



Community Partner Meeting

August 21, 2024, from 12:00 – 1:30pm

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

Proposed Agenda

12:00 pm **Welcome & Introductions**

12:15 pm **Coordination and Support for Children's Mental Health Services**

Discussion Context: Funding for children's mental health support services is shifting, leaving many schools and community organizations in Hennepin County with gaps in their budgets and concerns about meeting the mental health needs of children and youth.

Additionally, families continue to express the need to better understand what mental health supports and services available in their community and school to support their child and family.

Discussion Question:

How can Children's Mental Health Collaboratives (CMHC) best support families, schools, and community organizations to prepare for these changes in resources and services?

1:15 pm **Community Updates**

1:30 pm **Adjourn**

Next Community Partner Meeting
November 20, 2024, from 12:00-1:30 PM

Mission Statement:

The Children's Mental Health Collaborative (CHMC) 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.



Community Partner Meeting Summary

June 26, 2024

In Attendance: Amy Hanson, Andria Daniel, Anita Silver, Annie Lumbar Bendson, Annie McDaniels, Asad Dahir, Beth Dahline, Beth Lovre, Brandon Jones, Cari Lindberg, Connie Robertson, Emily Johnson, Jane Perry, Jody Nelson, Kasey Abukar, Krista Phillips, Lisa Kiesel, Liz Baumgartner, Mark Sander, Meghan Hickey, Meghan Cain-Moss, Melanie Hultman, Meredith O'Brien, Monica Long, Ms. Washington, Rachel Harris, September, and Traci Luniewski.

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

Welcome & Introductions

- Pat Dale welcomed everyone and thanked them for attending. Pat shared the collaborative's mission statement, The Children's Mental Health Collaborative (CHMC) 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.
- Pat shared that the Children's Mental Health Collaborative is a quasi-governmental Collaborative focused on providing a forum for stakeholders to influence the development and ongoing operations of an accessible and effective children's mental health system in Hennepin County. Pat shared that the collaborative has made the commitment to work toward a system of care, to transform the children's mental health system, one designed to meet individual youth and family needs in the least restrictive and most appropriate setting. Systems of care are culturally responsive and focused on the strengths of youth within families. The collaborative is working with Hennepin County partners to support this effort to transform the children's mental health system and is working with the broader community and families to coordinate and transform children's mental health services. Pat added that today is the first-ever Community Partner meeting and we are excited to bring an array of interested people and stakeholders together to discuss how the children's mental health system can improve and become more responsive, specifically the school-based mental health system.

Discussion Focus: Coordination and Support for Children's Mental Health Services

- Pat shared that we are starting our community partner meetings with a focused discussion on how the Collaborative can help coordinate and support children's mental health services with schools, families, and community organizations. Pat highlighted that this question has been raised because federal pandemic funding for children's mental health support services. Pat explained that during the pandemic, the federal government

increased resources to schools, through ESSER funds and ARPA funds to meet the needs of families, communities, and businesses. Hennepin County chose to use some of its ARPA funds to invest in children's mental health services, knowing it was one-time funding. Part of their investments focused on expanding school-based mental health services across Hennepin County. Now, these federal funds are coming to an end when children's mental health is still a large concern and services are still needed. Pat asked if Mark Sander would be willing to share where the Minneapolis School district is at this point in relation to school-based mental health services.

- Laura LaCroix-Dalluhn highlighted that ESSER stands for the Elementary and Secondary School Emergency Relief Fund and ARPA stands for the American Rescue Plan Act.
- Mark Sander shared that currently, school-based mental health services are available in every public, non-charter school in Hennepin County, including intermediate districts. Through the funding earlier identified, Hennepin County was able to expand school-based mental health services into 24 more schools that did not have any prior to this funding. As we look at the next school year in Minneapolis, Hennepin County and DHS came together with Minneapolis and were able to find funding for another school year which will allow us to do some planning around how to continue to support Minneapolis students even with this loss of funding. Mark shared that for Hennepin County, the ARPA funding will end on December 31st, 2024, however, DHS stepped in once again and will provide funding through the end of the school year. Mark added that the Medicaid rate has been flat for a decade or more and oftentimes, funding has not kept up with inflation. Jody Nelson added that in general, the model of finding funding to support ancillary services at about a third of the cost of one FTE works well if you work in a high-poverty, elementary school, and does not work as well in most other settings such as smaller schools, alternative education, and level four settings. Jody explained that ancillary services are services that are non-billable services that are still significant to the work of school-based providers, like consulting with school staff or parents, and that level four is a level of care for students who are receiving special education services on their IEPs and is typically the most restrictive setting with the most amount of staff support for students. Mark suggested that we discuss how schools and school districts get additional funding for student support.
- Pat highlighted that Meghan Hickey, with the Minneapolis School District, is present and asked Meghan if she would like to share anything else that is happening with children's mental health services within Minneapolis Public Schools. Meghan Hickey shared that this loss of funding is not fun by any means, however, it does give us a chance to reexamine our funding processes and explore ways of funding that support more schools and students within Hennepin County. Rachel Harris asked how much ESSER funding we are losing, Laura shared that it will vary based on the school district, and for some schools, it is pretty significant. Meghan shared that in Minneapolis schools, it likes 300 million dollars. Anita Silver added that the pain point for people who have insurance is

that their deductibles are increasing, so a lot of people are not uninsured but are underinsured. Pat added that oftentimes families are not used to paying for services they receive in a school building, for legitimate reasons, and that adds a layer of complication. Mark shared a research paper on [school mental health services in Hennepin County](#).

- Laura shared that we would like to use the remainder of our time discussing how the Collaborative can help coordinate and support children's mental health services with schools, families, and community organizations. Laura shared that the collaborative has been meeting with parents, caregivers, and other stakeholders around children's mental health so we are trying to build on this and are thankful that people are here and excited to explore how we can improve the children's mental health system within schools. Laura highlighted that the collaborative in its efforts to reach out to parents and caregivers has received some pretty consistent information. What we heard is that generally, parents find it extremely challenging to enter the children's mental health system. There is not one clear way to enter the system, it is not always clear who to go to for advice, and how they enter the system often dictates the entire process. There are long wait times for assessment and referrals which oftentimes leaves families leaving unheard and unsupported. Laura highlights the Family Response and Stabilization Services, FRSS, which is available to all families in Hennepin County with children aged 0-18. Families can reach FRSS by calling 612-979-9511 and will be provided with services within hours of their call. Laura added that we also heard from families that they rely on a number of different supports such as youth programs, summer programs, and more. As a result of this feedback, we are providing more Youth Mental Health First Aid Training to train adults who work with youth how to best address mental health needs as they arise in any setting. Laura also highlighted that families have asked for culturally and linguistically specific and appropriate services and would like to further discuss how we can connect families to these services in a timely efficient way.
 - Ms. Washington added that she is concerned that a lot of parents are unaware that school-based mental health services exist, especially non-white parents. Ms. Washington shared that she feels it is important to explore ways that more parents can learn about these services faster. Amy Hanson shared that it took two years for her to learn about the school-based mental health services offered at her child's school and she feels the word is not out there. Amy shared that she would love to see DBT, Dialectical behavior therapy, in schools, even though it's far out there. Meredith O'Brien shared that she is in DBT with her daughter right now, and as someone who is experiencing it, she feels it is beneficial in teaching emotional regulation and fostering healthy relationships. Mel Hultman added that she knows that teachers already have a lot on their plate, but they seem to be the ones directly interacting with parents more, so it would be great if teachers were knowledgeable on the school-based mental health services offered in their school and were able to share that with parents.
- Laura asked how might the collaborative help schools, school leaders, and school staff as they prepare for these funding changes so they can respond to the needs of families

and youth and what role might the collaborative play. Pat suggested people also think about what would be helpful to them in general, not just in relation to the collaborative.

- Connie Robertson shared that she wonders how we can best get other resources out to the school districts and communities so families can reach those services even outside of the school.
- Jody Nelson shared that it has been a pretty rough year in schools for staff and students, and she feels that school-based mental health programs used to be used on top of school mental health services already in place for students who needed extra support, but it has expanded and more and more students are needing that extra support. Jody shared that she feels that with the level of need in schools amongst students and staff, school-based mental health programs now act as comprehensive care for the entire school.
- Beth Dahline shared that she is curious about how we can support everyone working to support school mental health services. She feels this loss of funding, the work shortage, and more are causing stress for the adults doing this work that is then moving to the students.
- September shared that as a parent of a student who accesses school-based mental health, as a former teacher, and now as a manager of a mental health program in an agency that serves level 4 settings, she thinks about the equity and access of this system. There was a time when schools didn't provide lunch, bussing, or special education programs. She is curious about when and how we can look at mental health services as commonplace in schools and how can funding be available to all schools. September shared that she thinks about the packet that comes home at the beginning of each school year that includes forms for income information, permission slips, and more, and shared she wonders when school-based mental health services can show up in that packet.
- Jane Perry shared that they have one therapist in each of the schools that they are serving in the Hopkins and Osseo school districts and if they are lucky they can get a second therapist in, our sense is each school could easily utilize three therapists with full caseloads. Jane shared she wonders how schools should prioritize who receives services because with how it is now, they cannot serve every student that would benefit from these services. Liz Baumgartner shared that in the building she is in the Wayzata district, they have 1,500 students and one therapist, and even with school social workers and school counselors, it is hard to serve all the students.
- Laura shared that about additional resources if we are thinking big picture, services may not have to be in the school building and could instead be with community partners. Laura shared she wonders how we could wraparound children and families when they are in school to connect them with community partner resources.
- Laura shared that the next thing we wanted to focus on is how we can prepare students and families for the changes in funding and resources.
 - Amy asked that when there is a long wait time for a school-based service, how can the schools be proactive in letting students and families know about other

services in the area? Pat added that another piece to that question is who should be doing that outreach. Liz said that the way they do it in her school is the referrals come through the counselors and social workers in the building and they handle that kind of communication. Liz shared that unfortunately, her district does not allow students to take virtual appointments with outside agencies during the school day which makes it more complicated. Laura shared that this could be a further discussion point because this is not what's best for parents but in our current systems schools have to do this. Mel added that it would be helpful if schools had a general list of other services available in the community when students are unable to access services within the school.

- Beth Lovre shared that NAMI is looking at a layered approach coming in a family peer specialist, they go into classrooms and talk mental health, and this year they are setting up a series of classes where those teachers can then send out a QR code to parents that allow parents and caregivers to learn about early warning signs, coping skills, and services available. Beth added that many parents are not used to talking about mental health, oftentimes because of the stigma related to it, so NAMI is working to not only teach students about mental health but also their parents and caregivers.
- Connie shared that as a parent, she feels some of the information she sees the most at her kid's school is the information posted on the inside of bathroom stalls.
- Fatima Muhammad shared that she is the parent engagement coordinator of the children's mental health collaborative, specifically working with communities of color, Black, Native, and Latino, and thanked everyone for speaking on the need for awareness. Fatima highlighted the importance of communicating through parents through out-of-school means such as sporting events and shared that she knows of one school that promoted 988 by showing it on the screen at their football halftime show.
- Pat said that we are up against time, and shared that we will meet for another community partner meeting on August 21st. Laura shared that Cheryl Holm-Hansen shared a short survey in the chat for people to provide feedback on how this meeting went, and any other feedback. Pat thanked everyone for attending this meeting and encouraged everyone to come back to continue this conversation.



Community Partner Meeting Summary

August 21, 2024

In Attendance: Andria Daniel, Angy Restrepo, Ann Marie DeGroot, Annie Lumbar Bendson, Asad Dahir, Beth Lovre, Brandon Jones, Elizabeth, Krista Phillips, Lindsey Leseman, Melanie Hultman, Monica Long, Ms. Washington, Pat Vitale, Susie Voss, Triasia Yun-Robinson

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

Welcome & Introductions

- Pat Dale welcomed everyone and thanked them for attending.
- Pat shared that he is the current chair of the Hennepin County Children's Mental Health Collaborative and stated he will be moving out of the chair position at the end of the calendar year, so the Collaborative is looking for new leadership. Pat said that Collaborative comes together to support children, youth, and families receive mental health services, and to make that process more accessible and overall better. Pat shared the collaborative's mission statement, The Children's Mental Health Collaborative (CHMC) 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.

Coordination and Support for Children's Mental Health Services

- Pat shared that we are convening today to continue our discussion from June on the changes coming to school-based mental health services and how we can best support students, families, and staff during these changes. Funding for many school-based mental health services is ending at the end of the current school year, and we are hoping to collaborate with school systems, school staff, parents, and community members to determine how we can best support children and families prior to and after this shift in resources.
- Pat outlined some important themes discussed during the last Community Partner meeting, including that some students are having to leave school for some mental health services, that parents shared that they were unaware of mental health and mental health support resources in schools, and some examples providers shared of how information school-based mental health resources are shared with students and families.
- Pat posed the question for this community partner meeting. How can Children's Mental Health Collaboratives (CMHC) best support families, schools, and community organizations in preparing for these changes in resources and services?
 - Ms. Washington shared that she feels it's significant that we not only focus on building awareness around school-based mental health but also trust with

students and families. There are so many stories of families in school systems that need resources that are underserved, and Ms. Washington shared she is starting to realize that knowing about and being able to focus on mental health is a luxury. Ms. Washington asked, how do we get parents, caregivers, and students to trust these resources enough to access them? Ms. Washington shared she feels school-based mental health providers and school staff need to be more proactive about sharing resources with families and less reactive.

- Asad Dahir added that sometimes it feels that school-based services are narrowly focused on mental health when there are often so many other factors that go into a student's and their family's needs. Asad shared that he feels we should explore how we can make sure that school staff, providers, and other individuals who have contact with students and families are aware of Family Response and Stabilization Services, [FRSS](#). Asad shared that FRSS works with families to identify the needs and wants that they identify and are not just focused on one aspect of care. Asad asked that if anyone knows of any additional circles he can connect with to share information about FRSS please let him know. Asad said that sometimes families feel that they are in the middle of the ocean, and the goal of FRSS is to teach them to swim.
- Fatima Muhammad thanked Asad and Ms. Washington for sharing. Fatima added to what Ms. Washington shared, too many times she has seen families get connected with services after a behavior or an incident. Preventative approaches are often absent or selective, largely due to bias. Fatima shared that she would like us to be very intentional about identifying families and those supporting families where they are and really bringing this information and support to the center of everything we do. Fatima shared that when she visits her local library, she does not see information on FRSS or mental health unless a particular event is being promoted. The same is true at the laundromat and food shelves; this information is missing from where families are. Fatima shared that she would like to see us create and implement a plan and strategies to move this forward and become a part of our culture.
- Laura LaCroix-Dalluhn thanked everyone for sharing and asked, how we can partner with parents in sharing this information in a way that might best speaks them. Laura asked if any parents had an idea of how to better disseminate information to parents.
 - Triasia Yun-Robinson shared that as a Black provider in Minneapolis Public Schools, she feels the people who are part of the implementation process often determine who accesses the services. Triasia shared that she sees a lot of gatekeeping of services, students and families are sometimes labeled as difficult and get ignored by providers. She added that she is tired of people saying that providers just need training because this training is not working, it's a problem at the implementation level. People get territorial over services and even families who are asking for services are overlooked. Triasia asked, how can these providers be held accountable in a way that we can move forward and do the action?

- Ms. Washington agreed with Triasia and said it sometimes feels like a secret society. Ms. Washington added to what Fatima said, sharing that she feels there is a need in libraries and other community places to have information about mental health services. Adding that maybe librarians could even be trained on mental health or briefed on resources in the community.
- Pat Dale thanked Ms. Washington, Triasia, and Fatima. Pat asked the providers at the table how they are getting their information into the community.
 - Pat Vitale shared that they at Children's, have mental health providers in all of their primary care clinics so that families can be immediately seen, assessed, and followed up with in a manner the provider sees fit. Laura asked Pat Vitale to share more about how the families get this information at the clinic and asked if families have to ask for it or if it is proactively offered. Pat V. shared that providers should be bringing up mental health with every family they serve, but she cannot say that every provider always does.
 - Brandon Jones shared that MACMH is focusing on empowering parents by educating them on mental health and available services and aiding parents in advocating for their children's needs as well as their own. Brandon shared that they are utilizing the Sources of Strength structure and language to help parents with this. Brandon stated that he is hoping to do a bigger roll-out of this so that all parents have access to these types of ways of communicating. He shared that MACMH has seen that this angle, helping the parents advocate for their child helps more than doing work with the system and the providers. Brandon asked that if anyone would like any of these resources, let him know.
 - Triasia shared that she has been doing work to eliminate Black youth suicide. She does this through focus groups, holding vigils, and more. She shared that she often sees youth with high-risk behaviors getting arrested when in reality they are exhibiting suicidal ideation. Triasia stated that she would love to explore how we can break the stigma around these behaviors and create more understanding.
 - Pat Vitale shared that some kids are internalizers and some kids are externalizers. Children who are externalizers are often misunderstood or misdiagnosed, and the behaviors are what's focused on rather than the feelings behind those behaviors, and that's a mistake that is often made by providers and systems. Triasia shared that wordage around mental health in different cultures is so different and oftentimes it is the wordage that prevents kids from getting care. Laura shared that at the recent WRAP training that HCCMHC held, there was language around crisis that spoke differently to different families. Parents called this out and it illuminated how language can change how people access resources.
 - Beth Lovre shared that NAMI is working on communicating with youth more about mental health, they are working with Hayley and the PCLG, and are educating providers on stigma and behaviors that relate to mental health and how different cultures understand mental health.

- Hayley Tompkins shared that Youth Mental Health First Aid (YMHFA) training is available to providers and families. They have trained about 200 people so far this year, with more trainings coming. Hayley shared that people who interact differently with young people are attending, including nature center staff, city staff, and community center staff. Hayley shouted out the PCLG and shared that they are doing exciting things around awareness and working with families. Hayley added that they are getting folks trained to lead Hennepin County parent support groups. Pat Dale asked if we have a sense of how the YMHFA can be a resource for families and not just staff. Hayley shared that everyone who attends receives a card that guides them to the HCCMHC resource page, and people appreciate this resource and are saying they are excited to share these resources.
- Laura said she has seen a consistent interest in digging into how we can best share information about resources with all families in Hennepin County and build awareness. Laura shared that she would be interested in forming a smaller workgroup to dive deeper into this and asked if anyone would be interested in being a part of the workgroup. Andria Daniel, Lindsey Leseman, Fatima Muhammad, and Beth Lovre shared that they would be interested.

Community Updates

- Pat Dale asked if anyone would like to share any efforts that are going on to make services more available in schools or out.
 - Asad shared resources in English, Spanish, and Somali about FRSS.
 - Fatima shared that a focus conversation for Black youth, ages 13-19 living in Minneapolis, on mental wellness is ongoing. Fatima asked that others please share the “Building Better Community Stories” project. Inquiries can be sent to [Kristina Medero](#). An initial eligibility screening must be completed [here](#).
 - Fatima also shared that Allina Health is seeking to meet with parents and caregivers of middle school youth (through partnership with organizations) to engage in focus conversations on substance use. Their goals are to increase self-efficacy of supportive adults in 1. Establishing open, honest communication with youth in their lives, 2. Supporting the youth in their lives in self-regulating and choosing healthy coping skills, and 3. Talking with youth about mental well-being and substance use. They also hope to increase youth’s confidence in talking with peers and supportive adults about substance use, increase adult and youth’s knowledge of harms associated with substance use, and increase adult awareness of and ability to identify substances most used by youth in the Allina Health service area. Fatima shared that a light meal and gift cards to participants would be provided, and asked if anyone was interested or knew anyone who would be, to have them contact [Sydney Hobart](#).
 - Hayley shared that there will be future YMHFA training and asked that people contact her if they know anyone who may be interested.
 - Beth shared that [NAMI’s Youth and Young Adult Resource page](#) may be a helpful resource to share.

- Laura shared that HCCMHC will send a follow-up email with all of the resources shared during this discussion. Laura shared that the Minnesota Behavioral Health Conference will be held soon, offered through the Department of Education and Human Services from November 6th through November 8th. The collaborative is offering scholarships to providers, families, and youth to attend.
- Laura also shared that the collaborative is sponsoring Kente Circle's fall training, which will be held on October 17th and 18th, and we have slots available. Laura asked that anyone interested in attending let her know. Pat Dale added that Kente Circle training is remarkably well done and he recommends it.
- Asad shared that they have been working on expanding [FRSS](#) services, and FRSS is now a 24/7 model with immediate support! Asad shared that there have been over 1,200 calls since the inception of the program, around 400 of which have been this year. FRSS has attended over 90 community events, partnered with many organizations, and is working to raise awareness among all families in Hennepin County. Asad added that they are working to make this service sustainable, but are not planning to change how and when it is available. Asad also shared that [COPE](#) is also a great mental health resource for adults, parents, and caregivers.
- Fatima thanked Asad and his team for creating a valuable resource for the community. Fatima shared that she is curious to hear the outcomes of families that have utilized FRSS, and how the collaborative can support. Asad shared that the data is both qualitative and quantitative, qualitatively, they are seeing a reduction in symptoms and a decrease in the severity of symptoms. They are continuing to gather data and Asad feels that there is data they will be able to present soon. Cheryl Holm-Hansen shared that they will be exploring how to engage families outside of intervention to gather different data.
- Pat Dale thanked everyone for attending. Laura shared that HCCMHC will hold another community partner meeting in November and the Governance Committee will meet in September and October. Laura added that she will reach out to those who shared an interest in the workgroup, and she would like to be able to meet before the September Governance Committee meeting if possible.