

Washington System of Care Statewide FYSPRT

Date: September 26, 2024 **Time:** 3 p.m. – 5 p.m.

Approximately 47 attendees representing the following: Carelon, Department of Children Youth and Families, Family Alliance, Greater Columbia Administrative Services Organization, Health Care Authority (Division of Behavioral Health and Recovery), HI-FYVE (Family and Youth Voices for Empowerment), King County, King County Community Collaborative, Molina Healthcare, North Central WA FYSPRT, North Sound Administrative Services Organization, North Sound Youth and Family Coalition, Northeast FYSPRT, Office of Superintendent of Public Instruction, Passages Family Support, Salish Behavioral Health Administrative Services Organization, Salish Regional FYSPRT, Southwest Regional FYSPRT, Spokane County Behavioral Health Administrative Services Organization, Students Providing and Receiving Knowledge, United Healthcare, University of Connecticut, Wellpoint (formerly Amerigroup), Youth and Young Adult Continuum of Care Subgroup, plus community members.

Facilitators – Statewide FYSPRT 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
Welcome and introductions Statewide FYSPRT Tri-Leads	Shared land acknowledgment. Brief Zoom meeting guidelines (mute when not talking, raise hand or put questions in the chat). Attendees introduced themselves through the chat and by phone and identified their role, agency, organization and/or Regional FYSPRT they were representing. Reviewed Full Value Agreement. HCA and the Statewide FYSPRT Tri-leads will not be recording this meeting to be respectful of confidentiality as identified in the Full Value Agreement.	n/a	n/a	n/a
Youth only space updates Gabriel Hamilton	<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/information regarding topics and/or dialogue from youth only spaces. For today’s update, the Statewide FYSPRT Youth Tri-lead joined the meeting from a Kickoff event for the Statewide Behavioral Health Youth Network which is led and governed by young people. An intro to the room, attendees, set up and feedback boards was provided. Quentesa Garraway, Youth Liaison from the Health Care Authority provided a brief Youth Network introduction. During the kickoff event, participants worked through questions together, in person and virtually, specifically how we can continue to improve and evolve behavioral health care for young people and continue to create a sustainable youth peer workforce.</p> <p>For questions and/or additional information about the Youth Network or the Kickoff event, reach out to Gabriel Hamilton and others from the Youth Network team at yn@wayouth.us.</p>	Contract Gabriel Hamilton and others from the Youth Network team at yn@wayouth.us with questions or for more information.	Anyone interested	Anytime
Youth and Young Adult Continuum of Care Communication Michelle Karnath	<p>Topic Purpose – Standing agenda item to share information about the Youth and Young Adult Continuum of Care Subgroup meetings and activities.</p> <p>This is a standing agenda item to provide updates regarding topics moved forward by the Statewide FYSPRT to legislative groups such as the Youth and Young Adult Continuum of Care or YYACC (a subgroup of the Children and Youth Behavioral Health Work Group or CYBHWG) to keep the Statewide FYSPRT members in the loop and to share general priorities from the work of the YYACC.</p>	Contact Michelle Karnath at Michelle.Karnath@clark.wa.gov	Anyone interested	Anytime

Statewide FYSPRT 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 FYSPRTs and state partners and develop collective recommendations to share with Statewide FYSPRT members, Regional FYSPRTs and/or the Youth and Young Adult Continuum of Care Subgroup that include youth, family, and system partner voice.

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<p>Youth and Young Adult Continuum of Care Communication continued.</p>	<p>At the last YYACC meeting, priorities were discussed and a vote on what to move forward to the CYBHWG was completed. The YYACC identified 6 priorities – expanding access to peer support services, support expansion of recovery high schools, fund administration for CAPS (Centralized Assessment of Psychosis Services), expand the Bridge Housing Program, increase and sustain funding for Youth Wellness Zone, and supporting the autism spectrum and intellectual disability (ASD/IDD) workforce serving youth and young adults. Extending the timeline for House Bill 1580, related to supporting children who remain hospitalized unnecessarily due to barriers to discharge, is moving forward as a legacy item to the CYBHWG. Feedback shared that resources related to 1580 can sometimes be overwhelming for families and that care coordination pieces are missing but could be really helpful.</p> <p>The YYACC has several meetings coming up, Oct 10 and Nov 14 and Dec 12 – to follow up on some of the decisions and priorities. There is also a CYBHWG meeting on Oct 14 to share priorities from all of the subgroups with the CYBHWG. The CYBHWG will also have a voting process to identify priorities to move forward to the Governor’s Office.</p> <ul style="list-style-type: none"> • Everyone is welcome to attend these meetings • If you want to join the YYACC meetings, send an email to cybhwg@hca.wa.gov and ask to be added to the distribution list • The CYBHWG meetings are also open and can be attended as a member of the public with dedicated time at the end of the meeting to hear from the community <p>Clarification provided regarding who can come to a YYACC meeting and the focus of the work. YYACC encourages participation from young people and also interested in a broad perspective including families, system partners, community partners, etc. The focus of the YYACC is services for ages 13-25.</p>	<p>with questions or for more information.</p>		
<p>Challenge and Solution Submission Form follow up dialogue</p> <p>Statewide FYSVRT Tri-lead team</p>	<p>Topic Purpose – Follow up on the dialogue at the July meeting regarding the Challenge and Solution Submission Form and process.</p> <p>At the July Statewide FYSVRT meeting, an overview of the purpose of the Regional FYSVRT and the Governance Structure was completed (see July meeting notes for additional information). The Regional FYSVRTs are a platform for communities to address recurring needs, gaps or barriers related to children’s behavioral health within their community. And if unable to resolve the recurring need or gap within their community/region, they can move the information they have collected forward to the Statewide FYSVRT using the Challenge and Solution Submission Form.</p> <p>At the July meeting, breakout groups dialogued about the form and process and provided some thoughts and feedback (see July meeting notes for a summary of the feedback). The Statewide FYSVRT Tri-lead team proposed some draft edits to this form based on the feedback received and are bringing it back to this group for an update and/or possible additional feedback.</p> <p>For changes to the Challenge and Solution Submission Form, the Statewide FYSVRT Tri-lead team proposes:</p>	<p>Statewide FYSVRT Tri-lead team will email out a summary of proposed changes and the document in a few different formats to gather additional feedback.</p>	<p>Statewide FYSVRT Tri-lead team</p>	<p>Within a week of the meeting</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.
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<p>Challenge and Solution Submission Form follow up dialogue continued. .</p>	<ul style="list-style-type: none"> Renaming the form "Recurring gaps and needs form" or something similar Clarifying the FYSPRT connection to legislative groups and the intent for the form/process to inform policy and/or programs related child, youth and family behavioral health Clarifying the intent of the form - to share a recurring need or gap unable to be resolved by a Regional FYSPRT with the Statewide FYSPRT to address and/or to facilitate gathering information from other regions and system partners to get a bigger picture about the recurring need/gap and if it is happening statewide Adding examples of past recurring needs/gaps moved forward to the Statewide FYSPRT Removing language not specific to the form or process Adding clarification/instructions to the part of the form completed by the Regional FYSPRT Adding information about the Statewide FYSPRT Tri-leads next steps when receiving a form and how they will communicate back to the Statewide FYSPRT on progress <p>Breakout groups dialogued about the proposed changes. In general, feedback reflected liking the updated name, form and format of the form. Some identified that they had not used the form in the past and that the updates proposed provided more clarity.</p> <p>The Statewide Tri-lead team will email a summary of the proposed changes in a few different formats for review and any additional feedback.</p>			
<p>Mobile Response and Stabilization Services (MRSS) Part 2</p> <p>Liz Venuto, Vashti Langford and Sarah Quinn</p> <p>4:00 – 5:00</p>	<p>Topic Purpose – Part 2 of the topic that was introduced at the July meeting. Part 2 will focus on the vision for Mobile Response and Stabilization Services in WA and the current implementation status and dialogue around how MRSS should look as implementation moves forward.</p> <p>The Mobile Response and Stabilization Services (MRSS) team from the Health Care Authority (HCA) attended the meeting to share the vision for MRSS, share the current implementation status and hear feedback, thoughts and ideas about how MRSS should look as implementation moves forward.</p> <p>MRSS provides rapid, in person, 24/7 support for youth and families during a crisis and follow up for one to three days. If additional support is found to be medically necessary, a stabilization phase can provide additional support starting on day four and for up to eight weeks. Regional crisis lines connect callers to the crisis system, including MRSS teams. Multiple counties in WA have MRSS youth teams including Whatcom, Skagit, Kitsap, Thurston, Mason, Clark, Pierce, King, Chelan, Douglas, Grant, Yakima, Benton, Franklin, Garfield, Asotin and Spokane. MRSS may have different names in different communities – when calling ask for a mobile response team.</p> <p>The goal of MRSS is:</p> <ul style="list-style-type: none"> Parent/young people define the crisis Support and maintain youth in their current living environment, when possible Engage youth and families by providing access to care Promote safe behavior in home, school and the community Reduce use of emergency departments, inpatient units and detention centers 	<p>Contact Vashti Langford at vashti.langford@hca.wa.gov for questions, additional information and/or if you think of additional feedback around the implementation of MRSS.</p>	<p>Anyone with questions and/or interest in additional information</p>	<p>Anytime</p>

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	<ul style="list-style-type: none"> Assist families in linking with the community and clinical services <p>MRSS core principles are:</p> <ul style="list-style-type: none"> Safety Equity No wrong door Developmentally appropriate Trauma informed Culturally appropriate Peer support <p>Breakout groups were created to dialogue about the following questions:</p> <ul style="list-style-type: none"> In your experience (both lived and/or professional) what are the moments where MRSS could have had the most impact and change a story for the better for a young person and their family? How should this inform Washington’s MRSS implementation and rollout? <p>Compiled feedback from the breakout groups included: it would help to not retraumatize the family over and over (who sometimes have to tell their multiple times (usually a minimum of 3 times), more timely response 2 hours or less, youth and families feeling like more training on diversity and the autism/intellectual disabilities spectrum is needed, a database with specific strategies might work well for those who call multiple times, this a great alternative to calling the police/juvenile detention, having a different person in the home to deescalate a situation – for example “let’s go for a walk” to bring calm to the situation, 988 has added another layer of confusion and some families are still hearing that they just need to go to the hospital – need community education to get the information out there, and insurance barriers can be a problem.</p> <p>Appreciation to HCA and the Statewide FYSPRT for honoring system of care values and embedding youth and family voice into this service.</p>			
<p>Evaluations and meeting wrap-up</p> <p>Statewide FYSPRT Tri-Leads</p>	<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>	<p>Tri-leads to review and consider feedback in planning future meetings.</p>	<p>Tri-lead team</p>	<p>October 2024</p>
Next Statewide FYSPRT Meeting				
<p>Tuesday December 10, 2024 3 p.m. - 5 p.m.</p>				

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