

CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL

MEETING AGENDA

November 14, 2016 – 9:00-10:30 A.M

Scottish Rite Masonic Center- 1895 Camino Del Rio South- Shell Room

- I. Welcome and Introductions (Delrena Swaggerty)** **2 minutes**
 - Certificate of Appreciation- Alfredo Aguirre
 - Welcome Eileen Quinn-O'Malley and Shannon Jackson, Behavioral Health Program Coordinator
- II. Approval of Minutes (Renee Cookson)** **2 minutes**
 - June 13, 2016
 - July 11, 2016
- III. Director's Report (Alfredo Aguirre)** **5 minutes**
- IV. Mental Health Services Act (MHSA)- Update (Martin Dare)** **5 minutes**
- V. Business Items** **20 minutes**
 - A. Strategic Planning F/U (Yael Koenig)
 - Follow up items (Handout)
 - Bylaws (Handout)
 - Sub-Committee's (Handout)
 - 4 Sector representation (Handout)
 - ✓ Evaluate for "Hot Topic" discussion
 - Reporting Schedule (Handout)
 - System Goals (Handout)
 - Sub-committee Goals (Handouts)
 - B. CSOC Principles- additions TIS (Delrena Swaggerty)- Vote
 - C. TOP Pilot (Yael Koenig)- Handout
 - KI Provider One Pager
 - D. Medi-Cal Manual (Yael Koenig)
 - Link: http://www.dhcs.ca.gov/services/Documents/Medi-cal_manual_9-22-16.pdf
 - E. AB741- (Yael Koenig)
 - F. NAMI FYL Brochure & Opt in for updates (Suzette Southfox)-Handout
 - G. Retention/Recruitment Think Tank (Steven Jella)
- VI. Sectors "Hot Topics" from Council Representatives** **45 minutes**

Public Input/Discussion to follow (Delrena Swaggerty)- Handout

 - Warm Handoff/Training- Update (Steve Jella) 10 minutes
 - FQHC's Presentation (Marty Adelman) 30 minutes
 - Consider TAY Hot Topics 5 minutes
- VII. Sub-Committee Update Reports- Handout** **10 minutes**
 - A. CADRE (Fran Cooper)
 - Youth and Tobacco Webinar
 - COMPASS- EZ 2.0 (Yael Koenig) Link: www.cadresandiego.org
 - B. CCRT (Edith Mohler)
 - C. TISI (See business items)
- X. Announcements** **1 minute**
 - July & Aug 2016 CWS Group Home Reports- Handouts

Sub-Committees/Sectors/Workgroups Meetings Information:

Outcomes: Meets the 1st Tuesday of the month-La Vista Room from 11:30 A.M. to 1:00 P.M.

Early Childhood: Meets after this meeting-La Vista Room from 10:30 A.M. to 12:00 P.M.

Education Advisory Ad Hoc: Meets As Needed.

TAY Workgroup: Meets quarterly the 4th Wednesday of the month-La Vista Room from 11:30 A.M. to 1:00 P.M.

CYF CADRE: Meets quarterly-2nd Thursday of the month-Del Mar Room from 1:30 to 3:00 P.M.

CCRT: Meets the 1st Friday of the month-La Jolla Room from 10:00 to 11:30 A.M.

Family and Youth Sector: Meets the 4th Thursday of Sept 16, Oct 27, Jan 26, Apr 27 at 8964 N Magnolia St, Santee, CA 92071 from 6:30 P.M. to 8:00 P.M.

Family and Youth As Partners: Meets the 3rd Thursday of the month- Del Mar Room from 2:00 to 3:30 P.M.

Private Sector: Meets the 3rd Wednesday of the month- 7535 Metropolitan Dr, San Diego, CA 92108 at 1:00 P.M.

CHILDREN'S SYSTEM OF CARE PRINCIPLES

CSOC Council Vision: *San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.*

Mission: *The purpose of the System of Care Council is to ensure that all agencies serving San Diego county youth from age 0 through age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles.*

1. **Collaboration of four sectors:** The cornerstone of the CSOC is a strong four sectors partnership between youth/families, public agencies, private organizations and education that ensure accountability to achieve System of Care (SOC) goals and quality outcomes consistent with SOC philosophy.
2. **Integrated:** Among the four sector partners services are comprehensive, accessible coordinate behavioral and physical health care, provide seamless transition of care and utilize natural community supports,
3. **Youth guided, family driven:** Youth and families actively participate in service delivery, planning, and program and policy development.
4. **Individualized:** Services are flexible and designed to meet and build upon the unique needs, strengths and potential of each youth, and family.
5. **Strength-based:** Individualized plans and services identify and utilize youth/family strengths to facilitate health and wellness.
6. **Community-based:** Sector partners offer an array of services in each region and strengthen family and youth connections to neighborhood and local community resources..
7. **Outcome driven:** Service delivery systems continuously improve services by measuring and evaluating outcomes and use results to modify practices.
8. **Culturally Competent:** Service providers honor the diversity of cultures; address the complexities within and between cultures, and provide accessible and relevant services.

CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL

MEETING MINUTES
June 13, 2016 – 9:00-10:30 A.M
 3255 Camino Del Rio South- La Jolla Room

+ =Member in Attendance

O =Absent

E =Excused

	CONSTITUENCY	MEMBER	STATUS	ALTERNATE	STATUS
PUBLIC SECTOR					
1	Mental Health Board	Rebecca Hernandez	O	VACANT	
2	Behavioral Health Services	Laura Vleugels, M.D.	+	Jean Avila	+
3	Probation	Timothy Hancock	O	Margie Deleon	O
4	Child Welfare Services	Debra Zanders-Willis	O	Barry Fox	+
5	HHSA Regional Representative	Dori Gilbert	+	Judy Benson	O
6	Public Health	Dr. Dean Sidelinger	O	Rhonda Freeman	+
7	Juvenile Court	H. Judge Carolyn Caietti	O	Michelle Johnson	O
8	First 5 Commission	Kim Gallo	O	Jennifer Wheeler	+
EDUCATION SECTOR					
9	SELPA	Angela McNeece	O	Carolyn Nunes	O
10	Regular Education Pupil Personnel Services	Mara Madrigal-Weiss	O	Don Buchheit	O
11	School Board	Barbara Ryan	E	Carol Skiljan	O
12	Special Education	VACANT		Aidee Angulo	+
PRIVATE SECTOR					
13	San Diego Regional Center for Developmentally Disabled	Carlos Flores	O	Judy Borchert	O
14	Alcohol and Drug Contractors Association	Elizabeth Urquhart	O	Angela Rowe	+
15	Mental Health Contractors Association	Steve Jella	+	Delrena Swaggerty	+
16	Mental Health Contractors Association	Barent Mynderse	O	Dixie Galapon	O
17	SANDAN	Margaret Iwanaga-Penrose	+	Rosa Ana Lozada	+
18	Fee for Service Provider	Mary Clark, Ph.D	+	VACANT	
19	Wraparound Constituency	Delrena Swaggerty		Carrie Kintz	+
20	Healthcare Provider	Dr. Pradeep Gidwani	+		
FAMILY AND YOUTH SECTOR					
21	Family and Youth Roundtable (FYRT)	Renee Cookson	+	Suzette Southfox	O
22	Youth Special Education/Mental Health	VACANT		VACANT	
23	Family Receiving Services	Debbie Stolz	O	Pam Toohey	O

24	Youth-Representing Residential and/or Juvenile Justice	Sarah Pauter	O	Stacey Stevens	O
COMMITTEES (Non-voting members unless a member of the Council)					
-	Outcomes Committee	Angela Chen Chair	+		
-	Executive Committee	Barry Fox Chair			
-	Early Childhood Committee	Ali Freedman Chair	O		
-	Education Committee	Mara Madrigal-Weiss Chair			

Staffing Support: Yael Koenig, Edith Mohler, Grisel Ortega

I. Welcome and Introductions (Delrena Swaggerty)

- Welcome NAMI/Family Youth Liaison, Renee Cookson- www.namisaniego.org under services you will find the CYF Liaison Blog
- Welcome Amanda Lance-Sexton, Behavioral Health Program Coordinator- she will be taking overseeing Pathways to Well-Being component and will be taking the responsibility for a number of contracts primarily day services. Prior to that occurring the contracts will be contacted for changes.

II. Approval of Minutes- May 9, 2016 (Barry Fox)

- Approved

III. Director's Report (Alfredo Aguirre)

- No Place Like Home Initiative-** State Senate felt more needs to be done to address homelessness and for those with serious mental illness. The California Behavioral Health Directors Association (CBHDA) which is an affiliate of California State of Associates of Counties (CSAC) has some concerns and would like to have it amended. It is a 2 billion dollar bond that will provide capital acquisition and rehabilitation for permanent housing for individual with serious mental illness who are homeless. Most counties like San Diego County are already doing their own initiative toward permanency housing. It has been emphasized to the state that the intent is great but there is concern over lack of local discretion. The bond will set up competitive procurement process and counties will be competing with each other.
- Bill AB2017 College Mental Health Services Trust Fund-** Since MHSA was established there has been campaigns that take money from MHSA and designate it for a particular population. It is well intended but the intent of MHSA is for funding to go to local communities so the county can look at their own priorities and own stakeholder process and set priorities as a community. The bill will take dollars out of MHSA-PEI Programs to establish counseling services for public community colleges and universities. Is seems redundant and as there are already council programs at the higher education level. It is good that community colleges are part of this as most of the population tends to navigate through them. There is not a lot of clarity of how this will be operationalized or how the procurement process will work.
- 10 Year Road Map-** Moving forward with Board Letter in July for MHSA Annual update. In that board letter there will be a 10 year road map frame work.
- Continuum of Care Reform (CCR)-** CCR is looking to ensure foster youth get the level of care they need with an emphasis on permanency and home like settings. The requirement is effective January 1, 2017. There are new standards and regulations which will impact behavioral health services and how they support foster youth. BHS is working with CWS and Probation on CCR Reform.

IV. Mental Health Services Act (MHSA)- Update (Adrienne Yancey-Collins)

- Mental Health Services Act FY16/17 Annual update-** went before a public hearing last month. There were a few comments and there were no major changes. It will be taken to the Board of Supervisors on July 19. In the update it has been highlighted that MHSA dollars will be used for a new pilot program of the state has under Medi-Cal for Whole Person Care (WPC). If BHS is able to meet parameters, the pilot will be bring additional dollars under community and some services support with that match. The pilot will impact the Adult System of Care and Transition Aged Youth

(TAY) who are high utilizes of multiple systems, often having incarcerations as result of their mental health and homelessness. They have to have a primary serious mental illness, primary substance used disorder or chronic health medical necessity.

- B. **MHSA Issue Resolution Policy Update-** the new family youth liaison is now NAMI and the contact person is Sue Skubi.
- C. **Community Forums-** The 10 year Road Map frame will be developed through these community forums. They will happen in August and September, 12 total forums, 6 in the morning and 6 in the evening. Due to August being dark for the Council the forum will take place at our September 12 Council meeting. Amended to have BHS Forum in the Central Region on the morning of 9/12/16 in lieu of the CSOC Council to allow for attendance.

V. Business Items

A. Advancing Principles Award (Delrena Swaggerty)

- Michelle Ly received the award and was nominated by several people. One of the people that nominated her is Mary Ellen Baraceros. Michelle works at UPAC as the Program Manager of the Multicultural Community Counseling (MCC) Program. The following is an excerpt from one of her nominators- Michelle embraces all the Children's System of Care Principles and have implemented them in her clinical work when she worked as a Therapist in the system of care. Now as a Program Manager she leads from experience and structures the operations of the Multicultural Community Counseling Program operations to deliver on all of the principles. Michelle has strong sector collaboration between youth/families, public agencies, private organizations and education through individualized consultations that she provides to ensure that there is a clear understanding of how each sector can maximize their resources and increase understanding for the best outcome for the client and family. These consultations are always done through the cultural lens for the goal of providing accessible and relevant services and support, which for the MCC Program means community-based services. Michelle provides Supervision and training with all levels of staff to ensure that services are individualized, strength-based, youth guided and family driven, with the goal of positive outcomes and continuous improvements as needed. Michelle strives for excellence in her work and uses these principles as her foundation.
- Sandy and Paul Fores received the award and were nominated by Ali Freedman. The following is an excerpt from Ali's nomination form- I am offering this non-traditional nomination I believe to be 100% in line with the spirit of this recognition and the System of Care principles and mission. One Thursday morning I received a call from a former NREFM foster parent with whom I had the pleasure of working in CASS 8+ years ago who was also served by the FFYC Wraparound program. She and her husband went from being informal supports, to being NREFM foster parents, to being adoptive parents. The request was... "You always said if there was anything you could do to help, to call. Well, even if all you can do is listen, I need that. And, if you need to take my family (with 8 kids in her care, at this point!) off the list for Toys for Tots in order to help this other family, please do. I mean, those are just presents, but these are people..." She proceeded to tell me about a single mother of 5 suffering from a serious medical problem who had recently become homeless. She was terrified of losing her children or having them split up. This mom has been clean for 7+ years, has a history with CWS and sees CWS as having saved her life and given her an opportunity to be a mom. Mom remained drug free through becoming homeless and was committed to her children. Even while scrambling to stay in a motel, she made sure her school aged children got to school. After gathering some history and needs, I got to work tapping into the San Diego Children's System of Care. Burning up email, texts, and voicemails, I was able to reach out to more than 30 leads, and those leads led to others, in no time. Within 30 hours I had a donor to pay for the motel for up to a week and longer as needed; food, clothing, toothbrushes, toys from Jewish Family Services and FFYC; transportation and additional resources from the Homeless Liaison at La Mesa Spring Valley School District; additional leads and psychiatry resources from Vista Hill; community resources from the East County Collaborative including Spiritual Support; and transitional housing with counseling and other supportive services for families who have experienced Domestic Violence from South Bay Community Services. I also had a tearful, grateful mom of 5 kids and a tearful, grateful mom of 8 kids expressing their heartfelt gratitude. Mom said, "whatever I can do to pay you back. I'll come work for you as much as I can. Whatever I can do." Because of our System of Care, I was able to respond, "The only thing you have to do to repay us is the one thing you can do better than any of us...be a great mom to your kids." The first morning they woke up in their apartment, mom sent a message to me, "I woke up to five smiling children. It was the best ever. Everybody is so happy. Thank you so much."

- B. Mental Health Bill of Rights/Questions to Ask (Yael Koenig)- Pamphlet**
 It is a resource for the system of care partners to make available for families as they enter their program. This resource helps guide not only foster youth but all youth on how they can ensure they have dialog with treating psychiatrist about their medication and how to advocate for themselves and their families can be part of that process. Please order pamphlets through jane.trogia@dss.ca.gov
- C. Private Sector Sub-Committee Recommendations (Yael Koenig)- Handout**
 A summary of the eight recommendations and responses to them were attached to the meeting packet. Some of these recommendations are already being worked on existing committees and others are committees that may be formed in the future. The private sector will take the response back to their sub-committee to see what they may want to continue working on.
- D. FY16/17 CYFBHSOCC Sub-Committee Reporting Schedule (Yael Koenig)- Handout**
 Schedule for new fiscal year sub-committee reporting.
- E. Documentation Training For Child/Youth, Parent & Peer Support Partners (Yael Koenig)- Handout-** This training is facilitated through County QI.
- F. JV220 Update (Dr. Laura Vleugels) - Last year senate bill 238 was passed and led to some changes in the JV220 process. Some feedback was gathered at the council for the Judicial Council. The Judicial Council has made modification to the process:**
- There will be new forms.
 - There will be opportunity for guardian to provide feedback on a dedicated form.
 - There will be a dedicated form for youth to provide feedback.
 - There will be a new form for protective services worker and probation officers to weigh in on the treatment for the youth.
 - The prescribers form has also been modified. In the past prescribers had one form. Moving forward there will be two forms. The first form will be if it's a new prescriber to the youth or if the prescriber is choosing to start a new medication. The second form, which is a new form, if the same prescriber is continuing the same medication.
 - The form has been modified to be longer with more detailed questions.
 - The process for prescribers will remain unchanged, in that the same forms will be submitted to the protective services worker, sent over the Vista Hill Juvenile Court clinic for review and input will be provided to the judge.
 - Vista Hill Juvenile Court clinic will modify their review slightly to incorporate the guidelines, this are the same modifications made on the medication monitoring tool.
- G. Summary of Second Annual Children's Mental Health Celebration (Yael Koenig)- Handout**
 There were about 100 individuals that attended the May 4th event. There were booths by Fred Finch and Public Health. Had community come together with Drum Circle and Yoga. There were 22 CYF programs that submitted art work. The art work is being displayed at the BHS administration building and some will be distributed to CYF programs that submitted art work.

VI. Sectors "Hot Topics" from Council Representatives

Public Input/Discussion to follow (Delrena Swaggerty) - Handout

- A. Warm Handoff Update (Yael Koenig)-** The private sector subcommittee will work on a communication and training plan.
- B. Postpartum Mental Health Resource Grid Update (Yael Koenig)-** Partners around the community have provided input on resources to add to the postpartum services grid. The grid has been updated with a contact person to input information to this grid. The grid has been shared with the Access and Crisis Line, Adult system of care and TAY workgroup and has been posted in the Optum and 211 website. It is in the process of being posted in the Network of Care website.
- Optum:
<https://www.optumsandiego.com/content/sandiego/en/county-staff---providers.html>
<https://www.optumsandiego.com/content/sandiego/en/community-resources.html>
 - 211:
<http://211sandiego.org/mental-health-services>
- C. Limited Psychiatry-** Please see "Hot Topics" handout attached.

VII. Sub-Committee Update Reports (If time permits)

A. Outcomes (Angela Chen)- Handout

Looked at FY14/15 behavioral health assessment question of "Client Experienced Trauma" yes or no question. Report indicate BHS is doing very well getting this question assessed. 60.4% answered yes and 31.4% answered no, if you combine those two 91.8% of clients are getting a trauma question assessed.

The Outcomes subcommittee is also taking action to help add Help Text to the BHA by using the SAMHSA definition.

B. **Early Childhood** (Ali Freedman)- None

C. **Education Advisory** (Mara Madrigal-Weiss)- Handout

- Heather Nemour provided the Project Cal-Well Newsletter. The newsletter is intended for all stakeholders involved in Project Cal-Well including SDCOE, CVESD, MEUSD, WUSD and key partners in the grant. You will be provided with quarterly updates on the project as well as current information and best practices in behavioral/mental health and wellness.

VIII. Announcements

- April 2016 CWS Foster Family Agency/Group Homes Summaries (Barry Fox)- Handouts
- Next Council meeting is the Annual Strategic Planning Meeting- Monday, July 11, 2016 from 9-11 AM at 8965 Balboa Ave, San Diego, CA 92123- Room1a/b
- Next CYFBHSOCC Exec. Committee Meeting- Monday, June 27 at 10AM (Conference Call)
- Registration is now open for the 7th Annual Early Childhood Mental Health "We Can't Wait" Conference- Where Nature and Nurture Meet- September 22-24, 2016 at Crown Plaza Hotel, San Diego, CA. Register at <http://www.earlychildhoodmentalhealth-sandiego.com/registration-information/>

IX. Action Item

Action Items	Action By	Action Due
Post Postpartum Grid to Network of Care	Grisel Ortega	http://sandiego.networkofcare.org/mh/library/learning-center.aspx?lc=depression Complete
10 year Road Map	Alfredo Aguirre	July 11, 2016 Annual Strategic Planning Meeting- Complete
BHS Community Forum	Adrienne Yancey	September Council Meeting was replaced with a BHS Forum on 9/12/16. Complete
Email SmartCare Brochures	Deborah Skvarna	Complete
Have a Federally Qualified Health Center (FQHC) present to the Council	Yael Koenig	November Council Meeting
Compile directory of FQHC	Yael Koenig	Council of Community Clinics is working on it.

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CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL

STRATEGIC PLANNING MEETING MINUTES

July 11, 2016 – 9:00-11:00 A.M

8965 Balboa Ave, San Diego, CA 92123- Room 1a/b

+ =Member in Attendance

O =Absent

E =Excused

	CONSTITUENCY	MEMBER	STATUS	ALTERNATE	STATUS
PUBLIC SECTOR					
1	Mental Health Board	Rebecca Hernandez	O	VACANT	
2	Behavioral Health Services	Laura Vleugels, M.D.	+	Jean Avila	+
3	Public Safety Group/ Probation	Timothy Hancock	O	Margie Deleon	O
4	Child Welfare Services	Debra Zanders- Willis	O	Barry Fox	+
5	HHS Regions	Dori Gilbert	+	Jennifer Sovay	O
6	Public Health	Dr. Dean Sidelinger	O	Rhonda Freeman	+
7	Juvenile Court	H. Judge Carolyn Caietti	O	Michelle Johnson	O
8	First 5 Commission	Kim Gallo	O	Jennifer Wheeler	+
EDUCATION SECTOR					
9	SELPA	Angela McNeece	+	Carolyn Nunes	O
10	Regular Education Pupil Personnel Services	Mara Madrigal- Weiss	O	Heather Nemour	O
11	School Board	Barbara Ryan	O	Carol Skiljan	O
12	Special Education	Aidee Angulo		Stacey Musso	O
PRIVATE SECTOR					
13	San Diego Regional Center for Developmentally Disabled	Carlos Flores	O	Judy Borchert	O
14	Alcohol and Drug Contractors Association	Angela Rowe	+	Marisa Varond	O
15	Mental Health Contractors Association	Steve Jella	+	Barent Mynderse	+
16	Mental Health Contractors Association	Angela Chen	O	Delrena Swaggerty	O
17	SANDAN	Margaret Iwanaga- Penrose	+	Rosa Ana Lozada	+
18	Fee for Service Network	Sherry Casper	O	Andrea Karp, PsyD	
19	Wraparound Constituency	Delrene Swaggerty	O	Carrie Kintz	+
20	Healthcare/ Pediatrician	Dr. Pradeep Gidwani	O		
FAMILY AND YOUTH SECTOR					
21	Family and Youth Liaison	Renee Cookson	+	Suzette Southfox	+
22	Caregiver of child/youth served by the public health system	Debbie Stolz		Pam Toohey	

23	Youth served by the public health system (up to age 26)	VACANT		VACANT	
24	Youth served by the public health system (up to age 26)	VACANT		VACANT	
COMMITTEES (Non-voting members unless a member of the Council)					
-	Outcomes Committee	Angela Chen Chair	+		
-	Executive Committee	Barry Fox Chair			
-	Early Childhood Committee	Ali Freedman Chair	+		
-	Education Committee	Mara Madrigal-Weiss Chair			

Staffing Support: Yael Koenig, Edith Mohler, Grisel Ortega

I. Agenda Items

1. Opening and Introductions

- A. County 2016-2021 Strategic Plan (Handout)
- B. 10 Year Roadmap (Handouts)

2. CYF Council Overview

- A. Council Overview (Handout)
- B. CSOC Principles (Handout)
- C. Bylaws (Handout)

3. Council Seats and Sub-Committees (Discussion)

- A. Council Sub-Committees (Handout)
- B. Council Seats (Handout)
 - Youth (Definition/Age)
 - Wraparound
 - Managed Care Health Plans (Handouts)
- C. Bylaws (Handout)
 - Impact/Updates

4. Review FY 15-16 Achievements & FY 16-17 Goals

- A. CYF Goals/Achievements (Handouts)

5. FY 16-17 Goal Setting Via Break-Out Session

6. Wrap-up

II. Action Items

1.	Update bylaws to reflect: <ul style="list-style-type: none"> 1. Youth seat parameters and age. 2. Retirement of Wraparound seat with review of impact in FY16/17 slated for February 8, 2017 3. Formally add Managed Care Health plan seat <ul style="list-style-type: none"> a. BHS Director to invite representative b. Orient new member to Council 	Completed, distributed on 11/14/16 Council Meeting. Created sub-committee summary document. Emailed and discuss at 11/14/16 Council Meeting.
2.	Add MHSA Ad Hoc Sub-Committee Review the annual MHSA Plan to coordinate CYF Council input (Angela Chen and Rosa Ana Lozada)	To be initiated upon receipt of annual plan.
3.	Orientation for new council members	Orientation materials

		developed.
4.	Identify/connect discussion/presentation to CYF principles	On-going
5.	Promote 4 sector representation in each sub-committee	Survey to sub-committee's to assess representation sent out 10/21/16.
6.	Prioritize time in Council for sub-committee report out's	On-going (see Council Reporting/Schedule). Shifted sub-committee report out's to 2 times a year vs. 3 to maximize reporting time.
7.	Finalize CSOC Principles for Trauma Informed Services	For Council vote on 11/14/16
8.	Recommendations for the 10 year road map	On-going
9.	Collate and disseminate strategic planning break out session goals input and CSOC Council Goals FY16/17	Disseminate by email and at 11/14/16 Council meeting
10.	Recruitment discussion	Private sector will provide and update and next steps at 11/14/16 Council meeting
11.	Name tags for meeting attendees	Initiated 11/14/16
12.	Coffee at Council Meetings	Initiated 11/14/16

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CHILDREN, YOUTH AND FAMILIES (CYF) BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL
ANNUAL STRATEGIC PLANNING MEETING
 Follow-Up Items FY16/17

OBJECTIVE		STATUS
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6.	Prioritize time in Council for sub-committee report out's	<ul style="list-style-type: none"> • On-going (see Council Reporting/Schedule). • Shifted sub-committee report out's to 2 times a year vs. 3 to maximize reporting time.
7.	Finalize CSOC Principles for Trauma Informed Services	For Council vote on 11/14/16
8.	Recommendations for the 10 year road map	On-going
9.	Collate and disseminate strategic planning break out session goals input and CSOC Council Goals FY16/17	Disseminate by email and at 11/14/16 Council meeting
10.	Recruitment discussion	Private sector will provide and update and next steps at 11/14/16 Council meeting
11.	Name tags for meeting attendees	Initiated 11/14/16
12.	Coffee at Council Meetings	Initiated 11/14/16

July 2016 Strategic Planning for FY16-17

CYF Council Structure- What's working

- Meeting every month:
 - ✓ Time & place
 - ✓ Time management
 - ✓ Organized
 - ✓ Administration
 - ✓ Minutes
 - ✓ Email reminders and follow-up
 - ✓ Co-chair model (rotating chairs)
- Presentations
- Recognitions
- Alfredo's Director's Reports
- Cross-Sector representation and information in packets is great
- Inclusion- ex: Public Health Director
- Discussion of data/outcomes and where things are at
- Information sharing



**Children, Youth and Families Behavioral Health
System of Care Council
Bylaws**

Article One Name

The name of this organization shall be the CHILDREN, YOUTH AND FAMILIES BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL (also known as CYFBHSOC or the Council).

Article Two Powers and Duties

The powers and duties of the Council shall be set forth by Behavioral Health Services (BHS) Administration, a division of the Health and Human Services Agency (HHS). The Council reports to the Behavioral Health Services Director (BHS Director). The Council serves in an advisory capacity to the BHS Director. However, the Council, as needed, can brief the HHS Director and/or staff on children's behavioral health developments/issues. The Council is charged by the BHS Director to perform the following functions:

- Provide community oversight for the integrity of all services and advancement of all aspects of the system of care;
- Provide advice and feedback related to the progress and future expansion of the CYFBHSOC; and
- Provide information and recommendations to the BHS Director.

Article Three Membership

Membership on the Council is via appointment by the BHS Director through recommendations of each sector. The Council provides an opportunity for all four sectors (Education, Family/Youth, Provider, Public) to have a voice in policy development and implementation of the System of Care. Members will be appointed from the following:

Constituencies	Seats
Behavioral Health Advisory Board	1
Behavioral Health Services	1
Public Safety Group/Probation	1
Child Welfare Services	1
HHS Regions	1
Public Health	1
Juvenile Court	1
First 5 Commission	1
Special Education Local Plan Areas (SELPA)	1
Regular Education- Pupil Personnel Services	1
School Board	1
Special Education	1
San Diego Regional Center for Developmentally Disabled	1
Alcohol and Drug Contractors Association	1
Mental Health Contractors Association	2

San Diego Non Profit Association (SDNA)	1
Fee For Service Network	1
Healthcare/Pediatrician	1
Family and Youth Liaison	1
Caregiver of child/youth served by the public health system	1
Youth served by the public health system (age up to 26)	2
Managed Care Health Plan	1

Membership shall be limited to 24 voting members. Each member/sector will also designate an "alternate," a person to act on behalf of the regular member when the regular member is unavailable. Alternates retain voting privileges only when the regular member is not present. CYFBHSOCC members serve two-year terms, which may be renewed at the discretion of the BHS Director. Terms will begin in July, and be staggered with half of the membership rolling over one year, and the other half the next, to avoid enlisting an entirely new slate at one time.

Article Four Vacancies

Any vacancy in any seat on the Council shall be filled by appointment by the BHS Director. When a vacancy occurs, an analysis shall be conducted by the BHS Director as to the current composition of the Council and what constituency requires additional representation. The BHS Director shall recruit potential members from the constituency groups listed in Article Three, taking into consideration what is needed to represent demographics (gender, ethnicity, and age) of the County as a whole to the extent feasible. The Council should reflect the ethnic diversity of the client population in the county. The BHS Director formally appoint the member via letter to the member of the Council.

Article Five Quorum

A quorum shall be defined as one person more than one half of the appointed members. Alternates may be included in the quorum count if they are providing voting representation for the regular member. The definition of appointed members excludes unfilled positions and those vacated by resignation or removal.

Article Six Meetings

The CYFBHSOCC co-chairs will determine the frequency, times and locations for the Council meetings at the beginning of each committee year, July 1. Changes to the prevailing meeting schedule will be communicated to members no later than the meeting immediately preceding the changed meeting date. Meetings shall convene promptly at the scheduled time.

Agendas: Agendas are prepared by the Executive Committee in consultation with the BHS Director or designee. Members advise the co-chairs in advance of the proposed agenda items. Agendas are forwarded to Council members, alternate and attendees in advance of the Council meeting to enable participants to decide if they want to attend.

Meeting Minutes: County Administrative staff record CYFBHSOCC meetings and maintain the Minute Book. Minutes are distributed to CYFBHSOCC members in advance of the next regularly scheduled meeting and shall be posted on the County website.

Article Seven Officers

The business of the Council is organized and managed through two co-chairs. The co-chairs are nominated by the sector responsible for chairing the upcoming serving term. The nominations are presented to the CYFBHSOCC at the April and May meetings; the co-chairs are formally elected by the CYFBHSOCC at the June meeting and start serving in the month of July.

The co-chairs are named from the four sector partnership of the System of Care – Education, Families/Youth, Providers, and Public Agencies, and should not represent the same constituency during any term. The co-chairs serve for two-year terms on a rotating basis, and alternating so there is always one serving their first and the other serving their second term year.

The co-chairs are responsible for the development and preparation of the meeting agendas and for obtaining briefings on progress and activities from the BHS Director. County Administrative staff provides support to the co-chairs and to activities of the Council, including meeting notices, minutes, and coordination.

Article Eight Sub-committees

The CYFBHSOCC has a “standing” sub-committee, the Executive Committee, tasked to follow up on current SOC principles and recommend a process to ensure relevancy to current realities and challenges which includes the development of sub-committees and task forces in order to complete its business, as well as the pausing or retirement of sub-committees that are no longer needed. Sub-committees are to submit a monthly written report to the CYFBHSOC Council.

Each sub-committee shall appoint or elect a chair or co-chairs. The chairs of the sub-committees are then members of the Executive Committee. The chairs of the sub-committees may be members of the Council, however if the individual serving in the capacity of chair or co-chair of a sub-committee is not a member of the Council, they become a member, ex officio (without vote), of the Council.

Article Nine Voting and Consensus

The CYFBHSOCC strives to achieve consensus on all decision matters. In the absence of full consensus, any item put to vote will be approved by a simple majority of those present. A quorum of the CYFBHSOCC must be present in order for a vote to be taken on any motion brought to the CYFBHSOCC.

Motions put to the CYFBHSOCC for vote should include the following information:

- Concise statement of the issue for vote;
- Purpose for the vote (e.g. recommendation to the Director, or change in bylaws); and
- Action to be taken pursuant to the vote.

The Council votes by show of hands on all action items brought before the Council for decision. The majority voice carrying the decisions is noted in the Minutes. Vote counts are not required.

Members opposing the outcome of a closely contested vote may request permission to submit a “minority opinion” into the record of the vote. Opposing members have two working days from the date of the vote to submit their minority opinion, in writing, to the co-chairs for inclusion in the official Minutes of the CYFBHSOCC.

Only members of the Council, or alternates attending in place of the delegated member, are eligible to vote. Alternates attending in addition to the regular member are not eligible to vote and do not count in the Quorum determination.

Article Ten Member Conduct

Conduct of members of the CYFBHSOCC is guided by these principles:

- Courtesy and respect for the customs and beliefs of others, consistent with the mission and philosophy of the System of Care and the Council;
- Respect for the confidential nature of information used by the CYFBHSOCC to conduct its business;
- Conduct in all relationships that ensures decisions are not compromised by any conflict of interest;
- Use of sound, ethical management practices in all CYFBHSOCC activities;
- Continuous striving to provide quality service to the CYFBHSOCC, the System of Care, and the children and families it serves.

Article Eleven Ratification and Amendments

These bylaws may be reviewed and updated annually by the CYFBHSOCC meeting.

Changes or amendments to these bylaws must be submitted in writing to the co-chairs and the BHS Director for review and consideration. The CYFBHSOCC co-chairs will have final determination if the amendment will be put to vote by the entire CYFBHSOCC. The Council may, by a two-thirds (2/3) vote, adopt amended bylaws at any CYFBHSOCC meeting provided notice has been given at the prior meeting or at least thirty (30) days written notice has been given to the CYFBHSOCC membership.

County of San Diego
Children, Youth and Families Behavioral Health System of Care Council (CYFBHSOCC)
FY16/17 Sub-Committee's

	SUB-COMMITTEE	MEETING DATE/LOCATION/TIME	LEAD (Co-Lead)
1	Outcomes	Meets the 1 st Tuesday of the month-La Vista Room from 11:30 A.M. to 1:00 P.M.	<p>Angela Chen achen@upacsd.com</p> <p>CYF Rep: Yael Koenig/Rebecca Raymond/Amanda Lance-Sexton Yael.Koenig@sdcounty.ca.gov Rebecca.Raymond@sdcounty.ca.gov Amanda.Lance-Sexton@sdcounty.ca.gov</p>
2	Early Childhood	Meets the 2 nd Monday of the month-La Jolla Room from 10:30 A.M. to 12:00 P.M.	<p>Stacey Annand & Aisha Pope- Co-chairs sannand@vistahill.org APope@centerforchildren.org</p> <p>CYF Rep: Jean Avila/Shannon Jackson Jean.Avila@sdcounty.ca.gov Shannon.Jackson@sdcounty.ca.gov</p>
3	Education Advisory Ad Hoc	Meets as needed	<p>Mara Madrigal-Weiss mmadrigal@sdcoe.net</p> <p>CYF Rep: Edith Mohler Edith.Mohler@sdcounty.ca.gov</p>
4	TAY Workgroup	Meets quarterly the 4 th Wednesday of the month-La Vista Room from 11:30 A.M. to 1:00 P.M.	<p>Cecily Thornton-Sterns & Maria Morgan- Co-chairs Cecily.Thornton-Sterns@sdcounty.ca.gov Maria.Morgan@pathways.com</p> <p>CYF Reps: Mike Miller/Fran Cooper Michael.Miller@sdcounty.ca.gov Frances.Cooper@sdcounty.ca.gov</p>
5	CYF CADRE	Meets quarterly-2 nd Thursday of the month-Del Mar Room from 1:30 to 3:00 P.M.	<p>Bethany Hansell Bhansell@sdvouthservices.org</p> <p>CYF Rep: Wendy Maramba/ Shannon Jackson Wendy.Maramba@sdcounty.ca.gov Shannon.Jackson@sdcounty.ca.gov</p>
6	Cultural Competency Resource Team (CCRT)	Meets the 1 st Friday of the month-La Jolla Room from 10:00 to 11:30 A.M.	<p>Piedad Garcia & Charity White-Voth Piedad.Garcia@sdcounty.ca.gov Charity.White-Voth@sdcounty.ca.gov</p> <p>CYF Rep: Edith Mohler Edith.Mohler@sdcounty.ca.gov</p>

County of San Diego
Children, Youth and Families Behavioral Health System of Care Council (CYFBHSOCC)
FY16/17 Sub-Committee's

7	Family and Youth Sector	<ul style="list-style-type: none"> Family Voice Meeting – 4th Thursday of Sept-16, Oct-27, Jan-26, Apr-27-at 8964 N Magnolia St, Santee, CA 92071 from 6:30-8:00 P.M. Quarterly Sector Meeting – 5th Thursday of Sept-29, Dec-29, Mar-30, Jun-29 at NAMI on-line/in-person from 2:00-3:30 P.M. 	<p>Renee Cookson ReneeCookson@namisd.org</p> <p>CYF Rep: Rebecca Raymond Rebecca.Raymond@sdcounty.ca.gov</p>
8	Family and Youth As Partners	Meets the 3 rd Thursday of the month- Del Mar Room from 2:00 to 3:30 P.M.	<p>Renee Cookson ReneeCookson@namisd.org</p> <p>CYF Rep: Rebecca Raymond Rebecca.Raymond@sdcounty.ca.gov</p>
9	Private Sector	Meets the 3 rd Wednesday of the month- 7535 Metropolitan Dr, SD, 92108 at 1:00 P.M.	<p>Steven Jella sjella@sdyouthservices.org</p> <p>CYF Rep: CYF COR's by Invitation</p>
10	Executive	Meets the 4 th Monday of the month- Conf. Call from 10:00-10:30 A.M.	<p>Yael Koenig Grisel.Ortega@sdcounty.ca.gov</p>
11	Children's Mental Health Well Being Celebration	Begins in January of each year	<p>Renee Cookson ReneeCookson@namisd.org</p> <p>CYF Rep: Edith Mohler Edith.Mohler@sdcounty.ca.gov</p>
12	MHSA Annual Plan Ad Hoc	Begins approximately in May of each year to review the Annual MHSA Plan and provide input.	<p>Tentative Lead: Angela Chen, Rosa Ana Lozada, Angela Rowe & Leah Bush</p> <p>CYF Rep: Elizabeth Locano Elizabeth.Locano@sdcounty.ca.gov</p>

PRIVATE SECTOR

Per July 2016 Strategic Planning the following shall be a focus of the Private Sector Subcommittee		
	FOCUS AREA	LEAD
1	Contract Staff Recruitment and Retention	<p>Steven Jella sjella@sdyouthservices.org</p>
2	Information Sharing	<p>Steven Jella sjella@sdyouthservices.org</p>

**Children, Youth and Families Behavioral Health System of Care Council
Cultural Competence Resource Team Subcommittee Self-Assessment**

One of the action items from the July 11, 2016 CYF Council Strategic Planning meeting was to promote all sector representation in the CYF Council subcommittees. As a first step we are asking you to assess your subcommittee by responding to the following items:

1) Does the subcommittee have representation from each sector?

Member Name: Please enter the subcommittee member name and indicate the sector represented.	Private Sector	Public Sector	Education Sector	Family/Youth Sector
Leon Altamirano	X			
Patrice Baker	X			
Cindi Cassady	X			
Lauren Chin		X		
Minola Clark Manson	X		X	
Dixie Galapon	X			
Piedad Garcia		X		
Rick Heller	X			
Celeste Hunter	X			X
Kat Katsanis-Semel	X			
Bindu Khurana	X			
Tabatha Lang		X		
Michelle Ly	X			



Member Name: Please enter the subcommittee member name and indicate the sector represented.	Private Sector	Public Sector	Education Sector	Family/Youth Sector
Nicole McAleer		X		
Edith Mohler		X		
Joe Reimann		X		
Nancy Rodriguez		X		
Charity White		X		

2) Efforts/Barriers to obtain four sector representation in this subcommittee?

3) If applicable, how can the Council support four sector representation in this subcommittee?



**Children, Youth and Families Behavioral Health System of Care Council
Family and Youth as Partners Subcommittee Self-Assessment**

One of the action items from the July 11, 2016 CYF Council Strategic Planning meeting was to promote all sector representation in the CYF Council subcommittees. As a first step we are asking you to assess your subcommittee by responding to the following items:

1) Does the subcommittee have representation from each sector?

Member Name: Please enter the subcommittee member name and indicate the sector represented.	Private Sector	Public Sector	Education Sector	Family/Youth Sector
Suzette Southfox	X			X
Rebecca Raymond		X		
Heather Nemour	X		X	
Carrie Kintz	X			
Wendy Panagos	X			
Karina Helgeson	X			
Katie Goldin	X			
Diana Rabban	X			
Celeste Hunter	X			X
Renee Cookson	X			
Rosa Ana Lozada	X			

2) Efforts/Barriers to obtain four sector representation in this subcommittee?

3) If applicable, how can the Council support four sector representation in this subcommittee?

**Children, Youth and Families Behavioral Health System of Care Council
Early Childhood Subcommittee Self-Assessment**

One of the action items from the July 11, 2016 CYF Council Strategic Planning meeting was to promote all sector representation in the CYF Council subcommittees. As a first step we are asking you to assess your subcommittee by responding to the following items:

1) Does the subcommittee have representation from each sector?

Member Name: Please enter the subcommittee member name and indicate the sector represented.	Private Sector	Public Sector	Education Sector	Family/Youth Sector
Ali Freedman	X			
Jean Avila		X		
Pradeep Gidwani	X			
Jeff Rowe		X		
Aisha Pope—Co-chair	X			
Stacey Annand—Co-chair	X			
Lea Bush	X			
Rachel Swaykos		X		
Deb Stolz				X
Jennifer Kennedy	X			
Lily Cosico-Berge			X	
Carolina Moxley				X

2) Efforts/Barriers to obtain four sector representation in this subcommittee?

We encourage subcommittee members to invite/introduce our group to others in the community to enhance group membership.

3) If applicable, how can the Council support four sector representation in this subcommittee?

Perhaps, if the Council can also be intentional in inviting representation from county-wide practitioners working with/serving infants, young children and their families—specifically in enhancing membership from those in contact with pregnant women, mothers post-partum, home visitors, and 0-5 early care providers.

**Children, Youth and Families Behavioral Health System of Care Council
Education Subcommittee Self-Assessment**

One of the action items from the July 11, 2016 CYF Council Strategic Planning meeting was to promote all sector representation in the CYF Council subcommittees. As a first step we are asking you to assess your subcommittee by responding to the following items:

1) Does the subcommittee have representation from each sector?

Member Name: Please enter the subcommittee member name and indicate the sector represented.	Private Sector	Public Sector	Education Sector	Family/Youth Sector
Mara Madrigal-Weiss-Chair Coordinator SDCOE			X	
Barbara Ryan Santee Board of Education, Representing SD County School Board Assoc. Vice President, Government Affairs Rady Children's Hospital			X	
Angela McNeece, Senior Director, SDCOE			X	
Heather Nemour, Project Specialist , SDCOE			X	
Violeta Mora, Project Specialist, SDCOE			X	



Frances Cooper		X		
HHSA Behavioral Health				
Pam Hansen	X			
San Diego Center for Children				

2) Efforts/Barriers to obtain four sector representation in this subcommittee?

The Education sub-committee's role has changed greatly since its inception. At present the committee does not meet regularly and therefore active recruitment of participation from the other sectors is not being sought out

3) If applicable, how can the Council support four sector representation in this subcommittee?

When an ad-hoc project for this sub-committee is requested it would be helpful for the Council to promote participation from the other sectors



**CHILDREN, YOUTH AND FAMILIES (CYF)
BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL
REPORTING/SCHEDULE**

2nd Monday of each month from 9-10:30 A.M.
Scottish Rite Center- 1895 Camino Del Rio S, San Diego, CA 92108
Shell Room

July 11th
STRATEGIC PLANNING MEETING

August 8th
DARK

September 12th
BHS Community Engagement Forum- DARK

October 18th
JOINT CYF/TAY/AOA MEETING- Hosted by AOA
HSC- 3851 Rosecrans St, SD 92110- Coronado Room from 2:30-4:00pm

November 14th
CADRE/CCRT/TIS

December 12th
Outcomes/Early Childhood/Education Advisory/QI-MIS

January 9th
TAY/CSOC Academy/QI-Performance Improvement Team

February 13th
CADRE/CCRT/QI

March 13th
TIS/Outcomes/QI-MIS

April 10th
JOINT CYF/TAY/AOA MEETING
Hosted by CYF

May 8th
Early Childhood/Education Advisory/QI-Performance Improvement Team

June 12th
TAY/CSOC Academy/QI

County of San Diego Children, Youth and Families Behavioral Health System of Care Council Goals

Vision: San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.

Mission: To ensure that all agencies serving San Diego County children and youth up to age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles:

FY 16-17 Overall Goals

- Promote Live Well San Diego Vision.
- Infuse Customer Service commitment.
- Add a Health Plan seat to the CSOC Council.
- Add an Ad Hoc Children's System of Care (CSOC) Council Mental Health Services Act (MHSA) subcommittee to review the Annual MHSA Plan.
- Address staffing recruitment and retention.
- Deliver the 3rd Annual Children's Mental Health Well-Being Celebration – May 2017.
- Contribute to the 1115 Drug Medi-Cal Waiver – Organized Service Delivery System planning.
- Promote advancing trauma informed systems through infusing consistent language in the Behavioral Health Assessment and updating the CSOC Principles.
- Advance Pathways to Well-Being with emphasis on Child and Family Teams.
- Develop Pathways to Well-Being training for Probation workforce.
- Expand Intensive Care Coordination (ICC) and In Home Based Services (IHBS) to all eligible beneficiaries.
- Prepare for Continuum Care Reform including Therapeutic Foster Care (TFC), and Short-Term Residential Treatment Programs (STRTP).
- Expand Crisis Stabilization services.
- Strengthen Care Coordination with emphasis on Warm Handoff and renewal of Global Oversight Analysis Linking Systems (GOALS) Memorandum of Understanding (MOU).
- Increase education sector awareness of BHS programming through the HHSA School Collaborative and utilize partnership to identify system improvement opportunities.
- Early Childhood – Specialized Behavioral Health Assessment (BHA) and Eyberg Child Behavior Inventory (ECBI) tool for all.
- Identify new and system relevant trainings.
- Emphasize importance of reviewing/updating Adjustment Disorders diagnosis.
- Promote authentic utilization of Family and Youth Partners as service providers.
- Support Homework Performance Improvement Project (PIP).
- Develop a Lesbian Gay Bi-Sexual, Transgender, Questioning (LGBTQ) programming.
- Establish a local co-occurring teen residential program in collaboration with Probation/Public Safety Group (PSG), Courts, and Child Welfare Services (CWS).
- Continue the conversion for children's mental health programs to Full Service Partnerships (FSP).
- Establish TERM rates, update the TERM Specialty Standards and offer trainings to the TERM Provider Panel.

County of San Diego
Children, Youth and Families Behavioral Health System of Care Council Goals

FY 15-16 Overall Goals	
	<ul style="list-style-type: none"> • Support Agency Priorities: Live Well San Diego • Infuse Customer Service commitment • Advance Pathways to Well-Being (Katie A.) • Psychiatric crisis supports; explore a "check in" code • Care Coordination • Early Childhood awareness and expertise development • Monitor access/capacity • Add an Ad Hoc committee for annual Children's Mental Health Well-Being Celebration in May • Contribute to the 1115 DMC Waiver – Organized Service Delivery System discussion/planning • Prepare for Prevention and Early Intervention regulations for FY 16-17 system impact • Add Family and Youth Advisory Council subcommittee to the CSOC Council • Restructure the CSOC Council to increase engaging active contributions • Promote advancing trauma informed systems • Identify new and system relevant trainings
Goal	FY 15-16 Highlights of Accomplishments
Pathways to Well-Being	<ul style="list-style-type: none"> • The National Association of Counties (NACo) granted Pathways to Well-Being the 2016 Achievement Award. • Provided trainings on ICC/IHBS expansion to comply with DHCS directive. Expansion became effective July 1, 2016. • Provided numerous on-site Technical Assistance (TA) sessions to BHS Providers. • Developed and initiated Child and Family Team Facilitation Trainings to system of care providers. • Continued to provide full day Pathways training.
Continuum of Care Reform (CCR)	<ul style="list-style-type: none"> • Participated in multiple State workgroups on CCR. • Established a local CCR Oversight Workgroup for CWS, Probation and BHS. • Disseminated CCR information to Council and BHS Providers. • Began system planning for 7-1-17 CCR implementation and transition to Therapeutic Foster Care and Short Term Residential Therapeutic Programs (STRTPs).

**County of San Diego
Children, Youth and Families Behavioral Health System of Care Council Goals**

Addressing needs of youth/families experiencing a psychiatric crisis	<ul style="list-style-type: none"> Prepared for Emergency Screening Unit (ESU) operations shift from County & Contracted to exclusive contractor effective 7-1-16. Secured a \$1.7 million award through the California Health Facilities Financing Authority (CHFFA) which will be utilized towards renovating the Hillcrest site for a 12 bed ESU facility. Inpatient Solutions Workgroup was re-established to evaluate transport protocols for youth experiencing a psychiatric crisis. Formation of the Acute Continuum of Care Initiative, in partnership with Hospital Association of San Diego and Imperial Counties (HASDIC). Policy Committee has begun meeting. Analyzed Assemble Bill 741 which would create a mechanism and option for Counties to offer Crisis Residential services to children and youth.
CYF Celebration	<p>2nd Annual Children's Mental Health Well-Being Celebration held May 4th, 2016 with a focus on Health, Hope, & Happiness.</p> <ul style="list-style-type: none"> 22 Programs submitted art created by children and youth. Art is displayed at BHS Administration office Over 100 attendees joined the 2nd Annual Celebration which featured Drum Circle, Yoga, Mental Health Wheels, and Art display.
Early Childhood	<ul style="list-style-type: none"> The 6th "We Can't Wait" Conference was held September 2015. Began planning for the 7th "We Can't Wait" Conference for September 22-24, 2016. Finalized a 0-5 Behavioral Health Assessment (BHA) to be released in FY16-17. Evaluated shifting to Eyberg Child Behavior Inventory (ECBI) measure for young children as a more appropriate outcomes tool; initiate on July 1, 2016.
Transforming and Advancing the System of Care	<ul style="list-style-type: none"> 13 BHS Community Engagement Forums were conducted in Oct/Nov of 2015 with participation of over 880 community members. Promoted awareness regarding the Medi-Cal Expansion for all youth which became effective May 2016 – SB 75. Implemented Innovation Projects effective July 1, 2015: <ul style="list-style-type: none"> Caregiver Connection to Treatment – for young children (Innovation 11). Family Therapy Participation - Utilizing Parent Partners (Innovation 12) – 6 Regional Programs. FSP programming re-design was initiated in January 2016 with ongoing roll out. PEI - School Age programs were re-procured & expanded countywide with refugee component in East region, effective July 1, 2016. PEI Suicide Prevention programming was expanded to be countywide with an anti-bullying component, effective July 1, 2016. Increased services for foster youth through Incredible Families programming, effective March 2016. Continued providing Evidence Based Practice trainings and other relevant trainings like Impulsive and Self-Injurious Behaviors in Children and Youth, Introduction to Child Parent Relationship Therapy (CPRT) and other trainings like Play Therapy

**County of San Diego
Children, Youth and Families Behavioral Health System of Care Council Goals**

	<ul style="list-style-type: none"> Through the Children, Youth and Families System of Care (CYFSOC) Training Academy provided the following trainings: <ul style="list-style-type: none"> 0-5 Trauma and Attachment Self-Care for Providers and Caregivers Medicating Kids: Psychotropic Medications 101 Introduction to Positive Discipline Navigating the Special Education System Let's Talk About Sex—Sex and Sexuality in Children and Adolescents conference Updated the CSOC e-learning training to be made available in FY16-17 Additional training funding was secured effective FY15-16: <ul style="list-style-type: none"> Incredible Years Critical Issues TERM SSI Advocacy for children was established effective July 1, 2016. Faith Based Initiative resulted in 4 Task Orders to be effective July 1, 2016 in North and Central Regions: <ul style="list-style-type: none"> Faith Based Academy Community Education Crisis Response Ministry Development (adult focus) Additional Out of County residential treatment programs in coordination with CWS effective July 1, 2016. LGBTQI program is scheduled for April, 2017. Community CSEC programming is scheduled for FY 17-18.
Psychotropic Medications	<ul style="list-style-type: none"> Collaborate with CWS, Probation, Public Health, Courts, Providers, etc. regarding the impact of California Senate Bill 238 that passed in 2015 which includes the new JV 220 process effective July 1, 2016. Disseminated the State developed Foster Youth Mental Health Bill of Rights that promotes family and youth awareness and empowerment pertaining to psychotropic medications.
Care Coordination	<p>Based on FY 15-16 Strategic Planning; redesigned the Children's System of Care Council to include a "Hot Topic" component which is bringing forth critical cross sector dialog. FY 15-16 Focus:</p> <ul style="list-style-type: none"> Commercially Sexually Exploited Children (CSEC) – education on changes in law and impact Post-Partum Mental Health Resources – completed and posted resource grid Warm Handoff – definition and best practices Limited Psychiatry Resources

**County of San Diego
Children, Youth and Families Behavioral Health System of Care Council Goals**

<p>Alcohol and Other Drugs (AOD) Services</p>	<ul style="list-style-type: none"> • DMC Waiver Planning – dedicated planning meetings. • Clinician capacity added to Teen Recovery Centers (TRCs), effective July 1, 2016. • Clinician capacity added to Perinatal Residential Treatment programs, effective July 1, 2016. • Clinician capacity added to Perinatal Outpatient programs, effective July 1, 2016. • Therapeutic services for children added to Women's non-residential programs effective July 1, 2016. • Perinatal Outpatient Homeless Outreach component added to all regions, effective July 1, 2016. <p>(See Probation section for additional updates)</p>
<p>Support Probation Involved Youth</p>	<ul style="list-style-type: none"> • Created new community based assessment and treatment services for probation youth with a True Finding (MIOCR), effective February 2016. • CSEC Programming was initiated in juvenile detention settings, effective February 2016. • Stabilization Treatment and Transition (STAT) Team was enhanced with additional after-hours coverage beginning July 1, 2016. • Established Competency Restoration services for youth in the Community, effective April 2016. • Supporting Probation's utilization of the Columbia Suicide Severity Rating Scale (C-SSRS) that was initiated in March of 2016 in juvenile detentions and expanded to community youth with a True Finding. • Transferred San Diego youth to a Los Angeles County Co-occurring Residential placement in October 2015 upon closure of local program; with ongoing planning to establish a local residential program. • Expanded capacity and strengthened programming options in a short term Teen AOD program, effective March 2016.

This form will be collected by facilitators. Please write legible.

County of San Diego
Children, Youth and Families Behavioral Health System of Care Council
Early Childhood Sub-Committee

Vision: San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.

Mission: To ensure that all agencies serving San Diego County children and youth up to age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles.

FY 16-17 Goals

- Maintain inclusion of BHETA/SOC Training related member on ECMH to ensure ready communication of identified ECMH related training topics
- Advocate for inclusion of Family Engagement as a critical component of Children's BH trainings
- Educate the CYFSOC on what Trauma Informed Care is in the context of ECMH (including signs, symptoms, screening, and assessment). Recognize the role healthy organizations and healthy staff plays in becoming trauma informed.
- Work with Pathways to communicate need to effectively track and discuss needs as relate to 0-5 youth
- Ongoing support of roll out and training needs for BHA 0-5
- Seek opportunity to present on ECMH to Adult SOC to raise awareness of import and overlap
- Advocate for essential parenting/dyadic services to pregnant and parenting TAY
- Offer training needs, trainer suggestions, and feedback for annual We Can't Wait Conference

Strategic Planning Meeting Input on 7/11/16

- Dyadic Therapy, PCI
- Have been via BHETA trainings- parent/dyad.
- Seismometer- regulation continues to increase supplemental web-based trainings
- At least 1 blurb- TIC principles on ECMH + workforce
- Possible collaboration with others- Trauma
- SOC pathways 0-5 _ from _ to pathways
- Program pending 15+ yo can get treatment in adult programs

Please write the name/sector of participants that contributed to the completion of this form

Ali Freedman
Jean Avila

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County of San Diego
Children, Youth and Families Behavioral Health System of Care Council
Alcohol and Other Drug Services (AOD)

Vision: San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.

Mission: To ensure that all agencies serving San Diego County children and youth up to age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles.

FY 16-17 Goals
<ul style="list-style-type: none">• Continue to give the County feedback about the DMC-ODS Waiver• Complete three more Incredible Years Training• Increase marketing and engagement with the Teen Recovery Centers and Perinatal programs (which includes teens)
Strategic Planning Meeting Input on 7/11/16
<ul style="list-style-type: none">• Use of Peer Support to engage clients into treatment• Housing For SUD Clients- especially families (not just the SMI)• Continue to look for ways for A/D programs to work with FQHC to have clients receive Vivitrol/Naltrexone• Work closely with Central Region of San Diego (especially Probation/CWS) to engage clients into treatment (especially using Parent /Peer Support)• More work with Families (if we work with the parents- the child will get better)• Evaluate outcomes (especially for residential) to make sure shorter stays with residential will work• Provide training for work with children in SUD Facilities• Harm reduction approaches<ul style="list-style-type: none">✓ Health & Wellbeing✓ Prevent deterioration✓ Trauma Informed✓ COD✓ Residential COD/ Including education✓ Family Youth Voice✓ Family co-dependent treatment✓ Teen Support
Please write the name/sector of participants that contributed to the completion of this form
<p>Wendy Maramba Angela Rowe Jean McDonald Tory Michel</p>

This form will be collected by facilitators. Please write legible.

County of San Diego
Children, Youth and Families Behavioral Health System of Care Council
Education Sub-Committee

Vision: San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.

Mission: To ensure that all agencies serving San Diego County children and youth up to age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles.

FY 16-17 Goals

- Seek out partner engagement to renew GOALS MOU with key partner agencies and school district's across the county
- Train at least 450 more individuals representing all 42 school districts in Youth Mental Health First Aid
- Seek out support and sponsorship to provide one-day conference in San Diego County highlighting supports to LGBTQ youth in partnership with the International Bullying Prevention Association for the Spring of 2017- Conference will focus on evidence and research based practice from leading experts across the nation
- Partner with stakeholders in efforts that promote youth mental health, positive school climates, and trauma informed delivery of school based services/activities
- Provide educators professional development training in Standard's of Quality for Family Strengthening and Support

Strategic Planning Meeting Input on 7/11/16

Added Goals:

- CSEC Prevention curriculum developed and being piloted at SDUSD and then will be offered at 2 more school districts.
- LGBTQ- Provide more programming/awareness specific to youth.
- Partner to provide additional suicide prevention efforts (look at different models to use).

Comments/Concerns:

- There was a concern shared around psychiatry services to students- significant lack and schools/districts can't provide it-families have to go to a contracted facility.
- There is no document showing what the process is by school district for triaging mental health

Please write the name/sector of participants that contributed to the completion of this form

Mara Madrigal, San Diego County Office of Education
Heather Nemour, San Diego County Office of Education
Fran Cooper,
Pam Hanson, San Diego Center for Children
Stacy Musso, San Diego Unified School District
Angela McNeece, SELPA
Barbara Ryan, California School Boards Association
Yuka Marita, San Diego Unified School District
Violeta Mora, San Diego County Office of Education

This form will be collected by facilitators. Please write legible.

County of San Diego
Children, Youth and Families Behavioral Health System of Care Council
Family and Youth Sector

Vision: San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.

Mission: To ensure that all agencies serving San Diego County children and youth up to age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles.

FY 16-17 Goals
<ul style="list-style-type: none">Promote authentic utilization of Family and Youth Partners as service providersAdvance Pathways to Well-Being with emphasis on Child and Family Teams
Strategic Planning Meeting Input on 7/11/16
<ul style="list-style-type: none">Ensuring 4 sector representation at the FYP subcommitteeFamily rep embedded in all sub-committee's to improve family and youth voice throughout the system of careCSOC fill 2 vacant seats by 3rd quarter.Structured orientation process for youth/parent coming into CSOC/sub-committee participation.Stipend to attend and participate in meetings (money, vouchers, mileage, etc.)Continue FSP redesign within CYF contracts which creates a "Menu of options". Contractors will have greater opportunity to hire and include family/youth partners within their programs, thus, further advancing family and youth voice
Please write the name/sector of participants that contributed to the completion of this form
Rebecca Raymond Renee Cookson Claudia Velasquez Suzette Southfox Ruth Hurtado Celeste Hunter

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County of San Diego
Children, Youth and Families Behavioral Health System of Care Council
Outcomes Subcommittee

Vision: San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.

Mission: To ensure that all agencies serving San Diego County children and youth up to age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles.

FY 16-17 Goals

- Continue to check in on the State POS plans
- Insert Help Text in the BHA with SAMHSA's definition of Trauma
- Literature review of prevalence rate of trauma in the general public and other public serving systems
- Review the rate of the diagnosis of Adjustment Disorder in the system of care
- Follow up with PIP Project of utilization of Homework in treatment

Strategic Planning Meeting Input on 7/11/16

- The CAMS seem outdated. Outcomes show decrease in functionality of functioning at second assessment/discharge.
- In August 2016 Child Welfare will begin utilizing the TOPS with a pilot group. Will continue to use the SDQ (Strengths, Difficulty & Questionnaire)
- Training will be provided by Dr. Rowe in the coming year regarding Adjustment D/O.
- Question: What will be the focus of Dr. Rowe's?
- Consider ways to track the outcomes of Dr. Rowe's training?
- Provider feedback that ICD 10 code for trauma related issue is not available in Cerner to select and not a Title 9 included Dx. This may be related to utilization of Adjustment D/O.
- PIP Project: Data Quality: can't measure system impact without HW data.
- PIP Committee working to add HW utilization question to clinical progress note so supervisors can easily ask about it, reminds clinicians to use it, and facilitate Medical Records Review(MRR)

Please write the name/sector of participants that contributed to the completion of this form

Angela Chen
Amanda Lance-Sexton
Emily Trask

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County of San Diego
Children, Youth and Families Behavioral Health System of Care Council
Private Sector

Vision: San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.

Mission: To ensure that all agencies serving San Diego County children and youth up to age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles.

FY 16-17 Goals

- **THE GOAL-** is to work in tandem with County Behavioral Health on key initiatives to improve client care. Currently, working on improving the integration of mental health, alcohol and drug, and primary care health providers for effective, client-centered, and efficient care for children, youth, and families in our System of Care. Presently, in the process of better understanding the systems and structures currently in place, identifying strengths and barriers, and establishing priorities and action items for this fiscal year.
- **COLLABORATION:** The committee is joined by the Council for Community Clinics and County Behavioral Health staff. Consistent with the System of Care principles, the committee is expanding meetings to include representation from the four sectors, (families and youth, education, private organizations, and public agencies).

Next Steps:

To identify areas where Integrative care is occurring in an efficient and effective way and build upon those practices in other areas of the system. This may include deeper dives into topics like Warm Handoff's, recruitment and retention, information sharing, and medical facility outpatient practices and partnerships.

Strategic Planning Meeting Input on 7/11/16

- Information sharing- What is getting done across the systems
 - ✓ Macro- points of comment- Micro- staff level sharing
- Psychiatrists & staffing urgency- with money exempt status
 - ✓ Training increases for NP and other solutions
 - ✓ Psychiatrist as consultant- oversee NP – to supervise
 - ✓ Handle the need (need to admin time) PCP
- Look at billing
- Look at NP Training programs (WET)

Please write the name/sector of participants that contributed to the completion of this form

Steve Jella
Elizabeth Locano

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**County of San Diego
Children, Youth and Families Behavioral Health System of Care Council**

Training Recommendations

Vision: San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.

Mission: To ensure that all agencies serving San Diego County children and youth up to age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles.

FY 16-17 Goals

Training Topic—SERIES

1. Solution Focused Brief Therapy (SFBT)
2. Dialectical Behavioral Therapy (DBT)

Training Topic— INDIVIDUAL

1. Motivational Interviewing
2. Motivational Interviewing
3. 0-5 Behavioral Health Assessment (BHA) Training
4. Neurobiology and Trauma (Full day-- more activities/videos)

Training Topic— WEBINAR

1. Medically Assisted Treatment
2. ASAM Part 2

Pathways to Well-Being—INDIVIDUAL

1. CFT Facilitation Training
2. CFT Facilitation Training
3. CFT Facilitation Training
4. CFT Facilitation Training
5. CFT Facilitation Training
6. CFT Facilitation Training
7. Pathways to Well-Being One Day Overview Training
7. Pathways to Well-Being One Day Overview Training

Trauma Focused Cognitive Behavioral Therapy—SERIES

1. TF-CBT Clinician Advanced Training
2. TF-CBT Clinician Advanced Training

CYFSOC Training Academy—INDIVIDUAL

1. Understanding and Diagnosing Complex Cases
2. Understanding and Diagnosing Complex Cases
3. Understanding and Diagnosing Complex Cases
4. Understanding and Diagnosing Complex Cases

This form will be collected by facilitators. Please write legible.

County of San Diego
Children, Youth and Families Behavioral Health System of Care Council
Training Recommendations

Strategic Planning Meeting Input on 7/11/16

- Training takes away from productivity hours. Further erosion of direct services time.
 - ✓ Consider adding some required training hours that are included in productivity hours.
 - ✓ Consider regional or provider based trainings for easier access.
- Staff Turn Over- continuation of expert training regulation
 - ✓ TED-like Talks that are recorded and available via the web for easy access. Can be as short as 20-30 minutes. Include printable worksheets as a knowledge check and resource for a more interactive experience.
 - ✓ Add training debriefs to clinical supervision, treatment forms and staff meetings for discussions re: processing training to solidify knowledge of entire team and culture of discovery, learning and best practices throughout.
- Training Recommendation: Reflective Practice/Reflective Supervision

Please write the name/sector of participants that contributed to the completion of this form

Rose Woods
Mike Miller
Dr. Rowe
Barent Mynderse
Jen Wheeler
Bill Simpson

CHILDREN'S SYSTEM OF CARE PRINCIPLES

BACKGROUND

Beginning in 1995, a broad based group of community stakeholders developed values and principles for San Diego County Mental Health Children's System of Care (CSOC). Over the years, the values have been implemented and have set forth new practices and approaches for our delivery system.

In 2010, the Children's System of Care Council recommended that the principles be reviewed to ensure that they are contemporary with our current practice as driven by the needs of the community. In the CSOC workgroup review process, it was concluded that the initial core principles remain relevant. Refinements were made to reflect our current direction which complemented the *Live Well, San Diego!* initiative. This evolution:

- integrates mental health and substance abuse into a behavioral health system,
- integrates physical health for the overall advancement of health and wellness,
- underscores the importance of natural community resources,
- values the complexity of cultural diversity, AND
- strengthens our commitment to youth and families

In 2016, The Children's System of Care Council recommended that a Trauma Informed Care Principle be added to the Children's System of Care Principles; a principle that:

- Realizes the widespread impact of trauma
- Recognizes the signs and symptoms of trauma
- Responds by fully integrating knowledge about trauma into policies, procedures, and practices, and
- Actively seeks to prevent re-traumatization while promoting self-care and resilience

All of these refinements re-affirm our system of care principles, the advancements made, and the pathway for our future direction.

CSOC Council Vision: *San Diego youth are healthy, safe, successful in school, and in their transition to adulthood, while being law abiding, while living in a home and community that supports strong family connections.*

Mission: *The purpose of the System of Care Council is to ensure that all agencies serving San Diego county youth from age 0 through age 21 have coordinated services resulting in improved youth and family, and system outcomes consistent with System of Care Values and Principles.*



1. **Collaboration of four sectors:** The cornerstone of the CSOC is a strong four sectors partnership between youth/families, public agencies, private organizations and education that ensure accountability to achieve System of Care (SOC) goals and quality outcomes consistent with SOC philosophy.
2. **Integrated:** Among the four sector partners services are comprehensive, accessible coordinate behavioral and physical health care, provide seamless transition of care and utilize natural community supports,
3. **Youth guided, family driven:** Youth and families actively participate in service delivery, planning, and program and policy development.
4. **Individualized:** Services are flexible and designed to meet and build upon the unique needs, strengths and potential of each youth, and family.
5. **Strength-based:** Individualized plans and services identify and utilize youth/family strengths to facilitate health and wellness.
6. **Community-based:** Sector partners offer an array of services in each region and strengthen family and youth connections to neighborhood and local community resources.
7. **Outcome driven:** Service delivery systems continuously improve services by measuring and evaluating outcomes and use results to modify practices.
8. **Culturally Competent:** Service providers honor the diversity of cultures; address the complexities within and between cultures, and provide accessible and relevant services.
9. **Trauma Informed:** Sector partners recognize that trauma and chronic stress influence coping strategies and behavior, respond with compassion, and commit to the prevention of re-traumatization and the promotion of self-care and resilience.



The Advantages of TOP for Providers

TOP gives providers an insightful well-being assessment tool for helping them treat kids in care. In fact, before its introduction into Child Welfare systems, TOP was first used by behavioral health providers to measure patient improvement and has been in use for over twenty years.

Better Outcomes

Provide better care

By measuring the presence and severity of symptoms, TOP can help a clinician provide better-informed care. With automated scoring and instant delivery of reports, TOP can help direct treatment by quickly providing a multidimensional profile of the child. Over time, a clinician can adapt treatment by tracking outcomes. This does not require extra work by the clinician, and can even help the clinician save time.

Enhance the therapeutic alliance

TOP can help engage the child in treatment, as it gives them direct voice into the process. Kids often feel more involved and empowered, and the questionnaire format causes them to be more candid in the treatment process. TOP helps clients tell their story and helps providers make the most of the limited time they have with each patient.

Stop preventable disasters

TOP can help save a child's life. Our alerting system notifies clinicians of serious cases of violence or suicidality. Children and adolescents are more likely to disclose certain information on paper than in person.

Other Benefits of TOP

Increased sensitivity means greater reimbursement

TOP can document statistical change in 96% of patients (versus 30% or less with other tools) and is more likely to capture improvement, crucial to maximizing payments from insurance companies.

The Client Report

Each time a child fills out the TOP, an individualized report is produced. This report shows whether or not the child is improving across 13 domains (12 domains for adolescents).

Multiple Perspectives

The Multi-Rater Report is an easy way for a clinician to gather alternative perspectives from different important people in the child's life.

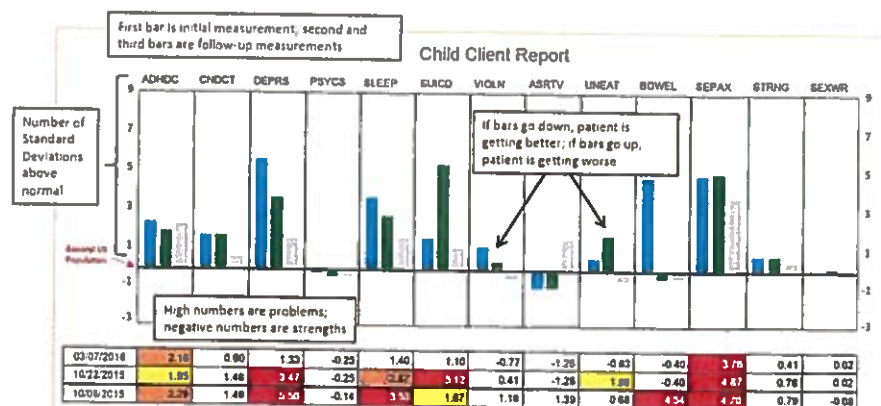
Practice Insights

Profile of your patients

Learn what issues are most prevalent and which ones are often most serious.

Document overall success

Measure the average outcome improvement of your different patient groups.



CHILDREN, YOUTH AND FAMILIES BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL

SECTOR "HOT TOPICS"

Sector Hot Topics: Trends and concerns; items pertaining/affecting your Sector that the Council can provide input/feedback on or the Council should be aware of. Hot Topics are distinct and separate from informational only or announcements.

SECTOR	CONSTITUENCY	HOT TOPIC	DATE	ADVANCEMENT/ PROGRESS
1 Education	Education	Trauma Informed Systems	9/14/2015	7/2016- Principles updated. Vote at 11/14/16 Council Meeting.
2 Private	Private	Information sharing	9/14/2015	10/2016- Private Sector creating trainings- Council update 11/14/16.
3 Private	Private	Increase placement opportunity for disabled adolescent	9/14/2015	Tabled
4 Private	AOD	1115 DMC Waiver	9/14/2015	Stakeholder input w/BHS evaluation on impact
5 Private	Health Provider	Home visiting and parental mental health	9/14/2015	Presentation tabled
6 Private	Private	Increase in Juvenile Justice in youth with disabilities	9/14/2015	Tabled
7 Public	CWS	Services for non-minor dependents- Access	9/14/2015	Tabled
8 Public	CWS	Continuum of Care Reform	9/14/2015	Tabled
9 Public	CWS	Quality parenting initiative	9/14/2015	Tabled
10 Public	CWS	Best practices for transitioning 0-5	9/14/2015	Tabled
11 Private	SDNA	Review Final Report for Innovations Programs	2/8/2016	Tabled
12 Council	Public Input	Limited Psychiatrist	2/8/2016	6/13/16- It was recommended to compile a directory of Federally Qualified Health Center's (FQHC) in San Diego county. Also council would like to have a FQHC member present at the November Council meeting.

**CHILDREN, YOUTH AND FAMILIES BEHAVIORAL HEALTH SYSTEM OF CARE COUNCIL
SECTOR "HOT TOPICS"- DISCUSSED**

Sector Hot Topics: Trends and concerns; items pertaining/affecting your Sector that the Council can provide input/feedback on or the Council should be aware of. Hot Topics are distinct and separate from informational only or announcements.

SECTOR	CONSTITUENCY	HOT TOPIC	DATE	ADVANCEMENT/ PROGRESS
1 Family/Youth	Family/Youth	Family Youth Advisory Council- minors requesting supportive services without parental consent (ex: food, housing, parenting support)	9/14/2015	Moving to newly found formed Family & Youth As Partners Subcommittee to be addressed (Jan 2016)
2 Family/Youth	Family/Youth	Employed Partners- Progress Notes Training	9/14/2015	
3 Public	BHS	Commercial Sexual Exploitation of Children (CSEC)	9/14/2015	Discussed at Council. 11/3/15- All PM Mtg presentation on CSEC. Forming a CSEC program w/in the institution Inter-agency protocol established.
4 Public	Public Health	Address mood/anxiety disorders in pregnant and postpartum women. Collaborate with community organizations to identify strategies/programs that address mood/anxiety disorders in pregnant and postpartum women and assess how screening and resources can be integrated into existing program and community organization processes. Example: Postpartum assessment within pediatric settings.	12/14/2015	1/11/16- A matrix of current resources was asked to be created to better see the gaps in services. The council will create matrix toll and send to council representatives and key contacts to gather resources. Dr. Sidelinger to prioritize needs and bring to next Council meeting. On 1/26/16 matrix tool was sent out for input. Responses are pending. 2/8/16 The grid was updated with the Postpartum Health Alliance information. Public Health will be reviewing informaton gathered and add it to the grid for dissemination. 5/9/16- Grid was received and email to CYF Council, Adult SOC, TAY Workgroup and Health Plans for input. 6/3/16 Grid was be posted on NOC, ACL & 211.
5 Private	Private	Warm Handoffs; what do they currently look like in general practice and how would we like them to look like in order to strengthen integrated care	12/14/2015	Discussion will be taken back to the Private Sector and report back to the Council. Subcommittee will develop a fact sheet with definition of warm handoff and the goal as well as best practices to achieve successful warm handoff. 3/14/16- Fact Sheet was developed. Discussion to continue May 2016. 5/9/16- Yael will respond the Private Sector Warm Handoff Recommendations. 6/13/16- Response to recommendations where provided. Private Sector will do additona work areound a communication plan. The intent is to look at definitions, education and terminology to incerase vocabulary through our system.
6 Education	Education	Information sharing across system (GOALS MOU)	9/14/2015	Nov 2016 actively signed by CBO's.

Sub-Committee Update Report to CYFBHSOC Council
November 14, 2016

Sub-committee: CADRE

Lead: Fran Cooper/Bethany Hansell

Update

- Behavioral Health Regional Training -Integrating Tobacco-Free Strategies in Wellness and Recovery occurred on September 27, 2016
- Youth and Tobacco Webinar occurred on October 19, 2016
- COMPASS EZ 2.0- New Tool

FY16/17 Goals/Focus Areas

- Review of the new COMPASS EZ 2.0
- Summary of the Annual CCISC Reports data
- DDCMHT Review
- Tobacco use and CYF
- Increase marketing and engagement with the Teen Recovery Centers and Perinatal programs (which includes teens)

☐ Sub-Committee has 4 Sector Representation

☒ Sub-Committee is recruiting for 4 sector representation and specifically looking for committee members to represent:

- ☐ Private Sector
- ☐ Public Sector
- ☒ Education Sector
- ☐ Family/Youth Sector

To join the sub-committee please contact Bethany Hansell at Bhansell@sdyouthservices.org

Sub-Committee meets quarterly the 2nd Thursday of July, October, January and April from 1:30 – 3pm in the Del Mar Room- 3255 Camino Del Rio South, San Diego, CA 92108

**Sub-Committee Update Report to CYFBHSOC Council
November 14, 2016**

Sub-committee: Trauma Informed Systems Integration (TISI)
Lead: Jean Avila

Update from the Agency's TISI team:

We have assisted with two screenings of the documentary film "Resilience – the Biology of Stress and the Science of Hope". One was held at Cherokee Point Elementary School in June, and another was held last week at one of the breakout sessions of the Live Well San Diego Partners' Advance. San Diego Foundation has committed to supporting additional screenings throughout the county in the coming year.

A brief basic introductory LMS training suitable for all county employees, and including the short video "ACEs Primer", is under development by a TISI team work group headed up by Karen Harris of The Knowledge Center. The group will then focus on developing a more in-depth training for HHSA staff that may include the "Resilience" film if permission is obtained.

Several HHSA staff have recently completed the instructor training for Mental Health First Aid (MHFA); this will help support an agency wide objective for the 16/17 TISI action plan to increase the number of agency staff who are trained in MHFA.

Another TISI work group is focused on training resources for facilities managers to support TI workplace environments; using materials developed by Dr. Dawn Griffin.

FY16/17 Goals/Focus Areas

- Engaging leadership at all levels regarding the importance of becoming a trauma-informed system
- Involving consumers in all activities including service development, delivery and evaluation
- Creating and instituting policies, practices, and standards to support access to evidenced-supported and emerging practice for consumers
- Developing a trauma-informed workforce based on the unique mandates of each of the six programs within HHSA: Aging and Independence Services; Behavioral Health Services; Child Welfare Services; Public Administrator/Public Guardian; Public Health Services; and Self-Sufficiency Programs
- Ensuring that HHSA staff and providers receive support to prevent, diminish, and treat the vicarious or secondary trauma which they may experience through serving our families

☒ Sub-Committee has 4 sector representation

July 2016

GWS Foster Family Agency/Homes				
Agency Name	License No	Placement of Children Count		
ALLIANCE HUMAN SERVICES, INC.	197806287	1		1
ANGELS FOSTER FAMILY AGENCY	374603866	66		66
CASEY FAMILY PROGRAM, THE	370603103	6		6
CREATIVE ALTERNATIVES, INC.	507206800	1		1
KAMALI' FOSTER FAMILY AGENCY	336407693	33		33
KOINONIA FOSTER HOME INC.	310305193	1		1
KOINONIA FOSTER HOME, INC.	306004812	1		1
KOINONIA FOSTER HOMES, INC	374603502	26		26
KOINONIA FOSTER HOMES, INC.	336426848	6		6
NEW ALTERNATIVES INC FOSTER FAMILY AGENCY(NAI-FFA)	374603503	17		17
OLIVE CREST FOSTER FAMILY AGENCY-SUB-OFFICE	374600985	2		2
SAN DIEGO YOUTH SERVICES	370602725	26		26
SPECIAL FAMILIES: A PROGRAM OF SDCC	370600001	12		12
TOWARD MAXIMUM INDEPENDENCE INC.	370603102	13		13
WALDEN FAMILY SERVICES	374603904	13		13
(blank)*		4		4
Grand Total	507206800	228		228

FFA Agency Name (THP)	License No	Placement Cd	Children/Cou
WALDEN FAMILY SERVICES	374603903	13	13
CASA DE AMPARO	374603568	26	26
NEW ALTERNATIVES INC	374603479	31	31
SAN DIEGO YOUTH SERVICES - MID-CITY YOUTH CENTER	374603662	27	27
SBCS - TROLLEY TRESTLE TRANSITIONAL LIVING PROGRAM	374603854	9	9
YMCA YOUTH & FAMILY SERVICES	374603488	20	20
Total		126	126

July 2010

GWS Group Home Summary

Facility Name	License No	Placement Count	Children Cour
ALPHA CONNECTION GROUP HOME FOR CHILDREN	366412000	1	1
ALPHA CONNECTION-ANOKA RANCH, THE	366401649	1	1
ALPHA CONNECTION-SHOSHONEE PLACE, THE	366402331	1	1
ASSOCIATED RESIDENTIAL SVCS INC I	374602285	12	12
CASA DE AMPARO	374603234	18	18
CENTER FOR POSITIVE CHANGES 3	374603292	4	4
CENTER FOR POSITIVE CHANGES 5	374602641	3	3
CIRCLE OF FRIENDS	374602611	6	6
CIRCLE OF FRIENDS II	374602603	6	6
DEVEREUX VIERA	602300049	2	2
DEVEREUX-VICTORIA	602300087	2	2
FATHER'S HEART RANCH	336406377	1	1
FIRST STEP TREATMENT HOME	374602535	1	1
FRED FINCH YOUTH CENTER-SAN DIEGO	374602631	1	1
GROUP HOME SPECIALISTS	336426796	2	2
JACK & CAROL CLARK ADOLESCENT TREATMENT PROGRAM	374602245	3	3
LAKEVIEW ACADEMY	602300066	1	1
MILESTONE GROUP HOME	372008440	2	2
NEW ALTERNATIVES INC. #18	374600056	17	17
NEW ALTERNATIVES, INC. #16	374600197	20	19
NEW ALTERNATIVES, INC. NO 1	370801541	11	10
PEPPERWOOD HOUSE	374603441	1	1
PHOENIX ACADEMY AT LAKEVIEW TERRACE	191222731	1	1
PROMESA, MILLBROOK HOUSE	107201149	1	1
ROP/ATCS: SIERRA RIDGE	57001447	1	1
RYS: FRONTIER	390310258	1	1
S.A.M.'S	374601272	3	3
S.D.C.F.C.-SAN DIEGO CENTER FOR CHILDREN	370808583	17	17
SAN DIEGO CENTER FOR CHILDREN	374600859	6	6
STAR VIEW COMMUNITY TREATMENT FACILITY	197803340	4	4
Varsity Team INC.#3	134603562	1	1
Varsity Team, INC. #2	374603865	4	4

VARSITY TEAM, INCORPORATED #1	374603652	6	6
VICTOR YOUTH SERVICES (LOGAN)	451372885	1	1
WOODWARD ACADEMY	602300054	1	1
Grand Total		163	161

July 2016

Probation Group Home Summary			
Facility Name	License No	Placement Co	Children Count
ALPHA CONNECTION-ANOKA RANCH, THE	366401649	1	1
ALPHA CONNECTION-NISQUALLY NEST, THE	366403207	1	1
ALPHA CONNECTION-SHOSHONEE PLACE, THE	366402331	3	3
CASA DE AMPARO	374603234	13	12
CENTER FOR POSITIVE CHANGES	374601510	5	5
CENTER FOR POSITIVE CHANGES 3	374603292	3	3
CENTER FOR POSITIVE CHANGES 5	374602641	3	3
CENTER FOR POSITIVE CHANGES II	374601477	6	6
CFLC-HEMET RANCH	330908390	1	1
CFLC-SUNSET HOUSE	330908391	1	1
CLARINDA ACADEMY	602300055	3	3
CLEAR VIEW TREATMENT CENTER - CROW HOUSE	366409043	1	1
DAVID AND MARGARET YOUTH AND FAMILY SERVICES	191500192	1	1
DEVEREUX VIERA	602300049	1	1
DNA GROUP HOME	107200453	1	1
FIRST STEP TREATMENT HOME	374602535	3	3
KIDSPACE: ORCHARD HILLS CAMPUS	602300048	3	3
LAKESIDE ACADEMY	602300066	3	3
LYON	336403698	1	1
NEW ALTERNATIVES INC. #18	374600056	13	13
NEW ALTERNATIVES, INC. #16	374600197	5	5
NEW HAVEN-CONNIE GAYLE	374600210	1	1
OAK GROVE INSTITUTE	330911240	3	3
OLIVE CREST TREATMENT CENTERS - MALENA	300603063	2	1
OLIVE CREST TREATMENT CENTERS - SAYLOR	300605577	1	1
OLIVE CREST TREATMENT CENTERS - WHEELER	300606064	1	1
OPTIMIST BOYS HOME & RANCH	191801986	2	2
PHOENIX ACADEMY AT LAKEVIEW TERRACE	191222731	2	2
RANCH CREEK - CALIFORNIA FAMILY LIFE CENTER	374603206	1	1
ROP/ATCS: SIERRA RIDGE	57001447	4	4
RTC	107200940	3	3
S.A.M.'S	374601272	2	2
STARSHINE TREATMENT CENTER, INC.	360911127	1	1
STARSHINE-GARDEN DRIVE	360910261	1	1
TRINITY - EL MONTE	191591941	1	1
TRINITY - YUCAIPA	360900416	2	2
VARSITY TEAM, INC. #2	374603865	1	1
VARSITY TEAM, INCORPORATED #1	374603652	1	1
VICTOR YOUTH SERVICES (ALTA MESA)	455002568	1	1
WOODWARD ACADEMY	602300054	1	1
Grand Total		103	101

AUG 2014

GWS Foster Family Agency/Homes				
Agency Name	License No	Placement Count	Children Count	
ALLIANCE HUMAN SERVICES, INC.	197806287		1	1
ANGELS FOSTER FAMILY AGENCY	374603866		65	65
CASEY FAMILY PROGRAM, THE	370603103		4	4
CREATIVE ALTERNATIVES, INC.	507206800		1	1
KAMALI FOSTER FAMILY AGENCY	336407693		31	31
KOINONIA FOSTER HOME, INC.	306004812		1	1
KOINONIA FOSTER HOMES, INC	374603502		23	20
KOINONIA FOSTER HOMES, INC.	336426848		9	9
NEW ALTERNATIVES INC FOSTER FAMILY AGENCY(INAL-FFA)	374603503		17	16
OLIVE CREST FOSTER FAMILY AGENCY-SUB-OFFICE	374600985		4	4
SAN DIEGO YOUTH SERVICES	370602725		23	22
SPECIAL FAMILIES: A PROGRAM OF SDCC	370600001		13	13
TOWARD MAXIMUM INDEPENDENCE INC.	370603102		13	13
WALDEN FAMILY SERVICES	374603904		13	13
[blank] *			4	4
Grand Total			222	217

FFA Agency Name (THP)	License No	Placement Count	Children Count
CASA DE AMPARO	374603568	25	25
NEW ALTERNATIVES INC	374603479	33	32
SAN DIEGO YOUTH SERVICES - MID-CITY YOUTH CENTER	374603662	30	27
SBGS -TROLLEY TRESTLE TRANSITIONAL LIVING PROGRAM	374603854	12	10
WALDEN FAMILY SERVICES	374603903	13	13
YMCA YOUTH & FAMILY SERVICES	374603488	20	20
Total		133	127

AUG 2016

CWS Foster Family/Agency Homes			
Agency Name	License No	Placement Count	Children Count
ALPHA CONNECTION GROUP HOME FOR CHILDREN	366412000	1	1
ALPHA CONNECTION-ANOKA RANCH, THE	366401649	1	1
ALPHA CONNECTION-SHOSHONEE PLACE, THE	366402331	1	1
ASSOCIATED RESIDENTIAL SVCS INC I	374602285	12	12
CASA DE AMPARO	374603234	17	16
CENTER FOR POSITIVE CHANGES 3	374603292	4	4
CENTER FOR POSITIVE CHANGES 5	374602641	5	5
CIRCLE OF FRIENDS	374602611	5	5
CIRCLE OF FRIENDS II	374602603	6	6
DEVEREUX VIERA	602300049	2	2
DEVEREUX-VICTORIA	602300087	2	2
FATHER'S HEART RANCH	336406377	1	1
FIRST STEP TREATMENT HOME	374602535	1	1
FRED FINCH YOUTH CENTER-SAN DIEGO	374602631	1	1
GROUP HOME SPECIALISTS	336426796	2	2
JACK & CAROL CLARK ADOLESCENT TREATMENT PROGRAM	374602245	3	2
MILESTONE GROUP HOME	372008440	2	2
NEW ALTERNATIVES INC. #18	374600056	17	16
NEW ALTERNATIVES, INC. #16	374600197	19	19
NEW ALTERNATIVES, INC. NO 1	370801541	9	9
PEPPERWOOD HOUSE	374603441	1	1
PHOENIX ACADEMY AT LAKEVIEW TERRACE	191222731	1	1
PROMESA, MILLBROOK HOUSE	107201149	1	1
ROP/ATCS: SIERRA RIDGE	57001447	1	1
RYS: FRONTIER	390310258	1	1
S.A.M.'S	374601272	3	3
S.D.C.F.C.-SAN DIEGO CENTER FOR CHILDREN	370808583	18	18
SAN DIEGO CENTER FOR CHILDREN	374600859	6	6
STAR VIEW COMMUNITY TREATMENT FACILITY	197803340	4	4
VARSITY TEAM INC.#3	134603562	1	1
VARSITY TEAM, INC. #2	374603865	4	4
VARSITY TEAM, INCORPORATED #1	374603652	5	5
VICTOR YOUTH SERVICES (LOGAN)	451372885	1	1
WOODWARD ACADEMY	602300054	1	1
Grand Total		159	156

AUG 2016

Probation Group Home Summary			
Facility Name	License No	Placement Count	Children Count
ALPHA CONNECTION-ANOKA RANCH, THE	366401649	1	1
ALPHA CONNECTION-NISQUALLY NEST, THE	366403207	1	1
ALPHA CONNECTION-SHOSHONEE PLACE, THE	366402331	3	3
ASSOCIATED RESIDENTIAL SVCS INC I	374602285	1	1
CASA DE AMPARO	374603234	15	14
CENTER FOR POSITIVE CHANGES	374601510	7	7
CENTER FOR POSITIVE CHANGES 3	374603292	2	2
CENTER FOR POSITIVE CHANGES 5	374602641	3	3
CENTER FOR POSITIVE CHANGES II	374601477	4	4
CFLC-HEMET HOUSE	330908393	1	1
CFLC-HEMET RANCH	330908390	1	1
CLARINDA ACADEMY	602300055	3	2
CLEAR VIEW TREATMENT CENTER - CROW HOUSE	366409043	1	1
CLEAR VIEW TREATMENT CENTER - MONDAMON HOUSE	366409042	1	1
CRITTENTON SVCS FOR CHILDREN AND FAMILIES	300612972	1	1
DAVID AND MARGARET YOUTH AND FAMILY SERVICES	191500192	2	2
DEVEREUX VIERA	602300049	1	1
DNA GROUP HOME	107200453	1	1
FIRST STEP TREATMENT HOME	374602535	4	4
KIDSPACE: ORCHARD HILLS CAMPUS	602300048	2	2
LAKESIDE ACADEMY	602300066	3	3
LYON	336403698	1	1
NEW ALTERNATIVES INC. #18	374600056	11	10
NEW ALTERNATIVES, INC. #16	374600197	5	5
NEW HAVEN-CONNIE GAYLE	374600210	2	2
OAK GROVE INSTITUTE	330911240	5	5
OLIVE CREST TREATMENT CENTERS - SAYLOR	300605577	1	1
OLIVE CREST TREATMENT CENTERS - WHEELER	300606064	1	1
OPTIMIST BOYS HOME & RANCH	191801986	2	2
PHOENIX ACADEMY AT LAKEVIEW TERRACE	191222731	2	1
RANCH CREEK - CALIFORNIA FAMILY LIFE CENTER	374603206	1	1
ROP/ATCS: SIERRA RIDGE	57001447	3	3
RTC	107200940	3	3
S.A.M.'S	374601272	2	2
STARSHINE TREATMENT CENTER, INC.	360911127	1	1
STARSHINE-GARDEN DRIVE	360910261	1	1
TRINITY - YUCAIPA	360900416	3	3
VARSITY TEAM, INC. #2	374603865	1	1
VARSITY TEAM, INCORPORATED #1	374603652	1	1
VICTOR YOUTH SERVICES (ALTA MESA)	455002568	1	1
WOODWARD ACADEMY	602300054	1	1
Grand Total		106	102

Children, Youth & Family Liaison

CYFL Liaison (858) 987-2980

CYFLiaison@namisd.org

WHEN YOU JOIN OUR MAILING LIST, YOU'LL GET:

- ♦ Monthly CYFL Electronic Newsletters...news, resources, information & Family Youth Partner job announcements.
- ♦ Announcements of Quarterly FAMILY VOICE MEETINGS...where the families you serve can share their voice, experience & feedback.
- ♦ Invitations to Quarterly FAMILY SECTOR Meetings...where families, Family Youth Partners & Providers can share feedback about best practices, policy & sector issues.
- ♦ Invitations to monthly Family Youth Partner COACHING SESSIONS...support and professional development for non-management Peers working in the behavioral health field.
- ♦ Announcements of upcoming on-line and in-person trainings for Providers
- ♦ Information and invitations to related workshops, trainings and supports for children, youth, families and professionals invested in supporting our community.
- ♦ Announcements of Special Events, such as the May Children's Mental Health Month.

Please print & leave the following information:

NAME (First, Last) _____

TITLE _____

ORGANIZATION _____

EMAIL _____

PHONE _____