Cross System Initiatives Team

CHARTER

Tri-Chairs: Lin Payton, Danielle Cannon, Allie Keranen

Vision: Operating under the direction of the Systems of Care (SOC) Executive Team, Statewide Family Youth and Systems Partners Round Table (FYSPRT), and DBHR Management, the Cross Systems Initiatives Team (CSIT) will work together cooperatively and collaboratively across systems to assist in building an integrated delivery system of effective services and supports for treating children and youth with significant emotional or behavioral health needs, and their families.

A Purpose

The Cross Systems Initiatives Team works on behalf of the Children’s Mental Health Interagency Governance structure to address cross system issues and initiatives through the facilitation and development of policies and procedures based on WA Children’s Mental Health Principles.

Desired Outcomes: Ensure the sustainability of cross system communication and mutually supportive working partnerships between BHSIA; CA; DDA; JJRA; ESA and HCA as they relate to the community based mental health needs and service delivery systems for children and youth with significant emotional and behavioral health needs, and their families, who are served by more than one administration in order to have ready access to the supports and services necessary for them to remain safely in their own homes and in their own communities.

1. Increase communication and collaboration across systems and within programs
2. Align projects with the field
3. Develop stronger connections and teamwork through increased opportunities to communicate and learn together
4. Provide an opportunity for strategic program implementation through collaborative problem-solving and planning based on the committee member expertise.
5. Increase continuity of services for children and youth, and their families.

Specific functions:

- Coordinate cross system statewide initiatives related to children, youth and families;
- Be a resource to study local, regional and statewide issues related to services to children, youth and families;
- Infuse WA Children’s Mental Health Principles in all systems for children, youth and families;
- Provide System of Care cross system implementation and support;
- Develop and maintain agreements across child-serving systems;
- Facilitate strengthened connections across child serving systems, greater collaboration, and support of shared principles and priorities;
- Cross System support to the RSNs implementation of Wraparound with Intensive Services (WISE);
- Address system gaps and issues;
- Guide and support inter and intra-agency efforts to collaborate and coordinate delivery of care in order to improve the effectiveness of services and outcomes for mutual children, youth and their families;

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- Make recommendations formulated by cross system collaboration for needed system improvements;

### B Membership, Authority and Accountability

#### Membership

Membership is intended to be broad and include representatives from state agencies, system partners, families and youth.

<table>
<thead>
<tr>
<th>Representative</th>
<th>System</th>
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<tbody>
<tr>
<td>Allie Keranen – Tri-chair</td>
<td>Youth</td>
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<tr>
<td>Danielle Cannon (SRSN) – Tri-chair</td>
<td>Regional Support Network Children's Services</td>
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<td>Lin Payton – Tri-chair</td>
<td>Division of Behavioral Health and Recovery – Mental Health</td>
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<td>Andrea Parrish – Tri-chair</td>
<td>System of Care Grant</td>
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<td>Barb Putnam</td>
<td>Children’s Administration</td>
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<td>Carol Miller</td>
<td>Department of Health</td>
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<td>Charisse Pope</td>
<td>Community Chemical Dependency</td>
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<td>Cherol Fryberg</td>
<td>Tulalip Tribe</td>
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<tr>
<td>Christy Garcia</td>
<td>Fostering Well-Being</td>
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<td>Christie Seligman</td>
<td>Developmental Disabilities Administration</td>
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<tr>
<td>Ellen Silverman</td>
<td>Health Care Authority</td>
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<tr>
<td>Gena Palm</td>
<td>Provider - W</td>
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<td>Jake Towle</td>
<td>Juvenile Justice and Rehabilitation Administration</td>
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<td>Jeanette Barnes</td>
<td>Family</td>
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<tr>
<td>Juvenile Court Representative</td>
<td>Juvenile Justice and Rehabilitation Administration</td>
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<tr>
<td>Lynn Retzer</td>
<td>Provider - E</td>
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<tr>
<td>New parent(s) being identified</td>
<td>Family</td>
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<tr>
<td>Preston Cody</td>
<td>Health Care Authority</td>
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<tr>
<td>Representative(s) being identified</td>
<td>Managed Care Organizations</td>
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<td>Sarah Butzine – Ron Hertel as backup</td>
<td>Office of the Superintendent of Public Instruction</td>
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<tr>
<td>Stacey Bushaw/Tom Berry</td>
<td>Economic Services Administration</td>
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<tr>
<td>Suzie McDaniel</td>
<td>Regional Support Network Administrator</td>
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<tr>
<td>Tina Burrell</td>
<td>Division of Behavioral Health and Recovery – Substance Use Disorder</td>
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<tr>
<td>Veronica Santangelo</td>
<td>Department of Early Learning</td>
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<tr>
<td>Wendy Tanner</td>
<td>Provider Counsel</td>
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#### Roles and Responsibilities:

1. The Chairs:
   A. Facilitate meetings;
   B. Disseminate the agenda one week prior to meetings;
   C. Approve final meeting notes;
   D. Forward approved meeting notes to Information Services for posting on CMH System of Care website.

2. Committee members:
   A. Participate in and regularly attend meetings;

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B. Identify and develop strategies to address committee sustainability;
C. Identify and develop strategies to address cross system issues and initiatives through the facilitation and
development of policies and procedures based on WA Children’s Mental Health Principles.

3. Notes will be taken at each meeting on a rotational basis:
   A. It is the recorder’s responsibility to summarize and highlight information discussed by the committee, using a
      standardized format;
   B. Recorder will send draft notes to all members for review and input within 2 weeks of meeting. Members will
      provide feedback within 1 week for necessary changes.
   C. Finalized minutes will be forwarded to the Chairs who will ensure posting to CMH website within 30 days.

Committee Commitments:

Communication
- Acknowledge the values of others who are present
- Observe and reserve assumptions
- Value different communication styles
- Be open-minded (not defensive) and non-judgmental
- Process and make decisions in a timely manner
- Maintain confidentiality – share outcomes/direction outside of committee, but avoid
  personal detail, issues, etc.
- Ask for other opinions and ideas and seek to understand
- Be direct in sharing your opinions and information
- Check in and make repairs when needed

Meeting Process
- Start on time and end on time
- Have an agenda and send it out in advance
- Be prepared and on-time
- Be present and stay on task
- Avoid talking over one another/interrupting
- Minimize side conversations/cross-talk
- Hold each other accountable to these ground rules
- Use smartphones, tablets, and laptops sparingly
- Put cell phones, pagers, etc. on vibrate or silent

Authority
The Cross Systems Initiatives Team operates under the direction of the SOC Executive Team, statewide FYSPRT and
DBHR Management.

Accountability
The Cross Systems Initiatives Team is committed to open, transparent and public processes. Meeting
notes will be posted on the CMH System of Care website at:

Work products will be posted when formally adopted by the governance structure.

April 3, 2013
C  Meetings

Schedule
Monthly

Agenda
An agenda will be developed by the Committee Tri-chairs with input from Team members.