**Florida Children and Youth Cabinet Policy Impact Committee Meeting**

**Thursday, October 5th, 2017**

1:00 p.m. – 4:00 p.m.

Florida Supreme Court Annex | City Centre, Conference Room A

227 N. Bronough St., Tallahassee, FL 32301

**Meeting Summary**

Note: The following is a summary of the highlights of the proceedings and is not intended to be construed as a transcript. To obtain meeting materials, please visit [www.flgov.com/childrens- cabinet.](http://www.flgov.com/childrens-cabinet)

**Attendance Summary**

**Florida Children and Youth Cabinet Policy Impact Committee members on conference call:**

* Diana Ragbeer
* Alan Abramowitz, GAL

**Memebers and Representatives in Attendance:**

* John Bryant (+1), JoShonda Guerrier, Jeri Cully, Brian Menard, Mary Shrenker DCF
* Rebecca Bouquio, AHCA
* Sabah Bissanthe, APD
* Jeannie Becker-Powell, Erica Wells, Alissa, and Jamaal Harrison, DJJ
* Angelia Rivers, DOE
* Sandy Karlan, Chair of the Policy Impact Committee
* Zack Gibson
* Nathan Dunn, DoH
* Dr. Norin Dollard, Florida KIDS Count
* Sandy Neidert, Office of State Courts Administrator
* Nathan Dunn, DOH
* Erin Smeltzer, Dr. Tara Huls, OEL

**Staff in Attendance:** Meeting Start Time: 1:00 p.m.

* Lindsey Zander Meeting End Time: 3:41 p.m.

**Proceedings**

**Call to Order and Welcome**

Chair Sandy Karlan called the Florida Children and Youth Cabinet (Cabinet) Policy Impact Committee meeting to order and welcomed everyone on the call.

The roll was called by Lindsey Zander and a quorum was confirmed.

**Revisiting Purpose**

Justice Pariente welcomed guests and explained the importance of the Florida Children and Youth Cabinet. Judge Karlan further emphasized the importance and gave a brief history on 402.56 2.a and how we’ve gotten to where we are now. Zack Gibson went through the CYC Cabinet to explain the scope of the cabinet and how it provides a framework for collaboration. Discussed the comparison of LRPPs for how we came up with the top 3 priorities.

Dr. Norin Dollard explained the purpose of KIDS Count, to keep a focus on child wellbeing. Casey Data Book compares states head to head and we rank 40th the last two years in a row. We have work to do. National data is limited. The role of the PIC is to define the structure and determine the best data to use to keep that focus. How do we show these parents that this is the place to raise their kids? Keep focus on the most vulnerable of the citizens. How do we measure what progress we’re making? Dr. Dollard’s role is to help us determine our measures and find the data for that. What are the most appropriate measures that best reflect the progress of our children?

**Collaborative Initiatives**

OEL: Communications – Potential partnership with DCF in child fatality prevention campaigns (e.g., Double Check the Back initiative).

DJJ: Emphasizing work with cross-over youth who interact with both DCF and DJJ. Currently has a Gubernatorial Fellow working within both agencies to improve collaborative efforts

**Common Gaps and Potential Solutions**

Attending members and attendees identified three major issues facing each agency.

* Issue #1) Healthy Workforce: Turnover, graduating without evidence-based tools, providers with patience and skills to assist kids in particularly challenging situations.
	+ DoH: 3Rnet.org – recruitment website
	+ DCF: Partnering with universities to provide tuition exemption for CPIs or case managers with social work degrees (Unknown how many people have utilized; Individual universities track this number.)
* Issue #2) Early Identification/screening and response: Infant mental health and physical health screenings and subsequent/appropriate services (access and payment)
* Issue #3) Transitions: movement between systems (seamless transitions), and cross-training and understanding of system; labeling
	+ DCF: Single client identifier – individuals are now being assigned a single identifier across DCF (DCF SAMH, CW, Economic Assistance) to track services provided to clients across multiple program areas. This will allow the department to better identify needs and services of clients—at what cost and yielding what outcomes—in order to better recommend future services.

**Major Changes:**

Baker Act Task Force – substantial increase in BAs, but the group was trying to figure out the cause, there are a number of factors community and school based anxiety around shootings and adverse incidents in schools, people are reacting to behavior. There is an absence of less intensive, more appropriate services in the community that will assess a child / youth for risk factors and treat them for this. There are more children eligible through the MMAs who are eligible for BH services; utilization of publicly funded facilities is going down while facilities who take private pay is on the increase. DOE, DOH, DJJ, the courts are on the Baker Act task force. Is there a role for DOH in the Baker Act task force?

The opioid epidemic has led to new partnerships (e.g., DCF and neonatal ICUs) but requires a tremendous amount of coordination / collaboration for both the welfare of the child and the parent.

All of the agencies have undergone major changes in the past five years, the MMA rollout, the MEs who are responsible for DCF funded services and supports, DJJ changed its priority population to early intervention and prevention, DoE’s capacity to work with kids with SED and special needs through things like SEDNET. The focus on the ‘deep end’ leaves a gap of children with moderate needs.

**Next Steps:**

The first step is to do an inventory in order to get a sense of what each agency is currently working on as it relates to the Cabinet’s top three priorities. We will hold a series of meetings leading up to the 2018 Legislative Session to discuss where there might be gaps and where there are opportunities for collective impact. The following is a summary of what we intend to accomplish at the next meeting(s) to prepare for the Cabinet meeting. The goal is to receive feedback from the agency representatives on what is currently happening within their agency, and then determine gaps and opportunities.

1. Cabinet policy committee hosts follow-up meeting, with the following meeting goals:
* The participants will develop a comprehensive inventory of all communications/campaigns, operations/programming, and legislative bills/budget requests currently addressing the three Cabinet priorities.
* The participants will identify other agencies for outreach and involvement.
1. Cabinet policy committee hosts the second meeting for the agency designees, with the following meeting goals:
* Review and discuss the analysis of the gaps and opportunities with the group.
* Prepare recommendations to make for the November Cabinet meeting.

**Action Item 1:** Sandy Neidert to send article to committee members and cabinet members

**Action Item 2:** Lindsey Zander will send letter from Chair Walters to agency representatives.

**Action Item 3:** Lindsey will set up PIC conference call.

**Action Item 4:** Lindsey will coordinate two meeting dates in October to collaborate with the agency representatives regarding their current work and initiatives prior to the next Cabinet meeting.

**Adjournment**

The next Cabinet meeting datewill be **Monday, November 13th, 2017 from 2:00 - 5:00pm.**

Meeting Adjourned at 3:41pm.