

## COUNCIL WORK SESSION MINUTES

**June 29, 2022 – 4:00 p.m.**  
**Council Chamber – City Hall, 1100 Frederick Avenue**

A Council work session was held to for a Family Guidance American Rescue Plan Act (ARPA) presentation.

Attending: Mayor John Josendale and Councilmembers Taylor Crouse, Madison Davis, Michael Grimm, Marty Novak, Kenton Randolph, Jeff Schomburg, Randy Schultz and Andy Trout.

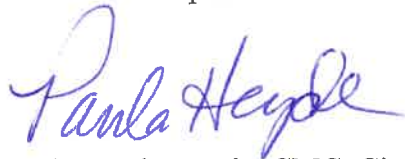
Bryan Carter, City Manager; Laurie Tietjen, Finance Director; Kenny Cordonnier, Fire Chief; Chris Connally, Police Chief; Lisa Robertson, City Attorney; Dave Hart, Commander/Patrol Division; Mary Robertson, Asst. to City Manager/Communications & Public Relations Manager; Ed Schilling, Multimedia Planner; and Paula Heyde, City Clerk.

Mayor John Josendale called the meeting to order. He said there have been a number of questions come up in the community that the City Council feels are important and need to be explained. Part of the reason the meeting has been scheduled is there are a number of different stories about what's going to happen, how it's going to happen, how it's going to be serviced and this is the opportunity for Family Guidance to answer those questions and make a presentation. The City Council is not against Family Guidance or the procedure or the process but wants to make sure the procedure and the plan is in place to do this correctly.

Kristina Hannon, Co-CEO of Family Guidance Center, gave a power point presentation on the "Behavioral Health Urgent Care Center" (copy attached).

After answering questions from the City Council, Mayor Josendale told Ms. Hannon that he thinks her presentation answered everyone's questions and he appreciated her transparency. He said ARPA funds were allocated to Family Guidance Center. The agency has not requested the funds at this point in time. The Council asked for the questions to be answered and he believes they've all been answered today so going forward they'll consider this case closed.

The meeting adjourned at 4:25 p.m.



Minutes transcribed by Paula Heyde, CMC, City Clerk.

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# BEHAVIORAL HEALTH URGENT CARE CENTER

FAMILY GUIDANCE CENTER FOR BEHAVIORAL HEALTHCARE



COMING SOON



**BEHAVIORAL HEALTH  
URGENT CARE**

No Wrong Door

## UNDERSTANDING THE NEED

- Mosaic Community Health Needs Assessment
  - Health issues impacting community the most: MH
  - Weaknesses of community: access to MH care
  - What would improve the community: Behavioral Health Services
- Imagine St. Joseph 2040 Plan
  - “Working with our local health care providers, the community creates an early intervention program for those individuals challenged with mental health issues and addiction”
- City Survey
  - Affordable healthcare services most important
  - 68% reported expansion of MH services as important or most important



## UNDERSTANDING THE NEED

- Suicide rate for Mosiac CHNA area = 18.4 per 100K residents; US rate= 13.8 per 100K
- 17% of adults in NW MO report binge drinking
- 2021 ED usage for Mental Health
  - 708 ED visits with a principal dx of MH seen in ED and discharged to community
  - 625 ED visits with a principal dx of MH seen in ED and then admitted to inpatient care



## ADDRESSING CONCERNS: PATIENTS CAN LEAVE

- No outpatient health care provider can hold a patient against their will
- People seeking help are motivated to meet with people who are offering to help them
- For consumers who present an imminent danger of harm to self/others, FGC utilizes 96 hour hold
- Statewide for BHUCC's only 6% of consumers left against medical advice (54 pts in May 22 at 7 centers)
  - Ozark Center UBS reports 1%



## ADDRESSING CONCERNS: TRANSPORTATION

- The following is the transportation plan which has been outlined
  - Assess family/natural supports; provide gas vouchers as needed to assist family/friends with transportation needs
  - Utilize public transportation for local residents; FGC can provide bus tickets if people can not afford these
  - Uber Health
  - Local cab companies
  - FGC staff transport in their own vehicles and in agency owned vehicles
  - Statewide BHUCC data: 7% presented with transportation needs



## ADDRESSING CONCERNS: NEIGHBORHOOD WILL HAVE EXPOSURE TO PEOPLE IN CRISIS

- People coming in to seek help don't often leave; people coming in a crisis want help
- Providing on demand care promotes stability and can decrease episodes of acute crisis
- Services will be performed in an office by professional healthcare staff
- Not just for acute crises; we need to redefine what a BH crisis is
  - Bridge Services
  - Medication Assisted Treatment Initiation
  - Avoid acute crises by early intervention
- Statewide 10% of people referred to BHUCC's have required transfer May 22
- Ozark UBS: 3% are brought in by law enforcement, 1% leave AMA, increase in private insurance consumers
- Concerns about aggressive behavior: UBS has called LE one time FY 22



## ADDRESSING CONCERNS

- FGC staff work with crises daily across offices and in community without evidence of destabilizing the area
- 24/7/365 MCRT: 619 Crisis Screenings FY 22 YTD- MCRT will continue to respond to crises in the community
- Community based crisis support services will still remain in place
  - FGC will continue to have full time BH support dedicated to Buchanan Co. Jail; Andrew/Nodaway/DeKalb Regional Jail
  - FGC will continue to have Crisis Clinician embedded with SJPD to respond to BH crises with officers
  - FGC will continue to have open access at 22<sup>nd</sup> street and 901 Felix
- FGC staff are trained to work with individuals in crisis using multiple modalities
  - QPR (question, persuade, refer) CALM (counseling on access to lethal means reduction), Motivational Interviewing, Cognitive Behavioral Therapy
  - Use of standardized assessments (Columbia Suicide Severity Rating Scale)



## ADDRESSING CONCERNS: NEIGHBORING DAYCARE MAY NOT BE ADEQUATELY SHIELDED

- Services will occur in the office so daycare will not have sight lines of services
- FGC has spoken with both daycares and they are supportive
- Smoking area will be in the front of the building
- Involuntary patients can not be brought in; not an ED or hospital setting
- Statewide, majority of referrals at BHUCC's are people seeking BH treatment services
  - Avg length of time LEOs are present with people brought in: **12 minutes**
  - 82% statewide are stabilized, referred to outpatient services, AVG LOS at BHUCC is 2.5 hours
  - 3% of consumers are coming in to divert from detention/jail (24 in May 22); 1% coming in to divert from inpatient BH care; Indicates people aren't presenting as acutely ill as is presumed



## ADDRESSING CONCERNS: FGC LACKS A PLAN FOR SUPERVISION OF PRESCRIPTION DRUGS

- FGC utilizes an EHR (Cerner Anasazi) in which standard assessments and individualized treatment plans are completed
- FGC employs Psychiatrists licensed in the State of MO as well as Psychiatric Mental Health Nurse Practitioners licensed to practice in MO. All PMHNPs are in collaborative practice agreements with FGC employed Psychiatrists to ensure effective collaboration
- FGC utilizes electronic prescribing where prescriptions are sent directly (electronically) to pharmacy of consumer's choosing. This is standard practice across areas of medicine and there is not a safer way to prescribe
- FGC has an on site pharmacy at one location with a Pharm.D employed who is available for consult as needed
- FGC has a BHUCC Medical Director who will be at the facility full time; experience in bringing up similar program
- FGC has a Program Director (LPC) who has over 15 years experience in BH crisis management





# QUESTIONS