Prenatal through 5
Relational Health Subgroup

June 8, 2022
Monthly Meeting
Participants at Today’s Meeting

1. Allie Johnson
2. Amritha Bhat
3. Andrea Estes
4. Angela Abrams
5. Anne Stone
6. Avery Park
7. Becca Calhoun
8. Beth Tinker
9. Bridget Lecheile
10. Cecily Croskey
11. Christine Cole
12. Cindi Wiek
13. Deb Crowley
14. Janet Fraatz
15. Jennifer Rees
16. Jess Galvez
17. Judy King
18. Karin Potter
19. Katrina Hanawalt
20. Kate Ingman
21. Kiki Fabian
22. Kim Gilsdorf
23. Kristin Wiggins
24. Mary Sprute Garlant
25. Megan Veith
26. Miriam Hirschstein
27. Monica Oxford
28. Muriel Herrera Velasquez
29. Nucha Isarowong
30. Olivia Thai
31. Rachel Burke
32. Rachel Dumanian
33. Sarah Pulliam
34. Shakira Adams
35. Sharon Shadwell
36. Stephanie Courtney
37. Victor Cardenas
Agenda

- Welcome & Meeting Goals
- Check-Ins
- Review: Workgroup Process & Timeline
- Discussion: Criteria to Guide Policy Recommendations
- Update: CYBHWG Actions and Planning
- Partner Implementation Updates
- P5RHS Opportunities & Challenges for 2022-23 Session
- Kick-off of Issue Workgroups
  - MHAYC
  - IECMH-C
  - Parent Caucus
- Check-out
Welcome! Introductions & Roles

P5RHS Co-Chairs and Liaisons to the Children & Youth Behavioral Health Workgroup

Representative Debra Entenman  
Bridget Lecheile, WA-AIMH

P5RHS Advocacy and Facilitation Leads

Kristin Wiggins, Advocacy  
Makeba Greene, Facilitation

Perigee Fund provides philanthropic support for subgroup facilitation, advocacy, and parent engagement
Breakout Groups - Introductions

What is one policy advancement or area of progress for prenatal to five work that gives you hope for future generations?
Vision: Washington’s children, youth, and young adults have access to high-quality behavioral health care.

Mission: Identify barriers to and opportunities for accessing behavioral health services for children, youth and young adults (prenatal to 25 years old) and their families that are accessible, effective, timely, culturally and linguistically relevant, supported by evidence, and incorporate tailored innovations as needed; and to advise the Legislature on statewide behavioral health services and supports for this population.

Important Elements of Work Group Charge:

• Support the unique needs of children and youth (prenatally through age 25), including promoting health and social and emotional development in the context of children's family, community, and culture

• Develop and sustain system improvements to support the 15 behavioral health needs of children and youth
# P5RHS Calendar

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| May 10th      | First P5RHS meeting of 2022  
| 2-3:30pm      |  • Recap last session & implementation, preview activities for the year                                                               |
| June 8th      | P5RHS meeting  
| 2-3:30pm      |  • Issue group breakouts; Identify 2023 session priorities                                                                            |
| July 12th     | P5RHS meeting  
| 2-3:30pm      |  • Issue groups develop recommendations for key priorities                                                                           |
| August 9th    | P5RHS meeting  
| 2-3:30pm      |  • Issue groups refine prioritized recommendations  
|               |  • Subgroup members help with outreach and vetting                                                                                  |
| September 13th| P5RHS meeting  
| 2-3:30pm      |  • P5RHS finalizes draft recommendations                                                                                               |
| September 15th| Draft P5RHS recommendations due to CYBHWG                                                                                              |
| October 11th  | P5RHS meeting  
| 2-3:30pm      |  • Finalize recommendations and develop key talking points, FAQs                                                                      |
| October 15    | Final P5RHS recommendations due to CYBHWG                                                                                               |
| November 1    | CYBHWG report due to the Legislature                                                                                                    |
| November 9    | P5RHS meeting  
| 2-3:30        |  • Parent leader panel, presentation of final recommendations                                                                            |
| December 14   | Final P5RHS meeting of the year – may be canceled if not needed                                                                          |
How we work together –
Racial equity commitments, Principles & Criteria

Racial Equity Commitments
(guided by Color Brave Space Norms in past)

Our Principles

• Hear the voices of families

• Close health disparities for families of color

• **Provide immediate relief** for behavioral health needs for families, especially those who are most vulnerable

• **Focus on the urgent needs** of children ages 0-5, and their families, during this time of great potential and vulnerability
1. COMMUNITY-INFORMED - Prioritizes approaches and ideas that strengthen child and family well-being, as shared by members of impacted communities and those that serve them

2. CENTERS & ADVANCES EQUITY – Holds the promise to measurably closes the gaps in health access and outcomes

3. REALISTIC & ACHIEVABLE – Size and scope are appropriate for Washington’s budget context policy landscape

4. CAPACITY – Implementation could be described and executed well and quickly

5. STRENGTHENS/TRANSFORMS – Helps to build, sustain, or transform foundational systems

6. FIT – Fits within the P5RHS and CYBHWG scope, and avoids duplicating the work of other groups
Implementation Updates

- **Parent Warm Line** – Perinatal Support WA
- **Mental Health Assessment for Young Children (MHAYC pronounced “Macy”)** – HCA
- **IEMCH-C (consultation)** – Child Care Aware of WA and DCYF
- **Complex Needs Fund** – DCYF

**Abbreviations:**
- HCA = Health Care Authority
- IEMCH-C = Infant and early childhood mental health consultation
- DCYF = Department of Children, Youth, and Families
What is the difference between the **National Maternal Health Hotline** and the Perinatal Support **Washington Warm Line**?

### Immediate Support

**National Maternal Health Hotline**

- **24/7** free confidential support, resources and referrals
- Staffed by **licensed and credentialed** perinatal mental health and healthcare providers, childbirth professionals, and certified peer specialists.
- For everyone, in English and Spanish

### Ongoing Support

**PS-WA Parent Support Warm Line**

- Calls, texts and emails are answered by **peers** (parents who have experienced and recovered from a perinatal mental health issue) M-F 9am – 4:30pm PT
- Provide ongoing emotional support, wellness planning and targeted provider and community services referrals
- For everyone, in English and Spanish
Implementation Updates

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HCA = Health Care Authority
IEMCH-C = Infant and early childhood mental health consultation
DCYF = Department of Children, Youth, and Families
Thank you to our partners!
Opportunities & Challenges

- Implementation & efficacy – Focus on “Go Back” Issues (MHAYC & Consultation)
- Identifying new policy priorities and/or budget priorities
- Peer supports – status update
Initial Issue
Groups for P5RHS

1. (MHAYC Mental Health Assessment for Young Children
2. (Consultation) Infant and Early Childhood Mental Health Consultation (IECMH-C)
3. Parent Caucus
Quick Report Outs

Initial Issue
Groups for P5RHS

1. (MHAYC) Mental Health Assessment for Young Children
2. (Consultation) Infant and Early Childhood Mental Health Consultation (IEMCH-C)
3. Parent Caucus
Thank you!

Our next meeting is **July 12th from 2-3:30** on Zoom.

Hope to see you then!