

**Final Minutes Before Approval
CSAA Meeting Minutes
August 25, 2006**

Attendance

Members Present

Tom Peluso, Kathleen Hartman, Dan Aune, Marlene O'Connell, Kathleen Mae Nelson, Jeffrey Krott, Anita Roessmann, Mike McLaughlin, Vernon Bishop, Joe Moll, Dave Young, Lenore Stiffarm

Members Excused

Kris Denton, Ken Weber, Mike Murray

Members Absent

Gary Mihelish, Aart Dolman, Jim Fitzgerald, Jennifer Tuthill, Martha Bottelson, Molly Protheroe

Guests: Stephanie Nugent (LAC, WRAP, NAMI), Joyce DeCunzo (DPHHS), Dennis Cox (AMDD), Jane Wilson (AMDD), Rita Pickering (CMHB)

Opening

Chairman Tom Peluso called the meeting to order at 10:15 a.m. A quorum was present. Introductions were made.

Treasurer's Report

Treasurer Mike McLaughlin presented the treasurer's report (attached). Ellen Cox has been hired, under contract, as the CSAA recording secretary. Mike will oversee the details of her hiring.

Minutes

Corrections were made to the previous minutes:

A motion was made to approve the minutes as corrected. Seconded and passed.

Old Business

Business Cards--Molly Protherau was not present to report on this item. Vernon Bishop will check prices in Great Falls. Approximately 12 sets of business cards will be needed for board members who do not currently have them.

Lodging and ID Cards--Jane Wilson reported that they are not completed.

Agenda Review

-Chairman Peluso noted that he seldom gets responses to e-mails on agenda related topics.

-Report on Crisis and Response--Roger Anderson will be replacing David Young.

-Board of Visitors: Tom will report in place of Gene Hare.

-Prevalence Study: There will be no report as Bobbi Remmer is absent.

-Jane Wilson--SAA needs to discuss the need for seats on the CSAA Board for Highline LACs coming on board.

Comments:

-There is a need for adequate time for committee meetings

-There is a need for time for agenda building at the end of each CSAA meeting

Teaching Moment

Chairman Peluso reminded the board that as members we are in a conversation with our communities rather than reporting to them. We are collaborators with one another on the board and with our communities. What is our purpose as board members? To speak for those who perhaps can not speak for themselves.

AMDD and DOD: Beginning a Journey of Collaboration, Deb Matteucci, Presenter

Deb passed out Overview Behavioral Health Program Facilitator- "Boundary Spanner," which is a document over viewing the care of of people in the criminal justice, mental health, and substance abuse treatment systems in other states. She pointed out the difficulties involved with linking the various agencies involved in a way that will provide consistency of care in all settings. Currently the system is fragmented and records are not easily transferred or accessed by the involved entities. Each entity must start over when a person comes into its care.

Deb views her job as being an "unfragmentor," an eliminator of "starting over" each time a person moves to a different corrections settings. Her plan will function for all correctional settings and for both adults and juveniles. It will be documented in a manner that networks all involved parties. Her current activity is to inventory what is in place right now. She wants to get out and talk to stake holders and include their input as this framework grows.

Deb explained the Sequential Intercept Model which is a model for moving people our of the corrections system as quickly as possible.

Comments/Discussion:

- Concern about Native American population: health records are not easily inaccessible to DOC because they are in the federal rather than the state system, tribe identity is essential for reentry programs, consistency of birth and death records is needed especially when death is by suicide.
- Program is being developed on the assumption that all people who become part of the criminal justice system have co-occurring illnesses.
- Is the Four Quadrant model of co-occurring illness being used?
- Current problem of persons with mental illness not being identified as they enter the criminal justice system:
- Some do not want to be identified as mentally ill
- There is a problem with identified mentally ill defendants being given longer sentences to a hospital setting than they would receive in prison if they were not identified as mentally ill
- Mental illness awareness education for criminal justice personnel needed
- Ongoing care, housing, and work opportunities need to prevent recidivism
- How big is the staff working on this? Deb is IT; it's a staff of one, but she is enlisting the help of many.

Dave Young will write a draft letter for Tom's signature to Deb supporting this project with copies to Joyce DeCunzo (AMDD) and Gary Hamel (DOC).

Teaching Moment

As the CSAA, who are we? What power do we have? Really, none. We are servants. We need to come together and then, rather than report to our communities, we need to go home and tell our stories. Where do we tell them? --schools, churches, newspapers, law enforcement, corrections community, first responders, employers, business community, LAC...

Have your LAC send a letter to Joyce DeCunzo at the MSDD supporting 72 hour presumptive disability. The CSAA has done that, but the LACs need to do it, too.

Comments:

-It would be helpful if the board members were reminded of things they can/should be doing in their communities.

New Freedom Commission Report-Transforming Mental Health Care in Montana; Measuring and Meeting the (unmet) Need.

Joyce DeCunzo shared about the Visioning Session in Whitefish. Although nothing new came out of the session, what is already being done or planned was formatted using the Freedom Commission guidelines.

Other comments: Mental Health Service Plan (MHSP) funding is down; concurrently the state hospital population is up. Crisis services and 72 hour presumptability are necessary to fill the gap.

There will not be enough funding to approve all the mental health needs and budget requests, but Joyce would like the CSAA to support the identified most crucial need at this time, the need that has been submitted to the governor for funding: moneys to pay hospitals for 72 hour crisis care, and provision for 24 hour televideo support to doctors in smaller communities that do not have psychiatric care. She does not discourage supporters from mentioning other areas of need, but rather to prioritize the items mentioned. The current budget is based on non-passage of CI 197; nothing will be firmed up until after the elections in November.

Comments:

- Use graphics in presentation materials.
- The retreat had a positive influence on the governor's office personnel.
- There is a need for "telling the same story."

Center For Mental Health Peer Support

Kathleen Hartman and Mike McLaughlin reported. Kathleen has been hired as director of Center for Mental Health Peer Support in Great Falls. Kathleen will serve as a link between consumers and survivors of mental illness, and the general public. The model for the program is based on the work of Laurie and Gene Ashcraft (META Services) from Arizona.

The Center will offer 10-day education and training to prospective peer participants, after which their participation in the program will be decided.

Vision: Consumer survivors will use their skills to help others

Hope: This will become a model used statewide.

Contact: peersupport @center4mh.org/406-791-9518

Discussion on Status of 72 HPE and MHSP Funding

Because providers can no longer afford services, the counties are feeling the impact. We are moving to a crisis based system as funding drops.

Gary Mihelish's message, via Tom: People who are at the Montana State Hospital who are Mental Health Service Plan (MHSP) participants- (people who are not Medicaid eligible because they have too much money) are not prescribed the newer generation medications because they will not be able to afford them when they are released. The present cap for MHSP meds is \$425/month.

Conversation With Our Partners

Rita Pickering presented. There are functioning Kids Management Authorities (KMAs) across the state. Local Advisory Councils (LACs) are funded, KMAs are not. Disconnects between the child and adult services are being determined.

Final Business

A motion was made: CSAA will pay for expenses to attend CSAA meetings for a representative from each new LAC that comes on line. Seconded and passed.

A motion was made to amend the calendar, rescheduling the September 9, 2006, Congress meeting for Saturday, December 2, 2006. Seconded and passed.

Numerous CSAA board members made commitments to send letters to Joyce DeCunzo, Joan Myles (Director of Montana DPHHS), SJ41 Committee, and Anna Whiting Sorrell (Freedom Committee), to support the Governor's mental health budget.

Committee Meetings

Minutes from Business and Finance, Communications and Development, and Rural Mental Health, and Task Force for Bi Annual Report will be provided by each committee.