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**STATE ADVISORY COUNCIL ON MENTAL HEALTH**  
*and Subcommittee on Children's Mental Health*

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November 5, 2020 – 10am-1pm

## Attendees:

Cecilia Hughes, Kim Stokes, Dave Johnson, Michelle Schmid-Egleston, Donna Lekander, Ed Morales, Maleenia Mohabir, Sarah Fuerst, Tom Delaney, Elise Holmes, Addyson Moore, Lisa Hoogheem, Jennifer Bertram, Jeff Lind, Kim Baker, Linda Hansen, Meredith Jones, Michael Gallagher, Stephanie Podulke, Claire Courtney, Dave Lee, Alison Wolbeck, Ken Moorman, Claudia Daml, Michael Trangle, Samantha Hedden, Sam Smith, Rodney Peterson, Rozenia Fuller, Al Levin, Angie Schmitz, Amy Jones, Amanda Larson, Mary Kjolsing, Robert Bosl, Ashwak Hassan, David Nathan, Kim Strand, Ellie Miller, Diane Medchill, Jeshua Livstrom, Renee Edelhauser, Tabatha Amundson, Abigail Franklin

## Joint Meeting Minutes

### Welcome, Approve Minutes, Approve Agenda

#### RFP Involvement Process – Jeshua Livstrom, BHD Operations Manager

- Need a framework for the Council/Subcommittee to work together with DHS Behavioral Health Division to operationalize RFP/Grant involvement process.
- It is in [statute](#) that the Council “review and comment on all grants dealing with mental health”
- Sometimes DHS receives funds that are restricted to very specific projects, other times there is broad latitude in how the money can be spent.
- There are several phases in the RFP Process:
  - Pre-RFP
    - BHD may receive appropriation from state legislature or apply for funds. When applying for funds this typically requires a quick turnaround in our application. If time permits, BHD would like to engage the Council in the application process.
  - RFP Development
    - Timelines can be different and BHD may need to get the money out quickly
    - Possible that we will have to communicate via email re: RFP deliverables and other details instead of in meetings
    - Council/Subcommittee members will need to sign conflict of interest forms for this process
  - Applications
    - BHD is always trying to support applicants who are under resourced or work with underserved communities
  - Contracting
    - BHD has an interest in contracting with providers we have not contracted with in the past



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**RFP Process Involvement - DRAFT**

This DRAFT process outlines the roles of the State Advisory Council on Mental Health (SAC) and Subcommittee on Children's Mental Health (SOCMH) and the Department of Human Services in regards to the Mental Health Related RFP Process.

**Pre-RFP Development:**

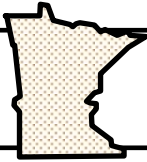
- SAC/SOCMH maintain an active list of mental health priority areas including detailed list of deliverables. This list will be updated regularly in response to changes in community needs and provided to DHS/BHD at least annually or when needs change.
- When DHS learns that money is coming from any funding source (State Legislature, Federal Government, private foundation, etc.), DHS contacts the SAC/SOCMH for input on how to prioritize the spending of that money.

**RFP Development:**

- DHS distributes the current list of RFPs that are in development (not currently posted for response) to the members of the SAC/SOCMH by the first of each month. The list should include:
  - a. Title of RFP
  - b. Brief description (total \$ amount, spending parameters, target audience, proposed deliverables, how many projects will be funded, etc.)
  - c. Timeline
  - d. DHS Contact Person (grant manager)
- At the monthly Grant/RFP Workgroup meetings, RFPs in development are discussed with SAC/SOCMH members to:
  - a. Gather input on the related issues, RFP content, and proposed deliverables
  - b. Define problem, identify needs
  - c. Identify Subject Matter Experts within SAC/SOCMH membership for further involvement in the development process
- DHS staff provide monthly updates to the SAC/SOCMH membership regarding progress on RFP development process (changes to deliverables, timelines, etc.). This can be via written communications or in-person meetings.
- SAC/SOCMH members sign non-disclosure agreements and conflict of interest disclosure forms

**RFP Posted:**

- SAC/SOCMH members share the RFP with networks
- DHS contact [mhadvisory.council.dhs@state.mn.us](mailto:mhadvisory.council.dhs@state.mn.us) to request proposal reviewers
- Interested SAC/SOCMH members serve as members of the Proposal Review Panel
- SAC/SOCMH members sign non-disclosure agreements and conflict of interest disclosure forms



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**Grant Outcomes:**

- DHS staff present outcomes and findings from previously issued RFPs at SAC/SOCMH meetings at least annually
- End Draft Process
- Questions:
    - a. Do we need to complete conflict of interest forms for each time we provide input to an RFP and for each set of reviews we do? Current protocol is that each reviewer signs a conflict of interest for each project.
    - b. Can we sign a blanket conflict of interest that is kept on file? Jeshua will follow up with Contracting and Legal Compliance about this.
    - c. Can non-Council/Subcommittee people (community members) be involved in the review process? Yes.
    - d. Can we share RFPs with partners including our employer? Yes, once RFP is posted, it is public and you can share it with anyone.
    - e. At what point do Council/Subcommittee members recuse themselves from the process? This is dependent upon potential conflict. Members cannot review RFP applications if they also submitted an application for that project.
  - Comments:
    - a. Thank you for hearing the Council/Subcommittee request and being responsive to us. We will need several members to volunteer to participate in the RFP process.
    - b. Grant involvement is incredibly important to the Council/Subcommittee. We have so many subject matter experts and very invested individuals. It is so important to steer things [objectives/deliverables] correctly from the beginning.
    - c. BHD does not like to hear after the fact that the RFP should have been written differently.

**Workgroups: New Groups, Structure, participation, etc. – Dave Lee, SAC Chair**

- We are trying to determine the best times for workgroups to meet. This is challenging because they cannot meet at the same time in order to allow for members to participate in more than one meeting of their choosing. Also meetings need to be consistent (same day/same time) each month.
- Should all of the workgroups continue?
  - Recovery Supports has historically only had one Council member plus state employees. If only state employees want to participate in this workgroup, suspend at this time. There is more interest in seeing this workgroup continue as Peer services, Employment Supports, etc do not fit seamlessly in other workgroups.
  - Family Systems, Prevention, Intervention, and Supports – this theme should be carried into all workgroups. This is very important work and members are interested in continuing this group. Need to find a better time to allow for more participation
- Additional Workgroup ideas:
  - Grant/RFP Workgroup. Yes, this should be created



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- Communications. This workgroup would plan the communications strategy between the Council/Subcommittee and Legislature, Governor's Office, and ALL State Agencies. This workgroup would take the lead on prioritizing action steps for other workgroups around how things should be communicated out. If this one is created, would need a liaison from each of the current workgroups.
- State Fair Planning / Events Outreach. Could this be combined with Communications? No. This is very specific and works closely with NAMI for planning the Mental Health Awareness Day at the State Fair events. We will keep this as is with NAMI coordinating meetings but will need additional members to volunteer. Meetings are typically held the Wednesday afternoon before the full Council/Subcommittee meeting.
- Other ideas: Suicide Prevention Workgroup. Instead of creating a workgroup for this, we should partner with the existing Suicide Prevention Taskforce and have them present on a quarterly basis at Council/Subcommittee meetings.
- Discussion:
  - The process for workgroups is very confusing. We have many new members and it is not clear how all members participate in workgroups. Maybe we should prioritize for the year and then create workgroups based on our priority areas.
    - Working with Council Intern, staff will create crosswalk of our current workgroups, statutory charge, legislative recommendations, and proposed new groups. This will help with planning purposes.
    - We will also have more polls around best meeting times for workgroups.
  - How do workgroups communicate with each other? Workgroups are expected to provide notes from all of their meetings to be included in the monthly minutes. Also, important updates should be shared during the full Council/Subcommittee meetings.
  - We need to ensure that we have rural populations represented in all workgroups.
  - How do we partner with the Telemedicine and Mental Health for Rural Communities Taskforce? Need to identify the lead contact within this group and begin discussions.
  - Reminder, non-Council/Subcommittee members are encouraged to participate in workgroup meetings. Possibly bring in former legislators to the workgroups in order to help us promote our recommendations.

#### **Strategize how to get the 2020 Report to the Governor & Legislature moving to key decision makers – Sam Smith NAMI**

- People should be reacting to and engaging with our recommendations.
- Legislators will be most responsive to their own constituents.
  - How do I know who my Representative and Senator are? Search "Who Represents Me" on the [Minnesota Legislature website](#).
- Every Council/Subcommittee member should reach out to your legislator and introduce yourself as a member AND mental health advocate. Provide our recommendations with the top priority of no funding cuts. Then schedule a meeting to talk about the details of the recommendations
  - Legislators take meetings with their constituents all the time. It will probably be a short 10 minute meeting via Zoom. The sooner you get your request in for a meeting the better. Be flexible about the day and time of the meeting.



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- Sam Smith can provide coaching before the meeting, just ask him for the support. He can provide talking points tailored to the recommendations.
- Go in pairs if that makes you feel more comfortable. Plan ahead of time who will say what.
- Set the stage on a positive note. Example: explain how impactful having telehealth services has been for people during this crisis time.
- Remember, if your legislator asks you questions, this is a good thing. You can get back to them if you do not know the answer.
- Be sure you are sharing the report with your networks and encouraging them to talk to people about the recommendations
- We should bring Hali Kolkind, Governor's Policy Advisor, back to the Council/Subcommittee for more meetings.
- MN Farm Bureau has Mental Health priorities. We should share our goals/recommendations with them and other organizations who have regular meetings with the legislative members.
- One pager of all recommendations and the executive summary will be posted [online](#).
- We need to continue to build our relationship with DHS in order to get buy-in for our recommendations.
- Letters to the editor will get published. There is value in doing this as policy advisors track this information.
- What if we did virtual critical conversations/happy hours with key stakeholders? This is a great option to communicate important topics.
- Should we rank order/prioritize the recommendations in the report? No. Each recommendation has value. Instead, target recommendations based on legislative committee structure so legislators are hearing about recommendations in which they can act and/or to the state agency which has authority to make decisions about that topic.
- We will continue this conversation on a monthly basis so as not to lose momentum about our recommendations.

#### **Other Community/Agency Updates**

- Council and Subcommittee submitted a letter to MN's Congressional Delegation stressing the importance of continued use of telemedicine for mental health services.
- Member Rozenia Fuller: Stair Step Foundation is getting folks out to vote. Specifically helping those in homeless encampments and doing weekend early voting events. Also made sure that people with lived experience of mental illness filled out the census.
- MN Association of Psychiatry is pushing boards to not have discriminatory questions on applications about history of need for mental health supports.

#### **Next steps and closing**

- Contact Mikki Maruska at [michele.maruska@state.mn.us](mailto:michele.maruska@state.mn.us) or 651-398-6496 if you would like to be a reviewer for the COVID Relief Funds RFP.
- Submit workgroup minutes to [mhadvisory.council.dhs@state.mn.us](mailto:mhadvisory.council.dhs@state.mn.us) as soon as possible after the meeting



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- Submit vendor invoices to [mhadvisory.council.dhs@state.mn.us](mailto:mhadvisory.council.dhs@state.mn.us) for full Council/Subcommittee meetings and workgroup meetings.
- Abbie will be on leave Jan/Feb/March. Once we know who will be filling in we will share that information. Please be sure you are sending all Council/Subcommittee related communication to [mhadvisory.council.dhs@state.mn.us](mailto:mhadvisory.council.dhs@state.mn.us) so things do not get lost. The fill in staff will have access to this account.

### **Next Council/Subcommittee Meeting:**

Date: December 3, 2020  
Time: 10:00am-1:00pm  
Location: [WebEx Only](#)

### **Request:**

Submit written updates from your Agency/Organization/Community about current mental health activities by 9am on the day of Council and Subcommittee meetings. These written updates will be included in meeting minutes.

### **Reminder:**

More information about the State Advisory Council on Mental Health and Subcommittee on Children's Mental Health, including meeting minutes, reports, and membership lists, can be found online: <https://mn.gov/dhs/mh-advisory-council/>



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## Updates from state agencies:

### DEED / Vocational Rehabilitation Services (VRS):

- VRS is the public vocational rehabilitation (VR) program in MN. It is a Federal program operated by the State of MN under the umbrella of the Department of Employment and Economic Development (DEED). Funding is 80% Federal with a 20% state match. Most VRS offices are in CareerForce Centers across the State. VRS staff continue to work virtually during this Pandemic as do most DEED employees who are in Telework status. Minnesotans who are disabled and are having difficulty finding employment should access resources on [CareerForceMN.com](https://www.careerforcemn.com). You can find [additional resources](#) for job seekers with a disability on DEED's website.
- Minneapolis placed sixth and St. Paul 12<sup>th</sup> in a [recent ranking](#) of the **Best Cities for People with Disabilities**. WalletHub compared 182 cities nationwide on 34 key indicators of disability-friendliness across three larger categories – Economy, Quality of Life and Health Care. Both cities were highly ranked in the top three in the Health Care category – with Minneapolis ranked second and St. Paul third.
- [DEED is celebrating](#) the **75<sup>th</sup> Anniversary of National Disability Employment Month** and the **100<sup>th</sup> Anniversary of Vocational Rehabilitation Services**. Read about [three Minnesotans](#) who were able to prepare for, find and keep a job, thanks in part to the VRS program.
- Governor Tim Walz proclaimed October as [Disability Employment Awareness Month](#) recognizing that in order to benefit Minnesota's economy, the State of Minnesota must value the contributions of all people, including those with disabilities. More than half a million, or approximately 11%, of Minnesotans report having one or more disabilities, and the unemployment rate of this group is more than double that of people without disabilities.
- A new [VRS Student Career Services flyer](#) is ready to share with students and families.
- **Disability:IN Minnesota Inclusive Career Fair** will be virtual and held on Friday, November 6<sup>th</sup>, from 8 am until 12 pm. For those interested in the event, further details and registration information can be found [here](#). Employers of all sizes will be attending the event and hosting virtual booths.
- The Governor signed a [proclamation](#) for **Immigrant Integration Day** on October 26, in celebration of the importance of what immigrants bring to Minnesota. Immigrants have and continue to provide cultural vibrancy and economic and social capital. Governor Walz also recognized [26 Minnesota businesses and organizations](#) for their commitment to the integration and success of immigrant communities.
- The results from the [Second Quarter 2020 Job Vacancy Survey](#) conducted from this past Spring was released by the DEED Labor Market Information (LMI) Office revealing a decline in the number of job vacancies. Statewide, there are 2.4 unemployed persons for each vacancy, the highest it's been since 2012.
- DEED launched the [#GoodJobsNow](#) campaign a resource on DEED's website that helps Minnesotans connect directly to employers who are hiring right now. It addressed the paradox that while over 240K people are claiming unemployment benefits each week, we have hundreds of employers hiring for good jobs with above-market pay across the state. Read more about the campaign [here](#).



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- DEED partnered with Mossier to host the first [Proud to Work LGBTQ+ virtual career fair](#) on October 22nd. This Queer Career Fair is a new & virtual way to connect LGBTQ people and employers, all who advocate for the importance of inclusion to our community at work. Job seekers can create profiles and upload resumes in a confidential community that connects them to employers.
- October was **Manufacturing Month in Minnesota**. Manufacturing jobs in Minnesota pay an average annual wage of \$68,081, which is 16% higher than the state's overall average wage. Several of the current Top 30 [Jobs in Demand](#) in the state are in manufacturing, including [help-production workers](#) and [first-line supervisors of production and operating workers](#).

**DHS:**

- The RFP for Coronavirus Relief Funds for Children's Behavioral Health Providers and School Linked Mental Health Providers will post Monday, November 9 and close on Monday, November 16. If DHS does not receive enough applications, the RFP will remain open an additional week and close on November 23, 2020. If you would like to be a reviewer for these proposals, contact Mikki Maruska at [michele.maruska@state.mn.us](mailto:michele.maruska@state.mn.us) or 651-398-6496.
- [Subscribe](#) to receive postings about Grants and RFPs.

**Department of Corrections (DOC):**

- Received supplemental budget. The plan to close Togo and Willow River facilities has stopped. The current commissioner is adjusting to a more person-centered approach in meeting the needs of those who are incarcerated. Following AMEND training to change the prison culture.

**MDE:**

- MDE and Positive Behavioral Interventions and Supports (PBIS) Minnesota have been holding a series of webinars for back to school, distance learning, positive behavior supports, and ongoing support for planning and implementation during the pandemic. The series of webinars have been, and will continue to be, provided and recorded. The recording of the webinar "Six Feet, Clean Hands and Mask Up: How to create a positive, safe and supportive environment for all during a pandemic" was a collaborative effort by MDE's Early Learning, Special Education, School Support Divisions, MDE's School Climate Center, and PBIS-Minnesota. [View](#) the closed-captioned recording of this webinar. For additional information, please contact PBIS-Minnesota at [mde.pbis@state.mn.us](mailto:mde.pbis@state.mn.us).
- MDE was awarded the State Education Agency Project AWARE Grant. This federal grant provides \$1.8 million per year for five years. MDE will partner with school districts to implement the grant: North St. Paul/Maplewood, Intermediate 287, and Redwood Area Schools. Each district will hire a Project AWARE coordinator and train the entire district staff on mental health first aid and all student support staff will receive additional specialized trainings. All districts will utilize the School Health Assessment and Performance Evaluation system, and work to implement an integrated systems of support framework. MDE in partnership with DHS will also be providing additional statewide training.

**MDH:**

- Many employees are being reassigned in response to COVID needs.





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- The MDH Child and Teen Checkups team just posted a new web page with resources for Special Populations, the link can be found on the [C&TC Information for providers \(www.health.state.mn.us\)](#) web page. The [Special Populations](#) webpage is a culmination of work with multiple MDH programs including refugee health and the adolescent health programs. Resources are provided for those who work with:
  - Refugees and Other Immigrants with Humanitarian Status
  - Children and Youth in Foster Care
  - Justice Involved Youth
  - LGBTQ+ Adolescent and Young Adult (AYA)
- The resource [Guide to Preventive Care for Justice Involved Youth \(JIY\)](#) is a project that has taken three years of effort on the part of many people including U of M interns and MDHs student workers. A link to it is posted on the [Special Populations](#) webpage in the JIY section.
- This tool is meant to serve as a guide for community and public programs that provide services to high-risk youth and young adults. This tool outlines the challenges that justice involved youth (JIY) face in regards to accessing appropriate preventive health services. It provides an overview of JIY in Minnesota and information about healthy youth development and opportunities to provide positive strength based support. There are service provider specific recommendations and resources to optimize care and address the special health needs and challenges of the JIY population. The focus of this guide is on youth who are potentially eligible for Medicaid and Child and Teen Checkups services.
- If you have questions regarding these resource please contacts us: 651-201-3760 or [health.childteencheckups@state.mn.us](mailto:health.childteencheckups@state.mn.us)

**Minnesota Housing Finance Agency (MHFA):**

- No updates provided at this time



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## Workgroup Minutes:

### **Family Systems, Prevention, Intervention, & Supports**

**Date:** 10/16/2020

**Present:** Angie Schmitz, Tom Delaney, Jennifer Bertram

What is our charge? What are the services available?

- In the disability world, they created the disability hub to put all the services in one place so people knew where to access care and what was available. In mental health, services need to be more coordinated.
- The system of care group at DHS is working toward data collection that should help lead toward connecting services.

How can we communicate available services to families, and connect people to services?

- There is a lack of coordination for children, but also for adults. People struggle to access services.
- Tom will see if we can find a DHS staffer to join our committee who can help us put together recommendations for a system of care. Angie can reach out to her contacts too. We could use some people who are connected to systems. Tom is on the Children's Cabinet Mental Health Action Group.
- DHS has a group working on the implementation of the federal Family First law; Tom is on their work group. We need more family and child centered lenses in those discussions, rather than bureaucracy or programs.
- School CTSS was great 20 – 25 years ago, but it needs updating; it isn't working as well anymore.
- It can take a year for different services to talk to each other and connect to put together a plan.

### **Integration Care & Access**

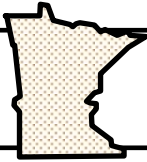
**Date:** 10/21/2020

**Attendees:** Sam Smith, Mary Kjolsing, Diane Medchill, Kim Strand, Courtney Iverson, Claire Courtney, Cynthia Christensen

After introductions, the group unanimously agreed that our section of official 2020 recommendations to the Governor et. al. was too long and wordy to be used for lobbying purposes. We agreed to create:

- bullet points for each of our sub-sections
- create an elevator speech for each of our sub-sections
- afterwards solicit individuals to share their stories describing the impact of these issues on real people and families. Mary Kjolsing volunteered to talk about access issues affecting her son and Kim Strand will see if her sister is willing to talk about how traumatizing things are for rural first responders.

The following individuals have volunteered to write up specific topics:



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- Workforce including loan forgiveness-Sam Smith,Claudia Daml (hopefully you will be willing to do this)
- Telemedicine- Dave Lee (hopefully you will be willing to do this) Cynthia Christiansen, Courtney Iverson
- Parity including access- Michael Trangle, Mary Kjolsing

Everyone agreed that they will accomplish this in the next 1 1/2 weeks and send their work product to Abbie as well as folks on this distribution list so that they can potentially be discussed in the next large group meeting.

Other issues that were raised include:

- Racial equity (Sam has volunteered to be our liaison to the formal committee working on this- Thanks!)
- The need to fight budget driven cuts to mental health (and substance use disorder) service likely to come
- The need to fight likely upcoming insurance company efforts to not cover telehealth and/or lower the rates
- Problems with the impact of 48 hour law
- The group highlighted how valuable Claudia has been in the group and is asking Abbie to perform another Doodle poll to see if it's possible to find a time where she as well as other attendees can all participate.

**Local Advisory Council**

No notes provided at this time

**Mental Health & Juvenile Justice**

**Date:** 10/21/2020

**Chair:** Jeff Lind (outgoing)

**Attendees:** Cecelia Hughes, Bravada Garrett-Akinsanya, Jeff Lind, Linda Hansen

**Agenda / Current Tasks:** Develop new goals for 2021

**Discussion:**

- Jeff has resigned from his leadership role of this committee. We had only four members attend today though Cece has indicated interest in chairing this committee IF she is reappointed to the Subcommittee in January. We will also welcome others that are interested and perhaps consider co-chairs.
- We discussed our next steps to disseminate the report. Is this going to be done by individual work groups or an overall plan by full committee?
- We discussed ongoing crisis of youth both in community and juvenile justice that need intensive mental health inpatient residential treatment such as PRTFs that do not have access. We discussed the recent publication of East Bethel PRTF with multiple and repeated violations.



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- We discussed the lack of clinicians of color needed in the mental health field in general and more specifically for those youth being incarcerated. Youth of color are disproportionately represented in Detention centers/Correctional placements.

**Decisions made:** Cece will be interim chair until one is named.

**Action items:**

Action Steps	Person Responsible	Due Date
Ask Abbie to put participation/time of work groups on the agenda	Linda Hansen	10/22/2020
Next group we will list people/places to share the report	Full group	TBD
Bravada will discuss opportunities for the Black Psychologists group to participate in addressing the problem of lack of resources as described above. We may also invite them to our work group at a later date.	Bravada	11/21/2020
Identify work group goals for 2021	Full group	12/31/2020

**Next meeting:** *Date:* 11/18/2020, *Time:* 10:00, *Location:* Virtual

**Mental Health & Schools**

**Date:** 10/21/2020

**Attendees:** Donna Lekander, Maleenia Mohabir, Al Levin, Tabatha Amundson, Sam Hedden, Jeff Lind, Lisa Hooeheim, Tom Delaney, Kim Stokes

- New chairs were elected: Lisa Hoogheem and Sam Hedden
- Introductions were made and previous work group members discussed what had been done in the past.
- We then discussed future formats, possible speakers, and goals for the upcoming year. Some thoughts and ideas:
  - Bring in perspectives from different work groups and state agencies
  - Learn more about non-traditional therapies (music, art, nature, animal, CTSS experts)
  - Alternative learning spaces and methods
  - Look at past recommendations in the Governor’s report and see if there are any speakers who could tell us if progress has been made on any recommendations
  - Bring in speakers from different associations, such as school counselors or school psychologists, social workers and school resource officers
  - Conduct more outreach and bring our report’s recommendations to other groups such as the state school board conventions, principals or MEA convention; have a booth at one of these
  - Ask educators what their mental health needs are so we can help to get more mental health support for them
- Discussion then focused on this last topic and a variety of items were brought up:



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- how to meet individual student needs for mental health, especially during Covid
- worries about staff morale
- how to support more diversity in our teachers and in our teaching
- how to incorporate diversity and cultural awareness in all we do and what recommendations we make
- the impact of physical and operational layouts of school buildings to structure desired behaviors

**Outreach to Cultural Diversity**

**10/21/2020**

**Chair:** BraVada Garrett-Akinsanya, Ph.D., LP

**Co-Chair:** Jode Freyholtz-London

**Attendees:** Kim Strand, Diane Medchill, Jennifer Betram, Linda Hansen, Lisa Hoogheem, Jode Freyholtz-London, Ashwak Hassan, Yolonde Lee, Rosella Collins-Puoch, Tabatha Amundson, BraVada Garrett-Akinsanya

**Workgroup Goals:**

- a. Review the evidence of mental health disparities in health care
- b. Recommend ways to eliminate those disparities to improve access to quality care
- c. Increase the proportion of racial minority providers in the Mental Health Workforce to better reflect the diversity in the general population of the State of Minnesota

**Agenda / Current Tasks:**

- a. Identify Liaisons to Other Work Groups
- b. Brainstorm Methods of Outreach to Diverse Communities
- c. Generate an Invited Guests List
- d. Discuss Topics to be Addressed by this group
- e. Delegation of Action Items

**Discussion:** Work group welcomed community members and invited guests, focused on constituting a membership roster representing liaisons from different work groups. Also, focused on electing a co-chair of the work group. Further, members discussed exploring ways to develop an outreach plan and/or activities that impact diverse communities.

**Decisions made:** Members elected Freyholtz-London to serve as co-chair with BraVada Garrett-Akinsanya.

**Next meeting:** *Date:* 11/18/20, *Time:* 2:00 pm, *Location:* Virtual – WebEx

**Recovery Supports**

**Date:** 10/19/20

**Workgroup Name:** Recovery Supports



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**Chair:** Unknown

**Attendees:** Angie Bartolomeo, Sam Hedden, Kim Strand, Tabatha Amundson, Gary Travis

**Discussion:**

- Sam: Concerns that people have access to secure telehealth support groups, access via on line or in person.
- Kim: Supporting MH recovery supports and service through telehealth would be very useful. AI Council is discussing the categorization of MI, SMI, SPMI and how this doesn't always align with Native American perspectives or understanding.
- Are there minutes available from previous meetings?
- Uncertainty about who is the chair of the meeting and who has or might participate.
- Angie: Group should look at the recommendations that were made to the Governor (track down the recommendations and send out to group-website)

**Decisions made:** n/a

**Action items:**

Action Steps	Person Responsible	Due Date
Determine chair. Angie willing to help out	Gary	
Make sure group has copy of recommendations to be reviewed and discussed at the next meeting	Gary	

**Next meeting:** *Date:* November 16, 2020, *Time:* 10:00 – 11:00 AM