**AGENDA for Hennepin County AMHI Meeting - Minutes**

**May 14, 2020**

Microsoft Teams Virtual Meeting6125 Shingle Creek Parkway
Brooklyn Center, MN 554306125 Shingle Creek Parkway
Brooklyn Center, MN 55430
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**2:30- 4:00 pm**

**Present:** Leah Kaiser, Martin Marty, Heather Bjork, Todd Heintz, Allan Henden, Jennifer O’Brien, Toijya Holyfield, Kim Strand , Nancy Hoyt Taff , Crissy Kuspa , Rosie Kolman-Stich , Jolene Peterson , Michelle Wincell O'Leary , Ryan Sandquist , Kristine Brink , Cindy Moe, Amanda McDonald , EJ Dean , Savannah Steele , Anne Mornes , Barbara Tisdle , Jodi Nottger , Robert Reedy , Anne Boone , Ellie Skelton , Ally Beckman , Mika Baer , BJ Mcelrath and Christine Johnson

1. Hennepin County Human Services & Behavioral Health Response to COVID Pandemic

Leah Kaiser, Senior Departmental Administrator, Behavioral Health

Leah provided an update on what is happening within and around the county related to pandemic response. She discussed the AMHI grant application and reported that a survey will be sent to stakeholders to identify needs and barriers.

1. HC Adult Mental Health Local Advisory Council (LAC) Update

Savannah Steele and Joe Musco – LAC co-chairs

Savannah described living with mental illness during the pandemic; the challenges, opportunities, resources, and needs for support.

1.

Abigail Franklin, DHS Behavioral Health Division, Community Capacity Building Team

Abby discussed waivers issued by the state during the pandemic. The AMHI reform project continues to move forward.

1. 2021-22 AMHI Application and Survey

Martin Marty and ToiJya Holyfield – Hennepin County Behavioral Health

Marty described how AMHI funds are currently spent.

Marty asked for input on questions on the application. A survey will be sent.

1. Updates from Community Providers, Health Plans & County – Response to COVID-19 3:15 – 4:00

Lisa Childs, LAC, described the challenges of persons with mental illness during the pandemic. She expressed appreciation of service providers working with people during this time. Technology is a need long-term.

Amanda McDonald, CVT: providing TCM via zoom and phone. No shows are low. Opportunities to be more creative in connecting with persons served.

Anne Boone, Touchstone: Technology is a barrier. Providing mobile phones to some persons. Some persons struggle to maintain mobile phone. IRTS, concern is capacity; need extra space in case of virus. Challenge to encourage residents to comply with social distancing and other precautions.

Robert Reedy, Rise: Busy. Using multiple tools for outreach. Participation rate increasing. Some are losing employment, layoffs and furloughs, need assistance filing for unemployment benefits.

Barbara Tisdle, MHR: Using technology to serve persons. Providing lunches. Some lack access to technology. Issues with persons being referred who are committed and discharged from hospital to community homeless and without phone. Housing team continues to assist.

BJ McElrath, Avivo: Using telehealth; hoping it will continue to be an option in the future. It is working well. Increasing connection with persons served. Decrease in no shows. Trying to provide technology. Developing safety protocols for when persons return in person.

Cindy Moe, Medica: SNBC access via telehealth, and working with providers on technology.

Laine Epp, JFCS: Encouraged by engagement, reaching 86% of persons receiving TCM. Some challenges with technology. PRISM food shelf, in JFCS building, are providing a lot of food, drive up. JFCS can deliver food via senior transportation, in W and NW suburbs.

Ellie Skelton, Touchstone: Getting masks, 1000+ donated. 2 for each person served. Staff, too.

Gloves, sanitizer, face shields. Working with MN Dept of Health. May get more testing on site.

Received PPP funds from SBA, federal government.

Jodi Nottger, People Incorporated: Closed CSP March 18, furloughed staff. Managing via calls. Technology is a big issue. Meeting in person when necessary. Looking forward to working in person with persons.

Jolene Peterson, Vail: TCM trying to accept referrals. Telehealth, technology challenges. Fundraising campaign for technology for persons served. Teams are well connected. Club house is creative, virtual. Mask campaign, volunteers making them, giving to club house persons. Housing team is working. Received PPP funds from SBA.

Kristine Brink, People Incorporated: All staff work at home. Opportunity to improve engagement with persons served who like the phone calls. Team effort to get intake information. Taking extra persons needing TCM. Some persons are getting housed. Half hour Weds. In person meetings.

Ryan Sandquist, People Incorporated: Deaf and hard of hearing TCM, lull in service due to ILS not available at start of pandemic response. Technology more challenging.

Mika Baer, UCare: Working with providers to stay abreast of changes. Provided some emergency funds to some organizations, e.g. warm line, Wellness in the Woods.

Ashley Trepp, Tasks Unlimited: TCM doing well. Connecting via phone. Biggest need is staffing, two positions open, interviewing. Lodge and Jobs, staff are creative to help persons served work and stay safe. Many are essential workers. Have masks, thermometers, sanitizer, getting testing. Got PPP loan from SBA. Staff and persons served are responding well. People want human contact, trying to provide peer support creatively.

Sally Kratz, MHC: Everyone is doing good work, thank you !

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Mission of Adult Mental Health Initiatives (DHS AMHI Reform Workgroup – spring 2017)

AMHI’s are dedicated to improving the mental health of their community, through intentional planning and partnerships across a region grounded in the following principles:

* Lived experience with mental illness guides the governance and services
* Brings together people with lived experience, providers, counties, tribes, MCOs and DHS to fully utilize all available resources to meet regional needs.
* Develops and provides an array of person-centered services that builds on personal and cultural strengths.
* Utilizes a data driven model to evaluate the impact of services on health outcomes.
* Assures access, early intervention, coordination and application of resources through creative partnerships.

Questions about the HC AMHI?

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