



LINN COUNTY COMMUNITY SERVICES BOARD

Tuesday, June 9th, 12:00 P.M.

Hybrid meeting

AGENDA

- | | | |
|-------|---|---------------------|
| I. | Call to Order | LCCS Board Chair |
| II. | Minutes from April Meeting – Action Item | LCCS Board Chair |
| III. | Financial Report through May – Action Item | Vickie Kindle |
| IV. | CACFP Report – Action Item | David Thielen |
| V. | LCCS Board Member Recommendations – Action Item | David Thielen |
| VI. | Program Presentation – Child and Family Services | Gloria Witzberger |
| VII. | Program Updates: | |
| | a. General Assistance/Outreach | Ashley Balias |
| | b. Access Center | Erin Foster |
| | c. Home Health | Stacey Lietz |
| | d. Early Childhood Iowa/DECAT | Amy Grunewaldt |
| | e. Ryan White | Nichole Baker-Jones |
| | f. Disability Access Point Program | Jody Bridgewater |
| | g. Juvenile Diversion and Detention | William Wright |
| VIII. | Executive Director Updates | David Thielen |
| IX. | New Business/Public Comments | LCCS Board Chair |
| | a. Next Board Meeting – | |
| | i. August 11th | |
| X. | Adjourn | |

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LINN COUNTY COMMUNITY SERVICES BOARD

Tuesday, April 14th, 12:00 P.M.

Hybrid meeting

Minutes

PRESENT:	Melissa Dean Theresa Lewis	Andrew Elam Laura Martin	Mike Hines Sami Scheetz (joined at 12:06)	Katy Lee
STAFF:	Nichole Baker-Jones Amy Grunewaldt Ryan Kriner	Ashley Balias Stacey Lietz David Thielen	Jody Bridgewater Vicki Kindl	Erin Foster Lisa Mills

I. **Call to Order** LCCS Board Chair
The meeting called to order at 12:02 p.m.

II. **Minutes from March** – Action Item LCCS Board Chair
The minutes of the March were approved. MSC: Dean/Elam (6-0)

III. **Financial Report through March** – Action Item Vicki Kindl
Vicki presented the budget through March. Dept 33 is slightly below expectations. Options revenues trail by one month and payroll expenses are currently lagging. DAP consists of staff previously covered by the region. Revenues are received at the start of each quarter. The MHAC is split between mental health and SUD services. The state has affirmed that billing should be done monthly. SUD varies throughout the year. The MHA is reimbursed through the ASO which lags by 1 month.
Department 34 overall is around 70%. CYD is in line with expectations. Funded agencies typically trail by 1 month but are being caught up. GA expenses are in line with expectations. Revenues from interim assistance are unpredictable. Home Health is in line with expectations; revenues reflect the full expenditure of the Home Health grant. Ryan White is in line with expectations but revenues lag due to timing. Detention and Diversion reflect lower expenses due to staff vacancies. Revenues will be in line once the grant is received from the state. The shelter subsidy formula has changed and there has been an uptick but it is still within expectations. Overall expenses are at 67% and revenues are at 68%. David shared that \$90,000 was given back to the general fund. Ryan White is currently in the midst of litigation that has caused concerns. MSC: Dean/Lewis (7-0).

IV. **Program Presentation – Options of Linn County**

Lisa Mills & Ryan Kriner

Lisa & Ryan presented information regarding Options of Linn County. Lisa shared the history of the Options program. Options moved to a Day Hab only model after 2016. The goal is to integrate consumers into the community and build skills. Goals vary highly but are focused on prosocial skills. The program is HCBS regulated and are accredited through CARF International. The max accreditation is three years which they have received every year except after the flood.

Options is required to be a self-sufficient program and not receive any general funds. Skills assessments determine the level of care from level one to level six. The tier assignment is also tied to a daily rate. They only are able to bill for clients that are seen on the day. Mike asked about the assessment process. Lisa shared that this is done through Telegen with a team of individuals. Program managers and other involved entities are typically involved in the assessment. Assessments are done every three years, but emergency assessments are sometimes approved. Lisa discussed more details of the assessment process and the challenges within it.

Options serves individuals at all tiers but Lisa noted that the tiers might not reflect which groups and staffing ratios a consumer is assigned to.

Lisa discussed the goals around short- and long-term goals within Customer Satisfaction, High Quality of Life, and Maintaining Financial Health. Lisa noted the importance of building staff knowledge of the InterRAI assessment to appropriately advocate for consumer levels of care. The admission criteria for Options are individuals over 18 with third-party ID waiver and have a documented intellectual disability. Sami asked about the waitlist for the ID waiver; Lisa shared that it is about 6 years. There are other, less intensive or integrated programs that require different waivers outside of Options.

Clients receive services from 9 am to 1:30 p.m. and are brought or arrive at Options through various modes of transportation. There are approximately 120 individuals enrolled with a consistent population of around 100. There are 5 1:5 groups and 9 1:8 groups. These are based on needs. These groups go out into the community. Lisa also broke down the staffing model at Options.

Sami asked about the discrepancy between the waitlist and the number of adults needing care. Lisa noted that the highest need is in the 1:5 ratio and that there are currently about 15 individuals on the waitlist. She noted that there are fewer openings in this group. Lisa also discussed the possibility of summer programming for youth under 18. David noted that the barriers to the waitlist are driven by state funding levels.

Day Hab is a person-centered program, and consumers write their own goals and are intended to support a consumer in achieving their optimal level of independence. Consumers determine their own schedule. Community integration is key at Options; Lisa provided the example of going to the library and talking to librarians and checking out their own books etc. Consumers also volunteer with HACAP, CR Schools, GROW Kazimour Orchard and faith organizations. Lisa shared that an Options employee and their group of consumers were honored by the State for their volunteerism.

Sami asked what families do for individuals after 3:30 p.m. Lisa shared that many individuals are in residential care whereas some might go to a different covered service at the ARC or similar.

V. Program Updates

LCCS Directors

a. General Assistance/Outreach

Ashley Balius

Ashley shared the update for GA. She shared that they've been busy with unique situations. They have been working with the medical examiners office and have been examining policy changes. She provided the example of bodies being abandoned at the medical examiners office. Ashley also provided an example of a unique situation around crypto currency.

For Community Outreach, the homeless systems work continues with initiatives. There was an event at the CR Library to meet with downtown businesses and share concrete plans. There have been two consecutive years of decreases in the PIT count while homelessness in the State of Iowa has increased 35%. Ashley shared that there was a high level of interest and engagement in the community in being part of the solution. She also shared the update from the Landlord & Tenant Success Initiative. To date, the program has spent \$49,000 but has housed 55 clients. 63 adults were housed. Ashley discussed that previously there would be issues with extremely poor quality housing being the only units accessible to the population. \$30,000 of the budget is dedicated to a risk mitigation fund which has barely been utilized. Ashley shared that they have had better success with the pilot than expected. Ashley also shared that the winter weather shelter ended on the overnight of the 30th of March. The number of unduplicated individuals dropped substantially and there was a decrease in the number of calls per service from 2.5 to 1.5. Melissa asked what the breakdown of calls is between medical and nuisance or disturbances. There was an elimination of overdose calls due to the implementation of biometric lockers in the shelter. David highlighted that the housing inventory is at a low due to the data center construction workers. Ashley shared that Conservation has seen an uptick in campground users from both construction and the homeless population.

b. Child & Family Services

Gloria Witzberger

Gloria was unable to attend the meeting.

c. MHAC

Erin Foster

Erin shared the update for the MHAC. The MHAC celebrated its 5 year anniversary recently. They are now seeing withdraw management patients, and the first few clients were very appreciative. The ASO has said they should be receiving contracts soon and the HHS appropriations bill may reflect no changes. Sami asked about the sub-acute bill in the legislature. Erin shared some of the challenges at the legislature and that the House passed the Senate amendment and Erin shared that there are concerns that this will worsen the situation.

d. Home Health

Stacey shared the update for Home Health. Stacey shared that they have several clients who have lost their eligibility through their assessments. All assessments are done via phone and there can be challenges with the technology. Stacey noted that

case managers are often not involved in the assessments and then case managers playing catch up. They are doing their best to serve as many as they can with the staffing. Melissa asked why individuals are losing eligibility. Without a case manager or DCW to advocate for them there can be a misconstruing of the level of independence.

e. ECI/Decat

Amy Grunewaldt

Amy shared the update for ECI/Decat. The appropriations bill goes to subcommittee today and eliminates Decat and CPPC. Amy shared that she has spent a lot of time advocating since Decat doesn't have a lobbyist or a statewide representative. Amy shared her concern that the impact will be greater than the legislators realize. ECI is on its 4th amendment of its bill. They want to move the home visiting contract to the state level. Amy has continued to advocate and explain the implications at the local level. Amy shared that they are requesting a study on how these items will impact communities and what the systems level looks like.

f. Ryan White

Nichole Baker-Jones

Nichole shared the update for Ryan White. She shared that \$22 million in funding was not reinvested into the program to cover the services offered. They are on a temporary pause and that clients were not receiving their medications. 250 clients were transitioned to new pharmacies and now have large copays. Clients who go to UIHC are now being covered by the State but those outside of the UIHC system may have burdensome copays. They also temporarily lost interpretation services but now have a small fund from the State. They are not filling a case manager position for the moment due to the funding changes and are focusing on trying to develop backup plans. Nichole noted that they will get back to where they were but it will take time to get the monies back. Sami asked if the BOS is able to supplement the Ryan White program.

g. DAP Jody Bridgewater

Jody shared the update for DAP. She noted that they are moving their employer of record outside of the County.

VI. **New Business/Public Comments**

LCCS Board Chair

David noted that Linn County is continuing to support its programs despite the headwinds at the State.

a. Next Board Meeting –

i. May 12th

VII. **Adjourn**

The meeting adjourned at 1:05 p.m.

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CACFP Meals Served				
	Jan-26	Feb-26	Mar-26	TOTAL
Free	2,419	2,667	2,543	7,629
Non-Reimbursable	54	57	63	174
Reduced Price	103	90	80	273
Total Meals Served to Children	2,576	2,814	2,686	8,076
Meals Served to Adults	-	-	-	-

CACFP Attendance Data				
	Jan-26	Feb-26	Mar-26	TOTAL
Number of Days Meals were Served	20	20	21	61
Total Monthly Attendance	959	1,033	977	2,969
Average Daily Attendance	48	52	47	49

Accrued CACFP Budget Data				
	YTD	Budget	% Utilized	% Expected
Salaries& Benefits	113,427.30	\$ 155,612.89	73%	75%
Food Expenditures	\$ 48,074.70	\$ 77,000.00	62%	75%
Non-Food Expenditures	\$ 5,221.45	\$ 8,000.00	65%	75%
Total Expenditures	\$ 166,723.45	\$ 240,612.89	69%	75%
CACFP Revenue	\$ 65,627.13	\$ 73,800.00	89%	75%
Deficit	\$(101,096.32)	\$ (166,812.89)	61%	75%



Shari R. Miller is a dedicated community leader and advocate with over three decades of experience in program development, community-based corrections, and youth empowerment. She currently serves as an Executive Officer for the Sixth District Iowa Department of Corrections, where she oversees a variety of projects for the district, including training and development for more than 170 employees.

Throughout her distinguished career, Shari has demonstrated a deep passion for fostering emotional intelligence, healthy social skills, and effective conflict resolution. Certified in EQ-i 2.0 and 360 Assessments, she has utilized emotional intelligence coaching to support both staff and high-risk clients. Her specialized expertise also includes facilitating critical restorative justice initiatives, such as Victim-Offender Dialogues and treatment groups for specialized correctional populations.

Prior to her current role, Shari spent 14 years as an Executive Officer and Program Coordinator for the *Children of Promise* initiative. In this role, she managed youth-serving programs across a six-county area, establishing vital partnerships with the Cedar Rapids Community School District, the University of Iowa Athletic Department, and United Way. Her work focused on creating safe harbors, designing experiential social-emotional learning curricula, and securing funding through successful grant writing and fundraising for youth navigating family involvement in the correctional system. Shari's foundational career also includes developing arts-based life skills lessons for youth in shelters and juvenile detention through the Grant Wood Area Education Agency and using Forum Theatre, as a technique to help non-actors resolve conflict in an open and healthy way.

Shari holds a Bachelor of Arts in Interpersonal Communication with high honors from the University of Northern Iowa, complemented by a minor in Family Life Education and a certification in Gerontology. She brings a vast array of specialized certifications to the board, including Crucial Conversations, Motivational Interviewing, Critical Incident Stress Management, and a DEI in the Workplace Certificate from the USF Muma College of Business.

A resident of Mount Vernon, Shari looks forward to bringing her collaborative spirit, crisis management expertise, and lifelong commitment to compassionate, community-centered growth to the county board.



Jane Drapeaux dedicated more than 25 years to Hawkeye Area Community Action Program (HACAP), serving as Chief Executive Officer from 2007 until her retirement. During her tenure, HACAP expanded its service area to nine counties across Eastern Iowa and grew its annual operating budget to more than \$60 million. Under her leadership, the organization strengthened and

expanded programs designed to reduce barriers, increase opportunities, and improve the quality of life for thousands of individuals and families each year.

Drapeaux's leadership was especially instrumental during the historic 2008 Cedar Rapids flood, one of the most devastating natural disasters in Iowa's history. As communities across the region faced unprecedented challenges, HACAP served as the central call center for United Way 2-1-1, connecting residents with critical disaster relief resources, housing assistance, and recovery services. Her calm, strategic leadership helped coordinate community response efforts and support thousands of affected families during a time of extraordinary need.

Throughout her career, Drapeaux earned numerous honors recognizing her commitment to community service and leadership. She received the Robert F. Tyson Award, the highest distinction presented by the Iowa Community Action Association, as well as the Outstanding Community Leadership Award from The Gazette HER Women of Achievement Program. In March 2026, she was inducted into the National Community Action Foundation Hall of Fame, a prestigious national honor recognizing individuals whose leadership and service have made a lasting impact on the Community Action movement.

Before being named CEO, Drapeaux served as HACAP's Head Start Director, building upon a career that began in early childhood education and Head Start programs, including service in South Dakota, where she met her husband, Dan. Her lifelong dedication to children, families, and community development helped shape HACAP into one of Iowa's most respected nonprofit organizations and left a lasting legacy throughout Eastern Iowa.



Jaye Kennedy graduated from Mount Mercy University in 1982 with a degree in business. Following graduation, she joined SCI Financial Group as a broker and steadily advanced through the organization, eventually becoming an Investment Portfolio Manager. In that role, she worked closely with investment account holders, helping them manage and achieve their financial goals.

While at SCI Financial Group, Kennedy participated in the United Way of East Central Iowa's "loaned executive" program, an experience that sparked her passion for nonprofit leadership and community impact. She later joined the organization full-time, serving as Director of Development for 10 years and leading fundraising and community engagement efforts throughout the region.

Kennedy continued her career in nonprofit development as Development Director for Tanager, where she spent four years advancing the organization's mission and fundraising initiatives. She then founded Kennedy Consulting, providing strategic consulting services to nonprofit and community organizations across Iowa. Through her firm, she helped agencies strengthen their financial sustainability, improve operational effectiveness, and enhance organizational performance.

Her expertise in fundraising and relationship-building led her to the University of Iowa, where she worked in academic fundraising before accepting the role of Chief Executive Officer at Waypoint Services. During her 13-year tenure as CEO, Kennedy guided the organization through significant growth while expanding services and strengthening its impact on individuals and families throughout Eastern Iowa.

After retiring from Waypoint Services in 2025, Kennedy launched Aligned Living Executive Coaching, where she now works with leaders and organizations to develop leadership capacity, navigate change, and align personal values with professional success.



Tonya Hotchkin, LMFT, RPT - Vice President of Clinical Care and Programming Tanager - serves as Vice President of Clinical Care and Programming at Tanager, where she provides strategic leadership for clinical services and program development that support children, families, and communities across Iowa.

Tonya earned her bachelor's degree in Social Work, with a minor in Family Studies, from University of Northern Iowa in 2007 and completed her Master of Arts in Marriage and Family Therapy at Mount Mercy University in 2012.

Throughout her career, she has served in a wide range of social service settings, including inpatient treatment, community-based programs, school-based services, prevention initiatives, and outpatient mental health care.

A Licensed Marriage and Family Therapist (LMFT), Registered Play Therapist (RPT), and Certified Trauma Practitioner, Hotchkin has developed extensive expertise in trauma-informed care and evidence-based therapeutic practices. She has received advanced training in Theraplay, Eye Movement Desensitization and Reprocessing (EMDR), Brainspotting, Sand Tray Therapy, and Play Therapy, allowing her to provide innovative and effective interventions for children and families facing complex challenges.

In addition to her clinical leadership, Hotchkin is a recognized educator, author, and speaker. She has served as an adjunct professor at Mount Mercy University and has contributed to the field through publications focused on trauma, resilience, and mental wellness. She is the author of *Together We Rise: Wellness and Resilience Framework* and the creator of the RISE: Wellness and Resilience Framework, a model designed to promote healing, growth, and resilience in individuals, organizations, and communities.

Hotchkin is a sought-after presenter who has delivered numerous workshops and keynote presentations on leadership, trauma-informed care, resilience, mental health, and best practices for working with children and families. Her contributions to the profession have earned her significant recognition, including the Corridor Business Journal's 40 Under 40 Award and the Women of Influence Award.

Through her leadership, innovation, and commitment to strengthening mental health services, Hotchkin continues to make a meaningful impact on the lives of children, families, and professionals throughout Iowa and beyond.

Linn County Mental Health Access Center Advisory Committee Meeting

Meeting Minutes – Virtual

May 14, 2026

1:00 - 2:00 p.m.

In attendance: Ambre Bernards, Rob Lancaster, Beth Malicki, Erin Foster, Gage Miskimen, Emily Windt, Ann Emerson-Battien, David Thielen, Kyle Taylor, Kurt Roghan, Josh Pruitt, Tanner Wilson, Amber Herboldsheimer, Katy Lee, & Kelly Zepeda.

1. Welcome:

Did you know who made up the original Mental Health Access Center Advisory Committee, which then was called the Executive Committee?

Answer: Ben Rogers, David Thielen, Darrin Gage, Staci Meade, Emily Blomme, Barb Gay, Diane Brecht, Kathy Johnson, Kent Jackson, Carol Meade, Phil Fort, Chris Bieber, Pete Wilson, Chad Colston, Keith Rippey, & Jennifer Peden

2. MHAC Advisory Board Update: Erin Foster

a. New Member Update- we have five spots open right now. The new volunteer sign-up form that went out included MHAC positions. We had nine people show an interest. An ad hoc is coming together to help look through those.

3. Legislative Overview: Gage Miskimen & Erin Foster

a. Subacute bill has been signed into law and went into effect immediately. Access Center will start taking data on how subacute prior authorizations are working. Only five subacute entities are licensed in the state and have agreed to help compile data – except for the mystery subacute entity that claimed they want the version that passed. All other subacute providers are disappointed with the final bill (Senate version with amendment.) Had it stayed with a status quo or adopted a fraction of the House bill it would have been a win. The way it ended makes things worse than before. It makes providers designate if the

situation is an “urgent, standard or complex” situation. Each has a different time frame for the Managed Care Organization (MCO) to respond to the prior authorization request. Of the five orgs that do subacute, three are not willing to admit someone without proof of ability to bed. And MHAC has only two subacute beds and might be the only provider that doesn’t require proof of ability. Rep. Ann Meyer on the House side wants data to present when the 2027 session opens to try and fix this.

b. HHS budget was decided in the final marathon closing days of the session. Transportation for committals will come from county budgets now, not the state. This came as a surprise to county sheriffs.

c. Three strikes bill did pass. Lowered the minimum from 15 to 7 years.

4. MHAC Updates

a. Kelly Zepeda-F2 – working out some new policies. Hired a new law enforcement liaison coordinator.

b. Emily Windt- Abbe Crisis Inpatient – There is now a peer on the in-patient side. Apryl started about two weeks ago. She’s working 12:30 – 5:30 p.m. Monday – Friday and offering group sessions. Has experience doing groups. Several referrals but no additional admissions for withdrawal management. Access Center is looking for another nurse for the withdrawal management program to allow expanded intake days, which should improve admissions.

d. Amber Herboldsheimer- Area Ambulance- Last month sobering saw there was a significant uptick in patients, for extended period of time, a reflection likely of the overflow winter shelter closing. Working with Abbe and Foundation 2 to meet those needs.

e. Erin Foster-MHAC Overview – Volunteer outreach garnered lots of responses. People want to help with toiletry drives, clothing drives, outreach, and leading a group on-site (would require some additional steps). Erin is contacting each one starting next week.

Rob Sand visited to get a tour. There was also a roundtable at the library about a range of behavioral health topics. Sand voiced his opposition to Managed Health Care and signified an understanding of the realities of Iowa’s mental health picture.

This is mental health awareness month. Big marketing push: online, billboards, bus ads and social media. May is also maternal health month so Liz, before completing her term, did outreach with OBGYN offices with Access Center materials. Cedar Rapids asked Erin to provide some mental health training for staff with city employees. It’s an hour-long

crisis training that will include resources in the community. Marion will do a proclamation for mental health awareness month.

5. Advisory Engagement

a. Strategic Plan Updates

i. Outreach group is meeting within two weeks.

ii. Quality improvement objectives are part of our strategic plans. This includes training needs and promoting a positive, caring culture. There will be a staff development committee to that end. A survey will come for MHAC members. And Erin wants to revamp the discharge survey to grow and improve. The data right now is overwhelmingly positive.

Next meeting is June 11, 2026.

April 2026

Monthly Data Review

Mental Health Access Center



Presented to
Presented by

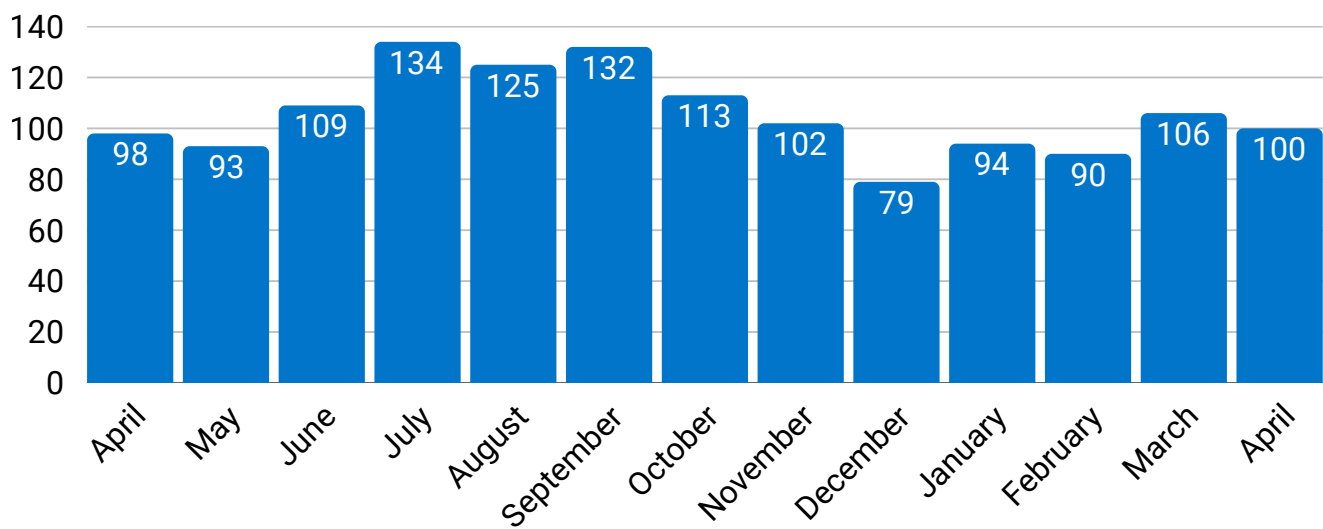
MHAC Advisory Board
MHAC Director
Erin Foster



TRIAGE AT A GLANCE

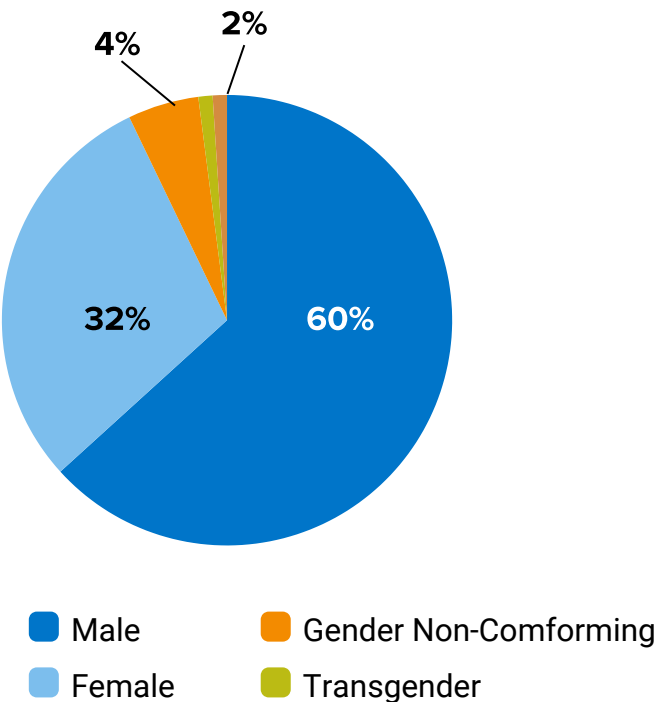
	Previous Month	Current Month	FY26 YTD
Total Walk Ins	106	100	1043
Law Enforcement Referrals	5	9	81
EMS Referrals	8	11	67

Number of Walk Ins

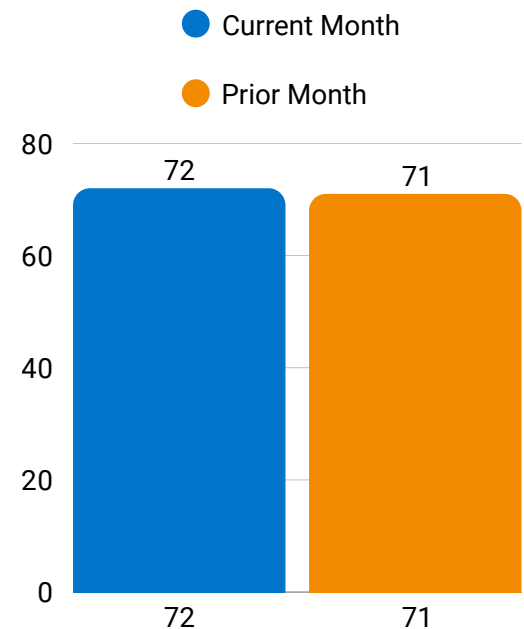


GENERAL INFORMATION

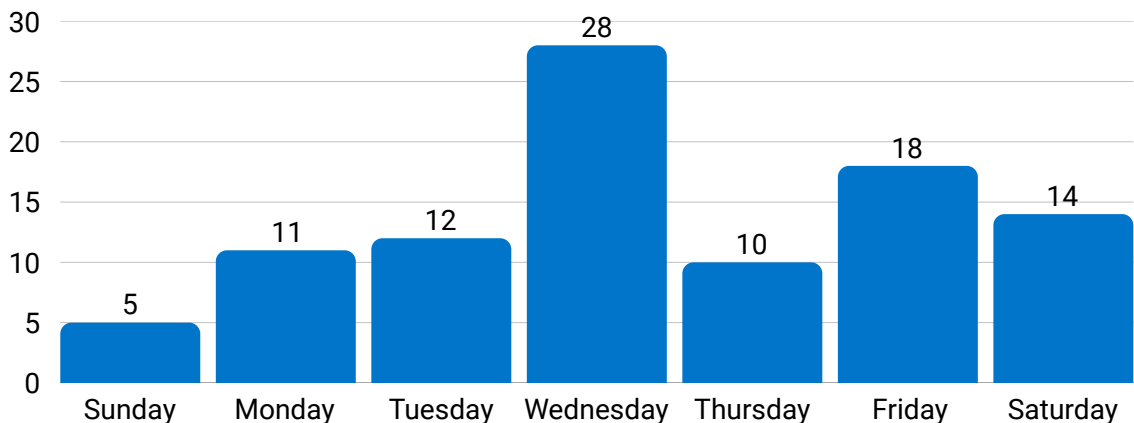
Identified Gender



Average Triage Time in Minutes

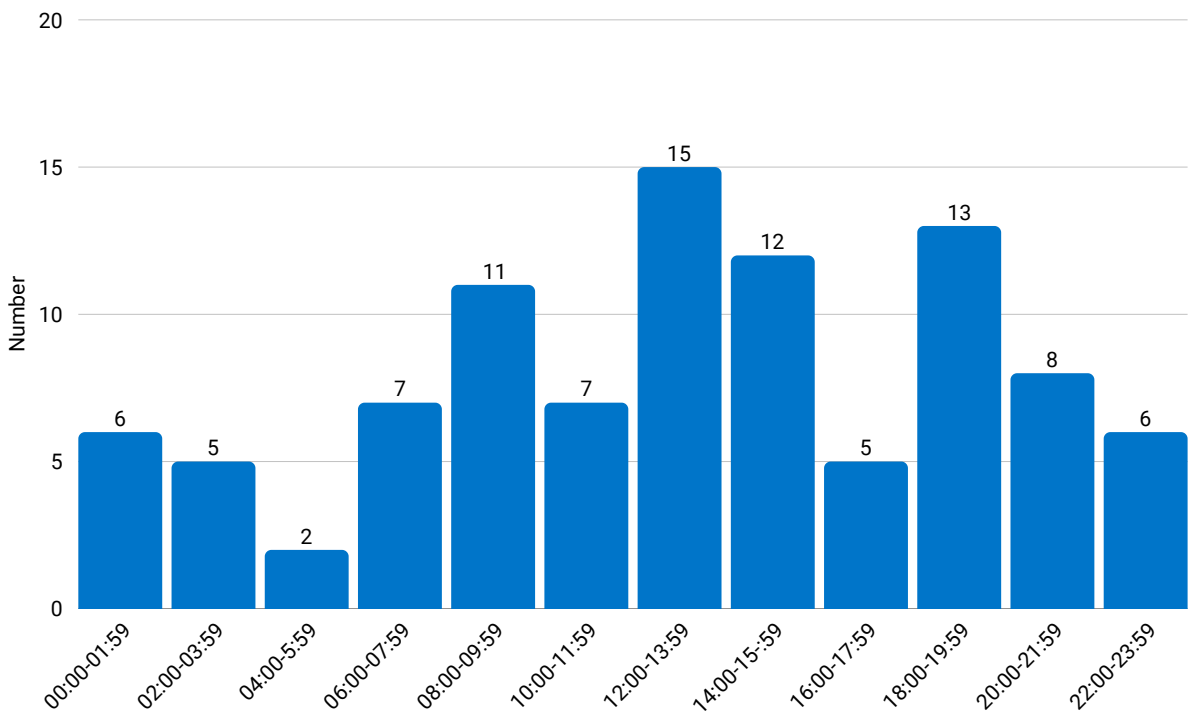


Visits by Day of the Week



GENERAL INFORMATION

Time of Walk Ins



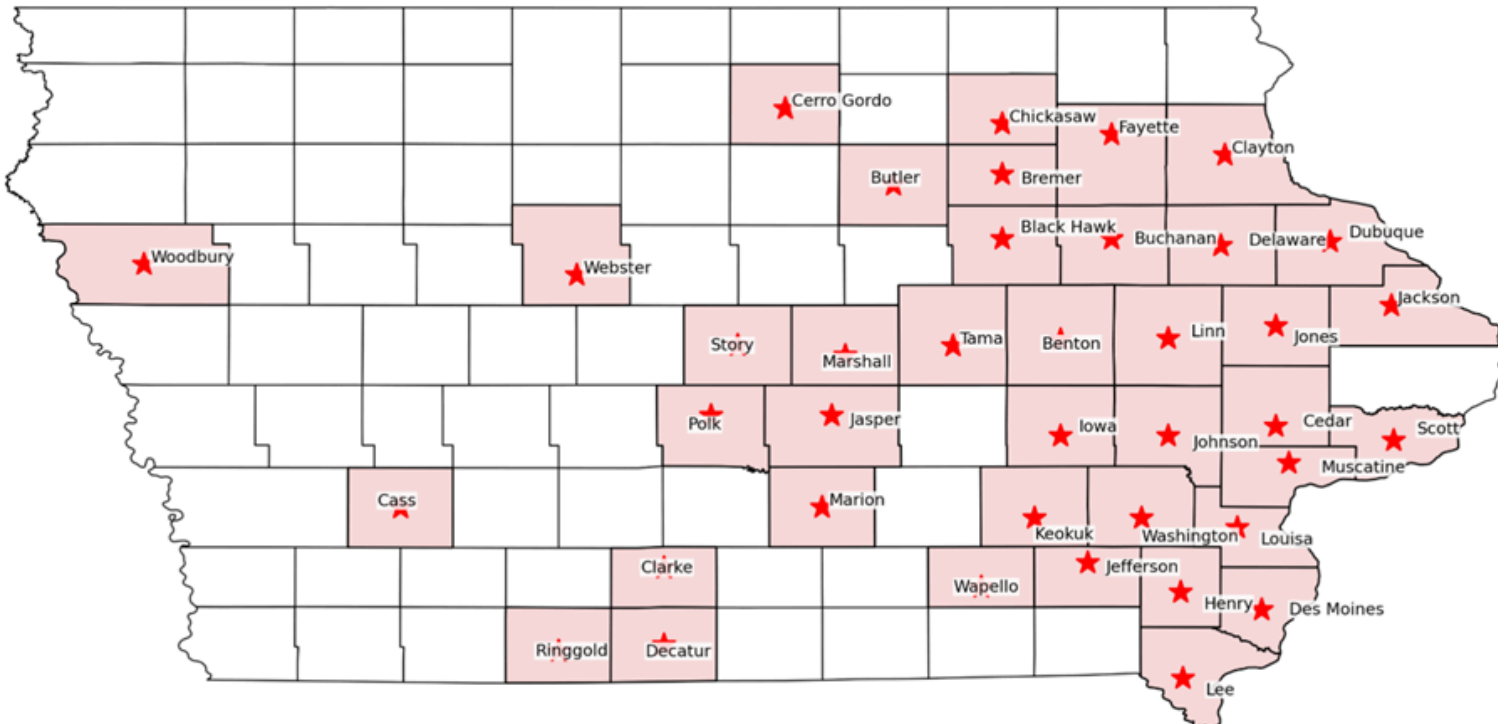
External Services Used with Walk Ins

Community Discharge	Hospital	Guidelink	CSCBS	Other
64	6 (5 Med, 1 Psych)	0	0	0

GENERAL INFORMATION

Counties of Origin for Current Month

- Linn-92
- Benton-2
- Jones-1
- Dubuque-1
- Johnson-1
- Iowa-1
- Wapello-1



INTERNAL PROGRAM HIGHLIGHTS

Inpatient Mental Health: CSB, Observation, & Subacute

	CSB Previous Month	CSB Current Month	Observation Previous Month	Observation Current Month	Subacute Previous Month	Subacute Current Month
Total	53	39	0	0	2	1
MHAC Walk In	35	23	0	0	NA	NA
MCO/LEL/ Other Placement	18	16	0	0	NA	NA

Inpatient SUD: Withdrawal Management

	Previous Month	Current Month
Total	1	1

Discharge Disposition

Community (Unhoused)	Community/ Home	Hospital	Inpatient/ Treatment	Other
7	23	2	3	4

Abbe Community Mental Health Updates

41

Referrals from Inpatient

16

were established Patients & seen while in care

10

new Abbe patients were connected while in our care

12

Peer groups offered

Abbe Community Mental Health SUD

Primary Drug of Choice

- Meth
- Alcohol

Outcome of Visit

5

Completed ASAMs

3

Referrals to Outpatient treatment

3

Referrals to Inpatient treatment

Sobering Unit Updates

18

Patients

2.5

Average CIWA Score

.151

Average BAC

9

9 Hours and 41Minutes– average length of stay

Law Enforcement & EMS

9

Referrals from LE (CRPD, Monticello & Marion)

11

Referrals from Area Ambulance & Hiawatha

4

Average number of minutes LE spends in MHAC

5%

Diverted from jail while engaged with PD

45%

Would have gone to the hospital

POST DISCHARGE SURVEYS

General Comments

- It is super peaceful here. I was very impressed. Everyone on the staff is super nice and helpful. I love the outdoor space and the fan in the bedroom.
- The staff was amazing! So kind and caring and didn't pressure anyone to do anything they didn't want to.
- The people here are very caring and are quick to help someone like me. They're very beautiful souls and they know what they are doing to be able to help people like myself.
- For everything that I was helped with I'm more than thankful. It means a lot to me that there's another place for help other than the emergency room to end up in 2E. So thank you millions

