Kent County Family & Children's Coordinating Council



KCFCCC Meeting Minutes

November 1, 2016 12:00pm – 1:30pm Kent County Administration Room 311

Members/Alternates

Present: Adam London, Melanie Beelen, Wayman Britt, Candace Cowling,

Lynne Ferrell, Judge Patti Gardner, Kristen Gietzen, Scott Gilman,

Jack Greenfield, Lynn Heemstra, Ron Koehler, Jacob Maas, Nancy Marshall, George Meek, Jackie O'Connor, Jim Paparella,

Julie Ridenour, Savator Selden-Johnson, Diana Sieger,

Michelle VanDyke, Matthew Van Zetten, Patti Warmington,

Michael Zoerhoff.

Members Absent: Bill Forsyth, Cynthia Gladyness, Yazeed Moore, Teresa Neal.

Guests: Heather Boswell, Veneese Chandler, Maureen Kirkwood,

George Tyndall, Betty Zylstra.

1. Welcome & Call to Order

Adam London called the meeting to order and asked for introductions.

The agenda was reviewed and a motion to accept it was made by Diana Sieger and seconded by George Meek. Agenda was accepted.

After a review of the September minutes, a motion to accept them was provided by George Meek, seconded by Jack Greenfield – vote was UNANIMOUS.

2. Public Comment

There was none.

3. 298 Pilot

Scott Gilman began, providing an update on 298, what is happening at the national level because it is impacting what is happening in Michigan. Issues like alternative payment mechanisms, relationships with service providers, integration of mental and physical health are at the forefront of healthcare reform, and now there is uncertainty about future

government funding.

Scott provided a quick overview of Section 298, and its history with advocates protesting the privatization of mental health services, and Lt Governor Calley stepping in to form a workgroup between private health insurers, CMHs, and client advocates. Scott and Assistant County Administrator Wayman Britt served on the workgroup. One outcome of the work group was a series of affinity groups forming which provided MDHHS a wide variety of feedback from consumers, population groups, providers, and stakeholders.

After doing some national research, Scott noted that reform efforts similar to Michigan's are happening in states around the country. Some of the important issues as stakeholders in the development of this system include:

- Local Accountability and Governance
- Global Budgets
- Partnered, team-based, local delivery of care
- Partners are at risk for Quality of Care
- Flexibility in use of partnered resources and funds

Network 180s current framework includes four pillars:

- Behavioral Health Home: Clinical model where a team of staff work with about 400 people that have serious and persistent mental illness. In Kent County, we have several good safety-net providers and access to primary physicians is not a problem.
- 23-Hour Crisis Behavioral Health Crisis Stabilization: Citizens with mental health issues are plugging up the emergency rooms. These are the high-cost utilizers.
- Comprehensive Care Management Services: Another pilot project going on with Priority Health. Care managers coordinate care for individuals, whatever care is needed. Peers and recovery coaches are also used.
- Permanent Supportive Housing: A lot of people who use the emergency rooms are homeless.

Implementation of these four pillars can make a big difference in improved health and quality of life. The key will be having the ability to redirect some of the resources back into the community.

At this point, the network 180 model is being called a Risk Bearing Behavior Health Services Organization. The proposed 3-year pilot will test developing partnerships across sectors that provide for comprehensive and integrated services and shifting risk and payment closer to the point of care.

Melanie Beelen asked about the connection between the Emergency Rooms and mental health needs. She wanted to know if there was anywhere in the country where there was a place within the ER that has a mental health service model.

Scott said there is one in Oakland County called Common Ground. He feels it would be

a good fit for Kent County. This model gives the police another locked place for people to go. It is designed for Emergency Room diversion, psych diversion and jail diversion for individuals. He added they are close to securing a grant that would pay for some planning to look at it. Another option could be psychiatric emergency departments. It involves free-standing emergency rooms.

After additional questions and discussion, Scott said the next steps include Nick Lyon giving a report to the legislature on January 15.

Matthew added his comments, saying it's important for Kent County to continue to move forward with the development of a model and seek the authority to make it happen.

Adam London reiterated that we are looking for situational awareness of what's happening. He said there are no specific asks of the council at this time.

4. Kent County Child Welfare Advisory Committee

Matthew reminded the Committee that we have been working to change the funding mechanism of child welfare toward a capitated rate of Performance Based Funding. Last month Steve Zwart and other Child Welfare leaders talked about the board they are creating to oversee the West Michigan Partnership for Children. Kent DHHS has been going through a process (MiTeam) to talk about how to team better doing these things including inhome care and outcomes. As part of the discussions there has been an awareness of the need for an advisory committee about Child Welfare for the community to see data and reports on outcomes.

The West Michigan Partnership for Children has a target date of July to be up and running. We need to get our community fully aware of this and get the committee established so we can start having some initial meetings, create culture and expectations. This is the time to start the organizing of the work.

5. 2017 Schedule

The proposed schedule for 2017 meetings was distributed.

6. Miscellaneous

- **a).** Lynn Heemstra The ELO Network is having it's annual meeting on Friday, November 4.
- **b).** Savator Selden-Johnson A Quality Service Review was conducted at the end of September. DHHS participated in the Grand Rounds Report the week prior. The report will be distributed to this group when it is available. Savator shared there has been a phenomenal improvement in performance goals around Engagement Assessment Teaming.
- c). Jackie O'Connor She shared that the Kent County Senior Millage funding for 2017 is in the final stages of approval. It needs to go before the Kent County Board of Commissioners. The recommended funding is in excess of \$10,000,000. Next meeting Jackie will provide a list of services available for older adults.
- **d)**. **Adam London** The Kent County Lead Task Force met for the 1st time. Kent County is one of 13 communities across the state that have seen an uptick in the rate of

elevated blood levels for children over the last couple of quarters. This can affect mental development and readiness for school. Adam said they will meet again in January where there will be epidemiological data to look at as a committee. He expects they will move forward from that point with a process of hearing from subject-matter experts in the community to find out more of the qualitative dynamics of the situation. They will explore some solutions and bring them back to this group and others to discuss how to make the solutions happen.

7. **Adjournment** – The meeting adjourned at 1:05 p.m. The next meeting will take place on January 3, 2017, at the Kent County Administration Building, Room 311.