

SOUTHWEST HEALTH AND HUMAN SERVICES COMMUNITY HEALTH BOARD

MINUTES

Date:

January 20, 2016

Place:

Lyon County Government Center

Public Health Conference Rooms 1 & 2

Marshall, Minnesota

Opened: 9:25 am Adjourned:

9:57 am

The monthly meeting of the Community Health Board for Southwest Health and Human Services was held on Wednesday, January 20, 2016 in the Public Health Conference Rooms 1 & 2 of the Lyon County Government Center at 607 West Main Street, Suite 200 in Marshall, Minnesota. The meeting was called to order by Chairperson VanDeVere.

Members present:

Jeane Anderson **Rick Anderson** Ron Boyenga Carol Ann Flahaven

Joan Jagt

Priscilla Klabunde **Bob Moline** Les Nath Jim Salfer **Charles Sanow** Lois Schmidt Steve Schulze Sherri Thompson Mic VanDeVere Pam VanOverbeke

Members absent:

Dan Wildermuth

Guest Present:

Wong Nystrom

Staff present:

Jennifer Beek Karla Drown Karri Harvey Dale Hiland Stacy Jorgensen Krista Kopperud

Amber Groen Ardis Henriksen Amanda Holzapfel Jenifer Klein

Carol Biren

Stacy Longtin Marie Meyers James Muller (intern)

Cindy Nelson Corey Remiger

Chris Sorensen

Christine Versaevel

Hannalora VanNevel (intern)

Nancy Walker

J. Election of Officers

Elections were held during the Human Services Board meetings. Mic VanDeVere was elected Chairperson and Sherri Thompson was elected Vice-Chair.

K. Consent Agenda –

Chairperson VanDeVere asked if there were any additions or corrections to the consent agenda. Motion by Salfer and second by Boyenga: To approve the consent agenda has presented. The motion carried unanimously.

L. Financial -

The financial report was forwarded to the Governing Board by the Human Services Board.

M. Caseload -

No comments or questions regarding the caseload numbers.

N. Decision Items -

No items on the agenda.

O. Discussion/Information –

1. Chairperson VanDeVere invited Marie Meyers, Nursing Supervisor, and Jenifer Klein, Adult Services Supervisor, to come forward to report on the MNChoices program. Marie stated that they had last reported on MNChoices in May 2015 and felt it was time to give an update. She gave an update of the types of assessments that have been included within the MNChoice, which is a person centered assessment. The agency started doing assessments in 2015 on new clients and now need to do MNChoices assessments with all MA clients. A MNChoices assessment takes 8 - 10 hours, which could possibly be done over multiple visits. The actual assessment document is much longer than either the PCA or legacy assessment documents. The agency has been asked to be part of the Mentor Alliance group which meets quarterly. The certification process for MNChoices takes a length of time to complete. When they had reported in May they talked about a proposal that had been submitted to do a quality improvement project, which was to set up an assessment transition team. This team is made up of six (6) members, four (4) Social Workers and two (2) Public Health Nurses. The decision making team is working on developing a set procedure to be followed. They listed the pros of the program as: the agency has been proactive in planning and implementation (making us ahead of other agencies); the agency has been supportive of having staff on DHS teams; the agency will now pilot the new assessment tool; staff from DHS will be coming out to our service area to shadow agency staff. The challenges of the program are: the length of time needed to complete the assessments; needing to complete assessment on 100% of new cases and 50% of cases already active; the county of financial responsibility will be responsible for traveling to do assessments in other areas; the state expects the assessor to be able to complete two – three assessments per week; people are asking, on the suggestion of providers, for a MNChoices assessment, which if requested needs to be done; there is a concern that the consumer will experience a time lag before case management services begin. During 2015 agency staff have completed 217 new assessments and 115 reassessments. The reimbursement for the MNChoices program is based on time studies, using random moments. The members of the Board asked if there was anything that they can do to help alleviate the time lapse between the assessment and being started on case management. They stated that every new program has pros and challenges and this program is no different. Marie and Jenifer suggested that they work through AMC and other professional organizations.

Chairperson VanDeVere asked if there was anything further to bring to the Board. Hearing nothing he adjourned the meeting at 9:57 am.	
	Approved Date
	Authorized
	Chairperson, Community Health Board
	Recording Secretary, Community Health Board
Attest:	