



MASON THURSTON SYSTEM OF CARE PARTNERSHIP
A REGIONAL FAMILY YOUTH SYSTEM ROUND TABLE PARTNERSHIP
APRIL 22, 2022 SUMMARY MEETING NOTES

A Youth Tri-lead started the meeting and made the following requests for participants to:

- mute their device when not speaking;
- avoid over-talking by waiting for others to finish speaking;
- use chat or raise a hand if using video or say your name before speaking if not using video, when you want to make a comment;
- stay on topic as we move through the agenda;
- feel free to share a question or comment after each agenda item.

The convener read through the roster to sign in participants. Then the Youth Tri-lead read the vision, mission and eight-part comfort agreement.

The Youth Tri-lead read the goals for the day.

- Vote Results & Area of Focus Process
- Youth Tri-lead Interest Statement
- Meeting Setting Discussion
- Share Time

The Family Tri-lead announced that item ‘h’ had received the most votes and read the item to the group; h) More mental health awareness and fluency taught in schools, to parents and to staff. The Ending the Silence presentation with NAMI Mason/Thurston is a good starting point. She then let the group know that the process of identifying strengths first, then needs for this new Area of Focus would begin after the System Tri-lead displayed a document for the purpose of scribing those strengths and needs. Following are the lists created by participants:

- **Strengths:**
 - Infrastructure to support schools (Educational Service District 113/ESD 113) – Tier 1 and Tier 2 behavioral health supports, includes advocate and navigator, Youth Mental Health First Aid, technical assistance office hours
 - Requirements for schools to support social emotional learning
 - Wraparound with Intensive Services (WiSe) partners with schools, has Memorandums of Understanding (MOUs)

- Behavioral Health Resources (BHR) parents with schools, has Memorandums of Understanding (MOUs)
- North Thurston accommodates special needs of students through alternative school options like GRAVITY
- Positive Behavior Intervention and Supports (PBIS) is an example of a Multi-Tiered System of Support (MTSS)
- Tier 1 – all students get classroom-based learning, parent and staff education (ESD provides some of this)
- Tier 2 – students at risk, early interventions, often small groups (often ESD or counselors)
- Tier 3 – treatment (often formal behavioral health supports from other agencies)
- Education Liaison from National Alliance for Mental Health – could present Ending the Silence
- Parent groups – having information given to them is a good way to get information out; build on strength of parents who are advocating for their children
- Shelton School District – administration and teachers supportive when parents have questions or concerns
- North Mason School District – Thom Worlund and team have been supportive for students and parents
- WISE and Community Youth Services (CYS) leadership staff partnered with ESD 113 around Tier 3 Wraparound Pilot in Tumwater, Hood Canal, and Shelton school districts (SMART – School Mental Health Assessment Research and Training)
- ESD 113 has a robust set of resources including a coordinator who works with some districts to help them build a multi-tiered system of support or assess the services they already have and make changes (SHAPE – school health assessment performance and evaluation system)
- School districts of a certain size must have resources on their website – many already have this

➤ **Needs:**

- Schools and parents are not always aware of what is available or accessible
- Resources are not all accessible in one place/advertised using consistent processes
- Not all behavioral health needs are visible (ex. how we present on the outside may not match how we feel on the inside)
- Needs for informing how services can be initiated (such as Family Initiated Treatment)
- Sharing what the family groups are/more family groups in general, put the information out to the community to increase knowledge about what is

available/get more involvement (increase knowledge across districts and neighborhoods)

- Pre-service training for teachers, use state projects or teachers' union for ongoing training about mental health awareness (there are requirements for school staff about ongoing training on behavioral health topics, but it is only required every 5 years currently)
- Increasing teacher knowledge of behavioral health needs could decrease likelihood of unknowingly exacerbating mental health symptoms
- Districts of a certain size must have resources on their website
- Kids miss some education/instruction when receiving school based behavioral health services; this also often leaves parents out of treatment
- Suggestion to tap into district information sharing techniques (ex. weekly voicemails/emails) to share about parent groups and other behavioral health resources
- More education for staff around how to respond to varying needs of students (ex. students who have IEP or 504 Plan may be mainstreamed), so that students can remain in class
- Life skills classes or groups (ex. after school Dungeons and Dragons group)
- Having schools rotate times of meetings if client refuses to meet with family
- Anti-stigma for school personnel and students ("de-weaponize stigma around weirdness")
- Trauma-informed teaching strategies (assume kids could be impacted by trauma, so using techniques that take this into account)
- More information/clarification about the language we're using to explain the services we're providing
- Care/support for school staff so that they can be responsive to student needs
- Acknowledgment that student and staff needs have changed throughout the pandemic
- More information/training on trauma-informed care for all staff (ex. office staff, custodial staff, etc...), not just teachers
- Crisis response in school buildings (as opposed to kicking students out for showing challenging behaviors); training for staff on de-escalation
- Instruction or information for students about behavioral health (so that they understand what their peers may be experiencing/displaying)
- Keep the kids in schools (as opposed to expulsion for disciplinary issues) when possible
 - The state discipline laws were updated 2 years ago and suspension is only an appropriate response for certain dangerous behaviors

- Collaboration with resource officer
- Link shared by ESD 113 participant: <https://www.k12.wa.us/student-success/support-programs/student-discipline>

The Youth Tri-lead then let the group know that a youth would be sharing their interest in a Youth Tri-lead position with time for questions and answers.

- The youth read their statement of interest:
 - My pronouns are he/him. I would like to be a Tri-lead so I could become more involved with the system and to help others find resources. My father was a Tri-lead and I know he was very invested with volunteering in events when we were still able to do things in person. It was something he was passionate about and even though I'll be getting a job in the next year or so, I'd like to continue to take part. I intend to do my best.
- Comments as follows:
 - Thanks for pushing through your anxiety – I have the same challenges and you are not letting it hold you back and I applaud you for that (parent).
 - I think you would be a great asset to the group. You have great ideas and we'll another aspect represented and (being in the Tri-lead position) might help with the anxiety. I'm excited to see how the vote goes (parent).
 - I'm happy you are stepping up and think it is fantastic, hope it goes well. I understand the anxiety and this will be a good step up for you and I think it will help to have more Youth Tri-leads (parent).
 - I think you will be fantastic and your dad would have really wanted that. I want to thank everyone for your thoughts and prayers – thanks for all the support (youth's parent).

The Youth Tri-lead explained to the group that an email will be sent to request a yes/no vote for this youth in a Tri-lead position.

The System Tri-lead let the group know that the next agenda item was starting with a discussion about meeting setting. She mentioned some of the options would be to continue to meet in person or meet in-person with technology supports and then opened it up for ideas/comments. Here are some highlights from the discussion:

- Alternating meetings would be confusing. I want in-person meetings with phone-in option (parent).
- I want in-person meetings that includes a phone option. It might be difficult for systems. I look forward to seeing other parents, to see other people and see their faces and hug if you want. Its important for parents but we need to see if it lowers attendance (parent).
- I like the idea of in-person but their also needs to be a phone option for those who can't be there in-person. I will need to be there by phone (youth).
- I think we are going to lose a lot of participation with in-person; gas is another issue; COVID and variants. I want to be in-person but we need to have a hybrid option. But I still think we are going to lose a lot of participation (parent).

- One of the things working from home is that it doesn't take away from my work when we are on Zoom. Other times when I'm driving to these meetings, I cannot multi-task. I want to be able to be here and able to participate. My choice is for hybrid (system participant)

The System Tri-lead then asked about locations for in-person and here are some comments:

- We could do a trial for 2 meetings (youth).
- We could have a trial with one in Thurston and one in Mason, put a face on the system and face on the families (parent).
- I'm kind of torn now (parent).
- I love the idea of both (above) and believe we need a location that can accommodate social distancing and with technology supports (system).
- Try smaller meetings first for Tri-lead and Effective Family Voice meetings (parent).

The System Tri-lead let the group know that an email will be sent to participants asking them to send their preference for meeting option(s).

The Family Tri-lead then introduced Share Time and explained that it is a time for anyone in the group to talk about successes, challenges, questions, comments, information, updates or anything else that a participant wants to share with the group.

- I'm a first time parent and my baby is walking now and helps me out with the chores. My child is good, so helpful and smart (youth).
- My son not feeling well and he told me he was hot, sick and needed to go to the doctor. This is a big accomplishment for him to be speaking really well. He listens to Alexa and says Alexa stop in clear words. Some technology is exciting that we have now (parent).
- I'm getting over COVID (parent).
- I work for Juvenile Rehabilitation (JR), but I used to be a Functional Family Therapy provider, so I'm new in this position. I was just nominated for a statewide Tri-lead position. I grew up in the system and have lived experience. There have been lots of changes in JR arena. The WISE program - we are trying to do that within our agency. We have a lot of new-hires. We used to just provide aftercare, but now we are transitioning into providing services. These are optional for non-parole youth and try to be encouraging for those youth. We hired new coordinators for non-parole youth because most youth are released without parole. We are trying to provide everyone with after-care. I'm leaning into it as the new mental health coordinator and there are lots of positive things. If I'm not here (at these meetings) I'm reading notes. There are lots of new things with JR. One of the things we are running into now is identifying youth on parole and not on parole and who is going to be working. If you are providing services for our youth, I want to know what services you provide. We are looking for volunteer programs, work assistance and mentorship. I'm the resource queen and I'll put my info in chat box. Please send me information if you have it. Contact information: Jennice Foy, Juvenile Rehabilitation Coordinator/Mental Health Coordinator, Washington State Department of Children, Youth and Families Region 5 & 6, Jennice.foy@dcyf.wa.gov 360-628-3224
- Good news about youth in the (county) juvenile justice system. Back in October 2021 we (Catholic Community Services) continued a program for youth with mental health needs in Thurston County detention and these services are not usually available for youth when they are incarcerated.

Beginning in next couple of weeks in Mason County, there will be half day support by one of our therapists. This means there will be half day support in both counties and possibly truancy and probation. This will begin in a few weeks (system).

- I want to follow up about crisis services and Designated Crisis Responder (DCR) crisis stabilization calls for youth. We are notifying families about multiple resources for crisis in our community. We were having trouble at True North with requests for assessments with Catholic Community Crisis for youth and this also involves the DCR and the Thurston Mason Behavioral Health Administrative Services Organization. I'm requesting this as an agenda item (system).
- Our (Thurston Juvenile Court) partnership has opened a lot of doors for youth and youth coming in to custody. There is stigma and moving into a trauma informed system and our partnership with Catholic Community Services has been important and helpful in getting youth out of custody and into services. Every youth's needs are identified. Appreciate the partnership.

The Family Tri-lead let the group know that anyone can contact a Tri-lead with concerns or questions any time and contact information is on the second page of the agenda. The Family Tri-lead then thanked everyone for their participation and announced that the next meeting will be held on May 27th.