

SAA Summit Meeting
Mansfield Education Center/Yellowstone Medical
Billings, MT
June 14, 2006
Hosted by Eastern Service Area Authority

Attending: Alice Hougardy, Dee Holley, Cheryl Nystrom, Tom Bartlett, Charles Baker, Esther Kramer, Mary Jane Fox, Bob Ross, Molly Protheroe, Jacob Wagner, Barbara Mueske, Michelle Lewis, Daniel Ladd, Paul Meyer, Jane Wilson, Joyce DeCunzo, Lou Thompson, Judy Cyr, Tom Peluso, Deb Matteucci, Joan Daly, David Cunningham, Carolyn Leuthola, Senator Gerald Pease, Bobbi Becker, Jim FitzGerald, Joe Moll, Anita Roessman, Carol Davidson.

Alice Hougardy, chair of the Eastern Service Area Authority, called the meeting to order and extended a welcome to all attending.

Centralized Summit Meeting Location

Alice stated the two items to take into consideration for future Summit meetings were where and how often. Discussion included the expenses each SAA incurs for regular meetings, Congress meetings and Summit meetings, which is a toll on each budget. While Lewistown is the most central location of the state, the most populous is Helena. Also suggested were Great Falls and Bozeman. Bob Ross moved the next scheduled Summit be located in Bozeman, Tom Peluso seconded, Passed. Bob Ross then moved the Summits convene three times per year. Tom Peluso seconded. Passed. The suggested time for the next Summit was November, and attendees were reminded of the NAMI Mental Illness conference in Helena in October.

SJ-41 Committee Reports

Joyce DeCunzo stated the Interim Committee had been directed to do a study of Crisis Services in Mental Health. The SAA's have had a presence at the Interim Committee meetings. Their next and final meeting is scheduled for September 14, and 15, 2006.

Tom Bartlett and LeeAnn Byrne of the WSAA recently testified in front of the Interim Committee, and Tom gave his presentation to the group. His testimony centered on the need for earlier intervention for those who are deteriorating toward crisis. He is proposing a change to statute to allow for this.

Discussion centered on the fact that the provision he is proposing is already in the statute, and is not the problem. The need is to educate the County Attorneys and public defenders on the civil commitment process. There needs to be a fixed point of responsibility for early intervention. The questions were asked:

- 1 What can SAA do – where do we begin?
- 2 Where can we put our energies to make significant difference?
- 3 Clarification and expansion of what exists now?
- 4 What are we trying to achieve, and what are the resources needed to do it?

People have a right to treatment and a right to refuse treatment. Joyce DeCunzo cautioned the group that we must be very careful what it is that this proposal is trying to achieve. If what we want is to broaden the base of the reasons for commitment, this will do it. We need to be very careful not to change to statute so that it leads to some unintended consequence. The group agreed that it is important to safeguard individual's civil rights.

Tom Peluso made the following motion: "Whereas intervention of those who are gravely mentally ill and unable to discern the extent of their illness is a desirable, therefore, each SAA will form a work

group for change.” Seconded and passed.

Joyce also cautioned the group if they are proposing a legislative change, the point has passed for the Department to ask for it. From now on it must be approached by the Legislators. The Interim Committee may also carry a Committee bill, and again, their last meeting is September. Tom Peluso asked Senator Gerald Pease if he could do a “place holder” for prospective legislation, and he stated he could.

Joyce cautioned once more when a statue is closed, it is what it is. When it is opened, there can be changes that were not intended. She also reminded the group of strict lobbyist rules that the Division must follow, and that the Division cannot be a funnel for emails to groups in support or not of issues. Tom Peluso recommended we get a legal guide as to where the SAA’s stand on lobbying, and Anita advised Alexis Volkerts of the WSAA is working on that at this time and will have it available by fall.

The SAA Summit members agreed the presentation to the Interim committee by Tom Bartlett was not sanctioned by the group. Chair Alice reminded the group this was a discussion that should have taken place months ago. A presentation to the Interim Committee was also provided by Dan Aune, but he was not able to attend this meeting.

Links between Department of Corrections and the State Hospital

Guest speakers were Laura Janes, Chief of Health Services Bureau and Gary Hamel of the Department of Corrections. Gary is the Administrator of a newly formed division looking at healthcare across the entire Corrections system including physical health, mental health, dental and vision care. He wants to develop a plan as the offenders come into the system to prevent the mental illness from deteriorating into crisis. He would like to develop a discharge plan for them upon arrival to help them get the treatment they need to get well. A new project is in the works for a coordinator between Department of Corrections and DPHHS to assist with services they may need. He stated perhaps early intervention could take place in jails before they get as far as the prison.

Communication between SAA’s, Consumers, and AMDD

Jim FitzGerald presented a paper that was a result of a directive of the Mental Health Advisory Council Chair to its advocacy committee to coordinate a communication plan among the SAA’s, the SOC (System of Care), the KMA’s (Kids Management Authority), and LAC’s with the MHOAC. The charge of the advocacy committee was to find a way to do it. He reminded the group this discussion was not to find solutions at this time, but outcomes. The proposal is to do a website to act as a hub for this communication. What is needed from the SAA’s is: What do you want to hear from each entity, and what do you want to tell them. He charged each SAA to take this back to the LAC’s and would like input sent to him. Not trying to duplicate, but centralize information.

Funding Opportunity

Deb Matteucci presented an opportunity the SAA’s may consider for additional funding. Mental Health Association (MHA) has applied for a grant that would be used for capacity building technical assistance with services based organizations. The SAA Summit agreed to support Deb in this effort. Jane Wilson moved to support Deb and MHA in regard to the grant “Capacity Training Building” with a letter of support. Seconded and carried. Deb also encouraged the group to collectively or individually do some grant researching to see what is available, and to consider pooling their resources for the cost of a grant writer.

Executive Planning Process (EPP) Update

Joyce DeCunzo gave an update on the EPP process to date. Mental Health is the top priority of the Department of Public Health & Human Services. Of the listing of priority requests submitted by the SAA’s, four of them have made the top of the priority list. Joyce will be meeting with hospital administrators about tele-video support and the 72 hour eligibility for those who have no other way of

receiving treatment, thus keeping them closer to home. The 72 hour stay is stabilization, not treatment. The funding is a fixed amount for each year of the Biennium.

Lou Thompson explained the evolution of the EPP and Budget Process.

Adjournment/ Next Meeting

Meeting adjourned at 3:45. Next meeting will be in Bozeman; time and place to be announced.

Items carried over:

Central meeting location for Summit meetings.