



Burleigh-Morton COVID-19 Underserved Populations/Wrap Around Services Subcommittee TEAMS MEETING NOTES Wednesday, September 9, 2020 4:00 PM

Participants

Lynden Ring
Will Hutchings
Renaë Moch

Lisa Ripplinger
Theresa Schmidt
Jodie Fetsch
Vernelle Spencer

John Hagan
Kelly Nagel
Brad Hawk
Jena Gullo

After a brief check in with each member present, the subcommittee meeting was called to order at 4:05 PM. The committee took up review of the draft Organization/Process/Resources/Budget matrix. Each section was reviewed with input provided by all members. Leaders updated the group on progress in identifying, selecting and obtaining agreements from vendors.

- **Intake** – United Way was represented at the meeting by Vernelle and Jena. Significant detail was provided regarding intake process and information flow. Intake staff will contact Bismarck-Burleigh Public Health to verify that the client has a positive test or has been designated a close contact. Intake staff will then contact shelter management to secure a room. Intake staff will inform DOC nursing of admission, as well as the Human Service Center of the admission and will arrange transportation. United Way will enter client data into the HMIS system and will obtain a release of information in order to share information.
- **Shelter –Theresa** leads. She has secured an agreement with a local facility that can provide individualized quarantine and isolation. Signed contract is forwarded to Will for review by fiscal agency.

- **Shelter Management and Security** will be combined into a hybrid program supplying peer support/shelter managers in day and evening, with security providing coverage overnight. One hour overlap of shelter management and security at hand-off is anticipated. **Lisa** leads for shelter management and **Will** takes lead for security. Shelter management will be provided by REAL CHURCH. Contractual process is under way. Agreement has been reached with Bismarck-Mandan Security for on-site security. Contractual process is under way. Additional resources identified include PPE. Shelter management providers are concerned that PPE will not be available to be purchased. PPE will be carved out of shelter management and security contract and budgeted separately. John has contacted state cache director to ask to be placed on roster as eligible entity for state cache supplies if needed. Scenario script in a 'Q & A' style is identified as an additional resource needed.
- **Isolation/Quarantine Coordination - Theresa** leads. BBPH will coordinate with COVID interviewers to determine level of care and length of stay. Additionally, BBPH will confirm public health/medical need for isolation or individual quarantine. As part of the intake process.
- **Screening, triage and referral with ongoing homeless case management** – West Central Human Service Center will provide services, including SUD screening, assessment, treatment referrals and withdrawal management referrals. Additional identified resources required includes Straight Talk or similar phones. **Lynden** leads design, **Laura Gitter** leads operations.
- **Crisis Management** – West Central Human Services will provide on-call, primarily virtual visits. Additional identified resources required includes Straight Talk or similar phones. **Lynden** leads design, **Laura Gitter** leads operations.
- **DOC Nursing and On-site Nursing** are streamlined into a single function. **Kelly Nagel** leads. Health screening initially performed by telehealth. Nursing is meeting this week to develop a scope and scale of practice. John will facilitate a meeting between providers of medical/withdrawal management and this team.

- **Transportation** - Local ambulance service will provide backup to Taxi 9000. No further action needed.
- **Meals** – delivery can begin once security and shelter management are in place. No other action needed.
- **Withdrawal Management/MAT for SUD – John** leads. Providers have been identified. UND Center for Family Medicine has agreed to provide telemedicine services including withdrawal management. Ideal Option has agreed in principle to provide MAT for opioid use disorder via telepresence. Goal is for these providers to meet with DOC nursing next week. Additional identified resources required includes Straight Talk or similar phones.
- **Spiritual Needs** – Sr. Kathleen leads. Ministry on the Margins will provide literature to incoming clients from a spectrum of traditions. An identified on-call individual will be available by phone to the client. The committee has reviewed the plan and authorizes Sr. Kathleen to move forward and to designate a provider for this function.
- **Cultural Needs** – Lorraine leads. Native American Development Center resources are reviewed, including Men’s Talking Circle, Warrior Down and American Youth. Lorraine indicates that culturally sensitive relapse and relapse prevention support will be made available via Zoom.
- **Standing Rock Sioux Tribe** – Standing Rock tribe has done an exceptional job of identifying and operationalizing shelter, shelter management and services. Plans regarding transportation continue to evolve. The extent of availability of wrap-around services is unknown.
- **Fiscal Agent** – Bismarck-Burleigh Public Health is fiscal agent.
- **Care Coordination** – Care coordination resources offered through United Way in the community will continue during shelter stay. United Way indicates that individuals experiencing homelessness can continue in their homeless shelter program once isolation or quarantine is completed. **Kelly N** leads. Face It Together has submitted a proposal to provide care management tailored to needs of individuals suffering from substance use disorder.
- **Information coordination** - **Lisa** takes lead to coordinate with Dynamics 365 team at ND IT to utilize as central repository for information sharing and coordination. License management and ROIs will be required. Goal is

to minimize redundancy in information collection and to limit the number of interviews client need to participate in on arrival.

- **Scalability** – John will ask the Task Force leadership to provide guidance to this subcommittee regarding whether this group should explore plans for scaling up if the client population increases. We will need to decide what metrics to employ in order to trigger expansion plans if we are tasked to explore scalability.

Commitments and next steps:

- Contracts – Will is shepherding documents through the process
- Nursing scope and scale – Kelly N is meeting with nursing this week. She will forward scope draft.
- John will coordinate a meeting between withdrawal management and opioid MAT providers and DOC nursing next week.
- Interagency communication – Lisa and Jodie - Dynamics 365 License and email addresses. We will need to gather intake/interview forms from providers above and look for synergy and redundancy.
- Define Shelter Management role and responsibility – gather info for Scenarios/Q&A/Playbook – John will identify candidate playbook structures, has requested that other members email scenarios and questions for Q&A.
- Discharge/exit strategy for clients
- Define metrics that will trigger scale up plan

Adjourned 5:07 PM

Respectfully Submitted,
John Hagan, chair