Board Members Present: Hugh Grogan; Patricia Johnson; Barbara Garcia; Holly Bodenstedt; Linda Wordeman

Board Members Absent: Jesse Ronning; Cecelia Fire Thunder

Others Present: Laurie Gill, DSS Cabinet Secretary; Brenda Tidball-Zeltinger, DSS Deputy Secretary and Chief of Operations; Jeremy Johnson, Administrator Human Services Center; Tiffany Wolfgang, Director of Behavioral Health; Virgena Wieseler, Chief of Children and Family Services; Dave Gall, Administrator of Weatherization and Energy Assistance; Marilyn Kinsman, Senior Policy Analyst, DSS

Call to Order and Declaration of Quorum: Grogan called the meeting to order at 1:32 PM (CDT) and determined a quorum.

Adoption of Agenda: Motion to approve agenda by Johnson, seconded by Bodenstedt. The Board voted by roll call. Grogan, Johnson, Garcia, Bodenstedt, and Wordeman voted aye. Motion carried.

Approval of Minutes from October 22, 2019 Board Meeting: Motion to approve minutes by Garcia, seconded by Bodenstedt. The Board voted by roll call. Grogan, Johnson, Garcia, Bodenstedt, and Wordeman, voted aye. Motion carried.

DSS Organizational Enhancements: DSS Cabinet Secretary Laurie Gill discussed some high-level organizational changes the Department is making. In addition to the management team a seven-member executive team has been created to oversee several functional areas. The Department created a Division of Children and Family Services with Child Support, Child Protection and Economic Assistance making up this division. Child Care Services is now part of Economic Assistance. Child Protection Services Director Virgena Wieseler is the Chief of Children and Family Services. A new position for a Chief of Behavioral Health has been announced to provide oversight to the Human Services Center, prevention programming, substance use programming, and community and correctional behavioral health services. Brenda Tidball-Zeltinger is the Deputy Secretary and also Chief of Operations overseeing all the operational needs of the Department. Brenda will also oversee the functions of the four licensing boards, Board of Social Services, and tribal relations. Bill Snyder is the Director of Medicaid and the Children’s Health Insurance Program (CHIP) reporting directly to the Cabinet Secretary. Laurie Mikkonen remains Chief of Finance. Administrative Hearings and Administrative Rules staff transferred to the Division of Legal Services led by Laura Ringling. We also created a Communications area that is run by Max Wetz as the Administrator of Communications. Additionally, in the coming months the Department will also move forward
with the creation of an Office of Licensure and Accreditation as recommended in the Treatment Facilities Report.

**Human Services Center (HSC) – Key Initiatives at HSC:** Jeremy Johnson, Administrator of the Human Services Center, shared information about key initiatives the Human Services Center is working on. In response to the COVID-19 pandemic HSC has implemented daily staff and patient screenings; restricted visitors to law enforcement and first responders only; set up virtual options for family and support visits; directed social distancing for all meals, groups, and activities; moved meetings to virtual platforms; adopted universal masking, i.e., wearing surgical masks in patient care areas, cloth masks in non-patient care areas; enacted HSC’s Incident Command System consisting of operations, planning, logistics, finance, medical, and technical experts. In collaboration with the Yankton County Board of Mental Illness and Lewis and Clark Behavioral Health Services, all mental illness hearings have been moved off campus and are done virtually. Staff are following Centers for Disease Control and Prevention (CDC) guidance to healthcare facilities for optimization of Personal Protective Equipment (PPE). Areas where people normally congregate are now closed. HSC has also enhanced cleaning of patient care areas and ancillary areas focused on high traffic/ high touch areas. An isolation and observation unit for COVID testing or treatment was developed. Regular monitoring of the CDC, Department of Health (DOH), the Centers for Medicare and Medicaid Services (CMS), and healthcare partners is ongoing to ensure best practices and receive the latest guidance. Virtual town hall meetings with staff are held weekly and are recorded and stored in a common folder where staff can access information 24/7.

Besides the COVID-19 response HSC continues to advance best practices in the clinical areas of Zero Suicide, Motivational Interviewing and Restoration to Competency. Zero Suicide is a commitment to suicide prevention in health and behavioral health care systems and includes statewide participation for both inpatient and outpatient settings. The focus is on how to train staff, identify risk, treat people in care, and ensure an appropriate transition out of the hospital. Motivational Interviewing is a therapeutic approach that focuses on moving people to the motivation of positive decision making and away from indecision or uncertainty. This approach is used with people in substance use treatment, adolescents, and co-occurring disorders. HSC has a number of staff trained as Motivational Interviewing Trainers who conduct internal trainings for varying disciplines. Restoration to Competency provides services to people accused of a crime that the court has determined because of their mental illness do not understand court proceedings. An HSC Psychologist leading the restoration to competency work created a curriculum for HSC which was adapted from other state hospitals. Programming is focused on court process and restoration. Last year HSC piloted projects with local community mental health centers to provide outpatient restoration services for individuals the court had released on bond. HSC trained staff at the community mental health centers about Restoration to Competency and are available as a technical resource. This legislative session bills passed allowing for both outpatient and jail-based restoration.

**Legislative Session Update – Legislation and Budget:** Laurie Gill discussed the SFY 2021 Department of Social Services budget as approved by the Legislature. Due to COVID-19 and the impact it’s had on the economy, the budget may change. The budget includes funding to support key initiatives including: funding for foster parent training; permanency for children through adoption and guardianship; support the increase in foster care due to the impact of meth; funding for meth treatment in the Northeast and Western Regions; treatment funding to support seriously mentally ill individuals participating in the Unified Judicial System’s Mental
Health Court; one-time funding for suicide prevention campaign; embedding a mid-level practitioner within the Indian Health Service to improve care coordination for American Indians also eligible for Medicaid; and changes to Medicaid co-payments to align with federal maximums. Medicaid eligible, utilization, and costs are projected to be lower than the current year’s appropriation.

Legislation included passage of SB 20 which provides for a grievance monitor hired through an outside entity, who will receive and resolve grievances related to the quality of care provided to youth placed in the custody or care of a licensed shelter care facility, group care center, residential treatment center, intensive residential treatment center, or independent living preparation program. SB 46 passed revising provisions related to restoration to competency for criminal defendants, expediting the process for defendants who do not need inpatient psychiatric care in order to be restored. Additionally, passage of SB 18 and SB 19 clarifies the requirements for professional counselors and marriage and family therapists licensure and the expectations of licensees and eliminates administrative burdens on licensees and third-party credentialing organizations.

**Behavioral Health Needs Assessment:** Tiffany Wolfgang discussed a Request for Proposal (RFP) that was recently released. The Division of Behavioral Health is seeking a vendor to conduct a comprehensive needs and gaps analysis of both privately and publicly funded behavioral health services in South Dakota, including mental health and substance use prevention, treatment, and recovery supports. A draft report is due the end of October and a final report is due in November. The final report will include an executive summary that provides prevalence rates, provider capacity, gaps in services, and recommendations based on findings and stakeholder input. The analysis will be used to guide strategic goals and priorities for future investments in behavioral health that support improved outcomes and develop a comprehensive, evidence-based continuum of care for individuals. Additionally, two separate RFP’s were published to expand intensive inpatient, detoxification, and intensive methamphetamine treatment services. The intent is to add capacity for intensive inpatient, detoxification, and intensive methamphetamine treatment services in the Northeastern and Western parts of South Dakota to meet increased need.

The Department of Social Services will receive $2 million from the Substance Abuse and Mental Health Services Administration to assist South Dakotans dealing with mental health issues and substance use disorders due to the COVID-19 pandemic. The grant funds will be allocated to currently contracted substance use and community mental health centers.

**Child Protection Services – Treatment Facilities Report, Indian Child Welfare Act (ICWA) Updates, and Recruitment and Retention:** Virgena Wieseler shared findings and recommendations resulting from the Treatment Facilities Report with members. At the request of Governor Noem the Department conducted a full analysis on the process for licensing and inspecting private care facilities for children and youth in South Dakota. Progress has been made to implement the following five recommendations: 1) increase number of licensing on-site visits; 2) enhance reporting process for serious injury and death including creation of a secure email box for reports to be sent to and dispositioned; 3) revision of reporting protocols to Child Protection Services from licensees; 4) explore legislation to create a grievance monitor; and 5) revise corrective action plan document and process. Six recommendations are in progress and on task for completion including: 1) consideration of Auxiliary Placement from DSS to the Department of Education; 2) collaborate with providers to review licensure grievance
procedures and draft a rule to support best practices; 3) transparency through creation of a central repository (on-stop shop) for DSS reports open to public inspection; 4) develop annual online report; 5) evaluate and identify opportunities for consolidation; and 6) add additional contracted investigators. The Department will continue to maintain its focus on ensuring children and youth placed in treatment facilities across the state are safe.

The Indian Child Welfare Act (ICWA) case was dismissed on February 18, 2020 and the plaintiffs did not appeal the decision.

During her first State of the State Address, Governor Noem made foster and adoptive family recruitment a priority and used her platform to talk about it whenever possible. Foster and adoptive families across the state provide children a safe and stable place for children to live. The number of DSS licensed foster homes has increased, but more families are needed. Since 2016 the State is licensing more new foster homes than those that are closing. The top four reasons families close their foster care license are due to family changes, adopted children, retired from fostering, or the family is moving out of state. A comprehensive review of foster family licensing and adoption approval was conducted as the increasing number of children in care has increased demand. The review included recruitment, inquiry, training, mutual assessment, and home study processes from August 2019 to February 2020. Stakeholders included Child Protection Services staff, contract staff, private agencies, tribal licensing, and foster/adoptive families and focused on capacity and quality of services. A comprehensive report was completed, and recommendations are being implemented. South Dakota Kids Belong is also working on foster and adoptive family recruitment and partners with churches to recruit families. The "I Belong" project created videos of children waiting to be adopted. In South Dakota, there are 90 children waiting for adoption. Additionally, wrap around services provide encouragement, respite care, and acts of service in the Sioux Falls and Black Hills area, with expansion to Rapid City next.

**Board Roles and Responsibilities:** Brenda Tidball-Zeltinger discussed the roles and responsibilities of Board members. The Governor appoints members to the Board of Social Services which currently consists of seven members. The term of office for each member is three years. A majority of the members are required to constitute a quorum for meetings to be held. The Board meets at least every six months and annually elects its officers. The Board of Social Services retains advisory and non-administrative functions. The purpose of the Board is to advise the Department of Social Services regarding delivery of social services needs and budgetary recommendations.

**Reinvestment in Medicaid – 100% FMAP Policy:** Brenda Tidball-Zeltinger explained Medicaid and CHIP provide health and long-term care coverage to about 116,000 low-income and disabled South Dakotans, of whom about 35% are American Indians who are also eligible for services through the Indian Health Service (IHS). In 2016 the federal government changed Medicaid funding policy to allow more services to be 100% federally funded. Full federal funding requires the individual to be a patient referred by IHS, and the IHS and non-IHS providers must have care coordination agreements and share medical records. Initial efforts focused primarily on coordination of care between the IHS and South Dakota’s largest hospital systems. As these efforts proved successful, a new work group was formed in 2018 to focus on nursing homes, community support providers and psychiatric residential treatment facilities. 100% of the savings have been reinvested in the Medicaid program with a total budgeted reinvestment to date of approximately $11 million in general funds. These general funds were matched with
federal funds, approximately doubling the investment to just under $25 million in total funds. These reinvestments have directly benefited certain tribal providers that are enrolled to provide additional services and additional tribal providers are working to enroll and leverage Medicaid revenue.

Providers and IHS can share in a portion of the savings generated. IHS has indicated it cannot accept the shared savings payment directly, but as an alternative proposed embedding state employed nurses within various IHS facilities to help assist in the referral process and add resources to IHS to support better care coordination. Two nurses are working in Eagle Butte and Pine Ridge with a third nurse is planned for Rosebud. Governor Noem’s 2021 budget includes a mid-level practitioner. If approved by the legislature, this position will provide direct patient care via telehealth or directly in IHS facilities. The funds needed to support these positions are being supported with savings generated from the care coordination agreements.

Governor Noem also invested one-time savings of $1 million over three years to fund innovation grants. Avera Health is testing the effectiveness of telehealth in managing gestational diabetes. The Center for Family Medicine is piloting pregnancy health homes in the Sioux Falls and Pierre areas and Native Women’s Health Care is linking prenatal services with primary care and behavioral health services in the Rapid City area. Additionally, the Department of Human Services awarded $5 million over three years as an investment for nursing facilities seeking support for projects, activities and ideas that improve the quality of life for residents. 25 facilities were awarded funding including a telemedicine project at Medicine Wheel Village in Eagle Butte.

Other Updates
COVID-19: Laurie Gill discussed work the state has done during the COVID-19 pandemic. Staff are practicing social distancing and the majority of state employees are working from home. Schools are out, people are staying home, and state government is closed to the public. Agencies are following their Continuity of Operations Plans and adapting processes as necessary during disruption in services. An operational team led by Brenda Tidball-Zeltinger is working on meeting staff equipment and operational needs. Staff are working behind closed doors to connect people to resources. Some staff are also helping in statewide efforts including assisting at the Emergency Operations Center and helping at the Department of Health Call Center. Additionally, staff are assisting the Department of Health in their contact tracing efforts when people test positive to the coronavirus. Flexibility has been added to allow providers to fill prescriptions sooner and to provide services through teleconference and video so recipients of Medicaid can continue to receive needed services. Economic Assistance programs are available for families struggling with finances and there is help available for treating substance use and mental health. Child Protection Services staff continue to ensure the safety of children.

Weatherization State Plan: Dave Gall, Program Administrator for the Weatherization and Energy Assistance Program, shared information about the Weatherization State Plan and asked for comments to include in the Plan prior to submission to the federal government. The Weatherization Program helps low income individuals and families improve the health and safety of the home they live in. Trained staff go into homes to conduct energy audits and look for ways to improve energy efficiencies in the home, e.g. insulations, check furnaces. The Weatherization Program is currently at a standstill due to COVID-19. Dave provided a review of the Application for Federal Assistance. Last year’s budget and this year’s budget were combined to allow funds to be expended to further help people. During the two-year period, on average it is estimated 460 homes will receive help. An average cost of $6,186 is put into each...
home and includes costs for audit, installation, and follow up inspections for the home. Both owned and rental homes are eligible. The landlord provides 1/3 of the cost when a rental home is updated. To be income eligible must be 200% of federal poverty level. Any home that received assistance after September 30, 1994 cannot receive assistance again.

**Future Agenda Items:** Topics for future meetings include an update on COVID-19 and outcomes of innovation grants.

**Public Comment:** No one appeared for public comment. No public comments were heard.

**Establish Next Meeting Date:** The next meeting date is set for October 20, 2020 in Pierre.

**Adjourn:** The meeting was adjourned at 3:37 PM (CDT).