MEETING NOTES

San Miguel Mental Health Advisory Panel DATE: July 25, 2019 9-11am

LOCATION: BOCC Conference Room 333 W Colorado Ave, Second Floor PHONE: (970)369-5498,,0138606#

1. Welcome & Introductions

a. Panel Members:

Carol Friedrich – San Miguel/Ouray County Social Services Director

Mike Gass - R1 & R2J Public Schools- absent

Richard Betts – Telluride Medical Center

Nicole Long – Uncompangre Medical Center

Amanda Jones - Center for Mental Health

Sarah Gluckstern – Community Member - absent

 $Pam\ Stewart\text{-}Maddox-Community\ Member/\ Juvenile\ Diversion$

Sarah Landeryou (Alternate) – Community Member – Wilkinson

Also present:

Amy Markell – San Miguel County Attorney Paul Reich – Tri-County Health Network

2. Review and Adopt Panel by-laws

- a. Bylaws pass
 - A. take off highlighted portions
- 3. Approval of minutes of previous meeting

4. Confirm 2019 meeting dates

- a. November 21^{st} Third Thursday
- b. December canceled

5. Review and Approve Request for Proposals: Mental Health Fund Administration a. RFP Draft Details

- A. Vendor selected for multiple years with RFP
 - 1. MOU every year
- B. For selection = qualitative ranking using score sheet
 - 1. Using numbers, not percentages
- C. Seeking in entities:
 - 1. Cost effective: look at budget proposed by the entity, but then we don't just want the lowest bidder
- D. Selection of entities: what you need from the entities so they have expectations of how you are evaluating them
 - 1. Ballot language: ask them how they are going to accomplish the ballot initiatives
 - 2. Research: "proven ability to perform data driven analysis"
 - a. Needs assessment, demographics, evidence based practices, recommend programs
 - b. Restate data-driven performance in the RFP, project information to make it clear to entities what we need

- c. Need to address in plan: General deliverables, specifics on scope of work, estimated budget (hourly breakdown?)
- 3. Is this a full time job? Part time job? up to them to propose their work needs
- **b.** General Concerns
 - A. Need recruitment and retention of workforce:
 - 1. entity needs to make recommendations and select how to meet needs
 - 2. Other areas outside of the 5 areas previously identified by MHAP eg. housing, lodging, medical
 - B. Ensure money is going to human beings/ service, not to administration or data collection
 - 1. RFP = administrative costs
 - 2. Data already there, need:
 - a. gaps and the scope of the project
 - b. recommendations
 - c. Data around workforce/people (BH Directory)
- **c.** LEVELS OF WORK: BOCC, San Miguel Mental Health Advisory Panel, Coordinating Vendor, Direct Service provider
 - **A.** *Goal: Accountability at all levels to taxpayer
- d. Fiscal oversight at all levels:
 - A. BOCC
 - 1. Ultimate decision on the dispersement of that money
 - 2. Takes recommendation from MHAP on budget and does annual approval of the budget
 - B. Advisory Panel
 - 1. "Board of Directors to Administrative Agency"
 - 2. Recommend how the money is going to be spent: vendors, service providers, services
 - 3. Defines programs
 - 4. Refills entity accounts payable account
 - 5. Conducts audit of entity
 - 6. Ensures sustainability of programs: who is rooted in the community?
 - 7. Recommends how entity spends money and holds entity accountable to budget and their deliverables
 - 8. Delegate RSP's to entity
 - C. Coordinator Entity
 - 1. Admin, Program, Staff, BUT not direct service provider
 - a. Larger admin cost
 - 2. Consultant:
 - a. Is paid directly
 - b. Creates a budget, selects vendors to implement services, vendor writes RFP to be approved by MHAP
 - 3. Coordinator/Facilitator
 - a. coordinates programs
 - b. has accounts payable account that is refilled
 - c. is subjected to an audit
 - D. Direct service provider
 - 1. Gets money!

- e. Contract oversight/ Authority oversight:
 - A. BOCC
 - 1. Appoint MHAP
 - 2. Approves the entity
 - 3. Approve annual budget
 - 4. Signs contract

B. MHAP

- 1. Annual updates to BOCC BOCC delegated to MHAP, consults for critical decisions eg. on-going MOU's, setting program goals, signing off on RFP, approving budget etc.
- 2. Submit annual budget for BOCC approved set goals which translates to the deliverables with the resulting budget to achieve those deliverable and goals recommendations to BOCC
- 3. Create a proposal to clearly state the deliverables of the entity:
- 4. How the entity would conduct needs assessment (how an entity would do this says a lot about what they are going to do)
- 5. Review Entity: ability/ progress on deliverables through regular panel meetings and quarterly reports
- 6. Help drive strategy with them
- C. Coordinating Entity
 - 1. Submitting quarterly reports: status report with benchmarks
 - 2. Attend MHAP
 - 3. Strategic plan: 3 year plan to meet deliverables
 - a. Provides needs assessment and gap analysis eg. "why don't we have enough providers?" (BH Commission already started, research already started in ballot initiative)
 - i. Needs based assessment, workforce assessment, and solution based recommendations
 - b. Organize best practices, organize partners, collaborate with current partners and workforce, pull people into the workforce, recruiting other areas, incentivizing the current workforce eg. professionals in the substance abuse treatment field
 - i. To meet these goals: workforce development and retention
 - 4. Administers RFP on MHAP's behalf
- D. Direct Service provider
 - Could become direct service provider but need to go through a process to become a direct service providers/ apply to MHAP as Direct Service Provider

6. **Timeline:**

- a. RFP final approval by August 15th
- b. Published by August 23rd
- c. Submission of proposals by August 27th
- d. Due date for proposal September 10th
- e. Interview and selection of entity by the MHAP during September 26th meeting.
- f. October BOCC meeting approval of entity