Mission: To promote hope, recovery, resilience, quality of life and wellness in Washtenaw County by providing high quality, integrated services to eligible individuals.

WASHTENAW COUNTY COMMUNITY MENTAL HEALTH (WCCMH) MILLAGE ADVISORY COMMITTEE (MAC) MEETING AGENDA

4135 Washtenaw Ave, Ann Arbor, MI
Learning Resource Center, Michigan Conference Room
August 12, 2019
4:00pm-5:00pm

I. Introductions (5 minutes)

II. Audience Participation (see guidelines below) (5 minutes)

III. Millage Advisory Committee minutes ACTION (5 minutes)
   - Millage Advisory Committee meeting minutes and actions 6/10/19 (Attachment #1)
   - Millage Advisory Committee meeting minutes and actions 7/8/19 (Attachment #1A)

IV. Discussion Items (15 minutes)
   - Millage Process, Investments, and Progress Update

V. Old Business (10 minutes)
   - Communication Plan (Attachment #2) ACTION

VI. New Business (15 minutes)
   - WISD/Umatter Funding Proposal (Attachment #3) ACTION

VII. Items for Future Discussions (5 minutes)
   - Process Development for Requests for Millage Funds
   - Housing RFP
   - NAMI proposal

VIII. Adjournment

Audience Participation Guidelines:
- Three (3) minutes are allowed per speaker
- Speakers are asked to bring a copy of their concerns/comments in writing
- Resolutions on issues will be brought to the appropriate committee as necessary
WASHTENAW COUNTY COMMUNITY MENTAL HEALTH AGENCY (WCCMH) MILLAGE ADVISORY COMMITTEE MEETING MINUTES DRAFT
4135 Washtenaw Ave, Ann Arbor, MI Learning Resource Center, Huron Conference Room June 10, 2019 3:30pm


MEMBERS ABSENT: D. Jackson, K. Walker


OTHERS PRESENT: M. Creekmore, L. Lutomski, K. Holman, R. Jefferson

J. Martin, WCCMH Board Chair called the meeting to order at 3:30 pm.

I. Introductions
   - The Millage Advisory Committee members introduced themselves

II. Audience Participation
   - None

III. New Business
   - Identifying Millage Advisory Committee Chair
     - J. Martin stated that the WCCMH Executive Committee appointed N. Graebner as the Millage Advisory Committee Chair pending approval by the WCCMH Board at the June 21, 2019 meeting.

   MOTION CARRIED

   - Meeting Frequency
     - T. Cortes stated that the original plan was for the committee to meet quarterly but after much thought the WCCMH Board would like to have the committee meet either bi-monthly or monthly meetings.
     - Decision from the committee to meet monthly on the 2nd Monday from 4-5pm and then possibly move to bi-monthly meetings as projects are established.

   - Communication Plan
     - L. Gentz presented the Communication Plan to the committee.
     - The CMHAC recommendation document was emailed to the committee members for their review.
     - This committee will review the Communication Plan document and have further discussion at the July 8th meeting.
IV. Discussion Items

• Process Development for Requests for Millage Funds
  o L. Gentz presented the process to request Millage Funds for the committee to review.
  o Suggestion to have an identical structure on all funding applications to ensure that they are comparable. Some suggestions to include on the application were:
    ▪ What are the guidelines?
    ▪ Potential conflict of interest statements from applicants
    ▪ Expectations of the grant recipient
    ▪ What is the frequency of the improvement updates (annually/monthly/etc.)?
    ▪ Spending timeline and what will happen with excess funding if not used during the timeframe agreed upon.
  o Suggestion to use caution about how information is promoted. Decision to have promotional information dispersed through this committee instead of the recipients.

• CARES team update
  o There have been approximately 200 referrals that came in mainly through the Access Department with some referrals also coming from the local emergency rooms and Packard Health.
  o Staff have engaged and assessed about 100 of the 200 referrals from Ypsilanti, Ann Arbor, Pittsfield Township, Dexter and Chelsea areas.
  o Majority of clients served meet the mild to moderate population.
  o This program is diverting a lot of people from the hospitals
  o There are 6 Peer Support Specialists on the team
  o There are 2 sites in Chelsea, 2 in Manchester, 1 in Dexter, 1 potential site in Northfield Township and possibly an additional site in Ypsilanti to expand the service sites
    ▪ Anti-stigma campaign
      o This Project launched with Public Health who is developing a survey.
      o Focusing on youth for the first 2 years of the campaign
    ▪ OCED is getting close to finalizing language on the crisis housing, transitional and permanent housing RFP.
    ▪ Able Change
      o There is another meeting in September which could help to review some other opportunities
    ▪ Youth Mapping
      o The Planning Committee is meeting this week to look at the over representation with youth on substance use and Mental Health issues within the Judicial System.

V. Items for Future Discussion

• If requests don’t fit within the Millage program look at what other supports are out there.
• Communication plan
• Provide metric sheet on number served-M. Tasker
• Determine responsibilities, authority and roles for this committee as delegated by the WCCMH Board.

VI. Meeting adjourned at 4:30pm
N. Graebner called the meeting to order at 4:02 pm.

I. Introductions
   - D. Jackson from the Washtenaw County Sheriff’s Office (WCSO) introduced himself as a new member of the committee.

II. Audience Participation
   - M. Larson, Whitmore Lake Health Equity Leadership Team thanked the CMH team for their work with the local police department to provide services and continuing to educate the community.

III. Millage Advisory Committee Minutes and Actions from 6/10/19
   - The Millage Advisory Committee Minutes and Actions from 6/10/19 were reviewed.

   There was not a quorum at this meeting, so no actions were taken. The minutes will be brought back to the Millage Advisory Committee at their next meeting.

IV. Discussion Items
   - Communication Plan feedback
     - L. Gentz presented the Communication Plan to the committee.
     - This plan will be used to disseminate information to the community regarding millage.
     - The budget for the communication/education/engagement is for $150,000-$250,000.
     - This document would be reviewed annually.
     - Request for print option instead of electronic communications for those residents that don’t have access to technology.

   This Communication Plan will come back to the August Millage meeting for action due to the committee not having a quorum.

V. Old Business
   - None

VI. New Business
   - Community Mental Health Advisory Committee (CMHAC) Recommendations
The Community Mental Health Advisory Committee (CMHAC) recommendations were reviewed. L. Gentz stated that this is a background document that shows the history of how this committee came to be. This document is a compilation of all the CMH Board and CMHAC recommendations.

- Millage Process, Investments, and Progress Presentation
  - L. Gentz presented the Millage Process, Investments and Progress Presentation.
  - Suggestion to tie in the Washtenaw County Sheriff’s Office (WCSO) progress with the WCCMH progress to the community
  - Suggestion for a grid with the initiatives, what the budget plan/investments are, what the outcomes are to track and see clearly how the millage funds are being spent.
  - Suggestion to compile a list of organizations using millage funds that contract with WCCMH.

VII. Items for Future Discussion
- Process Development for Requests for Millage Funds
- Housing RFP
- Proposal from NAMI

VIII. Meeting adjourned at 4:50pm
Proposed Target Audiences.

1. **High-risk populations.** Teenagers and young adults; individuals with co-occurring conditions; individuals with moderate to severe mental health conditions; individuals who are uninsured or under-insured

2. **Traditionally under-served populations.** Individuals who live and work in traditionally under-served urban and rural communities; individuals who experience barriers and need assistance connecting to appropriate community resources; individuals with limited economic and social resources

3. **Key stakeholders.** Individuals across the county who work closely with those who live with mental health and substance use disorders

Strengths.

- Millage financial resources and CCBHC grant
- Numerous mental health and substance use disorder providers across the county and myriad social and health service providers
- Highly educated and aware community
- High insurance rate, on average, across the county

Weaknesses.

- High socioeconomic and geographic health disparities across county
- Systemic underfunding of Michigan’s public mental health system
- Complex treatment system can be difficult for residents to navigate
- Low reimbursement rates for providers who work with Medicaid and Healthy Michigan Plan enrollees

Opportunities.

- Numerous opportunities for collaboration with well-established agencies and entities across the county
- Evidence-based best practices to enhance service and equity objectives
- Grant opportunities to advance integration and outcomes

Threats.

- Millage may not be renewed
- Agency Medicaid budget deficit continues due to chronic underfunding

Proposed Communications Objectives.

**Washtenaw County residents and stakeholders—particularly high-risk and traditionally under-served populations—will:**

1. Understand how to quickly and easily access a broad range of evidence-based mental health and substance use services—from prevention services to treatment and recovery services—through WCCMH.

2. Understand millage-supported services that are launched and led by the county’s government entities, nonprofit organizations, and health and human services providers.
3. Be ready and empowered to support individuals with mental health disorders, substance use disorders, and co-occurring conditions.
4. Have opportunities to share their experiences with, and suggest improvements to, the county’s mental health safety net.
5. Have the information they need to objectively assess the millage’s impact on the community.

With a focus on reaching Washtenaw County residents and stakeholders—and with special attention to equity including high-risk and traditionally underserved populations—we propose:

**Proposed Strategies.**

**Strategy 1.** Promote behavioral health services provided by WCCMH.

**Strategy 2.** Promote millage-supported services that are launched and led by WCCMH and other organizations and entities across the county.

**Strategy 3.** Develop and disseminate anti-stigma campaigns and other educational programs to enhance prevention.

**Strategy 4.** Create ways for residents and key stakeholders to share their experiences with, and suggest improvements to, the county’s BH safety net.

**Strategy 5.** Share quantitative and qualitative data to illuminate the millage’s impact on the community.

**Proposed Tactics: Preparation and Publications.**

**Preparation.** Develop contact lists for key community stakeholders, media representatives, local government leaders, and other interested parties and invite them to receive periodic millage updates.

**Preparation.** As WCCMH staff work collaboratively with local agencies and entities, and as millage funds are invested to support new initiatives, provide communications support to boost visibility.

**Preparation.** Subcontract anti-stigma work with trusted community outlet and support efforts to collect input from urban and rural areas to shape campaigns. Develop new, evidence-based educational programs.

**Preparation.** Benchmark the feedback mechanisms employed by CMH providers in best-practice communities across the state and nation.

**Preparation.** Develop a list of key metrics and consistent data collection methods as well as a report format to share key metrics about millage-funded initiative outcomes.

**Publications.** Develop reports and news stories about WCCMH’s new and ongoing initiatives.

**Publications.** Write news stories about millage-funded initiatives.

**Publications.** Write news stories about educational programs and anti-stigma efforts.

**Publications.** Assemble anonymized feedback annually and share internally to inform future activities.

**Publications.** Develop annual report with data and infographics for distribution to key audiences.
Proposed Tactics: Promotion.

**Strategy 1.** Promote behavioral health services provided by WCCMH.
- Send e-newsletter quarterly with news about new and ongoing WCCMH activities.
- Develop stories about millage-funded initiatives and share in quarterly e-newsletter.
- Work with partners on press releases, as appropriate.
- Share stories via WCCMH Facebook, Twitter, and Instagram accounts.
- Use social promotion—paid social media advertising—to enhance the reach of posts describing key initiatives.
- Redesign WCCMH website to make it easier for key audiences to find the services and educational materials they need.

**Strategy 2.** Promote millage-supported services that are launched and led by WCCMH and other organizations and entities across the county.
- Develop stories about millage-funded initiatives and share in quarterly e-newsletter.
- Work with partners on press releases, as appropriate.
- Share stories via WCCMH Facebook, Twitter, and Instagram accounts.
- Use social promotion—paid social media advertising—to enhance the reach of posts describing key initiatives.
- Create one or more new pages on WCCMH website to help key audiences locate millage-funded programs run by other entities.

**Strategy 3.** Develop and disseminate anti-stigma campaigns and other educational programs to enhance prevention.
- Highlight anti-stigma work and educational programs in quarterly e-newsletters.
- Promote this work via WCCMH Facebook, Twitter, and Instagram accounts.
- Use social promotion—paid social media advertising—to enhance the reach of posts.
- Create one or more new pages on WCCMH website to help key audiences locate millage-funded programs run by other entities.
- Create one or more pages on WCCMH website to promote educational programs.

**Strategy 4.** Create ways for residents and key stakeholders to share their experiences with, and suggest improvements to, the county’s BH safety net.
- Announce collaborative activities and feedback mechanisms via e-newsletter and social media, as appropriate.
- Promote annual report through e-mail and print outlets.
- Share data from report via WCCMH Facebook, Twitter, and Instagram accounts.
- Create one or more new pages on WCCMH website to help key audiences locate annual report and associated data about millage-funded activities.

**Strategy 5.** Share quantitative and qualitative data to illuminate the millage’s impact on the community.
- Highlight anti-stigma work and educational programs in quarterly e-newsletters.
- Promote this work via WCCMH Facebook, Twitter, and Instagram accounts.
- Use social promotion—paid social media advertising—to enhance the reach of posts.
- Create one or more new pages on WCCMH website to help key audiences locate millage-funded programs run by other entities.
- Create one or more pages on WCCMH website to promote educational programs.
Proposed Measures.

**Strategy 1.** Promote behavioral health services provided by WCCMH.

- # of people receiving e-newsletters; # of opens, clicks, and downloads.
- # of press releases sent each year; # of positive stories released by local media outlets.
- Website analytics including # of users, amount of time spent on site, etc.
- Social media metrics including # of followers, likes, posts, engagements, etc.

**Strategy 2.** Promote millage-supported services that are launched and led by WCCMH and other organizations and entities across the county.

- # of people receiving e-newsletters; # of opens, clicks, and downloads.
- # of press releases sent each year; # of positive stories released by local media outlets.
- Website analytics including # of users, amount of time spent on site, etc.
- Social media metrics including # of followers, likes, posts, engagements, etc.

**Strategy 3.** Develop and disseminate anti-stigma campaigns and other educational programs to enhance prevention.

- Proposed: # of campaign pieces developed and # of individuals and organizations shared with.
- Proposed: Social media metrics including # of followers, likes, posts, engagements, etc.
- # of individuals attending educational programs.
- Feedback collected after educational programs.
- # of individuals who go on to teach programs of their own following training.

**Strategy 4.** Create ways for residents and key stakeholders to share their experiences with, and suggest improvements to, the county’s BH safety net.

- # of people and organizations that participate in planning and design activities.
- # of people who provide anonymized feedback.
- Regular review of feedback and continuous quality improvement.

**Strategy 5.** Share quantitative and qualitative data to illuminate the millage’s impact on the community.

- # of people receiving annual report; # of opens, clicks, and downloads.
- Website analytics including # of page visitors, amount of time spent, etc.