



NE Family Youth System Partner Meetings & Activities

April 1, 2016 through June 30, 2016

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NE FYSPRT Meetings:

April 7, 2016:

April 7, 2016: The NE FYSPRT met on April 7, 2016 at Spokane Community Services Bldg., 312 W 8th Ave., Spokane, WA and was called to order by the family co-lead, Becky Bates. Also present was the youth lead, Morgan Gabriel family co-lead, Helen Franklin, and system partner lead, Liz Perez. Twenty-eight members and guests were in attendance representing families, youth, and system partners. Liz Perez provided an update on the status of the SCRSN conversion to Spokane County Behavioral Health Organization (SCRBHO). She indicated that Grant County is no longer a member of the SCRBHO region.

Old Business

A. WISe

WISe update: Fifteen (15) teams have been funded for the region. There are some new providers in addition to the providers already in place. System Partners (Frontier Behavioral Health, Institute for Family Development, Excelsior) discussed their activities in implementing the WISe teams. Some barriers to success included inability to recruit qualified staff (a common theme in all arenas), finalization of locations, and impact of youth coming out of CLIP with precedence for WISe placement, and youth transitioning out of services due to their age. Several teams have been staffed and training is occurring. Each agency continues to strategize implementation challenges.

B. Semi-annual needs assessment

The semi-annual team effectiveness survey was distributed to attendees. They were asked to assess the effectiveness of the NE FYSPRT and to identify community issues including coordination of services, delays in treatment, system partner interaction (government and private, state and county, etc.) that should be brought to the State FYSPRT meeting May 3, 2016.

Members discussed youth suicide; and the need for preventive measures and methods to work with schools and communities together; and the need to address bullying.

The Youth Suicide Prevention Program will be discussing youth peer support on May 19th from 6:30 to 7:30 – information is on the YSPP website. A



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statewide initiative to recruit more youth as peer supports is collaboration between DOH and DBHR. Members discussed a forum held last year to discuss suicide risk assessment in schools. Some school districts embraced working with mental health systems while others not so much.

A workgroup relating to the risk assessment met in May to discuss what schools want in a risk assessment and what the mental health system can provide were discussed. Becky asked the workgroup to present at a future NE FYSPRT meeting.

New Business

Youth partners shared a public service announcement regarding cyberbullying.

Presentation

Disability Rights – Washington

Susan Kas and David Lord with Disability Rights WA spoke about their role moving forward and their desire to see all partners successful in implementation efforts. They are part of the Advisory Group with DBHR and others and expressed their commitment to continuing the partnership. They reinforced their availability to providers, families and partners to bring concerns both to FYSPRT, the State FYSPRT group, and to DR-W.

They also recognized the continuing struggle with workforce issues and will continue to keep the message up front regarding adequate staffing. They indicated it was exciting to hear the WISE team progress and asked partners to share both what's working with recruitment and what's not so they can help if possible.

David Lord shared the opening of the new DR-W Spokane office with an open house April 7th. He invited everyone to attend. The office will be staffed with two full-time attorneys.

WSU Behavioral Health Workforce Collaborative

Colleen Haller provided an overview of the Workforce Collaborative's efforts in assisting mental health systems in obtaining qualified staff. They have a grant from DBHR and members of the collaborative include representatives from WSU, UW, EWU, DBHR, and YNF. Their focus for 2015-16 is:



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- WISE. To provide WISE trainings throughout the state, implement “train the trainers” in local regions so that the regions can continue the training locally, and evaluate the WISE training program with UW and refine as necessary.
- Peer initiatives. To host regional YNF CPC trainings and exams, to host adult CPC trainings and exams and also create training for “train the trainers”. The Collaborative will also provide peer support workforce development training for BHOs. They plan a CPC statewide conference in September.

Workforce challenges identified by the Collaborative include:

- Need for 24/7 crisis coverage vs. 9 to 5 workload expectations – what students learn in school about crisis intervention work, etc. Members discussed the need for a workforce who has experience in wraparound services, roles of parents/families is sometimes lost without experienced staff involvement.
- Research is almost non-existent regarding workforce issues – it’s unknown if anyone is collecting data. Becky indicated she will ask DBHR if the state is collecting any data on workforce issues.
- Difficulty hiring youth peers. It’s difficult to find/retain them in other states; what happens when services end (age) – is there a progression to other opportunities (e.g. supervision, care coordinator, therapist). There must be coaching for youth partners and support for peers. Also providers must keep trying to incorporate youth peer supports, even if one doesn’t work out – give it another chance.

Members discussed some solutions, including the need to get creative in work schedules, flexibility, working from home, etc. to entice more experienced professionals to join the teams. Also to start when students are still in graduate school with strategic planning about what opportunities there are for students to explore. And providing opportunities for peers, e.g. back to school options. It was identified that reaching out to colleges/universities is a must to work with them to provide education in public mental health, crisis services, outreach, etc. One option includes bringing interns into the work setting to expose them to new ways of providing services. Exploring other schools that are successful (e.g. Georgetown, University of Maryland) was identified. Having a representative from higher ed (Stacy Chay) is very positive for NE FYSPT. Utilizing an interdisciplinary approach to services e.g. occupational therapy, speech



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therapy, etc. along with behavioral health is a good start. Also the need to look at recruits and identify from the start who'd fit well with WISE teams. EWU was complimented in having a mental health advisory board which solicits input on what to include in its curriculum.

Children's Administration has a Passion to Action group, similar to YNA with a focus on children in foster care.

YNA

Lorin indicated that the Statewide YNA hopes to partner with YNA-East for local meetings to identify what regional YNA groups want/need from the statewide YNA. They have explored other successful YNA groups and there are several on the East coast that could provide resources for WA. A focus will be how to engage more youth in FYSPRT.

Lorin talked about the digital story-telling they're implementing as well as the coaching they're providing to mental health providers in how to engage youth in treatment and policy work, advisory boards, and in WISE teams and processes. She was very complimentary of the YNA-East group.

Adjournment

The meeting was adjourned at 1:30 and the next meeting will be May 5, 2016 at SCRBHO, 5th Floor, from noon-1:30.



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May 5, 2016:

May 5, 2016: The NE FYSPRT met on May 5, 2016 at Spokane Community Services Bldg., 312 W 8th Ave., Spokane, WA and was called to order by the family co-lead, Becky Bates. Also present was family co-lead, Helen Franklin, and system partner lead, Liz Perez. Twenty-two members and guests were in attendance representing families, youth, and system partners.

ANNOUNCEMENTS

- Flyers were distributed announcing the Stand Up for Mental Health Comedy Show June 4th from 6 to 8:30 p.m. at the Modern Theater at 174 S. Howard in Spokane. Ten members of the local Youth N' Action-East group will be presenting and the event will be hosted by David Granirer, an award winning counselor and stand-up comic. There will also be a benefit raffle. Everyone is encouraged to attend.
- There is a youth vacancy on the DBHR Mental Health Advisory Board. Becky asked if anyone was interested to apply or to pass the information on to potential candidates. Candidates must be at least 18 and ideally no older than 26 and identify with young adults with lived experience in public mental health or publicly funded substance abuse services.

PRESENTATION

Sabrina Votava from the Spokane Regional Health District met with NE FYSPRT to discuss bullying and youth suicide. She is with the SRHD Youth Suicide Prevention Program. Sabrina provided valuable information relating to bullying. Several highlights:

- It's important to identify when bullying occurs: a perceived imbalance of power; most times it's repeated; harassment of a protected class is a subsection of bullying;
- Bullying is not occurring when there's no control, no intent to harm, and no perceived imbalance of power.
- There's indirect and direct bullying; there is sexual orientation bullying and cyber bullying is increasing significantly
- SRHD has a Healthy You Survey for kids in 6, 8, 10 and 12th grades. There is 60% participation.
- Kids who are bullied are twice as likely to have suicide attempt behaviors and increased risk (can't thrive if you don't feel safe); and there's increased acting out behavior



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Things to do/help:

- Tell the person to stop
- Find an adult
- Give the child/youth a safe person to talk to
- Explore how to avoid areas where bullying may occur
- Ensure the environment where services are provided is safe
- Listen without judgement
- Identify what the youth wants (i.e. how to play out the form of punishment for bullying – face to face with the bully? The person being bullied having involvement in the next steps gives him/her some power? etc.

A reasonable time frame to respond to an allegation of bullying is five days; the WA Policy Center is a resource and reports can be submitted anonymously.

Families must model good behavior, i.e. be persistent, don't brush it off. Bullying affects everyone: the person doing the bullying, the person being bullied, bystanders, and families (sometimes the person doing the bullying is bullied at home). Both the person doing the bullying and the person being bullied are at the highest risk for suicide attempts.

Warning signs:

- Feelings
 - Increased depression
 - Irritable
 - Hopeless
- Actions
 - Withdrawal
 - Giving away things
 - Reckless
 - Writing about death
 - Talking about death
- Changes in Behavior
 - Personal hygiene
 - Dress
 - Does something just seem different about the person?
- Threats
 - Direct



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- Indirect: won't have to worry about me any more; what's the point; wish I could end it all...
- Situation
 - What is the situation like? If a change is made, would it be a powerful loss to the youth (for example, changing schools means leaving close friends or a trusted teacher/counselor). It may not seem like a lot to an adult, but would be a powerful loss to the youth
 - Show you care. Ask questions. Get help
 - Be direct with what's observed
 - Ask direct questions regarding suicide. Be open and caring, non-confrontational
 - Response will vary
 - If you still have doubts, get help to determine whether it's a valid risk
 - Have a suicide risk assessment conducted by DMHP

Resources:

- ❖ National Crisis Lines
 - NSP Life line 800.273.8255 – has online chatting ability; includes services for veterans and LGBTQ youth
 - Imalive 800.suicide (800.784.2433) – also has online chatting ability
 - Stopbullying.gov – it's interactive for youth
 - Trevor project 866.488.7386 for LGBTQ youth. Website thetrevorproject.org
- ❖ Crisis text line 741741
- ❖ WSSP.org
- ❖ SPRC.org
- ❖ SAMSHA
- ❖ Nowmattersnow.org

A family member asked Sabrina how families/youth know something's been done. They report bullying but there's no evidence of intervention and it continues. It appears policies and procedures aren't being followed.

Sabrina recommended discussing it with the school principal, District Superintendent or even the Office of the Superintendent of Public Instruction. Using phrases such as "it doesn't appear to be working, how can we move forward together?" shows you want to get to resolution collegially.



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The parent asked if training is provided to the schools? Sabrina responded that all schools must have a suicide prevention plan, a suicide intervention plan and a suicide after plan in place. There's no funding for the districts and some are not familiar with the requirement. There are varying degrees of reception to training by the schools. Sabrina provides training to all spectrums of the continuum of care as often as possible. A train-the-trainer class will be available in June (suicide prevention training).

In conclusion, she shared this thought:

I } Tolerate or } You for being different
Accept or
Value }

OLD BUSINESS

A. NE FYSPRT Team Effective Survey results were distributed with no additional feedback received.

B. WISE updates:

IFD: Full – three new referrals – 2 of whom are CLIP

FBH: 12 – have discharged two; one was a successful discharge;
one was not doing well; hiring is going well

EYC: Still in hiring process; offers out, some good candidates; hope to
have another team

LSS: Still in formulation process; hope to have both teams ready by
August

SCRBHO: Liz indicated the plan is to have 15 teams operational by August 1.
SCRBHO is assuming responsibility for referral to WISE. A new
care coordinator has been hired, Stephanie Lintel. The
changes will be that referrals go to Stephanie then to the
agencies. A two-day training for new WISE teams will be held
in July. WISE update modules are on the website.

It was suggested at the Statewide FYSPRT to open up WISE training to more members of the public and parents, not just to WISE teams;



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create a statewide team to provide training to families regarding wraparound services.

C. Liz announced several save the dates:

- June 9 – UW sponsoring Engaging Families in Children’s Mental Health Treatment. 9:30 to 12:30 –registration is not open quite yet
- Pandora Person Centered Training June 27-30. One day training, can pick either day, open to all; SUD providers have priority Call SCRBHO if you want to register
- DD training regarding DDA
- WISE training in July
- Youth peer training September 6-7

NEW BUSINESS

Becky indicated that Susan Kas, attorney from DRW, would like families and youth who participate in WISE to understand that once they become part of WISE, they are part of the TR class and have the right at any time to speak to staff at DRW. Susan Kas would like to give families participating in WISE the opportunity to speak to her and she will be available June 13th for an a.m. or p.m. session. NE FYSPRT system partners were concerned about asking overwhelmed families to meet with someone and HIPAA. Becky clarified that DRW is not asking for names of WISE participants; rather, extending an invitation to members of the class. Optimally, the families and youth would be given the information and decide if they want to meet with DRW.

Adjournment

The meeting was adjourned at 1:30. The next meeting is scheduled for June 2, 2016.



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June 2, 2016:

June 2, 2016: The NE FYSPRT met on June 2, 2016 at Spokane Community Services Bldg., 312 W 8th Ave., Spokane, WA and was called to order by the system partner lead, Liz Perez. Also present was family co-lead, Helen Franklin, Youth co-lead Morgan Gabriel, and family co-lead/subcontractor, Becky Bates. Twenty-five members and guests were in attendance representing families, youth, and system partners.

PRESENTATION

Ryan Oelrich with Priority Spokane spoke about support for youth K-8th grade whose families have challenges with homelessness. He indicated that Priority Spokane is data driven and address one issue at a time. They have been in the community for approximately six years and have a diverse perspective on their steering committee, including community leaders and higher education.

Their services are not duplicative of other agencies. EWU research students are involved in providing data to help the Steering Committee identify issues to address. There has been a 60% increase in youth homelessness. In 2015, there were 2,932 homeless youth.

A goal of Priority Spokane is to stabilize lives of the homeless and at risk youth in K-8th grade and their families; and to prevent trauma to students and families in the future. Many people who are homeless are working, but still can't afford housing, especially single mothers.

Priority Spokane's plan is to improve how to identify those at risk and provide case management to connect families to resources, especially housing related advocacy to assist in getting housing and targeted flexible financial assistance.

They have received funding to hire a case manager, provide training, and have flexible funds for 50 families. It was noted that training in ACES and trauma informed care would be indicated.

Their goal is to stabilize home and family life; reduce stress and trauma by preventing homelessness; graduate at-risk students, and support at risk students



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in post-high school training or education. Three locations have been selected: Logan Elementary; Deer Park, and Arcadia Elementary. It's a three year pilot. EWU and Gonzaga are providing data tracking.

Ryan indicated that Priority Spokane attempts to be as inclusive as possible at the planning table but not to be duplicative. It's recognized that all agencies who have initiatives going on need to collaborate.

OLD BUSINESS

Agencies provided updates on the WISE team implementations. Stephanie Widhalm has been hired by SCRBHO as the WISE Coordinator. All referrals will be sent to her. It is acknowledged that counties outside Spokane will require a later implementation date due to a multitude of issues, including difficulty hiring qualified staff and implementation of SUD/BH integration.

Stacy Chay reminded agencies to contact her as she has access to graduating students who may be good fits for their vacant positions. DBHR has recognized staffing issues for SCRBHO and providers.

CRC is very short-staffed for this time of year.

DBHR is addressing community collaboration by identifying a government structure showing where all the pieces fit together – FYSPRT, WISE, community collaboration, etc. The WISE manual will be revised after this structure is finalized.

Agencies indicated that graduates of WISE, or those just finishing, should present to NEFYSPRT to provide feedback.

Becky indicated that DRW cancelled their meeting in June with WISE graduates and will communicate with DBHR regarding connecting with FYSPRT teams to meet with graduates.

NEW BUSINESS

A. COMMUNITY ISSUES TO FORWARD TO THE STATEWIDE FYSPRT:

Members discussed the issue of a lack of pediatric beds – children are spending too much time in the pediatric ER before being transferred to Kootenai. Agencies don't know when a child's been hospitalized. It is



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important for Sacred Heart Medical Center to be aware of hospital diversion resources and how to access them. It was noted that the discharge meeting needs to occur at day 1-2 not day 13. A quarterly meeting of stakeholders needs to occur to try and manage the number of admissions. The first meeting occurred last week.

This is considered a state-wide issue because all Emergency Departments are experiencing the effect of lack of diversion opportunities. SHMC gets about seven calls a day from outside the county.

B. COMMUNITY SUCCESSES

- The Stand Up for Mental Health Comedy event is June 4th with a silent auction at 6 and the acts at 7. Tickets can be purchased at the door.
- A 9 year old child is being successfully treated at home after spending a considerable length of time in the ED and parents felt they couldn't care for him at home – he's receiving 25 hours a week of in-home care and is doing well.
- Construction of low-income housing continues throughout the city.
- Scott indicated that several FBH employees plan to come to the Stand Up for Mental Health event and he was pleased that they would attend.
- A new program for transitional youth (18-24) is being implemented at FBH similar to PACT teams.
- A question was asked regarding animal therapy programs being available. Excelsior has an equine program and there's one called Free Rein in the Valley.

ADJOURNMENT

The meeting adjourned at 1:30. There will be no July meeting. The NE FYSPRT will meet on August 25, 2016. There will be no September meeting. The NE FYSPRT will go back to the regular schedule in October.