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| **Quick recap** | |
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| The team shared feedback of the previous meeting and the priortization of the work plan. The team also shared a current RFI that is active for a resource mapping and referral system for youth mental health services, and the potential for moving from an RFI to an RFP for procurement. | |
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| **Next steps** | |
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| • Michelle to send out meeting invite for next Monday at 9am to finalize work plan prioritization. | |
| • Stacy to share link to RFI for resource mapping and referral system with the group. | |
| • Tim to facilitate conversation between Outreach Implementation Group and Stacy's team regarding app development priorities. | |
| • Tim/Michelle to schedule and organize next large virtual meeting with steering team and implementation groups to kick off implementation phase. | |
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| **Summary** | |
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| **Discussing Meeting Effectiveness and Work Plan Progress** | |
| Michelle began the discussion requesting feedback for the previous onsite meeting. Bonni and David expressed satisfaction with the previous meeting, with Bonni noting the informative presentations and productive small group discussions, and David appreciating the inclusion of individuals with lived experience in the project. More time may be needed for small group work. Those sections produces some productive conversation. | |
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| **Prioritizing Mental Health Services in Adoption Sector** | |
| Tim and Michelle led a discussion on prioritizing work plan activities. They agreed to focus on the 'access' area. Michelle shared the objectives: identifying at least three care pathways and building awareness. Bonni shared that she liked the development of a Directory of Services and resources, and proposed the idea of an app to directly reach community members and provide them with information. | |
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| **Integrating Practice and Skills in Treatment Models** | |
| Sheamekah proposed integrating the practice and skills within the existing treatment model in Oklahoma, suggesting benefits for providers not solely using the national adoption model. Tim agreed, mentioning this idea came up in conversations with Oklahoma Complete Care and CCBHCs, and shared that they had proposed a center of excellence for child welfare or foster care. Sheamekah also suggested offering webinar series or continuing education opportunities for treatment providers, and integrating awareness of the competencies needed for this population into university curricula. She emphasized the need for training not just licensed clinicians but also non-licensed professionals. Michelle, Tim, and Megan agreed to incorporate these ideas into their existing plans, with Tim noting the need for specific outreach to higher education institutions. | |
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| **Discussing New Row, Clarifications, and Performance Incentives** | |
| Tim mentioning Therapeutic foster care and his interaction with a representative from Etna. He mentioned that Etna was excited about the performance incentives for their mental health network and planned to integrate the NTI piece into other incentives. Tim also expressed his intention to follow up with Etna. The team then discussed their goals, particularly focusing on goal 3, which is to increase adoption competent access. | |
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| **Youth Mental Health Resource Mapping and Referral System** | |
| Stacy discussed the Department of Mental Health's ongoing project for a resource mapping and referral system for youth mental health services. This system, currently in the Request for Information (RFI) stage, aims to improve collaboration between various services, including the HealthCare Authority, DHS, and OJA. The ultimate goal is to provide a single pathway for families and youth to access mental health services. Stacy also mentioned that the project is part of a Governor Policy Academy and will continue to receive national technical assistance until January 1st. Bonni and Tim expressed interest in the project's potential development into an app or website. Stacy confirmed that the project's intent is to create an app that facilitates referrals and provides resources for mental health services. | |
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| **Exploring Procurement and Technical Assistance Options** | |
| Stacy discussed the potential for moving from an RFI to a RFP for procurement, assuming that would be the next step. Stacy clarified that they were already receiving such assistance from the National Governors Association. Stacy also mentioned ongoing work on resource mapping, a referral system for mental health services, and the creation of a statewide youth council. Bonni emphasized the importance of direct access for families and the need for adoption competency and training in the field. | |
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| **Outreach Implementation Group Prioritization Discussion** | |
| Bonni suggested that the group could facilitate a conversation with the Outreach implementation group to summarize their priority areas. Tim proposed either summarizing the group's points or having a meeting to present the priority areas. Stacy agreed that this could be beneficial. Michelle then suggested that the group could come alongside and support the implementation, rather than developing it themselves.  **NEXT MEETINGS:**  Michelle proposed the need to meet again soon to finalize the priorities. She suggested either meeting again this week to finalize the plan or working via email to highlight important areas. It was agreed that the group would meet again at the same time the following Monday.  Tim suggested having a large virtual meeting to kick off the implementation, followed by smaller meetings for the implementation groups. Michelle confirmed that the steering team would meet less frequently, once a month, and the implementation teams would meet twice a month. | |