

SOUTH DAKOTA BOARD OF SOCIAL SERVICES

Meeting Minutes

Tuesday, April 20, 2021

1:30pm – 4:00 pm CST

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Board Members Present: Hugh Grogan; Holly Bodenstedt; Linda Wordeman; Colleen Winter; Cecelia Fire Thunder.

Board Members Absent: Barbara Garcia; Jesse Ronning.

Others Present: Laurie Gill, DSS Cabinet Secretary; Brenda Tidball-Zeltinger, DSS Deputy Secretary and Chief of Operations; Tiffany Wolfgang, Director of Behavioral Health; Pamela Bennett, Director of Child Protection Services; Laura Ringling, Chief of Behavioral Health; Virgena Wieseler, Chief of Children and Family Services; Gail Stoltenburg, Director of Child Support; Carrie Johnson, Director of Economic Assistance; Dave Gall, Administrator for the Weatherization and Energy Assistance Program; Becky Nelson, Administrator of the Office of Licensing and Accreditation; Jeremy Lippert, Director of Legal Services; Jeremy Johnson, Administrator of the Human Services Center; Marilyn Kinsman, Senior Policy Analyst, DSS.

Call to Order and Declaration of Quorum: Hugh Grogan called the meeting to order at 1:31 PM (CST) and determined a quorum.

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

Approval of Minutes from October 2020 Board Meeting: Motion to approve minutes by Bodenstedt, seconded by Wordeman. The Board voted by roll call. Grogan, Bodenstedt, Wordeman, Winter, and Fire Thunder voted aye. Motion carried.

DSS COVID-19 Pandemic and Helping Families: Laurie Gill welcomed Colleen Winter as the newest member of the Board of Social Services and shared how COVID has impacted our department since the start of the pandemic. The Department of Social Services has continued to do a very good job at getting help to the people we serve by adding flexibilities to programs and services within the Divisions of Medicaid, Economic Assistance, Child Care Assistance, Child Protection Services, Child Support, Behavioral Health and the Human Services Center (HSC).

The Medicaid State Plan was amended to cover the COVID vaccine and administration. Flexibilities were added to reduce the early refill prescription threshold allowing recipients to get scripts when needed, and adding a 60-day supply for medication, oxygen, and diabetic supplies. Recipients were allowed to receive telemedicine services in the same community as their healthcare provider and qualifying telehealth services such as well child checkups were able to be held via Skype and Facetime. Recipients were allowed to receive select services via telephone in situations where they did not have access to video capabilities.

The Division of Economic Assistance was able to provide food assistance to families that would have received reduced price school meals had school been in session by providing over \$16.6 million to over 29,000 households and 58,000 children, helping especially those individuals who were laid off during the pandemic. Supplemental Nutrition Assistance Program (SNAP) recipients received a temporary increase in benefits and were able to use their Electronic Benefit Transaction (EBT) card to make online food purchases. The Department was also able to help folks who were at risk of being disconnected from electricity. Energy Assistance emergency assistance was made available, and community action agencies were given additional resources of over \$5,000,000 in grants to help offset costs to keep community action agencies open and people in need served.

Child Care Services provided grants for child care providers and additional hours for children in school and expanded funding to centers to pay providers when children were absent due to COVID.

We were able to keep kids safe during the pandemic. Child Protection Services staff kept themselves, families, and children safe through the use of personal protective equipment and supported the Department of Health (DOH) in their efforts of testing staff and residents residing in psychiatric residential treatment facilities and group care centers. Flexibilities were added to modify licensing rules and regulations in response to COVID, to ensure families and facilities were able to maintain licensure placement of children, and technology was utilized for caseworker visits.

The Division of Child Support ensured payments were processed timely and adjusted processes when needed to support staff working remotely. Staff came into the office and worked to make sure people were served without interruption.

The Department has learned a lot about stressors people have been dealing with as a result of the pandemic. The pandemic has affected people in different ways. Some folks work remotely at home, some work at the office, some parents home school their children, and some children attend school. The Division of Behavioral Health supported families with additional services including the launch of the 605 Strong Initiative that involved training counselors to develop a connection with a caller, and to make referrals to providers as needed. Webinars were created to get people needed information, and thousands of people have called in to get counseling support. The Department awarded emergency grants to address mental and substance use disorders and allowed telemedicine flexibilities.

HSC had to quickly come up with ways to provide services during the pandemic and through processes put into place, was able to keep transmission of COVID to a bare minimum within the facility. Patients at HSC were screened prior to admission, at the time of admission, and throughout treatment. Staff at HCS were screened daily at each entry point to campus and universal masking and eye protection were provided. An isolation unit was created, and HSC activated the Incident Command Teams for COVID response. Through collaboration with Walgreens, nursing home residents residing at HSC were all vaccinated.

These are things we didn't do prior to COVID-19 and we've learned it works. What we learned is with the correct technology we can provide services to people like we've never done before. Department staff were provided the technological tools necessary to successfully work remotely while continuing to provide services to customers. The people served through the Department could access staff by appointment in person, via phone, virtual meetings, or text messaging. Additionally, drop boxes were made available outside at DSS office locations throughout the state. When staff were impacted, e.g., identified as a close contact or tested positive for COVID, if well enough to do so, they worked from home to meet the needs of our customers.

- **Special Populations Testing and Vaccinations:** Laurie Gill shared that the Department supported the Department of Health in efforts related to testing and vaccinations in congregate settings. From the onset of the pandemic, the Department had great success in continuing to serve the public with little or no interruption in services.

- **American Rescue Plan:** Brenda Tidball-Zeltinger provided an overview of the American Rescue Plan which allowed for continuation of food assistance to families that would have received reduced price school meals had schools been in session through the end of the public health emergency. It also provided a temporary 15% increase to SNAP benefits through September 2021. This Plan provided additional Low-Income Energy Assistance funding; additional one-time funding for child care to assist families and support providers; and additional one-time funding for community mental health and substance use disorder services. The American Rescue Plan offers optional additional flexibilities to states in the Medicaid program.
- **CARES Act Provider Relief Grants:** Brenda Tidball-Zeltinger discussed the opportunity for provider relief grants that presented itself in mid-December for healthcare providers impacted by COVID. Providers were able to make application for provider relief grants during the pandemic. The High-Impact program targeted acute care hospitals, nursing homes, and assisted living facilities that provide services to the underserved, uninsured, or vulnerable populations. This program was modeled after a federal program with a mechanism to approve funding based on the number of licensed beds at these facilities - hospitals received \$11,000 per licensed bed; nursing homes received \$6,400 per bed, and assisted livings received \$600 per bed. Over 200 providers benefited and just over \$70 million in payments were issued to eligible providers. Through the Safety Net Assistance program, community-based providers including residential treatment, group and independent living, mental health and substance use disorder, and providers that provide Medicaid waiver services, benefited from provider relief grants. Eligible providers were placed in one of 12 payment tiers based on revenue received from the State annually and over \$60 million was distributed to eligible providers targeting loss of revenue and increased expenses.

Legislative Updates: Laurie Gill reminded members that sometimes the Department has bills of our own to pass, other times we assist other agencies with their bills, or we may oppose a bill when something won't work well for the Department. The last legislative session ended in March with good outcomes for the Department.

- **Budget Changes**
 - **Provider Rate Increases:** Tiffany Wolfgang and Pamela Bennett shared that all contracted providers will receive a 2.4% rate increase in SFY 2022 including group care, behavioral health and in-home services providers that will be targeted for rate adjustments. Provider rates will be adjusted to fully fund rate methodology as recommended by the provider rate methodology workgroups. Additional information can be found at <https://dhs.sd.gov/workgroups.aspx#PROVIDERRATE>.
 - **FTE – Program Specialist for Adoption:** Pamela Bennett discussed the approval of one FTE for a program specialist for adoption. During SFY 2020, 226 children were placed with adoptive families, 176 adoptions were finalized, and 146 children were placed in guardianship. This reflects a 54% increase over the past 10 years. The SFY 2022 recommended budget includes 1.0 FTE to manage the increasing caseload.
- **Peer Recovery Supports (HB 1151):** Laura Ringling provided information relative to legislative updates. HB 1151 which was brought forward by Representative Tim Reed, Brookings. HB 1151 directed the Department to establish a peer support services program to promote recovery for individuals with behavioral health disorders. Legislation was based on a recommendation that came out of the Mental Health Summer Study in 2019. The Department obtained technical assistance from an outside vendor to provide a report that reviewed how other states similar to South Dakota provide peer supports and develop implementation recommendations. The bill did not move forward; however, the Department is exploring how we might implement mental health peer supports on a pilot basis with some additional federal block grant dollars that we will receive this year.
- **Mental Health Supports for First Responders (HB 1064):** HB 1064 was a recommendation from the Mental Health of First Responders Task Force and is separate from what the Department is doing related to peer supports. The Department of Social Services program will focus on mental health peer supports provided by people with lived experience and success in the recovery process. The program under HB 1064 is specific to first responders and will provide grants to assist first

responder organizations in accessing Critical Incident Stress Management training for first responders who have been involved in critical incidents that leave them emotionally or physically affected by those incidents.

- **Reauthorize the Mental Health Services Delivery Task Force (HCR 6008):** HCR 6008 passed authorizing the Task Force to meet two times during the 2021 interim to monitor the growth and development of current initiatives in the delivery of mental health services, reviewing and proposing adjustments to the levels of funding, and ensuring that the statutory and regulatory framework complements intended outcomes. Topics from last year will continue regarding competency restoration and crisis stabilization and the Task Force members will remain the same.
- **Crisis Stabilization Unit (SB 144):** SB 144 passed and provides \$4.6 million in one-time funding to Pennington County to construct a new facility to serve as an appropriate regional facility for Western SD. Currently, individuals in crisis must be placed in an approved facility until a hearing can be held. Legislation passed to allow other providers to provide this service. The funding appropriated will help with construction costs for this purpose.
- **Behavioral and Mental Health Service Support in Crisis Stabilization (SB 186):** SB 186 passed and appropriated \$3.0 million in one-time funding to be paid by the Department to the City of Sioux Falls to provide behavioral and mental health services in crisis stabilization. This funding is intended to support The Link.
- **Amendment to the Confidentiality Law (SB 5):** Pamela Bennett discussed SB 5, an amendment to the confidentiality law. SB 5 passed allowing the Department of Social Services, Division of Child Protection Services (CPS) to inform the parent or guardian who does not reside in the home with the child when CPS is conducting an investigation of a report of child abuse or neglect of their child. When a child is between homes, CPS can inform parents in each household, providing more opportunity for good communication and ensure children remain safe.
- **Professional Licensing Boards (HB 1014 and HB 1077):** Brenda Tidball-Zeltinger discussed bills that affected the four professional licensing boards that fall under the Department of Social Services' purview including the Board of Addiction and Prevention Professionals, Board of Social Work Examiners, Board of Examiners of Psychologists, and Board of Examiners for Counselors and Marriage and Family Therapists. HB 1014 formalized a uniform complaint procedure across all licensing boards within state agencies across the state. HB 1014 passed creating consistencies related to complaint procedures and timeframes for notice of hearing and for licensees to respond to complaints. HB 1077 also passed establishing endorsement and reciprocity with other state licensing boards for numerous healthcare professionals which streamlines the process for people moving to South Dakota from other states to become licensed in South Dakota. Passage of HB 1077 reduces administrative efforts so licensees can begin working in South Dakota as quickly as possible while requiring the applicant to be licensed through the applicable SD licensing board. Both HB 1014 and HB 1077 become effective July 1, 2021.
- **Meetings Conducted by Teleconference (HB 1127):** Brenda Tidball-Zeltinger discussed changes in the open meetings law through passage of HB 1127 which allows for each vote to be taken by voice vote instead of roll call during teleconference meetings. In the event of any negative vote, the vote must proceed to a roll call vote. This change is effective July 1, 2021.
- **Permit a Government Agency to Qualify for Restitution in Criminal Cases (SB 7):** SB 7 passed allowing Medicaid to be considered a "victim" for the purposes of criminal restitution. This allows a court to order a criminal defendant to pay Medicaid restitution. A recent Supreme Court case resulted in the Department not meeting the definition of victim, and this addresses that issue in statute. SB 7 was brought forward by the Department of Social Services seeking to permit a change in statute to define who is a victim in terms of restitution, to include Medicaid.

Behavioral Health – Tiffany Wolfgang led discussion regarding the Division of Behavioral Health topics.

- **988 Planning Grant:** The Division of Behavioral Health in partnership with the Helpline Center applied for and was awarded the 988 Planning Grant which assists states in planning for the implementation of a new, national, three-digit number for mental health crisis and suicide response

(988). In July 2022, 988 will become the national three-digit dialing code for the National Suicide Prevention Lifeline. The goal of the 988 crisis line is to connect a person in a mental health crisis to a trained crisis counselor who can address their immediate needs and help connect them to ongoing care; reduce healthcare spending with more cost-effective early intervention; reduce use of law enforcement, public health, and other safety resources; meet the growing need for crisis intervention; and help end stigma toward those seeking or accessing mental healthcare. The Division is collaborating and partnering with a planning stakeholder coalition and held its first meeting last week. Stakeholder representation includes representatives from the Helpline Center, state suicide prevention coordinators from the Department of Health and Department of Social Services, mobile crisis providers, crisis systems serving individuals in a behavioral health crisis, law enforcement, statewide 911 representative, the publicly funded community mental health and substance use provider system, psychiatric inpatient providers, tribal representatives, peer-based organizations, and individuals with lived experience of suicide loss and attempt. There are eight core considerations that must be considered through the planning grant. The transition to 10-digit dialing (605 area code + phone number) to make local phone calls is a necessary first step in the Federal Communications Commission's move to establish 988 as a new three-digit dialing code for the National Suicide Prevention Lifeline and will be required beginning as early as October 24, 2021. More information can be found at: <https://dss.sd.gov/behavioralhealth/grantinfo.aspx>.

- **Appropriate Regional Facilities Update:** Legislation passed during the 2020 Legislative Session (SB 4) allowing other types of providers to seek designation and provide services which supports allowing some individuals who are experiencing a mental health crisis to be stabilized closer to home. SB 4 was a result of the Reduce the Overall Use of Acute Mental Health Hospitalization Task Force. A Request for Proposal was recently issued to solicit proposals to fund appropriate regional facilities throughout South Dakota which supports admitting adults to have access to the right level of care closer to their own environment.
- **605 Strong Update/Natural Disaster Grant Activity Updates:** 605 Strong was a statewide awareness campaign and provides a 211 hotline for people to call seeking resources. Crisis counselors provide support and offer follow up calls to provide ongoing support and resource information. Through March 2021 over 15,000 people called 211 for help. Additionally, a Behavioral Health Voucher Program managed by the Division of Behavioral Health aims to provide access to mental health and substance use treatment to individuals for ongoing therapeutic supports across the state. Eligible individuals can visit a provider of their choice at no cost. The target population for this program include adults and youth impacted by floods, severe weather, and tornadoes during 2019, and/or the ongoing pandemic. Individuals can call 211 directly, others may be referred by their provider, and some individuals connect through the crisis counseling outreach.
- **Two New Programs Funded via State Opioid Response Grant:**
 - **Bethany Christian Services – ReNew Program:** The Department partnered with Bethany Christian Services of Western South Dakota to support expectant and new mothers impacted by opioid and/or methamphetamine use. The Recovering Mothers and Newborns (ReNew) is a specialized case management model that supports pregnant women with substance use disorders by empowering and equipping them for successful recovery before and after the birth of their child. The ReNew program started in October 2020 and is available in Sioux Falls and Rapid City. As of February 2021, 19 mothers have been supported through this program.
 - **Oxford House – Peer Based Recovery Housing:** Oxford Houses have been proven successful across the country and are self-run, self-supported addiction recovery homes funded through the Opioid Response Grant. Oxford Houses are homes that individuals in recovery rent to live together in an environment supportive of recovery from addiction. Individuals living in an Oxford House learn or relearn values, responsible behavior and over time develop long-term behavior to assure comfortable sobriety forever. Oxford Houses are structured on a national model that's been around for over 30 years. There are currently six Oxford Houses available in Sioux Falls and one in Rapid City with plans to expand to Aberdeen, Pierre, and Yankton in the future. Two outreach coordinators are funded for this program. The program is structured for residents to work, pay rent, and learn accountability to be a participant in the home successfully. Oxford

Houses have proven successful across the country. The average time for an individual to stay in an Oxford House varies. Typically, individuals stay up to one year, but folks can stay longer or shorter depending on their path to recovery.

- **Other Updates:** None

Children and Family Services: Virgena Wieseler reminded members Children and Family Services includes Child Protection Services, Child Support, Economic Assistance, and Child Care and introduced team members to discuss topics.

- **Internal Capacity/Readiness Assessment of CPS:** Pamela Bennett stated Child Protection Services entered into a contract with ACTION to conduct an internal organizational assessment of CPS to prepare for the development and implementation of South Dakota's IVE Prevention Plan as a component of the ongoing implementation of the Family First Prevention and Services Act (FFPSA). FFPSA is a federal act that was passed in February of 2018 that reforms the federal child welfare financing to provide services to families who are at risk of entering the child welfare system, shifting the focus on prevention. ACTION will consider the organizational structure with seven regions across the state and will be assessing training, policies and procedures, organizational structure, communication strategies, and hiring/retention. Retention of staff is a struggle nationwide. Internal meetings with field staff have been held regarding the assessment process and the need for their participation. Next steps are to launch surveys and hold interviews with staff, obtain input from stakeholders and participants who have lived the child welfare experience including foster families and birth families to give their perspectives. ACTION will complete their work late spring/early summer and a final report will be due mid-summer. The report will show workloads and how South Dakota compares to national standards.
- **Stronger Families Together Launch Event:** Pamela Bennett informed members the "Stronger Families Together" is scheduled to launch on May 11, 2021 at Drifters in Fort Pierre. "Stronger Families Together" is a call to action to recruit, prepare, and support foster and adoptive families based on guiding principles. Foster and adoptive families are greatly needed in South Dakota. When families are no longer able to provide safe care for children, foster families are needed. Adoptive families are also needed. Most children adopted from foster care are adopted by their foster parents who have established a relationship with the child and their family connections. Child Protection Services is partnering with South Dakota Kids Belong in this effort. Other stakeholders involved in "Stronger Families Together" include Governor Noem, Department of Social Services, Tribal child welfare programs, foster and adoptive parents, foster care alumni, business leaders, municipal leaders, faith-based organizations, and child placement agencies. The goal is to recruit 300 new families each year for the next four years.
- **Commission on Child Support Update:** Gail Stoltenburg stated the Child Support Commission last reviewed child support guidelines and child support related statutes in 2016. The Commission was due to meet again in 2020; however, due to COVID, the federal government gave states an extra year to review guidelines which is in process now. The composition of the Commission includes eight members including a representative, senator, non-custodial parent, custodial parent, a member of SD Judiciary, a member of the SD State Bar, a Child Support referee, and a member of the Department of Social Services. It is anticipated the Commission will issue its report around the end of December 2021.
- **Other Updates:** Virgena Wieseler informed members the Department released a Request for Proposal in January 2021 to conduct a fully comprehensive needs and gap analysis of group, residential, and psychiatric treatment in South Dakota. A contract has been awarded to the Human Services Research Institute for this purpose. The intent is to use this comprehensive analysis to guide strategic goals and priorities for future investments that support improved outcomes for youth and develop a comprehensive, evidence-based continuum of care for youth in need of treatment in state and reduce the need for out of state placement. A final report will be provided to the Department.

Board Member Orientation: Brenda Tidball-Zeltinger informed Board members that the Department created a Board member orientation packet to include a welcome letter listing resource links, information

about the roles and responsibilities of Board members, and a Department of Social Services overview regarding who we serve, as well as programs and services provided. Colleen Winter was the first member to receive the orientation packet. The Department requested Board members review the orientation packet included in the meeting materials and provide feedback.

Weatherization State Plan: Carrie Johnson shared information about the services provided by the Division of Economic Assistance, an umbrella division for multiple programs intended to help needy families including Medicaid, the Supplemental Nutrition Assistance Program (SNAP), Temporary Assistance for Needy Families (TANF), Energy Assistance, and Child Care Assistance. The Energy Assistance program includes weatherization and the Low Income Energy Assistance Program (LIEAP). The Department contracts with the State's Community Action Agencies who conduct energy audits and measures ranging from installation of insulation and weather stripping to repairing and replacing heating systems. Safety measures are also completed including testing combustion appliances, gas leaks, mold, moisture, electrical panels, and installation of smoke and carbon monoxide detectors.

Dave Gall, Administrator for the Weatherization and Energy Assistance Program, shared information about the Weatherization State Plan and asked members for feedback to include in the Plan prior to submission to the federal government. The Weatherization State Plan (2019 – 2022) reflects a three-year budget period which was combined to allow funds to be expended to further help people, especially during the pandemic. Priority cases are elderly individuals or adults with disabilities or households where children reside. It is estimated that over the three-year period, 674 homes will receive weatherization assistance. Dave provided a review of the Application for Federal Assistance. To be eligible, income must be 200% of the federal poverty level. The Division of Economic Assistance contracts with community action programs to provide this service. It is estimated 218 homes will receive help averaging \$11,833 per home.

Child Care State Plan: Becky Nelson, the Office of Licensing and Accreditation Administrator, provided an overview of the Child Care State Plan requirements. This Plan is renewed every three years and will be effective October 1, 2021 through September 30, 2024. The Child Care and Development Block Grant provides funds and outlines requirements for three major functions. 1) Child Care Assistance (subsidy) to support families that fall below 209% of the federal poverty level with help paying for child care; 2) Child Care Licensing ensures health and safety standards are in place and met for the children who are in care; and 3) Child Care Quality provides resources and support to improve the quality of child care. The updated State Plan is relatively the same as the current State Plan. Major changes include the requirement for inter-state background screenings. Background checks are required for any South Dakota provider who has lived in another state within the last five years. A waiver was approved to allow the State additional time to implement the background screening processes. The waiver will be expiring and it's necessary to update the State Plan to include this requirement. Minor changes include DSS organizational changes, adding a new public/private partnership, progressive health and safety training requirements, addresses new questions about South Dakota Early Learning Guidelines and new questions regarding quality control. A public hearing is scheduled May 18, 2021.

Other Updates: The Division of Child Protection Services currently has 28 youth placed out of state.

Future Agenda Items: Topics for future meetings include statewide efforts for suicide prevention.

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 19, 2021 from 1:30-4:00 CT. The meeting may be held in-person with an opportunity to join the meeting via telephone.

Adjourn: Fire Thunder made a motion to adjourn. Seconded by Bodenstedt. The Board voted by roll call. Grogan, Bodenstedt, Wordeman, Winter, and Fire Thunder voted aye. Motion carried and the meeting was adjourned at 3:54 PM (CT).