

ALASKA MENTAL HEALTH TRUST AUTHORITY
PLANNING COMMITTEE MEETING

July 26, 2016
1:00 p.m.

Taken at:

Alaska Mental Health Trust Authority
3745 Community Park Loop, Suite 120
Anchorage, Alaska

OFFICIAL MINUTES

Trustees present:

Mary Jane Michael, Chair
Carlton Smith
Laraine Derr (via Speakerphone)
Larry Norene
Paula Easley
Russ Webb

Trust staff present:

Jeff Jessee
Steve Williams
Miri Smith-Coolidge
Amanda Lofgren
Heidi Wailand
Carley Lawrence
Luke Lind
Michael Baldwin
Carrie Predeger
Katie Baldwin-Johnson
Valette Keller

Others participating:

Nancy Burke; Martha Schoenthal; DeWayne Harris; Thea Bemben; Alan Green; Sandra Heffern.

PROCEEDINGS

CHAIR MICHAEL calls the meeting to order and notes that all trustees are present, with the exception of Jerome Selby. She asks for any announcements. She states that the trustees did visit the Alaska Mental Health Consumer Web. It was a very good site visit and very informative about the program. She moves to the approval of the agenda and states that she would like to add a Denardo update. She asks for any other additions. There being none, she asks for a motion.

TRUSTEE NORENE makes a motion to approve the agenda as amended.

TRUSTEE WEBB seconds.

There being no objection, the motion is approved.

CHAIR MICHAEL moves to the CEO update and recognizes Jeff Jessee.

MR. JESSEE states that there was a meeting with all the stakeholders with the fiscal year '18-'19 stakeholder meeting process. There was a debrief and feedback was given. He continues that at the August Planning Committee meeting, that feedback will be presented as part of the draft of the '18-19' budget to see how it is reflected in the recommendation that staff will make.

CHAIR MICHAEL states that she and Trustee Easley participated in the two-day work session and the process was great.

MR. JESSEE states that staff put it together. He continues that there was a request to get Charlie Currie and Stephanie Colston to be at the Planning Committee meeting, but the schedules did not work out for them to be present; but they will be available on the phone. This will enable them to give some feedback from their perspectives on how the Medicaid reform process is going and also to answer questions.

CHAIR MICHAEL states that Mr. Currie and Ms. Colston are the main consultants on Medicaid. She asks if the trustees have any specific topics to discuss or should we just have a general review.

TRUSTEE EASLEY states concern on the timing, how fast things will get done and programs being put in place. She continues that she would like to hear from them on both the ASOs and the ACOs, the administrative services organizations and the accountable care organizations, and how that will get in place.

MR. JESSEE states that staff has asked to have states identified for site visits and have also made some recommendations to the Department and the Trust. He explains this in greater detail.

TRUSTEE DERR states that Pennsylvania and Virginia are tremendously different from Alaska.

MR. JESSEE states that apparently there are significant parts of those states that are very rural; at least in the Lower 48 sense, not remote in the Alaska sense.

TRUSTEE WEBB states that it would be useful to have the consultants thinking about what elements of the design process would be illustrated and represented at each of these sites and try to compare what those would look like.

MR. BALDWIN agrees.

MS. LOFGREN gives a quick update on the changes due to the reduction in the budget for dental services. She states that there are two main areas that may impact beneficiaries. The first major change is in emergent care which previously did not have a cap on the dollar amount an individual could expend. She explains more fully and states that they were moved to enhanced care, which means that some individuals will meet the annual limit sooner and will have to wait until next fiscal year to get the remainder of the services. She continues that the second big change is coverage for upper and lower immediate dentures. The department will no longer cover the temporary dentures, and some of the justification is that the temporaries are essentially the same cost as the permanents. She adds that the impact means that some individuals could go several months without teeth. She states that she plans to continue working with the Department to understand the impact on the number of beneficiaries that will be impacted and would like to bring forward more information with a future memo that outlines all of this. She adds that she will get the dollar amount on the cap.

MR. JESSEE asks for any questions. There being none, he states that Ms. Lofgren will give a short update on home- and community-based services.

MS. LOFGREN states that the contractors were in town for the HCBS service reform for a week-long meeting last week. She continues that Health Management Associates who have the contract for the 1915 (i) and (k) implementation were there. She adds that Steve Lutsky, HCBS Strategies, the contractor that is working on the implementation for the assessment tool and is also providing third-party oversight to the HMA contract to make sure that it aligns with the assessment tool, was also present. She states that there was an Implementation Development Council meeting Thursday, which is made up of self-advocates, as well as the advisory partners to review the various deliverables within the 1915 (i) and (k) report, which is due this Friday. She continues that she would like to come back at the next committee to give an update with Duane on the process and what decisions and recommendations were made from that project.

MR. JESSEE moves on to the Denardo update. He states that, originally, Representative Neuman had proposed a \$30 million substance use disorder package, three-year funding package. He continues, that was reduced to \$11 million in the conference committee, and the Governor vetoed \$5 million of that \$11 million. There is a \$5 million three-year appropriation to fill gaps in substance use disorder services across the State. He states that the RFP will require that communities that apply have done some kind of needs assessment that establishes what the gaps are and the priorities for those gaps. He goes through this in greater detail.

TRUSTEE WEBB asks if there are currently two facilities in Fairbanks that are vacant.

MR. MORRISON replies, yes, the Denardo Center and the Fahrenkamp Center, which are close to each other. Fahrenkamp was under a free lease to an organization that was scheduled to use it through the end of this year, but they have vacated.

TRUSTEE WEBB asks about the costs of keeping those two facilities up and running.

MR. MORRISON asks Craig Driver, the asset manager, to answer.

MR. DRIVER replies that the budget for the Fahrenkamp building for the upcoming year is \$166,138. He states that it was approved for \$134,138 at the last RMC meeting. He continues that at the next meeting they will ask for a bump back to \$166,138 for the additional six months of expenses. He states that the Denardo operating expenses for the upcoming year is \$67,841. He continues that the facilities are next to each other on the same parcel and are similar in design and scope. The Fahrenkamp is bigger and costs more.

MR. JESSE states that there has been some very preliminary discussion with criminal justice reform in using the Denardo for the sobering center. He adds that it is conceivable that Fahrenkamp could be suitable for that type of purpose, as well.

MR. WILLIAMS states that the other element impact in regards to Fahrenkamp and potential usages is some interest with some of the organizations involved with the Fairbanks re-entry coalitions as a transitional housing placement.

A short discussion ensues. It then continues on to the pros and cons of the possibility of Paws using the Denardo Center for the handling of dogs.

MR. JESSEE clarifies that this is a project for Veterans with PTSD.

The discussion continues.

MR. MORRISON states that the trustees had a motion to hold the facility until August 11th, and staff was under the impression that the Legislature would have completed their duties.

CHAIR MICHAEL asks if the trustees want to extend or not extend it.

TRUSTEE EASLEY states that it is a bird in the hand.

TRUSTEE SMITH asks for a management recommendation.

MR. JESSEE strongly recommends waiting until the RFP is out and there is a funding decision.

TRUSTEE NORENE states that Fairbanks has a lot of vacancies and asks if there is a possibility of losing the prospect to other facilities.

MR. WILLIAMS replies that Nathan, the gentleman with the Paws program, responded that this is the best place for their program, and they are going to wait.

TRUSTEE WEBB states that there is an August 11th meeting, and the board will be forced to make a decision on that date.

CHAIR MICHAEL states that this will come up at the next meeting and at that time we would like a further update and then the board will make a decision at that time to extend.

MR. JESSEE states that Nancy Burke is next on the agenda with an update from the Municipality of Anchorage Office of Housing and Homelessness.

MS. BURKE states that thanks to the Trust with the technical assistance contract, Agnew::Beck, there was a process that organized Anchorage and Mat-Su, and that proposal was awarded. She continues that it is a \$1.3 million award that is primarily technical assistance around developing the capacity and infrastructure to house the social investment bond financing mechanism. She adds that the United Way will be the anchor agency and will be the entity that has the feasibility analysis, helps to structure the backbone portion of the program; and they will, ultimately, house the success payment once the project is successful. She states that she has a handout that describes the opportunity and what the DOJ and HUD were looking for from the proposal. She continues that it is an exciting proposal because it does join Anchorage and Mat-Su and addresses that there is mobility in the homeless population between those two communities. She adds that what she is most excited about is as the State looks toward making the services responsive to the people's needs, the financing for the housing component will be built out which will result in a great partnership. She states that August 20th is a date that United Way is looking to have a public event for other parts of United Way, and is also the timeline that may work for the Boston consultant who is going to be the mentor organization. She explains that the United Way of Massachusetts Bay was the mentor in the application that was required for an entity that has done a pay-for-success proposal. She adds that she will make sure that the trustees are made aware of that date. She moves on to two other updates. The Clitheroe program, the treatment services that are on the site where Clitheroe resides presently is looking at kicking off a process as soon as the Assembly reviews a request to implement predevelopment on that program. She continues that the Municipality went ahead and cleaned up the recycling business that was on the Clitheroe site. She adds, that piece of land will be available for some soil testing and some due diligence She states that CITC, Southcentral Foundation, the Salvation Army, all the partners, the Mayor's office will be convening to talk about the best configuration of treatment for the community and to look ahead at what will be needed for that campus. There is \$5 million included in the capital budget for rebuilding those treatment services at that site or at another site. They will be looking to run the predevelopment process to determine what the best configuration is and how to do it. She states that there is a memorandum of agreement around the Assembly grants that went out that are tying the Homeless Coalition, United Way and the Mayor's office to the grantees. This is to shore up what is being required in the community by HUD for coordinated entry. HUD is asking all communities to coordinate how outreach happens for homeless individuals and to have a streamlined system that ensures that people do not fall between the cracks. She states that a partnership agreement between United Way, the Mayor's office and the Homeless Coalition will be implemented in August to signify that work.

CHAIR MICHAEL states that a van was purchased with funding from the City, and asks how that is working out.

MS. BURKE replies that the procurement has actually taken a little while, and they have not yet procured the van. She states that the last ultimate configuration will be that the Municipality will provide one of their vans that is going out of service, and then the contractor will be able to access that vehicle to do it.

TRUSTEE EASLEY asks how, logistically, that is going to work.

MS. BURKE replies that there will be two sort of shifts. One will be run from Downtown Soup Kitchen or Bean's Café, where the support staff at those locations will ask for interest among people, and then screen people that will be ready to work because they will be covered by workers' comp and will be paid and taxed. It is a little formal employment arrangement. She states that the second piece is engaging people who are panhandling and provide another option. She adds that there will also be a way for the community to donate to this program to provide another way for the community to contribute to homeless people.

TRUSTEE WEBB comments that there was a gentleman that showed up in court for an eviction proceeding whom the landlord had worked very hard to try to work with. The judge was able to draw out that this gentleman had some mental health issues. The particular incident that led to the eviction action was based on the fact that he had been off one of his medications for a while. He continues that this person was on a Section 8 voucher, and if he was evicted he would lose his Section 8 voucher permanently. The issue for the judge was whom to contact to get someone to assist this person, both as a payee who could then help budget and pay for the rent to make sure it was paid on time, and to connect to services. He states that the Consumer Web is engaged with a number of organizations around town with an emergency prevention action and was wondering if that could potentially be expanded.

MS. BURKE replies that she did hear about this and it is a perfect example of what the pieces of coordinated entry really means. She goes into this in greater detail.

A short discussion ensues.

MR. JESSEE states that Ms. Burke has moved on from the Trust and is no longer a Trust employee, but will continue her work at the Municipality. He continues that she has been a huge contributor to improvement of the lives of the beneficiaries, particularly around the housing area. He adds that the reason that Alaska is truly one of the leaders in the Housing First movement nationwide is because of the work she did while at the Trust. He thanks her with flowers.

(Applause)

TRUSTEE WEBB comments on working with Ms. Burke and watching as her career matured. He states that he is proud of her and all the work that she has done.

CHAIR MICHAEL shares a story on the impact Nancy Burke has on the greater community and thanks her for all her hard work.

MS. BURKE thanks all for the opportunity and for being her colleagues.

CHAIR MICHAEL states that next on the agenda is Beneficiary Project Initiatives, and recognizes Katie Baldwin-Johnson.

MS. BALDWIN-JOHNSON states that Thea Bemben will contribute to the presentation. She begins by providing some context for peer support and introduces some of the folks present that represent several of these programs. She recognizes Paul Cornils, executive director of AYN; Allen Green, new executive director of CHOICES; and DeWayne Harris. She states that there are a lot of definitions for peer support and thinks the one that really makes sense is that it is individuals that have lived an experience that are supporting other people with a similar experience. She continues that it is that lived experience that allows them to connect with people and engage with them in ways that a beneficiary might not directly in a traditional service system of some kind. She moves into the categories of how peer support is delivered or focused. The first is outreach and engagement, and a majority of the programs that the Trust is currently funding do this. That is one of the sustainability challenges, the early connection point; and at this time there is no funding mechanism for that. She continues that the social and emotional support, the assistance with daily management, linking to other resources in the community is really extended. She adds that, because it is not a medically driven service, there are no traditional limits on what the support looks like. She states that the beneficiary organizations are playing a key role in some of the system reforms and are anticipating playing an even stronger role in that. She continues that an integration of behavioral health and primary-care peers have been effective in helping people actually access whole health care. They are also advocates for making healthy choices and changes in overall well-being and wellness. She explains this more fully, and then talks about some national trends and studies. She asks Ms. Bemben to continue.

MS. BEMBEN states that the method of this assessment was a very collaborative approach and a pretty iterative one. She continues that the results are providing some real benefit to the organization, as well as giving some use and review of the outlook on all of it. She adds that the domains that were assessed, that were just described, and the reports that were developed through this process give recommendations to all of these domains. There are seven organizations and states that show detailed findings for each that will not be gone through today. She continues that the method used was to do a review of the internal documents, strategic plans, board minutes, all the organizational documents. She adds that interviews with board members, staff, executive directors were done, and then the assessment tool based on the McKenzie Capacity Assessment grid, which is standard, was used. Out of this process, a report was developed for each of them that summarizes all the recommendations.

MS. BALDWIN-JOHNSON begins with an overview highlighting Alaska Youth and Family Network. She explains that AYN is a multi-community, family-run, peer-delivered provider employing qualified beneficiaries to provide community-based services to other beneficiaries. She continues that over 2,900 beneficiaries have been served, including direct and secondary beneficiaries, which are families of individuals. She states that AYN is receiving national

recognition by being presented as a model to family-run organizations nationwide as an example of how to successfully blend professionalized parent-to-parent, youth-to-youth support and advocacy at individual levels with more traditionally oriented community-based therapeutic behavioral health services. She goes through in greater detail.

MS. BEMBEN states that AYFN is primarily grant-funded, and while there is a possibility of billing Medicaid for some of the services, it will not be an easy fit with the way Medicaid works. She explains more fully.

MS. BALDWIN-JOHNSON moves on to CHOICES, which is a peer-run community mental health provider that is working with beneficiaries in a directed client-centered manner as they work on improving their lives. They have three core programs: Peer Bridgers, which is an engagement and relationship support for individuals in psychiatric care; the recovery coordination, which is an intensive case management and care coordination model; and the Housing First assertive community treatment project that has received funding. She highlights some statistics and data.

MS. BEMBEN states that CHOICES is providing some key programs that are currently grant-funded, but was culled out in the Medicaid reform report as something that needs a rate to be developed for it. That is key to achieving a lot of the Medicaid reform.

MS. BALDWIN-JOHNSON moves on to Alaska Peer Support Consortium, which is a statewide membership organization that represents two different peer organizations. They are advocacy and education-focused. She continues that they offer technical assistance to other peer organizations through the state, and provide training to peer-support individuals entering the workforce. She adds that they have successfully applied and received federal funding through SAMHSA to work on building capacity around forensic peer support. One of their strengths is providing some of the mentoring and technical assistance to other entities around the state around what peer support is, how it is implemented, what it looks like, and how to ensure that the workforce is trained and has the skillset to provide those services in a quality manner. She states that they are a training entity and are not providing a direct service. She highlights that the Peer Support Consortium also does training in WRAP, going out to communities and organizations and train on the wellness recovery action planning.

MS. BEMBEN states that they are also grant-funded, and because they do not provide a direct service there is no clear path for them to do any kind of billing. She adds that there could be more fee for service for trainings and services that are being provided.

TRUSTEE EASLEY asks if some of their training comes from the Trust Training Cooperative.

MS. BALDWIN-JOHNSON replies that, to her knowledge, they do not.

A short discussion ensues.

MS. BALDWIN-JOHNSON moves to Braveheart Volunteers which are located in Sitka. She states that they are focused on providing support and training of volunteers to provide respite to

families that have a family member with dementia, chronic illness or Alzheimer's disease. She continues that they have been very effective at engaging the community in supporting that program, both through funding and volunteers. Out of approximately 700 families served, more than 50 percent of care receivers were residents of the Sitka Pioneer Home. She adds that more than 2,912 volunteer hours of visiting with elders in the community have been recorded. They have also trained more than 73 professional family caregivers that also contribute to providing respite and support to other families in Sitka.

MS. BEMBEN states that Braveheart Volunteers has done a good job of being real connected to the community and are well known and supported by Sitka. She continues that at the time of the assessment, they were applying for a federal grant, but we do not know if it was successful. She adds that they have a pretty sustainable outlook, if it can be kept scaled to the right level.

MS. BALDWIN-JOHNSON moves to the NAMIs. She states that two affiliates of NAMI are supported; NAMI Anchorage and NAMI Juneau. She continues that the mission of NAMI, the National Alliance for Mentally Ill, is to provide support, education and advocacy for individuals living with mental illness, their families, friends, and the larger community. Most of the services are provided by NAMI National. She adds that peer volunteers and peer workforce utilize most of the programs and services offered. Most activities, programs and events are provided at no charge to consumers. She states that NAMI Anchorage serves over 110 Trust beneficiaries, and NAMI Juneau serves over 185 beneficiaries with over 70 members. Some of the activities are support groups, family-to-family and individual peer support. She continues that the support groups break isolation, providing information to family members in understanding better mental illness, the system and the services that are available. She states that NAMI Juneau serves about 200 beneficiaries and families, and they also facilitate education and training and outreach to the community. She continues that there is an arrangement with Bartlett Hospital where there are education sessions open to the community and, in feedback, 88 percent reported that the presentation provided new information about mental illness.

MS. BEMBEN states that both of the NAMIs are actively looking for ways to diversify the funding. She continues that some of the things they are doing are training fees for the professional networking, event fundraising, membership fees; working with United Way, and with Pick.Click.Give. She adds that they are working on diversifying, but the majority of their funding is funding. There is not a lot of opportunity for fees for service because of the NAMI ethic of those services being free. She moves on to Polaris House in Juneau and states that Polaris follows the Clubhouse International model as an accredited peer support program that has been included on SAMHSA's national registry of evidence-based practices. It is designed for people whose lives have been severely disrupted by mental illness, offering a safe, restorative environment where relationships build and members can begin to experience success. She continues that there is a strong focus on employment and meaningful activities, housing, education and training. Polaris House has provided support for its 390 members, and it has really worked. She adds that they really tried to become Medicaid billable, and in 2013 considered becoming CARF-accredited, which they would have needed to do. In the end, the infrastructure required to be Medicaid compliant was costlier than what would have been received from the billing. She states that they have now pursued becoming a community

resource provider through the Division of Vocational Rehabilitation, which is allowing billing for some of the staff time.

MS. BALDWIN-JOHNSON moves on to the Alaska Mental Health Consumer Web, which is a drop-in recovery-oriented center creating a safe environment for beneficiaries to engage in daily activity. They receive support for housing and employment with a general sense of support, friendship and acceptance. They also offer a wide range of classes and activities.

MS. BEMBEN states that the Web is primarily grant-funded from DBH, the Trust, and AHFC. Their model is not conducive to the Medicaid system, and they are similar to AYFN focusing on the importance of engagement, and then outreach is going to increase. They are also interested in looking at DVR as a way of providing some payment for some of their staff services. They are looking into some private fundraising and have secured a private foundation grant for the first time this last year. They are also looking at PayPal. She states that these beneficiary organizations need champions; people that will help access private fundraising. She moves on to some of the recommendations. She states that peer support is critical for both of the main arenas of the system reform that the Trust is engaged with, Medicaid and criminal justice. She talks about the challenges of being able to develop practical and implementable strategic plans that can be agreed on and be clearly engaged. She states that, particularly for these organizations, is to make simple outcome measures that track exactly with the ones that the Trust is trying to achieve. She goes through some of the other recommendations, explaining as she goes along.

MS. BALDWIN-JOHNSON summarizes by making the point that the peer-run organizations are filling gaps in the community with Trust beneficiaries and are filling those because they are not limited by solely being a Medicaid-funded organization. She states that there is grant dollar flexibility to do the outreach and engagement that is really needed. She continues that it will be key to leverage the opportunities to refinance, where possible, and how to pay for peer support, outreach and engagement. She adds that it is important to continue making the case that peer support services have a place and a role within the comprehensive mental health program, and the reforms and initiatives that are a part of those reforms are going to be supporting the comprehensive integrated plan.

TRUSTEE NORENE asks about looking for opportunities for consolidations.

MS. BALDWIN-JOHNSON replies that would be a recommendation that some of the programs would be willing to explore. There are some alignments in the mission and activities in some of these programs.

TRUSTEE SMITH asks for some more information on the tricky outlook for the consortium funding.

MS. BEMBEN replies that the trainings are directed at peer-run organizations and, in terms of fees for the services, there will never be a lot of money to pay for trainings, and many of the people that want to train will not be able to pay for it.

TRUSTEE SMITH asks about the difference in numbers for the NAMIs.

MS. BALDWIN-JOHNSON replies that part of it is the data tracking and systems that are in place.

TRUSTEE EASLEY adds that Juneau is a smaller close-knit community, which probably influences it also. She states that the Division of Vocational Rehab was going to have the apprenticeship program speak to the Planning Committee maybe for the September meeting. She asks if it was possible to have someone from DVR and the apprenticeship program, because some of the people would qualify for the apprenticeship. She adds that the program lays out the different kinds of opportunities in the health care field that they could work in and would like to see a lot more of that.

MS. LOFGREN states that DVR may be more than willing to come and speak and highlight a lot of the work being done in terms of developing a matrix and crosswalks to make sure there is mutual understanding from DVR and what behavioral health service will pay for, as well as Senior and Disability Services. There has been a lot of misunderstanding around them not being able to potentially serve the beneficiaries.

CHAIR MICHAEL asks for any questions on the presentation.

TRUSTEE WEBB asks for a copy of the slides and the report.

CHAIR MICHAEL moves on to a discussion about the Web and its facility. She states that Martha Schoenthal is here from the Foraker Predevelopment Program and also the executive director from the Web, DeWayne Harris. She asks Ms. Baldwin-Johnson for a brief update on where the Trust is with the Web in terms of their process for looking for a new facility. She adds that the biggest challenge as trustees is to determine the long-term commitment to peer support programs that are grant-funded.

MS. BALDWIN-JOHNSON states that the facility has been and continues to be a problem. The location is not ideal and the Web has been looking at what the options are and have gone through space planning. She continues that there is a nice outdoor space and it is really important to have time to be outside. She asks if a lease for the current space has been re-signed.

MR. HARRIS replies that part of renewing the lease, working with Foraker on the predevelopment, was having the ability to exit the lease. He states that a 90-day exit clause was worked into the lease.

MS. BALDWIN-JOHNSON states that the available listed properties that were found that met the right zoning requirements has been exhausted. She continues that a connection with TLO to look at some space and give some guidance has been requested.

CHAIR MICHAEL asks Mr. Harris if he wanted to say anything about the process or anything.

MR. HARRIS replies that they have explored partnerships with other nonprofits in the community: Bean's Café, Catholic Social Services, and RurAL CAP.

MS. SCHEONTHAL states that, from the predevelopment point of view, if a decision was made to move forward with one of these properties that there would be a need to implement the new agreements with predevelopment and the funding for that to get some real answers, especially on the cost.

TRUSTEE NORENE asks if there is anyone working for the group that is an expert in the field on finding alternate properties.

MS. SCHEONTHAL replies that Stuart Bond is doing it on a pro bono basis. She states that he does that for the Foraker Group Predevelopment Program as a volunteer in the community.

CHAIR MICHAEL states that this particular building that is being looked at would be a lease arrangement. That lease rate will be paid, and then there will be contribution to some improvements in the building. She adds that it is important that the Trust participate early on to keep tracking and seeing where there are opportunities. She asks for any other questions.

TRUSTEE DERR states that she is not sure of what is being asked of the trustees. Will the trustees have to step up and put more money into the Web, and are all willing to commit that continued funding every year?

CHAIR MICHAEL replies that it is all of those questions. She states that the Trust has funded 80 percent of the budget, and their facility is very deteriorated.

TRUSTEE SMITH states that he would like to work on this.

TRUSTEE WEBB states that this is representative of some of the other peer support or beneficiary projects. He continues that the questions will come back to a budget one.

TRUSTEE DERR points out that the Web serves a membership of 2,000 people in a town of 350,000, whereas Braveheart in Sitka provides better than 2,000 hours of service in a town of 8,000 people. She asks which deserves more support, and replies that she does not know.

TRUSTEE WEBB asks about the lease term.

MR. HARRIS replies that a five-year lease was signed.

The discussion continues.

TRUSTEE WEBB asks, in looking at the space needs, are people being turned away, and could more people be served in a different facility?

MR. HARRIS replies that most days capacity is being reached, which results in turning people away. He states that there are also several health issues. There is only one restroom for staff and consumers, and there are no options to do any upgrades or expansions in the current facility, which limits the services.

CHAIR MICHAEL asks for a motion to adjourn.

TRUSTEE EASLEY makes a motion to adjourn the meeting.

TRUSTEE NORENE seconds.

There being no objection, the meeting is adjourned.

(Planning Committee adjourned at 3:25 p.m.)