# 1. Welcome and Attendees

**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 and for whom DCBS does not have custody. The population of focus also includes children and youth who have a planned reunification date within 60 days, as well as post adoptive families who are seeking behavioral health services for youth they have adopted.

**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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| --- | --- | --- | --- | --- | --- | --- | --- |
|  | Amanda Metcalf |  | Jenny Thornhill |  | Mary Carpenter |  | Jess Clouser |
|  | Barb Greene |  | Jessica Ware |  | Michelle Niehaus |  | Felicity Krueger |
|  | Chris Cordell |  | John Broadus |  | Maxine Reid |  | Ashley Peercy |
|  | Beth Jordan |  | Josh Swetnam |  | Melinda Vise |  | Natasha Ulrich |
|  | Carmilla Ratliff |  | Kenneth Fletcher |  | Micah Blevins |  | Ayanna Coates-Hendricks |
|  | Carol Cecil |  | Katie Kirkland |  | Michelle Sawyers |  | Jamie Tipton |
|  | Clarissa Allen |  | Katy Mullins |  | Randa Bush |  | Mallory Bateman |
|  | Dakota Simmons |  | Kelli Root |  | Sherri Staley |  | Amanda Body |
|  | David Lohr |  | Kelly Bradshaw |  | Tammi Taylor |  | Danielle Khoury |
|  | Dee Dee Ward |  | Kelly Dorman |  | Tracy DeSimone |  | Ruthie Sizemore |
|  | Dyzz Cooper |  | Leslie Hughes Burgess |  | Tevis Duncan |  | Shellie Mills |
|  | Jennifer Warren |  | Lizzie Minton |  | Vestena Robbins |  | Ciara Jackson |

= Present  = Absent

# Alternative Response, Ciara Jackson, DCBS

Ciara discussed the implementation of ‘Alternative Response’ (also known as differential response in other states) in child abuse and neglect cases. The alternative response pathway involves engaging families differently, targeting lower to moderate risk cases, and providing different types of services to families. Ciara discussed the implementation of an alternative response approach in child protection services, which involves scheduling visits at the convenience of the family, allowing them to identify their needs, and providing financial assistance for crisis situations.

* The initial implementation was set to begin in two regions in the fall, with the goal of becoming statewide by 2024.
* The group discussed the implementation of alternative response in their work, including training for frontline workers and partnering with youth advocates and integrating peer support into implementation.
* The team also talked about the differences between alternative response and traditional investigation, including timeframes and the hope to incorporate alternative response components into traditional investigation.

## Action Items

Task Description Person Responsible Deadline

Please share the information SGMIT ongoing

# DCBS Updates, Katy Mullins, DCBS

# Katy M. provided an update on the workforce situation at the cabinet, including the results of entrance and exit surveys, and the actions taken to address the issues raised. These actions included implementing a hybrid work model, increasing pay, improving the onboarding process, offering a shift premium, emphasizing self-care for staff, and developing a co-op/internship program.

# Various initiatives to improve communication and staff retention within DCBS include the implementation of regional forums, and radio advertising.

* Katy M. offered to send Dee Dee the latest turnover report on numbers related to current DCBS staffing.

# **Expanding in-home screeners (tentative August 1, 2023)**

# The team discussed the need for training and support for staff to ensure successful implementation of statewide screening and referral for CANS.

# The group discussed the development and improvement of the 402 report, preparing behavioral health providers for upcoming changes, finding liaisons between DCBS and providers, and scheduling a meeting to discuss expectations and preparations.

## Action Items

Task Description Person Responsible Deadline

Meet to discuss the screening, Beth. J, SOC FIVE staff, June 2023

and referral expansion Katy M.

# Quarterly Updates, Katie Kirkland, UK HDI

**Differences in CQI reported and System Data**

The group discussed differences in the reported counts of CANS referrals and completion counts from various systems and providers. They identified issues with data entry and HIPAA protections and discussed efforts to collect data from private providers.

* The group discussed the challenges of completing CANS assessments and referrals, and proposed solutions such as scheduling meetings with regional liaisons to review the process and implementing monthly meetings with CMHCs to discuss referrals and issues.
* They also acknowledged the need for a refresher training on the screener and referral process due to turnover in the workforce.
* Dee proposed the creation of a subcommittee to help determine who to reach first, what training is needed, and what to do next. The group discussed the possibility of getting help from HDI and having Deborah Collins provide insight on the process.

**Services and Intervention pathway through March 2023**

The team reviewed the CQI data and discussed recent changes to federal reporting requirements for the SOC FIVE grant. UK HDI presented analyzed monthly averages for referrals, assessments, and initial CANS assessments and compared them to the grant goals.

* Screening, Referral, Assessment and Baseline NOMs (monthly averages, January- March for all regions) were above the grant goal average.
* The DCBS data (referral numbers) is to all providers while Assessment and baseline NOMs data is only provided by SOC FIVE providers.
  + Team members wondered if it would be helpful to only include the referrals to SOC FIVE providers in the analysis.
  + Other members were curious about where other referrals were going; for example, in the Cumberland region 88 screeners were completed within the quarter, 18 screeners were referred and only 3 assessments were completed [that we know of based on data from SOC FIVE providers].

Due to time constraints, Dee Dee suggested holding off the KPFC Peer Support Center data presentation and the NOMs Disparity Dashboard Update until next meeting. She also showed a video about knowing your why to promote mental health awareness month.

## Action Items

Task Description Person Responsible Deadline

UK HDI will plan to present UK HDI staff June 2023

KPFC peer support data & NOMs

Disparity dashboard updated in June

**Next Meeting: June 9, 2023**, 10:00am – 12:00pmvia Zoom: [State GMIT Meeting](https://us02web.zoom.us/j/82154195143?pwd=anYrVjlJRXQ4ejgxaDRYeDFCQ0IrUT09)

**Reminder:** You can find notes for all GMIT meetings as well as the CQI Dashboards and Interactive Map on the SOC FIVE Website**:** [**https://socv.hdiuky.net/**](https://socv.hdiuky.net/)

Family & Youth Reps complete for meeting time reimbursement: [**https://www.surveymonkey.com/r/Attend\_Meeting**](https://www.surveymonkey.com/r/Attend_Meeting)