



## 2023-2025 Mental Health Meeting Minutes

**DATE:** 05/23/2023

**TIME:** 9:00am

**Location:** Hult Center for Healthy Living

**Members Present:**

Co-Chair Jonathan Gauerke	PFHC Board Rep. Holly Bill
Clerical Support Amy Roberts	Beth Lawrence
Sally Gambacorta	Denise King
Mariela Munguia	Sarah Williams
Wesley Podbielski	Denise Backes
Theresa Miller	
Keith Downes	

### Introductions

-Introductions were completed.

### Review of Last Month's Minutes for Questions

-Jonathan asked the committee to look through last month's minutes and review them.  
-There were no corrections or comments.

### Update- Last Cycle Action Teams are Now Performance Management

-Jonathan reviewed the Performance Management groups and highlighted data points.  
-MHFA: 3 million people now trained nationally & need a schedule for upcoming classes being offered in tri-county area.  
-Suicide Prevention: packets are being created to target different groups.  
-TI Schools: ROE takes care of this area now.

### Dashboard Walk Through for Discussion for 2023-2025 Mental Health Interventions

-Holly reviewed the dashboard.  
-Jonathan mentioned there is a training coming up in June by Carle for Cultural Awareness and DEI, he is waiting on more information.  
    -Will be for all employees  
    -Centered around LGBTQ+.  
-DEI department can request LGBTQ+ training and get an acknowledgement of training on their badge.  
    -This is all just currently focused on Carle staff.  
    -Sally will ask if this training can be duplicated for others outside of Carle.  
    -All Carle staff will be trained on SDOH – health equity.  
-What do providers want? We do not want to develop a training plan that providers don't want or see value in.  
-Mariela asked providers for around 10 individuals to develop a focus group of providers to create a survey to put out in the tri-county area.

Amy Roberts/PCCHD Administrative Assistant

- Where do we want this group to be in year 3? Would be great to share success with the community in year 3.
  - Year 1: focus on data and getting a baseline
  - Year 2: training and community
- Bradley Brain Summit could be a possibly training avenue, but it's not possible to get ALL of healthcare trained.
- How can we promoted or encourage training during work time and not during nights/weekends? Then it just feels like another chore.
  - “How are you providing opportunities that are accessible to your employees?”
- If we put the plan in place with data and research behind it, the hospitals may move forward with our plan.
  - They could be looking at this group to do the research.
- Are the individuals that chose these 2 interventions at the prioritization meeting invited to this meeting? They need to be here.
- Get a patient baseline from providers verses self-reporting providers, then follow up with patients.
  - Pre- and post-assessment.
- Boots on the ground agencies: Central IL Friends, AOK, colleges of nursing, 22 VA.
  - Ask them their issues and what do they need and see firsthand?
- Urban League & NAACP are doing a mental health campaign right now. PCCHD employee is working with them on how to involve their work with this committee.
- OSF college of nursing just completed MHFA training for faculty.
  - Many students returning after COVID had a lot of depression & anxiety.
  - They have a counselor for students to rely on.
  - Would benefit for students to go through MHFA training as well.
- High school youth, especially LGBTQ+ are struggling with depression and anxiety and eating disorders have increased.
- Others that need to be here: Heartland and ICC nursing colleges, Dana at Planned Parenthood, Jolt for trauma informed, Children's Home, Peoria Proud.
- If they can't make the meetings, maybe a presentation to this group to start out with would be good.
- Who does trainings they would be willing to do outside of their organization?
  - Gender Affirming Care
  - Culturally Adaptive Healthcare
- Mariela has tri-county groups with parents and youth.
- How to expand the value of this meeting, take out healthcare and it's just culturally adaptive – everyone needs this.
- Could ask marketing departments to complete interviews for awareness of other cultures.
- Need to increase availability, not just utilization of telehealth.
- If something has a cost (potential training), could work through the systems to get funding.
- US HealthVest- new BH center for OSF, coming in a few years, unsure of what they offer.
- Broadband and internet issues – especially in rural areas.
- Still limited Psychiatrist availability. Would need to bring in additional providers.
- What insurance companies cover telehealth?

- Currently good for 1.5 more years, but will need advocacy for after that.
- Lots of benefits from telehealth, including significant increased access rates.
- Federal grants available to get communities internet access.

-Holly asked AI: How do we create a culturally adaptive healthcare system?

There are many ways to create a culturally adapted healthcare system. Some of the most important include:

- Promoting awareness and education about cultural differences. Healthcare professionals need to be aware of the cultural beliefs and practices of their patients in order to provide them with the best possible care. This can be done through training programs, workshops, and other educational initiatives.
- Providing culturally appropriate services. This includes offering services in multiple languages, providing interpreters, and making sure that all materials are culturally appropriate.
- Creating a welcoming and inclusive environment. Patients should feel comfortable and respected when they are receiving care. This means creating an environment where their cultural beliefs and practices are respected.
- Involving patients in their care. Patients should be involved in all decisions about their care, and their cultural beliefs and preferences should be taken into account.

By taking these steps, healthcare organizations can create a system that is more responsive to the needs of all patients, regardless of their culture.

Here are some additional specific strategies that can be used to create a culturally adapted healthcare system:

- Collect data on the cultural diversity of your patient population. This will help you to identify the specific cultural needs of your patients.
- Develop a plan to address the cultural needs of your patients. This plan should include strategies for providing culturally appropriate services, creating a welcoming and inclusive environment, and involving patients in their care.
- Train your staff on cultural competence. This training should help your staff to understand the cultural beliefs and practices of their patients, and how to provide care that is respectful of these beliefs and practices.
- Partner with community organizations. These organizations can provide you with valuable insights into the cultural needs of your patients, and they can help you to develop and implement culturally appropriate programs and services.

By taking these steps, you can create a healthcare system that is more responsive to the needs of all patients, regardless of their culture.

### **Sub-Committee Development and Teams**

- Small groups work best but need a concrete direction of what to work on.
- Those small groups will help identify who is missing at the table.
- Need more clarification of what to break down in to.
- Homework: If you have availability, do some research on these 2 interventions to see what has worked in the past for other locations and what has already been done.

### **Next Meeting Date**

- Tuesday, June 27 at 1:00pm at Hult – continuing with in person only.

### **Member Announcements**

- NAMI has education meetings and on 6/1, Holly will be presenting on suicide prevention.