

**ADMINISTRATION**

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**QUARTERLY REINVESTMENT COMMITTEE MINUTES**

11/28/2023  
10:00- 11:00

- I. Introductions and sign-in
- II. Overview of the Reinvestment Committee objectives if there are any new members (Jacque)
  - Deanna Kimble provided an overview of the reinvestment program.
- III. Workforce Development was approved by OMHSAS –\$896,967. HealthChoices is currently developing an offering presentation to share with providers (previously referred to as Fellowship Plan in prior minutes).
  - The purpose of this reinvestment plan is to strengthen the current workforce and to gain new staff for our providers. The providers will be able to propose a plan for how they would utilize the funds and share their creative ideas. The team will then review the proposals and distribute the funds. The providers that engage in this reinvestment plan will be required to share updates on the use of the funds and if their methods are successful in retaining and hiring staff.
  - We are also working with a local college, Commonwealth University, as test to bring more individuals in to the workforce and to utilize the college for training for providers.
- IV. Current reinvestment contract summary, Excess funds Summary (prepared by Elena/presented by Jacque)  
 Reinvestment Funds History to date.xlsx     Reinvestment spending 11-2023.pdf
- V. Current Reinvestment plans updates/status/outcomes (Deanna)  
 REINVESTMENT UPDATE\_NOVEMBER ;  
 2023 Member Literal Comments Q3.docx
- VI. Sharing of Consumer/Family satisfaction team (CFS/T) member comments (Deanna)
  - Discussion was held surrounding the connection between the literal comments of needing more services and more access and the Workforce Development reinvestment plan. The decision was made to utilize reinvestment over the year to expand the workforce as opposed to starting new services due to the literal comments from the CFST survey indicating that more of the existing services are needed.
  - It was shared that HealthChoices is using other funds to assist in this initiative also through training funds to assist providers with gaining knowledge through trainings and certifications and utilizing funds outside of reinvestment for workforce development.
- VII. Stakeholder feedback, recommendation(s), and requests for further study to determine feasibility of recommendations using future reinvestment funds.
  - Jessica shared her positive experience with the services in our community including CASSP, UPMC and BLAST.

## Cumulative Stakeholder and Committee Recommendations

1. Jennifer drew attention to the inadequate supports provided to incarcerated individuals with behavioral health needs. The committee discussed the current services and supports that are presently available in both Lycoming County Prison and the Clinton County Correctional Facility (MH and SUDs assessments, case management, and peer support) and what forms of additional help might be beneficial to this population. Suggestions included assistance with re-establishing MA eligibility, securing housing, and supports to help facilitate transition back to the community.
2. To help adults who are struggling to parent with mental health or substance use issues, parenting education and supports are recommended as a potential future reinvestment plan.
3. Carole shared that the new federal Family First Preservation Act will require counties to develop resources and processes that support family preservation and prevents children from being placed out of the home in residential treatment facilities. Reinvestment funds may want to be directed towards activities and services that provide support to at-risk families.
4. Deanna shared plan ideas that have derived from Oversight and Internal Meeting discussions. Keith suggested moving forward with gathering information and data regarding Peer Specialist Transitional Supports to present for the consideration of the committee.
5. Teresa Bower noted that there is a shortage of counselors who are knowledgeable in eating disorders, such as anorexia. She also noted the ongoing shortage of services by psychiatrists. Jacque agreed with both her suggestions and added that the shortage of psychiatric services is a problem nationwide.
6. Denise Feger from Crossroad discussed consideration of any available reinvestment funds. Crossroads is considering starting a structured mental health outpatient program that would run about 9 hours per week. It would look like the structure of the methamphetamine program or their structured Intensive Outpatient (IOP). They would use these services for individuals in mental health court and those facing chronic mental illness.
7. HealthChoices staff shared about a program called MST-PSB and shared an outline of the program including how it could benefit the members of Lycoming/Clinton counties.
8. PH/BH collaboration – imbedding a Provider in local PCP offices.
9. Kelly Gordon, CASSP Coordinator, suggested we continue to explore in person supports for deaf and hard of hearing especially for children.
10. Kelly Gordon, CASSP Coordinator, suggested having conversations with EI to see if they had ideas on ways to support better than 0-3 population.
11. Kelly Gordon, CASSP Coordinator, suggested Transition Aged Youth programs.
12. Providers at the Providers Meeting suggested programs to help support the geriatric transitional aged population (50 and older).
13. Providers at the Providers Meeting suggested utilizing funds to assist with paying up to three sessions for those that lose MA through the PHE unwinding and are in the process of obtaining MA again to help support the Joinder and West Branch who are already utilizing funding for this initiative.
14. Eric Briggs, South Williamsport School District Superintendent, suggested expanding the Strengthening Families program or another program that would allow for more opportunities to teach families skills and bring families together.