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| **SERCC Executive Team Meeting****Date and Time: January 27th, 2022, 3:30pm-5:00pm****Location: TEAMS**  |

**Agenda**

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| **Time CDT**  | **Topic** | **Proponent(s)** | **Attachment** |
| 3:30 pm  | Welcome | Chair-Dr. Sutor |  |
| 3:35 pm | Executive Committee Vision Check | Dr. Sutor |  |
| 3:45 pm | Datao Census o County of residence | Nicole |  |
| 4:00pm | Budget and Finance |  Margaret/Nicole |  |
| 4:20 pm | Staffing o Team wellness and care delivery o Turnovero Applicant Pool o Census impact (Are we running at capacity) | Nicole/Tim |  |
| 4:35 pm | Governance Discussion  | Amy |  |
| 4:50 pm | Mental Health Bill Language | Tim |  |
| 5:00pm  | Adjourn  | All |  |

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| Attendance: **Must have quorum to vote** |

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| **Member** |  | **Member** |  | **Voting Member** |  |
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X= attending; 0 = absent

Minutes of the December 14, 2021 SERCC Executive Board meeting.

Meeting opened at 3:31pm, motion made by Dr. Hoffman and seconded by Nina Arneson, motion passed.

Motion to approve the September 23rd meeting minutes and the October 28th meeting minutes made by Nina Arneson and second by Dr. Hoffman, motion passed.

Financial reports presented by Ken Varbel and then Nicole Mucheck moved into the utilization data of SERCC. Nicole reported a COVID exposure for Adult Residential in November and one for the Youth Residential in December that necessitated a closure of each residential for about a week when the exposure happened. During surges there are sometimes consumers waiting to be assessed. Dr Clements commented that the ED is also seeing surges of mental health concerns in the community. Dr. Clements also asked to share the data presented at a community round table regarding the community mental health. Ken Varbel moved onto discuss other financial reports in light of the utilization data. Ken Varbel did mention that Nexus is still working through the billing contract process with some healthplans to begin billing for services. Hopeful that these billing processes will come through soon and begin billing services in January. Aware of back billing deadlines but are not yet concerned that the deadline is too close or passed. Has been working with a consultant regarding the billing hoops/contracts with commercial insurance and health plans. Currently only billing youth residential out to Counties. Raised the question of modifying the budget to address cash flow concerns ($700,000) based on the current lack of ability to bill and delay in start date due to construction delays. Not actually asking for an increase in funding but an advance of funding earmarked for 2022. Discussion around the average daily census being based on 6 adults and 4 youth and when census dips below that the budget is much less stable. Due to staffing needs, the cost of SERCC is the same regardless of the census numbers. Can the admission criteria be tweaked? Maybe, Nexus would need to look at license changes and the original intent of SERCC regarding the implications of changing the bed admission criteria. Is there other referral options we are not using? Are law enforcement and ambulance bringing clients to SERCC or not? Should there be more outreach to LE and ambulance? Can the bed census be easily and accurately shared with the OMC and Mayo EDs? The referral form has been updated and online and acceptance can be made within an hour to accept the client. Developing a level of trust among the partners and the community will take time. Nexus will continue to look at referral processes and building relationships. Dr. Sutor will connect with Erin Sexton regarding the fund advance request. Yes, the fund advance request was discussed at the finance committee last week. Erin Sexton joined the discussion about the fund advance request and is willing to set up a call between Nexus and Mayo. Should Nexus be looking into COVID specific funds for lost revenue due to the COVID closures? Concern that the numbers wouldn’t be large enough to make a difference but still a thought that might be pursued. Can we flex the facility bed arrangement – no the youth 8 beds are designated for youth and can not change that. There is also proximity to the other buildings around SERCC regarding outdoor space. Should the admission criteria documents be tweaked and/or shared with others to clarify admissions process?

COVID Update – as mentioned there was a COVID exposure in both the adult (November) and youth (December) residential. Continued to support the adult consumer and closed the residential – all staff tested negative in and around exposure. The youth was taken home upon positive test but Nexus continued to followed the protocol around testing and all staff and other youth in residential were negative. Neither individual had symptoms upon admission and will continue to test all clients upon walking into SERCC. Dr. Sutor raised concerns about the masking policy and staff not following the masking policies – feels strongly that masking policy needs to be better enforced. Other Ex. Board members expressed the same need for following masking policy. Nicole will continue to push the mask policy forward. The idea of a mask mandate for all clients coming in the door to mask was raised, currently only staff are required to mask but not the clients. The mask mandate for clients was supported by other Ex Board members.

Committee Updates – steering committee met in November and will meet every other month going forward and anticipate a robust discussion regarding advancing practice in the facility. Advisory group – looking for more consumers to participate and Tim Hunter is connecting with County LACs. Peer support individuals are participating in this group. Facilities – working with DHS and Olmsted County Attorney Office to push the contractor to finish the building construction details and fix the problems that have come up, such as sinks falling off the walls and showers cracking.

Youth residential crisis services – Tim Hunter started the discussion around changing the youth residential payment to a MA billable service. Working with the State and other Counties to move this forward. This would essentially make youth residential billing same/similar to how the adult residential billing works. Nexus is supportive and would work along with everyone to move this idea/process forward.

Dr. Sutor thanked everyone for the work and energy around SERCC and the work we are all doing and especially the work Nexus is doing.

Motion made to close the meeting by Amy Rauchwarter and second by Erin Sexton, motion passed.

Meeting closed at 4:55pm.