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| **MSHN Provider Advisory Committee (PAC)**  **3.8.2021 Meeting Agenda**  **Key Decisions and Required Action**  **DATE: 3.8.2021 – 1:00 – 3:00 p.m.**  **Zoom link ~** <https://us02web.zoom.us/j/86220640930?pwd=ZXhaSnNjOHdrdytDT2lGWkZHQ1g3QT09>  **Passcode:** 313647  **Meeting ID: 862 2064 0930**  **PURPOSE:** MSHN’s SUD Provider Advisory Committee is charged with serving in an advisory capacity to offer input to MSHN regarding SUD policies, procedures, strategic planning, monitoring and oversight processes, to assist MSHN with establishing and pursuing state and federal legislative, policy and regulatory goals, and to support MSHN’s focus on evidence-based, best practice service and delivery to persons served. | | | | | | | |
| **Attendance (Providers):** |  | | **MSHN Reps** | | **Other MSHN Staff** | | |
| Nichole Kosten (Chair)  Mary Ellen Johnson  Richard Simpson  Daphne Hamburg  Shannon Douglas | Matt Mitchell  Tonya Evans  Kim Thalison  Patti Tygre  Rebecca Steenbergh | | Jill Worden  Kate Flavin  Shannon Myers  Melissa Davis | | Dani Meier  Carolyn Tiffany  Joseph Sedlock  Sandy Gettel | | |
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| **AGENDA ITEM** | | **KEY DECISIONS** | **ACTION REQUIRED** | | | | |
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| **Introductions/Member Updates** | | Nicole Kosten (Arbor Circle) updated the group on a new program for MAT individuals to receive suboxone while in jail. Also starting more in person prevention groups through the court system in Newaygo.  Jill Worden (MSHN) informed the group that MSHN is preparing for the next Provider meeting, annual plans, and desk audits.  Rich Simpson updated the group that all three of their clinics were acquired by BHG Behavioral Health Group.  Patti Tygre (Community Mental Health) updated that they are still blocked from going to the Clinton Co. jails due to COVID-19. Doing telehealth in Eaton county, doing telehealth and in person with Clinton and Lansing outpatients. | By Whom: All |  | | By When: N/A |  |
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| **Review & Approve Previous Minutes and Agenda** | | 11.09.2020 Minutes were reviewed and approved | By Whom: All |  | | By When: N/A |  |
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| “COVID Gut Check:”   1. (Kim T.) One year into COVID pandemic w. over ½ a million U.S. deaths, sustained isolation, economic & school impacts, rising OD deaths, substance abuse, suicide, etc., how are folks doing on a personal and professional level? 2. (Kim T.) Are there system changes that might be "keepers" like telemed, distance meetings, pros and cons, possibly efficacy measures? 3. (Nicole) How do we help staff prepare to transition back to in-person settings, office-based services, schools, community settings, etc.? | | Nicole updated the group about an increase in overdoses since the one year of COVID-19. Typically, they have 1-2 but have had more than that since the start of the pandemic. Stop telehealth and started seeing those individuals in person. On a personal level, she felt it has been hard on her staff – COVID-19.  Sacred Heart has staff (clinicians) who are more comfortable with working remotely and not sure if they will be able to retain some clinicians if they must go back to face-to-face.  Odyssey House – has been back to face-to face for some months.  Nicole asked if MSHN could speak on if there was anything coming down the line regarding telehealth being an option for clinicians? Shannon shared the memo from MDHHS with guidance Expectation of the Provisions of Face-to-Face Services.  Face to face services must be provided unless they cannot be provided safely, or if the person specifically requests telehealth services; either instance should be well documented. Individuals can refuse face-to-face services and that should also be documented. If the provider denies face to face service provision when requested, strong documentation would be needed.  Decisions to provider telehealth services should be made in a person-centered way following the guidance from MDHHS and not using a one size fits all approach or clinician and/or agency preferences. |  |  | |  |  |
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| Inclusive Programming in rural settings (Nicole)  How we do we provide more inclusive services to LGBTQ & People of Color in rural community settings & all settings? | | Nicole: Arbor Circle has developed an agency wide program to address being anti-racist and anti-discriminatory. The aim is towards white clinicians for Newaygo to serve the population of people of color and the small population of LGBTQ.  High number of Spanish speaking people in Newaygo as well not being served. People of color or LGBTQ population is served is when they come through the court systems.  How can more outreach and be more inclusive?  Any struggles from other agencies?  Eaton County: similar struggles. Started a DEI committee to make it as diverse as possible and contracted with MSU to help facilitate.  Eaton County’s strategic plan will center around diversity, equity, and inclusion.  MSHN is looking at this regionally. There is data available – that is on-going. If a provider has questions specific to their agency or county data, they can request that from their treatment or prevention specialist.  Kim: holding monthly coalition meetings to discuss diversity, equity, and inclusion. Lost a coalition member due to the monthly conversations. | By Whom: |  | | By When: |  |
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| MSHN Updates (Nicole)   1. REMI changes? 2. Block grant/Finances? (Patti) 3. Staff recruitment | | **Block Grant:**  Nicole: if someone is block grant and asked to apply to Medicaid but did not apply after 30 days (refuses) – how should they handle that?  Kate asked Skye if an individual can refuse to apply? We cannot force them to apply but block grant is not a guarantee funding stream. Not MSHN’s responsibility to fund them indefinitely.  Come a time where it will no longer be funded.  Send emails to MSHN.  Patti: What is MSHN’s stand on Medicaid spend down?  Jill: Nicole, do they say why they do not want to apply for Medicaid or Health MI? Nicole – mother does not want to mess up her son’s insurance.  The other individual lives in another county (Kent) but wants services still in Newaygo.  **Staff Recruitment:**  Nicole met with an MSU intern who stated that recent graduates go right into private practice instead of doing an internship.  Shannon stated that in a meeting with residential providers last week, they use the personal college loan forgiveness opportunity on their website to help recruit.  The ability to show that an agency can and is willing to be flexible in offering remote workdays – should be promoted.  **Block Grant:**  Q: MSHN has the state legislation looking at how to address the loss of block grant funds?  Shannon – the Michigan House and Senate passed legislation, but it has not been signed by the governor. The supplemental budget highlights from the CMHA newsletter were shared with the group from 3/5/2021. | By Whom:  Kate Flavin/UM Department  Shannon will share (email) the document to the group, but it is on CMHA website. |  | | By When: Block Grant FAQ has been updated with responses as of 3/10/2021. |  |
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| SUD-PAC Operational Efficacy (All):  How is the SUD-PAC working and are there ways to increase engagement & efficacy? | | **Working:**  Jill asked if the group could see how to change the PAC to be used more for the benefit of the group and not just MSHN top heavy. MSHN wants to remain more of a resource to the group.  Kim liked that there is a group of diverse providers that can help with the feedback.  Patti appreciates that there was not a lot of reading materials from MSHN.  Jill asked how do we get the information down to the rest of the providers? Breakout sessions doing the Providers meetings – treatment/prevention breakout session.  Presentations for about 10 minutes doing the plenary part of the meeting.  **Not Working**:  Jill like the suggestion that was made regarding how the group would have appreciated it if MSHN had called an emergency meeting with them to discuss the block grant funding situation.  Jill asked how many like the reports that are included into the packet? Would it be helpful to create a sub-group of data geek and meet every other month? Nicole has an individual on her team that would be good at that. | By Whom: |  | | By When:  Next meeting date |  |
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|  | | Meeting adjourned at 2:15p | By Whom: Nicole Kosten |  | | By When: |  |
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