



Governance Committee Meeting Agenda

Wednesday, January 18, 2023, 3:00 – 4:30pm

<https://us02web.zoom.us/j/82646466799?pwd=Q2d2MnNvSDUvTUVMMSStQS0ZBRWozZz09>

- 3:00 pm **Welcome & Approval of Meeting Minutes & Agenda - Pat Dale**
(Meeting materials November 2022 Meeting Minutes, January 2023 Agenda)
Welcome. Approve minutes and agenda.
- 3:05 pm **Business Updates - - Pat Dale & Laura LaCroix-Dalluhn**
(Meeting materials: Current Governance Committee Members)
- Vote on Chair/Co-Chair
 - Financing Framework Vote/Governance
- 3:15 pm **Using Data to Inform Collaborative Priorities - Pat Dale & Cheryl Holm Hansen**
(Meeting materials: 2022 Collaborative Report and System of Care Framework)
- 2022 Collaborative Report & Overview of Collaborative Evaluation Results
 - Initial Overview of Student Survey Data
- 4:05 pm **Family Response and Stabilization Services - Pat Dale & Asad Dahir**
Presentation and discussion on how family response and stabilization services help respond to family needs
- 4:30 pm **Adjourn**

Mission Statement: *The CMHC provides a forum for a diverse and representative group of system stakeholders to influence the development and ongoing operation of an accessible and effective children's mental health service system within Hennepin County. The CMHC promotes innovative service development and continuous quality improvement in the children's mental health system by embracing the system of care principles and available research on children's mental health services.*

Contact CMHC Co-Coordinator, [Laura](#), with any questions



Governance Committee Meeting Minutes

November 16, 2022

In Attendance: Krista Phillips, Cindy Slowiak, Asad Dahir, Meredith Martinez, Cathy Rude, Maria Tripeny, Pat Dale, Monica Long, Brandon Jones, Andria Blade, Wendy Webster, Beth Lovre, Monick Castillo, Andria Dale

Staff: Laura LaCroix-Dalluhn, Cati Gómez, Margaret Sullivan, Cheryl Holm-Hanson

Welcome & Approval of Meeting Minutes & Agenda

Krista Phillips moved to approve October Minutes. Wendy Webster seconded. The motion passed unanimously.

Pat Dale stated we need to add a vote on the 2023 Meeting Calendar and to approve the two Collaborative representatives for the Financing Framework Meeting. Wendy Webster motioned to approve agenda as amended. Meredith Martinez seconded. The motion passed unanimously.

Debrief: Family Peer Support & Children's System of Care Training

Pat Dale stated the Collaborative heard from Paulette Mader, who shared strategies for engaging families and parents in their system of care work last month. The Collaborative has worked the past couple of years to increase engagement of families and this remains a priority based on findings from the journey mapping work. Pat stated today we'd like to hear from partners how the training with Paulette resonated with our overall goals of the Collaborative as well as your own organization. Cindy Slowiak agreed to start the discussion and share how Paulette's training resonates with Hennepin County Behavioral Health's system of care goals.

Cindy: A System of Care is more than listening to families and helping them navigate the system, but centralizing their presence and experience, and changing the systemic structure of mental health care. The Collaborative needs to be responsive to parents and better understand the system from the lens of BIPOC parents. We are the ones that need to change to be more responsive to the community. Cindy said she recommended we hear from Paulette to remind us that it more than just amplifying youth and family voices, but intentionally addressing their needs.

Pat: How do we build family/parent voice into the culture of what you are doing through the Collaborative? Are there strategies we should prioritize in 2023?

Margaret Sullivan: PCLG is working to offer training for parents and to create a system of care more reflective of our community and the children served by the services.

Meredith Martinez: Speaking as a parent and considering the presentation, it is very hard to know where to go for parenting resources even though I have knowledge about the system and child development. There are a lot of gaps in the system, we need to support the whole family and our current system of care does not use this approach.

Maria Tripeny: Maria said she wasn't expecting a lot from the presentation but was very touched by Paulette because she saw the parent's concerns as a family issue. It is more just asking parent about their opinion and hearing their voices but acting on their message and providing opportunities for parents, and families, to take action as well. She has been asking for Prairie Care to put parents in contact with other families, whenever she says she needs support providers don't know what to or how to support.

Monick Castillo: She's always been a single parent with two kids, one of them has a disability. It is so hard to do everything by yourself, she adjusted her entire life to accommodate her children. Having to both go to work and take care of her children is very difficult. She turned to a Facebook support group where she discovered that there are so many parents struggling with children mental health issues and trying to balance both work and their children's appointment schedules. If a parent lets things become unbalanced parents are blamed for being neglectful or unresponsive to their children.

Laura LaCroix-Dalluhn: As we move towards a system of care for the entire family, should we engage with parents to help them navigate the system and provide peer support, or do we connect with providers so they are encouraged to engage with the whole family?

Maria Tripeny: Parents are always told they should do self-care, but it's more of a chore that needs to be done rather than an opportunity to receive support and have fun. There needs to be a fun activity where a community of parents can connect without the clinical setting.

Cathy Rude: She has a child that went through the mental health system and founded a Facebook parent support group. Technology is underutilized as a way to engage and connect families to provide them with support that the wrap-around services might not provide. There's educational opportunities to help parents have conversations and support each other at the same time. The transition places where parents feel dropped is indicative of the parents' needs to be (in-patient units, schools, etc).

Monick: I think it starts at the hospital and insurance. Being able to decide the care and approach and not being pushed. In 2022 the legislature authorized DHS to work with providers to create IHPs. Although in theory it could be positive. it may place pressure on both parents and providers.

Pat Dale: Chemical dependency sector is reliant on outside support. Part of the challenge to engaging the whole family is achieving a level of engagement from the child to begin that care. From a provider standpoint it is difficult to know whether to be directive or responsive to children and their families. Over the past 30 years, the narrative in the providers' culture is that parents are not their client and to be the best advocate, they can't get caught up in family issues. It is difficult for therapists because there is an expectation they have to create and provide collaborative services with other providers. The mental health care system is often limited to providing services for payment.

Andria Blade: There are times when clients don't show for their appointments and providers do not follow up with their patient because they are so busy and there is also so much burnout. It is hard to find people to pick up these cases and for them to have the time to develop those relationships with the

child, parents, and family. The anxiety levels among youth is making program directors unsure of how to address and proceed.

Cheryl Holm-Hansen: This is reflective of what was heard in the Journey Mapping Report and experiences as a family. Providers need a more holistic view of the client and family as they move through the system. As a system of care how do we help parents engage with providers to help explain and navigate through the mental health system. Peer support and family driven care is not radical in shifts in workload, but the empathetic response and engagement. There is a need to reconnect and reprioritize authenticity, engagement, and capacity among the mental health field as itself.

Mark Sanders: As a collaborative we need to push for spaces and reimbursement for therapists to talk to families to create that connection. School mental health services are appealing because it feels more collaborative with the families. Providers need to know they have the permission to care and that can be energizing because they are collaborating with others. It is energizing and informative to connect with parents. How do we create something systemic in the mental health field that prioritizes families (in billing, provided through grant, etc.)? Flexible grant funds are needed. The Care coordination MA benefits and around treatment planning with the family is billable. There is a need for a billing code for family therapy without the client present. There needs to be more creative strategizing to get agencies more funding to have these conversations with families in the school, clinical setting, or out in the community. How do we cover uninsured, underinsured, and others with the current (limited) capacity of the mental health system. To use some of the billing codes it must be written into the treatment plan.

Beth Lovre: Went through Family care and Peer specialist training. There need more billing options regarding care coordination and for peer specialists to be creative. There is a lot to build on that is not in the traditional clinical sense. Caregiver socials are a great way to connect parents

Brandon Jones: Parent socials can be supported by his organization to help bridge the gap between systems information and caregivers. Community organizations can help with navigational and outreach by hosting "Ask a Therapist", "Family Socials", etc.

Pat Dale: Case Management means certain things to certain people, and it is important to know that parent and family voice is a huge piece in that. There's a need for Peer Specialist training, investment, and support. The client cannot be exclusionary to the child or the parents but addresses the family and its ruptures through collaborative care and services. School-based therapy and mental health services allow for families and children to have their own advocates and a say in their mental health care and treatment.

Business

- 2023 Meeting Schedule.

Meeting will start and end 30 minutes earlier and continue online. However, when the weather warms up, there is consensus that there should be a few in-person events come the springtime. Hybrid meetings are always difficult to pull off and in-person meetings should include interactive and intentional activities. Smaller group opportunities may also be a great idea to consider for in-person meeting.

Pat motions to approve the 2023 Calendar as submitted. Andria Blade seconds the approval. The motion passed unanimously.

- Approve new Governance Committee Representative

New Governance Committee representatives are comprised of stakeholders and ad hoc representatives. Krista Phillips moves to approve Dr. Megan Hickey (who attended last month) for Minneapolis Public Schools and Cindy Slowiak seconds. Motion passed unanimously.

- Update on funding for Youth Mental Health First Aid Training

Laura stated prior approval was provided for youth mental health first aid training. After discussions with youth workers and out of school time leaders, it is staff's recommendation to redirect all \$15,000 to train the trainers and build capacity for youth mental health first aid training in Hennepin County. We need capacity before we can go out and train community members in youth mental health first aid. It was originally in place to be spent in 2022, but an amendment will need to be made in the approved budget to continue spending through 2023 with Hennepin County. The goal is to train about 4-5 people across the county who will train youth workers to train the youth.

Pat Dale moves to change the language to direct all the \$15,000 into train the trainer. Cindy Slowiak seconds the motion. Motion passes. Krista Phillips clarifies that it costs \$3-4,000 per trainer in youth-serving organizations who will train other staff. Additional funding will be needed to train down to training the children.

- Financing Framework Representatives

The Collaborative needs to identify two voting members to attend and represent the Hennepin County Children's Mental Health Collaborative at the Financing Framework with Hennepin County on December 13 at 3 PM. Pat Dale will attend. Brandon Jones offered to join and represent the Collaborative. Krista Phillips moves approval of Pat Dale and Brandon Jones as the Collaborative's voting representatives for the Financing Framework meeting, and Cindy seconds. Motion passes unanimously.

- Decision to Keep or Cancel December Governance Meeting

Krista Phillips moves to cancel the December 2022 meeting. Pat seconds motion. Motion approved.

Adjourn. Krista Phillips moves to adjourn and Meredith seconds. Motion approved.

Year in review 2022



HENNEPIN COUNTY

**CHILDREN'S MENTAL HEALTH
COLLABORATIVE**

OUR MISSION

To improve access to and resources for high-quality, culturally and economically supportive mental health services for infants, children, youth and families within Hennepin County through our working partnerships with Family Service Collaboratives, County and State Government, Adult Mental Health Systems, Parents, Schools, and Health Systems. Our collective vision is to ensure effective and accessible community-based mental health systems and supports for infants, children, youth and families with mental health needs.

In 2022, our work was broadly organized around three primary goals: (1) improve the lives of families and children through **increased access to information**; (2) improve **coordination** of and **access** to children's mental health services; and (3) increase **data-driven decision making**.

Improve the lives of families and children through increased access to information

Family engagement and support is conducted primarily through the Collaborative's Parent Catalyst Leadership Group (PCLG), which aims to empower Hennepin County families to become valued advocates and decision makers at all levels of the children's mental health system through education, outreach, and support.

FOR MORE INFORMATION

Laura LaCroix-Dalluhn

Coordination Team Coordinator
Laura@LaCroixDalluhnConsulting.com

Margaret Sullivan

PCLG Coordinator
hcpcgl@yahoo.com

2022 PCLG highlights



Offered parent support, through monthly virtual support group meetings and a Facebook support page.



Hosted 5 "Let's Talk About It" parent workshops, addressing Emergency Mental Health Response, Family Support Grants, Parenting Trans and Gender Expansive Youth, Family Response & Stabilization Services, and Navigating Transition with Your Young Adult.



Built community awareness, through monthly newsletters, social media posts, and outreach at community events.

In addition to the PCLG activities, the Collaborative also sponsored other activities to increase family access to information. In October, the Collaborative hosted a presentation from Paulette Mader of Rutgers University, to discuss parent engagement and parent-driven strategies in children's mental health services. The Collaborative also launched workgroups to develop strategies to increase parent access to information about children's mental health and to strengthen family voice in services.

Improve coordination of and access to children's mental health services

The Collaborative organized several **convenings** in 2022, providing opportunities for stakeholders to share information and brainstorm strategies to strengthen collaboration and coordination. These convenings focused on the new inpatient psychiatric services offered through Children's Hospital and opportunities to build the capacity of community youth programs to support children's mental health.



We also launched workgroups to develop strategies to strengthen **peer support and navigation** for families in the children's mental health system.

Increase data-driven decision-making



Released our **"journey mapping" report**, which summarized the results of 49 in-depth interviews with parents about their experiences entering and navigating the children's mental health system. The results highlight some of the challenges parents face when they first enter the system, especially related to awareness of services, peer support, navigation assistance, and family voice. The results have been used to drive Collaborative work in 2022, and have been widely shared, with presentations at 16 organizations, collaborations, or professional associations so far. Additional presentations are scheduled for 2023.



We began publishing our children's mental health data **dashboard**, which compiles available community data regarding the well-being of Hennepin County youth. The dashboard addresses mental health, substance use, community safety, youth engagement, poverty, and other topics.



In March, we hosted "Creating a better mental health system: Using community data and parent voice to support Hennepin County children." This **public forum** was used to share available information about the well-being of County youth, and to engage in strategic planning with parents, mental health providers, policy-makers, school staff, and other professionals supporting youth and families.

CRITERIA USED TO SELECT PROJECTS

The Collaborative has adopted a strategy screen to help guide our work. We prioritize projects that:

- Align with our system of care values
- Build on, or reinforce, our competitive advantage
- Increase family, caregiver and/or youth voice
- Address an inequity in services or the system
- Address an inequity in access and/or knowledge of how to access
- Builds upon previous work
- Aligns with our capacity (people, time, resources and will)
- Do not duplicate services
- Align with data supporting the project need
- Can be prototyped or piloted
- Can be scaled and/or sustained across the county



Youth violence prevention mini-grants

In partnership with the Hennepin County Community Health Improvement Program (CHIP), we provided \$5,000 “mini-grants” to community organizations focused on the mental health of young people who have been impacted by violence, as well as the perpetrators of violence. Grantees included:

Hope Project – “Permission to grieve”

The Hope Project worked with 42 Black and indigenous men and youth in Minneapolis, providing resources and experiential activities related to mentoring, individual therapy, yoga, and breathing/relaxation.

The Link – “Our Voices”

Approximately 65 people attended a youth-led community night as part of the Night Out for Safety and Liberation movement. The event featured a community art project, raffle, photobooth, music, and food.

One Family One Community – “Trauma and healing”

One Family One Community presented a ‘Trauma and Healing’ event for 25 residents of Plymouth Apartments and Townhomes.

Standard Edition Women / Hue-MAN Partnership- “Before, during and after the Bullet”

The partnership served 49 African American families. They connected families with community resources, offered a “meal and heal” intergenerational experience related to healing from gun violence, and distributed self-care kits.

Scholarships and training support

In 2022, the Hennepin County Children’s Mental Health Collaborative awarded **\$23,300 in scholarships and training support**, leveraging an additional \$22,100.

Award	Number	Impact
Scholarships to parents and providers	17	Increased knowledge among parents and providers to better support children with mental health challenges in Hennepin County
Training grants to Children’s Mental Health providers	2	Increased mental health first aid and suicide prevention among faith-based leaders, youth ministers and staff - reaching 35+ congregations in Hennepin County. Supported Fraser's clinical conference
Sponsorships	1	Supported culturally focused training for BIPOC providers and community members - and increased awareness among white providers and stakeholders
School-based mental health scholarships	32	Increased knowledge among SBMH providers to better support children with mental health challenges in Hennepin County

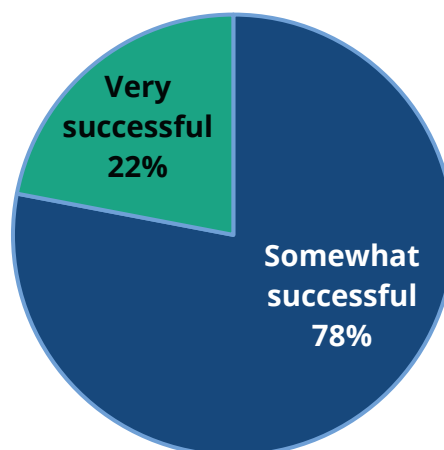


Evaluation highlights

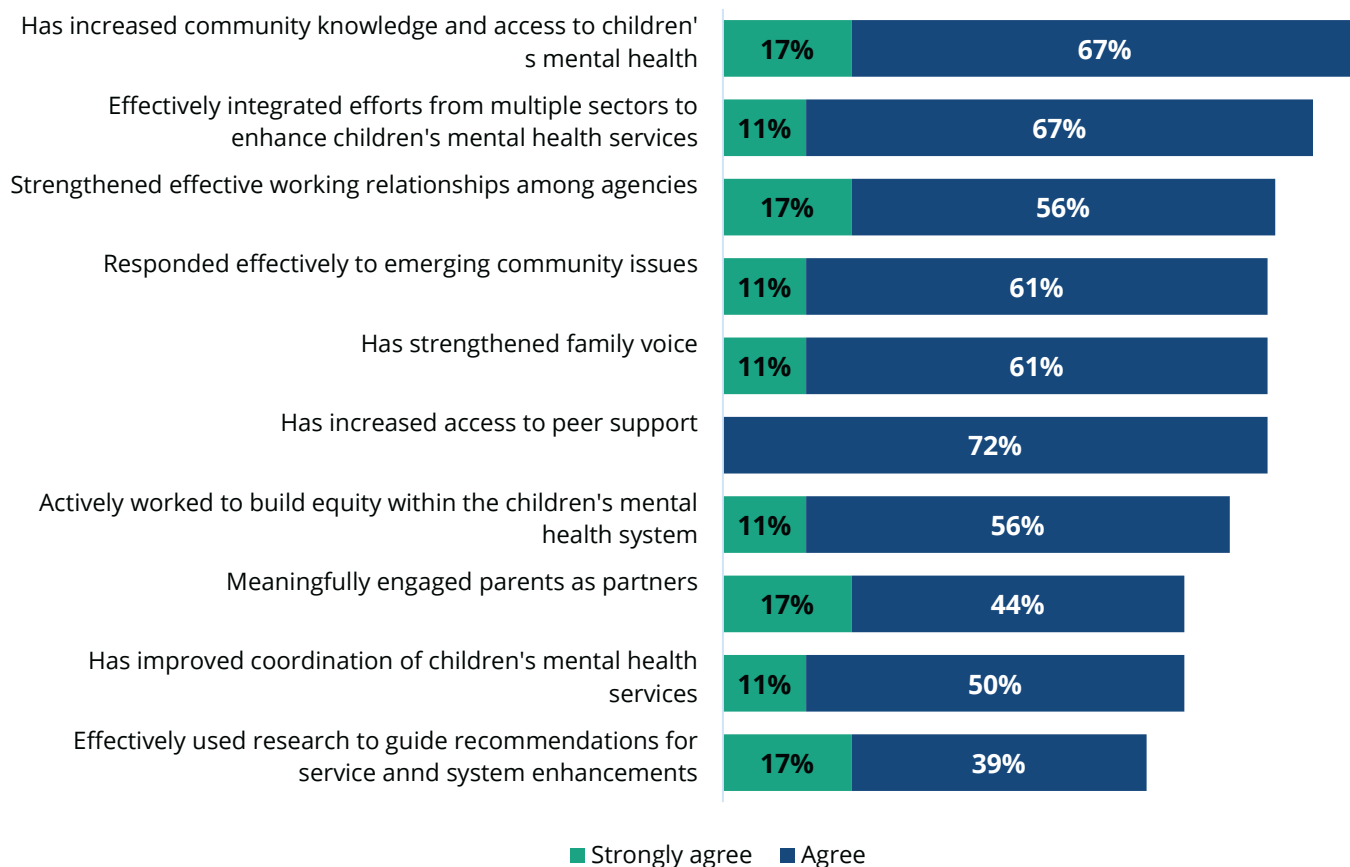
In October 2022, the Collaborative surveyed its members and partners regarding our operations and impact. The results highlighted our successes as we emerge from several years marked with significant transitions in Collaborative members, a new coordination team, community violence and unrest, and the COVID-19 pandemic.

While the results were positive overall, they also reinforce the need for continued efforts to expand partnerships, engage community, build knowledge, and increase impact.

Success in achieving mission



Perceived Collaborative success



Looking ahead to 2023

Add high-level overview here of what is coming in 2023....

Governance Committee Meeting Minutes

January 18, 2023

In attendance: Pat Dale, Cindy Slowiak, Cherly Holm-Hansen, Julie Atella, Aric Jensen, Meredith Martinez, Margaret Sullivan, Andria Blade, Jenna Mitchler, Karen Malka, Asad Dahir, Cathy Rude, Angela Watts, Monick Castillo, Maria Tripeny, Jamie Winter, Brandon Jones, Krista Phillips, Monica Long, Laura LaCroix-Dalluhn, and Cati Gómez.

Welcome & Approval of Meeting Minutes & Agenda

- Maria Tripeny and Angela Watts motion to approve the November minutes. All in favor, motion approved.
- Cindy Slowiak and Maria Tripeny move the approval of the January agenda. All in favor, motion approved.

Business Updates

- Vote on Chair/Co-Chair
 - Pat Dale shared that we have an open co-chair position. Pat is asking for a vote to delay the vote for the other co-chair since we have yet to identify who it will be.
 - Angela Watts motioned to delay the vote until February, and Cindy Slowiak seconded. All in favor, motion approved.
 - Meredith Martinez asked if the governance committee will be made aware of who is up for co-chair before the next meeting. Laura LaCroix-Dalluhn answered that yes, the governance committee will be made aware of possible co-chairs. Pat reminded everyone that nominations can be made and that the co-chair can be anyone, they do not need to be a parent.
- Financing Framework Vote/Governance
 - Laura shared that the Hennepin County Family Service Collaboratives and the Children's Mental Health Collaborative met in December to review and discuss the financing framework agreement, which states Family Service Collaboratives, District 287 and DOCCR will each dedicate 5% of its LCTS revenues to the Children's Mental Health Collaborative in order to coordinate and support children mental health countywide. This was agreed to for another year.

Using Data to Inform Collaborative Priorities

- 2022 Collaborative Report & Overview of Collaborative Evaluation Results
 - Laura shared that one of the goals of the Executive Committee this year is to move us from theoretical discussions about system of care to practical actions. We ended the year talking about possible actions to engage families and respond to their needs related to serving their child(ren). We thought it would be helpful to start the new calendar year by grounding ourselves in data about the

Collaborative's work and with some high-level data on student mental health needs based on the new student survey data.

- Cheryl Holm-Hansen provided a brief overview of children/youth mental health based on newly released student survey data, which indicates an increase in mental health needs. Cheryl will provide an in-depth analysis of the data when she has access to the detail files.
- Cheryl also shared survey data from CMHC partners. See below for slides at the end of the minutes.

Family Response and Stabilization Services

- Asad Dahir then shared slides about Family Response and Stabilization Services, how the county and several community partners, are taking actions to move away from eligibility driving care and services, to the needs of families.
 - This new program works to address unmet needs by providing immediate in-person support to families in need. Within an hour of a call, families will receive in-home help for up to 72 hours, this is offered to families in Hennepin County with children aged 5-18. This program aids to minimize unnecessary hospitalizations, out of home placements, and to address inequities in underserved communities. FRSS is partnered with two hospitals and two schools in Hennepin County that have and will refer families when fit.
 - Krista Phillips noted that she shared this program with a family and they were incredibly grateful and finally felt they had the right tool for their needs.

Adjourn

- Krista Phillips moved to adjourn, and Meredith Martinez seconded. All were in favor, meeting adjourned.



Hennepin County Children's Mental Health Collaborative
Governance Board meeting – January 18, 2023

**Collaborative planning 2023:
Where have we been? Where
are we now?**



Review of 2022 Collaborative work

Goal: Improve the lives of families and children through increased access to information

2022 PCLG highlights



Offered **parent support**, through monthly virtual support group meetings and a Facebook support page.



Hosted 5 “Let’s Talk About It” **parent workshops**, addressing Emergency Mental Health Response, Family Support Grants, Parenting Trans and Gender Expansive Youth, Family Response & Stabilization Services, and Navigating Transition with Your Young Adult.



Built **community awareness**, through monthly newsletters, social media posts, and outreach at community events.

Goal: Improve the lives of families and children through increased access to information

In October 2022, Paulette Mader of Rutgers University offered Collaborative partners a **presentation on parent engagement and parent-driven strategies** in children's mental health services.

The Collaborative also **launched workgroups** to develop strategies to increase parent access to information about children's mental health and to strengthen family voice in services.

Goal: Increase data-driven decision-making



Released **our “journey mapping” report**, which summarized 49 in-depth interviews with parents about their experiences entering and navigating the children’s mental health system. The results guided our work in 2022, and have been widely shared, with presentations at 16 organizations, collaborations, or professional associations.



Began publishing our children’s mental health data **dashboard**, which compiles community data regarding the well-being of County youth (mental health, substance use, community safety, youth engagement, poverty, and other topics).



Hosted a **public forum** to share available information about the well-being of County youth, and to engage in strategic planning with parents, mental health providers, policy-makers, school staff, and other professionals supporting youth and families.

Youth violence prevention mini-grants

In partnership with the Hennepin County Community Health Improvement Program (CHIP), we provided **\$5,000 “mini-grants” to community organizations focused on the mental health of young people who have been impacted by violence**, as well as the perpetrators of violence.

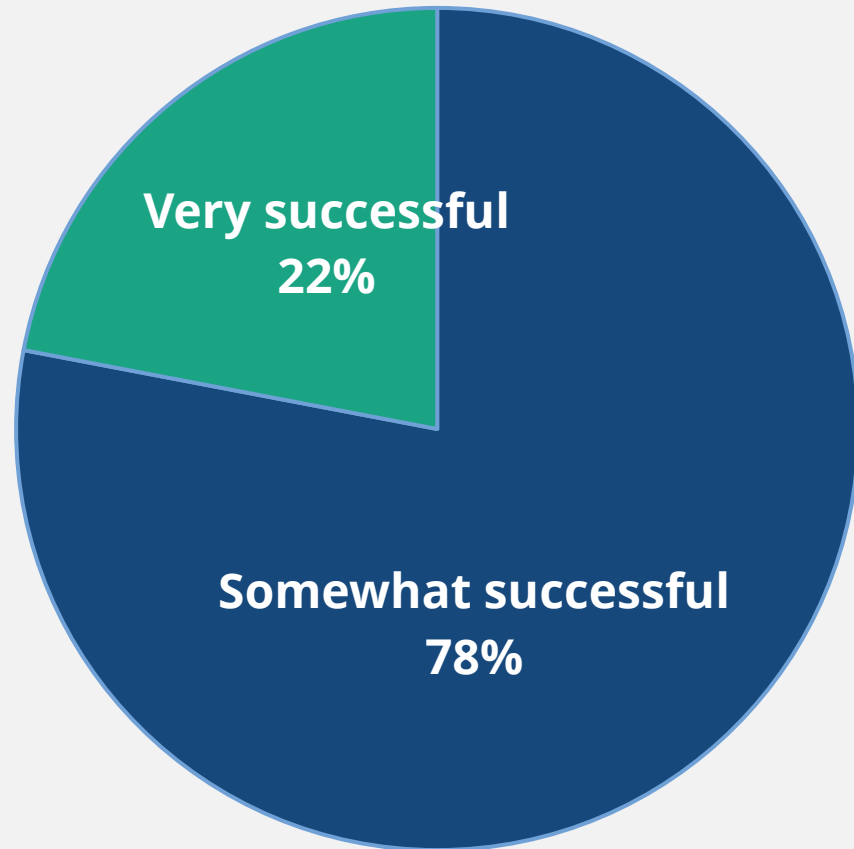
Grantees included:

- Hope Project – “Permission to grieve”
- The Link – “Our Voices”
- One Family One Community – “Trauma and healing”
- Standard Edition Women / Hue-MAN Partnership- “Before, during and after the Bullet”
- Standard Edition Women / Hue-MAN Partnership- “Before, during and after the Bullet”

Scholarships and training support

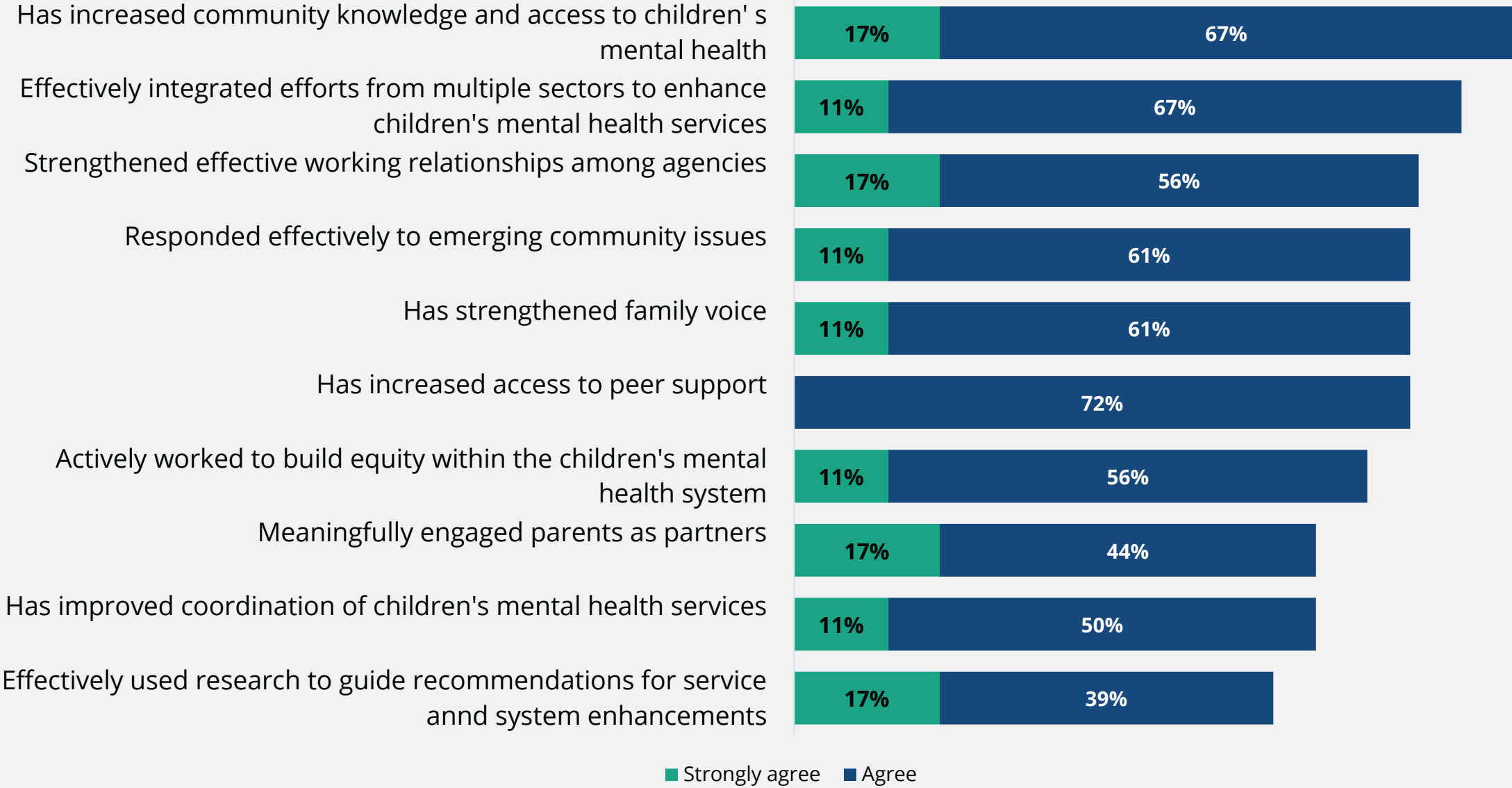
In 2022, the Hennepin County Children's Mental Health Collaborative awarded **\$23,300 in scholarships and training support**, leveraging an additional \$22,100.

- 17 Scholarships to parents and providers
- 2 Training grants to Children's Mental Health providers
- 1 Sponsorships
- 32 School-based mental health scholarships



In late 2022, Collaborative members were most likely to say that the Collaborative had been “somewhat successful” in achieving their mission

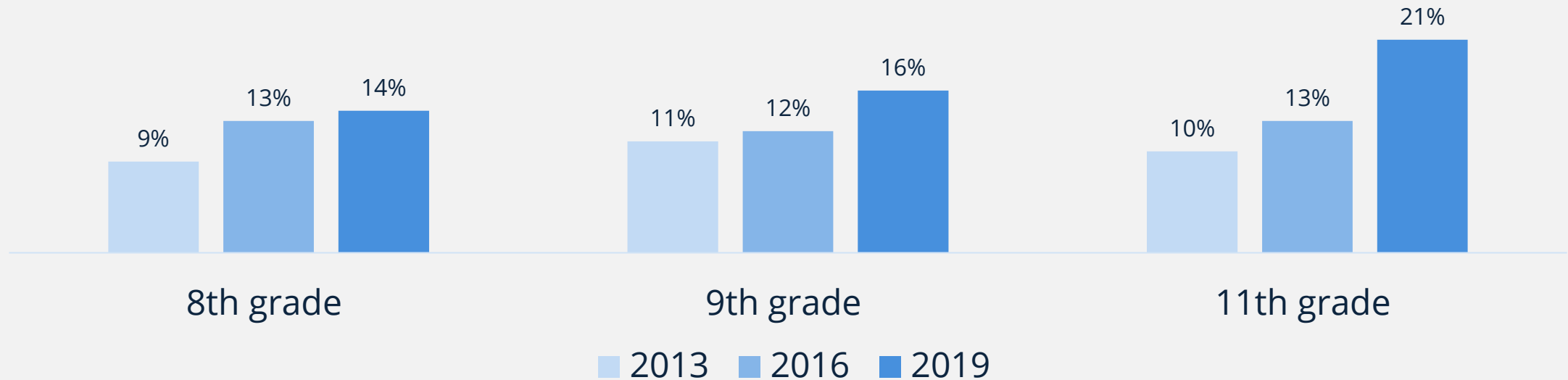
Ratings varied across Collaborative goal areas



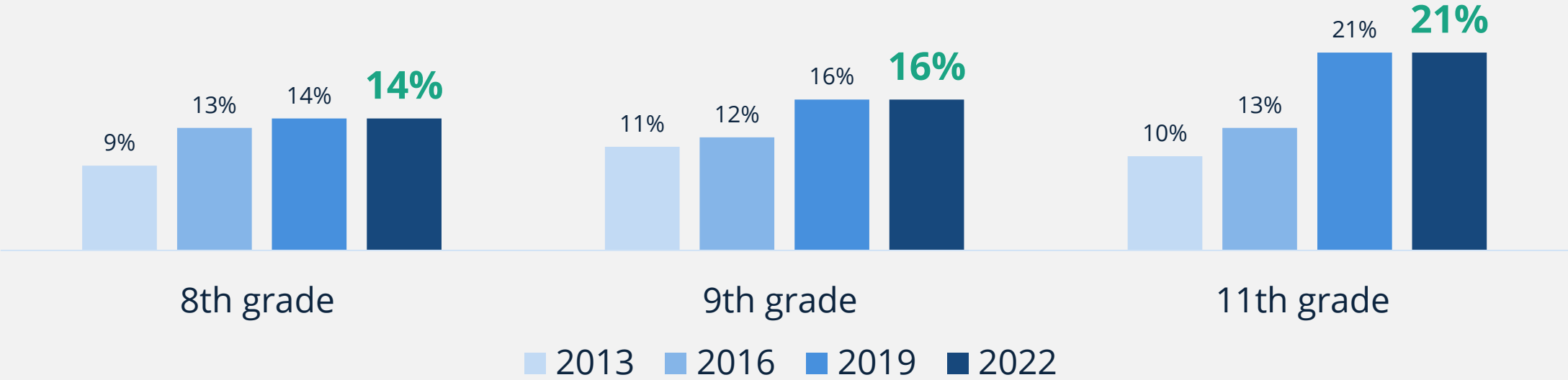


2022 MN Student Survey highlights

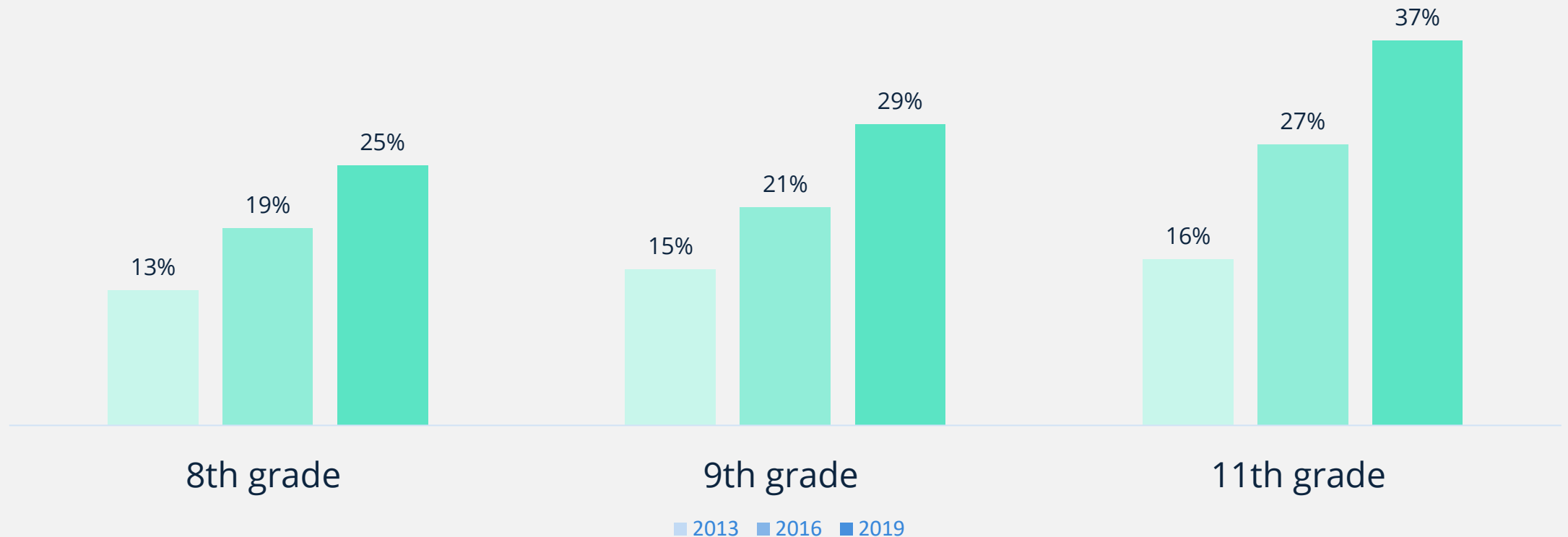
The percentage of 9th and 11th male students who said that they had a “long-term mental health, behavioral, or emotional problem” increased between 2016 and 2019...



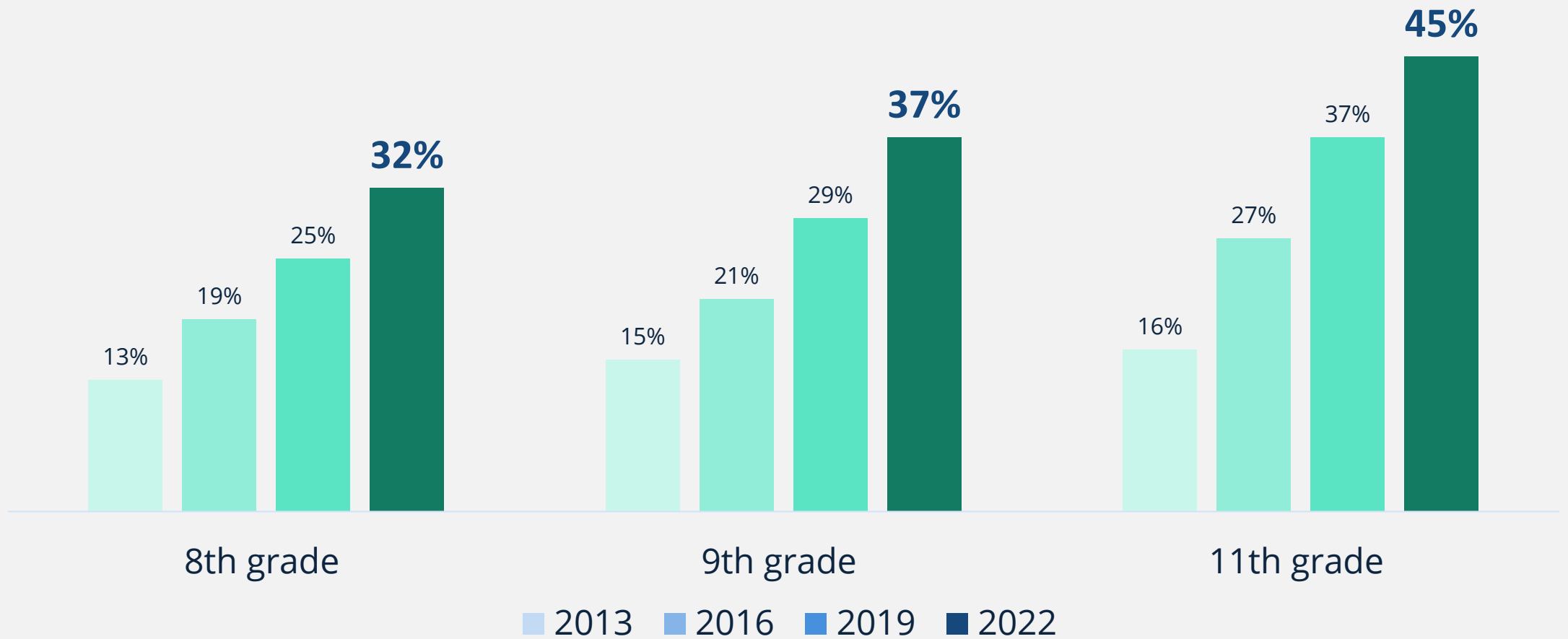
...but results remained steady in 2022



In contrast, the percentage of female students who said that they had a “long-term mental health, behavioral, or emotional problem” was increasing steadily...

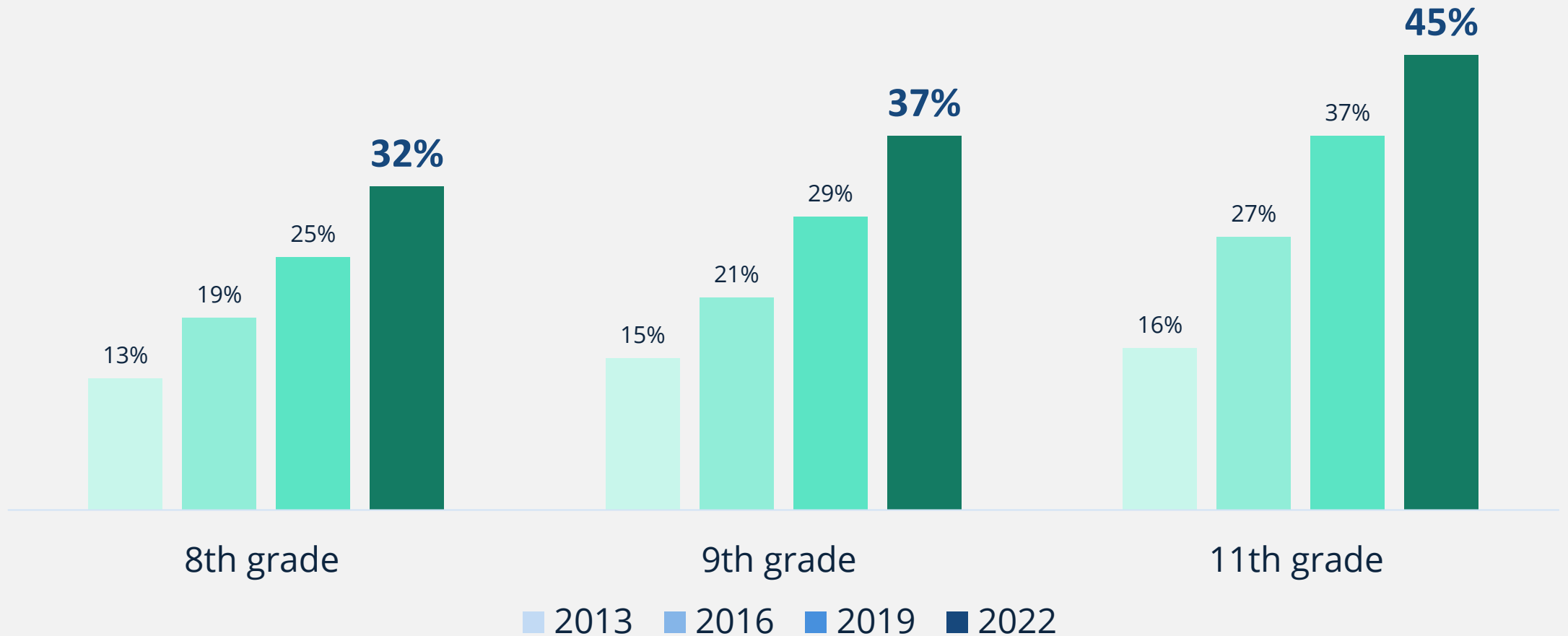


...with significant increases seen in 2022

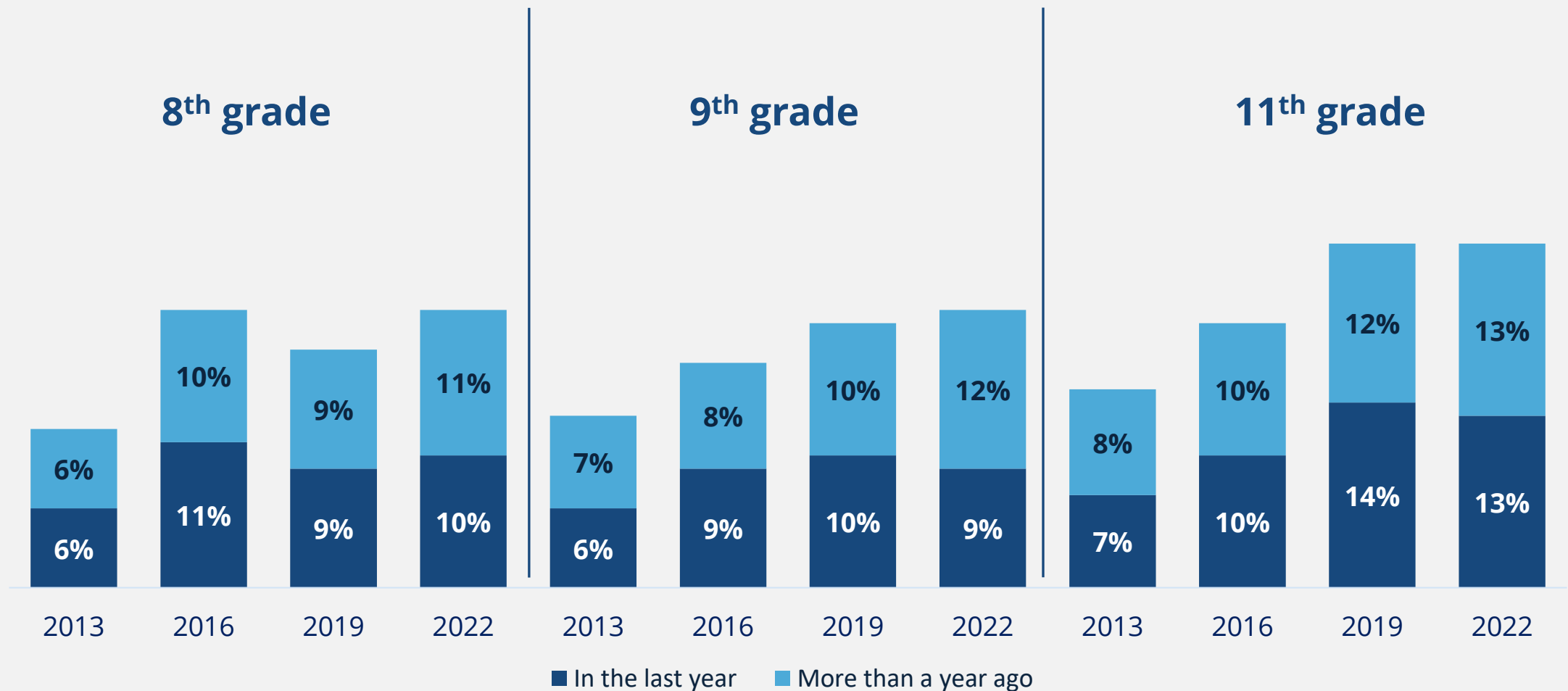


...with significant increases seen in 2022

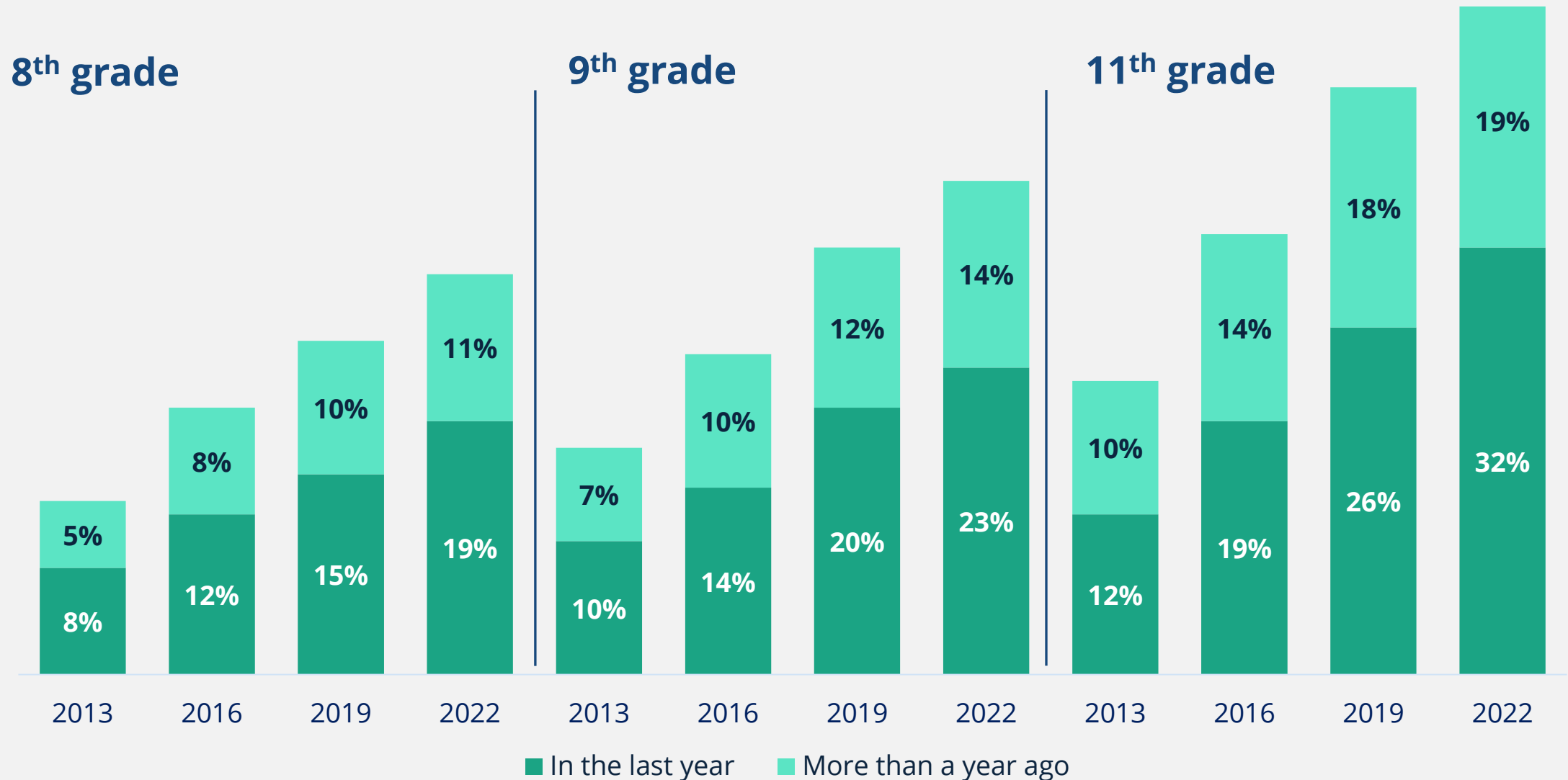
(an average increase of 25% since 2019, and 150% since 2013)



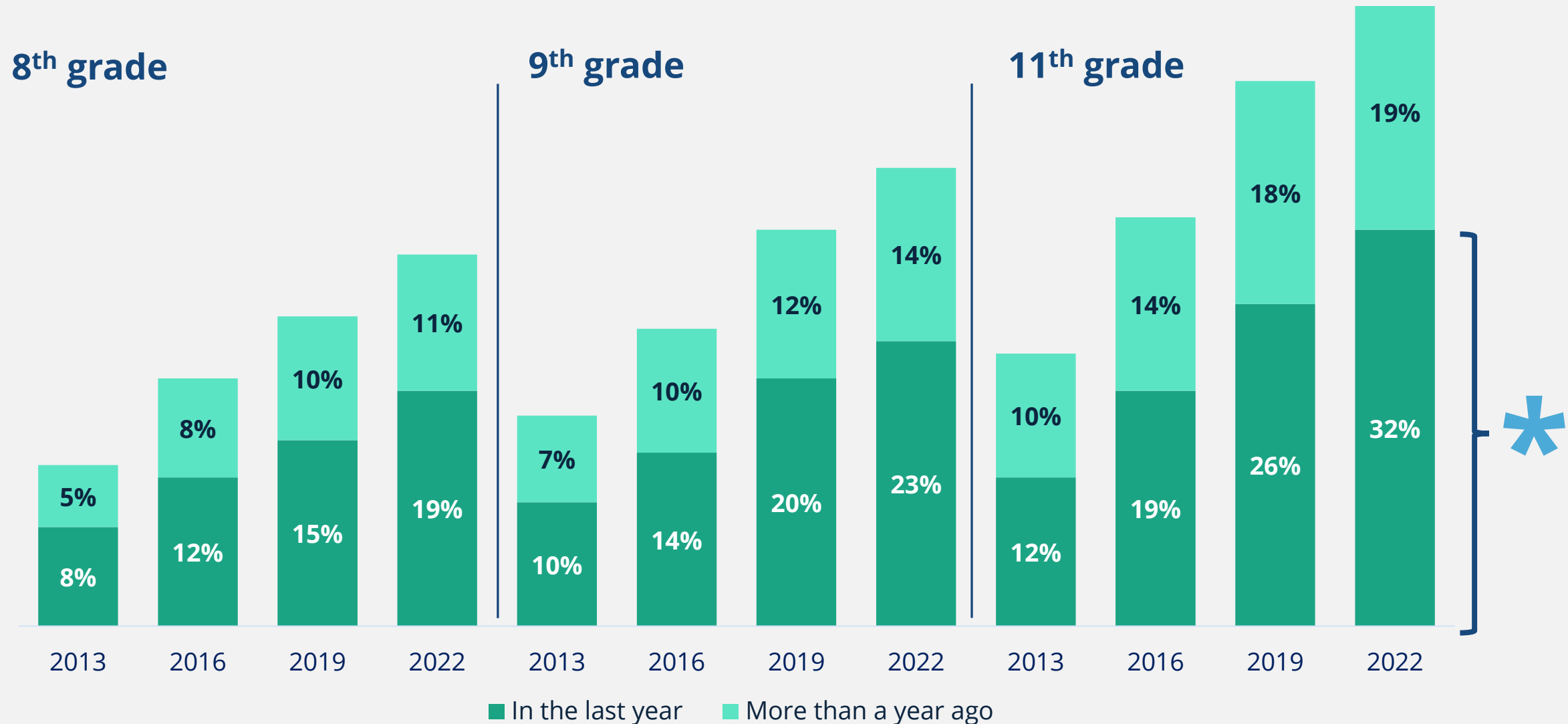
For males, the percentage of students who received treatment for a “long-term mental health, behavioral, or emotional problem” has also remained fairly consistent



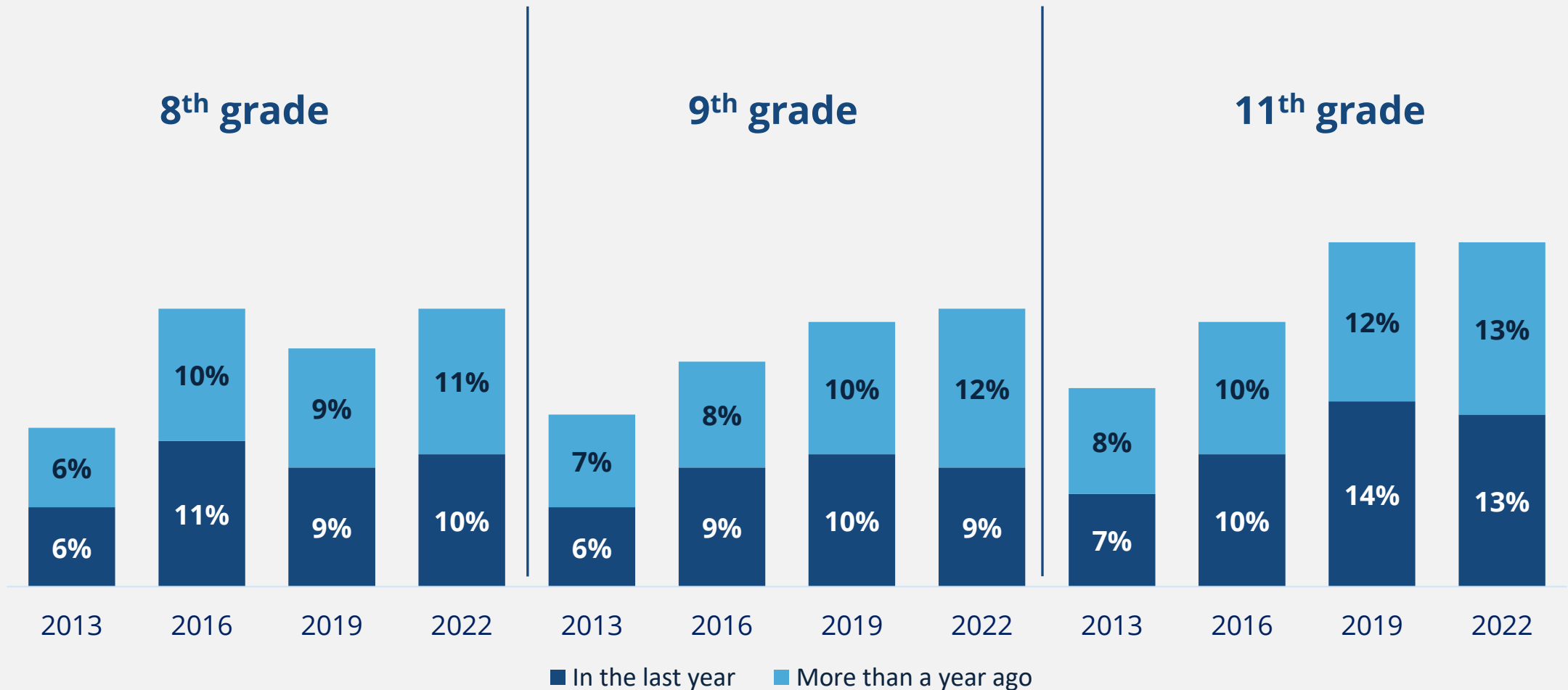
For females, the percentage of students who received treatment for a “long-term mental health, behavioral, or emotional problem” has increased steadily over time



For females, the percentage of students who received treatment for a “long-term mental health, behavioral, or emotional problem” has increased steadily over time



For males, the percentage of students who said that they had seriously considered suicide has also remained fairly consistent

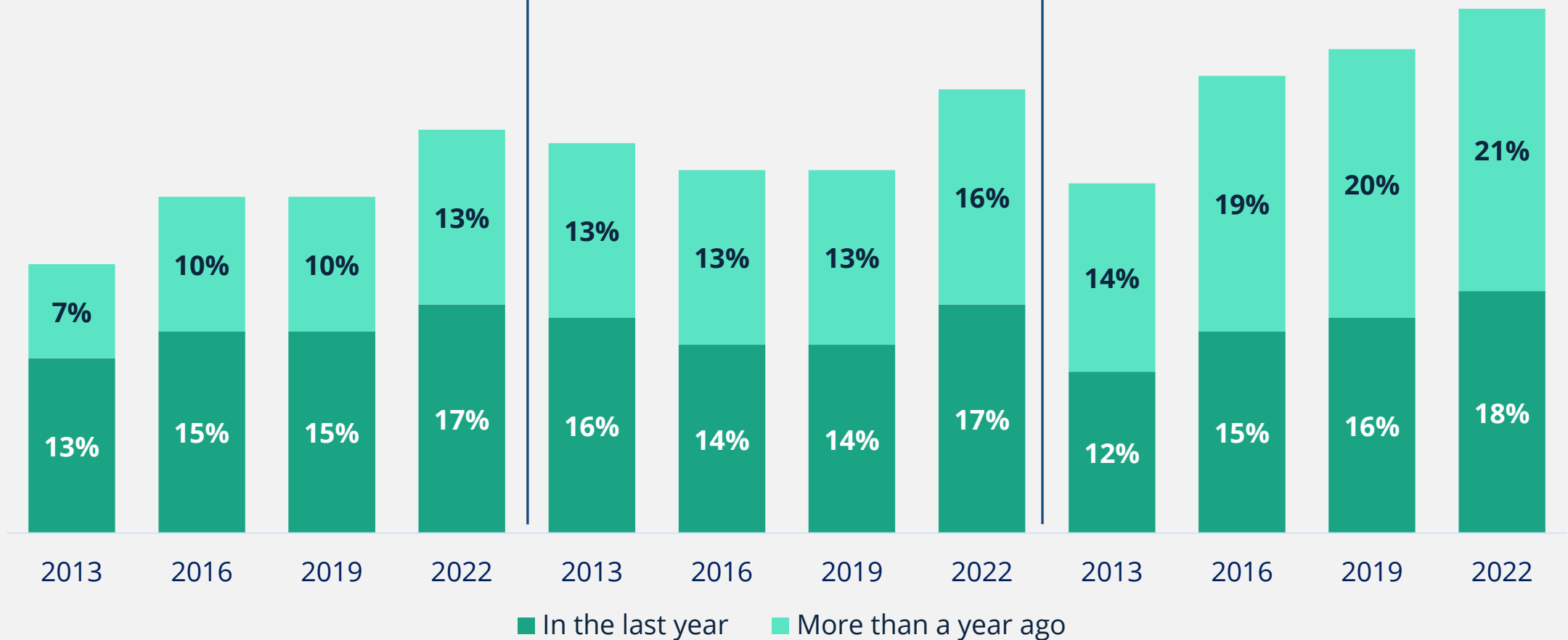


For females, there have been slight increases in the percentage of students who seriously considered suicide

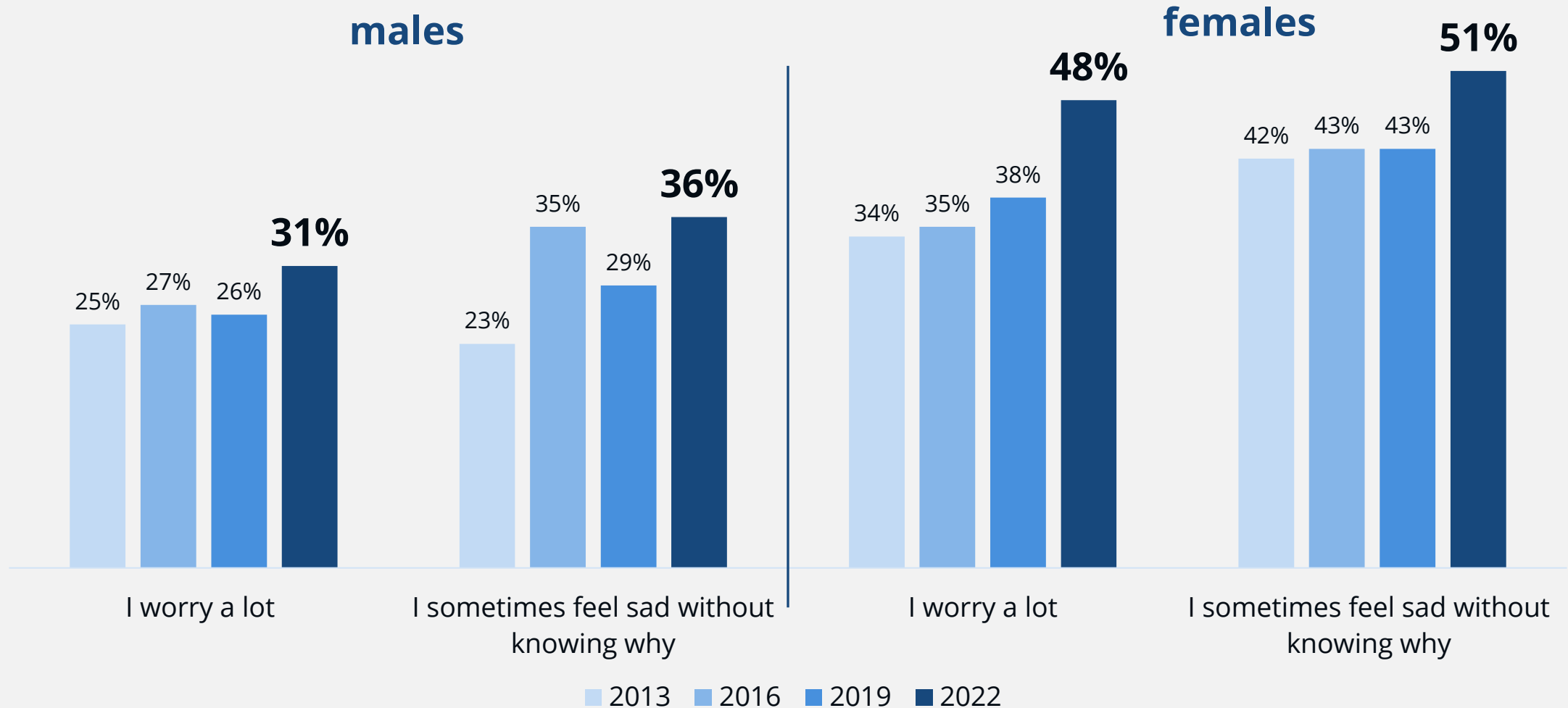
8th grade

9th grade

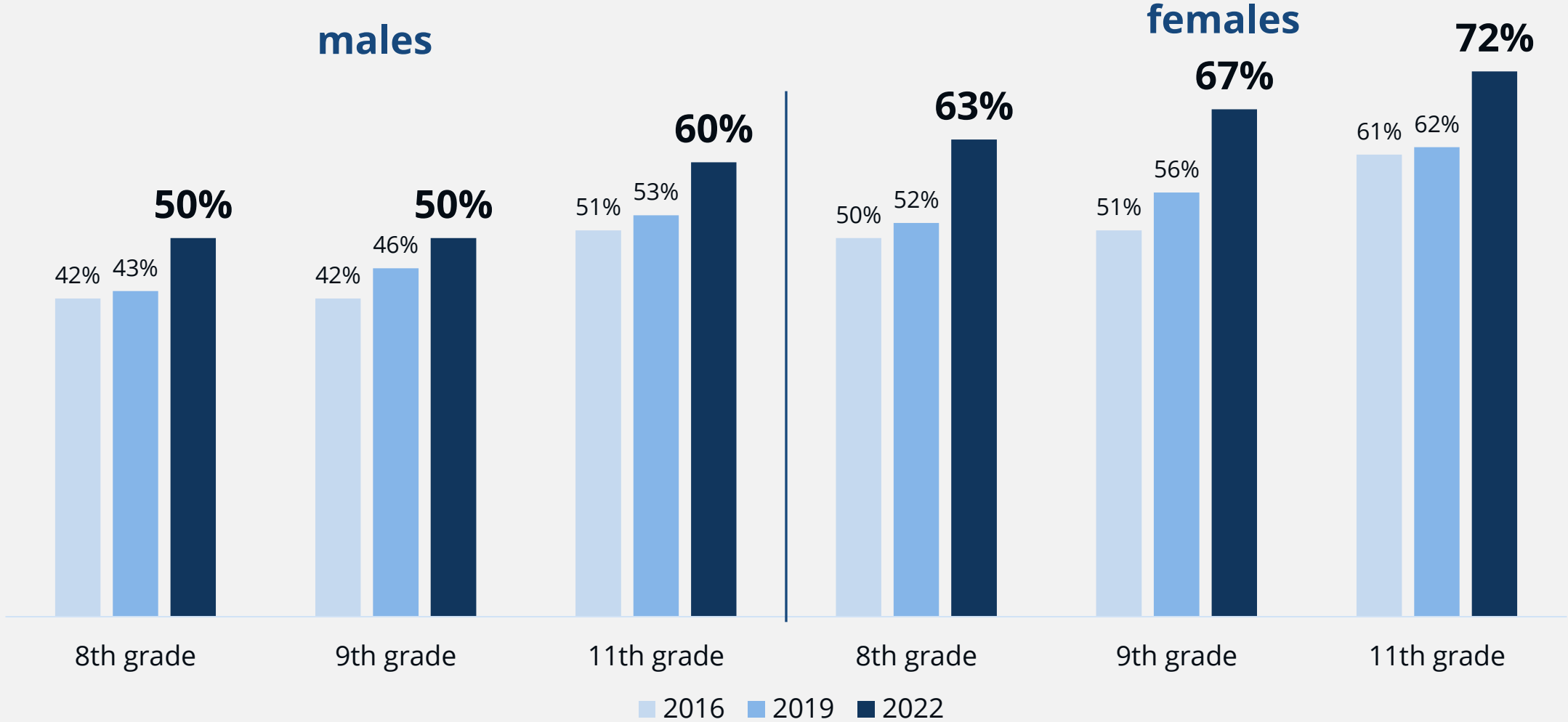
11th grade



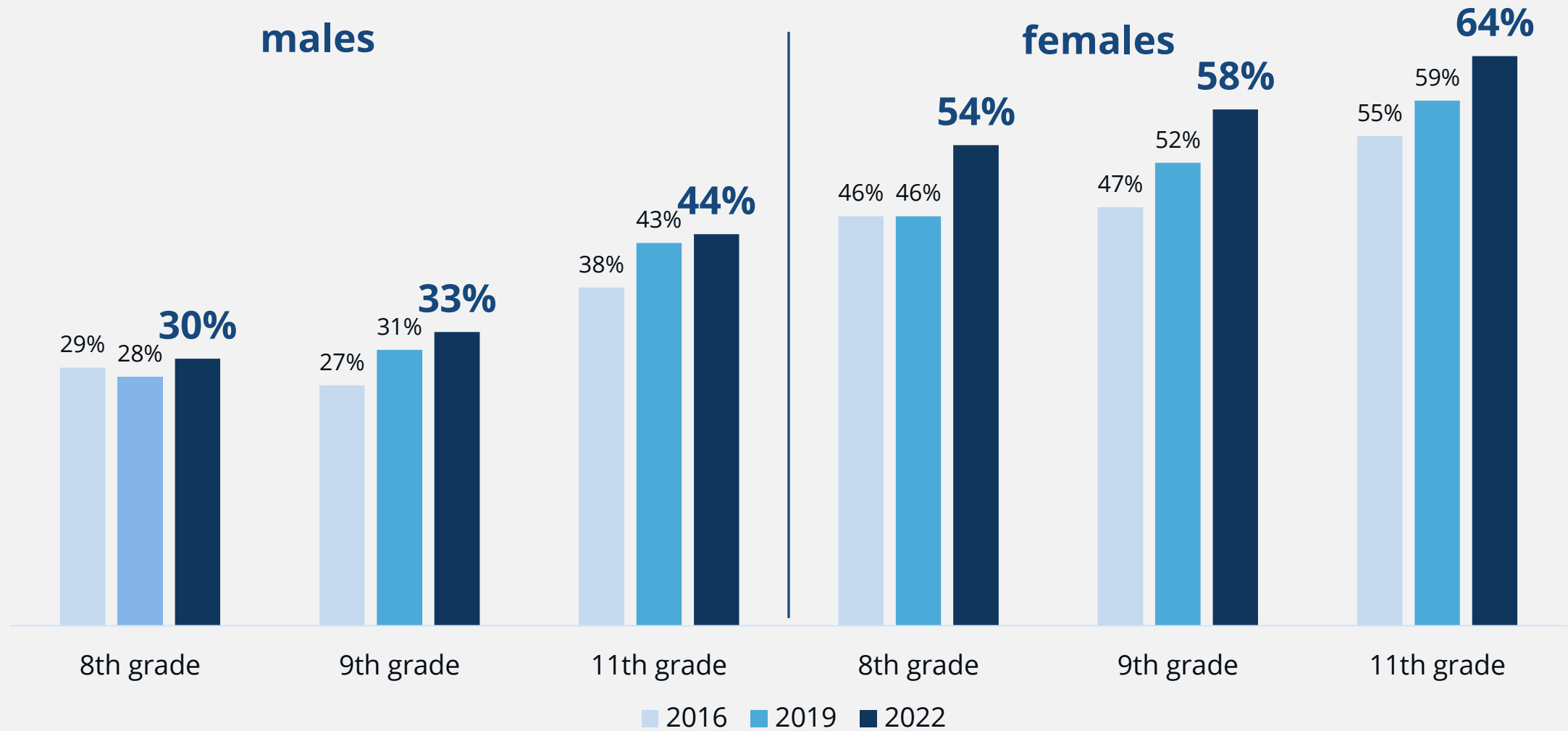
In 2022, there was an increase in the percentage of 5th grade students who said that they “worry a lot” or “sometimes feel sad without knowing why”



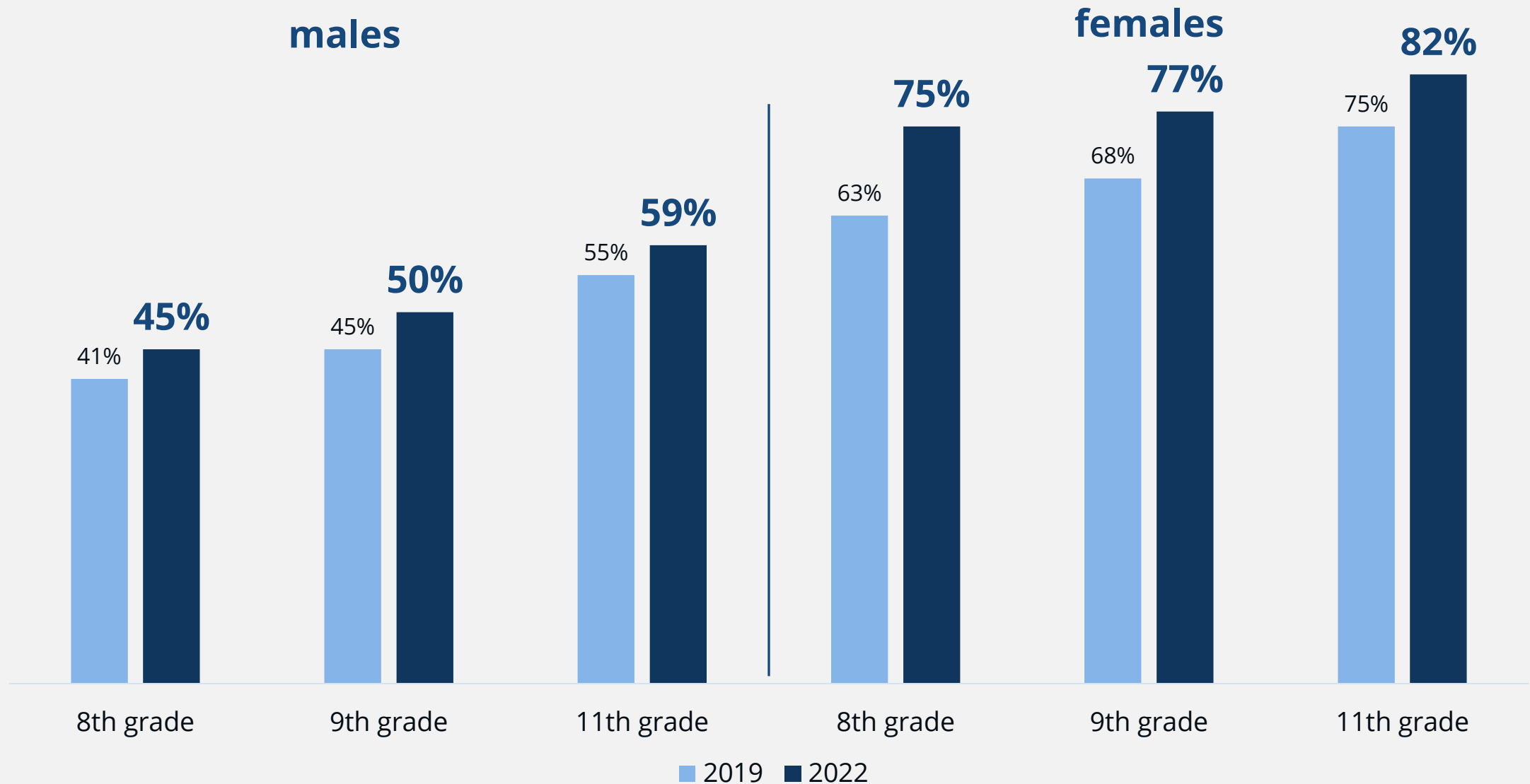
For older students (especially females!), there was an increase in the percentage who reported “little interest or pleasure in doing things at least several days in the last 2 weeks...”



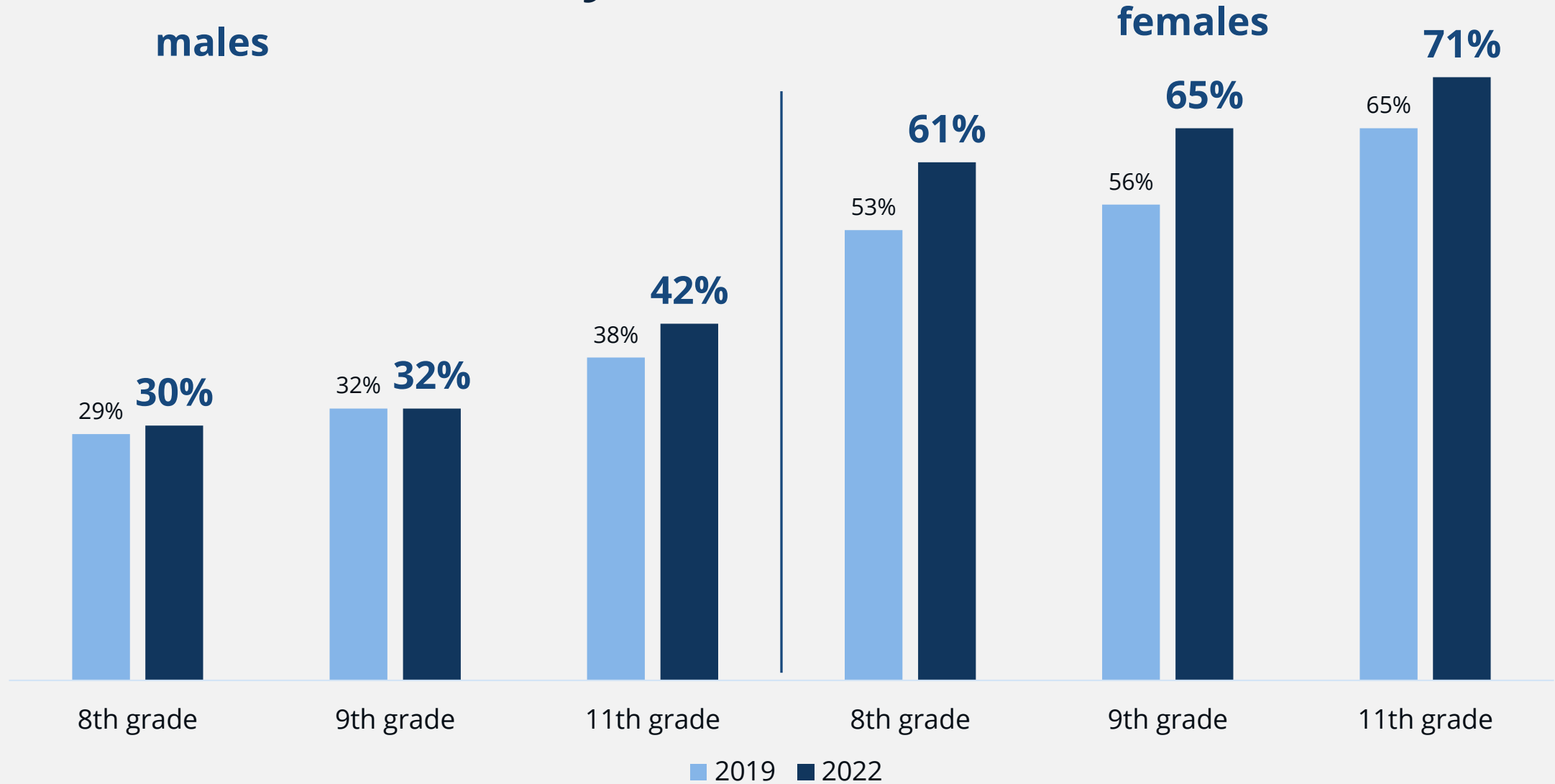
...and feeling “down, depressed, or hopeless” at least several days in the last 2 weeks...



...and feeling “nervous, anxious, or on edge” at least several days in the last 2 weeks...



...and “not being able to stop or control worrying” at least several days in the last 2 weeks...





**Recap of top recommendations from
the journey mapping interviews**

1

Increase awareness of children's mental health and available services

- Develop or distribute resources to help parents understand the children's mental health system and available services.
- Review provide websites and assess ease of finding information for families seeking services
- Engage in parent education and social media campaigns



2

Increase access to peer support

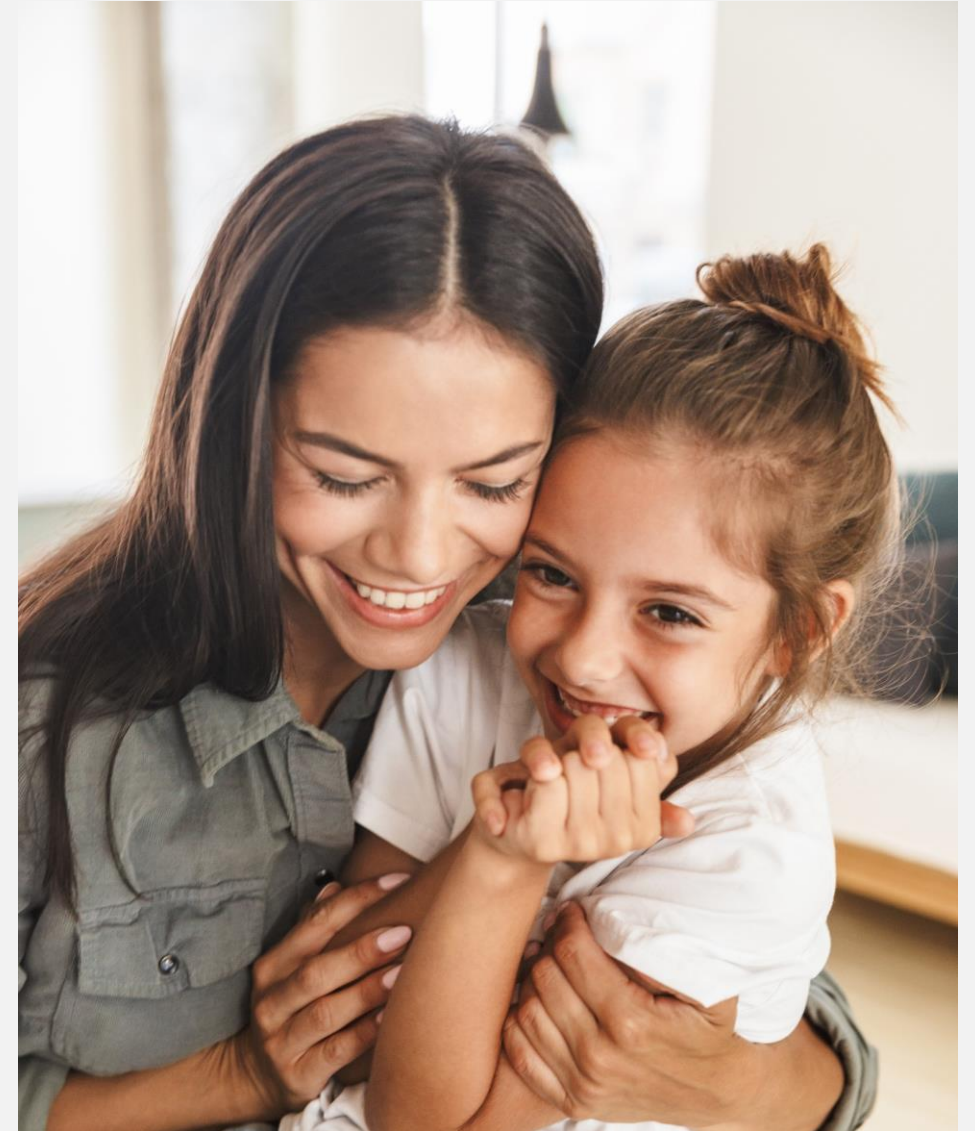
- Provide opportunities for parents to connect with other parents for support and resource-sharing



3

Offer navigators to help facilitate access to services

- Expand use of navigation services, working with families to identify and access appropriate school and community supports; provide guidance following assessments regarding appropriate services; and follow-up with parents after assessments to address emerging questions



4

Encourage professionals to listen and validate parents' concerns

- Strengthen alignment of agency practices with principles of family-driven care
- Adopt “whole family” practices to proactively support parents
- Use parent feedback to improve services
- Develop warm and child-friendly spaces for services
- Ensure that parent voice is included in system-level planning and implementation



Other recommendations

- Increase convenience of services
- Promote behavioral health equity
- Develop and strengthen workforce
- Diversify and strengthen partnerships
- Provide financial support to parents
- Support public policy reform

