

**Maine Health Access Foundation
Board of Trustees Meeting Minutes
June 10, 2021
(Held via videoconference.)**

Trustees Present: Catherine Ryder (Chair); Michael Lambke, Barbara Leonard (*ex-officio*), Edward Miller, Claudette Ndayininahaze, Grace Odimayo, Susan Roche, Clarissa Sabattis, Abdulkarim Said, Toho Soma, Odette Thurston, Ian Yaffe

Trustees Absent: Dennis King, Samuela Manages, Bruce Nickerson

Guests Present: Vickie McCarty, Jessica Pollard, Gordon Smith

Staff Present: Margo Beland, Charles Dwyer, Andrea Francis, Jake Grindle, Holly Irish, Ruta Kadonoff, Dani Kalian (recorder), Jeb Murphy, Frank Martinez Nocito

Welcome

Chair Catherine Ryder called the meeting to order at 9:02 a.m. and welcomed those present. Introductions were made and a relationship-building exercise was conducted.

Consent Agenda

Chair Ryder asked if any items on the consent agenda required discussion. Hearing none, *it was MOVED, SECONDED (Lambke/Miller), and VOTED UNANIMOUSLY to approve the following consent agenda items:*

- President's Report
- April 8, 2021, Joint Board & CAC Meeting Minutes
- April Treasurer's Report and Financial Dashboard

**Executive Committee – Catherine Ryder (Chair), Ruta Kadonoff (VPP),
Ed Miller (SPC Chair)**

Adjust Roles and Responsibilities of Committees to Align with Strategic Framework: Chair Ryder shared that for many years, MeHAF has operated with two standing committees – Strategic Planning and Grants Committees – that play a role in guiding the organization's programmatic work. Recently, it became clear that there would be value to re-examining the functions and roles of those two bodies, particularly in light of the way that the current strategic framework is being implemented. Earlier this year, a work group of Trustees and CAC members met to consider how the committee roles might be modified to better meet organizational needs.

It was noted that the work group reviewed existing functional descriptions of both committees, reviewed the bylaws, which define a Program/Grants Committee as a standing committee, and discussed the functions needed to support MeHAF's grantmaking, programmatic, and strategic activities. The work group developed a set of recommendations that were reviewed by both the Grants and Strategic Planning Committees, as well as the Executive Committee, all of which expressed support for revising the roles of the committees. After the input and comments from the Grants Committee and Strategic Planning Committee were incorporated, new committee descriptions were reviewed and endorsed by the Executive Committee. The revised descriptions of the two committees were shared for review. The Strategic Planning Committee, under the leadership of committee chair Ed Miller, will be working over the remainder of the year to further refine its work consistent with the new description.

Trustees shared the following comments and questions:

- It makes sense to move the initial review of concept memos to the Program and Grants Committee and for the SPC to concentrate on a higher level of strategic planning responsibilities.
- The current strategic framework may be extended to 2024 or 2025 with development of the next plan to begin in 2023 or 2024.

It was MOVED, SECONDED (Soma/Sabattis), and VOTED UNANIMOUSLY to approve the revised roles and responsibilities for the Program/Grants and Strategic Planning Committees, as presented and recommended by the Executive Committee.

Learning Session: Maine's Behavioral Health System – Challenges and the Future

Chair Ryder introduced the learning session opportunity by noting that behavioral health issues, and the systems that serve individuals and families who need support, prevention, and treatment of mental health and substance use disorders, have emerged as ever more critical areas of focus as a result of the pandemic. Long-term stresses on the service system such as workforce and reimbursement issues, paired with increasing numbers of individuals who are living with mental distress, mental illness, addiction, and in recovery, present opportunities and challenges for all of us in Maine.

A panel of experts joined the meeting to share thoughts from their perspectives as service providers, advocates, consumers, and state government officials, to share where the biggest challenges lie, where there are opportunities, how governmental and philanthropic support can bring positive change, and how hope is a key element. Program Officer Frank Martinez Nocito introduced panelists Vickie McCarty, Policy Analyst, Consumer Council System of Maine; Jessica Pollard, Director, Office of Behavioral Health/Maine DHHS; and Gordon Smith, Director of Maine Opioid Response. Background information and advanced reading was included in the Board meeting packet and Chair Ryder encouraged Trustees to review the materials.

Dr. Pollard shared her perspective on the current behavioral health system in Maine, stating that Maine has a robust continuum of services available, and that there is room for improvement. Maine is the most generous state in the nation per capita for mental health services and has a strong statewide crisis hotline. Peer support is available at many points during the recovery process, and while many programs have reduced funding or have closed, there are other new programs opening.

Ms. McCarty, Dr. Pollard, and Mr. Smith shared thoughts on current challenges and trends, noting that:

- Work is still being done in silos with chasms between peer recovery centers on the SUD side and recovery centers on the behavioral health side that need to be addressed.
- Housing is one of the most important things that people need, and if someone does not have a home, it's hard to focus on any other issue.
- Public transportation systems need to be expanded, especially in rural areas.
- Because we are an older state, workforce development is an issue as well, especially for new psychiatrists and psychologists.
- It would be ideal if resources could be focused on primary and secondary prevention, as well as treatment, particularly to strengthening community-based prevention partners.

- Political structure and term limits do not align with long term work that needs to be done to see results.
- There are treatment deficits among residential, medical supervised withdrawal, and adolescent care.
- It's important to connect those who have survived an overdose to recovery support programs and to establish recovery-ready communities, as well as recovery-friendly workplaces, and campuses.
- Psychiatric prescribers are needed.
- More culturally responsive behavioral providers are needed.

Final thoughts noted included: time is needed to address readiness for change and infrastructure; more community mental health services are needed rather than institutional; reduced focus on a punitive correctional system; universal insurance coverage is needed for a simpler system for patients and consumers.

Trustees shared the following comments and questions:

- Prevention is important for youth and adolescents. Silos are a real issue. Biggest difficulty merging primary and mental health care for those groups.
- Professional stigma in medical school for those who are interested in psychiatry services.
- Work is being done to create a treatment and recovery network with all five tribes in Maine that is guided by tribal chiefs and leaders focusing on indigenous culture. The plan is to address every level of care within a central location in Millinocket. It's important to get people into college and employment training programs to strengthen sense of belonging. Build each tribal community's capacity to be recovery-friendly, focusing on the tribes' unique ways of addressing substance use. Eventually services will be available to non-indigenous people as well.

**Grants Committee – Claudette Ndayinahaze (Grants Committee Member),
Ruta Kadonoff (VPP), Frank Martinez Nocito (Program Officer),
Jeb Murphy (Communications Associate)**

Oral Health Pooled Fund:

Declaration of Conflicts of Interest – No conflicts were declared.

Grants Committee member Claudette Ndayinahaze reminded Trustees that the Board reviewed and approved a concept memo at its April 8 meeting which supported the Maine Oral Health Funders (MOHF), in collaboration with the Partnership for Children's Oral Health, to develop a multi-year plan to support strategic opportunities to strengthen Maine's oral health safety net. The goals established will be supported by a pooled fund at the Maine Community Foundation to which philanthropies engaged in the MOHF will contribute. The goal is to transform Maine's oral health system into one that meets the needs of all Mainers, and that is sustainably financed through reimbursement without ongoing reliance on philanthropic grants to fill routine gaps in annual operating budgets that result from a sizeable population of people lacking dental insurance coupled with chronic under-funding of oral health services by the MaineCare program.

As per MeHAF's Pooled Funding Policy, all proposed grants to pooled funds over \$50,000 are reviewed by the Grants Committee, with a recommendation forwarded to the Board for final action. The Grants Committee reviewed and approved this funding request at its May meeting, and recommends Board approval of \$300,000 in grants over four years (2021-2024) to support the joint initiative, "Transforming Maine's Oral Health System to Serve All Mainers." The

annual grant to be made will be determined as part of the annual budget process. In 2021, a \$125,000 grant will be made to the MOHF pooled fund.

It was noted that there have been reports that MaineCare is likely to begin reimbursing for dental care. It was asked how this eventuality is being addressed with the plans for the MOHF? PO Martinez Nocito shared that the funders will be flexible in their approaches and will monitor any changes at the state level.

After further discussion, *it was MOVED, SECONDED (Lambke/Miller), and VOTED UNANIMOUSLY to approve funding of up to a total of \$300,000 over four years (2021-2024) in grants to the Maine Oral Health Funders' pooled fund at the Maine Community Foundation to support the joint initiative, "Transforming Maine's Oral Health System to Serve All Mainers."*

Annual Program Report: Vice President for Programs Ruta Kadonoff presented the Annual Program Report which shares information about MeHAF's program activities, including grants, contracts, evaluation, and technical assistance. Communications Associate Jeb Murphy was acknowledged for the updated design and streamlining of the report. It was noted that while the public-facing annual report provides high-level information about grantmaking, the annual program report provides additional context, including more information about overall program strategy and operational approaches and grantmaking trends. Highlights shared include:

- The majority of programmatic spending in 2020 went to COVID-19 response. The two program areas of Advocacy & Coverage and Health Equity were the other major areas of funding.
- There was one round of competitive, rapid response grants with the remaining COVID-related funding being implemented through directed grants which allowed us to be more strategic.
- Reporting requirements for most grantees were suspended to remove extra burdens during this challenging time.
- Reallocated funds from other programs to support COVID-19 response.
- General operating support grants were extended for two additional years for Health Advocacy and from three to seven years for Health Equity Capacity Building.

Trustees shared the following comments and questions:

- Impressed with continued evaluation of the grantmaking and streamlining application and reporting processes.
- Multi-year funding allows for long-term planning.
- It was asked if tracking of COVID-19 responsive grants can be done in order to identify how many were made to community-led organizations and how this relates to other grant rounds. VPP Kadonoff noted that community leadership was one of the criteria applied for funding for COVID grants and that CRG funding will require that projects be community-driven, but that the grantee organization does not necessarily need to be community-led.
- It was asked if there's a way to determine which grantee organizations experienced significant revenue changes in 2020 (both positive and negative) due to the challenges of COVID and reflective of government aid response. CEO Leonard noted that this research may be a good future focus for a Maine Association of Nonprofits and Maine Philanthropy Center collaboration.

Community Responsive Grants Program: The Community Responsive Grants Program (CRG) Request for Proposals (RFP) was released on June 9. The RFP was shared with Trustees for their information.

COVID-19 Directed Grants: An updated summary was shared regarding 2021 COVID-19 grantmaking which noted that one round was completed in the first quarter, totaling \$370,000, which provided \$270,000 to a pooled fund hosted by Maine Initiatives focused on supporting organizations serving BIPOC and immigrant and refugee communities, and \$100,000 to the Area Agencies on Aging across the state, serving as critical links in assisting older people in Maine to access COVID-19 vaccines. A second round, detailed in the memo included in the Board packet and totaling up to \$347,000, was just approved by the Grants Committee at its June 7th meeting.

Governance Committee – Susan Roche (Chair) and Barbara Leonard (CEO)

Board Recruitment Needs for 2022: Governance Committee Chair Sue Roche noted that the Governance Committee is planning for April 2022 recruitment needs. Two Board members will be needed (vacancies left by Nickerson, Deatrick); and one CAC member can be recruited to replace Rob Kieffer who will not renew for a second term. The goal of recruitment is to identify candidates with experiential, demographic and geographic diversity, commitment to MeHAF's mission and the energy to serve on a nonprofit board, who can provide advice from personal experience, and who support our efforts to advance equity. Current Demographic and Experience Grids were distributed and Trustees were asked to review them and to share ideas regarding the skills, experiences, and expertise that the Governance Committee should look for during this round of recruitment. This feedback will inform the process at the Governance Committee's June 15 meeting, when it will consider the recommendations from the discussion at this Board meeting and will also review the Board Demographic and Experience Grid to further refine a set of priority skills and attributes for 2022 recruitment.

The Board identified the following desired priority attributes for 2022 recruitment and for further refinement by the Governance Committee:

- Demographics:
 - York, Washington, Midcoast, Downeast, Rural Western
 - Under 40/Over 65
 - Persons with disabilities
- Experience:
 - Grassroot community representation
 - New Mainers who were medical professionals in countries of origin
 - Attorney/legal experience
 - Oral health

New Business –Barbara Leonard (CEO)

Plans for Office Reopening and Operation: CEO Leonard reported that staff will return to the office beginning June 21 when all have been fully vaccinated.

Dr. Wendy J. Wolf Health Leadership Award: CEO Leonard reported that the Executive Committee voted on June 4 to select two Dr. Wendy J. Wolf Health Leadership Awardees this year since none were awarded in 2020 due to our focus on COVID-19 response.

New Trustees: Abdulkerim Said and Ian Yaffe were welcomed to their first meeting as new Trustees.

Trustee Check-In and Meeting Evaluation
Catherine Ryder (Chair)

It was determined that no Trustee check-in or meeting evaluation were needed.

Next Meeting

The Board of Trustees will next meet on August 12, 2021.

Adjournment

The meeting adjourned at 11:55 am (*Soma/Sabattis*).

Respectfully Submitted,
Barbara A. Leonard, MPH
President & CEO