

Date / Time of Meeting	December 1, 2017 9:00 AM - 3:00 PM Dial in: 866-906-9888 Access code: 2927162 Conference Room: 3A
Meeting Purpose	Interagency Governance Team
Host	Treena Clark, Division of Behavioral Health

Member Participant	Att'd	Non-Member Participant	Att'd
Carol Dixon - Advocate	X	Ross Edmunds - Behavioral Health	X
Matt McCarter - State Department of Education	X	Pat Martelle - Project Manager	X
Connie Sturdavant - Provider	X	Lynn Thompson - Children's Mental Health	X
Dave Sorensen - Provider	X	Jason Stone - Idaho Department of Juvenile Corrections	X
Dr. Lynn Thull - Consultant	X	George Gutierrez - Medicaid	X
Kim Hokanson - Parent	X	Michelle Weir - Family and Community Services	
Lael Hansen - Idaho Association of Counties Juvenile Justice Administrators	X	Vanessa Morgan - Parent	X
Eric Walton - Class Member	X	Jennifer Griffis - Parent	X
Treena Clark - Behavioral Health Policy	X	Maria McConnell - Advocate	X
Candace Falsetti - Behavioral Health - Quality Management Improvement and Accountability	X	Holly Riker - Behavioral Health Quality Assurance Team	X
Suzette Driscoll - Medicaid		Rhonda House - Behavioral Health Business Analyst	X
Sharon Harrigfeld - IDJC		Matt Wimmer - Medicaid	X
David Welsh - Medicaid	X	Venecia Anderson - Medicaid	
Dr. Nate Israel - Chapin Hall	X	Mindy Oldenkamp	X

AGENDA

#	Topic	Topic Owner	Discussion	Decisions
1	Welcome and Roll Call Approve minutes from last meeting	Dave Sorensen		Minutes from last month approved as written.
2	Operational Guidelines Discussion	Maria McConnell	<ul style="list-style-type: none"> • Kim, Maria, and Rhonda went through the charter and created a cleaner purpose, drivers, and expectations. The group made every effort to be conscientious of the plaintiffs and the settlement agreement and the implementation plan. • Purpose: <ul style="list-style-type: none"> ○ Suggestion to spell out the acronyms the first time they are used. 	

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			<ul style="list-style-type: none"> ○ George asked as to the intended use of the purpose on the document and whether or not it would ever be published independently from the rest of the document, and if it were to be, it would need to be incorporated with the drivers and expectations paragraphs to give it more context. <ul style="list-style-type: none"> ▪ Maria stated that the intent would be that it would all be published together. • Lael asked about the decision-making process and how it fits with the IGT, as the purpose of the IGT is advisory, not decision making. <ul style="list-style-type: none"> ○ Maria explained that the first two bullets were pulled from the draft Pat had created and may need clarification to show that, while the IGT is making internal decisions regarding the advice/recommendations that it may give, that is the decision-making process it will follow. • Vanessa asked about the statement of the IGT overseeing the implementation of YES and the QMIA Council, as it implies that the IGT is only to be around for the implementation. <ul style="list-style-type: none"> ○ Ross suggested that it be added to say “implementation and operation of YES” in the first line of the purpose. • Matt commended the work done by the group. He suggested to add the word improved to the last sentence of the purpose to read “...new and improved child mental health system...” • Rhonda asked if the IGT is to oversee the implementation of YES or of the settlement agreement. <ul style="list-style-type: none"> ○ Maria stated that it is essential to make sure we are as true to the settlement agreement as possible, but to those outside of this work, it is YES as a whole, not just the settlement agreement. ○ Eric stated that it didn’t seem necessary to reference the lawsuit in the purpose. • Drivers and Expectations: <ul style="list-style-type: none"> ○ Dave S. asked what the term standard-bearer meant. <ul style="list-style-type: none"> ▪ It was suggested to clarify the term in more plain language. 	

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			<ul style="list-style-type: none"> <ul style="list-style-type: none"> <ul style="list-style-type: none"> ▪ The suggestion was to split the second bullet point out into two separate bullet points to delineate leadership and oversight. ○ There was concern regarding the word ensure in the fourth bullet point, but it refers to the responsibility of the state agencies to ensure. • Process and Deliverables: <ul style="list-style-type: none"> ○ Add the word internal to the first bullet "... the internal decision-making process..." ○ Eric asked if there would be a separate document that outlined <i>how</i> the steps would be completed as this document just outlines the <i>what</i>. <ul style="list-style-type: none"> ▪ Kim explained that the outline form will be the avenue for obtaining and receiving information to help achieve the processes and deliverables. ▪ Ross agreed with Eric, and recommended breaking out Process and Deliverables. <ul style="list-style-type: none"> • There was agreement that that was a good idea. • Eric suggested that it could cross reference each other as needed. • Ross stated that there is more work to be done on the <i>how</i>. • Maria agreed that the deliverables should be fairly consistent, but the process to achieve those may be fluid as progress is made. • Connie stated that typically there is a separate document that lists out the goals. • Candace added how things would be measured and what the impact would be if it was or was not met. • Ross stated that some of them read more like guiding principles - the first bullet point specifically. <ul style="list-style-type: none"> ○ Rhonda suggested moving it up to the drivers. ○ Connie also stated that the work that has been 	

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			<p>completed is great to help eliminate some of the disjointedness the group has felt.</p> <ul style="list-style-type: none"> ○ Ross explained that the challenge in creating this document is that it's not just the documentation of what we're doing, but rather the creation of what we're doing. ○ Rhonda suggested moving the number two further down in the list. Lynn suggested by number six. ○ In regards to bullet number three, Vanessa asked if this group could ensure that it get caught up when it gets behind. <ul style="list-style-type: none"> ▪ Maria clarified that it should be up to the IGT to have a mechanism to identify, and advise on how to remedy the delay. ▪ Rhonda suggested changing the word ensure to address. ○ Dave S. asked in regards to bullet number four who the annual report would be for. <ul style="list-style-type: none"> ▪ Candace explained that the Implementation Progress Report goes to the IGT for review and then to the court. ▪ Kim explained that the IGT annual report would be a manner in which to hold the project accountable. For example, if the IGT requests information, etc, and it is not received, an annual report documenting as such. ▪ Ross explained that this group cannot file a report with the courts, but that he understood what Kim was saying. Rather, he suggested that this group be expected to write the report and that the audience would be the agencies and the IBHC, and that the IGT should have the expectation that if there is a recommendation made, a response should be received. ▪ Candace offered that a section of the Implementation Progress Report be written by the IGT. ▪ Ross stated he liked the idea of the IGT doing a stand-alone annual report and 	

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			<p>submit to the IBHC.</p> <ul style="list-style-type: none"> ▪ Ross also suggested that the aspects mentioned in this reporting be split into another deliverable regarding how the regular work of the IGT gets communicated rather than in an annual report alone. <ul style="list-style-type: none"> • Ross stated that the regular communication going out regarding the ongoing work would fall under the deliverables for the IGT. ▪ Dave S. asked who will write the report. <ul style="list-style-type: none"> • Rhonda stated that there may be a need for a secretary in the IGT to help draft some of these things. • Dr. Israel suggested that the IGT identify each of the elements and identify how they would be worked through as standing agenda items each month that could then be reviewed, communicated, and tracked. The items could then be referenced at any time. • Jennifer agreed and then it may not need to be someone's full time job because then it is just a matter of pulling information together. ○ Bullet five was deferred until lunch. ○ Bullet six was updated to reflect "...regular updates from the YES..." <ul style="list-style-type: none"> ▪ Ross added that the list is not yet all inclusive. ▪ Maria added that it may be helpful to bullet point out who/what will be discussed at IGT. ▪ Dr. Israel asked if there was an expected timeline for the IGT to review the reports. ▪ Ross suggested that there may be need for a smaller, executive committee to commit to reviewing and editing. <ul style="list-style-type: none"> • Jennifer agreed, having had success with this at the Planning 	

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			<p>Council, and that they would just open it up to those who were interested.</p> <ul style="list-style-type: none"> • Ross suggested to back it up from the date the report is due, and then look at the feedback circles involved. • Ross added that there also needs to be a component that addresses how feedback can be handled if the IGT is not slated to meet and what a reasonable timeline may be. <ul style="list-style-type: none"> ▪ Candace cautioned that it may push out deadlines for publishing reports. ▪ Maria explained that the intent of the bullet point is to allow the IGT to have enough time prior to something being published that the IGT has ample time for review. <ul style="list-style-type: none"> ○ Bullet ten was amended to reflect "...review and evaluate any new policy..." <ul style="list-style-type: none"> ▪ The discussion centered around the depth of work and responsibility involved in reviewing and evaluating <i>every</i> new policy related to YES. ▪ Carol asked if there may need to be a subcommittee created to balance the work. ▪ Maria stressed the importance of the IGT being able to review it all and help eliminate the possibility of work being done and then being shut down by the plaintiffs. <ul style="list-style-type: none"> • Trenea stressed the importance of defining what policy is in regards to this group. • Jennifer stressed the importance of including transparency and collaboration as policy is created and reviewed. 	

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			<ul style="list-style-type: none"> ○ Rhonda stated that bullets 10, 11, 12 are all in reference to future looking work. <ul style="list-style-type: none"> ▪ Dr. Israel added that it is important to clarify what policy, funding, etc. looks like to each of the groups involved. ○ Matt stated that it is important to make sure that bullet 11 references funding regarding YES. ○ Connie asked, in regards to bullet 13, if IGT would be finding/applying for grants. <ul style="list-style-type: none"> ▪ Maria stated that there may be opportunities where the IGT does need to help in that work. ● Maria opened the discussion regarding access to and interfacing with legislators and the interaction of the IGT membership. <ul style="list-style-type: none"> ○ Pat stated that we could work to developing some talking points. ○ Rhonda added that you would be identifying yourself as a parent, as a provider, who is a member of the IGT. ○ Kim has written a statement and the subcommittee will include it in the next draft. ○ Jennifer stated that it will be very important to have extremely clear language as to how anyone addressing legislators should introduce themselves (as themselves, or as members of the IGT). ● Vanessa stated that she would like to see something included in the next draft about the continuation of the IGT after the closure of the settlement agreement. 	
3	Working Lunch - Subcommittee Discussion	Dave Sorensen	<ul style="list-style-type: none"> ● The IGT is required to maintain three subcommittees: Family Engagement, Training, and Clinical. It was previously decided that the subcommittee does not have to be chaired by an IGT member, but does need to have an IGT member in its membership. ● The subcommittees are still in search of a chair and a purpose. ● Beth Bolen, LCSW, has agreed to serve on the Clinical subcommittee. ● Dave asked if it is the intent that everyone on the IGT participate in at least one of the subcommittees, and the answer was no, not necessarily. 	<p>The training and clinical subcommittees will be combined for the time being.</p> <p>Rhonda will put together some language that can be utilized in inviting people to come participate in the IGT subcommittees for the January weekend.</p>

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			<ul style="list-style-type: none"> • Candace shared that the question has become how do we maintain our subcommittees without duplicating efforts already in place? • Kim shared that all the workgroups may fall under the subcommittees at one point or another. • Jennifer shared that the idea wasn't necessarily that these subcommittees would be where the work was done, but rather, where, once the work was completed, where oversight would happen. Jennifer also added that she liked the idea of connecting the existing workgroups with the subcommittees. • Jennifer added that if the work is already being done elsewhere in another subcommittee, perhaps it should be left there unless an issue arises, and then it could be brought to the IGT subcommittee for review and input. <ul style="list-style-type: none"> ○ The IGT subcommittee would help identify the risk, the issue, and then connect the parties that would need to be involved. ○ Candace clarified that it's not necessarily a regularly occurring committee, but rather a committee that meets as needed. ○ Jennifer added that it has been great, as a parent, to know that if an issue arises, it could be brought to the Family Engagement subcommittee to be heard. • Pat added that the Settlement Agreement does not limit the IGT to have <i>only</i> those three subcommittees, nor does it specify how often they have to meet. • Carol stated that it seems as though because the Family Engagement Subcommittee meets regularly, issues come to them because people know they are meeting whereas if they weren't meeting regularly, it would be less likely that issues would come their way. • Dave S. stated that it is important to establish what these subcommittees do prior to recruiting membership as we want to be able to explain to people what they're getting involved with. <ul style="list-style-type: none"> ○ Connie stated that she agrees, as she keeps getting hung up on the ask. • Carol added that the subcommittees may serve as a catchall so that if someone doesn't know where to take an 	<p>Dave S., Connie, Rhonda, Candace, and Beth Bolen will serve as the primary parts of the subcommittee as it gets off the ground.</p> <p>Jason will provide a couple of names to be involved.</p> <p>Matt will be able to provide SDE membership as it gets more defined.</p>

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			<p>issue, they would at least know that these exist.</p> <ul style="list-style-type: none"> • Treena stated that it does present the challenge of resources, and that other members of the community would need to be utilized. • Candace stressed the importance of reviewing representation on the subcommittee level. • Connie stated that it made sense to combine the clinical and training subcommittees at this point. • Candace stated then it may be beneficial to invite a few people to come and write the purpose. • Dave S. stated he is willing to help connect people and Connie, Candace and Rhonda are happy to assist. • Rhonda stated she could help put something together in regards to the ask that could be utilized. • Dave S. asked for SDE and IDJC to find people to be involved and Jason and Lael will look for those who can be involved. 	
4	QMIA Council Quarterly Report	Candace	<ul style="list-style-type: none"> • The report is available online. • The Council has met monthly as required and representation/attendance has improved. <ul style="list-style-type: none"> ○ It has been identified that the Council would like to add an additional parent/family representative. ○ The Council is working with Carol Dixon to identify a parent and they hope to start them in January. • The priorities the Council is reviewing right now: <ul style="list-style-type: none"> ○ Working with the departments on enhancing services for families who have youth discharging from hospital and are having crisis/safety issues upon returning home. <ul style="list-style-type: none"> ▪ The anticipation is that this can be reported upon quarterly. ▪ Child Welfare has agreed to put together an informational brochure for families if they get referred to Child Welfare. ○ Reviewing the discharge policies for all the hospitals. • The Council is currently working on the Implementation Progress Report. <ul style="list-style-type: none"> ○ Candace asked that the IGT members review the report prior to her bringing the next report for IGT to review in February/March. 	

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			<ul style="list-style-type: none"> • Candace walked the IGT through the QMIA Quarterly Report <ul style="list-style-type: none"> ○ The report can be found on the YES website here: http://youthempowermentservices.idaho.gov/Project/ReportsandUpdates/tabid/3853/Default.aspx ○ The Table of Contents has been formatted as questions in an effort to make it easier to understand. • Candace stressed the importance of the IGT reviewing the report thoroughly. <ul style="list-style-type: none"> ○ Carol added that she could see the Family Engagement subcommittee dissecting and reviewing the report. ○ Vanessa added that the Clinical subcommittee could perhaps take on investigating the readmission numbers. • Candace added that for future agendas, more time should be given to the QMIA Quarterly report. • Jennifer asked if it would be possible that the IGT could take reports like the QMIA Quarterly and piece together the narrative. <ul style="list-style-type: none"> ○ Candace stated that that idea made sense. • Lael asked if there was a way to look at court involved kids in the numbers that are reported in order to determine if the majority of kids being reported upon are court involved kids. <ul style="list-style-type: none"> ○ Candace stated that we are working with IDJC to document and pursue exactly those sorts of questions. 	
5	Family Engagement Update	Carol Dixon	<ul style="list-style-type: none"> • Jennifer Griffis shared that a parent brought forth an issue after their child had a CANS coming out of residential treatment. <ul style="list-style-type: none"> ○ The concern arose that her son may not qualify for services because of how well he was doing with the services he was receiving. ○ The concerns then were in regards to communicating with parents about the CANS assessment because it is different than other assessments done and it is important to understand the perspective with which answers should be approached. 	

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			<ul style="list-style-type: none"> ○ Additionally, there needs to be training for providers in regards to the manner in which the questions are being asked, as it will impact how the questions are being answered. ○ Jennifer also shared that the CANS is not just a one-time event, it is a narrative, and because of that, there needs to be a conversation. There may be a need for two different appointments - one with the child and one without. Additionally, there may need to be an appointment to go back through the results, not just the score. As a result, there may need to be a second look given to reimbursement rates so that providers aren't just in a position to give the assessment and be done. <ul style="list-style-type: none"> ▪ As a result, there has been a request for parents and providers on how to answer and ask the questions. ▪ There has also been a request to make sure the reimbursement rates support the way in which the CANS should be delivered. ▪ Additionally, parents have requested that people from the different agencies take the CANS so they have some knowledge about what that experience is like because sharing one's story with someone you don't know is an intense experience. ○ Treena stated that the recommendations for training are so very timely as there are trainings coming up quickly in the next few months and more and more are to be scheduled. <ul style="list-style-type: none"> ▪ Pat added that our trainings do not cover all the issues mentioned by Jennifer, and that one idea is that perhaps these gaps could be discussed and addressed by Dr. Lyons when he presents the training. ○ Ross expressed concern that an independent assessor will do the CANS 50 and another provider will do the rest. Ross stated that we will need to look at the contract with the independent assessor and determine what is possible there. ○ Ross added that all of these things need to be 	

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			<p>addressed in all the provider trainings.</p> <ul style="list-style-type: none"> ○ Ross added that he would like Jennifer and the Parent Network to be involved in the CANS training for the DBH staff. ○ Jennifer stated that one of the things that may be able to be used as a safety net are the proxy indicators, but we don't want to have to do that. ○ Jennifer added that many of the issues may not be known until we are actually working through them. ○ Lynn added that, as part of the CANS pilot, the clinicians are hungry to know how to ask the questions the right way. ○ Vanessa added there may be a need for flexibility in the appointments in order to tailor it to each family. ○ Connie stated that there needs to be ways to bill, as an assessment is a flat fee whether it takes two hours or ten hours, and Dave S. added that from a business perspective, it's a loss every time. ● Family Engagement also began discussing Person Centered Planning, and that it will be a process. <ul style="list-style-type: none"> ○ A parent had put together a draft workbook that could potentially be utilized in a pilot going forward. ○ Similarly, they discussed the Wraparound process and creating a potential workbook for that. ○ Vanessa stated that just having one workbook would be beneficial. <ul style="list-style-type: none"> ▪ Carol asked if it would be more intimidating to receive one large thick workbook or slimmer volumes as you progress through the system. ● Carol shared that the FREDLA organization is looking for members to do a presentation on collecting parent data, and the Federation of Families sent a parent name to them as someone to contact. This parent has been involved and the proposal she has been working on with two others has been accepted. 	
6	Ombudsman Proposal Update	Jennifer Griffis	<ul style="list-style-type: none"> ● Jennifer shared that the parents who had put together this proposal, after receiving feedback from the agencies and departments, have proposed that parents can be involved 	

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			<p>in assisting with these calls and analyzing trends, with a review after six months.</p> <ul style="list-style-type: none"> • A phone line will go live in January that will take complaints, concerns, etc. • This proposal pilot project is now being discussed by agency leadership. • Matt McCarter expressed concern that the term ombudsman is misleading and Jennifer agreed that the proposal has morphed behind the term placed upon it. 	
7	Additional Items	Dave Sorensen	<ul style="list-style-type: none"> • The Provider Network has requested to have a copy of the Practice Manual as soon as possible. <ul style="list-style-type: none"> ○ Treena explained that what is being published in January is the Guide to the YES Project that will discuss the system as it is now. ○ Final version of that draft is now going under review and will be submitted to the IGT very soon. ○ Publication will happen post January 1. ○ The actual Practice Manual will be published in April. • Ross suggested that the last ten minutes of the IGT be spent discussing public sharable information agreed upon to be shared. <ul style="list-style-type: none"> ○ Carol shared that explaining what is confidential and what is not as the meeting progresses would be extremely helpful. 	Ross suggested that the last ten minutes of the IGT be spent discussing public sharable information agreed upon to be shared.

The IGT will track action items and their status from the meetings here:

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
Provide feedback/thoughts on the operational guidelines to Rhonda (Mindy)	11/3	Rhonda			
Treena will follow up to determine whether or not Lynn has availability to chair the clinical subcommittee. Dave will follow up with Connie to determine her availability to lead the clinical subcommittee.	10/6	Treena/ Dave	October 20 th	Treena provided an update in regards to the Clinical Subcommittee regarding the staffing and leadership. The resulting concern was that DBH staff do not have the bandwidth and capacity to lead, but to support the subcommittee.	Resolved

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Kim will complete the request form for the IGT to create a long-term project regarding transportation reimbursement, addressing the request to the QMIA Council.	10/6	Kim	October 20 th	Kim has completed the request form, it needs to be submitted to the QMIA Council. Kim will submit it to Mindy and Mindy will submit it to the QMIA Council.	Resolved
George will follow up with reimbursement response for the family in need.	10/6	George	October 13	George will work with Venecia, Tiffany, and Jamie to reach out to the family and determine rapid solution.	Ongoing
George (Medicaid) will provide an update on Medicaid paid travel for treatment.	10/6	George	November Meeting		Ongoing
The IGT Training Subcommittee will determine a method of identifying parent knowledge share post conference attendance.	10/6	Candace	November Meeting	Jennifer added that it will also be important to determine what employees are doing with the information they are returning with as well.	
Candace will coordinate, schedule, and temporarily chair the training subcommittee and will report back at the next IGT meeting with a statement of purpose.	10/6	Candace	November meeting		
Holly Riker (Candace) will follow up with Eric Walton to determine times for availability to attend IGT meetings.	10/6	Holly (Candace)	November meeting	Holly reached out to Eric, and his schedule will be changing soon, so he may be able to return to the IGT.	Resolved - Family Engagement is handling recruitment
Candace, Kim, and Rhonda will form an operational workgroup to outline requirements for an operational governance plan.	9/1	Candace	October meeting	Completed	Closed
Identify additional parties needing the 101 brochures.	9/1	Pat/Brenda	Deferred	Additional information is being gathered regarding who will cover the cost of brochures being utilized by Optum.	On Hold
The forms for the nominations and the compensation submission need to be formalized	9/1	Mindy/Treena	October	The request form will be mailed out for the group to consider.	In progress
Membership list will be updated and appointment/renewal letters sent.	9/1	Mindy Oldenkamp	October meeting	Completed. Letters of appointment/reappointment were mailed this week.	Closed
Be prepared to nominate co-chair and vote to confirm	9/1	All membership	October meeting	Completed.	Closed

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Revise Family Engagement Charter Update		Carol		Ready for review.	Closed.
Update Membership list on Charter	8/4/17	Treena Clark			Closed
Identify new person for communications workgroup to represent providers. Dave has someone in mind.	8/4/17	Dave and Brenda		In progress.	
Maria will share her notes with Mindy.	7/7/17	Mindy Oldenkamp	7/14/17	Mindy will follow up with Maria for her notes.	Closed.
A charter subcommittee will be formed. Treena, Carol, Maria, Candace, and Pat will participate. Treena will take the lead.	7/7/17	Treena Clark	8/4/17	Maria, Carol, Pat and Treena met on 7/26 to work on charter. Charter is ready to go to full IGT for review.	Closed
Pat will work with Brenda to identify where to ship a small supply of the 101 guides in order to ensure that they are in the hands of parents who need them.	7/7/17	Pat Martelle		The 101 brochures has been distributed, and an additional printing will be done in October.	Closed
Pat will set up the room, conference call and Carol will take care of the agenda for the next Family Engagement meeting.	7/7/17	Pat Martelle	8/4/17	Family Engagement set to meet before IGT on 8/4/17	Closed
Feedback on the Family Engagement Subcommittee Charter document will be collected at the next meeting so a vote may be taken.	7/7/17	IGT	8/4/17	Reminder sent out on 8/1/17	Closed
Ross requested a current list of appointment membership including who the proposed members will be for submission to the director. Mindy will prepare documents.	4/7/17	Mindy Oldenkamp	5/5/17	Completed on 5/5/17	Closed
Vanessa will write up a short proposal and meet with Ross.	3/3/17	Vanessa Morgan		Recommendation e-mail sent to Ross on 3/13/17	Closed
Carol will schedule a conference all in the next few weeks. The next Family Engagement Subcommittee face to face meeting will be just before the	3/3/17	Carol Dixon	4/7/17		Closed

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next IGT meeting on April 7 th .					
Pat will reach out to Logan Zuck to confirm his membership/attendance with IGT.	2/3/17	Pat Martelle		Pat has twice reached out to Logan without response. Federation of Families will follow up with Logan	Closed
Have a brief presentation of what QMIA is by Candace or another member.	1/6/17	Candace Falsetti	2/3/17	Presented at February meeting	Closed
A list of acronyms to disburse to the IGT.	1/6/17	Pat Martelle	Not Set	There was a list contained in the booklet created for the parent network and Pat can share them. A list of acronyms is available for Health and Welfare. Pat will send the list to Vanessa, Jen, and Carol for review.	Closed
Outline of process for recommendations and process for output from IGT. Pat offered up that a diagram of a proposed hierarchy has been previously shared, and that if it can be created visually, that can be done.	1/6/17	Pat Martelle	Not Set	Kim is working on the outline format. Form submitted and has been used twice.	Closed
Meeting times via conference call for members of the IGT divided by category: system, parent/advocates, education, providers, will be set up in the next two weeks. Candace will coordinate the scheduling.	1/6/17	Candace Falsetti	Not Set	Parent/youth call complete. Group met with Nate on February 2, 2017	Closed
Request to have Candace Falsetti from QMIA Council attend the next IGT meeting and share what's happening in regards to current issues as well as request any help that she may need going forward.	12/9/16	Treena Clark	1/6/17	Candace attended the January meeting of the IGT	Closed
Language will be added to the by-laws concerning transparency (in the confidentiality section) and Section A will be amended to include "But will not be limited to" in regard to membership definition.	12/9/16	Treena Clark	1/6/17	Language added. By-laws adopted	Closed
Pat will meet with designated representatives to talk through specific events mentioned in the Parent Voice Proposal and seek solutions.	11/4/16	Pat Martelle	Not Set	Meeting occurred.	Closed

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
Pat will share the Parent Voice Proposal to the sponsor group for further discussion. Vanessa will join discussion as a parent voice.	11/4/16	Pat Martelle	Next Sponsor's Meeting	Pat will set up a conference call with Jennifer, Vanessa, Carol, and Kim.	Closed
Send out links to foundational articles and videos to IGT membership	10/7/16	Pat Martelle	Prior to 11/4/2016	<p>Here are some articles that are useful in understanding the new system of care:</p> <p>https://successfulmentalhealthsystems.wikispaces.com/file/view/Family-Driven%20Care%20Brochure_March%202011.pdf/215725492/Family-Driven%20Care%20Brochure_March%202011.pdf</p> <p>https://successfulmentalhealthsystems.wikispaces.com/file/view/SOC_Update_2010%20Stroul%20Blau%20Friedman.pdf/215725064/SOC_Update_2010%20Stroul%20Blau%20Friedman.pdf</p> <p>Links sent 11/3/16.</p>	Closed.
Revise look of website to indicate clearly that updates are available YES Updates on the website to indicate more clearly that folks can click on the icon	10/7/16	Pat Martelle	TBD	<p>10/15/2016 Parent Network Meeting held at IDHW. There was much discussion on revisions to the YES website. Many of the recommendations for improvement are outside the capability of what IDHW can do due to security and department format issues. Lack of resources and a full time YES communications staff adds to the difficulty. Pat will work with Jon Meyer to determine what can be done and establish a plan for making changes.</p> <p>"Click here" button has been updated for easier usability.</p> <p>5/2/17 Enhanced website will be launched April 27, 2017</p>	Closed
Treena will work with Vanessa and Dave to begin work on bylaws.	10/7/16	Treena Clark	Prior to 11/4/2016	<p>10/7/2016 Example of R7 Behavioral Health Bylaws and links to Idaho Behavioral Health Planning Council and R4 Behavioral Health by-laws sent to Vanessa and Dave</p> <p>Draft bylaws produced</p>	Closed
Ross will construct talking points to provide the IGT in regards to his	10/7/16	Treena Clark	Prior to 11/4/2016	Talking points added to minutes	Closed

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
update.					
Pat will make available the list of all workgroups and their deliverables.	9/9/16	Pat Martelle	Prior to October 7, 2016	Emailed 10/3/16	Closed
Nominations for chair and co-chair to be submitted via email, decision made at next meeting on October 7 th .	9/9/16	Membership	Prior to October 7, 2016	10/7/16 Membership established duties and terms. Chair and Vice-Chair elected 10/3/16 Need decisions on duties, term, nomination process and election process.	Closed
Disburse the Idaho Implementation Plan to membership.	7/26/16	Pat Martelle	9/2/2016	Emailed 9/2/16	Closed
Develop materials for membership's orientation to the Plan, workgroups, and subcommittees, including an explanation of defendant roles and identification of other subject-matter experts whose input the IGT may want to access.	7/26/16	Pat Martelle	9/2/2016	Emailed 9/2/16	Closed
Request if Jon can create a link for the IGT on website.	7/26/16	Pat Martelle	9/2/2016	10/7/16 Committee and workgroup pages are being developed for the YES Website. Goal is to have each workgroup or committee site complete with a: <ul style="list-style-type: none"> • Shortened version of the charter in the center area • A link to the full charter on the right • A link to the calendar that will hold all meetings for all workgroups (all meetings that I have received have been posted to the calendar, but many do not have any detail at all, dates and times only) • A List of workgroup members (with no roles indicated for now) • Any official meeting docs (agendas, minutes, etc.) We can launch without these if needed. Webpages for IGT, Clinical Advisory Workgroup and Workforce Development Workgroup should be launched by end of October 7/26/16	Closed

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
				<p>Modifications to the website have been requested and are scheduled in the month of September.</p> <p>Communications person will start on Monday, November 7th, request has been submitted.</p> <p>5/2/17 Enhanced website will launched April 27th, 2017</p>	
Make a decision on who will be the main point of contact for parent crisis during discharge.	5/5/2017	Candace Falsetti	Not Set		
Set up an outside meeting to discuss funding for the Parent Network. Will contact Treena.	5/5/2017	Carol Dixon	Prior to June IGT meeting	Conference call held on May 23, 2017. Present were Carol Dixon, Jennifer Griffiths, Laura Wallace, Pat Martelle and Treena Clark.	Closed
Bring all of the organizational charts to the next meeting. Will meet with Cindy to get this information.	5/5/2017	Treena Clark	6/2/17	Cindy will gather information and present at June IGT meeting	Closed
Share with IGT the one-page document on YES created for JFAC	6/2/17	Cindy Day	7/7/17		Closed
Add IGT subcommittees to the YES Org Chart	6/2/17	Cindy Day	Not Set		
Follow up with Access Model Report cited as a deliverable in the Implementation Progress Report	6/2/17	Cindy Day	7/7/17		Closed
Find out if access model diagram is available	6/2/17	Cindy Day/Ross Edmunds	7/7/17		