**Mental Health Sub-Committee**  
**April 18, 2018**

**Present:** Brian Hart, Shannon Oakes, Cynthia Cuyle, Rebecca Robertshaw, Marilyn Cristofaro, Lisa Daley, Staff member from Glove House CR (*name unable to be read on sign in sheet*)

**Excused:** David McCausland, April O’Laughlin, Annheleen Smith,

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**Minutes:**

Approved without changes

**Introductions:**

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**Suicide Prevention Update—Shannon Oakes:**

- **Walk A Mile Event:** Saturday May 5, 2018 at Eldridge Park. There are approximately 500 hundred people registered, and that will rapidly increase next month, as we get closer to the event. She has been receiving many calls from people who want to attend, but not register, and they were encouraged to join us. Volunteers are needed for t-shirt distribution day and at the walk as well, so please spread the word and have interested individuals contact Shannon directly. Raffle prize donations will end tomorrow. We typically have approximately 40 prizes, and this year we are raffling off a 39” smart TV. Help is needed to clean up the Hope garden and plant new flowers the morning of the 26th.

**Director of Community Services report - Brian Hart:**

- **State budget analysis:** Brian noted that the only significant item in the mental health section was the continuation of the licensure exception allowing unlicensed individuals to continue to work at agencies that are licensed by the state. No time frame was noted in the analysis, but historically it is a two year extension.

- **5.07 Plan:** The committee reviewed that local plan, and spent some time discussing section 2n (Mental Health Clinic goals) as Jennifer had communication with Brian that the reduction to a caseload of 45 was too low, but didn’t offer any guidance as to what would be reasonable. After much discussion the committee recommended changing the goal to be, “Utilize quality Assurance monitoring to evaluate medical necessity of all cases for assuring appropriate caseloads.” Shannon made a motion to send the plan to the CSB for approval with that change, and it was seconded by Marilyn. It was approved unanimously.
**Sharing by Community Members:**

- A question was asked by CC regarding the benefits of the Max projects, which lead to an overall discussion of DSRIP. The consensus in the room is that DSRIP was designed poorly by NYS DOH in that it seems to primarily encourage boxes to be checked, and doesn’t easily address systemic changes that are sustainable, nor necessarily focus on avoidable hospitalizations as was the premise to begin with.

⚠️ The next meeting is scheduled for May 16, 2018.