

**ALASKA MENTAL HEALTH TRUST AUTHORITY
FULL BOARD OF TRUSTEES MEETING
November 20, 2025
8:30 a.m.**

**Hybrid/Zoom Meeting:
Originating at:
Alaska Mental Health Trust Authority
3745 Community Park Loop, Suite 200
Anchorage, Alaska 99508**

Trustees Present:

Brent Fisher, Chair
Anita Halterman
Kevin Fimon
Agnes Moran
Corri Feige (virtual)
Josie Hickel

Trust Staff Present:

Mary Wilson
Allison Biastock
Katie Baldwin-Johnson
Shannon Cochran
Valette Keller
Julee Farley
Luke Lind
Carrie Predeger
Michael Baldwin
Eric Boyer
Kat Roch
Kelda Barstad
Tina Voelker-Ross
Eliza Muse
Debbie DeLong
Samantha Ponts
Heather Phelps

Trust Land Office staff present:

Jusdi Warner
Jeff Green
Sarah Morrison
Cole Henderson
Brittany Williams
Tracy Salinas
David MacDonald
Blain Alfonso

Also participating:

Lisa Cauble; Chelsea Burke; Kermit Wilson; Marty Lange; Gene Hickey; Heidi Hedberg; Tamar Ben-Yosef; Roger Branson; Kara Lee Nelson; Kim Champney; Sabrina Richmond; Rashah McChesney; Ivan Moore; Tina Fammon; Michelle Baker; Karl Soderstrom; Sarah Koogle; Katie Bryson.

PROCEEDINGS

CALL TO ORDER

CHAIR FISHER called the Alaska Mental Health Trust Authority board meeting to order and began with announcements. Hearing none, he moved to the CCO update.

TRUST COMMUNICATIONS UPDATE

CCO BIASTOCK stated that she always appreciates the chance to provide an update on the communications work. She acknowledged her colleagues and the staff at the Trust Authority and the Trust Land Office. She sent out a special thanks to Valette Keller, who supports much of the work that will be seen today. She began by sharing the communications goals and noted that in addition to the beneficiary-related goals, they are consistently working to increase the understanding of this organization. She continued that their two media campaigns really represent the largest component of the communications spend which is because of the cost of purchasing media. A communications program is important to an organization because it allows building and maintaining strong relationships. She added that by being a reputable and visible partner in the communities, and being seen as a leader, helps us to have successful mandated partners to try to present to share outcomes. She touched base on the standing communications tool beginning with the website, and then moved to the newsletter, which is the newest standing communications goal. The newsletter follows quarterly grant approval from the Board of Trustees to push out grant awards, in addition to the other avenues available. She talked about social media with a Trust Authority Facebook and Instagram page and a Trust Land Office Facebook page, as well. The Facebook page is devoted solely to Trust land sales. She added that all things are shareable. She stated that the metrics involve the views, the number of times the content was displayed, which is a new metric for Facebook. She added that they will continue to prioritize and explore strategies to get more earned media. She noted the sponsored conferences so far this year: Alaska Children's Trust Out-of-School Time Conference; the Alaska Behavioral Association Fall Conference; the Southern Regional EMS Council EMS Symposium, which featured the Behavioral Health Trust; Thread Alaska, Building Solutions Early Care Summit; the All Alaska Pediatric Partnership Pediatric Symposium; and the Aging and Disability Summit, which is hosted by Special Olympics Alaska. She then talked about the media campaigns beginning with addressing stigma experienced by the beneficiaries. The key creative in the latest iteration of campaign is four 30-second videos featuring beneficiaries and partners which are not scripted, and which turned out great. She continued to the other media campaign called "The Trust Land Campaign," which began in the fall of 2020 when trustees directed doing more to help increase the understanding of the unique role of the Trust, and Trust land, in particular. The most recent spot was created in 2023 which helps viewers understand how Trust lands generate revenue and how those revenues are used to support the Trust work. We will be developing new content for this campaign with this fiscal year's budget. She then continued to the communications items on the horizon, like the annual report which will be shared on all of the communication channels. One final facet will be broadcasting the new

strategic plan, updating the website and other materials to reflect it. She added that planning is getting started for the next Improving Lives Conference slated for September 17th and 18th. The deal has just been penned with Dena'ina. With all of the multiple platforms, there were about 5.2 million impressions.

CHAIR FISHER asked Ms. Biastock to introduce the next presenter.

2025 STIGMA SURVEY

CCO BIASTOCK introduced Ivan Moore, principal of Alaska Survey Research, who was joined by Tina Fammon, their research associate. They will be sharing the results of the 2025 stigma survey.

MR. MOORE stated that they made a switch to online for the last survey, and this is the second online survey. One thing learned during the process of transitioning from telephone fielding to online fielding is with topics which are of a sensitive nature for the respondent. People are more inclined to tell the truth in an online situation than they are on the phone with a real person. He continued that the purpose of the survey is to explore the concepts of stigma, and he gave a sense of how the questionnaire worked by explaining it. For each beneficiary group, an individual was described with or without a recovery clause, and he went down each of the situations and asked people whether they agreed or disagreed with how they felt about that person. He explained the numbers, which represent the negative and the positive, with the red ones being the highest stigma. He continued through explaining the process and results, and answering questions as he went along.

MS. FAMMON stated that what she found most impactful was the needle that moved for an individual statement or individual beneficiary group; but the larger snapshot did not really change much from 2023. She added that consistency was interesting. It also was interesting that the stigma had not changed significantly from 2023 to 2025 as far as the highest and lowest stigma towards different beneficiary groups.

CHAIR FISHER stated appreciation for the presentation. He asked Mr. Baldwin to introduce the next presentation.

DATA UPDATE: CRISIS NOW AND SUICIDE DATA OVERVIEW

MR. BALDWIN stated that some of the direction moving up to the strategic planning is the data. He continued that we are committing to present more data and opportunities to describe and show the information over the course of the board meetings with the intention to continue on with it. In the presentations, we will try to cover some grant outcomes and results, some sort of initiative update, and present some beneficiary status or systems information. Ms. Muse and Ms. Ponto will give a Crisis Now update, looking at some grants that had closed, and then will look at the topic of suicide and some of the data around that.

MS. PONTS stated that the same 2025 national guidelines for behavioral health coordinated systems of crisis care recommend every state's programs of crisis continuum that include course funds. The crisis system is designed for early intervention with the goal for an individual in crisis to have the least restrictive options to reduce unnecessary detentions, use of hospital emergency departments, and involuntary commitments. In Alaska, the crisis line is run by Careline which serves as the statewide entry point. She continued that most crisis calls can be

resolved by phone. If the call cannot be resolved, the crisis line will dispatch to a mobile crisis team or a mobile integrated health team, which responds to individuals in crisis. These teams operate in Anchorage, Mat-Su, Fairbanks, Ketchikan, and Juneau with different hours, different staffing structures, depending on the location. Alaska is working towards crisis stabilization centers. She shared the data and information from Careline, which has steady and substantial growth in crisis contact volume. She added that Alaska has the highest 988 contact rate in the country, which is about 45 contacts per 1,000 population.

MS. MUSE explained the resolution rate for mobile crisis teams is that the team responded and no further action was needed. A higher level of care was not needed after the team came out to serve and help that individual; the police were not involved, and they were not admitted to the emergency department.

MS. PONTS looked at the main reasons people contact Careline and noted that this information came from the Careline presentation in September, 2025. She stated that a lot of patterns emerged, such as mental health concerns like depression. Loneliness also stands out as a major reason for calling. Then anxiety is a prominent theme. Those issues reflect the mix of needs and ongoing stressors which offer a picture of the types of pressure people experience before a crisis escalates enough to require a mobile crisis response or emergency services. She moved to the outcome side, and one of the frequent results is that callers report feeling supported and expressed gratitude, which shows that interaction itself is meaningful and provides relief in the moment. Safety planning is also common, resulting in a significant amount of crisis stabilization. She explained that safety planning is an evidence-based approach for reducing immediate risk. She moved to Mat-Su, focusing on True North Recovery, and the 24/7 mobile crisis team. She went through the data that provided an overview of what was happening, noting that it is important to know that the information presented was from closeout fiscal year '24. She looked at the mobile crisis team in Fairbanks in FY24, and explained that a large amount of the work involved in the Fairbanks region involved triage and screening for suicidality. She stated that peer support is consistently integrated along with strong coordination with medical and behavioral health services, and high engagement with families and natural supports.

MS. MUSE added that the data they are sharing comes from the Health Analytics and Vital Records, as well as the Alaska Violent Death Reporting System, which are collected and reported to the Division of Public Health. The Health Analytics and Vital Records collects hospital and clinical data on injuries and violent deaths. They also collect and report hospital discharge data. The Alaska Violent Death Reporting System is Alaska's version of a national surveillance system that tracks violent deaths. It brings together information from multiple-sourced sources. She continued that it is important to remember that behind every statistic representing suicide in Alaska are individuals with families and communities profoundly affected by the loss. In Alaska, suicide ranks as the third leading cause of premature death. She added that the Alaska Violent Death Reporting System collects data on precipitating circumstances. In using the data from AKVDRS, patterns that emerge can be further explored.

MS. PONTS hoped that this information provided an update of Alaska's crisis response which reflects how we are growing stronger with more folks reaching out through 988, mobile crisis teams.

CHAIR FISHER thanked Ms. Ponts and Ms. Muse and stated appreciation for the good

information in the presentation. He called a 15-minute break.

(Break.)

PROGRAM & PLANNING COMMITTEE REPORT/GRANT APPROVALS

CHAIR FISHER called the meeting back in session and asked COO Baldwin-Johnson to introduce the grant approval process.

COO BALDWIN-JOHNSON stated that the Program & Planning Committee summary report provides a nice summary of the topics that were covered on the agenda during that meeting, which included grant proposals that were presented and considered by the committee and recommended to the Full Board for consideration, and for trustees to take action on those proposals. She continued that the proposals were batched into three categories: the original Program & Planning Committee consent agenda for \$250,000 and less; a second consent agenda for all proposals that were considered with terms over 12 months; and a third single proposal in which the dollar figure is over \$250,000 with a single 12-month term.

TRUSTEE MORAN stated that on further reflection, she would like to pull Southcentral Foundation and True North Recovery from the consent agenda.

MOTION: The Board of Trustees approves the following Authority Grants as outlined below to include:

Alzheimer's Disease and Related Disorders Association, Inc., "Alzheimer's Association – ALZ CARES for Alaska (Community Alliances for Risk Reduction, Education and Support)," for \$82,500;

Petersburg Medical Center, "Telebehavioral Health Expansion for Petersburg Long Term Care & Home Health Consumers," \$81,960;

Nine Star Enterprises, Inc., "Nine Star's Center for Workforce Excellence," \$50,000;

Big Brothers Big Sisters of Alaska, "Big Futures: Economic Pathways to Youth Mental Wellness," \$49,984;

CIRI Foundation, "The TCF Resilience Project," \$28,580;

Alaska Public Health Association, "Expanding Access and Visibility: Behavioral and Mental Health Track at the 2026 Alaska Public Health Summit," \$25,000;

North Star Community Foundation, "Healing through Music & Dance 2026 – Breathe in the World, Breathe Out Music," \$20,000;

REACH, Inc., "DeafBlind Immersion Experience Training for Caregivers and Disability Service Professionals in Alaska," \$10,664;

Valley Charities, Inc., "DME Lending Program: Handicap Doors," \$9,004;

Blossom House, "Trauma Informed, Arts Based, and Wellness Programming for Incarcerated Youth at the Fairbanks Youth Facility," \$7,500;

Bridges Community Resource Network, "Project Homeless Connect 2026," \$5,000.

The motion was made by TRUSTEE FIMON; seconded by TRUSTEE MORAN.

TRUSTEE FEIGE stated that she had a question on the Petersburg Medical Center grant, the Telebehavioral Health. She did not find this information as she reviewed the detailed package,

and asked for someone to speak to that.

MR. BOYER replied that they developed that project internally with support to be able to meet that need. It was successful and sustainable, and that is why they want to expand this into supporting long-term care and home care.

MS. BRYSON stated that they were very happy with the development of the model, and are into their third year. They were very fortunate to receive a HRSA Rural Communities Opioid Response grant that allowed launching the telepsychiatry program. She continued that their first provider unexpectedly left the program, which was a real barrier to the program. They were able to bring on a new person last year and to rebuild some of the trust and referral relationships, which has seen a lot of success. She added that they had identified their own internal metrics for how to track quality on this program, which is really important. Their team is very focused on referral wait times, as well as wait times for appointments for both psychiatric care and nonpsychiatric clinical care. That was one of the first metrics. She added that they are always happy to meet directly and talk about the program, what the specific challenges are, and what additional needs are not being met by the program as it grows.

CHAIR FISHER asked for any other questions. There being none, he called the vote.

After the roll-call vote, the MOTION was APPROVED. (Trustee Feige, yes; Trustee Fimon, yes; Trustee Halterman, yes; Trustee Hickel, yes; Trustee Moran, yes; Chair Fisher, yes.)

COO BALDWIN-JOHNSON stated that the next item is the consent agenda for Authority Grant requests with the grant term of more than 12 months. She asked to follow with Trustee Moran's request to pull Southcentral Foundation and True North Recovery, Inc., from the consent agenda.

MOTION: The Board of Trustees approves the following Authority Grants as outlined below, to include:

Association of Alaska School Boards, "Project THRIVE: Strengthening Families, Students, and Schools," \$300,000;

Christian Health Associates, "Anchorage Project Access Mental Health Counseling Program," \$300,000;

Anchorage Neighborhood Health Center, "Health-Related Social Needs Navigation Pilot Program," \$267,388;

Facing Foster Care in Alaska, "Peer Navigation and Support for Foster Youth," \$25,000;

Challenge Alaska, "Keil Center for Adaptive Sports Expansion & Renovation Phase II," \$250,000;

Ketchikan Wellness Coalition, "Ketchikan Reentry House," \$150,000;

Nikiski Senior Citizens, Inc., "Kenai Peninsula Family Caregiver Support Program," \$150,000;

Alaska Center for FASD, "Comprehensive Statewide Training and Consultation for Addressing Complex Behaviors for Direct Service Professionals and Frontline Staff," \$50,000.

The motion was made by TRUSTEE FIMON; seconded by TRUSTEE MORAN.

After the roll-call vote, the MOTION was APPROVED. (Trustee Feige, yes; Trustee Fimon, yes; Trustee Halterman, yes; Trustee Hickel, yes; Trustee Moran, yes; Chair Fisher, yes.)

CHAIR FISHER continued to the individual motions.

MS. BAKER stated that she is one of the executive vice presidents of Southcentral Foundation. Our program is called Yeshjesh T'uh which in Dena'ina Athabascan means "I am safe place."

MOTION: The Board of Trustees approves a \$2,955,983 Authority Grant to Southcentral Foundation for the Yeshjesh T'uh Launch Project Grant. These funds will come from the Trust focus area strategy implementation line of the fiscal year 2026 budget. The motion was made by TRUSTEE FIMON; seconded by TRUSTEE MORAN.

TRUSTEE MORAN stated that in October they discussed a little bit about non-Native access to the program, and there was not a complete answer. She was curious if Ms. Baker had time to think on that and asked what their plan was to provide non-Native access until Providence comes online.

MS. BAKER replied that they were still in discussions with Providence about the plan of how to work together to start. She stated that they were going to begin with supporting Alaska Native American people in crisis stabilization and residential, and once Providence comes online they will talk about how to open up access. She continued that there are other programs that will be in the building: the detox program, the outpatient, behavioral health Fireseed, and the medications for addiction treatment program. Those will be available to anyone in the community. She added that the detox program will be available for individuals from across the state.

TRUSTEE MORAN stated that they have a fairly aggressive schedule for their implementation and asked how that was progressing. She asked if they considered those to be on schedule as these projects go.

MS. BAKER replied that the construction project is on track and on budget. Construction is scheduled to be completed in April of 2026, when we will start installing all the equipment, the furniture. The hope is that installation will be completed around the middle of May, and to have the doors open the middle to end of May, the beginning of June at the latest.

TRUSTEE FIMON thanked Ms. Baker for coming back and stated that he is super supportive of the program. He has no reservations about the program, which is needed by everyone in Alaska. He was wondering more of how that plan really addressed the beneficiaries of the Alaska Mental Health Trust Authority. He asked how that is known, advertised, marketed.

MS. BAKER replied that Southcentral Foundation, Providence have been on this journey for eight years of planning, figuring out how both of the programs can meet the needs of the Anchorage community, and we are all committed to doing that. We have been meeting with stakeholders from across the community about the program, working on agreements with the

mobile crisis team, the Anchorage Police Department, the United Way Home for Good, the Municipality, and other partners to make sure that the key stakeholders are aware. Agreements are being worked on for customer owners to access the services. Most of the referrals today come internally from the primary care department, from the hospitals. She continued that they are working with the PR department on a communications plan to make sure that the community and partners are aware of the services available, who can access, and how they are partnering with the community. She added that, based on feedback from the customer owners, the lobby at Yeshjesh T'uh will have peers and case managers supporting families, and making sure that individuals are getting to the right program and the right level of care. Each of the programs within the facility will have case managers to make sure that individuals get the support they need and are connected to the right levels of care. She stated that they are not going to turn someone away that is in crisis. They will make sure that they are supported and get to the right place.

TRUSTEE MORAN asked if they knew when Providence is coming online.

MR. BOYER replied that they have contractors in there working to get the facility finished, and it should be in a couple of months. Probably late summer, early fall. He added that the logistics of opening this service has never been done in Alaska, and the support team meets monthly to discuss through those logistical issues. We also realize the need is great, and that one center cannot meet the need. We are working with Providence as well.

TRUSTEE MORAN asked about the funding sources with about \$6 million worth of funds that show as pending.

MS. BAKER stated that they were awarded one other grant, and she asked Laurie for confirmation.

LAURIE stated that they received funding from ConocoPhillips and also received small funding from the Murdock application. The other two are still pending.

TRUSTEE FEIGE asked about the plan if they do not come through.

MS. BAKER replied that the board has already approved the construction funds and is committed to funding the difference for anything else not covered by grant funding.

TRUSTEE HALTERMAN stated that many Alaska Native beneficiaries are utilizing facilities that are not Alaska Native facilities. She asked if there will still be that option for beneficiaries to go outside of the tribal system, and what is being done with the partners to insure that the right people are being served in the right setting to maximize that Federal reimbursement.

MS. BAKER replied that they support customer owner choice. As a tribal health system, if Southcentral Foundation makes a referral to a non-tribal organization, there are agreements in place. Through that process, the entire tribal health system has saved the State about \$700 million since 2016.

TRUSTEE MORAN asked Mr. Boyer if demographics are included as part of the reporting requirements for this grant.

MS. PONTS replied that demographic information is not included in the reporting requirement.

TRUSTEE MORAN stated that she would like to have those added in.

CHAIR FISHER asked for any other questions. There being none, he called the vote.

After the roll-call vote, the MOTION was APPROVED. (Trustee Feige, yes; Trustee Fimon, yes; Trustee Halterman, yes; Trustee Hickel, yes; Trustee Moran, yes; Chair Fisher, yes.)

MOTION: The Board of Trustees approves the following \$1,193,275 Authority Grant to True North Recovery, Incorporated, for the MCT years 4 and 5 grant. These funds will come from the Trust focus area strategy implementation line of the FY26 budget. The motion was made by TRUSTEE MORAN; seconded by TRUSTEE FIMON.

TRUSTEE MORAN thanked them for the phenomenal job implementing this work. She wanted to highlight them and wished them the best of continuing on with this.

TRUSTEE FIMON echoed the thank you and for them coming back in front of the trustees for a thank you and to be present for the vote.

TRUSTEE MORAN asked, with all the suicide data, if they had any insights on where the Trust should be focusing their efforts.

MR. SODERSTROM stated he is the CEO at Trust North Recovery and added that it was an honor to do the work they get to do. The data shows that over 66 percent, or two-thirds, have either mental health or substance abuse. He thinks that, overall, Alaska has an accessibility issue more than a capacity issue. He continued that they have a phone number, 982-HOPE, since they were a Facebook page many years ago. That phone still gets answered 24/7, 365. Careline does a phenomenal job, as well. In those cases where someone is willing to go have a cup of coffee, those peer outreach efforts would be his biggest suggestion to continue to build as they have used really incredible programs coming online at a very high level. People on the street, boots on the ground, going to the homeless camps and answering phones and saying "I'm on my way" is also very impactful.

MS. BALDWIN-JOHNSON mentioned that an important part of this work is refining the KPIs, key performance indicators, which are measures for reporting in the memo. As the teams work with operators such as Karl and his team, and others, those KPIs are going to be refined. She continued that they may have some additional measures that are incorporated into the monitoring of these services, and the project, and how it is going. There will probably be some evolution of more refined measures that will be included in the grant.

CHAIR FISHER stated that they have a lot of excellent organizations that come in and provide services to the beneficiaries of the Trust. He agreed that True North Recovery is a standout in the way their case is presented on why they should get a grant, how they present their data and the results, as well. We really appreciate the work they are doing for the beneficiaries. He called the vote.

After the roll-call vote, the MOTION was APPROVED. (Trustee Feige, yes; Trustee Fimon, yes; Trustee Halterman, yes; Trustee Hickel, yes; Trustee Moran, yes; Chair Fisher, yes.)

MOTION: The Board of Trustees approves a \$950,000 Authority Grant to Anchorage Community Mental Health Services, Inc., dba, Alaska Behavioral Health, for the Fairbanks Mobile Crisis Team grant. These funds will come from the Trust focus area strategy implementation line of the FY26 budget. The motion was made by TRUSTEE FIMON; seconded by TRUSTEE HALTERMAN.

MS. PONTS stated that this proposal requests one year of operational funding to sustain the Fairbanks Mobile Crisis Team. They provide care 24 hours, seven days a week. She added that Sarah Koogle, the clinical director of the Fairbanks Mobile Crisis Team, who lives in Fairbanks, is present.

TRUSTEE MORAN stated that during the suicide data report there was a question about seasonal usage of services, and asked for a little insight.

MS. KOOGLE replied that over the last nine months there has been an increase in 14- to 23-year-old suicides, and her team is trying to figure it out. There is no rhyme or reason. Fairbanks is small and usually there is a catalyst, but they have not figured that out yet. She added that they do experience an increase in spring and around October, which includes suicide and crises as a whole. She stated that being on the mobile crisis team has been quite the journey, and she knows every zone there is in Fairbanks. With the mobile crisis team, there has been a steady increase, and we got the engagement of the troopers in year 3. There is a level of trust with them. She continued that the unknown is that, even though they have been doing this for three years, there is still more to come when they start doing crisis stabilization, and we add in more partners.

TRUSTEE MORAN circled back to the comment about seeing an increase in youth suicides. She asked if that information is being blasted out to the school districts, to the entire community.

MS. KOOGLE replied that they do when talking with other physicians in the community, in behavioral health, law enforcement and schools. They are always in schools talking about the crisis work they do. The Fairbanks North Star School District is very unique in the working relationship with the mobile crisis team, and they know it is available. They have not used high school peers, but they have talked about it. It is the kids they want to target, and they also see that the completed suicides are of a higher socioeconomic status, which is another piece.

TRUSTEE HICKEL stated that this is the last year of the multi-year project, and she was curious about what the future looks like.

MS. KOOGLE replied that, currently, there is nothing in place that will supplement what we get from the Alaska Mental Health Trust. It has not come to fruition. This mobile crisis team could not run if we did not have this grant. The Legislature is going through, and she is very optimistic that Alaska, as a whole, gets the 23-hour stabilization centers.

CHAIR FISHER asked for any other questions. There being none, he called the vote.

After the roll-call vote, the MOTION was APPROVED. (Trustee Feige, yes; Trustee Fimon, yes; Trustee Halterman, yes; Trustee Hickel, yes; Trustee Moran, yes; Chair Fisher, yes.)

CHAIR FISHER called a five-minute break.

(Break.)

CHAIR FISHER recognized Shannon Cochran.

AGENDA MANAGEMENT SOFTWARE PRESENTATION

MS. COCHRAN stated that she would be giving an interactive presentation on an agenda management software that is planned for implementation at the next set of committee meetings, which is currently scheduled for January 21st and 22nd next year. She walked through how to navigate the home page of this agenda management software from an iPad or computer. She noted that the electronic agenda will replace the packet which can be accessed via the Internet. She mentioned that this software is owned and managed by RDI, the original developer. It is a 40-year-old company that provides many services, and they have maintained this software since 2013. They are committed to supporting it long term. She continued that it is meant to be a one-stop shop for the meetings, and it goes through the home page. She added that there is an ability to customize the software, and the Trust intends to use it as an historical archive. She walked trustee through the steps on everyone's computers. She explained that reliable Internet is needed for this, and we are working on that. She continued that this is the direction that hybrid meetings are going, and she is hopeful that the trustees, partners and beneficiaries will find this as a useful tool to access all of the meeting documents, and to make the process a bit more accessible to those participating in it.

CHAIR FISHER stated that this program is awesome, and thanked Ms. Cochran for bringing her experience from another place into the Trust. This will be a valuable tool for all. He asked for any comments on this particular issue. He asked for any comments in general that any of the trustees would like to make before adjourning. There being no comments, he asked for a motion to adjourn.

MOTION: A motion to adjourn the meeting was made by TRUSTEE HALTERMAN; seconded by TRUSTEE HICKEL.

There being no objections, the MOTION was APPROVED.

(Alaska Mental Health Trust Authority Full Board of Trustees meeting adjourned at 12:24 p.m.)