

Building Bright Futures

600 Blair Park, Suite 306, Williston, VT 05495 802-876-5010 | buildingbrightfutures.org

SUD Families Implementation Team: Community of Practice Project Team Meeting

June 29, 2020, 2:00 - 3:30 pm

Join Zoom Meeting

https://us02web.zoom.us/j/85005646070?pwd=Qm1pTmFhUFc2TTlPelFKQ2NwZXArZz09

Meeting ID: 850 0564 6070 Passcode: 781869

Desired Outcomes

1. Follow up on survey findings via insights from a caregiver

- 2. Review and Reflect upon current action items as we move into Year 3 of Implementation
- 3. Develop next steps as a CoP

Welcome & Intros 2:00-2:10 (10 min)

Caregiver Insights

2:10-2:40 (30 min)

- Welcome a caregiver to the table to share their experiences
- Engage in a discussion about what's working & where gaps exist

Year 2 Recap 2:40-3:10 (30 min)

- What have we accomplished on our list?
- What has changed as a result of COVID virtual shifts?
- How can we leverage our success and areas for growth as we move into the final year of our project?

Next Steps 3:10-3:25 (15 min)

- What do we need to focus on in the next quarter?
- What's an action step each of us can take to keep the momentum?

Gratitude & Adjourn

3:25 - 3:30 (5 min)

Contact: Amanda Biggs, Building Bright Futures, Chittenden Regional Coordinator abiggs@buildingbrightfutures.org

Meeting Notes/Summary

Attendees: Olivia Grooms, Jenn Fink, Jenn Beayon, Amanda Biggs, Beth Truzansky, Sally Bordan, Amy Ide, Liz Mitchell, Molly Scaife, Kelsey Stavseth

Olivia shared lived experience with SUD, and we captured her meaningful insights as follows:

- AA and MAT Team most helpful
- Texting is preferred method of communication
- Gaps: Helping parents learn more about how to talk to their children about SUD in an age appropriate way
 - Social Stories would be a great for ages 0-5
- NA/AA often view MAT in a negative light, looking down on those who use medications in recovery
 - o Jenn B suggested MARA and All Recovery Groups as an alternative
- Turning Point for recovery was becoming pregnant with her daughter
- Concerns: DCF rights an fear
- Ideas: She is looking for more ways to use her voice and story to give back to the community (perhaps an interview/blog down the road?)

Year 2 Recap:

We reviewed the following list of strategies, which we established last summer for Year. The bullets show the notes/brainstorm we suggested for updates for Year 3:

- Sustain and expand upon the interagency team, including early childhood providers, to implement policy strategies that reduce siloing of services and funding and support coordination and integration between adult substance use treatment and children's services.
 - We have a core group, but missing some key partners: DCF, MAT, New Americans, etc.
 - Our relationships are with people, not programs...how we be extend beyond the folks at the table?
- 2. Implement service delivery, practice approaches, and referral pathways that include wrap around care coordination, co-location of child and family services and adult treatment, family friendly treatment and care settings, treatment plans that include goals for families, and intake forms that ask questions about children and home.
 - Practice Improvement, is anyone measuring this?
- 3. Promote the cross training of children's services and substance use disorder treatment professionals to build understanding of systems, goals, approaches, and family-centered and multi-generational practice.
 - Still need to involve the medical field here
- 4. Support and fund incentives for parenting programs in the community, such as Head Start's "Your Journey Together" and Howards Center's "Rocking Horse Program" at trusted places like the Parent Child Centers in Chittenden and Grand Isle.
- 5. Support Child Care Resource and NCSS in their roles as regional child care navigators and a door to Specialized Child Care, CIS, and child care referral specialists.
- 6. Promote the Strengthening Families Protective Factors framework as a shared practice.
- 7. Expand ASQ screening initiatives across health and childcare settings to improve early identification of at-risk families so that prevention services can be provided to promote child safety and well-being in the home.
 - Do we need this? How can we change it?

- 8. Build community and family trust in the DCF system by providing and incentivizing family centered learning opportunities through the Family Treatment Court for families with children in DCF custody.
- 9. Gather authentic feedback to capture the true needs and voices of families currently connected to SUD services in our community.

Next Steps:

- We will most likely not hold a July Meeting.
- Beth will be a point person, until the regional role is filled.
- Sub-contracts will be in place by 7/15.
- Consider inviting DCF to a meeting in the future
- Connect back to VCHIP about data and alignment