

Meeting Minutes-State Interagency Team Meeting

Thursday, May 24, 2018

2:00-4:00

Location: Linden Conference Room

Facilitator and Notetaker: Cheryle Bilodeau

Present: Amy Lincoln Moore, Cheryle Bilodeau, Karen Price, Brenda Gooley, Laurel Omland, Cindy Tabor, Alicia Hanrahan, Amy Roth (for first hour), Sandi Hoffman, Dana Robson, Suzanne Legare Belcher

Regrets: Melanie D'Amico, Amy Danielson, Morgan Cole, Monica Ogelby

Agenda Items	Discussion Notes	Next Steps
<p>CHILD (Children's Health Integration Linkage and Detection) Grant Advisory meeting- <i>Laura Bernard and Laurel Omland</i></p>	<p>Promoting Integration of Primary and Behavioral Health Care</p> <ul style="list-style-type: none"> • This will be a quarterly meeting of SIT with added membership to act in the role of the advisory council for this grant • Vermont was awarded the grant beginning October 1, 2018 and it took time to get approval by Joint Fiscal to accept the funding and then start the contracts and work • This is a five-year grant • One of three states who received this grant-Vermont, New York, Kentucky • We are the only grant focusing solely on children • Target children 0-22 with SED or at risk of SED • Bi-directional collaboration between primary care and behavioral health (health centers and designated agencies (DA)) • Pilot Regions: For the first two years <ul style="list-style-type: none"> ○ Springfield: FQHC, Springfield Medical Care Systems and DA, Health Care and Rehabilitation Services ○ Franklin/Grand Isle: FQHC, Northern Tier Center for Health (NOTCH) in Richford (to start) and DA, Northwestern Counseling and Support Services • The plan is to recruit 2 more regions after the first two years • In the middle of June, all four agencies from the two sites will be coming together to do training and team-building—this day is being led by the Vermont Center for Practice Improvement and Innovation • Role of this Advisory Council: <ul style="list-style-type: none"> ○ Provide guidance to grant leadership and key staff regarding state system, policy and workforce challenges ○ Advise on grant activities ○ Provide feedback and counsel on data, CQI plan, and grant progress • Evaluation for the grant is being done by the Vermont Child Health Improvement Project (VCHIP) • Next Steps: <ul style="list-style-type: none"> ○ Finalize health coaching model (Sears Model) ○ Start primary care activities at the DA ○ Continue training and planning ○ CQI plan 	<p>See attached power point presentation for full details</p> <p>Think about how SIT can support the LIT in the two regions from an interagency perspective</p>

	<ul style="list-style-type: none"> ○ Financing, sustainability and integration with health reform efforts 	
<p>Updates</p> <p>*CSP Form Update Workgroup</p> <p>*Mobile Crisis Think Tank, June 13th from 12:45-4:30 at the Waterbury State Office Complex</p> <p>*Vermont Special Educators Association Meeting</p> <p>*SIT/CRC Clarity</p> <p>*Website page for families on Act 264</p> <p>*Policy re: out of home care when a family is no longer involved, visiting or moves out of state</p>	<p>CSP Form Team is continuing to meet monthly prior to SIT. Today we reviewed feedback received on the latest iteration of the CSP form. Still on target to complete this by fall.</p> <p>Mobile Crisis Think Tank</p> <ul style="list-style-type: none"> ● Cindy will send the invite to the VFFCMH board of directors and LIT parent reps ● Cindy is soliciting feedback from parent reps and families about their experience with crisis services and ED wait times <p>Vermont Special Educators Association Meeting Alicia, Diane, Cheryle and Cindy attended the VSEA meeting last week at their request to share about current interagency work occurring. It was a positive meeting and we shared about the updated CSP form,</p> <p>SIT/CRC clarity Dana, Cheryle, and Diane met to discuss how to create more clarity in writing about what goes to CRC vs. SIT, especially in light of residential referrals. We looked at the CRC out of home guidelines and the need for a clear document outlining what SIT does and is. Dana and Diane will bring the out of home guidelines to CRC for update and revision to also create clarity in that document that references SIT.</p> <p>Discussed what happens when there is disagreement at LIT about who should fund when there is agreement about the need for residential. That referral would come to SIT and we may determine to have a subgroup meeting with the depts. involved to make that decision. This happened last month and was resolved in that manner.</p> <p>Website page for families on Act 264—thank you for viewing and providing feedback. This page is ever evolving so if you think of something else please let Cheryle know. the link is www.act264.vt.gov</p> <p>Policy re: out of home care when a family is no longer involved, visiting or moves out of state: Cheryle has been working on this and we will review next month</p>	<p>Question about is training about the form going to occur?</p> <p>Review Overview of SIT for discussion next month</p>
<p>VFFCMH Priorities and Updates-Cindy Tabor</p>	<p>Cindy provided handouts:</p> <ul style="list-style-type: none"> ● 2018 VFFCMH Advocacy Initiatives ● Family Voice and Lived Experience Regional Leadership Network <p>The Federation has been working very hard to have either a parent rep in each region or a parent rep from another region covering so families have access to the peer support.</p>	

	<p>The Family Driven Local Program Standing Committee—the Federation now has contracts with three DAs for this work—Washington County Mental Health, HCRS, and CSAC.</p> <p>Advocacy Initiatives:</p> <ol style="list-style-type: none"> 1. Unravel the mystery of respite 2. Address extensive ED wait times for children meeting criteria for higher end services. 3. Support the Act 264 Board’s Priorities for 2018 4. Identify, track and respond to 2018 Legislation pending/proposed that impacts the children and families that VFFCMH is missioned to serve 5. Make Act 82 Recommendations 	<p>1. Cindy will do follow up with Diane about Family Managed Respite and DMH about the respite funds they hold. Both have data that can be shared. There is also respite provided for children in DCF custody, some have a respite allocation in their adoption/post-permanence subsidies, Children with Special Health needs (Monica Ogelby) has some respite funds for eligible children.</p>
<p>Wrap Up and Next Steps</p>	<p>Agenda Items next month:</p> <ul style="list-style-type: none"> • Review clarifying documents about SIT and CRC • Review policy about out of home placements specific to children/youth with no parental involvement 	