

# Western Service Area Authority (WSAA) Board Meeting

Tuesday, June 27, 2017 • 10:00 a.m. to 1:00 p.m.

Western Montana Mental Health Center

1321 Wyoming St., Room 102, Missoula, Montana

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PRESENT: (Board Members – for quorum): Rena Ayres, Sylvia Carollo (☎by phone), Monique Casbeer (☎by phone), Leah Furlong (☎by phone), Chris Glines (left @ 11:30), Rick Hartz, Ashton McNair (for Katherine Isaacson), Denelle Pappier, Courtney Rudbach (☎by phone), Douglas Schimmel, Pete Snyder (left @ 12:00).

(Board Advisors from AMDD): Vicky Varichak.

(Members/ Guests): Dan Ladd, Colin Roberts (Sunburst MHC); Matt Taylor (Clear Light Consulting).

Convened at 10:05 a.m. – Telephone conference call initiated through poly-com.

A. Welcome / Introductions / Announcements — Chris Glines, Chair

B. Secretary’s Report — Denelle Pappier

**MOTION:** Rick/Douglas. To approve May 23, 2017 board minutes as amended with Treasurer’s information. PASS.

C. Treasurer’s Report — Ashton McNair (for Katherine Isaacson) [amcnair@wmmhc.org]

|                  |                                                                               |
|------------------|-------------------------------------------------------------------------------|
| May Expenses     | \$924.48 mileage<br>\$207.28 lodging<br>\$ 49.73 meals<br>\$525.00 contracted |
| Returned Check > | (-\$800.00) Sanders LAC                                                       |
| Total Expenses   | \$906.49                                                                      |
| Balance 05/31/17 | \$10,676.10                                                                   |

The board decided to evenly divide the remaining account balance after funding grants and May/June expenses between the active LACs with suggestions for how to best expend that fund for their members’ best benefit. (Resources to be used in accordance with the statutory purposes of the SAA/LAC). Will determine how to notify LACs of this news and expectations for funds. Balance is \$10,676.10; Grants total \$6615.00, leaving balance \$2740.73 to be expended by end of FY. Ten active LACs will evenly split the difference @\$304.00 each.

**MOTION:** Pete/Rick. To accept the Treasurer’s Report as presented and to expend the balance of our account, as split evenly between the ten active LACs (Beaverhead Co., Flathead Co., Lake Co., Lincoln Co., Madison Co., Mineral Co., Missoula Co., Ravalli Co., Silver Bow Co., Pintler [Deer Lodge & Granite Counties]). PASS

Grant contacts discussion. Received signed contracts from Baldwin, Casbeer (for 2), Pappier; Not received from Doyle or Sandberg. Discussion to allow follow-up action to receive these missing contracts, even after not following the deadlines up to today. Courtney Rudbach (while on conference call during this meeting) contacted Julie Doyle to explain how to comply at this late date.

**MOTION:** Rick/Rena. To approve the allowance of late contracts to be received from grant recipients if they sign/scan/email it to Chair Chris Glines, who will print/sign/scan and send it to Katherine Isaacson’s office by June 30, 2017. If they do not comply with this exemption action to have their signed contracts be received in a timely fashion (& to allow action by Chris to complete the transaction), that remaining balance will be added to the WSAA account balance that will be divided between the active LACs. PASS

D. Guest Speaker — Matt Taylor, MA; Founder of Clear Light Consulting

Contact: matt.taylor3130@gmail.com; 406-544-7305

Project Tomorrow (PT) is newest incarnation of the Western Montana Suicide Prevention Initiative that works to coordinate the various agencies that are working on suicide awareness and prevention in greater Missoula area. Matt came on board to help transition and coordinate information gathered to help guide direction of Project Tomorrow with a presentation to them in January 2017.

Previously, he was Director of Montana Safe Schools Center, and Associate Director of Institute for Educational Research and Service; also, he is certified to conduct the Applied Suicide Intervention Skills Training (ASIST). Worked with Native American groups for youth at risk. A suicide attempt can be a transformative event for the individual; clinicians are less likely to work in this area, but it is felt to be a

most impactful and profound experience to need/want to process.

Lots of one-on-one interviews with key community stakeholders, as well as online surveys; he researched what people feel should be the priority for Missoula County to deal with the subject of suicide. Number one priority is needing more information on how to recognize the warning signs of suicide; second is to promote safe storage of guns/medication; third, focus on youth & early adult issues that lead to suicide. Resources for referral for help (especially after hours) was also noted as a big need.

Overall, three-year goal for Project Tomorrow is: increasing public awareness; not duplicating services; organizing events other than trainings that focus on suicide issues (for general public to attend). Example, that could mean having a presence at local gun shows with information to share.

The groups that presented as needing the most help with understanding suicide issues are young adult (18-25 yo) and elder (over 65 yo; 1 in 4 attempts are completed). They need to learn the signs and intervention skills necessary to work with suicidal individuals. Why does Montana have such a large problem with suicide? It's high nationwide, but we have some unique conditions, such as geographical isolation. The group with the fastest growing rate of suicide is white, middle-aged men; in MT, we have high rate in Native American populations, but that drops off after young adulthood. We also have high percentage of hand guns and women tend to use them here more than nationwide.

People reaching out is the main deterrent to suicide ideation; in Montana, isolation and lack of resources becomes an issue. SAMHSA created toolkit to engage senior population in community efforts. Changing the way we talk about suicide (Stipulating the issue as having "stigma" itself creates a stigma). Hearing from people that we can relate to, discussing their personal experiences, helps people understand their situation and seek help when they feel suicidal.

Assessment tools (ranking suicide risk using various scales; e.g., Columbia Scale = most widely used) does not accurately assess risk. There are reasons to use these tools (espec. self-reporting) but they tend to have low-predictive validity; but we need to have personal, individual contact to add in to a conversation that is started from using an assessment scale tool. Considering all risk factors, how are they doing *today* (coping mechanisms, etc.). Do not rely solely on the written test as accurate tool. We need to do a better job training MH providers/clinicians and educating the public on subjects of recognition and safety.

"Adolescents explode, adults erode," seems to be a motivational understanding of suicidality. There's a lack of hope and lack of community support available to many people. Need to promote real social connectedness (not media-based) to overcome isolation and feelings of worthlessness or being a burden; also fear of pain, if a physical condition.

Healthy Families America: education for public to be effective parents to raise healthy children. "Good Behavior Game" is good, but will probably take decades to make an impact. CIT has been striving to make a difference for over 15 years and is now known to be a major improvement in the process of interceding with MH individuals. How to legislate programs that promote hope and empathy? So very difficult. "Sources of Strength" (youth-oriented program of resilience-building) does not mention suicide specifically, but promotes social connections and hope-building.

Good conversation here, today, but there is no easy solution immediately available. Matt has written over 85 grants; he's written 10 recommendations for the Project Tomorrow group for moving forward. United Way is primarily funding the limited resources that go to PT; some local businesses donate, mostly volunteer efforts. Reasonable expectations of what can be expected in next three years.

E. Local Advisory Council (LAC) Reports — LAC Representatives  
***(Beaverhead Co., Flathead Co., Lake Co., Lincoln Co., Madison Co., Mineral Co., Missoula Co., Ravalli Co., Sanders Co., Silver Bow Co., Pintler: (Deer Lodge & Granite counties)***

1. Beaverhead Co./Dillon (Rick) — Didn't meet last month due to lack of quorum. Working with Co. Commission to get some funding; but is not likely, as county budget was cut-back. Need to be more careful about expenditures. Continue to work on the Big Sky Behav. Health Summit, to be held Sept. '17.

2. Flathead Co./Kalispell (Susan) — Courtney: LAC Picnic planned in August. She spoke with Julie Doyle about getting grant contract signed (while she was on conference call with this board meeting!).

3. Lake Co./Polson (Douglas) — Still struggles with attendance; recruiting at churches on Sunday.

4. Lincoln Co./Libby (Chris) — No report.

5. Madison Co./Virginia City (Jim/Doris) — Emailed report: Preparing an information brochure on the LAC to distribute county-wide; wrote a letter to AMDD suggesting more/smaller SAAs for better, local

networking & recommendation to invite Children's MH Bureau and Chem. Dependency Bureau to participate with AMDD at SAA meetings; continue working on Integrated Behavioral Health planning. The county is close to launching TeleCRT (CRT = Crisis Response Team) at our two local hospitals, in conjunction with Western Montana Mental Health Center (to shorten crisis response times). No MHLAC meeting in July.

6. Mineral Co./Superior (Dawn) — Not present to report.
7. Missoula Co./Missoula (David) — Planning their annual summer Party in the Park (Thursday, July 20, 12-2pm) in Franklin Park, Missoula. Food, beverages, and the Big Dipper ice cream truck will be there!
8. Ravalli Co./Hamilton (Jenny/Denelle) — Scheduled to meet later this month with the Summit ILC contact to use their meeting room for monthly LAC meetings. Informal community networking.
9. Sanders Co./Plains (Shelby) — Not present to report. This LAC is considered "inactive."
10. Silver Bow Co./Butte (Karen) — Not present to report.
11. "Pintler" (Deer Lodge & Granite counties)/Anaconda (Charlotte) — Not present to report.

F. AMDD Report — CPO Vicky Varichak

Senate Bill 261, to establish financial reserve for state, requires reduced funding as yet unknown; will likely be reduced services. CMS (Center for Medicaid Services) working with AMDD. Presumably will reinstitute at least limited travel reimbursement for AMDD staff beginning in FY'18 (July 1, 2017). Meeting in Helena on July 12th to discuss/decide what this may look like. At present, no anticipation of SAA Summits being held again. Mary Lemieux is going to sort out how this may develop. Jane Wilson is now retired from CPO position in GF/Helena; will not hire to replace her: Kenny will assume Helena services; others will cover Great Falls.

G. WSAA Committee Updates — (none)

H. NEW BUSINESS:

1. Grant reporting requirement instructions were sent to grant recipients with their contracts. We should expect better compliance with keeping the WSAA board informed on grant expenditures.

Adjourned at 12:25 p.m.

Next meeting: **Tuesday, July 25, 2017, 10:00am-1:00pm** (at WMMHC in Missoula)

Submitted by: Denelle Pappier, WSAA Secretary  
406-363-1311 / [dpappier@aol.com](mailto:dpappier@aol.com)

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<u>ACRONYMS GLOSSARY:</u>		LEA	Law Enforc. Agency	PSS	Peer Support Specialist
AMDD	Addictions & Mental Disorders Division	MH	Mental Health	PT	Project Tomorrow
CIT	Crisis Intervention Team	MHAM	Mental Health Awareness Month (May)	SAA	Service Area Authority
CMTE	Committee ( <i>not acronym!</i> )	MHC	Mental Health Center	SDMI	Severely-Disabling Mental Illness
CLO	Community Liaison Officer	MHFA	MH First Aid training	SUD	Substance Use Disorder
CPO	Community Program Officer	MHOAC	MH Oversight Advisory Council	TBD	To be determined
DPHHS	Dept. of Public Health & Human Services	MI	Mental Illness	WMMHC	Western Montana MHC
FY	Fiscal Year ( <i>July to June</i> )	MOU	Memo. of Understanding	WOC	Winds of Change MHC
LAC	Local Advisory Council	MSH	Montana State Hospital	WSAA	Western Service Area Authority
		NAMI	National Alliance on Mental Illness		

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Committees for the WSAA:

WSAA FY'17 Mini-Grants — CMTE: Denelle, Chris, Brenda, Monique, Leah, Dawn, Geri

By-Laws — CMTE: Denelle, Tyler, Sylvia

Strategic Plan — CMTE: Courtney, Stacey, Monique, Doris, Pete

Sub-CMTE: Geri, Brooke, Stacey, Pete, Chris, Denelle

Jails Formulary Investigation — CMTE: Tyler, Dawn, Geri, Monique, Rena

LAC Report Form — CMTE: (TBD) (Info from LACs to WSAA; to enable writing BR)