

Executive Committee Meeting Agenda

March 3, 2023 | 9:00-11:00 am

Zoom Meeting:

<https://us02web.zoom.us/j/85030501475?pwd=blUrNytWMncyNC85akJpZmdodlBHZz09>

9:00 **Opening Circle & Approval of February Minutes and March Agenda** (5 min)

Materials: February Minutes and March Agenda

9:05 **Business Updates** (15 min)

- 2023-2024 Co-Chair
- Family Coordinator position
- Youth mental health first aid trainers and training
- PCLG updates

9:20 **Finalize 2023 DRAFT Work Plan, Discuss Collaborative Capacity and Budget Amendments** (90 min)

Materials: 2023 DRAFT Work Plan, 2022 Work group proposals & 2023 Budget with potential amendment

- Review revised 2023 work plan with recommended changes and questions from Governance and Coordination Teams
- Review and discuss leveraging or adopting the 2022 workgroup proposals and recommendations
Discuss Collaborative Capacity and create plan to complete 2023 work plan
 1. Coordination Team
 2. Use of Governance Committee Meetings
- Discuss budget amendments and timelines to secure changes
- Recommend final work plan and budget to Governance Committee

10:50 **Partner Updates** (10 min)

11:00 **Adjourn**

2023 Work Priorities

Updated February 2023

Long-Term Goal	2023 Strategic Actions	Purpose	Action Steps	Lead/Support	Outputs & Outcomes
Improve responsiveness to and communications with families and children through increased access to information	1. Increase engagement of underrepresented families, with specific focus on BIPOC families, to inform change within the children's mental health system	Engage parents and families to ensure parent, caregiver and family needs are responded to and represented in policy and practice changes	<p>1.1. Each quarter PCLG will plan and offer a new <i>Let's Talk About It</i> session to parents and community partners. Parents and community partners will identify topics for discussion about children's mental health services</p> <p>1.2. Identify new community organizations and partnerships to improve communication and access to information about children's mental health services</p> <p>1.3. Attend community events and meetings led by BIPOC-led organizations and other key children's mental health organizations to learn about critical issues impacting children's mental health and gather parent input to inform practice and policy changes</p> <p>1.4. Create a process to discern when family challenges and issues raised are identified as having broader practice and policy implications</p> <p>1.5. Each quarter a list of policy and practice issues and concerns related to children's mental health services will be generated and shared through CMHC Governance and Executive Committees</p> <p>[Discuss how Collaborative can work with professionals to hear the impact of what parents are experiencing, what is their</p>	<p>1.1. Margaret</p> <p>1.2. Family coordinator, Margaret</p> <p>1.3. Family coordinator, Margaret, Coordinator</p> <p>1.4. Cheryl, Laura & new learning community group</p> <p>1.5. Coordination team & new learning community group</p>	<p>1.1. 150 diverse parents will participate in the training</p> <p>1.2. 20 new, or renewed, community partnerships will be established by Family Coordinator and Coordination Team</p> <p>1.3. CMHC will increase the diversity of community partners engaging in its meetings, events and decision-making</p> <p>1.4. Increased knowledge about policy and practice issues affecting access to CMH services</p>

			<p>capacity to evaluate and integrate family voice. Can the collaborative assist their efforts, if so, how?]</p> <p>[Discuss parent driven strategies learning collaborative proposal.]</p>		
2. Increase mental health literacy of adults working with and raising children and youth	Build knowledge and capacity of adults working with children and youth in non-clinical settings to support children's mental health wellbeing and mental health needs	<p>2.1. Identify and train adults to provide Youth Mental Health First Aid training to youth workers and adults working with youth in out-of-school time and community programs</p> <p>2.2. Provide Youth Mental Health First Aid training for adults working with children and youth in out-of-school time and community programs</p> <p>2.3. PCLG will offer Monthly Support Groups online to parents and caregivers</p> <p>2.4. Provide training resources to families and/or organizations working with children and families to increase knowledge and awareness of children's mental health needs and understand how mental health and trauma are reflected in behaviors</p> <p>[Consideration: Do we continue to expand training to schools in Q3 & Q4?]</p>	<p>2.1. Change Inc, Cati/Laura</p> <p>2.2. Change Inc, Cati/Laura</p> <p>2.3. Margaret, PCLG</p>	<p>2.1. Five diverse trainers will be available in Hennepin County to train adults in Youth Mental Health First Aid by end of Q1</p> <p>2.2. 450 diverse youth workers, staff and volunteers will be certified in Youth Mental Health First Aid by Q2 (in time for summer programming)</p> <p>2.3. 100 diverse parents and/or caregivers will participate in Support Groups</p> <p>2.4. Increase responsiveness of families and providers to meeting children's mental health needs</p>	
3. Increase access to mental health literacy for youth	Build knowledge and capacity of youth to support children and youth mental health and wellbeing	<p>3.1. Identify and train adults to provide Teen Mental Health First Aid training (or other agreed upon training) to youth in high schools across Hennepin County</p> <p>3.2. Train youth in Teen Mental Health First Aid training (or other agreed upon training) as a key resource in high schools across Hennepin County</p> <p>3.3. Create listening sessions for trained youth to share their experiences and needs with providers and decision-makers</p>	<p>3.1. Laura/Cati & youth serving orgs</p> <p>3.2. Laura/Cati & youth serving orgs</p> <p>3.3. Laura, Cati and Family Coordinator</p>	<p>3.4. Five diverse trainers will be available in Hennepin County to train adults in Youth Mental Health First Aid by end of Q3</p> <p>3.5. X diverse youth will be certified in Teen Mental Health First Aid by Q4</p> <p>3.6. Five policy and practice decisions will be identified for improvement</p>	

	<p>4. Increase awareness of families, caregivers, and youth on how to access children's mental health services</p>	<p>Families, caregivers, and youth will know how to access children's mental health services and know why to access CMHC</p>	<p>4.1. Update CMHC website to include outward facing information and resources on how and where to access children's mental health services and better reflect PCLG work and resources</p> <p>4.2. Share information with community partners, youth workers, parents, and youth to increase knowledge and access to information</p> <p>4.3. Create process to update web-based information twice annually and implement process</p> <p>4.4. Create a work plan to expand navigational support for families and caregivers, building off 2022 work group recommendations, e.g. secure funding and identify key partners</p>	<p>4.1. Laura/Stella, Change Inc, YMHFA Trainers, PCLG</p> <p>4.2. Stella/Laura/Cati</p> <p>4.3. Stella/Laura/Cati, committee (YMHFA and Change Inc)</p>	<p>4.1. CMHC website will be updated with a resource page before Q3</p> <p>4.2. E-newsletters and information will be shared with expanded and diverse community partners</p> <p>4.3. Community partners will know how to update information on children's mental health services</p> <p>4.4. Clear path to expanding navigational services to families in Hennepin County</p>
<p>Improve coordination of and access to children's mental health services</p>	<p>1. Improve access to trauma-informed youth mental health services for youth engaged in or directly impacted by gun violence and other violent behaviors impacting children and youth, e.g. increased sexual violence (see student survey data)</p>	<p>Increase trauma-informed mental health resources to youth and families directly impacted by gun violence</p>	<p>1.1 Identify organizations working directly with youth experiencing gun violence and provide resources to support their mental health services</p> <p>1.2 Provide funding to organization to support youth and families directly experiencing gun violence</p> <p>1.3 Create a process to discern practice and policy implications related to youth trauma-informed mental health and gun violence</p> <p>1.4 Convene organizational leaders working to improve trauma-informed youth mental health and reduce youth gun violence to address policy and practice issues</p> <p>[Consider adding creating a community response team to violence in schools and support children's mental health. Outline steps and resources to contact. To avoid each school or community organization from</p>	<p>1.1. CHIP, Laura</p> <p>1.2. CHIP, Laura</p> <p>1.3. Cheryl, Laura, Coordination Team, & new learning community group</p> <p>1.4. Laura, Coordination Team, & new learning community group</p> <p>Safe Communities (youth programming and revitalization)</p> <p>Hennepin Health Next Step Program (youth and families experiencing gun</p>	<p>1.5. A resource list will be created with organizations focused on youth gun violence prevention and mental health – and added to CMHC website</p> <p>1.6. 20-50 diverse youth will receive additional information about youth mental health and learn how to access services and supports</p> <p>1.7. 3-5 policy and practice issues will be identified for change</p>

			<p>recreating this on their own. Identifying immediate mental health needs and ongoing mental health needs and strategies to address them.]</p> <p>[Consider adding DOCCR goals and activities]</p>	<p>violence) & support groups.</p>	
2.	<p>Connect youth and families to needed children's mental health services and supports</p>	<p>Help connect youth and families to needed children's mental health services and supports to best meet their needs</p>	<p>2.1. Connect and refer community partners with CMH services and programs</p> <p>2.2. Track navigational support to families seeking early childhood mental health services through the two HUB pilots (Bloomington Public Health and Hen Co Libraries) and identify opportunities to improve ongoing mental health supports to families with young children</p> <p>2.3. Track navigational support to families seeking early childhood mental health services through the two HUB pilots (Bloomington Public Health and Hen Co Libraries) and identify opportunities to expand access to families across Hennepin County</p> <p>2.4. Explore opportunities to expand professional peer support specialists and navigators to across Hennepin County</p> <p>2.5. PCLG will offer WRAP training to parents and caregivers</p> <p>[NOTE: Follow up with Amanda Varley, MDE, regarding data collection/story telling]</p>	<p>2.1. Family coordinator & PCLG Coordinator</p> <p>2.2. Laura, CMHC partners, HUB partners & Coordination Team</p> <p>2.3. Laura, CMHC partners, HUB partners & Coordination Team</p> <p>2.4. Coordination Team & CMHC partners</p> <p>2.5. Margaret, PCLG, and family coordinator</p>	<p>2.1. Identify 5 new diverse community partners will engage with CMHC, PCLG and other partner activities</p> <p>2.2. Create list of barriers that make it challenging for families to access services with their young children to address through expansion</p> <p>2.3. A list will be created outlining resources needed for new opportunities to expand navigational services to families with young children through HUB partnerships</p> <p>2.4. A list of new opportunities will be shared with Governance Committee quarterly</p> <p>2.5. 30 parents and/or caregivers will participate in WRAP training</p>
3.	<p>Gather information about and manage access and coordination issues through collective action</p>	<p>Convene stakeholders to address key barriers and challenges in children's mental health services and identify solutions</p>	<p>3.1. Convene BIPOC-led or focused Children's Mental Health providers to identify barriers and needs to improve coordination and access to CMH services</p> <p>3.2. Convene county agencies and community partners to respond to the identified barriers and needs of BIPOC</p>	<p>3.1. Family Coordinator, Coordination team</p> <p>3.2. Coordinator, family coordinator, county teams/ reps</p> <p>3.3. Coordinator, Family coordinator,</p>	<p>3.1. 8 community meetings will be led each quarter to elicit barriers and needs</p> <p>3.2. 3 county meetings will be led each quarter to respond to barriers and needs</p>

			<p>providers and families to increase access for BIPOC families</p> <p>3.3. Convene community stakeholders to increase knowledge and capacity to respond to the identified barriers and needs of BIPOC providers and families to increase access for BIPOC families</p>	<p>Collaborative partners</p>	<p>3.3. 1 community stakeholder meetings will be led each quarter to respond to barriers and needs</p>
<p>Increase data-driven decision making to improve the children's mental health service system</p>	<p>1. in partnership with the Hennepin County, explore conducting an assessment of system values or key implementation issues</p>	<p>Have system implementation data to inform changes identified throughout calendar year</p>	<p>1.1. Create county and community partner group to outline assessment goals, objectives and timeline</p>	<p>1.1. Cheryl, Hennepin County team, & coordination team</p>	<p>1.1. A project plan will be established</p>
	<p>2. Data Dashboard</p>	<p>Share data on children's mental health with partners and use data to track change</p>	<p>2.1. Update website with new data 2.2. Explore opportunities to create specific data for Family Service Collaboratives as requested</p>	<p>2.1. Cheryl, Laura/Stella 2.2. Cheryl & Coordination team</p>	
	<p>3. Evaluate the work of the Children's Mental Health Collaborative</p>	<p>Track results and impact of collaboratives projects and work</p>	<p>3.1. Conduct evaluation of Collaborative Activities 3.2. Prepare 2023 Annual Report to communicate work of Collaborative and partners</p>	<p>1.1. Cheryl & Coordination Team 1.2. Cheryl & Coordination Team</p>	

2023 Preliminary Budget

	CMHC	District 287	DOCCR	Total
Income				
LCTS 2023 Beginning Balance	\$ 75,076	\$ 191,000	\$ 75,006	\$ 341,082
LCTS 2022 Projected Earnings	\$ 216,276	\$ 193,000	\$ 174,000	\$ 583,276
SAMSHA/Hennepin County Grant	\$ 126,200	\$ -	\$ -	\$ 126,200
Projected Carryover from 2022	\$ 70,000	\$ -	\$ -	\$ 70,000
Subtotal	\$ 487,552	\$ 384,000	\$ 249,006	\$ 1,120,558
Leveraged Funds	\$ 80,000	\$ -	\$ 290,000	\$ 370,000
In-Kind	\$ 20,000			
Total	\$ 587,552	\$ 384,000	\$ 539,006	\$ 1,510,558
Expenses				
Staff/Contracted Staff				
LaCroix-Dalluhn Consulting (Coordination and engagement programming)	\$ 80,000			\$ 80,000
Community Research Solutions	\$ 25,000			\$ 25,000
Margaret Sullivan	\$ 30,000			\$ 30,000
Open (Parent Engagement Coordinator, .75 FTE)	\$ 70,200			\$ 70,200
Community & Parent Engagement Programs				
Parent Catalyst Leadership Group (Stipends, Event Activities, etc)	\$ 27,000			\$ 27,000
Parent Engagment & Community Partners	\$ 50,000			\$ 50,000
Youth Engagment & Mental Health Well-being	\$ 30,000			\$ 30,000
DOCCR Youth Prevention Programs			\$ 290,000	\$ 290,000
Diploma On: District 287		\$ 162,116		\$ 162,116
Parent & Community Stipends	\$ 6,000	\$ -	\$ -	\$ 6,000
System of Care Pilots (as started in 2022)	\$ 100,000	\$ -	\$ -	\$ 100,000
Peer Support/Navigational Support Specialist				
Parent Driven Strategies				
Awareness & Public Education				
Other				
Resource packet to manage CMH/trauma services - and then how to support ongoing	\$ 15,000			
Training & Capacity Building				
CMHC Scholarships & Training	\$ 25,000			\$ 25,000
District 287 Training		\$ 19,437		\$ 19,437
General Operating				
General Support (Communications, supplies, etc)	\$ 15,000	\$ 8,447	\$ -	\$ 23,447
Fiscal Sponsor Fee (4.6%)	\$ 10,000	\$ -	\$ -	\$ 10,000
Subtotal	\$ 483,200	\$ 190,000	\$ 290,000	\$ 963,200
Total	\$ 104,352	\$ 194,000	\$ 249,006	\$ 547,358

Budget Notes:

- LCTS Funds are generated by Family Service Collaboratives, District 287 and DOCCR, and 5% of earnings are dedicated to the HCCMHC via agreement
The beginning balance is the projected carry over funds from 2022 (Use starting carry over in 2022 and reduce by expenses in 2022). New funds are generated each quarter in 2023.
- Leveraged funds for CMHC include matching funds in the Community Health Improvement Partnership (\$80,000) and in-kind (\$20,000) and Hennepin County for DOCCR programming
- All contracted staff support coordination and collaborative programming

Executive Committee Meeting Minutes

March 3, 2023

Opening Circle & Approval of February Minutes and March Agenda

- Jenna Mitchler moved to approve the February minutes, and Andria Blade seconded. Minutes approved.
- Tonya Allen motioned to approve the March agenda with a slight correction to the months, and Krista Phillips seconded. Agenda approved.

Business Updates

- 2023-2024 Co-Chair
 - Laura LaCroix-Dalluhn shared that Angela Watts agreed to Co-Chair the collaborative along with Pat Dale. We will announce this in the March newsletter and vote on it in the March governance meeting.
- Family Coordinator position
 - Second round interviews next week with Laura, Jocelyn, and Asad. We would also like a member of the Executive team also present at the interviews. The second round interviews are taking place March 6th at 2 pm and 3 pm, March 7th at 9:30 am, and March 10th at 3 pm. Andria said she was available on March 6th for both times, Pat said he could do March 7th, and Cheryl Holm-Hansen said she could do March 10th.
- Youth mental health first aid trainers and training
 - Laura shared that we are still on track to have 4-5 trainers trained and have identified other stakeholders who have been trained. Change Inc. will do all the coordination for the training. People who have done the training have shared that the training is heavily focused on facilitation but lighter on the youth mental health perspectives. We are discussing offering an additional trauma-informed youth mental health portion to go a little deeper before doing the training. We have also discussed giving a stipend to those who do the training and are not paid by their employers. We have two parents who have stepped forward, Maria Tripney and Danielle Tucker. When people are training, the goal is to have a parallel process of recruitment to get youth-serving organizations aware of the opportunity so we can get a jump start in send quarter. Laura suggested we turn our attention to school staff during quarters three and four and/or other community partners.
 - Krista asked how this training was offered, one day or two. Laura answered that it can be completed in one day or two and can be partially remote. Cheryl asked if we want to build in some evaluation of this training, Laura said she will bring Cheryl into one of the next meetings to discuss this further. Jenna added that in her work, chemical health has been a large concern and she loves the idea of connecting chemical and mental health. Tonya shared that one challenge of this training is they prefer to have a big session delivered all at once rather than over many days. Tonya will connect Laura with Brenna to discuss this further.

- PCLG updates
 - Margaret Sullivan shared that Let's Talk About It is heating up, one on School Avoidance on April 5th. Other ones that are coming up are American Indian Mental Wellness and Cultural Wellness, these will be hybrid events.
 - We have new members and more possible new members. Overall, what Margaret is hearing is that isolation is a big issue.

Finalize 2023 DRAFT Work Plan, Discuss Collaborative Capacity and Budget Amendments

- Review the revised 2023 work plan with recommended changes and questions from Governance and Coordination Teams, and Review and discuss leveraging or adopting the 2022 workgroup proposals and recommendations
 - Laura shared that the coordination team reviews the feedback from the governance committee and made updates. One of the questions we have on our first goal is how do we work with professionals to hear the impact of what parents are experiencing, how do we integrate family voice, and can the collaborative assist their efforts?
 - Cindy Slowiak shared that the workforce is so overwhelmed that it may not be best to utilize them as the access point. Margaret shared she is hearing the same things from parents. Cheryl shared she feels that a lot of what parents are asking for does not increase workload. Cindy suggested having a panel of parents talk to a group of our case managers about their experiences. Laura asked how providers are currently doing this and if the strategies we are discussing feel helpful or if are they already doing this. Pat shared that there are some systems in place that are doing really well in engaging parents and that part of this is threading the needle, and asked if there is there anything that helps organizations check themselves against the standard of responding to parent voices. Cheryl said that are processes that evaluate it. Cindy asked if there was a way we could start with one group, like case management, and pilot this. Pat shared that we really just need to be supportive, he feels people feel heard when they get what they want, we cannot always do that but we need to do everything we can to be responsive to parents' needs. Krista shared that she is reflecting on three years ago when we invited providers and introduced system of care to them, and we had a lot of engagement, and wonders if this is an opportunity to do this again for the children's mental health community at large and take a deep dive in a way for organizations to look at themselves and see how they can grow in parents responsiveness.
 - Laura asked for feedback on which strategy we have the capacity to do and if there is a preference, Cindy shared she would love to do both but she is unsure of what we would need to do it at a large scale. Pat shared that at a minimum we should share parent feedback that we already have with providers and organizations. Margaret suggested sharing quick

videos with direct quotes from parents with providers so it has more of an emotional impact. Pat shared that he feels we should bring this to the governance committee to discuss what our capacity is and what our priorities should be. Laura shared that she feels it would be feasible to do the convening again, we would just need to identify a speaker, and possibly do a kickoff and pilot it with case managers. This would include updating the community on system of care, focusing on parent engagement and parent voice, and starting pilots with integrating parent voice.

- Laura moved on to another goal, increasing access to mental health literacy for youth, and shared that was a conversation about not doing this because of capacity and wanted to discuss if we still think this is a priority. Krista shared that she feels we may not have the capacity, especially if we cannot get the information soon. Laura said we could know pretty quickly if we could do this from our youth-serving organizations. Laura will do some research on the long-term costs of supporting this work and what we would need to do this, then we will decide if it is still a priority.
- Laura then discussed expanding navigational support for parents, our journey mapping showed that families need this, we will update our website with more navigational support and we will make a plan on how will we expand it. Pat asked if we knew where we would get funding for this, Laura shared there are a number of bills out there to increase support for families and she feels there will be future funding we can tap into and we will likely want to contract with a community partner to do this. The new family coordinator may also aid in navigational support.
- Laura then brought up Cheryl's idea, the possibility of creating a community response team for violence in schools. Cheryl shared that there are a lot of resources out there and this would focus on building on those resources and it would be a comprehensive plan on how to address the mental health needs of students and staff long-term. Krista asked for clarification, would this be similar to a toolkit or actual staff that go out and address the crisis? Cheryl answered that hopefully, it would be both. Cindy shared she feels this is a really good idea, and suggested we talk with natural disaster helo teams for help with some of the planning, Laura suggested connecting with the safe communities team, and Cindy said she will reach out to the director.
- Discuss budget amendments and timelines to secure changes
 - Laura shared that we will need to do a budget revision, we had expenses in 2022 that have not been sent out, and we will also need to make some changes because of the SAMHSA grant. Laura will work with NAMI to understand how much we are bringing over from 2022. We will have to shift around the parent engagement and community partners funding, and if we do the direct teen mental health first aid we will have to shift the youth engagement and mental health well-being funds. We have put aside peer support/navigational support funding that we can now clarify. So there is a number of places we need to amend, Laura is

wondering when we think we will hear back from SAMHSA about the year two grant. Cindy said she will likely know more during summer. Laura asked Cindy how we write the parent engagement and community partners funding. Cindy said they should meet separately and discuss this. Laura asked what changes would the executive committee like to know about the budget going forward. Pat said the continuing conversation and talking about budget considerations and staying up to date is good.

- Recommend final work plan and budget to Governance Committee
 - We will bring this plan forward for the governance committee and talk about responsiveness to parent voice.

Adjournment

- Krista moved to adjourn, and Andia seconded. Meeting adjourned.