

<b>Date / Time of Meeting</b>	March 2, 2018 10:00 AM - 12:00 PM Dial in: <a href="tel:866-906-9888">866-906-9888</a> Access code: 7258371 Conference Room: 3A
<b>Meeting Purpose</b>	Interagency Governance Team
<b>Host</b>	Treena Clark, Division of Behavioral Health

Voting Members	Att'd	Participant	Att'd
Ross Edmunds - DBH		Cindy Day - DBH	X
Candace Falsetti - DBH	X	David Welsh - Medicaid	X
Carol Dixon - Advocate	X	Holly Riker - DBH	X
Connie Sturdavant - Provider		Lynn Thull - Consultant	
Dave Sorensen - Provider	X	Gina Westcott	X
Eric Walton - Youth		Rhonda House - DBH	X
George Gutierrez - Medicaid	X	Seth Schreiber - DBH	X
Jason Stone - IDJC	X	Tiffany Kinzler - Medicaid	
Jennifer Griffis - Parent	X	Treena Clark - DBH	X
Kim Hokanson - Parent	X	Valorie Leirmann - DBH	X
Lael Hansen - County Juvenile Justice	X	Venecia Anderson - Medicaid	X
Lynn Thompson - DBH/CMH		Snodgrass - Youth	X
Maria McConnell - Advocate	X	Brady Nixon - Optum	X
Matt McCarter - State Dept. of Ed	X	Sara Stith - SDE	x
Matt Wimmer - Medicaid	X		
Michelle Weir - FACS			
Roxanne Printz - FACS	X		
Vanessa Morgan - Parent	X		

**AGENDA**

#	Time	Length	Topic	Topic Owner	Discussion	Decisions
1	10:00 a.m.	5 min	Welcome and Roll Call Approve minutes from last meeting	Dave Sorensen		Notes were accepted as written.
2	10:05 a.m.	5 min	Future Meeting Planning/Longer Meeting Schedule	Dave Sorensen Kim Hokanson	Today's agenda is very full. This lends itself to the need for having longer meetings. Proposal to have a six hour meeting next month on April 6 <sup>th</sup> . Family Engagement will start at 9:00 a.m. and then IGT will meet	Extended meeting will occur on April 6 <sup>th</sup> .

**Idaho Children's Mental Health Reform: Interagency  
Governance Team Meeting Minutes - Approved**

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					for the following five hours. Additionally, the IGT will move to have an extended meeting every quarter, starting with the April 6 <sup>th</sup> meeting.	
3	10:10 a.m.	5 min	Finalization of Operational Guidelines	Rhonda House	Rhonda presented an updated copy of the Operational Guidelines and shared that members of other meetings would like to know more about what the IGT does and why it's important. Candace suggested adding Implementation Progress and/or Implementation Progress Report to number 3 on the Operational Guidelines. Kim clarified that it is addressed in number 4. YES Leadership Team needs to be removed from number 3.	Pending the mentioned changes, the Operational Guidelines have been accepted.
4	10:15 a.m.	5 min	YES Leadership Team Update	Jennifer Griffis	Jennifer shared that since the last IGT meeting the idea of the YES Leadership team has been disbanded. Part of the intention of the YES Leadership team had been to coordinate the management of team resources, and Jennifer didn't want to eliminate the possibility of those relationships. Vanessa added that it was not the intent to nullify the idea of the YES Leadership team, especially in reference to management and resources. There was a suggestion to put that group as a type of subcommittee of the IGT. Jennifer suggested that it could perhaps be an agenda item at the extended IGT meeting in April.	The YES Leadership Team will remain an agenda item for next month's meeting.
5	10:20 a.m.	10 min	SDE Budgetary Request Update: Prevention Programming Funds	Matt McCarter	Matt McCarter shared a high-level budget summary handout, walking through the various programs. If any further information is needed, please inquire. If work is being done with a district and additional services and information are wanted at a district level, it is worth having a conversation at a local, district level,	Dr. Silva will address specific education budgetary concerns at the April meeting.

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					<p>because they have discernment over what happens to funds.</p> <p>Carol asked what percentage of schools have the Safe Schools programming, and Matt stated that there are currently about 47 schools with the plan to implement approximately 15 more in the next year. There are 739 schools total, this program being appropriate for secondary schools, of which there are approximately 250.</p>	
6	10:30 a.m.	15 min	Workforce Development Plan Update	Gina Westcott	<p>Gina shared the current work being done by the Workforce Development Plan via PowerPoint. The Plan was published about a year ago and now part two is the current focus.</p> <p>Goal 1 - Work is being done with Boise State to get an idea of gaps and needs priorities. The Workforce Development workgroup is continuing to meet, and the next goal is to tackle some core competencies that are required for our system.</p> <p>Goal 2 - Trainings have been developed and implemented, and a phase two training plan has been developed through July. There is a lot of information to be gathered and analyzed.</p> <p>Goal 3 - Centers on looking at the family as a workforce itself. A Family Education and Training survey is in the midst of completion to target what families really want to know more about, how they’d like to receive it, etc. The plan is not just ad hoc educational opportunities.</p> <p>Goal 4 - Centers on workforce capacity analysis and the work being done with BSU.</p> <p>Goal 5 - Centers on the quality management of the system and measuring how the workforce and training plan is effective and having a positive impact on families. As training has been provided, Valorie has been collecting information on training</p>	

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					benefits and feedback. A series of coaching and technical assistance calls have also been implemented. The next six months will focus on the completion of the Workforce Development and Training Plans Part II. The plan in its entirety is available online.	
7	10:45 a.m.	10 min	YES Training Plan	Valorie Liermann-Mello	Valorie walked through the Training Plan PowerPoint, explaining and defining the stakeholders as priority groups and sharing the trainings that have been identified. The training approach has been broken down into three phases for implementation. Phase One has been completed and was the pilot stage. We are currently in Phase Two, Operational. The current training schedule is available online. Phase Three is focused on sustainment of the trainings. Carol clarified that not everyone has access to SharePoint, and Valorie clarified that it will be regularly provided at this meeting, and it has also been sent out to attendees. Matt M. asked about the possibility of offering CEU's for any of the trainings being provided. Valorie shared that in order to be able to offer CEU's, there must be 1/3 of the attendees who are DHW staff, but certificates are being offered that attendees can take elsewhere for credit. Matt suggested reaching out to NNU. Treena suggested this be a great discussion for the training subcommittee.	
8	10:55 a.m.	10 min	Medicaid Service Implementation Timeline	Dave Welsh	Tiffany was not able to attend, so Dave W. shared the timeline and the efforts being made to meet the settlement timeline requirements and feedback received. Vanessa asked if Intensive Care Coordination was Wraparound, and Venecia	The Medicaid Implementation Timeline handout can be shared - Mindy will provide a version with DRAFT on it (subject to change).

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					<p>stated that there was still conversations to be had around defining services. Candace added that Wraparound was different. Matt M. asked for clarification on the difference between respite and crisis respite, and Venecia shared that there are many different schools of thought on those differences. Vanessa shared that respite, when her child is stable, is babysitting, and is typically scheduled. Dave added that respite is to avoid crisis (Vanessa added this is typically in home), and crisis respite is to resolve a crisis (Vanessa added that this is typically out of home).</p> <p>Dave S. asked if there is a discussion about staffing for these services, and Venecia and Brady answered that that work is ongoing, and more information should be available in April. Dave S. asked if certain CBRS certifications would still be required moving forward, and Dave W. answered that it was his understanding that those certification requirements would remain. Dave S. added that that workforce has been dramatically reduced over the past few years and that there are concerns about bolstering that workforce to meet needs.</p> <p>Kim asked if the services listed are those that are going to be Medicaid services, and Venecia stated that yes, they will be, and that they weren't all previously.</p> <p>Carol asked about training that would occur, and Brady shared that they are currently looking at ways to bring in evidence based trainings and enhance specific services. Candace suggested that this be a topic for the training subcommittee. Dave S. asked for representation from Optum (Medicaid) for training on the subcommittee. Candace added that part of what the QMIA report</p>	<p>Jennifer would like to broaden the discussion at the next meeting to include those above the waiver at the next meeting.</p>

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					points out is where the gaps are located, and should be used to help identify which evidence based practices on which to focus. Vanessa asked which, if any, of these would be added to the 1915i - George stated that as it is being filed right now, it only includes respite and PCP, and it is being refiled to allow for respite outside of the home. Venecia added that there is currently no plan to add anything else to 1925i this year, and next year is still under conversation.	
9	11:05 a.m.	10 min	Potential Case Management Model - Proposal and Feedback Request	Dave Welsh	<p>Case Management services are currently being provided under plan today, and there has been a lot of conversations about how to approach a solution that will work for YES.</p> <p>One of the potential options is to find an outside source to provide case management, perhaps finding a national provider to do so. Candace added that by statute, the Division of Behavioral Health has a responsibility to continue services, and Dave W. agreed that part of the challenge is working with all the services being offered by different entities. Dave S. added that it would be very good to have a longer discussion about this issue, as there are entities in Idaho who would be able to provide this service, and Dave W. added that conversation is very important because there has to be some separation of services. George clarified that there wasn't a national agency being targeted, but rather that it would be opened up for anyone. Venecia asked if it would be helpful if a bullet point handout would be created for review and feedback.</p>	A bullet point outline will be created for further future discussion and feedback (David Welsh) and discussed at a future meeting.
10	11:15 a.m.	25 min	Implementation Progress Report	Candace Falsetti	The Implementation Progress Report is the formal report that goes to the court to report how things are going. Candace requested any feedback the IGT had to	Please send any additional input to Candace via email. The target is for the report to be submitted by March

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					<p>share.</p> <p>Candace shared that the YES Leadership Team had been removed from the draft. Vanessa added that she felt a challenge that should be included is having decision makers show up at the table to make decisions and requests, though progress has been made. Kim added that she felt like the IGT members are very engaged in the subcommittees.</p> <p>Candace clarified that the annual report that the IGT will produce isn't a report to the court, and that if there was something specific that the IGT wanted to communicate to the court directly, this would be the opportunity to do so.</p> <p>Treena added that this report may not reflect some of the things that have happened in the last few months as the timeline for it ends prior to publishing.</p> <p>Vanessa stated that she felt like it was a challenge to get the right people to the table to make decisions and move forward.</p> <p>Matt M. asked if there was anything specific that was a hang up from SDE or the other agencies specifically, and Vanessa responded that there wasn't a specific example, as early on it was that there wasn't always a consistent representative, but more consistent representation has been occurring from all the representatives.</p> <p>Candace agreed that there should be very specific concerns called out, not generalities.</p> <p>Carol expressed that the concern would be the various agency presence would remain consistent.</p> <p>Vanessa asked as the project progresses if the right decision makers will continue to attend the IGT, especially once the Implementation Workgroup ends (after the</p>	31 <sup>st</sup> .

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					lawsuit ends and the sustainment period is over). In regards to the report, Jennifer asked if it would make sense in the Due Process section it would make sense to include the connection made with the parents. Candace stated that yes, that can be added.	
11	11:40 a.m.	10 min	Family Engagement Subcommittee	Carol Dixon	Carol shared that Gina provided the Workforce Development presentation at the Family Engagement subcommittee.	
12	11:50 a.m.	5 min	Other Items Clinical and Training Subcommittee Update	Dave Sorensen	<p>There are 14 people identified thus far to attend the Clinical and Training subcommittee. The first meeting will occur today at 1:00 p.m. The intent is to get the meeting going and find someone to chair.</p> <p>Maria provided a quick update about the Liberty contract. The question was asked if Liberty would be determining class member eligibility, and yes, Liberty will be doing so. There was also a question about the time that would be spent with the client, and this is a larger question, that is not necessarily fully addressed in the contract.</p> <p>Matt M. asked who the parent consultants were for DBH, and Treena shared that a presentation could be provided at a future meeting to provide that information.</p> <p>Matt M. shared that within SDE there had been some training done wherein they included common information needed by all, and that as a group, the IGT has the wide view to be able to identify</p>	Further discussion will occur on the Liberty contract at the April meeting.
13	11:55 a.m.	2 min	Topic Confidentiality Review	Dave Sorensen		Anything regarding Medicaid Case Management is to remain confidential at this point in time.
14	11:57 a.m.	3 min	Action Item Review	Treena Clark		



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15	12:00 p.m.	--	Conclusion and Dismissal	Dave Sorensen		

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

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
Add IGT Request Form section to notes to track progress on IGT Requests	2/2/18	Mindy	3/2/18	Mindy created a simple tracker.	Completed
Report on Medicaid's communication plan regarding the new Medicaid eligibility and potential premium costs	2/2/18	George	3/2/18		Ongoing
Candace will discuss the Provider Subcommittee moving to the IGT with the QMIA Council.	1/5/18	Candace	Next QMIA Council Mtg	Discussion has occurred and the QMIA would like to see the subcommittee's charter prior to making a decision.	Ongoing
Venecia will work on a document that can be shared with the providers outline the service grouping and the tentative date ranges	1/5/18	Venecia	February Meeting	This item came from a formal request from the provider community, but nothing has been received to date. (2.2.18) 2/2/18—Follow up action is a response to an IGT Request and will be moved to that tracking log.	Completed
George (Medicaid) will provide an update on Medicaid paid travel for treatment.	10/6	George	November Meeting	There is a new transportation (MTM - Medical Transportation Management) broker going live on Tuesday, March 6 <sup>th</sup> .	Ongoing