**Goal of the Grant:** to improve behavioral health outcomes for children and youth (birth through age 21) who meet criteria for SED and their families and who have child welfare involvement. For this project, child welfare-involved families are those for whom a child abuse and/or neglect investigation results in a substantiation or services-needed finding.

**Purpose of the GMIT:** interagency team responsible for management of the grant, oversight of state and local implementation activities, and ongoing communication with the system of care governing bodies.

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| Attendees  |
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| Tammi Taylor, DBHDID | Kelly Dorman, DBHDID | Maxine Reid, DBHDID |
| Dee Dee Ward, DBHDID | Joy Varney, DBHDID | Sarah Andrus, DCBS |
| Serena Eldridge, CMHC (PC) | Susan Rudd, DCBS | Gretchen Roof, CMHC (FRBH) |
| Amanda Metcalf, KPFC | Katie Kirkland, UK HDI | Jennifer Polo, DCBS |
| William Owen, FRYSC | Jessica Ware, UK HDI | Jennifer Warren, DCBS |
| Melanie Rose, DCBS | Tameika Johnson, CMHC (PC) | Wendy Lay, CMHC (FRBH) |
| Barbara Greene, KPFC | Kayla Harmon, KPFC | Ashlee Brockwell, FRBH |
| Michael Daniel, CMHC (PC) | Janet Doyel, DCBS | Dyzz Cooper, KPFC |
| Sarah Trover, CMHC (FRBH) | Chris Sparks, CMHC (PC)  | Christine Bustamante, PACS |
| Brooke Kirk, CDW | Renee Buckingham, DCBS | Leah Fondaw, CMHC (FRBH) |
| Rachel Howard, CMHC (PC) | Jennifer Harrell, DCBS | Katy Mullins, DCBS |
| Kelly Bradshaw, DBHDID |  |  |

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| 1. **Introduction of SOC FIVE**
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| Dee Dee Ward presented an overview of SOC FIVE \*(slideshow previously shared in SOC FIVE Binders and will be sent out after the meeting today)* Goals/Objectives
* Regions
* Funding/NOFOs
* Awards/services
* Learning collaboratives
* SOC FIVE staff

RGMIT Members introduced themselves sharing their years of experience serving youth and families and what they can bring to the project.  |
| Action Items | Person Responsible | Deadline |
| Please let Tammi know if you need a SOC FIVE Binder.  | RGMIT Members | ASAP |

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| 1. Charter Review and Discussion/Grant Implementation Discussion
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| Charter was screen shared with the group and membership was reviewed.Family representative and transition age youth are still needed to represent* We really want to hear from our local families and youth
* Flyers will be sent out after the meeting, please share with potential family or youth representatives.
* Have experience with child welfare and mental health issues; please note that there is reimbursement for participants.
* An overview of the role, time commitment, skills etc. will be shared with the group to share with potential reps.
	+ This flyer can be shared at libraries, doctors’ offices and local businesses.

Can we think of any other potential members?* TAP- might be a good partner
* Erin Harper from the Pennyroyal Center was suggested- (she is on the listserv)
* CASA might be a good partner as well
	+ Although they primarily serve out of home clients, some judges will appoint CASA for in-home cases.
	+ CASA may offer a unique prevention perspective (Janet will reach out).
* HANDS program or health department
* Faith based groups interested in getting involved
* Independent living specialist
* Pregnancy Centers or Domestic Violence Centers may be helpful. Also, Sabrina Davis from PACS/Community Collaboration for Children may be helpful too.

No changes to the charter were suggested at today’s meeting. We will meet monthly; is there a better date and time? * 3rd Tuesday of the month (1:30 CST)

Barriers/Challenges Cohort 1: Maxine- Recruiting youth and families, staff shortages ongoing. Kelly- communication is key between CMHCs and DCBS. We understand how staff shortages impact the state.* Utilizing the peer support centers in your agencies or through KPFC increases allies and helps reduce stigma.
* Anyone can refer to peer support regardless of DCBS status.
* Not all of the information gets to the right people throughout agencies- think about the best ways to get information to the front-line staff.

DCBS Rollout* DCBS to start doing screeners on all in-home cases in January
* For roll out: plan to screen the ‘target’ child (unless all children are listed in the referral); eventually move to include all youth in the home, regardless of referral
* Discussed giving staff up to 60 days to complete in-home screener
* How we can utilize CANS as a part of treatment process
* Early childhood specialist does CANS for young children (CMHC’s stated they can start utilizing this process for newborns who screen in)
* Lizzie Minton, DCBS has CANS training scheduled for Dec. 8th or you can schedule a separate training for your staff. She also offers refresher CANS trainings, as well as overviews of the screening process and CANS in general. Please feel free to reach out!

Liaisons for DCBS:Susan Rudd (covers the nine Eastern counties)Jennifer Polo (cover the eight Western counties)Liaison for CMHCS:Wendy Lay- 4 Rivers Rachel Howard- Pennyroyal  |
| Action Items | Person Responsible | Deadline |
| Identify other CMHC liaisons (if needed) for the project and send that information to Tammi and Dee Dee  | CMHC RGMIT Members | 12/21/2021 |
| Janet D. will reach out to CASA contact | Janet | 12/21/2021 |
| Members will review RGMIT membership and share any potential members with Tammi | RGMIT Members | 12/21/2021 |

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| 1. UK HDI- Data Requirements/Overview
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| Jessica Ware shared data training preview and discussed the following: * Intervention Pathway- pathway from referrals to services
* CQI metrics (Continuous Quality Improvement)
* NOMs (National Outcome Measures)
* Upcoming data training opportunities
	+ Please email Jessica to schedule Data/NOMs training and HDI will schedule.
* SOC FIVE website walk through

Notes and resources can be found on the site; please reach out to Tammi or Jessica Ware to share local resources or information you would like to see added to the site. |
| Action Items | Person Responsible | Deadline |
| Reach out to Jessica Ware directly to schedule a NOMs or data training.  | RGMIT Members  | 11/30/21 |

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| 1. Barbara Greene & Kayla Harmon, KPFC (Peer Support Services)
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| Barb gave an overview of services offered through her staff and highlighted the importance of incorporating peer support to the project. Kayla described her role as a peer support specialist (support, advocate, listening ear for clients, nurturing parenting classes & smart recovery classes). * The KPFC Peer Support Referral form was shared in the chat and is also available on the SOC FIVE website linked below under ‘Peer Support Resources.’
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| Action Items | Person Responsible | Deadline |
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**NEXT MEETING**: **Dec 21 @ 1:30-2:30 CST p.m. ZOOM format**. **SOC Website**:

[Kentucky System of Care V – Improving Outcomes for Children, Youth, and Young Adults with Mental Health Challenges and their Families (hdiuky.net)](https://urldefense.proofpoint.com/v2/url?u=https-3A__socv.hdiuky.net_&d=DwMF-g&c=jvUANN7rYqzaQJvTqI-69lgi41yDEZ3CXTgIEaHlx7c&r=vvdmQRqAiuDcGaPiU7F_XLazHk28PX23BPOJTCMBmeg&m=fH4FapPknOPJXNWyToXVHIflnd3tAQ4AMBaUAshD2-U&s=1GgSvgR-o0dUEsMiwWTPb7MdQFGknVmua3SCSqCSlcY&e=)