

Peer Run Respite Advisory Committee Meeting

December 18, 2013 Summary

Members Attending: Kathryn Ackley, Mary Lou Burger, Jill Chaffee, Donna Christianson, Philip Corona, Constance Downey, Hannah Flanagan, Frank Fritz, Karen Iverson-Riggers, Evonne Kundert, Lyn Malofsky, William Parke-Sutherland, Alice Pauser, Joann Stephens, Paula Verrett

Staff Attending: Joyce Allen, Faith Boersma, Kenya Bright, Patrick Cork, Sarah Coyle, Kay Cram, Carolyn Ellerkamp, Linda Harris, Lalena Lampe, Michelle Larson, Kate McCoy

Guests: Dr. Richard Parker, Charlie Morgan (Legislative Fiscal Bureau)

Welcome: Faith Boersma welcomed everyone back. Advisory Committee members and staff introduced themselves. Copies of the November 19th meeting summary were provided and reviewed. No corrections were noted by the Advisory Committee.

Survey Responses: Kate McCoy distributed copies of survey responses and a document summarizing and analyzing the results. It was requested that the copies of survey responses be returned and not distributed to the public since the small number of responses and demographics collected might compromise anonymity of respondents. Attendees were, however, welcome to keep the summary document. Responses indicated very high consensus on the goals of the program, but results were more mixed regarding measurements. The Committee stressed that it would be important to add Trauma-Informed Care. There was discussion around methods for following up with guests on outcomes, satisfaction, and utility of referrals. Obtaining guest permission for follow-up was emphasized. Language around intake and discharge was off-putting to many in the group, and the importance of a welcoming orientation was identified. The group noted how important technical assistance and support, as well as community and statewide education would be. Transparency was cited as fundamentally important to this process.

Summary and Review of Peer Run Respite (PRR) Framework: The committee reviewed the latest version of the PRR Framework. Further discussion around several items ensued. The Committee emphasized the importance of self-referral and careful consideration of how the PRR might fit into an individual's recovery plan. Memorandums of Understanding (MOUs) were suggested as a collaborative means of developing understanding with various groups in the community in order to successfully implement the program. It was noted that some existing PRRs have limits on length of time between stays. The Committee recommended that the PRR not be required to also operate a drop-in recovery center since that might not be feasible in all instances; rather, this feature should remain optional. Concerns were also raised about mandating that the PRR operate a Warmline, given the extensive training, staffing, and community resources needed to do this effectively. The Committee affirmed the recommendation that the provider organizations have a majority representation of persons with lived experience on their Boards of Directors (though it might be valuable to have some room for individuals without personal lived experience), and that all staff operating the respite be peers. There was discussion around organizational experience in provision of peer services,

Peer Run Respite Advisory Committee Meeting December 18, 2013 Summary

as well as what proportion of staff should be Certified Peer Specialists and how the organization should ensure equality with all staff, whether certified or not. The Committee discussed also staff qualifications and training requirements, which would be important for Proposers to identify. The group noted that confidentiality and guest rights must be protected, and that liability insurance would be needed. There was discussion regarding collaboration between the anticipated three PRRs, and whether it would be possible for one organization to operate all three.

Review of Request for Proposal (RFP) Process and Future Communications: After this meeting, the Committee was informed that the Division will officially enter the procurement phase of the project, and communication would necessarily be limited. The Committee was notified that its recommendations would likely not be incorporated verbatim in the RFP, but that the Division would make every effort to represent the group's recommendations within the parameters of the funding. If participants have any further thoughts or suggestions following this meeting, the Division would certainly welcome this input, but would likely be unable to respond given the communication limitations during the procurement process. It is anticipated that the RFP will be released in March 2014 and posted for six to eight week; funds will be available July 1st, 2014. Consumers without affiliation with proposers will be involved on the RFP evaluation team. Kenya Bright also informed that group that the Peer Run Respite Coordinator position had been posted and the job announcement would be disseminated to the Committee.

Wrap Up: Linda Harris thanked all members for their participation, sharing her appreciation for the exceptional work that the group had accomplished in a limited time. Many members and staff also expressed appreciation for being involved in such a successful process. Thank you!