

Region IV Behavioral Health Board Meeting
May 14, 2015
Room 131, 1720 Westgate Drive, Boise, ID 83704

11:00 AM – 1:00 PM

Time	Agenda Item	Presenter	Notes
11:00-11:10	Welcome/call to order; Introductions; Approval of consent agenda (includes April minutes and reports attached to agenda)	Chris Saunders, Chair	
11:10-11:50	Executive committee report/ Old Business MOA, Statement of Work, Staffing Contract w/CDHD and Exe. Committee Recommendations – Ex Officio position on Board and Exec Committee for CDHD representative Budget Requests/Executive Committee Recommendations Children’s Mental Health Week (supplies) Ada County Recovery Center (bus passes)	Chris Saunders, Chair Jennifer Burlage, R4BH board, Gina Westcott, DHW Jennifer Burlage, Treasurer	
11:50-12:10	Board Orientation Process – draft 1 Committee Requests Providers Committee Community Recovery/Wellness Committee	Laura Thomas Laura Thomas Amy Jeppesen Monica Forbes	
12:10-12:20	Youth Behavioral Health Committee Board Direction for committee work	Amy Jeppesen Steve Graci	
12:20-12:35	Community Crisis Center – Allumbaugh House	Gina Westcott	
12:35 :12:45	Optum Update postponed to June meeting per Optum		
12:45 -100:	Announcements Next meeting agenda items Wrap-up	All	

June 11, 2015 – Board meeting 11 to 1 pm Room 131 Region 4 offices, 1720 Westgate Drive

**Welcome to
Region 4
Behavioral Health Board**
May 14, 2015

Call to Order

- Welcome
- Introductions
- Approval of consent agenda – approves agenda for today, draft minutes, and accepts standing reports. Agenda additions need to conform to open meeting law requirements.

Mission and Vision R4 BH Board

Mission	Vision
<ul style="list-style-type: none">• We improve behavioral health by developing solutions with our communities.	<ul style="list-style-type: none">• An integrated health system accessible to everyone.

Values

- Respect – We value all perspectives.
- Progressive – We move forward.
- Integrity – We do the right thing.
- Innovative - We are open to new ideas.
- Transparent – We clearly show what we do and why we do it.

Old Business/Exec. Committee

- Update on organizational structure working group
- Contract
- MOA
- Statement (Scope) of Work
- Ex Officio appointment

Old Business, con't

- Budget Update Report included in meeting documents (accepted with consent agenda motion)
- Motion(s) to approve expenses
 - First payment of contract
 - CMH week – supplies and videographer
 - Recovery Center support – bus passes

New Business

- Board Orientation
 - First draft
 - Any changes?
 - If none, is there a motion to approve?
 - Completes items required to submit application to State Planning Council

New Business

- Committee Requests
- Providers Committee
- Community Recovery/Wellness Committee

New Business

- Community Crisis Center – Allumbaugh House

New Business

- Behavioral Health Youth Committee
- Discussion on Board Direction for Committee work
- Report included in meeting documents (accepted with consent agenda motion)

Optum Quarterly Update

- Moved to June Meeting per Optum request

Announcements Agenda Items and Requests

- Announcements
- Agenda items, Next meeting requests

Region 4 Executive Committee meeting minutes May 7, 1:30 to 3:15 pm

EC members present: Chris Saunders, Jessica Wojcik, Sabrina Swope, Jennifer Burlage and Jeremy Clark (by phone)

Also present: Gina Westcott and Laura Thomas

The meeting was called to order at 1:40 p.m. by Chris Saunders. The committee members reviewed and discussed the contract for the regional board that would be executed between the Department of Health and Welfare and Central District Health Department. The first 8 pages are standard contract language; the committee focused on the sections detailing the scope of work, performance matrix, cost/billing procedure and reports. The contract is set up to start May 18, 2015. Jessica Wojcik made a motion to approve the contract start date of May 18, 2015; motion was seconded and passed unanimously. The MOA will be worked on by the committee and provided to the full board at the May 14 meeting.

Budget discussion: A request for videotape funding, \$950 total, from the Youth Behavioral Health Committee was reviewed. The May 8 presentations on the Jeff D Law Suit Panel and Childhood Trauma are the topics and videotapes would allow for copies to be distributed after the events. The videographer has contracted on projects for DHW and can directly bill the regional board. Jennifer Burlage made a motion to fund the videographer for the events; motion was seconded and passed unanimously.

The logistics of funding any equipment for the PEER Wellness Center would be complicated and may not be feasible before June when invoices need to be finalized for the current fiscal year. Jessica made a motion to approve \$500 in bus pass purchases to support transportation needs for individuals accessing the Recovery Center. Motion was seconded and passed unanimously.

With the initiation of the contract with Central District Health Department starting May 18, 2015, the first payment of \$4166.67 would come from the current year balance. Other outstanding or approved expenses include ICADD (\$5045), CMH supplies (less than \$500), possible board member mileage for May and June (less than \$100), videographer (\$950) and bus passes (\$500) would leave a budget balance of approximately \$750.

The requests for two new committees, Recovery oriented Services and Providers were recommended for board approval at the May 14 meeting.

The board member orientation process, the last item needed prior to submitting an application to the State Planning Council was discussed. No changes were noted and the committee's recommendation is for full board approval at the May 14 meeting.

Meeting concluded at 3:15 p.m.

Memorandum of Agreement

Objective

The ultimate goal for the development of a strong, mutual relationship among the Regional Behavioral Health Board (RBHB), the Public Health District (PH) and the Department of Health and Welfare, Division of Behavioral Health (DBH) is to better serve all of our customers in need of behavioral health services. We clearly understand that each of our client bases, as well as those we mutually serve, will benefit when we share and combine our expertise. As more attention is given to addressing patients in a holistic manner, this effort becomes essential, both because of specific requirements under the Affordable Care Act, and because it is what is best for our customers.

Background

Through this MOA, the RBHB, the PH and the DBH enter into a joint agreement that will support the establishment, maintenance, and the execution of powers and duties under Idaho Statute 39-3132, 39-3135 and 39-3136. This agreement seeks to outline the roles and responsibilities that are required of the RBHB to demonstrate readiness to accept responsibility for Community Family Support and Recovery Support Services as defined in 39-3135. The DBH seeks to support the RBHB's readiness, duties and powers by defining its role and responsibilities under this agreement in the promotion of better outcomes for Behavioral Health. The PH seeks to promote Healthy People in Healthy Communities and endeavors to partner with the RBHB to promote, protect and preserve health in our communities. As stated in section XV, subsection B of the contract between the State of Idaho Department of Health and Welfare and the Central District Health Department, "the Department of the Contractor may cancel the contract at any time, with or without cause, upon thirty (30) calendar days written notice to the other party specifying the date of termination."

Mission

The mission of the RBHB is to improve behavioral health by developing solutions with our communities

Vision

The vision of the RBHB is an integrated health system accessible to everyone

Values

Respect – We value all perspectives

Progressive – We move forward

Integrity – We do the right thing

Innovative – We are open to new ideas

Transparent – We clearly show what we do and why we do it

Roles and Responsibilities

1. PH Responsibilities:

- A. PH will comply with the rules, regulations and policies as outlined by the DBH and rules, regulations and policies pertaining to RBHB as outlined in Idaho Statutes 39-3132, 39-3133, 39-3134, and 39-3135.
- B. PH shall ensure that procedural safeguards are followed in confidentiality requirements according to IDAPA 16.05.01, Use and Disclosure of Department Records.
- C. PH agrees to support the goals and objectives of the DBH in the establishment of readiness and maintenance of RBHBs under 39-3132.
- D. PH will manage personnel, operational and support tasks as stated in the Scope of Work, under the DBH contract.
- E. PH will not be responsible for services that are not funded or outlined within the Scope of Work under contract with the DBH.
- F. PH will participate with the RBHB in the budget development process.
- G. PH will participate with the RBHB in identifying service gaps and contract opportunities.
- H. PH will provide the RBHB with assistance in the development of the Gaps and Needs Analysis report to the State Behavioral Health Planning Council (SBHPC).
- I. PH will collaborate on joint projects or initiatives that fit within the scope of the RBHB.
- J. PH will provide behavioral health integration expertise and resources from the regional Behavioral Health Board, where available, and/or through the IDHW Division of Behavioral Health, IHC Behavioral Health Integration Workgroup, or existing resources in the Regional Collaborative (RC).
- K. PH agrees to meet bi-annually with the RBHB and DBH to ensure ongoing alignment and compliance with this MOA.

2. RBHB Responsibilities:

- A. RBHB will advise the SBHPC on behavioral health needs for adults and children within region/district.
- B. RBHB will advise the SBHPC on progress, problems and proposed projects of the regional/district service.

- C. RBHB will promote improvements in the delivery of behavioral health services and coordinate and exchange information regarding behavioral health services in the region/district.
- D. RBHB will develop an annual Gaps and Needs Analysis assessment of behavioral health services for the region/district.
- E. RBHB will assist the SBHPC with planning for service improvements.
- F. RBHB will report annually to the SBHPC, the DBH and PH the progress being made toward building a comprehensive community family support and recovery support system that will include performance and outcome data.
- G. RBHB will establish and maintain a children's mental health subcommittee.
- H. RBHB will work actively to build and support community support and recovery support services within the region/district.
- I. RBHB will follow all Idaho Code requirements for board membership as stated in 39-3134.
- J. RBHB will meet bi-annually with PH and DBH to ensure ongoing alignment and compliance with this MOA.
- K. RBHB will participate as a part of the PH Regional Collaborative stakeholder group to act as a behavioral health consultant and advisory entity on the role of behavioral health in the community and in patient centered medical homes.

3. DBH Responsibilities:

- A. DBH will commit to annual funding of \$50,000 for the life of the contract which will be established at 4 year intervals.
- B. DBH will provide federal grant writing support for efforts agreed upon by the RBHB and the PH.
- C. DBH will write and submit those grants that are agreed to by the RBHB and PH that can only be submitted through the DBH.
- D. DBH will meet bi-annually with the RBHB and PH to ensure ongoing alignment and compliance with this MOA.

Treasurer Report and Budget Summary

Date	Amount	Third	25918	39918	72918	Proof
8/20/2014	\$ 36.13	\$ 12.04	\$ 12.04	\$ 12.04	\$ 12.05	\$ 36.13
8/27/2014	\$ 43.94	\$ 14.65	\$ 14.65	\$ 14.65	\$ 14.64	\$ 43.94
8/27/2014	\$ 24.46	\$ 8.15	\$ 8.15	\$ 8.15	\$ 8.16	\$ 24.46
8/27/2014	\$ 33.94	\$ 11.31	\$ 11.31	\$ 11.32	\$ 11.31	\$ 33.94
12/9/2014	\$10.00	\$ 3.33	\$ 3.33	\$ 3.33	\$ 3.34	\$ 10.00
12/11/2014	\$ 18.39	\$ 6.13	\$ 6.13	\$ 6.13	\$ 6.13	\$ 18.39
	\$ 116.51	\$ 38.84	\$ 38.84	\$ 38.83	\$ 38.84	\$ 116.51
12/11/2014	\$ 1.74	\$ 0.58	\$ 0.58	\$ 0.58	\$ 0.58	\$ 1.74
	\$ 11.14	\$ 3.71	\$ 3.72	\$ 3.72	\$ 3.70	\$ 11.14
Mileage 2 Mt	\$ 97.68	\$ 32.56	\$ 32.56	\$ 32.56	\$ 32.56	\$ 97.68
3 17 15	\$ 48.84	\$ 16.28	\$ 16.28	\$ 16.28	\$ 16.28	\$ 48.84
3 17 15	\$ 7.00	\$ 2.33	\$ 2.34	\$ 2.33	\$ 2.33	\$ 7.00
CRAFT	\$ 2,000.00	\$ 666.67	\$ 666.67	\$ 666.66	\$ 666.67	\$ 2,000.00
4 9 15 meal	\$ 147.83	\$ 49.28	\$ 49.27	\$ 49.29	\$ 49.27	\$ 147.83
Raney	\$ 500.00	\$ 166.67	\$ 166.66	\$ 166.67	\$ 166.67	\$ 500.00
ICADD	\$ 4,995.00					
ICADD fee	\$ 50.00					
CMH	\$ 500.00					
1st Month	\$ 4,166.67					
videographer	\$ 950.00					
Bus Passes	\$ 500.00					
total to date	\$ 14,259.27		\$1,032.53	\$ 1,032.54	\$ 1,032.53	\$ 3,097.60
balance	\$ 740.73					

Draft 5/4/15

Board Orientation Procedure for Region 4 Behavioral Health Board

After appointment to the Region 4 Behavioral Health Board, each board member will be provided with copies of the following items for review, and where indicated, signature and return.

1. Mission Statement, Vision, and Values of the Region 4 Behavioral Health Board
2. Bylaws with approved Policies and Procedures for Region 4 Behavioral Health Board
3. Board Roster including terms of appointment
4. Code of Conduct; *signed form required*
5. Conflict of Interest Statement; *signed form required* – this form may require updating throughout the term of a board member as affiliations and work relationships change. It is the responsibility of the board member to advise the board chair and support staff on changes and update the form as needed.
6. Idaho Open Meeting Law summary document
7. Roberts Rules of Order (simplified)
8. Reimbursement request forms for mileage and other expenses with prior board approval. All expenses for board members must have prior approval before submission. Individual board members cannot obligate the board to any financial contracts.
9. Additional items as needed as the work of the board expands.



PEER wellness center

-A Community for Recovery

April 27, 2015

PEER Wellness Center, Inc. Status Update ~~& Proposal~~

It is our pleasure to provide a project status update regarding PEER Wellness Center – Ada County's recovery community center. Since December, 2014, the current planning committee has been meeting every two weeks and working hard in between those meetings to make this recovery community center a reality.

In January, the committee began meeting stakeholders in the community and created sub-committees that addressed Public Relations, Fundraising, Programs & Services, and Business Development. A name was created and voted on and the project became PEER Wellness Center – A Community for Recovery. In February, a board of directors was formed and Articles of Incorporation were filed with the Idaho Secretary of State. An EIN was obtained from the IRS and the development of PEER Wellness Center's business plan began. Simultaneously, committee members were busily making contact with community stakeholders and entities to form relationships and partnerships. A virtual office and phone number was procured and the PEER Wellness Center website was started. In-kind and cash donations began coming in to help make PEER Wellness Center a success. The anti-stigma campaign was implemented to address NIMBY issues and was well received by the community. By March of 2015, representatives of PEER Wellness Center had met with or made contact with over 50 community stakeholders and our Facebook and Twitter accounts were opened. A telephone conference call was held with Phil Valentine of CCAR. Fliers and brochures blanketed Ada County announcing our presence and requesting volunteers. In April of 2015, PEER Wellness Center filed for and obtained 501(c)3 status from the IRS and we were offered reduced rent on a 1524 square foot office space on Orchard Street. We also visited USARA – Utah's recovery community center. We joined Faces and Voices of Recovery and are exploring the possibility of creating an Idaho Chapter for the Association of Recovery Community Organizations. This may take place through Recovery Idaho and our relationship with this organization is strong.

To date, we have received donations from and have built community partnerships with 3 Oaks Ministries, Boise Ignite, SHIP, SPAN of Idaho, DrugFreeIdaho, SMART Recovery, Ashwood Recovery, NAMI, Terry Reilly Health Services, THRIVE, Boise State University, 3 Grotto Groups, Boise's Creative Arts Center, Idaho Department of Corrections, Deseret Industries, Goodwill/Easter Seals, Intermountain Hospital, Pioneer Title, and Banner Bank. PEER Wellness Center, Inc. has received over \$14,000 of in-kind donations, and raised \$34,000 in cash and monthly sponsorships to cover monthly operating and program expenses.

The Youth Behavioral Committee Quarterly Report May 5, 2015

Quarterly report to Region 4 Behavioral Health Board.

The committee has met 3 times since its organization. In the first meeting the committee discussed the bi-laws, structure and expectations of group members. The committee completed a needs and gaps analyses and provided this information back to the Region 4 Behavioral Health Board.

In the 2nd meeting the committee followed up on the needs and gaps analysis. The committee also discussed creating a vision and mission for the committee and identifying 3 goals to work on over the next year for the committee. The committee addressed the importance of combining mental health and substance abuse issues and addressing both. The committee spent time reviewing and planning for the upcoming Children's Mental Health week.

In the 3rd meeting the committee reviewed how the children's mental health awareness week was going. Gathered and created a format to provide thoughts and outcomes to the Region 4 Behavioral Health board. Discussed coming up with goals for this year and funding. Committee decided to pursue funding from the board to video the Friday presentations to be able to provide out to others. The Juvenile Justice Commission is also interested in matching up to \$4000 if the committee can secure \$4000 funding from the Region 4 Behavioral Health Board. The committee agreed to approach the board for \$4000 in funding so that we can pursue the match funding from the Juvenile Justice Commission.

Overview of Children's Mental health awareness week:

May 2nd Resource Fair at Kids Festival – 11 organizations that bought tables to present information. Appeared to be fairly successful attendance was very good.

Pro's.

1. Attendance was a lot higher. Lots of people showed up for the kids festival
2. Seemed good to combine events
3. Tables had games and prizes
4. Good exposure and reducing stigma

Con's

1. A lot of organizations that had been a part of the past did not join this time.
2. Some organizations from in the past paid the \$500 instead of paying the \$100 through Health and Welfare.
3. Not all 1,000 people came down through children's mental health tables.
4. Maybe too many games and people competing for attention maybe combine some people.

Things we learned.

1. Great to work with another entity who could set up.
2. Using more collaboration with games maybe have 2-3 people at the tables that would maximize appearance.
3. Send out notifications early for people for tables.
4. Start organizing earlier.
5. Work with other groups to be a part of and part of organization.

- a. Maybe use Associations mailing lists
- b. Engage other associations.

May 5th 2015 Children Mental Health Table in Region 4 Lobby

Approximately 70 individuals gain information from Region 4 CMH staff at this event.

May 8th 2015 Friday agenda.

1. 1:00pm A Round Table Discussion regarding the Jeff D lawsuit Westgate – Ross Edmonds, Carole Dixon, Jennifer Griffins, Howie Beladof, Melinda Sonnon
 - a. **Number of people attended at Region 4 Offices** 40+ _____
2. 2:30 pm Childhood Trauma: Outcomes and Consequences; Treatment Advances
 - a. **Number of People attended at Region 4 offices** 40+ _____

Ideas for next year:

1. Awareness walk to kick off?
2. Walk to raise money for training events.
3. Video for presentations to be released to others.
4. Find a way to move presentations to webinar.