

Core Leadership Team

Meeting Minutes

Thursday, May 31, 2018

12:40pm – 2:00pm

Attendance

Graham Adams	Bill Lindsey
Mark Binkley	Amy McCulloch
Deb Blalock	Aunyika Moonan
Virgie Chambers (Molly Spearman)	Meera Narasimhan, MD
Allison Evans (phone)	Bill Lindsey
Andrew Fogner	April Richardson (phone)
Kester Freeman	Guests: Maya Pack (IMPH)
Sara Goldsby (phone)	Staff: Elizabeth Harmon, Rick Foster, MD, Laura Cole, Leslie Pfeiffer
Margie Heggie	

Opening and Updates

The March 29 meeting minutes were approved. Elizabeth offered thoughts and prayers to Mrs. Wilson as she underwent surgery earlier this morning.

School Behavioral Health Services Survey Infographic *once approved by DOE add LINK*

Aunyika shared the draft infographic based on the survey results. There was excitement surrounding the number of responses (873) and high response rate (96%). Virgie Chambers noted that Superintendent Spearman wanted to make initial contact with schools to help establish a baseline. This survey was a good first step. The key to the high response rate were the school principals. Virgie also notes that the timing was right to administer this survey. The data collected is beneficial to the SAMSHA grant SC DOE is currently applying for.

Meera notes that these results provide a strong baseline and that will help measure levels of progress. Meera also mentioned that it needs to be noted that the responses for the “Top 5 Behavioral Health Problems” reflect the perception and experiences of the respondents. She noted that the responses accurately reflect the level of prevalence of the respective BH problem affecting school aged children.

Elizabeth and Aunyika shared that there will be an appendix with extended results for those who want a more in depth look at the findings. The appendix could be helpful to share with elected officials. Maya Pack mentioned that this is a great foundation for the development of a communications plan. Elizabeth noted a communication team is in the works.

Opioid Emergency Response Team (OERT) Update. A communication plan is being developed between SCMA, SCHA, SCBHC, and BCBS. Instead of everyone working on their own, its more beneficial to align and develop a cohesive message. Dr. Foster noted that making connections are essential to promote visibility and achieve progress.

Coalition Action Plan. With commitment, active involvement and investment from statewide partners since the August 2017 Coalition kick-off, the SCBHC has reached a new

plateau. To ensure future successes, it is important to formally develop a comprehensive strategic action plan. Elizabeth notes that the Coalition has moved past stage one, typically development and formation steps, and is moving into stage two.

Elizabeth mentions it could be valuable to have Fran Butterfoss, who has worked with other coalitions and initiatives, come in and help lead a retreat as well as help develop a formal strategic plan and next steps. Fran has looked at the work that has been accomplished and is impressed at the progress that has been made in the past year.

Commentary: Mark Binkley says the next steps are to encourage people in different communities to see what they need/want. He mentions there isn't a need for a facilitator for the SUD/Crisis group. Alignment could benefit to determine what can be pushed down to the local level. Meera agrees with Mark, need to get to a level of implementation. Graham Adams said that there is almost a strategic plan in place, wonders what the end product of the Coalition is? Does the Coalition end or does it go on forever? There is mention of Coalition fatigue. Kester Freeman mentions that this is a unique group with all major players in the state sitting at one table. It is our job to make sure issues are still being talked about. Maya Pack says there is a need for the Coalition until every person who needs access to care has it. Deb Blalock asks are policy changes strictly from outcomes of the CLT or the Coalition as a whole? Dr. Foster says that having the connection of the whole Coalition provides a link to the communities and allows for feedback on where barriers still exist.

Due to time, Elizabeth says this issue will be expanded on at a later conversation.

Breakout Session Briefing and Discussion

The CLT heard reports from the priority area workgroup chairs and co-chairs.

Crisis Stabilization/Acute Care Management: Deb Blalock

- Finalizing a formal template with array of services available
- Going to find conveners, local coalitions/task forces, in communities throughout South Carolina
- Provide them with the template and expert contacts to help determine which services would work best in their communities and help get them started
- Working with partnerships, example: MHA, to provide lunches that attend meetings to discuss the array of services available that could be implemented in their community.
- Resource mapping is still a priority, *wants to ask SCHA for assistance*

Behavioral Health/Primary Care Outpatient Alignment and Substance Use Disorder Prevention and Treatment:

Both workgroups listened to a presentation from Kathy Schwarting surrounding Palmetto Care Connections work to help form a network of telehealth services across South Carolina.

The next meeting is Thursday, August 23, 2018.

The meeting was adjourned.