State Advisory Subcommittee on Children’s Mental Health
Thursday, March 6th, 2025, 9am-11am
In-Person and Virtual Meeting

# AGENDA

1. Welcome, grounding and housekeeping – Cici Hughes - 9:00 - 9:08 (9.02)
	* Cici welcomes the group and says we have a full agenda today
	* Reviews the agenda
	* Please mute yourselves unless speaking
	* Respectful guidelines reviewed
	* Use chat and raise hand to speak
	* This meeting is being recorded for notetaking purposes
2. Land Acknowledgement – Lisa requests member volunteer; read by Cheryl Lundsgaard 9:08 – 9:10 (9:06)
	* We, the members of the State Advisory Council on Mental Health and Subcommittee on Children’s Mental Health, acknowledge that the wealth of this country was built on stolen land and with enslaved and underpaid labor of African American, Native American, and Immigrant people. We acknowledge that the recent global uprising, which was sparked by the murder of George Floyd here in Minnesota, paired with the COVID-19 pandemic, makes for a time of profound uncertainty, shame, fear, and distrust. We also recognize that despite those feelings, we all must actively challenge the impact of our own implicit biases and how they may influence our decisions as individuals and leaders.
	* Furthermore, we recognize that racism also expresses itself in policies and practices that either target or erase BIPOC communities and erect barriers to their prosperity. Therefore, we pledge to be vigilant in monitoring the formulation of policies and practices that produce harm to vulnerable populations. We also commit to being open to other people’s truths as we acknowledge the resilience, creativity and generosity of the human spirit and we hold firmly to a persistence of Hope.
	* With these issues in mind, we commit to dismantling systemic and structural racism by initiating and supporting policies, practices, and the allocation of resources that promote diversity, equity, inclusion, and shared power.
3. Member roll call via Padlet – Lisa Hoogheem - 9:10 – 9:15 (9:08)
	* Use QR code for Padlet or via link in chat
	* Can use phone if needed
	* Add your first and last name, preferred pronouns, whether you are a council or subcommittee member or guest and which work group(s) you regularly attend
4. DEI Discussion – Dr. Bravada Akinsanya – Lisa Hoogheem - 9:15 – 10:00 (9:0)
	* Dr B not in attendance so Lisa leads the discussion
	* Regarding roles as a Council/Subcommittee and where DEI intersects with their roles
	* Defines equity, diversity and inclusion (from Merriam Webster): a set of values and related policies and practices focused on establishing a group culture of equitable and inclusive treatment and on attracting and retaining a diverse group of participants including people who have been historically excluded or discriminated against.
	* Acknowledges this is one definition among many
	* This group’s statutory language comes from Sec 245.697 MN Statutes and is meant to ensure DEI within these groups
	* Subcommittee’s work is meant to align with One MN Plan, Children’s Cabinet/MMB
	* Children’s Subcommittee Membership has a wide breadth of seats
		+ Asist Commissioner DHS
		+ Rep from DHS responsible for Medical Assistance Program
		+ MDH rep
		+ Rep of Direct Care and Treatment
		+ Psychiatry
		+ Psychology
		+ Social work
		+ Nursing
		+ Marriage and family therapists
		+ Professional clinical counseling
		+ Providers of MN services
		+ Consumers of MN services
		+ Family members of persons with mental illnesses
		+ legislators
		+ Social service agency dirs.
		+ County commissioners
		+ Other members reflecting a broad range of community interests
	* Open seats
		+ Children’s MH service provider – hospital-based
		+ 2 county commissioners
		+ Educator of children w MH concerns
		+ Local corrections
		+ 2 parents of children w MH concerns
		+ Person experienced with minority children who have mental health concerns
		+ Present or former consumer of adolescent mental health services
		+ Providers of mental health services to adolescents
		+ State legislator
	* How can you help?
		+ Reach out to consumers
		+ Contact a legislator
		+ Reach out to parents of children with MH concerns
		+ Reach out to young people who are consumers of MH services
		+ Ask a provider of adolescent MH services
		+ Identify and reach out to culturally specific providers
		+ Contact your county commissioner
	* Questions?
		+ Dan Porter: don’t understand process of notification after application because there is a gap; wonders if this stops people from applying
		+ Lisa acknowledges the cumbersome process from the Governor’s Office which takes long and has red tape contributing to significant delay
		+ Once someone applies, leadership reviews application materials
		+ They try to ensure representation for urban, rural, underserved community representation, and balancing membership
		+ Must allow time for applications to be posted and reviewed
		+ Review is done by group so some applications may be waiting for some time
		+ Applications go to Gov’s Office for approval which can take time
		+ Leadership sends communications to all applicants
		+ Dan: isn’t sure if he’s an active member; SOS site says “past due”; could be considered for many different seats but was unable to reapply to another seat in the system
		+ Represents a bigger concern across all councils
		+ If leadership sees good candidate applying that could sit on several different seats, they reach out to encourage multiple applications
		+ Dan: leaders may not know aspects of applicants that qualify them for various seats
		+ Lisa acknowledges the concerns and says it may be helpful to distribute a list of member seats and term dates
		+ Many other echoing sentiment in chat
		+ Rod: puts SOS link in chat to show seats and says Dan is listed as parent of child until 2025 and this position is “posted”; can see reapplication from Sep 2024; <https://commissionsandappointments.sos.state.mn.us/Agency/Details/153>
		+ Cici points out that previous incumbents remain in seats until reappointed
		+ Leadership team will be meeting to review open positions for coming year
		+ Rod: wants to have sound bites to give others to recruit into positions
		+ Lisa says leaders will develop an elevator speech and description of process along with list of terms to get to all members
		+ Dan: how do people hear about potential positions? What other systems help keep people informed?
		+ Cici: through emails or linking with others already involved
		+ Lisa proposes putting member terms in the calendar to initiate a notification of term end and process description
		+ Would be helpful to get email saying term is ending; many people in chat support this
	* Consider how you can help grow the Subcommittee and representation to do valuable work
	* For some agencies listed who weren’t represented, why isn’t DHS reaching out to those organizations to ensure members are being sent to these meetings?
	* Cici: most state agency reps are attending but County Commissioners and legislators are more difficult to contact; these are busy people
	* Lisa: also need providers; need to reach out to professional organizations
	* Dan: MN Board of Social Work and other similar groups could be helpful in spreading the word
	* Leadership team will follow up on feedback offered and appreciates the input from members
	* Jeff Lind: who can you reach out to with more application questions?
		+ Sara Nelson who recently sent agendas and PPTs so use this email address; Sara will bring to leadership if needed
	* Jeff: are there any in-person only meetings?
		+ Virtual attendance doesn’t give the opportunity to create relationships and have meaningful conversations to create change
		+ Been part of group for 12-14 years; started with only in-person meetings which were higher value; even side conversations of pertinent issues were valuable, especially for various geographies
		+ Knows he could drive down (4 hours) to attend meetings
		+ Connection is being lost for groups like this making it harder to create real, feasible change
		+ Cici remembers when only 1 or 2 people were on the phone and most people were in-person
		+ Lisa proposes next split meeting encourage in-person attendance to encourage cohesiveness
		+ Jeff acknowledges weather can play into people’s attendance and for providers that attendance takes away from paid work
	* Dani: agrees in-person meetings are difficult with children to drop off; on Subcommittee working with children’s mental health care; acknowledges rural members may not have resources to come to city
		+ Lisa reminds there are reimbursement funds for travel and hotel for those coming from out of town so it isn’t difficult to participate
		+ Rod request that reimbursement info be included in what will be sent out
	* Wayne: still having difficulty with SWIFT system
		+ Lisa says Sara can work directly with Wayne to navigate this
	* Shifting Gears – Outreach to Diverse Communities Workgroup
		+ This workgroup is meant to review the evidence of disparities in mental health care
		+ And to increase racial minority providers in the mental health workforce to better reflect the diversity of the general population of MN
		+ Workgroup recommendation has been to reduce disparities to improve access to quality care
		+ Please share in chat which diverse communities are represented here
		+ Need to expand our definition of diverse communities and who needs to be at our table
		+ More rural, tribal, immigrant, first generation, all body shapes and sizes, various identities, child of incarcerated parent
		+ We don’t discuss identities represented around the table so don’t know who is here
		+ How can we reach out to people like this?
		+ This workgroup meets the 3rd Wed of each month from 2-3 and non-members can join in these meetings
		+ Each workgroup is meant to have a representative attend this workgroup’s meetings
	* What are some of the barriers to participating in this workgroup? And how can we get more members to join this workgroup? Share via chat. Thank you for ideas, participation and support
		+ March 19 2-3 is next meeting – 3rd Wed of every month
		+ Rod: comes from rural county with limited diversity, limited numbers and income limitations which make for difficulty in recruiting; may also be language barriers
		+ Wondering if translation services are available?
		+ Racial identity, gender, sexual orientation, disability status are other diverse groups
	* Sara is back now to answer specific questions
		+ Connecting Wayne to Sara for SWIFT
		+ Need list of when member’s terms ends and that they stay in seat until it is filled
		+ Leaders will develop elevator speech to recruit including funding available to members
		+ Questions around SOS and Gov’s Office practices and timing being difficult
	* Call to action
		+ Everyone recruit someone to apply
		+ Think of ways to increase diversity representation on the Children’s Subcommittee
		+ Attend the Outreach to Diverse Communities workgroup
		+ Invite a friend, colleagues, professional to next month’s combined meeting
		+ Accountability is also good so will revisit these messages in future meetings
		+ Lisa thanks everyone for the time, platform and input to today’s discussion
		+ Links are in PPT to learn about other plans
		+ Sara will send links to Diverse Community Outreach workgroup to all members
	* BREAK until 10 for next speakers
5. Guest Speakers – Cici introduces Marcie Johnson and Kristy Collier – Children’s Mental Health Services and Updates - 10:00 -10:45 (9:25)
	* Marcie Johnson = Manager, Clinical programs: Inpatient Pediatric Mental health and Outpatient Adult SUD Programs; M Health Fairview/ MH and Addiction Service Line
	* Kristy Collier: Child/Adolescent Inpatient Clinical Supervisor; U of M West Bank Hospital
	* Dir Samantha Sorenson introduces group and shares slides
	* Child-Adolescent Inpatient Clinic
	* Kristy: what is/isn’t inpatient?
		+ Acute care
		+ Ave length of stay: 5-7 days
		+ Multi-disciplinary team: psychiatry providers, RNs, master’s level clinicians, music therapists, recreation therapists, occupational therapists, art therapists and BCBAs
		+ 2 units on west bank; goal: stabilization and robust discharge plan with skills to successfully return to community; identification of community services available
		+ Can be difficult for families to discern this as acute care and not long-term care
		+ All family has access to therapy during this time: parenting help, psycho-education, how to improve mental health
	* Current challenges:
		+ Increasing aggression
		+ Barriers associated with patients with below-average cognitive or intellectual functioning
		+ Lack of step-down care options
			- Limited availability of services for younger children
			- Limited options in rural MN
			- Needing to send children out of state has many complications
		+ Increased length of stay
	* Question from Rod: sending children out of state; keeps getting told MN is one of higher tax states so why are we sending children out of state; what is going on with this?
		+ Marci: lost many programs during Covid; is social worker; reimbursement rates haven’t stayed current rendering some programs unsustainable
		+ Kristy: send children out of state once all local resources have been exhausted; some have wait lists of months and don’t want child to sit in inpatient treatment for that long
		+ If families can’t engage in family therapy this also doesn’t support child in completing programs and getting help; may increase trauma and sense of abandonment;
		+ Many programs have also closed
		+ This is very disappointing
	* Impact for prolonged stay in inpatient level of care
		+ Impact on child/patient, family, disrupts family relationships
		+ Availability for other patients/flow from ER
		+ Not equipped to let children go outdoors
		+ Impact on hospital care team/staff; moral injury to see these injustices
		+ Increase in aggression
		+ Impacts other patients seeing these behaviors
		+ Financial impact; they are not-for-profit, but need to be sustaining; not always getting payment for boarders; want to be able to keep patient there safely
	* Questions?
		+ Cheryl: advocacy group rep and lead Case Mgmt team; one barrier is hospital’s ability to do diagnostic assessment (not just psych assmt) to qualify them for other services;
		+ If absolutely necessary and unable to get quick appointment for diagnostic assessment (DA); also have another department (Transitions) that does DA for patients depending on circumstances; if had recent DA can do update
	* Recommendations
		+ Need more residential centers in MN taking kids with lower IQs and aggression and all genders
		+ Need more Multi systemic therapists (MST) providers; these are leaving MN now especially for home work with families;
		+ makes a difference for therapists to go into homes; many families report this; foster parents often can’t care for kids after treatment; need resources to work with foster parents to support them in providing what child needs
		+ Improved reimbursement rates so facilities can stay in business
		+ Broader range of services
		+ Have seen decrease in day-care programs
		+ Some bills in House and Senate would support these
		+ Recent MH Day on the Hill also addressed these proposals
		+ Rod: this board makes bi-annual recommendations to Gov’s Office and can consider these in next recommendations
		+ Need robust Help Line with links to provide robust resources to callers
		+ Miranda Salem: oversaw treatment center that had negative outcome, so closed facility
	* Contact Information for speakers
		+ Kristy.collier@fairview.org
		+ Samantha.sorensen@fairview.org
		+ Marcie.johnson@fairview.org
		+ Cici thanks speakers for valuable discussion
6. Member Updates – Cici Hughes - 10:50 – 10:55 (10:34)
	* Dani: federal legislative chair for PCA that had Hill Day yesterday; supporting school-based MH; spoke to Sens Omar, Finstad, Kelly Morrison, Amy Klobuchar and Tina Smith all willing to support bills; will put Bill’s name in chat; Creating Access and Resources in Education for Student Mental Health Act, also called the
	CARE for Student Mental Health Act
	* Rod: Natl Assn of Counties mtg in DC and is on Human Services cmte; bad news is that moving forward Medicare/Medicaid, SNAP, Tanf, and school lunch programs will be significantly cut; aimed at those under $75k getting inc tax reduction but these cuts will go deeper
7. Closing and Adjourn – Cici Hughes - 10:55 - 10:57 (10:39)
	* Next meeting on April 3rd and combined with Council
	* Please submit workgroup meeting notes; all Chairs are required to submit meeting notes of attendees
	* Submit invoices for these and workgroup meetings to mhadvisory.council.dhs@state.mn.us
	* Ending early to give time before Council meeting begins
	* Cici thanks everyone for their attendance

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**Thank You!**

The next State Advisory Council on Mental Health and Subcommittee on Children’s Mental Health meeting will be held on Thursday, April 3rd, 2025 from 10am until 1pm.

March meeting minutes and resources from guest speakers will be emailed to members.

Chat record:

​Rod Peterson, Dodge CC 3/6/2025 9:00 AM • is this working yet

Rod Peterson, Dodge CC 3/6/2025 9:03 AM • Roger

Host 3/6/2025 9:05 AM • Please take a moment to sign into the Meeting: Name, Pronouns, Whether you are a member of the Subcommittee, Council, or Guest, and which Work Group you attend.

Host 3/6/2025 9:05 AM • <https://padlet.com/sarafrnelson/state-advisory-council-on-mental-health-and-subcommittee-on--94worbfp0q422rvx>

Jen Springer 3/6/2025 9:21 AM • I would second this with Danny - last year I found out my term ended but it had past by a few months.

Sarah Driever 3/6/2025 9:22 AM • I echo Danny’s sentiments - we don’t know what our terms are or when/if our application is accepted to stay on the committee. Can our terms be better communicated?

Rod Peterson, Dodge CC 3/6/2025 9:23 AM • <https://commissionsandappointments.sos.state.mn.us/Agency/Details/153>

Rod Peterson, Dodge CC 3/6/2025 9:29 AM • no other sites that I am aware of

you can sign up for regular distributions from the SOS on boards and commissions. these are open positions that are listed.

Rod Peterson, Dodge CC 3/6/2025 9:31 AM • <https://www.sos.state.mn.us/boards-commissions/help-how-tos/>

Jen Springer 3/6/2025 9:35 AM • I can't figure out how to unmute.

Who can we reach out to with more appllication quesations, what email?

Danny Porter (he/him/his) 3/6/2025 9:37 AM • I am so appreciative of your leadership Lisa, Cici and others that are elected to this subcommittee. Thanks for bring this as a topic.

wayne Garrett 3/6/2025 9:37 AM • We need a in person orientation

Rod Peterson, Dodge CC 3/6/2025 9:41 AM • maybe do a meeting pole to the members for a good day and time to have an in person

Rod Peterson, Dodge CC 3/6/2025 9:42 AM • great to know

wayne Garrett 3/6/2025 9:43 AM • I still haven't figured up the SWIFT system

Rod Peterson, Dodge CC 3/6/2025 9:43 AM • reimbursement should be part of the cheat sheet also

Dani Indovino Cawley(she/her) 3/6/2025 9:45 AM • Disabled folks. Nothing about us without us!

Rod Peterson, Dodge CC 3/6/2025 9:45 AM • rural vs city:

Alyssa Greene, MDH 3/6/2025 9:45 AM • Those with disabilities

Cheryl 3/6/2025 9:45 AM • social economic groups, neurodiverse individuals, different areas of the staet

Danny Porter (he/him/his) 3/6/2025 9:45 AM • LGBTQ+

Sarah Driever 3/6/2025 9:45 AM • Neurodiverse community

Alyssa Greene, MDH 3/6/2025 9:45 AM • Those in all body shapes and sizes

Cheryl 3/6/2025 9:45 AM • more culturally diverse individuals

wayne Garrett 3/6/2025 9:45 AM • Rural and tribal

Sarah Driever 3/6/2025 9:45 AM • Immigrant or first generation folks

Dani Indovino Cawley(she/her) 3/6/2025 9:46 AM • I don’y know. A part if virtual is we don’t discuss our identities

Rod Peterson, Dodge CC 3/6/2025 9:46 AM • a child of an incarcerated parent

Cheryl 3/6/2025 9:47 AM • families expereinced with both juvenile justice and mental health

Jessica Gourneau (She/Her) 3/6/2025 9:48 AM • I am a part of the American Indian Mental Health Advisory Council and can ask those providers if they know of someone. I will say if they are outside the Twin Cities it is likely they may not be able to attend in person

Danny Porter (he/him/his) 3/6/2025 9:50 AM • Can you share the time and date of the future diverse community workgroups?

Danny Porter (he/him/his) 3/6/2025 9:52 AM • If you can share a invite with me I will work to join the diverse community workgroup. Danpporter@msn.com

Rod Peterson, Dodge CC 3/6/2025 9:54 AM • i thought we go until 11

wayne Garrett 3/6/2025 9:56 AM • Reaching out to tribal leadership directly to find members since they mostly have little mental health access

wayne Garrett 3/6/2025 10:16 AM • The care in the Dakota's is terrible and borders on exploitive. Sadly, often it is the only option for rural MN and it is far away for parents. My small hospital had a child for over two months boarding in the ER. This did significant harm to him.

wayne Garrett 3/6/2025 10:22 AM • Kristy and Marcie, your insights are spot on! 1-1 care for two months in the ER did our hospital's budget damage by taking resources away from providing care for other Pt's in the ER and our Adult inpatient unit.

Alyssa Greene, MDH 3/6/2025 10:25 AM • Hi all, have to leave for an in person meeting at 11am. Thanks for your work!

Rod Peterson, Dodge CC 3/6/2025 10:27 AM • good point on foster homes, and many times they have other children that they need to protect and nurture and may not have the ability

Rod Peterson, Dodge CC 3/6/2025 10:29 AM • We have had this issue in Dodge County directly

Dani Indovino Cawley(she/her) 3/6/2025 10:38 AM • Creating Access and Resources in Education for Student Mental Health Act, also called the
CARE for Student Mental Health Act, would fully authorize two federal grant programs that
provide targeted funding to school districts to expand school-based mental health services and
strengthen the pipeline of mental health professionals for schools. The bill would also improve
the application process for these grants to ensure smaller and rural districts can also benefit
from the program. In the previous Congress, this bill was led by Sen. John Cornyn (TX

Next Steps

|  |  |  |
| --- | --- | --- |
| Task | Who | By when |
| * + - Reach out to consumers
		- Contact a legislator
		- Reach out to parents of children with MH concerns
		- Reach out to young people who are consumers of MH services
		- Ask a provider of adolescent MH services
		- Identify and reach out to culturally specific providers
		- Contact your county commissioner
 | Members | Ongoing to help recruit new members |
| Contact Dan Porter regarding membership status | Sara | asap |
| Contact Wayne Garrett regarding SWIFT registration | Sara | asap |
| Contact Jeff Lind regarding application instruction | Sara | asap |
| Prepare and distribute member resource document including membership elevator speech, list of members and term dates, SWIFT directions and reimbursement info, application process | Leadership and Sara  | With meeting notes? |
| Will meet to review open seats for coming year | Leadership | ? |
| Consider sending member email when terms are about to end | Sara/leadership | tbd |
| Consider encouraging in-person attendance for future meetings | Leadership | ongoing |
| * + - Everyone recruit someone to apply
		- Think of ways to increase diversity representation on the Children’s Subcommittee
		- Attend the Outreach to Diverse Communities workgroup
		- Invite a friend, colleagues, professional to next month’s combined meeting
 | Members | ongoing |
| Send link to Diversity Communities workgroup to all members | Sara | Before 4/2/25 |
| Send Guest speaker slides and contact info (Samantha Sorenson and Elliot) to members; Kristy.collier@fairview.org, Samantha.sorensen@fairview.orgMarcie.johnson@fairview.org | Sara | With meeting notes |
| Revisit U of M guest speaker recommendations in next round of Gov’s Office recommendations | Leadership/workgroup chairs | January 2026 |