

MH INTEGRATION COUNCIL PEDIATRIC SUBGROUP

DATE: NOVEMBER 16, 2021

TIME: 10:00 – 11:30 AM

10:00 – 10:10

WELCOME & INTRODUCTIONS

LAUREL

Steve Wolfe, public

Mike Fisher, Ward Nial, Emma Harrigan, Connie Schutz, Logan Hegg, Dillon Burns, Ilisa Stalberg, Sara Pawlowski, Sandy Yandow

Review of our prior meeting

10:10 – 10:35

MEETING STRUCTURE

LAUREL

Description: Opportunity for Global Learning Partners to support our workgroup

- Help with SMART goals and identifying issues to work through
- Need small group to inform GLP outside of our meetings
- GLP requesting: Issues to focus on, category and prioritization

Inform

Discuss

Decide

Materials:

- <https://www.globallearningpartners.com/>

10:35 – 11:00

SMART GOALS

Description: Identify SMART goals for our work

Inform

Materials: see other document & slides.

Discuss

SMART Goals are:

Decide

- **Specific** – what will be achieved and when it will be achieved
- **Measurable** – agree on success measures – how you will know the performance has been achieved
- **Achievable** – demanding but doable

- **Results-Focused** – how does this link to department, division, and/or goals?
- **Time Bound** – give a specific timeline for completion

We talk about our system of care as if static – as if crisis isn't going on around us. We have a major storm happening. How do we focus on the long-term goal of integration when children, youth & families are experiencing significant mental health needs now and the system is significantly challenged?

Also RBA background info if interested:

<https://clearimpact.com/solutions/results-based-accountability-resource-library/>

<http://www.raguide.org/index.shtml>

11:00 – 11:15

OTHER ITEMS

Public comment

Steve Walsh. The federal govt is where this originates under Medicaid/Medicare requirements.

Air traffic controller. System, people, dynamic system. Our integrated healthcare in VT is not dynamic; fixed providers of limited services.

What can be expected, what services can people access, timeliness of access all need to be contemplated and measured. Need radar charts – medical system, providers. Concerned about siloed system. We have one ACO, should mean that care charts can be readily shared across providers.

Are people aware of continuum of care?

Radar chart, availability of each individual. Identify gaps and address them. Not holistic approach, see HIPAA as piece of the barrier. Provider fear of doing something wrong.

Inform

Discuss

Decide

11:15 – 11:30

CLOSING & NEXT STEPS

Consider what data sources exist or that you have access to from your position related to the goals we discussed today.

Emma offered to help translate some of the discussion today into Indicators & Performance Measures – thank you!

Inform

Discuss

Decide

NEXT MEETING: 12/21/2021