



Behavioral Health Action Team Meeting

March 2, 2016



MidAmerica Center for  
Public Health Practice

Agenda

<u>Agenda Topic</u>	<u>Time Allotted</u>
1. Welcome / Logistics - Roll Call - Minutes	2:00 – 2:10 PM
2. Draft Goals, Objectives, Measures and Strategies	2:15 – 3:15 PM
3. Post-SHIP Feedback	3:15 – 3:45 PM
4. Next Steps	3:45 – 3:50 PM
5. Public Comment	3:50 – 4:00 PM
6. Adjourn	4:00 PM

## Logistics

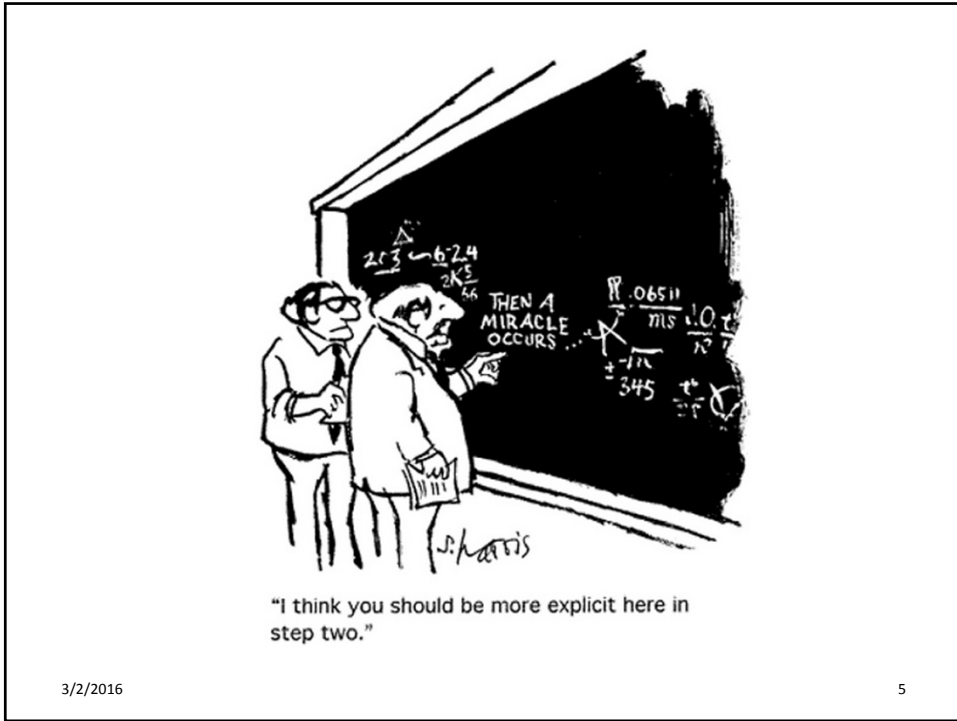
- Mute your lines
- Behavioral Health Action Team Member Roll-Call
  - Please indicate that you are on the phone when your name is called
- Approval of February 24 Minutes

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Illinois' State Health Assessment and Plan for Population Health Improvement Timeline	
Phases	Basic activities
<b>Phase 1: April – May 2015</b>	<ul style="list-style-type: none"> <li>• Conduct primary and secondary data analysis for SHA</li> </ul>
<b>Phase 2: May-June 2015</b>	<ul style="list-style-type: none"> <li>• Engage Planning Council members</li> <li>• Assess data, indicators and measure availability</li> </ul>
<b>Phase 3: June –July 2015</b>	<ul style="list-style-type: none"> <li>• Facilitate Planning Council review of data toward draft priorities, develop strategic approach, and align organizational strengths</li> </ul>
<b>Phase 4: August – September 2015</b>	<ul style="list-style-type: none"> <li>• Conduct focus groups and continued organizational feedback sessions</li> <li>• Analyze results of vetting process statewide</li> </ul>
<b>Phase 5: October 2015 - February 2016</b>	<ul style="list-style-type: none"> <li>• Undertake action planning</li> <li>• Review and revise actions plans with Planning Council</li> </ul>
<b>Phase 6: January 2016</b>	<ul style="list-style-type: none"> <li>• Submit final draft of the SHA</li> </ul>
<b>Phase 7: March – April 2016</b>	<ul style="list-style-type: none"> <li>• Submit draft SHIP to IDPH</li> <li>• Receive public commentary on SHIP</li> <li>• Revise SHIP per feedback</li> </ul>
<b>Phase 8: April 2016</b>	<ul style="list-style-type: none"> <li>• SHIP Plans submitted for final approval</li> </ul>

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## Principles

Selection of goals, objectives and activities should:

**Statewide**

**Be asset-based**

**Leverage resources, including existing infrastructure**

**Promote alignment**

**Tactically address social determinants and access**

**Prevention**

Goals and objectives:  
From last week to today



- *How did we get here??*

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Data

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# Infrastructure

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# Reduce Deaths Due to Behavioral Health Crises Including Overdoses & Suicides

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# Treat People in the Community Rather Than In Institutions

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# Increase Behavioral Health Literacy and Decrease Stigma

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# Responding to Community Violence

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## NEXT STEPS



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## Timeline

- Planning Council Meeting: March 14
- State Board of Health Meeting: March 17
- Public Hearings: Last week in March
- Submit State Health Improvement Plan: April
- **Post-SHIP submission work**

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## What You Had to Say

Post-SHIP Feedback to Questions:

1. How would you envision a Behavioral Health Action Team working together in SHIP implementation? How could/should we work together (e.g., sharing information about best practices, partnerships)?
2. What would be examples of success? If we are successful, what might happen?
3. What do you think you/your organization could contribute to a Behavioral Health Action Team as part of the SHIP implementation going forward?
4. Who's missing from the conversation? Who should be asked to join?

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## What You Had to Say

- How would you envision a Behavioral Health Action Team working together in SHIP implementation? How could/should we work together (e.g., sharing information about best practices, partnerships)?
  - Search for technical assistance grant to fund ongoing staffing for convening quarterly meetings
  - Form learning groups, share best practices with each other via partnerships
  - Share implementation strategies and help move agenda forward
  - Invite those interested to participate in the implementation phase of the SHIP as some folks may not be able to stay on through the whole process
  - Train personnel (providers/community-based)

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## What You Had to Say

- **What would be examples of success? If we are successful, what might happen?**
  - Recommendations implemented or at least some of them vs. collecting dust on a shelf
  - That the work done on the plans is moved forward – and the progress is tracked and reported.
  - Publishing quarterly or semi-annually of best practices, etc., until BH integration/prevention/treatment is standard practice
  - Increased philanthropic and federal dollars enter the State of Illinois to fund public health initiatives, i.e., competitive grants, cooperative agreements, and other types of awards. A specific example of how the learning community could help with this—we could assist community coalitions in winning grants such as [SAMHSA's Drug Free Communities](#).
  - Implementation of this work goes beyond connection to the SHIP and needs highest director of the state agencies on board. Not the staff of state agencies no matter what their title.
  - More individuals receiving interventions thus reducing likelihood of chronicity and dependence on mental health systems.
  - Priorities of this group must fit into the transformation plan shared last week in Springfield at the budget briefings. Without this project included it will fall off radar; however, if included we have great chance of success

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## What You Had to Say

- **What do you think you/your organization could contribute to a Behavioral Health Action Team as apart of the SHIP implementation going forward?**
  - IAFP can help to monitor best practices of family physicians in private and public settings.
  - My organization is very interested in collaboration—my Director has initiated greater cooperation with other hospitals on the CHNA process, with local government on public health issues, and with all types of entities in applying for federal grants. We also have staff who are passionate about behavioral health and public health, and knowledgeable about programs such as Mental Health First Aid. I can get representatives to sit on a learning group or collaborative. I am personally willing to help with the grants collaborative I suggested.
  - I along with our organization would be willing to share information, assist with implementation, participate in a learning collaborative or pilot/demonstration project, collaborate with SIU in developing a training institute for integrative behavioral health care in primary care and schools, whatever is needed or requested.
  - We can continue to provide participation as a provider of behavioral health services – together with working on pilot project opportunities, etc.
  - Could contact former colleagues, including one healthcare system I know of that provides MHFA training
  - Provide training on the Triage model

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## What You Had to Say

- **Who's missing from the conversation? Who should be asked to join?**
  - Illinois Primary Health Care Association, ACCESS
  - More social workers needed at the table, i.e., Loyola's MSW Leadership and Development track students and faculty.
  - Safety net behavioral health providers at the table, e.g. C4
  - NAMI, MHAI, Pathways to Promise, and/or other advocacy/interest groups on the patient/family/community side
  - Kennedy Forum
  - Diversity, including rural, suburban, and urban balance, as well as racial, ethnic, LGBTQ, age, etc.
  - Address aging issues and behavioral health -- we live in a rapidly aging society, with social isolation being a huge problem for older adults
  - Those ultimately responsible for the decision making need to be included
  - Insurance companies (particularly Medicaid managed care companies) would be good.
  - Patients/recipients of services
  - More voices with a critical perspective on mental health services generally
  - Community leaders

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## Public Comment

- State your first and last name, organization
- Limit comments/questions to 2 minutes

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## Reminders and Adjournment

Confirm listing of your name as a contributor on BHAT

Slides available at [www.healthycommunities.illinois.gov](http://www.healthycommunities.illinois.gov)

All Action Team materials are available at  
<https://app.box.com/s/dilicpnexub4qg0acy33705txneqmpa7>

Questions can be sent to [HealthyCommunitiesIL@uic.edu](mailto:HealthyCommunitiesIL@uic.edu)



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