



Governance Committee Meeting

Wednesday, March 20, 2024 from 12:00 – 1:30pm

<https://us06web.zoom.us/j/83113557179>

Agenda

- 12:00 pm** **Welcome, Introductions & Approval of Meeting Minutes & Agenda – Angela Watts**
(Meeting materials: February Meeting Minutes & March Agenda)
- 12:10 pm** **Continue Discussion on Parent/Caregiver Recommendations on Improving Children’s Mental Health System – Pat Dale & Coordination Team**
(Meeting materials: Slides on Parent/Caregiver Recommendations to Improve Children’s Mental Health System and Summary of Small Group Discussion included in Feb Minutes)
Continue discussion on parents and caregivers recommendations to improve the children’s mental health system and services in Hennepin County and identify strategies to move these recommendations into action.
- Small Group Discussion
 - Large Group Discussion
- 1:25 pm** **Collaborative Updates – Angela Watts**
(Coordination Team Updates, March, 2024)
Respond to questions about the written updates prepared by the Coordination Team.
- 1:30 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

February 21, 2024

In Attendance: Pat Dale, Angela Watts, Krista Phillips, Meredith O'Brien, Andria Daniel, Jennifer Bertram, Amy Hanson, Mel Hultman, Susie Voss, Andrea Dale, Ashely Crist, Mark Sander, Molly Coyne, Jenna Mitchler, Beth Lovre, Brandon Jones, Jill Lesne-Oseno, Monica Long, Brenna McDonald, Jodi Nelson, Cindy Slowiak,

Staff: Laura LaCroix-Dalluhn, Fatima Muhammad, Cheryl Holm-Hansen, Hayley Tompkins, and Cati Gómez

Welcome, Introductions & Approval of Meeting Minutes & Agenda

- Dr. Jenna Mitchler moved to approve the January minutes, and Meredith O'Brien seconded. Minutes approved.
- Krista Phillips moved to approve the February agenda, and Monica Long seconded. Agenda approved.

2024 Work Priorities

- Pat Dale shared that we began discussing the 2023-2024 work priorities last month. We wanted to provide a high-level overview this month since this guides our Coordination Team's work throughout the year. Our goal is to intentionally engage you, your organization, or key community partners whenever possible since much of our work is focused on better coordinating access to services. Laura LaCroix-Dalluhn shared the workplan and explained that it is organized around three main goals. These goals are:
 1. Improve responsiveness to, and communications with, families and children through increased access to children's mental health services
 2. Improve coordination of and access to children's mental health services
 3. Increase data-driven decision-making to improve the children's mental health service system

Meredith shared that the difficulty with the first goals that she sees at the county level is that families are not aware of many of the programs in place that provide services. Meredith shared that she wonders if this group can work to fill that gap and meet families where they are already engaging, maybe in school, and hold some educational events. Laura shared that we have begun to hold these types of events and plan to hold more, Fatima has been leading this work and we have been able to engage many parents that we had not previously. Angela Watts shares she wonders if there are more informal ways to engage parents outside of the school environment. Angela then asked where we get our target number from and how we plan to reach those numbers. Laura answered that currently it is an aspiration number, and the number of parents that show up at these events is different than the number of parents we engage. Angela suggested that we set an actual number rather than an aspiration and count those who are truly engaged. Laura thanked Angela for the suggestion and offered that the coordination team can work on forming a more informed goal number of engaged parents and caregivers. Fatima Muhammad thanked Meredith for bringing this conversation forward and thanked Angela for bringing the reality forward. Fatima then asked how we will be tracking the number of parents engaged and if there was a method in place being used across the county. Angela suggested we reach out to some of our partners to see what methods they are using.

Discuss Parent/Caregiver Recommendations on Improving Children’s Mental Health System

- Angela shared that the collaborative, specifically Fatima, Hayley, and Cheryl, have been working to compile information from families on what they want to see in the children’s mental health system. Fatima then presented the information. Themes include that parents would like to see increased awareness of services, navigation assistance, peer support, workforce in the field, service coordination, connections through schools, increased focus on family voice, and family education.
 - Meredith shared that as a parent, she feels that the children’s mental health field is like a scavenger hunt and recommendations from different providers vary widely.
 - Jennifer Bertram shared that she thinks empowering parents could be a good theme throughout these recommendations would be very helpful and finding ways to use the knowledge and skills of the PCLG members would be really important to help connect the dots on work that we are all doing separately. Parents need information but also validation that they know their children best and have good knowledge and experience to share with the county and providers too.
 - Angela shared that she feels there is a perception that providers are the experts, but really, parents, caregivers, and the children seeking care are the experts in their own lives. They know what they need best and as providers we need to be able to hear them out and connect them with services that meet their needs.
- Fatima shared that we will now go into breakout sessions to discuss awareness of services and supports, navigation assistance, or peer support. Cheryl expressed that we will further discuss the other recommendations at future meetings, but these are the 3 we have chosen to discuss today.

Small Group & Survey Responses

Questions	Awareness of services and support (led by Fatima Muhammad)	Navigation assistance (led by Hayley Tompkins)	Peer support (led by Cheryl Holm-Hansen)
<p>1. How do you help parents understand what children’s mental health services are available in Hennepin County? In your school, hospital, organization, etc.?</p> <p>a. What innovative approaches are happening to help tackle this persistent challenge?</p>	<ul style="list-style-type: none"> ● The group discussed that parents, families, and even providers lack awareness of all available services in the county. They suggested having a few people whose role it was to be aware of all services and providers could reach out to them to help with referrals. ● Hennepin Healthcare has previously hosted training focused on infant mental health in collaboration with community partners. ● I provided information about COPE and FSS 	<ul style="list-style-type: none"> ● Primary health care, schools, and case managers were recognized as being the places where parents and families should be able to find navigation support, as these are the services that many families get introduced to the system through. ● In order for these places to provide navigation assistance, we need a stronger workforce and greater communication between agencies, 	<ul style="list-style-type: none"> ● It was pointed out that Facebook groups are the main place where parents have found peer support . ● The group said providers are often unaware of peer support programs. ● Word of mouth is also how parents learn about peer support, but because of fear of judgment word of mouth is often harder.

	<p>with our Next Step families to help build awareness.</p> <ul style="list-style-type: none"> • Share and search information on social media • Change Inc. is a provider of mental health services - school-based mental health in MPS and Osseo School district; community clinic in NE Mpls; FRSS. These services/programs are our venue for connecting with parents in HC. Parents are often referred to other mental health services as part of their involvement in our programs. 	<p>programs, and providers.</p> <ul style="list-style-type: none"> • Navigating services feels nearly impossible when families are stressed managing the mental health needs of their children and the impact on their family, until you connect with one "right" person who understood systems. 	
<p>2. How do you help them navigate the process of accessing children's mental health services?</p> <p>a. What innovative approaches are happening to help families get what they need to support their children?</p> <p>b. What led your organization to doing something different?</p>	<ul style="list-style-type: none"> • Our organization started doing things differently because mental health and substance use are a significant issue resulting in patients seeking care through our emergency room. • Community conversations are crucial to have voices heard, blind spots identified, and possibility and opportunities are brought to light through this. • Host health fairs in community – with some focused on specific community members, e.g. African American and Hmong families 	<ul style="list-style-type: none"> • It would also be helpful to have a flowchart for parents in the area that is easily searchable online. 	<ul style="list-style-type: none"> • Blue Cross Blue Shield has programs in other states in which they connect parents to peer support but not here. • We need a concrete way in which parents can seek peer support out.
<p>3. How do you work with parents to help them find supports for themselves and family overall?</p> <p>a. Are you, or anyone you know,</p>	<ul style="list-style-type: none"> • We could invite more partners to these meetings so that we are in discussion with more agencies about how to solve this lack of awareness. 	<ul style="list-style-type: none"> • NAMI has educators and support group services in English and Spanish. 	

<p>doing anything different with families to get them the information they want and need?</p>	<ul style="list-style-type: none"> • Change Inc offers family response and stabilization services (FRSS) to help families find supports through these connections – similar supports are offered to other programs, such as family, friend and neighbor child care providers. 		
<p>4. How might we collaborate and/or coordinate to make information available? What are we doing to learn from one another about what is working, especially in racially, culturally and linguistically diverse communities?</p>	<ul style="list-style-type: none"> • There is a lack of BIPOC providers and we need to advocate for increased funding for peer support models and services. 		
<p>Other a. Do we have the right people engaged with us through the Collaborative? If not, who do we need to include?</p>	<ul style="list-style-type: none"> • No, the focus is not on system coordination but more on parent and youth engagement and COS. The collaborative is trying to do too many things at once. Either we focus on the SOC and the grant which may require new members, or we focus on system coordination and onboard members on what that means. • We may want to engage Cultural Wellness Center 		<ul style="list-style-type: none"> • If you are looking to get more Family Peer Specialists, Shelly White at DHS would be the person to talk to. She coordinates the training and has connections to peers. One group to think about bringing to the table is cultural liaisons at schools. They will know the communities needs and probably connect families with supports. NAMI Minnesota Legislature initiatives this year include setting up a structure and a board for Peer support services. And ongoing asking for money to support PEER support in Minnesota. (Education and employment)

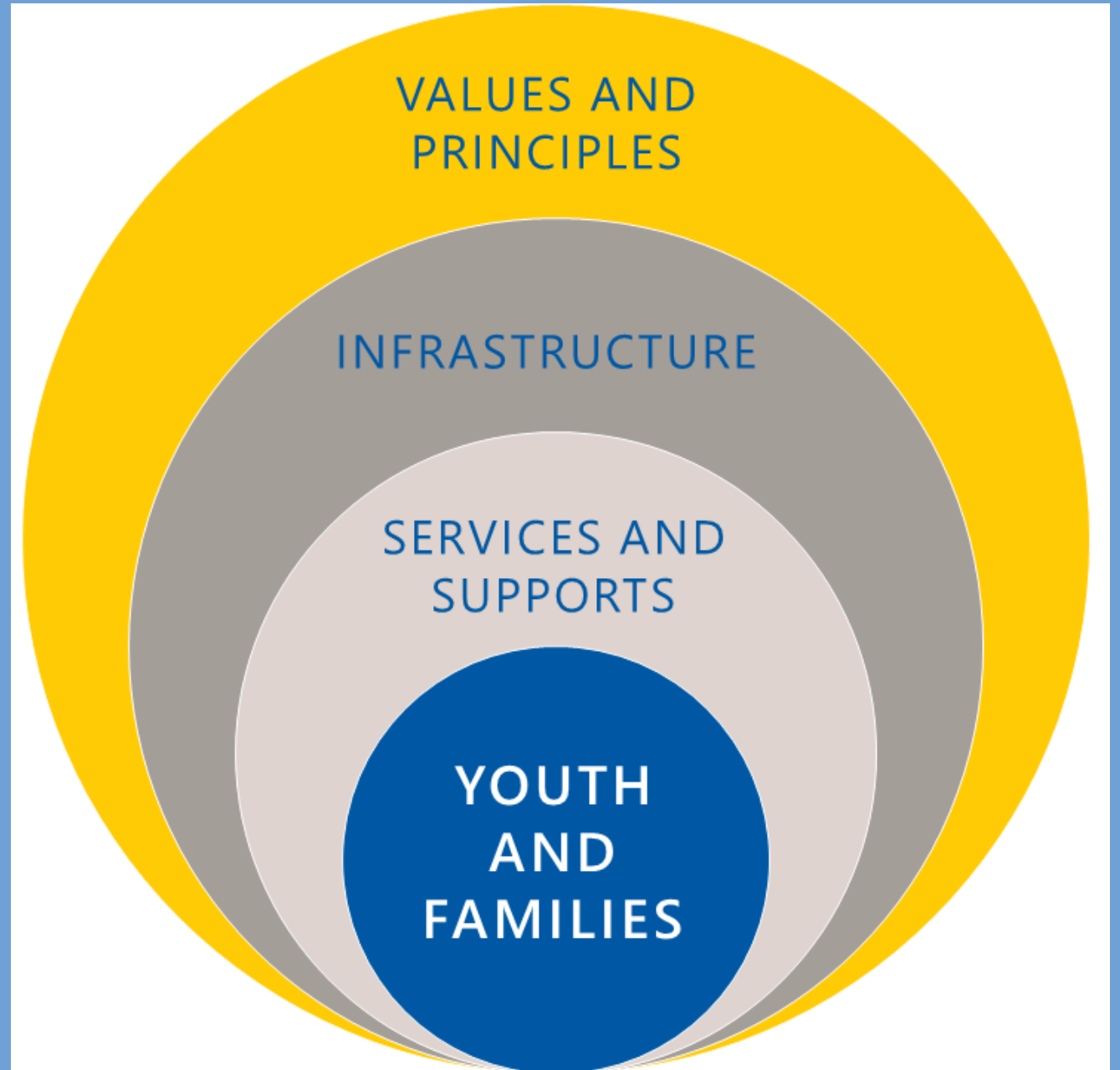


HENNEPIN COUNTY

**CHILDREN'S MENTAL HEALTH
COLLABORATIVE**

**Parent and Caregiver Themes & Recommendations
about Improving Children's Mental Health
Services and Supports**

COMPONENTS OF SYSTEM OF CARE



THEMES AND RECOMMENDATIONS



Access to Timely, Convenient, and Linguistically- and Culturally-Appropriate Services

It is very difficult for families to find accessible and affordable services – access to equitable services is critical to the wellbeing of families



Awareness of Services and Supports

The children’s mental health system is complex, and it is very difficult for families to learn about what services and supports may be available



Navigation Assistance

There is no “road map” for services, so it is helpful when trained navigators help families understand options, identify supports that best align with needs, and reduce access barriers



Peer Support

It is helpful for parents to connect with other parents with lived experience for advice and emotional support



Workforce

Workforce shortages lead to long wait times, disrupted services, and a lack of culturally-appropriate care



Service Coordination

Families often need support from multiple agencies, with services that are fragmented, inconsistent, and uncoordinated



Role of Schools

Families often seek support through the schools, but can face limited resources and unclear processes for receiving help. Schools could play an instrumental role in supporting families



Family Driven

Families often feel powerless and minimized in their interactions with providers and the broader mental health system



Family Education

Parents do not always feel that they understand mental health and how to support children with mental health needs



AWARENESS OF SERVICES AND SUPPORTS

The children's mental health system is complex, and it is very difficult for families to learn about what services and supports may be available.

- **Develop or distribute resources:** Compile and distribute translated and culturally-relevant resources for parents to help them learn about and access services, connect with peer support networks, and find community-based programs
- **Actively share information and resources:** Share information with families through social media (e.g., Tik Tok), in-person events, (e.g., convenings, sporting events, cultural events) and through community agencies (e.g., schools).
- **Disseminate clear and accurate information about available services:** Revise program information sources, such as websites, to ensure that parents can easily find information to help them understand what is offered and the potential “fit” for their family (such as age ranges served, services provided, languages spoken, and insurance accepted).



NAVIGATION ASSISTANCE

There is no “road map” for services, so it is helpful when trained navigators help families understand options, identify supports that best align with needs, and reduce access barriers

- Train navigators: Train navigators to work in a wide variety of settings to support families (i.e., community programs, schools, early childhood programs, culturally specific programs, health care programs, and other sources)
- Provide personalized navigation and referral support to families, especially for those with limited English proficiency: Expand navigation support, to help families identify and obtain appropriate supports; address emerging needs, and reduce access barriers.



PEER SUPPORT

It is helpful for parents to connect with other parents with lived experience for advice and emotional support

- **Develop and promote opportunities for peer support:** Develop, support, and promote peer support groups, to allow parents to share resources and provide mutual support
- **Offer community gatherings and other events:** Facilitate opportunities for parents to come together for education, resource sharing, and empowerment

Program & Business Updates

March 19, 2024

Program Updates

1. System of Care Integration

The Coordination team is working with Hennepin County Behavioral Health leadership to articulate and clarify how the Collaborative's and County's efforts to support system of care services and value integration throughout Hennepin County are aligned. This clarity will inform our shared strategies to make the system more responsive to families.

2. Scholarship and Education Funds

Scholarship and education funds are available to parents and caregivers with children experiencing mental health challenges, youth with mental health services, and providers of children's mental health services. Eligibility and application forms are available online;

<https://hccmhc.com/scholarships/>.

3. PCLG Leadership Updates

- Community Meetings, called **Coffee and Conversations** are offered monthly with parents and caregivers, some in person and online, to better connect them with other parents and understand how they can engage in our work. The next coffee and conversations will take place:
 - Saturday, April 20th - 11:00am-12:00pm at Lunds & Byerly's in Uptown, Mpls
 - Monday, May 6th - 6:00-7:00pm - virtual ([link](#) or https://docs.google.com/forms/d/e/1FAIpQLSecPyDpnrRrlz1EMJxnjINXGglwez-xHyDjka49MPaCGAZDxow/viewform?usp=sf_link)
- Parent updates can be found on our (NEW) [facebook page](#) here: <https://www.facebook.com/profile.php?id=61556797940198>
- We are recruiting parents! A new **online Recruitment** form is available. This will be added to the website and we encourage all Collaborative partners and team members to share with interested parents; <https://docs.google.com/forms/d/e/1FAIpQLScXAs-Jcad7WTD-BTOaibbzRTyZGV-RdrAkbnbS5EOFT9pT4Q/viewform>. Once an interested person completes the form, Hayley and a parent representative will meet with them to share more about the Collaborative and parent leadership goals. Parents will be invited to participate in one of four groups.
- PCLG offers **four action teams** and quarterly parent leader meetings. Job descriptions have been provided for each action team.
 - i. [Connect & Support](#). (Purpose is to provide informal space for caregivers to connect with others who 'get it'. Goal is to increase the number of spaces for caregivers to connect with one another and increase their capacity for self care.)

- ii. [Education & Training](#). (Purpose is to increase understanding around children's mental health. Goal is to increase the knowledge of caregivers around key issues in children's mental AND to increase the knowledge of professionals around the needs and experiences of families and caregivers.)
- iii. [System Navigation](#). (Purpose is to support caregivers who are feeling stuck, unsure of, or frustrated by the children's mental health system. Goal is to increase the number of supports and resources for caregivers to navigate and access resources in the children's mental health care system.)
- iv. [Advocacy & Systems Change](#). (Purpose to represent the voices and priorities of caregivers at the system and policy level of children's mental health. Goal is to attend Collaborative and other meetings around children's mental health, and to provide coordination of other PCLG strategies.)

4. Youth Mental Health First Aid

- Beacons/YMCA began coordination and training of the Youth Mental Health First Aid (YMHFA) for the Collaborative.
- 30 people have been trained in February and March 2024
- If your organization or community partners are interested in receiving training, please reach out to Hayley Tompkins; hayley.tompkins@ymcamn.org.

5. Family Engagement

- Family engagement events and meetings are continuing to gather information from parents, caregivers, and community members directly related to the goals of Hennepin County's SoC grant. The responses to questions will be collected and shared with key Collaborative and County partners and stakeholders to identify strategies to improve responsiveness to the needs of children, youth, and families.
- We are identifying and partnering with culturally specific family-serving organizations, and developing strategies to collaborate closely with them. Our aim is to amplify the voices of racially and culturally diverse families, ensuring that our children's mental health services and initiatives are inclusive and equitable.

Business Updates

6. LCTS Report is Due to DHS by April 30th.

- Data from District 287 and DOCCR will be included in the final report. Laura will reach out to team members to obtain information.
- DHS will be reviewing all Governance Agreements for Family Service and Children's Mental Health Collaboratives in Hennepin County. We expect this will require changes to the Children's Mental Health Collaborative's Governance Agreement as well as the finance agreements in Hennepin County.

7. **2023 Annual Report.** Data is still being gathered from programs (see reference below under Gun Violence Prevention grantees). Once this is available, we'll share with Collaborative partners to discuss our impact.

Governance Committee Meeting Minutes

March 20, 2024

In Attendance: Angela Watts, Pat Dale, Jenna Mitchler, Asad Dahir, Meredith O'Brien, Cathy Rude, Debby Wells, Brenna MacDonald, Krista Phillips, Megan Hickey, Monica Long, Pat Vitale, Rachel Harris, Susie Voss, Andria Daniel, Melanie Hultman, Jody Nelson, and Beth Lovre
Staff: Laura LaCroix-Dalluhn, Cati Gómez, Fatima Muhammad, Cheryl Holm-Hansen, and Hayley Tompkins

Approval of Meeting Minutes & Agenda

- Monica Long moved to approve the February minutes and Pat Dale seconded. Minutes approved.
- Meredith O'Brien moved to approve the March agenda and Krista Phillips seconded. Agenda approved.

Continue Discussion on Parent/Caregiver Recommendations on Improving Children's Mental Health System

- Laura LaCroix-Dalluhn shared that we will be continuing our conversations from last month's meeting on parent recommendations to improve awareness building, navigational support, and peer support for children's mental health services in Hennepin County.

Below is a brief summary of the small group discussions.

- **Awareness Building**
 - Fatima Muhammad facilitated a discussion about helping parents and caregivers understand the services available in Hennepin County and how to get connected to said services as well as which systems are best for connecting parents and caregivers to these services. Schools were immediately identified as a key resource; however, school staff are not always aware of all the resources available. It is extremely difficult for every school staff person to know of every resource. Having a point person in the school district for referrals would help connect families to appropriate resources. It would be helpful if schools made informational videos for families highlighting the services available through their school and how to connect to these services, including the direct providers in these videos to familiarize them with the families.
 - Outside of schools, a point person or people for the county would also be helpful, it's currently in discussion to contract a provider to aid in referral services. Additionally, families could be referred to services through FRSS, family home visiting, and PACER, but families must first be aware of these resources. Having relationships with HC providers helps families identify resources and may allow for shorter wait times. Building awareness amongst providers and caregivers on

why racially, culturally, and linguistically diverse services are important would allow for more client-centered referrals.

- NAMI has a “Caregivers Guide to Mental Health”, sharing this out more would allow for further awareness. Furthermore, Basecamp, an online platform can also aid providers in finding appropriate resources.

- **Navigational Support**

- Hayley Tompkins facilitated a discussion on how best to support caregivers navigate the process of accessing children’s mental health services. Some of the key challenges for caregivers in the navigation process currently are the proximity of services, having the time and energy to search for resources, not knowing what will fit best, insurance, waitlists, changing eligibility, and a lack of language-specific family navigators.
- A lot of people, including school staff, fall into the navigation role, the challenge is that each person is aware of all resources, so families are only given a slice of the pie based on who they are working with. Creating an ‘in-school navigator’ role may bridge this gap as schools are a system in which most families are involved. Often families do not stay with the same navigation support staff between different services, ideally, navigation support would stay consistent. Overall, the best practice is to find resources and make referrals with the family instead of passing off resources.
- A promising practice outlined in this discussion was District 287’s contract with Hennepin County to create a systems navigator who would help in providing a warm hand-off for families. Family Advocate Services will go to spaces and connect newcomers with cultural and language-specific services. Other resource lists are helpful; however, they get outdated quickly and many agencies create their own resource lists without collaborating with other agencies. Could we work to coordinate a comprehensive resource list across the county?

- **Peer Support**

- Cheryl Holm-Hansen facilitated a discussion about peer support resources available currently, challenges to accessing these resources, and how to increase access to peer support resources. Peer support resources highlighted include NAMI’s family support groups for parents with children under 21. These groups offer classes, one-on-one support, and provide referrals. Additionally, DHS offers opportunities to be trained as peer support specialists. However, there is a lack of capacity and no specific board or training expectations, so this model does not work as well in Minnesota as it does in other states. There are many other informal parent support groups and networks. Still, there are no specific training requirements and providers are often unaware of these groups, so caregivers are not finding these groups easily. Additionally, Next Step at Hennepin Health has a weekly support group related to trauma healing.
- Some challenges to accessing these resources include a lack of funding or a reliance on grant funding specifically which raises sustainability issues. Furthermore, not many providers are aware of the parent support groups available. Caregivers may find NAMI or PCLG on their own, but they are rarely

connected to these resources through a provider. Since schools are often how caregivers are connected to services, it would be helpful for information about these groups to be shared with school staff, including school-based mental health professionals and therapists. Additionally, sending information about peer support resources to other providers in the county directly would allow for more awareness.

- Another challenge is that there are not enough culturally and linguistically specific peer support resources. We have to be careful in the language we use when raising awareness of these services, mental health is not always universally understood so we need to make sure our language is accessible. We could update the language on the HCCMHC surrounding peer support to ensure this.
- Laura welcomed everyone back from their discussions. The table provides a summary of the report out and follow up actions.

Discussion Points	Follow Up Actions
<p>Awareness Building</p> <ul style="list-style-type: none"> - Fatima shared that her group discussed awareness as building and maintaining relationships with those we serve, going into the community to help refine services and understand what is needed, and aiding in the referral process. - Some needs that were highlighted include coordination with agencies to have a responsive awareness-building strategy county-wide and designating time with community members so that their voices can be centered. 	<ul style="list-style-type: none"> - We need to explore how organizations can build the capacity for increased navigational support and how we, as a collaborative can support that work. - Angela Watts stated that if we want to drive action in building awareness, navigational support, and peer support, we need to have action-oriented people at the table collaborating with us. - Rachel Harris asked if there was a way that HCCMHC could collaborate with school-based mental health, SBMH, and providers across Hennepin County to coordinate a plan on how to raise awareness of services. A lot of what we've recognized is that schools are often the first access point, and we want to ensure that these providers have the tools to connect families with the right resources. Rachel shared that this is often being done at the school level but could be much more efficient and comprehensive at the county level. Meghan Hickey added that parents would like access to the same resources no matter where they live. Moving the source up a level would provide families with better services. Angela suggested that we continue this conversation and invite Mark Sander and Laura Zook to the conversation to include
<p>Navigational Support</p> <ul style="list-style-type: none"> - Hayley shared that identified challenges to navigational support included accessibility, a lack of long-term connections, waitlists, changing eligibility, and a lack of relationship-building between navigators and families. - Some cool things working to bridge these gaps that were discussed include that District 287 is contracting with system navigators to aid in warm handoffs, Children's MN is working to create infrastructure to further support navigation, and the NWFSC is working with an organization doing culturally/linguistically supportive services. 	

<p>- Hayley shared that the group defined navigational services as providers or professionals working with families to whom they are connected and supporting them into the next step or connecting them to further resources. Rachel Harris added that they also discussed resource lists as a form of navigational support.</p>	<p>their insight.</p>
<p>Peer Support</p> <p>- Cheryl shared that her group discussed peer support as largely being made up of parents and caregivers being connected to other parents and caregivers for emotional support, guidance, and compassion. There are parent peer specialists, unfortunately, there is currently not great infrastructure to support this formal form of peer support. Peer support can also be provided through support groups and Facebook groups.</p> <p>- Challenges to accessing these supports include lack of awareness, unfamiliarity, and a lack of culturally and linguistically specific supports. Cheryl shared that this group asked how we could get information about the peer support resources that are available to school staff, case managers, and other providers that could aid in connecting parents to these resources.</p> <p>- Pat Dale added that the group also discussed having peer support services on resource lists.</p>	<p>- Pat Dale suggested we update our website to include more peer support resources. Laura added that we could also utilize Google Analytics to draw people who are searching for parent and caregiver support to our website. Laura stated she will invite Mark and Laura as well as some SBMH providers to continue this conversation.</p>

Laura asked Asad Dahir if FRSS has navigational or peer support resources. Asad answered that FRSS is meant to be the first line for parents who are concerned for their child’s mental health, he said FRSS providers identify the needs of the child and the family and work to fill those needs, including navigation support and making families aware of peer support.

Adjournment

- Krista moved to adjourn, and Angela seconded. Motion approved.