

Advisory Board on Alcoholism and Drug Abuse
Alaska Mental Health Board

Draft Quarterly Board Meeting Minutes

Baranof Hotel - Juneau, Alaska
March 21 – 23, 2023

Dually Appointed Members Present: Monique Andrews (Zoom), Robert Dorton, Diane Fielden

AMHB Members Present: Acting Chair Brenda Moore, Sharon Clark (Zoom), Kurt Hoenack (Zoom) Karen Malcolm-Smith, Tonie Protzman, James Savage, Jeanne Brady

AMHB Members Absent: Tanya Hicks, unexcused

ABADA Members Present: Acting Chair Anthony Cravalho, Kathleen Totemoff (Zoom), Chase Griffith, Philip Licht, Christine Robbins, Renee Schofield, Kara Nelson.

ABADA Members Absent: Katholyn Runnels, unexcused

Ex-Officio Members: Acting Director Farina Brown, excused; Carrie Collins (Zoom); Acting Deputy Director Laura Russell (Zoom); Adam Rutherford, excused; Sharon Fishel; Deputy Commissioner Emily Ricci; Duane Mayes (Zoom); Shannon Dilley, excused

Staff: Leah Van Kirk, Acting Executive Director; Jennifer Weissaupt, Health Planner II; Stephanie Hopkins, Advocacy Coordinator; Eric Morrison, SSPC

Minutes Prepared by: Paula DiPaolo, Peninsula Reporting

TUESDAY, MARCH 21, 2023

CALL TO ORDER – 8:47 a.m.

Acting Chair Anthony Cravalho called the meeting to order and thanked everyone for attending. The mission statement was read. Anthony Cravalho acknowledged the loss of Lee Breinig and asked for a moment of silence.

Leah Van Kirk, acting executive director, acknowledged that the members probably have a lot of emotions regarding the loss, and she welcomed members to step out if necessary. She also said that Eric Boyer from Alaska Mental Health Trust was there and would be available for emotional support for the duration of the meeting.

APPROVAL OF THE AGENDA AND PREVIOUS MEETING MINUTES

Renee Scholfield **MOVED** to approve the agenda as presented, **SECONDED** by Tonie Protzman. Hearing no objection, the motion **PASSED**.

Diane Fielden **MOVED** to approve the minutes from the meetings of January 11, February 2, and February 8, 2023 meetings as presented, **SECONDED** by Bobby Dorton. Hearing no objection, the motion **PASSED**.

COMMUNITY WELCOME

Anthony Cravalho introduced Representative Sara Hannan who thanked the group for the work it does to help Alaska through the fog that affects all of us. She urged everyone to take a walk today if the opportunity arose, and she suggested two places to walk. The sea walk down along the waterfront will show the Juneau springtime, and on the southern end of the boardwalk, looking back north, there is a beautiful mural of Elizabeth Peratrovich visible. An inland walk is uphill to Basin Road and the place where gold was first found in Juneau.

This week is Gold Medal week, a 74-year basketball tournament that is one of the largest cultural and economic events in Juneau and attracts people and basketball teams from all across Southeast.

ETHICS DISCLOSURES

<u>Anthony Cravalho</u>	Works for a tribal health organization that is a state CBHTR grantee, and they are in the process of applying for a Trust grant.
<u>Robert Dorton</u>	Employed by Tanana Chiefs Conference and works with the Fairbanks Re-Entry Coalition.
<u>Kara Nelson</u>	Works with True North Recovery, which receives Medicaid reimbursement, state grants, and Alaska Mental Health Trust grants; co-chair of the Mat-Su Re-entry Coalition and on the board of Careline.
<u>Philip Licht</u>	President and CEO of Set Free Alaska which bills Medicaid and has state grants. Board member of Mat-Su Health Foundation, which has received some state pass-through federal grants. Board member of Alaska Behavioral Health Association and Recover Alaska.
<u>Kathleen Totemoff</u>	Employed by Ninilchik Traditional Council, which receives Medicaid funding. Board member of Nine Star Enterprises.
<u>Brenda Moore</u>	President of Christian Health Associates, which received state grants and also Medicaid reimbursement.
<u>James Savage</u>	Director of operations for True North Recovery, which receives state funding, Mental Health Trust grants, and Medicaid pass through. Co-chair for the Mat-Su Opioid Task Force and vice-president of Mat-Su Alano Club.
<u>Kurt Hoenack</u>	Works with the Opioid Task Force, which is partnered with Project Hope; board member for Mat-Su Housing, which takes federal and private grants.
<u>Tonie Protzman</u>	Executive director for the National Association of Social Workers, which receives federal funding.

The other members of the Boards had no conflicts to declare.

COMMITTEE AND COUNCIL UPDATES

Executive Committee

Leah Van Kirk reported that at its March 17th meeting, the committee discussed a resolution that Lee Breinig had brought forward, and it was added to the board agenda for March 23rd.

At that same meeting, a motion was made to recommend removal of board member Diane Fielden. That motion passed and was submitted to Boards and Commissions for consideration. Another motion passed recommending that Diane Fielden no longer chair the ABADA board.

Chase Griffith asked why Diane was removed from the chair position. Anthony Cravalho responded that it was based on an HR report and did not go into any detail.

Legislative Advocacy

Stephanie Hopkins, advocacy coordinator, called the boards' attention to the legislative advocacy packet and explained they will be going through those in detail later during the meeting.

Statewide Suicide Prevention Council (SSPC)

Eric Morrison announced the release of the new Five-Year State Plan. Anyone interested in a copy of it should contact Eric, and it's also on the website. The State Plan was created in collaboration with many partners and board members. The name of the plan is "Messages of Hope," and quotes from Alaskans are included at the top of each page. The goals in the plan are as follows:

1. Address upstream factors that impact suicide
2. Implement a broad-based public health response to suicide
3. Reduce access to lethal means
4. Enhance Alaska's crisis continuum of care
5. Address special considerations for Alaskan youth, seniors/elders, veterans, and military families
6. Improve the quality of data and research for suicide prevention efforts.

Thank you to the Trust for providing the one-time increment to help implement the plan. The SSPC will be teaming up with the Division of Behavioral Health to create a Statewide Suicide Prevention Conference May 17th and 18th in Anchorage where they will be discussing the web of causality.

The next SSPC quarterly meeting will be held April 18th.

Leah Van Kirk added that an incredible amount of work and thoughtfulness went into developing this plan, which has laid a foundation for a better system for suicide prevention that goes back to honoring communities and regional differences.

EX-OFFICIO UPDATES

Department of Public Health – Emily Ricci

Department of Health Deputy Commissioner Emily Ricci, thanked everyone and stated she is looking forward to working with the groups and participating in the meetings.

Deputy Director of the Division of Behavioral Health Laura Russell provided the following updates:

- LMFT LPC regulations will be effective on April 16th.
- Telehealth regulations are posted for public comment.
- The 1115 waiver 4.5 percent rate increase regulation will be in effect March 26th.
- The 1115 renewal application has been submitted, and public comment closes April 9th.
- The public health emergency will end on May 11th.
- Development of regulations regarding crisis stabilization centers is ongoing.
- The hospital association and Department of Health are successfully partnering on a series of behavioral health webinars.

D.C. Ricci reported on a few more ongoing topics:

- A complex care group is being coordinated to identify some people who do not fit well within the current system of supports.
- The Department of Health is working on an initial response to a report by the Department of Justice that adolescents are being unnecessarily institutionalized.
- The Division of Public Assistance has been struggling with a backlog of SNAP applications since fall, and they have hired additional people to address those needs.
- Requirements to redetermine Medicaid enrollees' eligibility status will begin April 1st and will run for 12 months. Eligibility requirements had been suspended since 2020 in response to the pandemic.

In response to a question from Brenda Moore regarding the Complex Behavioral Collaborative, D.C. Ricci stated this complex care group program complements the collaborative, and she discussed the visions of the new group.

Anthony Cravalho asked if the new employees for the SNAP program will be temporary or permanent. D.C. Ricci responded that the number of permanent employees depends on the transition of records from one computer system to another and the level of effort required once that is accomplished.

Anthony Cravalho asked what the state's ideas were on either trying to maintain or expand behavioral health grant funding in the future. D.C. Ricci shared that there has been a lot of discussion about grants versus 1115 versus State Plan services. It is a top priority that whenever there is the ability to leverage additional federal funds to support the behavioral health system, that is what needs to be done.

Department of Education and Early Development – Sharon Fishel

Sharon Fishel, Department of Education health and safety team leader, reported on the staff, programs, and duties of her unit. She clarified that school counselors are not therapists but do mental health counseling, social-emotional counseling, academic counseling, and career counseling. Many Alaska schools do not have access to counselors, and schools are lacking in the supports to meet the mental health and crisis needs for adolescent youth. She believes this is a workforce problem and cited the low number of counseling graduates from UAA and UAF. The Department has the Project AWARE grant for Juneau, Fairbanks, and Bering Strait School District to hire social workers or counselors to work in their schools. In Fairbanks they are working with the Alaska Behavioral Health Child Trauma Center to place four clinicians in four schools.

Sharon Fishel reported that the Department put out a trauma-engaged policies and practices implementation survey to all principals in the state, which had a 60 percent response rate. The data is being reviewed by Regional Educational Laboratory – Northwest. She will report on the data in the fall meeting.

A Safety Well-Being Summit is being planned for September 13 – 14 in Anchorage.

Alaska Housing Finance Corporation – Carrie Collins

Carrie Collins, policy and program manager for Alaska Housing Finance Corporation, shared that they received 30 new vouchers for long-term rental assistance for persons experiencing disabilities. A required plan outlining all the department's programs is available for public comment and is available at [www.https://ahfc.us](https://ahfc.us). The Anchorage Housing Choice Voucher wait list is opening for the month of April and is also available online. Carrie discussed the eviction process and various strategies to avoid eviction or to mitigate the circumstances leading to the eviction.

ALASKA MENTAL HEALTH TRUST AUTHORITY

Eric Boyer introduced Jeff Jessee, who was CEO of the Trust for 21 years. He is a lawyer and also served as the Dean of Health at UAA. He works now on the project management team for Crisis Now as a subcontractor. Jeff Jessee gave an overview of the history of the Trust:

- In territorial days there was no delineation between different disability categories.
- It was common that a person with a mental disability would be accused of the crime of being an insane person at large because the federal territory officials were responsible for the cost of criminal cases. If it was a civil action, the territory was responsible for the cost.
- These people were warehoused at Morningside Hospital near Portland.

When statehood was starting to be discussed, the responsibility of providing mental health services would be transferred from the federal government to the new state, but the new state had no means of support, and the federal government owned about 98 percent of Alaska lands.

In 1956, the Alaska Mental Health Enabling Act was passed, which provided cash for construction of API and the purchase of Harborview. It also provided funds to operate the new facilities that would phase out in eight years, and it set aside the most valuable million acres of land in Alaska to hold in trust to generate money to pay for a mental health program.

The state legislature was designated the trustee of the lands, and over time the legislature designated some trust lands as parks and preserves, released lands to individuals, and allowed local governments to select over 40,000 acres for community purposes. The legislature realized that the title to the land removed from the trust was clouded, and so in 1978 it designated all trust land as general state land, and a mental health income account was created to compensate the trust for lost revenue, but the legislature never made any deposits to that account.

In 1982 a lawsuit was filed alleging breach of trust, and in 1985 the Alaska Supreme Court ruled that the legislature breached the trust and had to give the land back. However, only about 35 percent of the original land remained. The court also ruled that all the people who were going to Morningside were beneficiaries.

There were a number of settlement attempts, and in 1994 the Alaska Mental Health Trust Authority was created to act as trustee to ensure that management of the trust was focused on the beneficiaries and not other political issues. Program improvements included the requirement for the Comprehensive Integrated Mental Health Program Plan, four advisory boards to make recommendations, and certain departments to be official advisors.

The two divisions that oversaw substance abuse and mental health issues in the state were consolidated into the Division of Behavioral Health, and since 2005, the AMHB and ABADA boards have operated under one executive director and staff.

Eric Boyer then explained the Mental Health Trust principles and the role of the board in overseeing the perpetual fund, all of which is for the beneficiaries to support them and help improve their lives. When a Trustee seat is vacant, an active recruitment process is initiated, and a formal recommendation is forwarded to the Governor who makes the appointment. The Governor has leeway to appoint the recommended candidate or one of his choosing.

The Trust funds are managed by the Permanent Fund Corporation, and currently 4.25 percent is available annually. The Trust, together with state departments, formulated the Integrated Comprehensive Mental Health Program, which has nine goals regarding early childhood, healthcare, economic and social wellbeing, substance use disorder prevention, suicide prevention, protection of vulnerable Alaskans, service in least-restrictive setting, services in institutional setting, and workforce, data, and funding.

The FY '23 budget includes the following subject areas and approximate amounts:

- Mental health and addiction interventions, \$6.2 million.
- Disability justice, \$2.7 million.
- Beneficiary employment and engagement, \$2.2 million.
- Housing and home & community-based services, \$4 million.
- Workforce development, \$1.3 million.
- Early childhood intervention and prevention, \$1.8 million.
- Advisory board requests, \$1 million.

- Other non-focus area allocations, \$8 million.

The Trust provides grants related to partnerships with eligible organizations being foundations, government agencies, tribal entities, nonprofits, and corporations that serve Trust beneficiaries. The Trust also provides dental, microenterprise, and mini grants.

The Trust Land Office manages the Trust land, managing hunting permits, mineral rights, timber, right-of-way access, and the sale of real estate.

A Memorandum of Agreement between the Trust and AMHB/ABADA defines the roles and responsibilities of each and acknowledges that each organization has respective statutory obligations. Steve Williams, CEO of the Trust, commented that the Trust has MOAs with other boards, such as the Governor’s Council on Disabilities and Special Education, Alaska Commission on Aging, and other boards that represent beneficiaries.

Brenda Moore commented that some board members were against any kind of integration of the boards at first, but it has all come together well and is working fine. Chase Griffith asked if she thought the boards were more effective joined rather than separate. Brenda replied that it has streamlined processes because much of the work overlaps and intersects.

Anthony Cravalho asked Jeff Jessee to talk about the process to combine the two boards under one staff. Jeff replied that there is always a push-pull with the legislature over funding, but when the legislature was reluctant to fund the boards, the Trustees allocated resources to support the board staff in order to have strong, effective advisory boards.

Anthony Cravalho asked if the mini-grant amount would be increased in the future since they have huge impacts for individuals and to try to offset inflation, especially in the rural communities. Steve Williams replied that the mini-grant funding has increased over time although not for several years. One challenge to increasing the grant amounts is the ability for the contractor to manage the grants.

ALASKA OFFICE OF CHILDREN’S SERVICES (OCS) UPDATE

OCS Director Kim Guay reported to the boards as follows:

- Reports of concern for child welfare come from law enforcement, medical personnel, and schools. Over 19,000 calls were received during calendar year 2022.
- About 35 percent of the calls get screened in for investigation to determine (1) if the child was maltreated, (2) the probability of future risk of abuse and neglect, and (3) if they are safe or not.
- A determination that a child is unsafe usually results in involvement in the courts and the child entering the foster care system.
- At the end of 2022, almost 3,000 children were in out-of-home care, and the average time spent in foster care is 23 months.
- OCS investigates allegations of maltreatment in four categories: neglect, physical abuse, sexual abuse, or mental injury. Neglect is the most commonly substantiated allegation of

child maltreatment in Alaska and is typically comprised of substance and alcohol abuse and sometimes domestic violence. Of all the substance abuse categories, alcohol abuse is seen most often.

- They try to find services for families that have had a child removed, but there are not a lot available, especially in rural Alaska. Some hub locations have services, but if the family cannot get treatment and recovery, it may be necessary to file a termination of parental rights.

Chase Griffith asked if there were any educational programs offered to parents to try to prevent abusive situations rather than have OCS come in as a reactionary resource. Kim mentioned Hello Baby, a program at Barlett Hospital for babies born with substances on board. Also, the Alaska Impact Alliance is building a statewide community-based prevention network that reduces the need for child protective services interventions.

Karen Malcom-Smith asked if OCS was understaffed now. Kim answered yes, drastically understaffed, and the turnover rate is high. The college degree requirement has been dropped, and the qualifications are now competency based and high school diploma. Accordingly, staff training has increased.

Karen Malcom-Smith asked what guidelines there were to qualify as a foster care provider. Kim said there are background checks and home inspections to qualify as a foster parent. A relative of a child does not have to be licensed to be a provider to their own kin.

Philip Licht wondered if the families that were screened out could be connected to some other organization that could intervene and help prevent future issues. Kim said there was a statute that does not allow them to share information about reports of concern. However, they can send reports to tribes that have signed a confidentiality waiver. OCS does refer people to other organizations that might be able to help.

Brenda Moore was concerned about the therapeutic foster level of care under the 1115 waiver and what happens when the kids don't meet that medical standard of care. Kim said a lot of therapeutic providers that have had children in their home for an extended period don't want to see the child move out, but she is not clear what is to be done about it. It will have to be investigated on a case-by-case basis.

Christine Robbins asked if OCS was receiving any federal funding and, if so, under what title. Kim said they receive quite a bit of federal funding based upon IV-E, and she estimated that about 55 percent of their budget comes from the federal government.

Christine then asked Kim to describe what happens when there is a criminal case co-occurring with an OCS case. Kim said the criminal side takes primary, but OCS will step in if the parent is not cooperating, keeping in mind always that child safety is the first consideration.

Kara Nelson asked if there are any discussions about expanding FIT Courts. Kim said she is a big fan of the FIT Court but does not know if there are plans for expansion. Kara also asked about resources or classes for incarcerated mothers so they have a chance to get their children back. Kim has not heard from the Department of Corrections in a few years so does not know that answer. There have been many discussions about parental rights timing out while incarcerated.

Chase Griffith wanted to know if Kim had noticed a difference in the quality of care since the minimum requirements for employment had been lowered. Kim said she has seen a lot of benefit with bringing people in with a passion for the work, and they just started a program with UAA for an occupational endorsement for more training.

Chase asked for an explanation of FIT Court. Kim said it stands for Families with Infants and Toddlers, and it brings together families, agencies, and service providers to find and support permanent family placements.

Jeanne Brady stated that mental and emotional abuse and neglect are all hard to detect, and she asked how OCS determines if any of those are present. Also, she asked about materials provided to parents or caregivers that don't fit the situation. Kim said OCS does not usually hand out materials but will refer the parent to appropriate organizations for education or support. As for the evaluation of neglect, physical or sexual abuse, and mental injury, they use a tool that originated with the military and then adapted it to Alaska. It takes critical thinking and training and is not foolproof.

Leah Van Kirk brought up the high rate of suicide for 15 to 24-year-olds and wondered what OCS is doing to support these transitional-aged youth. Kim replied that these youth have more complex needs than they had in the past, and tackling the problems needs to include lots of people besides OCS. They are struggling to find placements for youth because no one wants to take them. She has staff taking shifts sleeping in offices with youth. Security guards were hired and hotel rooms rented. OCS has a million dollars to help with rent, a cell phone, down payment on a car, or college or trade school tuition. They are working to expand the age limit for this support from 21 to 26.

Diane Fielden asked how many grandparents are providers and what resources they get from OCS. Kim replied that grandparents are typically the number one relative provider, and many are not involved in the child welfare system. OCS tries to discourage taking them into custody but helps with providing them resources to go to court for guardianship or some kind of power of attorney.

Chase Griffith asked if there are instances where OCS regulations prevent a grandparent from having a child in the home even if that is desired by both. Kim said that happens occasionally, and then a variance committee decides. Also, the grandparent can go to the court to try to get guardianship or power of attorney.

ADVOCACY TRAINING AND LEGISLATIVE SESSION UPDATES

Stephanie Hopkins, Advocacy Coordinator, AMHB/ABADA

Advocating for Your Mission

Stephanie reviewed the differences between lobbying and advocacy. Generally, advocacy is when you have an opinion and you share that opinion with others with the intent to change their minds. Lobbying is a communication to legislators or legislative staff intended to influence specific legislation. It is impossible to lobby for a general concept.

As a private citizen, if you are lobbying at the state level more than ten hours in a 30-day period, you need to register with the Alaska Public Offices Commission (APOC). The ten hours includes meeting with, having phone calls, or exchanging e-mails with policymakers. It also includes testifying before a legislative committee meeting and meeting with the executive branch to discuss administrative or legislative actions. The ten hours does not include invited testimony, travel to testimony, time in the hallways, writing of letters, and just being in the Capitol building.

Board members are representational lobbyists, and if they spend more than ten hours in a 30-day period, they would have to register with APOC, but reporting is not necessary. The boards would register as your employer. As members of the boards, they need to be coming forward with one voice and with only board-approved communications.

Tips for Meeting with Legislators

AMHB/ABADA are statutorily charged with planning and coordinating behavioral health services and programs funded by the State of Alaska. When legislation gets posted to BASIS, the Advocacy Committee reviews and identifies any bills of interest and assigns levels of concerns to the bills. Level 1 is tracking and action; level 2 is monitoring; and level 3 is of interest. Level 1 bills are heard by the Advocacy Committee, and letters are written to the chairs. If the chairs sign, then the letters are submitted to the sponsoring legislators and perhaps to the final committee of referral. The process for budget items is similar.

Stephanie explained the legislative meeting purpose:

- Fulfill statutory responsibility to advise the legislature on AMHB/ABADA priority bills and budget items.
- Introduce AMHB/ABADA priority focus areas for 2023.
- Deliver the boards' advocacy program for 2023.

She stressed the importance of being organized since the meetings are just 15 minutes, and the schedules change often with little notice. She reviewed what to expect in the legislative meetings and described some of the scenarios that might occur.

The budget items and specific bills on the priority lists are as follows:

- Crisis Now Continuum of Care Grants
- Peer Support Certification
- Special Needs Housing Grant
- Homeless Assistance Program
- DOC Mental Health Staff Training
- Alaska Psychiatric Institute

- Foster Aged Youth
- Aging and Disability Resource Centers
- Institutional Discharge Program Plus
- SCS IT Application/Telehealth Service System Improvements
- Foster Care Youth Transition Coordinator
- Health Care Professionals Workforce Enhancement Program
- Behavioral Health Treatment and Recovery and Prevention and Early Intervention Grants
- HB 28 – Access to Marijuana Conviction Records
- HB 53 – State Identification Card for Prisoners
- HB 59 / SB 58 – Medicaid Eligibility: Postpartum Mothers
- SB 16 / HB 78 – Alaska Community Health Aide Appreciation Day
- SB 46 – Brain Injury Awareness Month
- SB 89 – Age for Tobacco/Nicotine/E-Cig; Tax E-Cig

RECESS

The business meeting recessed at 3:37 to prepare for public testimony.

PUBLIC TESTIMONY

Public testimony was received, and a full transcript was prepared.

Wednesday, March 22, 2023

CALL TO ORDER – 8:50

CONVERSATION WITH ALASKA ASSOCIATION OF HOMES FOR CHILDREN (AAHC)

Randee Shafer stated that the association is comprised of treatment programs serving children and families across the state to share best practices in terms of clinical programming and support each other in trying to provide care for families and children. The members present introduced themselves as follows:

Michael Martin – Residential Youth Care in Ketchikan
 Randee Shafer – Providence Hospital, Association President
 Rachel Cooper – Alaska Child and Family
 Dustin Larna – Residential Youth Care
 Lisa Luck – Residential Youth Care

Karen Malcolm-Smith asked what some of the top financial barriers were in behavioral health. Dustin Larna summarized the barriers as follows:

- Many of the rates allowed by the 1115 waiver do not cover the level of care and don't adequately reimburse.
- The administrative burden and the regulations around delivering behavioral health is cumbersome. Too much time is spent on documentation, so less time is available to work directly with people.
- Timely and appropriate reimbursement is a problem, and too much time is spent on tracking payments.
- Workforce is a challenge that ties into inflation and being able to pay a wage people can live on and be able to find housing.

Brenda Moore asked about the recruitment and retention of foster families. Rachel Cooper replied that many of the members provide both residential and therapeutic treatment homes. There has been a decrease in homes in Anchorage partly due to the pandemic, and there are only about half the number of homes now as before the pandemic. AAHC has been talking with OCS about this problem and looking for ways to increase the number of homes. Without those homes, more kids end up in a higher level of care because their needs are not met, and that is a disservice. The therapeutic treatment homes are OCS-licensed homes that agencies agree to supervise and provide therapeutic treatment in the homes. The homes are licensed for two children to start, and can typically go up to four, sometimes five.

Brenda Moore referred to the OCS practice of hiring workers without degrees and putting them through extra training. She asked how that affected the children that AAHC is serving. Rande Shafer said it impacts the care for treatment. Working with children is not just a set of skills, but self-awareness and self-regulation are important to that work. She thinks the workers should have both the educational and experiential background, although OCS is doing powerful work in the training they have developed. Dustin Larna added that turnover is a problem for the children who have multiple workers during their treatment.

James Savage wanted to know the differences between typical foster care and a therapeutic treatment home. Rachel Cooper said a therapeutic treatment home is paid through 1115 and is a medical billable rate. Children have to qualify for a therapeutic treatment home by demonstrating they have the behavioral health needs to require treatment. OCS is focused on housing, shelter, and home situations, while AAHC is focused on providing a therapeutic service. Families are reimbursed at more than the OCS rate because of the therapeutic service provided. This is a therapeutic service that is short-lived, and when the treatment ends, the youth need another placement. With the OCS shortage, many times the next steps are unclear. Before the introduction of this service with 1115, the same limitations for therapeutic treatment homes did not exist. Clinical therapists are on staff and are required to lead the treatment plan. In collaboration with the foster parents on the treatment plan, the services of the clinical staff, case manager, and other direct service staff are intertwined.

Christine Robbins asked about the practice of taking youth to the hospital in time of crisis. Rande Shafer agreed that it is a problem when children are being served in hospitals, which is sometimes traumatizing in and of itself. One of the challenges with the 1115 waiver is there are no funds for

capital projects to renovate buildings or build new ones. And the specialized buildings for crisis stabilization services are unfortunately very expensive to build.

Kurt Hoenack wanted to know if they had noticed a shift away from psychotropics and a biomedical model of psychological breaks to more of a trauma-informed approach because in the past, people were placed on psychotropic medication before giving consent. Randee replied that, yes, they talk about trauma-informed care all the time. She is excited about their urgent care clinic for behavioral health and thinks it important to keep the name “urgent care” clinic so people feel comfortable about going there just like a regular medical clinic.

Michael Martin added that as the stigma behind mental health has changed over the last decade, it’s being talked about more in the home and at school. With that perception, intervention at the first stage of a crisis will result in less likelihood that it will result in a hospital setting.

Randee noted that a lot of community members are on the fringe financially and don’t have insurance that would cover these services. The state-funded grants are very important in allowing the agencies to do some of that prevention work and be in the schools.

Leah Van Kirk asked for a description of home-based family treatment services. Rachel Cooper said the family treatment service focuses on the entire family system, not just the patient, since the entire family system is where they find wellness, and hopefully that will help avoid those higher levels of care. One issue is that it is for Medicaid-eligible families only.

Jeanne Brady asked if there was anything specific they felt this board could partner with them on. Dustin Larna said that protecting grants is important. Grant funds have been cut again and again, and advocating for grants and capital funds is of great importance.

Anthony Cravalho asked about things other than grants, like reporting requirements and the application process. Dustin Larna said that if they receive grant funds, they need to be able to report on the outcome, and so the grant reporting process is important. But the process and administrative burden in order to receive a grant is high, and if the grant funds are not adequate to provide the service, maybe it’s better to not use staff time to pursue that.

Renee Schofield was interested in what changes they have seen since marijuana has been legal for five years. Dustin said they have a new after-school program that was funded with marijuana money, so that was a plus. He noted that kids are getting marijuana by having someone buy it for them, or they are taking it from their parents. There doesn’t seem to be a spike in kids’ using; it’s just a different way of getting access. One concern is that marijuana is more powerful than in the past, and the impact on brain development is worrisome.

Tonie Protzman asked if they work as a consortium to keep kids in the state. Dustin Larna said they try to focus on the local communities but they work with youth from all over the state. Cecilie Cody, clinical director at Residential Youth Care, said that if a youth is denied placements that are available in the state, then, yes, they are referred to the out-of-state placement committee.

LAND ACKNOWLEDGEMENT

Emily Ricci acknowledged that AMHA/ABADA were meeting on the ancestral homelands of the Lingit.

BOARD BUSINESS

SITE VISIT OVERVIEW

There will be six site visits this afternoon. Some people have legislative visits at the same time, so their site visits will be the downtown locations.

ETHICS TRAINING

Jessie Alloway presented to the boards on the Ethics Act. Highlights included the following:

- Applies to public employees and members of a board or commission.
- You must avoid substantial and material conflicts of interest.
- You and your immediate family members may not benefit financially or personally from your position.
- You may not confer unwarranted benefits on others.
- Applies if there is a financial interest held by you or an immediate family member which includes involvement or ownership in a business, property, or professional relationship that is a source of income.
- Applies if there is a personal interest held by you or your immediate family, including membership in any organization from which you derive a benefit.
- Your immediate family members are your spouse or your conjugal partner, your children, stepchildren, parents, siblings, grandparents, aunts, uncles, and your in-laws.
- Applies if you take an official act on something such as giving advice or participating, assisting, making a recommendation, making a decision, approving, disapproving, voting, or other similar action.
- Misuse of Official Position, AS 39.51.120.
 - Cannot use your position for personal gain or to give unwarranted benefit or treatment to another person.
 - Cannot use your position to secure other employment or contracts.
 - Cannot use your position to accept or solicit outside compensation.
 - Cannot use state resources to benefit a personal or financial interest.
 - Cannot take or withhold official action on matters in which you have a personal or financial interest unless the interest is less than \$5,000 in a business or an interest possessed generally by the public at large, or action would have insignificant or conjectural effect on the matter.
- Cannot accept or solicit a gift (money, services, loans, travel, entertainment, etc.) if that gift is intended to influence your action or judgment in your official duties.
 - All gifts from lobbyists are presumed to be improper.

- Gifts worth more than \$150 must be reported if you could take official action that would affect the gift-giver, or the gift is being given to you because of your position as a public employee.
- Any gift received from another government, regardless of value, must be disclosed. This includes foreign, federal, state, and tribal governments.
- You must disclose a gift that a family member receives if it would be reportable if you received it.
- A current or former public officer may not disclose or use information gained in the course of official duties that could in any way result in a benefit to the officer or their immediate family member, if the information has not been publicly disseminated or is confidential by law.
- A member of a board or commission who is involved in a matter that may result in a violation of any of the other provisions of the Ethics Act must disclose the matter on the public record in writing. The in-writing requirement may be met by disclosing on the record at a public meeting if a written record or electronic recording is kept of the meetings.
- The designated ethics supervisor (the chair) determines whether the member's involvement in the matter violates any of the provisions of the Ethics Act.
 - If a member objects to the determination of the DES, the members present will vote on the matter.
 - If the DES or a majority of the members determine there is a conflict, then the member will refrain from voting, deliberating, or participating in the matter.
- After you leave the board or commission, there is a two-year restriction for working on a matter for compensation in which you participated personally and substantially through the exercise of official action.
 - A "matter" is a case, proceeding, application, contract, determination, proposal or consideration of a legislative bill, other legislative measure, or proposal, consideration, or adoption of an administrative regulation. It does not include the general formulation of a policy.
 - "Official action" means advice, participation, or assistance.

Tonie Protzman asked if an award received that was valued in excess of \$150 should be reported. Jessie Alloway encouraged the disclosure of such an award, although she was not sure if it was required.

Brenda Moore asked if there were ethics problems with any of the board members being employed by organizations that receive funding. The role of this board is to identify and advocate for funding to support different programs or program goals, and the question is whether any measures have to be taken by organizations or individuals who sit on the board but represent organizations that may be in receipt of grant funds. Ms. Alloway did not think there is a conflict with the board providing recommendations to place money in specific buckets for services not knowing necessarily who the specific grantee is going to be.

Chase Griffith asked about the procedure for reporting a potential ethics violation. Ms. Alloway said to report it to the designated ethics supervisor (the chair) who would either make a determination or bring the question to the Department of Law. If the person is uncomfortable going to the chair with the information, they can file a notice of potential violation with the Department of Law from the department's website. Chase complained about retaliation from board members after inquiring about a potential ethics violation. It was recommended that the boards focus on what was on the agenda, and, if further discussion is warranted on this topic, it should be an additional agenda item or discussed in a special meeting.

LEGISLATIVE VISIT OVERVIEW

Stephanie Hopkins reviewed the schedules, pointed out changes, assigned members to certain legislative meetings, and handed out packets.

SITE VISIT OVERVIEW

Jennifer Weisshaupt reviewed the schedules and briefly discussed strategies for attending both legislative meetings and site visits.

RECESS

Hearing no objection, the meeting recessed at 11:37 a.m.

Thursday, March 23, 2023

CALL TO ORDER – 1:34 p.m.

Brenda Moore welcomed board members back to the meeting after legislative visits.

ALASKA MENTAL HEALTH TRUST AUTHORITY UPDATES AND GRANTS

Eric Boyer, senior program officer for the Trust, reported that Trustees authorize about \$20 million in grants each year to nonprofit organizations, service providers, state and local governments, and tribal organizations. To do this efficiently, they canvass stakeholders for feedback using online surveys and in-person stakeholder meetings.

The MHTAAR grants (Mental Health Trust Authority Approved Receipts) fund staff at ABADA, the Governor's Council, and other organizations. Those grants have supported suicide prevention, behavioral health programs, and funded start-up programs that were subsequently taken over by the state. They also fund one-time events and have helped various organizations upgrade to electronic health record systems. They fund direct services such as treatment and safety plans and help with workforce development, and over a million dollars was given out in mini-grants to help beneficiaries. The Trust board has directed that funding go to help in the beneficiary focus areas of the Trust.

If a grant proposal is less than \$100,000, it can be approved by the Trust staff. The Program and Planning Committee can approve grant requests up to \$500,000, and the Trust board considers all grant applications over \$500,000. A grant agreement between the Trust and the grantee requires

results-based accountability, and a grant report is generated from that. Examples of partnership grants are an award to support the capacity of an access shelter in the Village of Selawik, and funding for permanent supportive housing in Bethel and Nome. A focus area funding allocation example is funding for better trauma-informed training and support staff for the women's prison Hiland Mountain.

The criteria for review of a grant application includes the following:

- Does it support beneficiaries?
- Does it follow regulations and statutes?
- Does it line up with the Comp Plan?
- Are funds available?
- Is it sustainable?
- Is the grantee licensed or accredited and in good standing?

The partnership grant process on average typically takes three to four months. Larger grant requests take longer because of the approval process, and he noted that the Providence no-wrong-door crisis stabilization center in Anchorage took about four years.

Eric Morrison, Statewide Suicide Prevention Council staff, gave the following examples of programs that were funded or partially funded by the Trust:

- Lethal Means Reduction Campaign: information and literature to communities, and 250 gun locks distributed.
- Anti-Stigma Campaign: television commercial for suicide prevention.
- Iron Dog race.

Brenda Moore asked if there was help for organizations that want to request a grant but do not have the capacity to do so. Mr. Boyer explained they have funds that go toward technical support such as business modeling planning, financial, staffing, or clinical needs.

BOARD BUSINESS CONTINUED

Public Comment Review

Leah Van Kirk extended appreciation for those people who came in for public comment. Sharing of the work people have done and some of the issues that they are seeing in their communities is valuable to the board.

Site Visit Report Out

SEARCH Front Street Clinic:

- They have a wonderful operation.
- They expected 40 participants in their clinic in their first year and ended with 103.
- Able to connect around their need and desire for peer support and exchanged some information.

Polaris House:

- This is a clubhouse model of supports, leaving diagnoses at the door.
- They put together events, cook meals, clean the facility, and support employment.

S.A.F.E. Child Advocacy Center:

- They provide forensic interviews and medical examinations for children when necessary.
- A challenge is the engagement by first responders, counselors, or therapists prior to that child arriving for the forensic interview.
- Everyone in the crisis response team should have training on how best to support children or families who are going to get support from S.A.F.E. so as not to create any unintended consequences.

JAMHI Family Resource Center:

- They are preparing to move the location to the old JYS building.
- They talked about administrative and funding challenges and referred them to staff that could hopefully provide some technical assistance.

Tlingit and Haida Re-entry Housing:

- This is an 18-bed home, and there is another home with 12 beds.
- The home is in a beautiful setting.
- They have a separate sex offender home.
- There are required meetings and required counseling.
- They have family meals every week.
- They were at about half capacity, but people are welcome from across the state.
- They provide personal items for use while there, including bus tokens.
- They have a visiting room where families and children can visit.
- They do PBTs every night and UAs as required.
- The home had a comfortable feel and was inviting to understand the home community and be able to live with other people.

Johnson Youth Center, DJJ:

- They shared about the probation program and detention and treatment centers.
- They have a 50 percent staffing shortage.
- There is a review for an increase in salary for juvenile justice officers, which might help alleviate the staffing shortage.
- They closed the detention wing and combined the detention and treatment wings.
- The treatment facility is for girls only, and they come from across the state.
- They have a barista training program, and money earned while in that program is received when they transition out.
- They have a community library, a gymnasium, and a gardening project.

LEGISLATIVE VISIT REPORT OUT

Senator David Wilson:

Brenda Moore visited Senator Wilson who has a social work background, and he questioned the funding for the SHARP program. She explained that because this offers three years of student reimbursement, the workforce is more stable. He also had issues with peer support, and she explained that there is a certification process, they do get training, and they are the front line to help people into care and keep them stable through the process. Senator Wilson also asked about outcome data, and Brenda said outcome data is difficult to quantify, and they have been working on a solution to that for years. Diane Fielden also saw Senator David Wilson who pushed back a little bit on the SHARP program and wanted to know why it should be funded if it had not been fully applied. Brenda Moore explained the program to him.

Senator Cathy Giessel:

Brenda also visited Senator Giessel's staff and had discussions about the budget. Christine Robbins had an appointment to see Senator Giessel but it was rescheduled, and she wasn't able to attend.

Representative Andy Josephson:

Brenda said that Representative Josephson is familiar with the issues and supportive of behavioral health. He said that they were making amendments to add items of concern back into the budget. He also questioned the SHARP funding, and so it may be necessary to expand the talking points on that subject.

Senator Forrest Dunbar:

Renee Schofield visited with Senator Dunbar's staff who seemed interested and engaged in discussion.

Representative CJ McCormick:

Renee Schofield visited with his staff who asked questions and said that the representative was passionate about these issues.

Representative Julie Coulombe:

Renee said that Representative Coulombe was very engaging, understands the issues, and will probably be a strong supporter. Karen Malcolm-Smith mentioned that they spent about 45 minutes with the representative. Kara Nelson said they explained Crisis Now and its different components.

Senator Jesse Bjorkman:

Renee also visited Senator Bjorkman who is an educator by trade and who asked a lot of questions. He didn't understand peer support, so that was explained. Christine Robbins talked to the senator who she said was very attentive and interested in what they are doing.

Senator Elvi Gray-Jackson:

Renee said that Senator Gray-Jackson was enthusiastic. Diane Fielden visited Senator Gray-Jackson who asked questions about the Mental Health Board and Mental Health Trust Authority. The senator was very gracious and seemed supportive.

Representative Stanley Wright:

James Savage visited Representative Wright and said he was a huge proponent of the Crisis Now model, and the representative asked when they were out of session if he could stop by to learn more at the facility in Wasilla that is utilizing pieces of that model. Diane Fielden was glad to meet Representative Wright.

Representative Josiah Patkotak:

Christine Robbins visited with Representative Patkotak's staff member who was helpful and inquisitive and diligent in getting all the offered information.

Senator Loki Tobin:

Christine also visited Senator Tobin who was supportive. Karen Malcolm-Smith also said Senator Tobin was supportive and was very engaging.

Representative Mike Prax:

Karen Malcolm-Smith saw Representative Prax who has an interest in helping veterans and was interested in learning about the Trust and the advisory boards. Anthony Cravalho said that Karen's personal story had an impact on the representative, and it helped him understand what we are asking and to realize how important it is.

Representative Andrew Gray:

James Savage saw Representative Gray who had already read everything that was provided. He said he was in support of everything. They talked well over the 15 minutes allotted. Kara Nelson added that they talked about access to care for those that are incarcerated, having re-entry funding, and peer certification.

James Savage thought the board members had an impact on the representatives and staff regarding Crisis Now, which was the focus of his five legislative visits. Everyone made clear to each legislator that the peer support piece was a huge part of the Crisis Now model.

Anthony Cravalho noted that he could see the education that's been done by the Trust and others because many of the legislators knew about Crisis Now, and they were asking more detailed questions.

Stephanie Hopkins added that Renee also took all the extra legislator packets to every office on the House side. She reminded the members they have sample thank-you letters if they wanted to thank the legislators for their time and attention.

EXECUTIVE DIRECTOR HIRING COMMITTEE

Brenda Moore reported that the committee will be made up of the chairs and chairs elect. They will be reaching out to the department and the Division of Behavioral Health, the Trust, and the Statewide Suicide Prevention Council for people to represent those organizations. The candidates submit writing samples, make presentations, fill out a questionnaire, and sit for in-person interviews.

CONFIRM SUBCOMMITTEES

Brenda Moore said it had been suggested that they have a tribal health care strategic partnership and federal funding person on the board to work with their federal partners. Kathleen Totemoff volunteered to serve as the representative for federal legislation.

A committee is being organized to educate new members about the business of the boards and provide an orientation process. Renee Schofield is in favor of a standardized orientation process but wants people to understand that serving on these boards is a time commitment. D.C. Ricci recommended that the committee develop a clear orientation process articulating the boards' missions, goals, and history, including expectation for board behavior and explaining the intersection between the board and the staff members. Renee Schofield was selected to lead the committee. She will choose committee members, develop the process, and bring it back to the board for review. Renee would like to have a good draft to present at the fall meeting.

UNFINISHED BUSINESS

Sharon Clark said a motion was passed at the January meeting to send a letter of support for Bruce's Law, and she asked if that letter had been sent. Leah Van Kirk replied that it had been written, signed, and mailed.

BOARD RETREAT

Brenda Moore said it had been suggested that a retreat be combined with the fall board meeting. After some discussion about location, Anthony Cravalho suggested that staff determine how much funding there is and come back with options. James Savage wanted to know if the retreat was obligatory and said he would rather wait until the board is in a little better place. Renee Schofield agreed somewhat with James but wanted to be careful about how many days they were asking people to be out of their work places. Kathleen Totemoff supported James' sentiment a bit and thinks a few things need to be addressed before the retreat. Chase Griffith thinks a retreat is exactly the right answer for a chance to talk with each other and get more context against the developments that are going on.

D.C. Ricci suggested that the board provide plenty of time for staff to put together a retreat and consider the mission of the retreat for board business and purpose. Finally, she suggested waiting to hold the retreat until there is a permanent director. Brenda Moore reminded everyone that the retreat is not board business. It usually centers around education on processes and hearing from other partners so they can be more effective in their board work.

At the fall meeting, they will hear back from staff on the budget, on whether they can plan for an off-the-road board meeting, and then set a meeting date and place.

NEW BUSINESS

EXECUTIVE COMMITTEE ELECTION – AMHB CHAIR ELECT AND ABADA CHAIR AND CHAIR ELECT

Anthony Cravalho tabled this item because there were a lot of board members absent. He will ask staff to try and schedule a Zoom meeting to take place within the next few weeks.

ASSIGN BOARD MEMBER – HB 172

Leah Van Kirk explained that HB 172 that passed in 2022 is the Mental Health Facilities and Medications Bill. Prior to this bill, only certain hospitals and jails could hold individuals under a notice of emergency detention. Now people can receive behavioral health crisis services in less-restrictive settings and stay out of hospitals and correctional facilities. An advisory committee is being led by a contract with Agnew::Beck to develop a report to the legislature that should be ready for review and public comment in August. They are requesting a member of the board to contribute to that process during monthly meetings between now and the fiscal year end. James Savage nominated Kurt Hoenack to serve on that committee. Kara Nelson is already involved with the Agnew::Beck contract in this project and would welcome Kurt to the committee. Anthony Cravalho suggested that Kurt let him know tomorrow what he decides, and Kurt agreed.

ASSIGN MEMBER TO THE API GOVERNING BOARD

Renee Schofield suggested that Brenda Moore take that position because she is the only one with the connection and history with API. Brenda explained that during the Palin administration, an API advisory board was created, and she sat on that, but then it sunset and was not renewed. The Governance Board at that time was just department and hospital staff. Since then, it has morphed into a more robust governing body with more stakeholders at the table. One of the goals is to make the governing body a part of state statute so a new administration cannot come in and change it. Brenda said she would continue at least to the end of her term but thought it important to mentor another member of the Mental Health Board to take that position in the future. Both Kurt Hoenack and James Savage expressed an interest in joining, and each of them will attend a meeting with Brenda to get a feel for the position.

RESOLUTION FOR FORMER MHB/ABADA EXECUTIVE DIRECTOR

The following resolution was reviewed by the Executive Committee, and they thought it was important to bring it before the full board:

WHEREAS, the joint Alaska Mental Health Board, Advisory Board on Alcoholism and Drug Abuse, and the Statewide Suicide Prevention Council's work as a collective effort that requires a necessary, important, and at times burdensome sacrifice to serve towards the greater good of Alaskans experiencing a variety of adverse behavioral health challenges;

WHEREAS, the joint mission of the Advisory Board on Alcoholism and Drug Abuse and the Alaska Mental Health Board is to advocate for programs and services that promote healthy, independent and productive Alaskans;

WHEREAS, Beverly Schoonover and the board and staff have been faithful servants in upholding the mission and vision of the ABADA/AMHB;

WHEREAS, the transition in board leadership led to a time of discord and distraction from board's mission;

WHEREAS, the resignation of Beverly Schoonover will be an absence felt throughout the state of Alaska due to her tireless efforts, dedication, passion, courage, and commitment to the overarching mission of the boards, as well as her leadership to bring forth change and serve as an advocate to behalf of Alaskans who may have lack the voice to do so on their own;

AND WHEREAS, we, members of the Alaska Mental Health Board, Advisory Board on Alcoholism and Drug Abuse, and Statewide Suicide Prevention Council seek to continue in our important work in her absence, bringing continuity, unity, and harmony to further the missions of the Alaska Mental Health Board, Advisory Board on Alcoholism and Drug Abuse, and Statewide Suicide Prevention Council;

NOW THEREFORE, BE IT RESOLVED that the Alaska Mental Health Board, Advisory Board on Alcoholism and Drug Abuse, and Statewide Suicide Prevention Council shall recognize Beverly Schoonover for her years of service to the state of Alaska, strive to promote safe and inclusive work places, and fill the position of executive director with an exceptionally high caliber individual to reengage in the importance of our collective work with the full faith of the current administration.

Diane Fielden **MOVED** that the resolution be adopted, **SECONDED** for discussion by Renee Schofield. Renee Schofield suggested that the fourth Whereas clause regarding discord and distraction be deleted. Diane Fielden **AMENDED** her motion accordingly, **SECONDED** by Renee Schofield. Hearing no objection, the motion **PASSED** unanimously, and the resolution was approved as amended.

DRAFT RESOLUTION FOR LEE BREINIG

Leah Van Kirk introduced the idea of drafting a resolution or any other recommendations that the board would like to discuss or develop to honor Lee. It was decided that a resolution would be appropriate and that James Savage and Bobby Dorton would work on that and that it would possibly be presented to a member of Lee's family at the fall meeting.

SET DATES FOR NEXT BOD MEETING AND LOCATION FOR FALL MEETING

Anthony Cravalho left this item for staff to work out.

FINAL COMMENTS

Board members offered their final comments of the meeting summarized as follows:

- James Savage said the advisory boards should look at the rosters. Some outstanding members are not present, and some are probably not going to return to the board.
- Leah Van Kirk thanked the staff for planning this meeting and supporting this work. She appreciates the care that they take. She also thanked the members for the warm welcome and for the opportunity to serve. She gave special appreciation to the board members and chairs who have taken the time to meet with her.

- D.C. Ricci thanked Leah Van Kirk, the staff, the board chairs Anthony and Brenda, and everyone who showed up for the meetings during this challenging time.
- Bobby Dorton gave a special thank you to Anthony for stepping into the role of chair for this meeting.
- Stephanie also thanked all the board members and gave special appreciation to the staff.
- Karen Malcolm-Smith thanked Stephanie for all the long hours she put into the legislative matters.
- Brenda Moore said she appreciated the staff and was concerned for Leah as she seems to be working 24/7. She also thanked D.C. Ricci for taking time out to be here and for her advice and recommendations for the boards.
- Anthony Cravalho thanked everyone for taking time away from family and jobs and said their time was really valued. He wished everyone safe travels.
- Jennifer Weisshaupt noted that these meetings are like a big family, and the meetings are well remembered and loved.

ADJOURNMENT

Diane Fielden **MOVED** to adjourn, **SECONDED** by Renee Schofield. Hearing no objection, the motion **PASSED**, and the meeting adjourned at 4:37 p.m.

MOTIONS

Renee Scholfield **MOVED** to approve the agenda as presented, **SECONDED** by Tonie Protzman. Hearing no objection, the motion **PASSED**. Page 1.

Diane Fielden **MOVED** to approve the minutes from the meetings of January 11, February 2, and February 8, 2023 meetings as presented, **SECONDED** by Bobby Dorton. Hearing no objection, the motion **PASSED**. Page 2.

Diane Fielden **MOVED** that the resolution be adopted, **SECONDED** for discussion by Renee Schofield. Renee Schofield suggested that the fourth Whereas clause regarding discord and distraction be deleted. Diane Fielden **AMENDED** her motion accordingly, **SECONDED** by Renee Schofield. Hearing no objection, the motion **PASSED** unanimously, and the resolution was approved as amended. Page 23.

Diane Fielden **MOVED** to adjourn, **SECONDED** by Renee Schofield. Hearing no objection, the motion **PASSED**, and the meeting adjourned at 4:37 p.m. Page 24