network specific directory in the next few weeks.

Issues Discussed and Networking

The pressing issue that so many advocates have identified is the need for crisis housing for persons being discharged from area hospitals, those without disability or Medicaid, and those who cycle in and out of the Greene County jail. The revolving door at the jail is also in large part due to the lack of access to safe housing and other community mental health services.

- All present agreed with the basic goals of broadening the housing group network and identifying the most pressing housing issues faced by at risk persons with mental illness.
- Gina Burroughs and Ciara Day agreed to serve as the housing group facilitators and coordinators. Joe Costello will be able to resume assisting Gina and Ciara in early March 2016.
- Reaching out to other housing advocates such as One Door, Independent Living Center,
 Preferred Family Healthcare and Affordable Housing Commission. Jenny Reed will be in
 place at Rare Breed after Jan. 1st. Lynda Nickle suggested including her here. Karen
 McCully with APO housing would like notes from the housing group meetings and to be
 a part of any surveys conducted.
- Joe mentioned that he had spoken with Mike director at One Door earlier in the week and he said he would try to attend on 11/19/15 but was unable to make it. Annie Busch mentioned that Mike was stepping down from One Door soon.
- Some of the housing challenges facing persons with chronic mental illness and substance abuse issues include felony and drug convictions, bad credit, past evictions, bus routes, gathering necessary documentation, other difficulties and obstacles in to apply for housing programs, basic living skills. Annie made the point that lack of adequate transportation was an overarching issue.
- The transition of Bill's Place and closure of the Missouri Hotel is putting strain on an already patchy safety net. The city ordinance limiting a domicile to no more than two unrelated people, while rarely enforced, is also problematic.
- Carol Thompson suggested that we consider a dormitory or micro room hotel model
 with small studios for crisis housing. She pointed out that people with limited living skills
 don't immediately require a 2-bedroom apartment. We should consider coming at the
 problem of crisis mental health housing for all ages, albeit with respective differences
 taken into consideration. A cottage model was also suggested.

- The Bailey school and the CBC campus were suggested as possible sites for a crisis-housing center. It was mentioned that the Bailey school site was not set up for overnight lodging and that the current price of the CBC campus is \$9.5 million. It will be sold as a single property, not parceled out.
- Private payee services were discussed as a way to prevent vulnerable persons with mental illness from being taken advantage and helping them to learn budgeting. Gina Burroughs agreed that Burrell uses these services to good effect.

Funding

- Gina Burroughs and Tony Wood discussed the difficulties associated with HUD funded programs. Gina mentioned that the funding that allowed apartment programs like Catalpa and Clifton to integrated into the larger community. For instance no more than two Arc clients can rent properties on the same block.
- Ciara Day suggested a community-funded project similar to Rare Breed. Rare Breed contracted with the Wooten Co. and held leases an all apartments. The Rare Breed Case Managers were then required to make sure all program protocols were followed.
- Annie Busch mentioned funding from Springfield-Greene County and the Council of Churches with one church funding one apartment. Joe suggested that rather than trying to meet the need for crisis housing for all at risk populations that instead it might be better to select one high-risk population and build out from that once the effort was proven successful. Annie Busch and Ciara Day felt that the initial pilot should focus on homeless teens with mental health and substance abuse risk factors. Both felt that the funding base and appeal would be much broader.
- All agreed that it would be important to request numbers from One Door, the
 Affordable Housing Commission and other agencies to get a grasp on the scope of the
 need. The suggestion was also made that we should consider assessing the cost and
 effectiveness of different models across the nation.

Affordable Medications Discussion Group. No representative present in November **Reducing Paperwork Discussion Group.** No representative present in November

Next meeting December 17. Feel free to bring a Christmas goody to share if it's convenient. The meeting adjourned at 5:15.