

Rice County Chemical Health Coalition Provider Team

August 12, 2010 12:00 to 1:30 pm

Present at the Meeting: Jody Anderson (West Hills Lodge), Rachel Berkowitz (Growing Up Healthy), Shelly Cole (Family Focus), Yvette Marthaler (Rice County Social Services – Rule 25 Assessor), Sarah Shippy (Omada Behavioral Health), Maynard Speece (Dakota County Detox), Jessica Wolf (Project HOME), Andy Yurek (Northfield Hospital), Kathy Sandberg (staff support, Rice County Family Services Collaborative).

Introductions and Updates:

Introductions were done but there were no updates not otherwise covered on the agenda.

Mental Health Services in Rice County – Rachel Berkowitz

Rachel explained that she is an AmeriCorps VISTA member working with Growing Up Healthy coalition, which attempts to further community connectedness through systems change. The group takes a holistic approach to health and has been involved in discussions regarding mental health issues in Rice County. Rachel has been researching this area through conversations with various people in the county, including both community members and agencies. She posed a few questions to members of the group and encouraged those with more interest to contact her for further conversations.

What is your community?

- Shelly Cole with Family Focus works with primarily adults dealing the substance abuse and also mental health issues.
- Yvette Marthaler with Rice County Social Services does Rule 25 assessments with adults and adolescents.
- Sarah Shippy with Omada Behavioral Health provides chemical health services but works cooperatively with mental health service providers; also provides services in mental health and chemical health in the Northfield schools.
- Maynard Speece is with the Dakota County Receiving Center, which provides detox services.
- Andy Yurek with Northfield Hospital
- Jody Anderson with West Hills Lodge, which serves adults to bridge folks from treatment to independent living.
- Jessica Wolf with Project Home provides services to adults who are homeless, often including mental health and chemical health services.

Where do you see your work relating to mental health?

- Part of our work is in promoting health (including chemical and mental health) in our communities
- Educational focus of this group includes speaking with mental and chemical health providers
- Helping get various services available including mental and chemical health services
- Connect with other providers to see the needs of the client as they relate to mental and chemical health; networking of providers and services
- Challenges involve two distinct tracks for provision of services...private providers and county providers
- Challenges also involve a lack of open communication between providers to make the plans from multiple providers work for the client
- Unfunded agency mandates impact the level of care provided to consumers; no one is in charge that facilitates working together across agency lines

What do you do when you encounter clients with co-occurring disorders to help them get the services they need in the way that is most helpful?

- Difficult to navigate the two tracks (private and county)
- Individual relationships through referrals and sorting out of which providers are providing which services and using a triage process to coordinate the care
- Need to be aware also of social workers, child protection or other providers working with the client
- Transportation issues with providing services and accessing treatment needs
- This is the reason why many providers are moving in the direction of specialized services for co-occurring disorders....but not getting reimbursed for this level of service
- Client population is also changing and are presenting with more gaps and needing more services with limited resources. Without additional resources, clients are much more likely to fail in the attempts at sobriety.
- Need more services that can provide case management type services in order to help clients be successful.
- Significant differences among clients with differing mental health diagnoses (depression or anxiety vs. personality disorders or borderline personality disorders)
- Funding issues are huge and complex

How do you see the community viewing the co-occurrence of chemical health and mental health?

- There are pockets and families and not a single community thus many viewpoints.
- The community-at-large has a lot of variation in how they see these issues.
- Budget concerns lead to a lot of fear and cuts in services
- Promoting community mental health actually saves money but that is not a widely held perspective.
- Some convergence is happening. Chemical dependency was not previously viewed as a legitimate illness, but as a symptom of some other mental illness. Admission criteria are helping to bring mental illness and chemical illness together in ways they had not before.

Provider Team and Chemical Health Coalition Initiatives

CADCA National Conference:

Shelly reported on her attendance at the conference in July in Phoenix. She said the conference was helpful in learning about the coalition process, leadership in coalitions, engaging stakeholders and other useful topics. A few new ideas to share include:

- Establishing a Youth Advisory Board comprised of students of various ages who would provide input to the Coalition. The Coalition could get direction from them about working with youth and building future leaders. The participating youth could possibly have the opportunity to attend the CADCA youth leadership conference.
- Strategies for engaging other stakeholders (faith communities, businesses, etc.)

Shelly also mentioned some of the resources she acquired at the conference and is willing to share with people.

If other Coalition members are interested in attending a future CADCA training, please let Kathy Sandberg or Zach Pruitt know.

Recovery Month:

Kathy described some of the efforts planned for the month of September including public education about substance abuse and recovery, recovery pins, and possible events at the halfway house. The group talked about ways that we can distribute the 500 Recovery Rocks pins we have ordered. Several ways to involve the recovering community were discussed including contacting the region office (Yvette offered to do this), and working with treatment providers, faith communities and other community connections.

Kathy mentioned that there is a video about addiction/recovery and the significance of community support in recovery. The film, "Lost in Woonsocket," will be touring the county and will be shown in Minneapolis on the evening of September 23rd. The Coalition has also purchased a copy of the DVD, which we may want to show publicly during the month. The group agreed that this could be a nice event. The Paradise Center for the Arts was suggested as a possible site. The group suggested the invitations be sent to key leaders in the community...elected officials, educators, faith groups, service providers, etc. Other venues could also be a possibility, including one of the colleges or the Main Street Moravian Church in Northfield.

Prevention Specialist Training:

Twelve people from Rice County are attending, beginning this week with the goal of expanding our capacity to understand, promote and implement effective prevention strategies.

Northfield Hospital Rural Flex Grant & Opiate Agonist Therapy (OAT) Clinic:

The work and resources of the grant has been completed. Northfield Hospital continues to monitor surgery and ER patients for use of Buprenorphine to determine use of the established guidelines. They have seen 2 overdose and 3 withdrawal patients but none for use related to opiates. They are also monitoring patients who may have legitimate pain complaints or may also be seeking drugs for other purposes.

The OAT clinic currently has 40 people being seen on a regular basis. Northfield Hospital is looking for another physician to help support that clinic. This clinic would be a good place to distribute the Recovery Rocks pins.

Halfway House:

Jody reported they are still working through the licensing process at the State. A new wrinkle was that the license is a separate license from West Hills Lodge so will require more work. West Hills has taken possession of the house and they have started to supply the needs of the house. The host county contract has been accomplished with thanks to Mark Shaw. Jody shared a list of some of the things needed at the house and a wish list of items needed. Staff will be at the house next Tuesday from 6 to 8 so people who are interested in helping can stop in. An overall cleaning date will be set up closer to the opening.

Yvette suggested that the letter also be sent to folks in the neighborhood so they can stop by if they want to and so they know what is happening at the house. Jody mentioned that some of the neighborhood residents had contacted the licensing agency.

We will wait and see about the licensing process before deciding about an open house in September.

Jody mentioned that she is looking to fill some open seats on the WHL Board.

Adolescent Outpatient Treatment Group:

Have averaged 4 to 5 patients through the summer but have seen several recent admissions and treatment participation seems to be picking up.

Next Meeting:

Wednesday, November 10, 2010 – Noon-1:30 p.m.

Northfield Community Resource Center (1651 Jefferson Parkway)