



# Rolling Hills

## Community Services Region

Buena Vista \* Calhoun \* Carroll \* Cherokee \* Crawford \* Ida \* Sac

### Governance Board

September 27, 2017 – 2:00 p.m.

Sac City Community Center

### Meeting Minutes

**1) Call to Order – Chair, Rick Hecht**

**2) Roll Call of Counties – Introductions**

Buena Vista: Paul Merten

Calhoun: Scott Jacobs

Carroll: Neil Bock

Cherokee: Dennis Bush

Crawford: Cecil Blum

Ida: Creston Schubert

Sac: Rick Hecht

Regional Staff: Dawn Mentzer, CEO; Leisa Mayer, Lisa Bringle, Louise Galbraith, Coordinators; Rosie Stotts, Social Worker

Guests: Rich Ruggles, Pat Laursen, Melissa Drey, Doug Wilson, Jay Ricke, Renee Blume, Maggie Johnson, Dianna Ossman, Ashley Miller, Karla Manternach

**3) Minutes of Previous Meeting**

*A motion to approve the minutes of the previous meeting by Cecil Blum*

*Second by Neil Bock. Discussion: none. Motion carried unanimously*

**4) Approval of Agenda**

*Motion to approve the agenda as presented by Dennis Bush. Second by: Creston Schubert.*

*Discussion, Changes/additions: None. Motion carried unanimously*

**5) New Business**

**a) Hunzelman & Putzier Engagement Letter**

A copy of the letter was provided to the board for review. Hunzelman & Putzier's engagement letter estimates the cost for the FY'17 audit not to exceed.

*Motion to approve the Hunzelman & Putzier engagement letter by Creston Schubert. Second by Cecil Blum. Discussion: none. Motion carried unanimously*

## b) SF504 – Community Service Plan Development Update

### -Outcomes and Financial Forecast

Dawn Mentzer presented the Community Services Plan to meet the new DHS outcomes. Three meetings were held to compile the plan. Dawn reviewed the four outcomes including:

- **#1: The number of individuals who are in the emergency department over 24 hours because mental health, disability, or substance use disorder services are not available.**
  - Contract with Integrated Telehealth Partners
  - Marketing and promotion of Turning Point
- **#2: The number of individuals who are psychiatrically hospitalized 24 hours beyond the hospital determining them ready for discharge because community based mental health, disability, or substance use disorder services are not available.**
  - Possible development of a second transitional living home
  - Agency trainings in Trauma Informed Care
- **#3: The number of individuals with a mental illness, intellectual disability, or substance use disorder who could have been diverted or released from jail if appropriate community based services had been available.**
  - Track the number of people diverted from jail into the community
  - Use of Telehealth
  - Implementing mobile response
  - Crisis Intervention Training with law enforcement
- **#4: The number of individuals involuntarily discharged from their community based mental health, disability or substance use disorder provider without a new community based provider in place. This includes, individuals discharged to jail, homelessness, or hospital that are not returning to services with their current provider.**
  - I-Start service to work with providers on individuals with complex needs  
Proposal received from County Social Services Region
  - Increase peer support
  - Increase communication between the Region and MCO's

Reporting on the outcomes will start November 2017. Total projected cost of the plan is \$390,540 (not including an additional transitional living home).

Financial forecast: Mentzer presented several scenarios with different levy rates to provide options to reduce the regional fund balance as required:

- \$0 levy for one year would negate this plan for service development
- \$32.67 balance would deplete to a deficit by 2022
- \$32.67 with per capita adjustment to \$37.00 by 2022 would result in a deficit by 2023
- \$32.67 until 2021 to reduce balance to 25% and would need to increase to the maximum per capita of \$42.79 in 2022. This scenario would provide and 18% ending fund balance by 2024

Senate File 504 requires that by 12/1/2021, any funds over 25% ending balance must be attributed back to the member counties, who will then in turn reduce their FY'23 levies by an equal amount. Neil Bock commented that we may need to amend the 28E in case this happens so a mechanism is in place. It would need to be done by 2021-2022.

Mentzer recommends maintaining flexibility in the document and budgeting as to not lock the plan in place for the future.

Neil Bock suggested adding "services can be subject to change" to item #4 on page 12.

Bock would like statistics tracked on an unduplicated count to show one person who may be served three times, etc. as to not exaggerate the numbers.

*Dennis Bush made a motion to submit the Community Services Plan to DHS subject to the regional annual budget process and Annual Service and Budget Plan. Second by Paul Merten. Discussion: Neil Bock questioned if DHS requests changes will it have to be re-approved? Mentzer affirmed. Motion carried unanimously.*

**c) Legislative Forum**

Tentative dates of December 6 or 13, 2017, 10 a.m. to 12:00 p.m., were chosen for our annual forums with our area Legislators. Mentzer will send the dates to Jamie Cashman at ISAC to check his availability and the legislators.

**d) Integrated Telehealth Partners Regional Tele-Psychiatry Proposal - discussion**

The proposal is to fill the gap of regional hospitals that do not have tele-psychiatry services. Jay Ricke reported the direction the regions they contract with are going is that there is enough capacity (monthly cap) to cover with a funded contract rather than fee for service. Additional capacity can be used in other areas, such as crisis centers and so forth. There needs to be flexibility – if we under or over utilize the service.

A concern of the board is that there are hospitals that are paying for this service with another provider and the other hospitals are covered under the region, will they come to the region at some point.

Dennis Bush reports that the MH Commission has discussed this and DHS is having discussions and are close to having MCO's contracted (for crisis services with tele-psych rolled into it). Dawn has contacted the hospitals to see if they would be interested in partnering with region on the cost. The region could cover the proposal and the hospitals reimburse the region. Dawn would like to move forward with the service to help meet the outcomes reporting in November required by DHS.

*A motion by Cecil Blum to direct the CEO to work with Integrated Telehealth Partners in drafting an annual contract to bring to the board for consideration at the October meeting. Second by Neil Bock. Discussion: Scott Jacobs would like to know if the other hospitals that will not be*

*covered will be notified or contacted to be aware. Nothing is invoiced until the hospitals are live with the service. Implementation in the jails is much quicker. Vote: motion carried unanimously.*

**6) Old Business - None**

**7) Schedule next meeting – October 25, 2017 2:00 p.m.**

*Motion to adjourn at 3:30 pm by Neil Bock. Second by Cecil Blum. Meeting adjourned*