

Washington System of Care Statewide FYSVRT

Date: July 25, 2024 **Time:** 3 p.m. – 5 p.m.

Approximately 57 attendees representing the following: Carelon, Comagine Health, A Common Voice/Center of Parent Excellence, Department of Children Youth and Families, Department of Health, Great Rivers Administrative Services Organization, Great Rivers Regional FYSVRT, Family Alliance, Greater Columbia Administrative Services Organization, Health Care Authority (Division of Behavioral Health and Recovery, Office of Community Voices and Empowerment), Health Management Associates, Martin Hall Juvenile Detention, North Sound Administrative Services Organization, North Sound Youth and Family Coalition, Northeast FYSVRT, Office of Superintendent of Public Instruction, Passages Family Support, PAVE (Partnerships for Action Voices of Empowerment), Salish Behavioral Health Administrative Services Organization, Salish Regional FYSVRT, Southwest Regional FYSVRT, Spokane County Behavioral Health Administrative Services Organization, Statewide Family Network, Students Providing and Receiving Knowledge, United Healthcare, University of Connecticut, Wellpoint (formerly Amerigroup) plus community members.

Facilitators – Statewide FYSVRT Tri-leads - Michelle Karnath (Family), Gabriel Hamilton (Youth), and Katie Favela (System Partner) **Timekeeper** – Tri-Lead Team **Notes** – Amanda/Kris

Agenda Item & Lead(s)	Discussion and Notes	Action items	Assigned to	By when
<p>Welcome and introductions</p> <p>Statewide FYSVRT Tri-Leads</p> <p>3:00 – 3:05</p>	<p>Shared land acknowledgment.</p> <p>Brief Zoom meeting guidelines (mute when not talking, raise hand or put questions in the chat).</p> <p>Attendees introduced themselves through the chat and by phone and identified their role, agency, organization and/or Regional FYSVRT they were representing.</p> <p>Reviewed Full Value Agreement.</p> <p>HCA and the Statewide FYSVRT Tri-leads will not be recording this meeting to be respectful of confidentiality as identified in the Full Value Agreement.</p>	<p>n/a</p>	<p>n/a</p>	<p>n/a</p>
<p>Youth and Young Adult Continuum of Care communication including overview and purpose of Regional FYSVRTs and Governance Structure</p> <p>Statewide FYSVRT Tri-leads</p> <p>3:05 – 4:00</p>	<p>Topic Purpose – Standing agenda item to share information about the Youth and Young Adult Continuum of Care Subgroup meetings and activities, plus time to connect about the purpose of the FYSVRTs, the Governance Structure and process for moving recurring needs or gaps forward.</p> <p>The Statewide FYSVRT Tri-lead team dedicates time on every agenda to provide updates regarding topics moved forward by the Statewide FYSVRT to legislative groups, specifically the Youth and Young Adult Continuum of Care (YYACC - a subgroup of the Children and Youth Behavioral Health Work Group or CYBHWG).</p> <p>YYACC Communication</p> <p>In the Youth and Young Adult Continuum of Care meetings there were presentations about autism spectrum services, the PALs line (Pediatric Assistance Line), and the Department of Health Youth Advisory Council priorities. The next meeting is August 6 and the group will start working to identify priorities to share with the larger Children and Youth Behavioral Health Work Group: possible topics include, conversation about juvenile rehabilitation, recovery high schools, Narcan training for youth and the closure of Sacred Heart which will affect the number of inpatient beds available.</p>	<p>For questions or additional information about the YYACC, please reach out to Michelle Karnath at Michelle.Karnath@clark.wa.gov</p> <p>If you are interested in being part of a short-term work group to update the FYSVRT FAQ, reach out to</p>	<p>Those interested</p>	<p>anytime</p>

Statewide FYSVRT Goals

1. Improving quality of life for youth and families by reviewing statewide performance and making recommendations through collaborative engagement of youth, families and system partners.
2. To support system improvements by enhancing strengths and eliciting challenges and barriers from the Regional FYSVRTs and state partners and develop collective recommendations to share with Statewide FYSVRT members, Regional FYSVRTs and/or the Youth and Young Adult Continuum of Care Subgroup that include youth, family, and system partner voice.

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	<p>YYACC meetings are open. If you show up, you are a member and have a voice. Click here to request to be added to the YYACC distribution list. The YYACC is currently looking for parents, caregivers, youth and young adults to attend the meetings and share their voice in the process.</p> <p>Overview and purpose of the Regional FYSPRTs and Governance Structure Regional FYSPRTs provide a platform for dialogue and brainstorming within communities to address recurring needs, gaps or barriers regarding behavioral health services for youth and families. Families and youth with lived experience in behavioral health are full partners in the work as well as underrepresented and underserved communities and child and youth serving system partners such as mental health and substance use providers, juvenile rehabilitation, education, etc.</p> <p>FYSPRT FAQs were shared on screen with an invite to the group to participate in a short-term work group to update the document. An email will also be sent out with this invite.</p> <p>The diagram of the Child, Youth and Family Behavioral Health Governance Structure was shared on screen showing the connection between Regional FYSPRTs, the Statewide FYSPRT and the Youth and Young Adult Continuum of Care/Children and Youth Behavioral Health Work Group. If a recurring gap, need or barrier is identified at the Regional FYSPRT that the Regional FYSPRT is not able to resolve, it can be moved forward to the Statewide FYSPRT, using the Challenge and Solution Submission Form, to dialogue about the challenge across all regions. If the Statewide FYSPRT is not able to address the need, the Statewide FYSPRT will move it forward to the YYACC. Two needs have gone forward to the YYACC in the last 3 years – behavioral health respite and non-emergency medical transportation.</p> <p>The Challenge and Solution Submission Form was shared on screen and was briefly reviewed. Breakout groups were formed for participants to dialogue about the challenge and solution form and process and also to identify any suggestions for changes in the form or process. The following is a summary of the feedback:</p> <ul style="list-style-type: none"> • The form has a lot of text, no one reads the intro just goes straight to the form • An example of a completed form would be helpful. • What constitutes a need to fill out the form, what rises to that level • Instructions for the form • Can we see what topics have been submitted in the past • Make more family friendly • Purpose of collecting the information/data • More transparency during the challenge form process 	kristen.royal@hca.wa.gov		

Statewide FYSPRT Goals

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<p>Mobile Response and Stabilization Services (MRSS)</p> <p>Liz Venuto, Vashti Langford and Sarah Quinn</p> <p>4:00 – 4:15</p>	<p>Topic Purpose – Announcements about upcoming opportunities to learn more about the Mobile Response and Stabilization Services model and to participate in implementation and quality improvement efforts.</p> <p>In 2021, Health Care Authority partnered with national leaders in Mobile Response and Stabilization Services (MRSS) to present about this model and gather information from the Statewide FYSPRT. MRSS is intended to meet the needs of children, youth, young adults and their parents/caregivers, to de-escalate a crisis to prevent hospitalization and keep children and youth in their communities, and to ensure connection to necessary services and supports. MRSS helps create an easier access point for families to access services. Because the youth and family are the ones defining the crisis, it truly works on behalf of the family. As part of follow up for this topic in 2021, a survey was shared with the Statewide FYSPRT to gather information about their experiences with crisis response in Washington. The information gathered was used to write for a System of Care Grant to support the implementation of MRSS in Washington.</p> <p>Two webinars are coming up in August and September. Feel free to register for either or both of the webinars. More information and registration links below:</p> <p>August 27, 2024, 11 a.m. to noon – MRSS Design and Principles, click this link to register September 18, 2024, 11 a.m. to noon – MRSS Service Continuum, click this link to register</p> <p>In addition, a follow up survey is being created to gather updated information about crisis response in Washington in 2024 to see where things have improved since 2021 and also identify areas where improvements may still be needed. It is anticipated that this survey will be released in August, and it will be shared with the Statewide FYSPRT once available.</p>	<p>For additional information, please contact vashti.langford@hca.wa.gov</p>	<p>Anyone interested in finding out more</p>	<p>anytime</p>
<p>Youth only space updates</p> <p>Gabriel Hamilton</p> <p>4:15 – 4:25</p>	<p>Topic Purpose – Standing agenda item to share updates on WA Statewide Youth Network activities and youth only spaces</p> <p>The Statewide FYSPRT Tri-lead team dedicates time on every agenda to provide updates and information regarding topics and/or dialogue from the youth only space being facilitated by the Statewide FYSPRT Youth Tri-lead and also Statewide Youth Network activities. SPARK, the contractor for the Youth Network, is working on a kickoff event for September. Youth seem interested in the opportunity to do more to provide, and to support, spaces for youth and young adult peers. If you know of youth or youth peers who may be interested in being part of this process, feel free to connect them to Gabe to either participate in Youth Network development activities and/or for an individual conversation with a Youth Network representative around how they would feel comfortable engaging in this work and share ideas for the work.</p>	<p>For questions or additional information, please reach out to Gabriel Hamilton at Ghamilton@wayouth.us</p>	<p>Those interested</p>	<p>anytime</p>


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<p>WA Prenatal to 25 (P-25) Behavioral Health Strategic Plan</p> <p>Megan Beers, Hanna Traphagan, Diana Cockrell</p> <p>4:25 – 4:55</p>	<p>Topic Purpose – Share updates about the process for developing the Prenatal-25 behavioral health strategic plan, including plans for engaging with youth/young adults, parents/caregivers, and providers for input on the plan.</p> <p>The state of Washington is putting together a statewide strategic plan for children and youth behavioral health to be shared with policymakers. This is in response to the growing behavioral health crisis for pregnant individuals and children, youth and young adults from birth to age 25 and their families. The goal is to ensure that the strategic plan centers community voice and youth and parent/caregiver lived experiences. This work began in 2023 and should be completed by August 2025.</p> <p>The current focus is holding discussion groups in the summer and fall of 2024 to have robust community conversations and develop a strategic plan that is:</p> <ul style="list-style-type: none"> • informed by children, youth and families • where all doors lead to help • services are offered to meet everyone’s needs • services are equitable, anti-racist, and culturally and linguistically responsive • with flexibility to change in response to new information • that investments are made in prevention and well-being • and includes families and communities as key contributors to well-being <p>Discussion events are coming up in August through October and will include a combination of focus groups, community conversations with youth and families as well as individual and group interviews. The goal of these events is to get real time input from youth, young adults, parents and caregivers and members of the workforce. Focus of the dialogue will be to gather information about the current gaps in services and also talk about the proposed vision for behavioral health services as well as to deepen connection with partners across the state and build networks for ongoing community engagement.</p> <p>Tentative locations for these events include Central WA, Southwest WA, Spokane/Stevens, Walla Walla/Garfield, and Whatcom/Skagit counties.</p> <p>The name for this work is transitioning to Washington Thriving.</p>	<p>For more information, to get involved and/or to set up an event in your community, contact Megan Beers at mbeers@healthmanagement.com</p>	<p>Anyone interested</p>	<p>August</p>

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	 <p>Washington Thriving Developing a strategic plan for prenatal through age 25 behavioral health.</p> <p>The next parent caregiver meeting is 8/28 at 10am. Click this Zoom link to join the meeting. https://healthmanagement.zoom.us/j/97159908515?pwd=IkbovNi9X0aILIfHwYTOuvd6XN72qg.1&from=addon</p> <p>The next youth/young adult meeting is 8/28 at 4:00pm. Click this Zoom link to join the meeting. https://healthmanagement.zoom.us/j/92675536153?pwd=6h5gPObTdbTRNYL79KZWScmMoeEtK.1&from=addon</p> <p>This question was posed for dialogue during the meeting - If you had a magic wand and there was one thing you could change/add/do with the behavioral health system that would make a big difference, what would it be? Responses included:</p> <ul style="list-style-type: none"> • labeling and putting youth into groups, if you tell a kid they have anxiety it could develop it more and make it worse and they may try to live up to that anxiety and it could perpetuate it • reduce silos, for example find out who is working on respite? Who is working on parent support groups? Is there a data base to see who is offering these different kinds of things to reduce silos and build on or support what is already being done • evidence based programs seems like a box of services that have to be used – what about art therapy or equine therapy or things that aren't evidence based to meet people's unique needs, evidence based feels like a medical model approach. Instead, focus on holistic and family/youth focused. • trauma informed, strength based, and solution focused instead of always talking about what is wrong, there are amazing stories about amazing people that have overcome incredible odds • training to embrace creativity – instead of labeling and putting youth in different rooms – embrace it and work with them, create social opportunities like social groups and camps • more in home behavioral health services 			

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	<ul style="list-style-type: none"> Reduction or removal of barriers caused by type of insurance or lack of insurance and the patchwork system we have that creates these barriers. With the school system not disciplining our children now the parents have to be the bad guys, making the home no longer the child's safe place. The school system is raising our children with us. A lot of schools don't have before or after school programs which would help. And students should have more time to eat their meals. Driver's education in school would be cool. Social/emotional support groups for teens- in person and including life skills. <p>For more information, to get involved and/or to set up an event in your community, contact Megan Beers at mbeers@healthmanagement.com</p>			
Evaluations and meeting wrap-up Statewide FYSPRT Tri-Leads	<p>Meeting evaluation link provided in the chat for participants to provide feedback on the meeting including possible agenda items for future meetings.</p> <p>Meeting evaluation link will also be emailed out to the group after the meeting.</p>	Tri-leads to review and consider feedback in planning future meetings.	Tri-lead team	August 2024
Next Statewide FYSPRT Meeting				
Thursday September 26, 2024 3 p.m. - 5 p.m.				

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