

MINUTES

WIDCCC Advisory Committee Location:

Southwest District Health – 13307 Miami Lane, Caldwell, ID, 83607

Conference/Video Information: Optional

Join the Microsoft Teams Meeting at the following link: [Click here to join the meeting](#)

Date: September 11, 2024

Time: 1-2pm



	Agenda Item	Presenter	Discussion	Next Steps/Action
1:00	Call to Order	Kelly A. Chair	Introduction and call for any additional agenda items. Meeting called to order at 1:00pm Greeted guest joining online from Cottonwood Creek	
1:02	Meeting Minutes	Kelly A. Chair	Call for any revisions to August meeting minutes Rebekah motioned to approve; Madison seconded; all approved	Motion to Approve Minutes
1:05	SWDH Updates	Cas A. SWDH	<p>Monthly WIYSC Update</p> <ul style="list-style-type: none"> -As of August 31st, 2024 the youth crisis center has had 110 visits and has served 62 unique youth. -Remodel is continuing on and going well. <p>Monthly Magellan Update</p> <ul style="list-style-type: none"> -We continue to be paid, but we still haven't received a contract, despite Cas' efforts to reach out to them with an ETA. -Cas will begin reaching out weekly for updates. Rebekah will also look into it. <p>Monthly WIDCCC Budget Update</p> <ul style="list-style-type: none"> -Cas presented on her budget tracking for WIDCCC for July and August, including all expenses in July, and all operating expenses from August. -Cas showed the committee the revenue expected, revenue received, anticipated expenses, and actual expenses. -So far, there are no issues or unexpected expenses to cause concern. -Cas will update amend anticipated expenses and provide the committee with these changes as they come. 	
1:25	Clarvida Monthly Presentation	Cas A. SWDH &	<p><i>Follow-up on previous meetings reporting questions</i></p> <p>The group discussed the following questions which were posed in last month's meeting:</p> <ul style="list-style-type: none"> -Can referrals and drop-offs be specified by agency, in addition to type of referral? 	

		<p>Abigail H. Clarvida</p> <p>--Abigail/Cas Response: Previous iterations of reports under WITS allowed crisis center staff to provide this information from time to time due to the ability of them to type in information. Under their new system, this has been taking away and changed to drop-down menu. We are trying to avoid too many drop-off options because it can interfere with the intake process and make it longer, but we understand why it's important to know. Abigail will look into what we can do! If it doesn't work, we can think of other ways to present agency level information, including possibly during the monthly presentations and/or in the quarterly reports.</p> <p>-Can the crisis system be added as a referral category?</p> <p>--Abigail/Cas Response: currently 988 and MRTs are counted until a broader category, but she will look into it, if it can be its own category.</p> <p>-What is the breakdown of guardian referrals to self-referrals for the adult center and why are they lumped together?</p> <p>--Abigail/Cas Response: The system they use lumps them together for both centers. Essentially, we can assume that all Self/Guardian referrals for the adult center for self-referrals only and that Self/Guardian referrals for the youth center is guardian referral only. In Abigail's time, there have been no actual guardian referrals to the adult center.</p> <p>--Chriss' Response: Chriss described the challenges they have with guardianship and supporting people in in-patient with guardianship needs.</p> <p>--Abigail/Cas Response: These challenges are echoed in the adult crisis center and we will keep an eye out for any changes in referrals as they relate to adults who come in with guardians. Abigail mentioned that depending on the situation, a guardian may have to sign consent forms for an adult in cases where the adult cannot legally sign for themselves.</p> <p>Monthly WIDCCC Presentation:</p> <p>Census, admissions, demographics, presenting concerns</p> <p>-Numbers are slowing going up from Summer with over 100 total visits and almost 100 full episodes.</p> <p>-Referrals from other sources are going up as well when you combine family referrals and agency referrals, which is a positive outcome of our partnership development.</p> <p>-Demographics remain consistent with more males than females, however there were more just mental health clients in August than normal.</p> <p>-There were 19 new clients to the center in August, meaning they have never visited the center before. This is a new data piece Abigail added to the presentation and is new to the weekly reports, which is very helpful for Cas!</p> <p>-Additionally, with the new system veterans dropped off the data set, but Abigail is advocated for veteran status to be added back in.</p> <p>-There have been a lot more referrals to outpatient as staff becomes more comfortable</p>	
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		<p>with the outpatient resources available in the community.</p> <ul style="list-style-type: none">-Abigail described their partnership with ACT and Moonlight Mountain Recovery and what they are doing to ensure a smooth and streamlined referral process from the center to the resource. There was a little hiccup with the first referral to ACT, but that is to be expected. <p>Success stories</p> <ul style="list-style-type: none">-Clarvida hired a Business Development and Marketing Manager who will be responsible for community outreach mainly over the crisis centers and the treatment foster care program. Cas will meet with them to ensure limited cross over between the outreach occurring at SWDH and Clarvida.-Kate Pape from the VA did a training to crisis center staff in August.-August was dedicated to community connections, including the Canyon County Public Forum, Recovery Day, and an outreach project with NNU/churches.-The NNU/churches project is related to donations, particularly of winterwear. Additionally, St. Al's donation a lot of beanies for crisis center clients. Clarvida is working with churches to seek additional winter clothing donations.-Abigail is also going to present at the Idaho Stronger Together Conference to highlight the youth crisis center, in addition to how the adult crisis center can support families-Abigail is going to present at the NW Regional CIT Conference, we well.-Abigail shared that starting the first week of October the adult center will no longer contract with a security company. They are training ALL employees on de-escalation for clients who need more de-escalation than others. The youth crisis center has shown that security is not required and that staff can handle situations when they come up.-Clarvida is continuing to find ways to make the crisis centers peer support led.-Nikki asked if this is ok in terms of the contract. It was determined that the new way they are planning to address safety is acceptable. <p>Challenges</p> <ul style="list-style-type: none">-Abigail expressed the continued challenges with the EMT basic licensure, but noticed they are included in the IBHC strategies. Nikki advocated that this issue gets addressed and the IBHC agreed to include it. Nikki encouraged Abigail to continue to share their needs related to EMT licensure, so that it comes from more than one person and that the policy change on this may not be as difficult, as funding a new program, for example.-Background checks were also discussed as being a challenge, but that waivers are allowed and are being submitted. <p>Discussion</p> <ul style="list-style-type: none">-Cas offered Vito the time to share news about his program. The pre-prosecution diversion program officially has their first client. They are going to determine when referrals to and from the crisis centers will become appropriate.	
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1:55	Wrap up	Kelly A. Chair	Next steps and any assignments Meeting adjourned at 1:49pm	Next Meeting: October 9, 1-2pm
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Present: Madison, Rebekah, Karla, Chriss, Vito, Glenda, Nikki, Abigail, Guest from Cottonwood Creek

Absent: Kelly, TJ