Nebraska Commission for the Deaf and Hard of Hearing (NCDHH)

Mental Health Advisory Committee Meeting

Final, Approved 2.27.2025

Date: Thursday, February 15th, 2024

Time: 2:00 PM - 4:00 PM

Location: Zoom

https://us06web.zoom.us/j/81611839503?pwd=O5mPhbDaYMNK39JPAGQSWsBkR6eRwQ.1

Interpreters: Meghann Cassidy and Ben Sparks

Minutes: Gina Petersen

CART: N/A

Members Present: Mr. Erik Decker, Ms. Briana Stradinger, Mr. Cody McEvoy

NCDHH Staff Present: Ms. Kim Davis, Ms. Gina Petersen, Ms. Ashley Wulf

Technical Advisors Present: Ms. Linda Witmuss, Ms. Diane Meyer, Ms. Sara Peterson, Ms.

Ronda Rankin

Members Absent:

Technical Advisors Absent:

I. Meeting call to order:

Chairperson Briana Stradinger called the meeting to order at 2:12 PM.

Chairperson Briana Stradinger announced the notice of the meeting was duly given, posted, published, and tendered in compliance with the Open Meetings Act, and all board members received notice simultaneously by email. The agenda has been kept current and available at the Commission's office and on their website. The materials generally used by the board for this meeting are on the table in a public folder that is available to the general public for this meeting in accordance with the Open Meetings Act, {Neb. Rev. Stat. 84-1412 (8)}. A copy of the Open Meetings Act is available with the public folder for the duration of the meeting in accordance with the Open Meetings Act.

II. Approval of the Agenda:

Mr. Cody McEvoy made a motion to accept the agenda. Mr. Erik Decker seconded the motion. With no further discussion, the motion carried with all voting ayes.

III. Approval of prior meeting minutes for

• 11.17.2022

- Mr. Erik Decker made a motion to leave the minutes as is and remove them from the agenda, seconded by Mr. Cody McEvoy.
- With no further discussion, the motion passed with all members voting ayes.

08.17.2023

- Cody McEvoy made the motion to approve the minutes, seconded by Mr.
 Erik Decker.
- With no further discussion, the motion passed with all members voting ayes.

IV. Discussion:

- Subcommittee Needs Assessment Update
 - OMs. Kim Davis stated that she will share her screen to review the mental health needs assessment, noting that the needs assessment was first proposed to the board by former executive director Arlene Garcia Gunderson. As Arlene is no longer with the agency, the full board is looking for a new executive director.
 - OMs. Davis also noted that during the full board meeting in December, the full board opted to suspend the distribution of the needs assessment, meaning that the resulting numbers weren't what the committee wanted. Now the goal is to figure out the next steps from these results.
 - To refresh, Ms. Davis reminded the group that she gathered the results from the assessment and put them into a survey monkey sheet, which she then sent out to interpreters, service providers, as well as the Deaf and Hard of Hearing community.
 - O According to the service providers results, only thirty-four people responded. There were responses from inpatient psychological care, behavioral health, outpatient and residential treatment centers and others, but no response from anyone in the criminal justice system. In the age group category.
 - For services provided, the options were grouped into what age groups are being served by those providers. According to all thirty-four respondents, 50% served adults, 10% served youths and about 70% served both youth and adults.
 - Most providers answered no when asked if they provide/have ever provided services for the Deaf and Hard of Hearing. Those who answered

- yes selected how many individuals they served in the last twelve months, which was broken down by population on the chart provided by Ms. Davis.
- When asked what the biggest challenges are to providing behavioral health services to the Deaf, Deaf-Blind, and Hard of Hearing community, the largest number of responses fell under "limited availability." Ms. Davis stated that she is not exactly sure what "limited availability" is referring to. The second highest number was lack of technology, while the third was lack of interpreters.
- O About half of the respondents knew how to contact interpreters for services while the other half did not. When asked about confidence levels in determining a qualified interpreter for behavioral health services, the numbers were about equal, divided between "somewhat confident" and "not confident."
- o Each respondent listed what county they were from, which ended up being a small number of counties out of Nebraska's ninety-three.

Brief discussion on comments from the service providers portion

- Only eight people responded under the interpreter section.
- The highest barrier to providing interpreting services to the Deaf, Deaf-Blind, Hard of Hearing community was barriers to communication, followed by lack of training, then lack of confidence. Only five out of eight answered.
- o Under the Deaf and Hard of Hearing Community section, most respondents were answering on their own behalf. Only seven responded. Six out of seven identify as Deaf.
- o 85% of respondents were currently in some form of counseling. When
 asked if they would prefer in-person or telehealth sessions, the majority
 responded that they would prefer in-person.
- 100% of respondents have had sessions get canceled due to lack of communication access.
- Most respondents selected "somewhat satisfied" with the skill level and quality of mental health interpreters
- o Respondents came from three out of Nebraska's ninety-three counties
- Ms. Davis stated that that there have been no additional responses since the initial results and that she feels the current data isn't enough, although it is a bit of a taste of where additional results are headed.

- o Chairperson Briana Stradinger thanked Ms. Davis for her presentation, also expressing her disappointment in the small number of respondents and opening up to the group for suggestions on how to increase participation.
- Mr. Erik Decker stated that the current preliminary results create a good case for gathering more data and disseminating it out, especially past the metro area counties.
- OMs. Diane Meyer mentioned that if the data was disaggregated by regions of the state, there might be some glaring "holes" in places that aren't surrounding a center like Lincoln, Omaha or Grand Island. So as more data is collected across the entire state, it would be good to look at disseminating it by county or region to see where there are more specific needs.
- Mr. Cody McEvoy agreed with Ms. Meyer, suggesting that a contest or booth with a prize or incentive might be an idea to try and encourage interpreters to fill out the survey.
- OMr. Erik Decker agreed with the booth idea, suggesting the use of a QR code at the table to make the survey easier to access for the Deaf and Hard of Hearing Community. Or even an old school approach like a mailer may work as well.
- Chairperson Briana Stradinger agreed with the "old school" approach such as a mailer, since many people in across the state don't have access to technology.
- OMs. Diane Meyer also agreed with an old school approach, stating that many people in large parts of the state don't have access to consistent, quality internet. Additionally, there is a school mental health conference in June that could serve as a base for distributing the survey to individuals who are working with/for a youth base, although it wouldn't quite hit the adult services component of the survey.
- Mr. Erik Decker mentioned a list he has of mental health providers in both the outpatient and inpatient setting the survey could be sent to in both email and paper format.
- O Ms. Diane Meyer asked Ms. Linda Witmuss if there is a typical number of respondents a survey needs to get in order to feel like a true decision about what to do next can be made. Ms. Witmuss answered that typically they are looking for a 35% response rate, although the number has been getting lower as of late due to people getting "surveyed out."
- Mr. Erik Decker suggested that maybe the survey needs to be shortened a bit in order to guarantee more responses.

- Ms. Linda Witmuss stated that she doesn't feel bad about the number of service provider respondents, but is more concerned with the consumer response rate, as seven people is not enough.
- OMs. Kim Davis mentioned that the board is concerned with Western Nebraska and has stated that it needs to be included with all of the agency's decisions. With that said, everyone's feedback and their mentions of Western Nebraska are appreciated.
- O Ms. Davis also suggested that she needs to get in touch with Ms. Witmuss and figure out how to continue the work that was started by Ms. Witmuss and former Executive Director Gunderson, perhaps including the executive board since the agency currently doesn't have an executive director.
- OMs. Linda Witmuss stated that her team can resend the survey and help advertise, although the results don't come back to her so she cannot help with the analysis part.
- Ms. Witmuss posed a question to the committee regarding reaching out to the Deaf and Hard of Hearing community, wondering if there is a ListServ that can be sent out, or what methods were used to reach out to them.
- OMs. Davis responded that the questionnaire was sent out using a survey monkey link through the agency's E-Communicator, though she is unsure if it got put on the agency's Facebook page.
- O Ms. Diane Meyer stated that as far as youth is concerned, perhaps Hands and Voices could be considered since they have parents of Deaf and Hard of Hearing students who can respond on behalf of their kids who might not be on any NCDHH list. Mr. McEvoy agreed, suggesting that the Nebraska Regional Programs can also be contacted as a starting point.
- O Ms. Kim Davis posed a question to Ms. Sara Peterson and Ms. Diane Meyer, asking if the survey can be shared with them since they both work closely with ESUs, then have them share it out to some of the families they work with. Ms. Sara Peterson said that they can send it out, but they can't send Ms. Davis a list of people.
- Chairperson Briana Stradinger asked if a Spanish-language survey had been developed since there is an increasing number of Spanish speaking families. Ms. Davis responded that perhaps survey monkey has an autotranslate function.
- Mr. Cody McEvoy asked for clarification on whether the responses can avoid getting "doubled up" if people fill out the survey twice. Chairperson Stradinger agreed, suggesting that perhaps a vlog is in order, to which Mr.

- Decker added that underneath the vlog there could be a statement saying thank you for your feedback if you have already filled out this survey.
- Ochairperson Stradinger asked what the next steps are, wanting to solidify a plan, to which Mr. McEvoy replied that the commission is taking note of this discussion, so perhaps some of the procedures could be brought up to the full board or management team.
- OMs. Davis stated that the minutes could be discussed with the management team and or full board, but would it be better to wait until a new behavioral health coordinator and executive director to start at the agency. Mr. McEvoy responded that it would be good to proceed now to have something on board and ready for the new hires to work on when they begin.
- Ms. Davis stated that she would make the proposal to the commission's full board to proceed with the action plans noted in the meeting minutes.
- OMs. Meyer stated that if the board approves at their meeting on March 1st, perhaps a paper copy of the survey could be distributed at an upcoming fire safety day hosted by NCDHH and an enticement could be added, like a drawing of names to win a small prize.
- Mr. Decker added that Survey Monkey offers a Kiosk option, in which there
 is also a way to have an electronic code version of gift cards sent to the
 respondent after they complete the survey.
- Ms. Davis stated that the agency would likely not be able to reward each person for responding, but a drawing could be a viable option.
- Ms. Meyer offered to donate a gift card for the drawing since NCDHH as a state agency has more restrictions on prizes.

Discussion on survey monkey and prize drawing logistics

- Ms. Witmuss asked for a copy of the current survey results to share with her data team, despite the small numbers.
- OMr. McEvoy asked if the small number of responses that came in could be shared with The Commission's list of current mental health providers, so that it shows the current numbers and can serve as a motivator to get more responses. Ms. Ashley Wulf, Youth and Family Advocacy Specialist at NCDHH, stated that the list is under construction and isn't ready to be republished quite yet.

MHAC Vacant positions

- Ms. Ashley Wulf discussed the current mental health provider list, stating that some of the information is still incorrect.
- There has been no interest in the two counselor vacancies. Both potential members must be counselors who treat Deaf and Hard of Hearing individuals who are from Nebraska.
- o Mr. McEvoy suggested using the mental health provider list to contact those who may be interested, to which Ms. Wulf stated that that has already been attempted.
- o Chairperson Stradinger asked for suggestions on who could qualify

Discussion on potential new members

V. NCDHH Agency updates

- NCDHH Executive Director [management team] Report
 - Ms. Kim Davis mentioned again the vacancies for the executive director position as well as behavioral health coordinator
 - The Omaha Community Foundation awarded NCDHH the enrichment grant, intended to host workshops educating mental health providers, interpreters and agencies statewide to provide them with tools to serve the Deaf, Hard of Hearing and Deaf-Blind community.
- Behavioral Health Coordinator Report
 - o N/A

VI. Committee Member Updates

- Ms. Ronda Rankin announced that Children's Nebraska is setting up behavioral health clinic in Kearney, likely up and running towards the end of April. Providers will rotate, going out there certain days/times of the week to provide services out in that location. Additionally, Ms. Rankin showed the board a picture of what Children's Nebraska's new behavioral health clinic will look like, which should be completed in January of 2026.
- Ms. Diane Meyer announced that there is a statewide activity set up for kids to visit the Kearney Archway. Additionally, Ms. Meyer hosted a workshop for interpreters and Deaf Educators on the topic of interpreting for Hard of Hearing students, presented by Corey Axelrod. There is another statewide activity coming up in March, focusing on hands-on science experiments for kids. There is also the annual dance in Norfolk and the annual optimist speech competition for the Deaf and Hard of Hearing in March and April.

- Ms. Sara Peterson announced that the Deaf and Hard of Hearing transition summit team will be doing a morning of transition activities in March. Additionally, a couple of weeks ago was the annual weekend to sign, in which nineteen families showed up to spend the weekend learning sign language.
- Mr. Cody McEvoy mentioned a project that he is involved with called Deaf Centric Hospital, a role reversal activity in which medical students are exposed to communication barriers that the Deaf and Hard of Hearing Community face. This event will be held in April.
- Chairperson Stradinger shared an update from VR, stating that there is a VR counselor who has worked with Hard of Hearing individuals who is retiring next month. Right now VR is focusing on the internal applications for replacing that counselor.

VII. Next Meeting Date:

- Thursday, May 16, 2024
- Thursday, August 15, 2024
- Thursday, November 14, 2024 (tentative: zoom)

VIII. Meeting Adjournment:

• Chairperson Briana Stradinger adjourned the meeting at 3:54 PM