



Executive Committee Meeting Agenda. Date: March 2, 2020- Time: 8:30 a.m. – 10:00 a.m.

In Person, Lines for Life, 5100 SW Macadam Ave #400, Portland, OR 97329

<https://zoom.us/j/531986032> Meeting ID: 531 986 032 One tap mobile +16699006833,,531986032#

Members Present: Galli Murray, David Westbrook, Donald Erickson, Kirk Wolfe, Jerry Gabay, Meghan Crane, Laura Rose Misaras, Ryan Price, John Seeley, Kimberlee Jones; Jill Baker, Shanda Hostletler

Members Absent: Juanita Aniceto, Jerry Gabay

Staff Attending: Annette Marcus (Alliance); Emily Morrissey (YYEA); Jennifer Fraga (Alliance); Linda Hockman (consultant)

Guests: Richard Donovan, OSBA , Legislative Specialist and Morgan Allen, COSA, Deputy Executive Director, Policy and Advocacy


Time	Agenda Item/ Who	What	Materials/Notes
8:30	Welcome	Introductions, Announcements,	Guests, Richard Donovan, representing Oregon School Board Association and Morgan Allen, representing Confederation of School Administrators are attending to provide input on proposed rules for SB 52
8:35	Discussion re: SB52 rules – David, Richard Donovan (OSBA), COSA (TBD)	Meet with OSBA and COSA representatives to discuss Alliance SB52 rules recommendation that include procedure for sharing information between hospitals and school districts	David – today is a listening session to hear the perspectives of OSBA and COSA on specific areas of the proposed rules related to SB 52. The Alliance hasn’t taken a position on the suggestion to move language from rules to guidance and recommendations will come after today’s discussion. David asked Jeremy to provide context for Richard and Morgan’s presentations. Jeremy – today is about getting more information about why COSA and OSBA propose the items we will hear about are better addressed as guidance rather than rules. What we’re hoping to hear is the reasoning behind moving from rules to guidance around services to youth after being seen in hospitalization or being seen in ER. We support school districts that

			<p>have already submitted plans, that support won't change weather it goes from rules to guidance.</p> <p>Richard – The OSBA and Alliance are in agreement on what we would like to see happen for students; the hope is for OSBA and the Alliance reach consensus on how to get there. Richard reminded the committee that OSBA was a strong supporter Adi's Act. There are two parts of the draft rules that raised concern: 1) communication between hospitals and school districts; and, 2) the plans.</p> <p>NOTE: this is the section of draft rules for SB 52 Richard is referring to: Sec. 3(c) and (d): <i>“(c) Procedures for sharing information between local hospitals and school districts regarding a student who has been seen in a hospital setting, including an emergency room, for a behavioral health crisis where a valid release of information has been voluntarily signed by the student or the student’s parent or guardian. The procedure must include attempts to enter into an agreement with hospitals to share information on the discharge of a student who has been seen at the hospital due to a behavioral health crisis. (d) Procedures for reentry into the school environment following a hospitalization;”</i></p> <p>Concerns: Sec.3(c) The hospital requirement is going to be a big challenge. Some rural school districts do not have a local hospital, will they be tied to one a great distance from their community? School districts have no authority over hospitals nor do these rules. Sharing information is complicated when it comes to students and health records due to HIPPA and FERPA requirements. With rules, comes a funding hammer. There is potential for schools to lose funding if they are unable to reach agreement with hospitals on information sharing with schools. Taking it out of rules and putting into guidance</p>
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			<p>doesn't minimize the value, guidance is the first place schools go for direction. Schools look to guidance as they develop procedures more than the rules.</p> <p>Morgan – concern from COSA is focused around requirement to reach out to hospitals and create plans; these concerns exist for the same reasons Richard indicated including:</p> <ol style="list-style-type: none"> 1. Only a handful of hospitals / doctors equipped to deal with mental health emergencies 2. Things not listed in the bill are listed in the rules (requiring consultation / plans with hospitals); nothing in legislation that would compel hospitals to do either; public schools and medical systems don't work well together and systems don't talk with each other 3. Adi's act mentions that if the school doesn't do something in their plan that the state requires, the state can withhold their funding; geography is a concern when there isn't a medical service provider that is equipped is available. <p>David: question – does having something in rules means it can't go into guidance? Can it be in both?</p> <p>Richard – think of it as a descending order: rules tend to be more wide open, less specific than bill. From rules, guidance is where you put the detail, more specific on how to do something.</p> <p>Jeremy – my perspective, rules are meant to ensure that if there were pieces missed or definitions missing in the bill, rules clear it up. Guidance is to ensure things are going to be successful, where the intent of the law can be carried out</p> <p>Emily – Is there any way to minimize the burden on schools and have a shared responsibility with hospital to take away the worry about funding? Her understanding is that it isn't a requirement but hospitals/schools endeavor to achieve.</p> <p>Morgan – there's nothing in the law that compels hospitals to work with schools; better to focus on procedures for reentry into schools after rather than how to put the onus on hospitals. Better to have a</p>
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			<p>model at the state level on reentry plan model that schools can rely on rather than specific to an incident.</p> <p>David – As Emily noted, there is nothing in the proposed rules that states the hammer will be used to enforce it. Rather the Alliance proposed rules states there must be an attempt by schools hamto get an agreement. mer isn't tied to a must make hospital connection a requirement. It's not really the schools responsibility, there's not a law to mandate hospitals; David happy to bring the possibility of law to do so to the Alliance</p> <p>Richard – this rule does not have any authority over hospitals; if you want to pursue a bill, he is happy to help Alliance draft a bill. Scope creep – when the rules go beyond bill which is what the proposed rules does. Accounting for attempts can be done but burdensome; better to put into guidance, put the reentry into procedures rather than something that could result in loss of funding.</p> <p>David – thanked Richard, Morgan and Jeremy.</p> <p>Annette – it is clear that we care about the communication between schools and hospitals (she cited laws in place for postvention), addressing this issue is absolutely critical – it's not as much a problem in psych hospital the gaps are in the medical system outside of the psych hospital; we need to continue to work on improved communication, kids are dying;</p> <p>Richard – hope we consider today's conversation a first step; best to tackle one piece at a time to be thorough; would like C to be changed, find compromised language and continue working together. If in guidance, you can change it and be flexible when change is needed – if it's in a rule, not so easy. Mandates are in the rules; it is procedures in guidance where things are spelled out for implementation. Looking forward to your feedback.</p> <p>Jeremy – what the OED needs is evidence/data for any rule needs to be there. Alliance needs to think about evidence/support for C or</p>
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			<p>D in rule to show why what is proposed needs to be included in any proposal the Alliance sends. Richard, Morgan and Jeremy left the call.</p> <p>David – asked group to bring forward thoughts</p> <p>Kirk – would like to see having hospitals offer the Alliance their perspective; David willing to reach out to Danielle for perspective; Kirk had a conversation with one hospital and they thought it was a reasonable rule. Kirk is worried that if we include a funding stick it could jeopardize future bills.</p> <p>Emily – it can be in both guidance and rules; Alliance will have opportunity to provide input into guidance</p> <p>Ryan – Alliance should make effort to work with hospital professional organizations; there will be future bills and it will help us in future endeavors/other bills in the long term to have a positive relationship with hospitals/medical service providers.</p> <p>Jill – does it make sense to reach out to legislators who were involved with Adi’s Act; David said we definitely can do that. David - If the group feels we need a special session to discuss this issue further, we can arrange.</p> <p>Action Item: David will reach out to Danielle Myers to see their perspective on the proposed rules.</p> <p>Action Item: Follow-up with legislators involved in the SB 52 process for their input to discuss concerns</p>
8:55	OHA Update – Jill Baker, Meghan Crane	YSIPP Timeline Proposal – see attached document. Discussion	<p>Jill walked through the process for YSIPP Timeline. Broad questions, to assess “stop, start, continue”. Jill’s job is shifting to gather input for YSIPP. She asked Exec Comm to provide input as to groups Jill should consider talking with (groups beyond the Alliance).</p> <p>Survey that will go out to all Alliance committees in mid-March.</p>

			<p>May – looking forward to June quarterly full day meeting. Partners mapped out responses of “stop, start, continue”. Think of next YSIPP as an update not a new YSIPP. Jill will provide monthly updates on progress of writing and rec’d feedback. First draft for review in September, edits. October feedback at suicide conference. The 2021-2025 plan to be ready for December release.</p> <p>Annette said we should orient the full Alliance at the March meeting; David asked Jill for points she wants highlighted.</p> <p>David worried about timeframe for feedback June (June 5 – 12th) – at the quarterly meeting is the time to look/check for gaps. Jill plans to report out at each Executive Committee meeting.</p> <p>March 6th marks the start of the new Big Six programs. Announced Lines for Life position to work with schools on school plans and training.</p> <div style="text-align: center;">  </div> <p>Big Six Poster OHA Poster FINAL harper.pdf</p> <p>Megan – GLS grant RFP is out; new person for adult suicide prevention person is onboard. Debra DeMato. David invited her to join next meeting and to provide initial thought adult suicide</p>
9:20	Update Youth Engagement – Emily, Annette, Jill	New Member Application Update on youth actions	<p>YYEA Testimony (Draft)</p> <p>YYEA Testimony (Draft) - Handout</p> <p>Emily and Jenn have worked together to create 9 SMART Goals from the discussion held in the December meeting</p>

			<p>The top 4 are the high priorities that are being focused on now and have action steps to accomplish these goals</p> <p>Emma Cooper's application for membership was reviewed. A motion was passed to send her application to Jill and then Patrick Allen for approval.</p> <p>David – asked for motion to approve application, Galli made the motion to accept application; Don, seconded. The motion passed with all aye's; no nay's not abstentions;</p> <p>Action: Annette forward recommendation to OHA regarding Emma Cooper membership.</p> <p>Galli – next time take a look at the second applicant; Annette and Jenn to circulate the details of the applicant.</p>
9:25	Next Steps HB3090 – David, Galli	Transitions of Care shares plan regarding next steps on monitoring implementation of HB3090	<p>Transitions of Care Letter to Rep. Alissa Keny-Guyer Galli – asked for feedback; Don and Kimberly said the letter looked good; transitions of care committee has spent many hours on this issue. The letter ques up Keny-Guyer successor – gives a clear pathway for her successor. Handout/letter re: hospitals.</p> <p>Galli asked for approval to send letter out to Keny-Guyer and the follow-up would be to ask her who she would see taking it over as sponsor.</p> <p>Don made a motion was to approve the letter/sending out; Kimberly seconded. Motion passed with no nay's; no abstentions. Approved for David and Galli to send the letter to Alisa Keny-Guyer</p> <p>Meghan – OHA is working on HB 3090 and asked for guidance on how to proceed in terms of sharing. Internal discussion will be broader than the survey. Part of the discussion will be about addressing broader questions that the Alliance raised.</p> <p>Galli – survey is one piece; Keny-Guyer has requested a hearing in May; Keny-Guyer is supportive of two letters from the Alliance,</p>

			<p>encouraged Meghan to use the letters in internal meetings; the questions posed in second letter need to be addressed; Handout?</p> <p>Action: Annette will prepare Transitions of Care Committee letter to Rep. Alissa Keny-Guyer for David and Galli's signature and send letter.</p>
9:35	March Quarterly Meeting - Annette	Note: Jill and Shanda have a scheduling conflict and are unable to attend the March Quarterly mtg.	<p>Proposed Agenda Items</p> <ul style="list-style-type: none"> • Review, Preview, Big View • Announcement of six new initiatives (Big 6) • YSIPP – process for update/next 5-year plan • Youth Summit Report • Focus of meeting will be on identifying Alliance legislative agenda: <ul style="list-style-type: none"> --Overview of data (Healthy Teens, latest youth suicide data), --Facilitated process to set priorities for 2020 Session <p>Annette asked for any ideas on process for developing the policy agenda, let her know.</p>
9:50	Alliance Membership -- David	Process for identifying new members; Follow up re engagement and interest in ongoing membership of current members.	<p>Process for Identifying New Members - Tabled for April agenda</p> <p>Meghan –OHA leadership has asked Jill and Meghan to gather external voice/input on HB 3090; in addition to David, Galli and Annette, Galli asked that the U of O Lab be represented – John Seeley will do; after the first meeting in two weeks, there will likely be other and more targeted meetings.</p>
10:00	Meeting Adjourns		

<p>Action Items from Previous Meetings in Red. Progress on Action Items in Blue.</p>	<p>Action: Exec recommends Eric Martz be appointed as new member. Letter has been issued. Annette and Jenn met with Eric to orient him to the Alliance. Eric is now an official Alliance Member and has opted to serve on the schools committee, LGBTQ+ workgroup, and executive committee.</p> <p>Action: Schools Committee – dig into the discussion about the importance of developing trust between students, families and school staff—especially regarding sharing mental health information.</p>
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Are there readiness assessments? Research? Kimberlee is working with Jonathan Rochelle on getting some research to share with the committee.

Action: John Seeley and Jerry Gabay will take the lead in developing a letter from the Alliance to OHA with questions, recommendations and concerns regarding 3090 implementation and compliance with rules. Include in letter a time frame for action. A draft of the letter will be ready for the executive committee before the February meeting. Galli suggests also engaging Julie Magers in the letter writing process. Status update at February meeting. This task is complete as of end of February.

Action: Committee chairs take some time during meetings to address whether their committee recommends any specific legislative action for the long session in 2021. Most committees did not get to this in January. Chairs will need to prioritize for February. Any updates in March meeting?

Action: Annette and Jennifer create member/attendee matrix which highlights socio-cultural as well as specific expertise. Jenn developed a survey to getting better socio-cultural information about members. The goal of this process is to work towards having an Alliance that includes people with lived experience, diverse cultural backgrounds, young people and groups at highest risk of youth/young adult suicide.

Action: Annette to make final location arrangements for June Quarterly meeting. This is done – meeting will take place in Newport

Action: Emily and Jenn to complete SMART Goals related to youth engagement. This is in progress. Should have an update for the March executive meeting.

Action: Add an agenda item for “Review and Feedback” to all committee agendas. Done

Action: David and Galli to finalize letter, Annette to send out. Done

Action: Schools Committee to continue to track COSA and OSBA position. Meeting with COSA/OSBA at March exec meeting.

Action: The Executive Committee will forward a request for membership for Emily Watson to Jill Baker. Annette met with Emily Watson and oriented her to the Alliance and discussed how to increase engagement with military/veterans.

Action: Annette will send out a draft agenda for feedback and finalize for March Quarterly meeting. To be addressed in March meeting?

Action: Galli to provide an update to Executive Committee on training and suicide ideology support groups in Clackamas County. This is on hold for the moment.

Action: Committee chairs take some time during meetings to address whether their committee recommends any specific legislative action for the long session in 2021. Most committees did not get to this in January. Chairs will need to prioritize for February. Any updates in March meeting?

Action: Annette to present draft guidelines for safe story sharing as developed by Connect at March Executive Committee meeting. Done. Explore having a member of exec share story at March meeting.

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