Facilitator: JoAnne Malloy Note Taker: Cat Jones

Time Keeper: Norm Checker:

Present: JoAnne Malloy, Cat Jones, Amy Parece-Grogan, Kristin Battis, Rachael Gerber, Nilufer Isvan, Shawn Blakey, Kathleen Abate, John Dawson, Brian Huckins, Rich Sarette, Hannah Ossoff, Karen Cusano, Rekha Sreedhara, Melissa Schoemmell, Paul Kiernan, Helene Anzalone

**Agenda**

1. Mission of the IAC
2. Financial mapping
3. Workforce updates
4. Evaluation updates

| Item | Discussion | Action Items | Who | When |
| --- | --- | --- | --- | --- |
| Mission | System of Care is…  “A spectrum of effective, community-based supports, that is organized into a coordinated network, builds meaningful partnerships with families and youth, and addresses their cultural and linguistic needs, in order to help them to succeed at home, in school, in their community, and throughout life” (Stroul & Friedman 2010)  What other elements should our mission statement include?   * Framework for Decision Making * Evidence Based * Collaboration * Clear Targets, Goals, and Objectives * Youth and Community Centered * Meet goal of serving 400 youth | Draft mission statement | JoAnneShawn | By Aug. meeting |
| Vision | Access and opportunities to services to meet youths’ needs  Serves diverse audience  Holistic treatment  Collaboration and working together  Increased awareness of opportunities to access services  Integrated SUD and Mental Health Care  Youth access services sooner  Lessening severity of treatment & recovery needs  Youth and family-driven  Ensure equal access  Ensure youth experience improved health outcomes  Ensure implementation with fidelity  System is sustained  Support workers and providers on the ground  Reflect a seamless System of Care |  |  |  |
| Review Workforce Startup Plan | Note on Goal #1 – the 10% increase per year reflects work w/ the four pilot sites  How will we engage with provider site (i.e., at SYSC)? – Once a residential provider is chosen, they will be represented at this table |  |  |  |
| NH Children’s Behavioral Health Collaborative Core Competencies | Will be updated to include competencies on SUD/COD | Review draft JoAnne sent and send your feedback | all | asap |
| Wraparound component | This will fall under the 1915(i) Medicaid eligible services  Out of the 100 youth served annually, 20 will be Wrap eligible.  Wrap Intake Form may need to be updated to track SUD/COD | Review Wrap intake form |  |  |
| Evaluation Plan | HSRI is seeking feedback from this group on the draft Evaluation Plan  Logic Model – other external factors outside the control of this group that may affect outcomes?   * Workforce retention   How to measure fidelity of MAT? – MAT checklist, derived from guidelines/guidance documents  Outputs – add Wraparound as EBP  Differences between MAT and other services:   * Seven Challenges can be provided at different levels of treatment * We are not providing the training for MAT * MAT will be provided through a contracted provider, so gathering the data we need to measure fidelity and outcomes will be challenging | Send info on Wrap fidelity measures  Some of us may need an overview of treatment levels as defined in the field of SUD services | JoAnne |  |
| Financial Map | Spreadsheet w/ levels of care as rows; agencies and sources of funds as columns – creates an inventory of resources to support each level of care or service statewide  Our Financial Map needs updating, i.e., Medicaid claims data | Create subcommittee | JoAnne |  |

**Next meetings:**

* **IAC – August 9, 2018 – 1:00-3:00pm**
  + Finalize mission and vision statements
  + Look at updated Logic Model
* **Sept 6, 1:30-3:30pm**
* **Workforce Group – July 23 – 1:00-3:00pm**