



MASON THURSTON SYSTEM OF CARE PARTNERSHIP
A REGIONAL FAMILY YOUTH SYSTEM ROUND TABLE PARTNERSHIP
AUGUST 26, 2022 SUMMARY MEETING NOTES

A Youth Co-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 and this included the announcement of the new Co-System Tri-lead. Then the Youth Tri-lead read the vision, mission and eight-part comfort agreement, followed by the listening statement. This statement lets participants know they are listened to as we also focus on what the group has voted for as our area of focus and reminds the group that Tri-lead contact information is on every agenda.

The Co-System Tri-lead continued and read the goals for the day.

- Area of Focus – Speaker & Review of Topics
- Support for Youth Voice
- Share Time

A Co-Family Tri-lead let the group know that the Behavioral Health Navigator from Educational Service District 113 (ESD 113) would explain her role with time for questions. Here are some highlights from the presentation and discussion:

- Jasmine Meraz shared a power point and told the group that she is still learning a lot about the behavioral health system. She provides supports to districts that include screening students. She mentioned that this can be difficult for younger students. She provides training for school staff, anyone inside the scope of a school and parents. Jasmine links families to services according to what is covered by their insurance, specific psychologists and group care and some to in-house (ESD 113) services. She tries to figure out who is able to be there in a crisis, has short wait and to figure it out beforehand to save families from calling and ending up with

providers with lengthy wait times or those who are closed to new patients. The Behavioral Health program works on prevention to help students to make healthy choices as well as referring to treatment that is individualized and helps to maintain recovery.

- Training is provided continuously throughout the year and open to the public upon request to districts.
- Lifeline training will be offered in September and the Office of the Superintendent of Public Instruction (OSPI) will be sending information about this to districts.
- Question, Persuade, Refer (QPR) training is offered in one hour and three hour sessions that includes time for questions/answers.
 - QPR training provides a way to understand suicide prevention and learning how to assist a student or young person. It teaches skills about how to ask youth if they want to kill themselves and is more about being comfortable with the conversation.
 - This training will be held every month through June. Two months for each county. It is about finding partners in that county. You can attend a training outside your county.
 - Training is also available for private corporations and others.
- We also offer Mental Health First Aid (MHFA) training. This is in person for a full day. We talk about mental illnesses and discuss stigma. MHFA is also offered with pre-work training online and then in person for four and a half hours, i.e. 12 noon to 4:30 pm.
 - There will be a flyer for youth MHFA. We are including pre-teen, teen, early adulthood developmental stages. We will not only be focusing on middle and high school age students because suicide, mental health needs, substance use affects youth of any age. We see youth dying at younger ages and have learned not to lump students, but look at each student as an individual. We look at what has happened in this youth's life to cause them to behave this way, beyond the obvious.
 - These trainings are open to school staff including bus staff and also to parents.
- The ESD 113 participant shared that the purpose of sharing the Behavioral Health Navigator's role is that we want to let you know that there are pretty robust supports for students in schools.
- Jasmine answered a question from a parent and let them know that she can be contacted directly via email at jmeraz@esd113.org or to find more information you can go to: <https://www.esd113.org/behavioral-health/>
- The participant from the Skokomish Tribe asked if ESD 113 has any tribal services? When Jasmine replied that they did not have Tribal services, the participant from the Tribe services offered by the Tribe. Jasmine is welcoming to Tribal services. Jasmine offered to look for local, state, federal resources.
 - The ESD 113 participant offered to continue the conversation offline with Jasmine and another advocate from ESD 113. The participant from the Skokomish Tribe said that she will be happy to help however she can.
- A parent asked if a student is eligible for the program whether the program is able to maintain address confidentiality and the answer was that they can. Jasmine cannot provide any personal information and only looks for a provider. Jasmine won't share an address with a provider, but can ask the provider if they can maintain confidentiality.

- Another parent asked about the process of recognizing the needs of a student and Jasmine answered that this is why trainings (above) are offered and added the following that are noticed by more than one staff member:
 - We watch for early signs.
 - A student could be late for school but might always be late.
 - A parent can be contacted to ask about lateness and if the student is getting enough sleep.
 - A parent might be having trouble getting the student to school.
 - Does the student say 'hi' in the morning.
 - Does the student miss breakfast or skip lunch and can be asked if they ate something.
 - Small things can be noticed, like dozing off and slow response in acknowledging others that are not typical for this particular student.
 - Going to the office or bathroom a lot.
 - Stomach pains.
- A parent asked about how receptive staff are to this and Jasmine answered that this is the reason for training. She also mentioned that counselors are available and there was a discussion about crisis situations and threat assessments.
- Another parent asked about students with Autism or students who are non-verbal and whether signs are looked for with these students. Jasmine stated that this is not being done in the navigator role but some are looking at this and starting to have more and more training around this on the staff side and preparing teachers during certification.
- The ESD 113 participant said that there is a gap between behavioral health and physical health that doesn't get a lot of attention and there needs to be better coordination between systems. Systems fail to serve the whole child.
- The Administrative Services Organization participant shared with the group that the multi-disciplinary team (Community Wraparound Team) for Thurston/Mason counties have staffed youth with Autism and intellectual/developmental disabilities. We've recently invited Ronnie San Nicolas to be part of that team.
 - Ronnie San Nicolas has a Ph.D. and works for Catholic Community Services and UW. In addition he is a dad with lived experience.
 - Ronnie served on the System of Care Partnership previously when he was on the Developmental Disabilities Council.

The same Co-Family Tri-lead then reminded the group of the Area of Focus that is currently being worked on and read the item to the group; '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 let the group know that we are going to look at the items that were put together by the ESD 113 participant with links and sent out a couple of times for review and to think about where we want to focus. She let the group know the results from responses (below) and afterwards opened up discussion to find out what the group thought and where they want to focus the work.

- ✓ **Chosen by 3 - Suicide Prevention, Intervention, and Postvention:** <https://www.k12.wa.us/student-success/health-safety/mental-social-behavioral-health/youth-suicide-prevention-intervention-postvention>
 - ✓ **Chosen by 4 - Social and Emotional Learning:** <https://www.k12.wa.us/student-success/resources-subject-area/social-emotional-learning-sel>
 - ✓ **Chosen by 1 - School-based behavioral health services:** <https://www.k12.wa.us/student-success/health-safety/mental-social-behavioral-health>
 - ✓ **Chosen by 2 - Student Discipline:** <https://www.k12.wa.us/student-success/support-programs/student-discipline>
- The Administrative Services Organization (ASO) participant asked about Social Emotional Learning and if the Behavioral Health Navigator is involved with this. He also asked if there is mental health awareness included in the curriculum.
 - The ESD 113 participant responded and here are some of those comments:
 - Every district is required to meet competencies/curriculum and can define that on their own. Curriculum adoption is intense and usually takes a year. Social Emotional Learning (SEL) has been less intensive and the ESD supports taking a more indepth look at it.
 - Every student in every grade is taught these skills. A lot of districts use tools from Castle <https://www.castlelearning.com/> and the Washington Institute for Public Policy validates that SEL is research based. <https://www.wsipp.wa.gov/>
 - Multi-Tiered Systems of Support are implemented by the student assistance program for Tier 1.
 - A parent commented that there is no formal training for behavioral health, mental health or Autism in the elementary school level and this results in damage. If programs are being implemented at the middle and high school levels but not at the elementary level, then you lose them.
 - The ESD 113 participant shared that these trainings are being emphasized. How do we deal with frustration if we target everything at the secondary level? Jasmine added that often in these trainings people think we only focus on middle and high school. All staff from K-12 grades can take this training whether they work with students or not. We are seeing more K-8 staff take this training.
 - The ASO participant said that it sounds like a lot is being done on this front and asked if the ESD believes there are still gaps where the SOCP could help with moving the needle.
 - The ESD 113 participant replied saying that what people could do is to see how we get common language, consensus building in the community and look at enhancing what is in place.
 - The CCS participant shared that she is interested in this conversation and we have piles of policies and procedures that we are required to do. She further commented that we don't always know about what people experience in these systems.
 - There was a question from a parent about certification from the training and Jasmine answered that certification is available after a test is taken. Every three years for the course but she didn't know about QPR. The ESD 113 participant said that certification is more for trainers and to maintain a high quality of training. She also mentioned that Educational Staff Associates (ESA's) are required to take suicide prevention training every 5 years and that most take the training more frequently due to curriculum changes.
 - A parent asked about anxiety prior to school starting and if that might be something that could be offered routinely instead of parents needing to advocate strongly for it. Also, that the routine or typical events may be stressful for some students.

- The participant from the Skokomish Tribe said that when there is an 8th grade student available, they can walk students around before the year ends to help with transition. She also said that for students on Individual Education Plans (IEP's) , we put these things into the IEP.
- The ESD 113 participant said that gathering that feedback could be an action step and that she too has advocated as a parent. Also, that the state education ombuds could be a conduit for families to share stories and it needs to be balanced and measured. It can't be all negative.
- A parent suggested that we could set up something like that with Jasmine collating it.
- The CCS participant said that surveys (if one was used) require questions that can limit feedback. We could collect stories or people could write them down. She also said she wants to hear from teachers and their concerns.
- The ESD 113 participant said that she liked the idea because themes could emerge that might serve all students. That there are a lot of students that are anxious that don't have a mental health diagnosis. Can we be more mindful about students coming to school who are anxious? If we are looking at collective impact we would need to be less focused on individual students and more focused on benefit for all through trauma informed practices that can help all students.
- The Skokomish Tribe participant said that she appreciates about not focusing on individuals. She was wondering if there could be a checklist to keep tabs and if teachers are having consistent concerns and this could lead to seeing a counselor. This would be keeping in line with our goals. The ESD 113 participant suggested review of the Healthy Youth Survey from October 2021 and that this presentation could be an action step. <https://www.askhys.net/>
The information from this survey can be accessed at the state or county level. It is showing that the majority of youth are feeling anxious and it is getting worse. She also mentioned that she wants to advocate for how much is being done in schools and most schools in Thurston/Mason counties are operating under Multi-Tiered Systems of Support. However, sometimes there are issues with getting information out to the communities and families.
- A parent said they liked the idea of sharing experiences and concerns.
- The Co-System Tri-lead suggested that we discuss the ideas at the Tri-lead meeting and come back to the group with suggestions.
- A Co-Family Tri-lead commented that participants had voted on items already. Then the convener clarified that when the items were sent to the group it was to provide an opportunity to explore and think about information in the links, share their choices in a reply OR share their choices with the group at the August 26th meeting.
- The ESD 113 participant commented that she knew the group is focused on Social Emotional Learning, but there is not much that is actionable in that area.

A Co-Family Tri-lead let the group know that the Tri-leads will determine next steps at their meeting.

A Co-Youth Tri-lead then announced the continuation of the discussion about how we can support youth voice.

- A parent explained that she had spoken with her son about a visitor from Grays Harbor and we might want to ask her about any success she had with supporting youth voice.
- Another parent talked about not knowing what is being done nationwide and this led to a idea about having someone from the statewide Family Youth System Partnership Round Table come to our group and share their experiences.

- The ESD 113 participant commented about exploring a way to communicate and cited the example of their True North program that creates campaigns to ask one another to ask friends and connect to safe adults. It is a whole social media campaign. We share using social media as a conduit to share those things and can share items.
- A parent said that this could also be done as an after school club and another parent agreed saying that Junior High and High School students could bring more of the younger students. We need ideas and the last few years have not been successful.
- The ESD 113 participant said that students already have clubs and one of the requirements is that clubs must have a staff advocate to lead the club and is willing to sit with that club as well as a student leader.
- Another parent suggested Mom and Me group for younger students.

The Co-System Tri-lead let the group know that anyone can contact a Tri-lead with concerns or questions any time and their contact information is on the agenda. The Family Tri-lead then thanked everyone for their participation and announced that the next meeting will be held on September 23rd and adjourned the meeting.