



Meeting Highlights and Action Plan

Topic	Key Points	Action Items <i>Including Responsible Party/Timeline if applicable</i>
Task Force Members	Nick Heimlich, Lisa Hoy, Dan Faust, Greta Mayer, Dawn White, Ken Johnson, Marc Cantrell, Sarah Shivler, Nancy Bunton, Norma Knowlton, Kerry Pedraza, Bob Hackett, Tammy Collins, Krista Limes, Sue Fralick, Pam Meermans, Andrea Miglozzi Voltz, Frederick Stegner, Jan Walker, Sandy Miller	
Introduction	<ul style="list-style-type: none"> S. Miller gave a brief introduction. Packets were given to each participant containing Statistics for the mental health focus group. Participants were asked to read through the materials in the packet, particularly the statistics, discuss what needs come to mind, develop goals based on those needs then narrow them down to the top 1-3 to develop strategies for meeting those needs. S. Miller addressed the group and commended them for their interest in this particular aspect of the Community Health Assessment. Asked them to consider the statistics and comment on what comes to mind as a need in our community. We will, as a group, discuss these needs and develop goals for the top 2-3. 	
Report on 2013 CHA/CHIP goals - 1. PAX-GBG 2. Paramedicine Evaluate success of 2013 goals, Set SMART Goals for 2016.	<ul style="list-style-type: none"> G. Mayer -Explained PAX and the Good Behavior Games to the group. She explained that it is an evidence-based program that yields good results. It helps children self-regulate and teachers comment they see children giving the sign to other children in the halls. Dawn- agreed and stated Lincoln Elementary was the pilot school and it has made a significant difference. PAX is in 41 Classrooms and one entire school and is working well. The teachers love the results they are seeing. G. Mayer - it would be great to have the statistics to show that PAX helps prevent smoking in high school kids and reduces the rate of teen pregnancy. The Mental Health and Recovery Board wants to help PAX expand. D. White- There is evidence that 60-90 mins of class work is gained for teachers who have implemented the PAX-GBG. Teachers are expressing this benefits them as well. The question was asked how we could get parents involved. How do we get PAX in the homes? T. Collins - WSU is working on some online videos that will help parents use Good Behavior Games at home. The videos are expected to be completed next year. D. White - another way to reach parents is by requesting invitations to the parent-teacher meetings. S. Fralick - asked Dawn if she could provide the data to show the how PAX has impacted the children. This data could be used as a means to obtain funding. Dawn - School Principals gather data every 3-4 years. Studies show using the PAX-GBG results in better pass rates and decreased absenteeism. 	

	<ul style="list-style-type: none"> • F. Stegner- Some people are born with mental health issues. Is there still a place where I can take them like they had when I was younger. • S. Fralick - agreed there used to be places like that but they have all dried up. NAMI center is a social center not an over night. • S. Fralick - we would need to do an assessment on adults to determine what services they need. We can connect them to what they need but they have to do the assessment first. • F. Stegner - commented he deals with issues like suicide when they come into the soup kitchen. They may be coming off drugs, some are veterans with PTSD, most are severely depressed. • A. Miglozzi - stated she works in the school and has a social work background. She says her biggest issue is dealing with students or family in a crisis. What happens afterwards? Is there another way to help in a crisis to prevent another crisis. • S. Fralick - PAX was originally developed to help kids in crisis. Andrea- sometimes it's like pulling teeth to found out what is the next step for the student. • D.Faust- Explained the concept of Paramedicine. He explained the chronic use of EMS for non-emergent needs; developing a Memorandum of Understanding with USS to connect with these individuals to ensure they are taking their meds, making their appointments and receiving follow-up care if needed and what role EMS may be able to fill once policies and procedures are in place. Funding for this project is being researched. EMS is experiencing more runs than they have in the past. He stated, "How do we get started? By getting people connected.....more to come." 	
<p>Target SMART Goals</p>	<ul style="list-style-type: none"> • Promote the mental health and well-being of youth in Clark County for the near and long term. • Redirect EMS frequent users to appropriate care and reduce 911/EMS overuse so as direct resources to where they are more effective. • Reduce the incidence of reported suicidal ideation within the various identified, at-risk populations who aren't receiving mental health care. 	
<p>Next Meeting: TBD</p>		