

Date / Time of Meeting	December 9, 2016 9:00 AM–3:00 PM Dial in: Access code:
Meeting Purpose	Interagency Governance Team
Host	Treena Clark, Division of Behavioral Health

Participant	Att'd	Participant	Att'd
Carol Dixon - Advocate	X	Ross Edmunds - Behavioral Health	X
Charlie Silva - St Dept. of Ed.	X	Pat Martelle - Project	X
Connie Sturdavant - Provider	X	Lynn Thompson - DHW/CMH	X
Dave Sorenson - Provider	X	Marcy Chadwell - DJC	
Jennifer Griffis - Parent	X	Matt Wimmer - Medicaid	X
Kim Hokanson - Parent	X	Miren Unsworth - FACS	X
Lael Hansen - Juvenile Justice	X	Vanessa Morgan - Parent	X
Eric Walton - Class Member	X	Logan Zuck - Class Member	
Treena Clark - DHW support	X	Maria McConnell - Advocate	X
Candace Falsetti - DHW QMIA	x	Cindy Day -DHW	X
Tracey Hocevar	X		

MINUTES

#	Topic	Topic Owner	Discussion	Decisions
1	Welcome and Roll Call	Dave Sorensen		
2	9:15 Presentation and Discussion - Dr. Israel <ul style="list-style-type: none"> System of Care (SOC) WRAPAROUND Transformational Collaborative Outcomes 	Dr. Israel		

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	Management (TCOM) <ul style="list-style-type: none"> How have other areas incorporated parent voice at every level? 			
3	11:00 Idaho CANS	Dr. Israel and Seth Schreiber	<p>Presentation from Seth Schreiber: CANS tool is in progress; CMH CANS tool is complete and online along with the scoring tool. This, as well as the manual, can be found on YES.Idaho.gov. the link to the CANS website can be found there. Remember anyone delivering the CANS must have been trained and certified. The algorithm has been developed to help determine eligibility and is the mechanism by which the CANS can help make the decision. The CANS is non-diagnostic, but does contain scoring thresholds that help determine class membership. The ICC and Class Membership algorithms have been tested and discussed with Dr. Israel. Status looks good so far and there are no major concerns. Overall the algorithms are getting close and are doing what they need to do; they are currently in the process of being further refined prior to being shared out. The next step will be to validate them on a larger test cycle. The CANS offers more complexity than just a simple checklist. The CANS very quickly becomes a tool that helps us learn from the data quickly and help us determine proper adjustments that may need to be made based on incoming data. It is fully expected that the algorithm will need modification within the relatively near future as the system grows and provides information. Screening tool is a subset of the CMH CANS items, and certification to complete the screening is not required. The screening process has not yet been finalized, but the idea is that, as an example, a family may be experiencing breakdowns on a regular basis, and the school may notice it. The school then could provide the basic screening checklist and help guide the family to a provider. (This is the part that needs to be worked out a bit further so that the connection from checklist to help is smooth.) Ideally, it would work where the family completes the checklist and then goes perhaps to their pediatrician, the pediatrician could complete the screening to provide whether or not the child would</p>	Contact Seth Schreiber with potential people who may want to participate: Seth Schreiber (208) 334-5727 Seth.Schreiber@dhw.idaho.gov

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			<p>qualify as a class member or not and where they would need to go to next.</p> <p>In regards to eligibility, the criteria is set, but when it comes to the use of CANS as a treatment tool, it will be an ongoing update; consider it like a living document that will be reviewed by the CFT. For example, when a pediatrician/provider completes the initial screening, then the full CANS would be completed as the assessment. The services then would be based on needs, not solely on the diagnosis and it would open the opportunity for ensuring the CFT was involved and considering the needs. The CANS really creates the opportunity to look at what is happening, rather than just the why (diagnosis). Goal is to have this tool spread to all the agencies and providers. Integration will be required between the various agencies.</p> <p>Approval has been given to pursue a sole source with Chapin Hall as integrating all the various agency systems will require something very robust. Going with Chapin Hall helps lessen the gap because it would be designed by the people who designed the tool. Pursuing a sole source without a request for proposal requires more steps and a high level of scrutiny. The decision to go for a sole source was based on results of other states going with outside companies and not seeing the results they were hoping for. It is a multi-million dollar expense to implement and sustain over time. After final review, the next step will be to draft the contract, with implementation goal of January of 2018.</p> <p>Evidence suggests that following the CANS recommendations provides better help than deviating from it. For example, if the CFT chooses something alternate than the CANS, it may result in care more intense than the child needed, and statistically, children don’t do well in that sort of scenario.</p> <p>The system won’t point to things we don’t have, but ultimately, it may help us identify areas in which we are lacking.</p> <p>The scope of the contract is still being defined, and things like training determinations will be areas where the workgroup input will be much needed. Additionally, the workgroup will be important in helping determine who should be receiving information. There will be much need for the input of the workgroup, likely beginning in January. Seth requested that if workgroup members know of others who may be interested in participating in not just this workgroup but others as well, to please share the opportunity with them and let Seth know.</p>	

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			<p>Seth is looking for additional parents to participate to ensure complete representation. Additionally, he would like young adults/youth participation as well. Participation by those outside of the Boise area would involve video conferencing, web-based communications, and occasional in-person meetings as well. Vanessa stated she would be able to help bring new members onboard</p> <p>Cindy Day is leading the charge with the communication plan and you may see information coming from her as well as requests for feedback in regards to what needs you may have for communication.</p> <p>Seth’s contact information is: Seth Schreiber (208) 334-5727 Seth.Schreiber@dhw.idaho.gov</p>	
4	12:00 Break, begin working lunch			
5	12:15 Review Minutes from last meeting	Dave Sorensen	Meeting minutes accepted as written.	Meeting minutes accepted as written.
6	Discuss By-laws draft, length of membership term	Dave Sorensen	<p>Thank you to Treena for typing up the by-laws. Vanessa had a question regarding term of membership for this team. Original letter stated membership was for a year, but there is no written rule establishing membership. Suggestion to look at other entities to compare membership timelines. Vanessa made the motion that terms are a minimum of a year, and Eric seconded the motion. Discussion centered on the number of meetings that may happen in a year, and the minimum is for the IGT to meet quarterly; concerns then arose that that would not be enough time for people to get up to speed and/or understand the information being handled. Dave suggested that the minimum term could be a year but that membership of two years is encouraged. Vanessa amended the motion to state that term membership be a minimum of one year with membership encouraged to be two years or longer. Motion carried and will be added to the by-</p>	<p>Term membership motioned to be a minimum of one year with membership encouraged to be two years or longer. Motion carried and will be added to the by-laws.</p> <p>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</p>

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			<p>laws.</p> <p>The discussion of transparency arose with the goal of avoiding subcommittees and sub-discussions. Vanessa suggested adding this language to the confidentiality section.</p> <p>Membership to the IGT must be appointed. However, the IGT could account for a provision in the by-laws wherein new members or interests could communicate up to the authorizing appointing entity of this group any nominations deemed appropriate after IGT group review.</p> <p>In section A, will include “but will not be limited to” in regards to the membership.</p> <p>Dave discussed the possibility of having a provider come on his behalf and mentioned that the ability for them to carry his vote on his behalf was written into the by-laws.</p> <p>Dave requested that further discussion/questions be submitted so it can be finalized at the next meeting as much as possible. He further stated that the by-laws will likely be a living document for at least the first year as the IGT develops.</p>	<p>limited to” in regard to membership definition. Further discussion/suggestions of the by-laws are to be submitted via email prior to the next meeting in order to finalize then as much as possible.</p>
7	Update on Wrap training with Portland State	Pat Martelle	<p>Work has been ongoing for weeks with Portland State to finalize a contract. Portland State had difficulty with State of Idaho terms and conditions and the requirements therein. This is something outside of DH control, and the proper contacts with the Department of Purchasing for further negotiations were provided. Negotiations are at a bit of a standstill and at this point, DBH is working with Dr. Israel to address potential alternatives, such as University of Maryland. Further work on selecting the right model is being done so that the best training can be identified.</p>	
8	12:45 Update on Parent Voice Proposal, new models for parent involvement - possible task for a	Carol Dixon	<p>Carol deferred to Jennifer Griffis. Since last meeting there has been a lot going on in relation to parents and workgroups, and it has been very exciting and positive. The one caution that Jennifer has</p>	<p>The Family Engagement Subcommittee was formed. Carol will temporarily head it until further progress is</p>

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	subcommittee		<p>personally and that was echoed in the discussions with the attorneys, is that if you want sustainable parent/youth engagement, you have to engage parents/youth in the ways that work for them. In other words, it’s great if we have parents who are able to participate in the workgroups, but we need to always be looking for those parents who have stories to share that could help influence the system but who may not have the opportunity or means to participate in a specific workgroup. Jennifer suggested that there be consideration for parent voices to be heard via focus groups and ways for information that may be being shared in conversations to be brought to the project without it having to be through workgroups. Jennifer suggested that a solid list of workgroups and current and future projects, along with memberships, would be helpful for those interacting with parents so they could better understand where they could be plugged into. Vanessa suggested that there may be a benefit to have a subgroup centered on parent involvement. Pat mentioned that there are three subcommittees that the IGT is mandated to operate, one of which is to include a family focus. Cindy suggested that the subcommittees at this point would roll into the workgroup, and that additional folks could be plugged into that. Vanessa questioned who would be coordinating the parents and tracking the involvement. Trenea discussed the challenges of ensuring proper partnerships and onboarding. Maria agreed that the struggle is in determining the mechanism for ensuring this happens. Trenea further shared that the challenge is trying to figure it out as we go. Maria reiterated the need for even a skeleton outline of workgroups. Pat explained that an early document was shared, and discussion centered on ensuring the group understands that perfection is not expected, but that the desire is to just have the basic information. Dave asked if there was a parent network in Idaho connected electronically, and Carol shared there is one connected on Facebook. Jennifer stated that this is being done, sharing workgroup information with the network, and some powerful information was shared back to the workgroup. Carol stated the need is to expand this practice as well as the network. Connie stated that there is opportunity to engage parents that are being seen every day by providers at clinics - opportunities for one time engagement as well as ongoing input. Jennifer stated it’s about connecting the right parent with the right people at the right time, and that workgroups are a big commitment for a parent. Jennifer asked if there was a better way to</p>	<p>made. Other members stepping up are: Vanessa, Eric, Lael, Jennifer, Miren and Stephanie.</p>

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			<p>communicate with parents about work groups in particular without direct participation, i.e. a pool of parents participating with the workgroups supporting each other in a unique way.</p> <p>Eric asked the question of what the requirements for participation would be - i.e. could it be a sibling, relative, etc. and while the agreement articulates certain requirements be met, the advisory groups can outline parameters for inclusion of others as appropriate. In other words, the legal definition states we have to work with parent/guardians, but the IGT has it within its scope to make these agreements.</p> <p>Pat shared that the QMIA Council as identified in the agreement is up and running and has all the components as required by the agreement and that the QMIA Council will be the best place for concerns such as lack of parent involvement.</p> <p>Cindy stated she will be sending out an updated list of the workgroup, including the times/dates of meetings. The current document does not yet include the current memberships, and Cindy will work to remedy that.</p> <p>Vanessa proposed the formation of the Family Engagement subcommittee. Vanessa nominated Carol to serve on the committee and Dave seconded. Vanessa, Eric, Lael, Jennifer and Miren agreed to serve on the subcommittee. Stephanie will also serve. The subcommittee will focus on engaging the various stakeholders. The product goal from this subcommittee is recommendations on how to creatively involve parents and families. Carol will send an email out to get the subcommittee going until additional roles/terms are determined.</p> <p>There are two other subcommittees (clinical and training) that will need to be formed. Keep these in consideration for discussion at the next meeting.</p>	
9	1:10 Discussion of families currently in crisis or stepping down from residential treatment, what can be done now - possible	Vanessa or Pat?	QMIA Council is addressing this, but Vanessa suggested this may fall under the scope of the clinical subcommittee. Issue was discussed in length at the last meeting of the QMIA Council. Parent involvement on the QMIA Council is needed. Kim asked what it would look like if	Have Candace attend the next IGT meeting and share what's happening as well as request any help that she may need going

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	task for a subcommittee		regional members were to head up a subcommittee, and the video conferencing/phone conferencing would be available for meetings. Jennifer Griffis has a name of a parent for the QMIA Council. Vanessa requested to have Candace attend the next IGT meeting and share what's happening as well as request any help that she may need going forward.	forward.
10	1:35 Major takeaways from Dr. Israel and how they apply to the IGT	Dave Sorensen		
11	Discuss Charter	Treena	Deferred to next meeting	Deferred to next meeting
12	Discuss structure of minutes	I'm not sure who submitted this either.	Deferred to next meeting	Deferred to next meeting
13	Update on Action Items	Dave Sorensen	Next meeting January 6 th , 10:00 a.m. - noon.	Next meeting January 6 th , 10:00 a.m. - noon in conference room 3A.
14	2:00 Informal Q&A with Dr. Israel	Dave/Everyone	<p>Dave recommended NATCON as a great conference to attend for insights and information. https://www.thenationalcouncil.org/events-and-training/conference/</p> <p>Dr. Israel reminded everyone to focus their time and be conscious in determining where your effort would be spent and identifying the places where the group can actually have leverage. If possible, structure meetings in a way that this is always at the forefront. Priority to define what would a recommendation look like as an advisory from this committee and determining what the communication channel looks like that leads to action and how responses are to be received. Important as the IGT that all the agencies are actively engaged.</p> <p>Discussion on compensation and the level of detail required in the recommendation as well as how the process should work as well as where the recommendation goes and how responses are handled. Maria suggested that the issue be explored further in the Family</p>	

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			Engagement subcommittee and brought back to the IGT. Further, an update on the recommendation on the progress of the issue should be presented next meeting.	

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

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
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 	Communications person will start on Monday, November 7 th , request has been submitted.

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

Follow Up Items	Date Opened	Owner	Due Date	Complete/Comments	Status
				<p>only)</p> <ul style="list-style-type: none"> • 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. <p>Webpages for IGT, Clinical Advisory Workgroup and Workforce Development Workgroup should be launched by end of October</p> <p>7/26/16 Modifications to the website have been requested and are scheduled in the month of September.</p>	
Ross will construct talking points to provide the IGT in regards to his update.	10/7/16	Treena Clark	Prior to 11/4/2016	Talking points added to minutes	CLOSED
Treena will work with Vanessa and Dave to begin work on bylaws.	10/7/16	Treena Clark	Prior to 11/4/2016	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	CLOSED - Draft of bylaws has been produced.
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	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.	"Click here" button has been updated for easier usability.
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/2157254</p>	CLOSED. Links sent 11/3/16.

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				92/Family-Driven%20Care%20Brochure_March%202011.pdf https://successfulmentalhealthsystems.wikispaces.com/file/view/SOC_Update_2010%20Stroul%20Blau%20Friedman.pdf	
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		Pat will set up a conference call with Jennifer, Vanessa, Carol, and Kim.	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			
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				
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				