

April 20, 2020 FYSPRT Meeting Minutes

4-6pm

Location: Virtual via Zoom

Meeting Opening

- Introductions
- Virtual Sign-In Sheet / Log on / Technical assistance as needed
- Comfort agreement
- General Announcements

Lifeline Connections Youth Programs and Camp Mariposa – Dan Jass and Trista Wolles

- Lifeline Connections is in process of developing increased youth services in the community
- Most of the new developments and programs are all on hold due to COVID-19
- Some court appointed services such as UAs are mostly on hold as well
- Lifeline continues to attempt to engage youth and support outreach to youth in services
- Services in schools (on-line) continue to happen in Hockinson, Fort Vancouver, and Skyview
- Camp Mariposa is a “prevention” camp for youth in services
- Occurs throughout the year even during winter months
- March camp was canceled due to COVID-19
- Camp Mariposa is in need for volunteer mentors (must attend 4 of 6 camps for at least a year), 1 mentor for every 2-3 youth, someone who is willing to be silly and have fun, must be 18 years of age, at least 2 years of recovery if in the system, pass criminal background check
- They have had therapy llama come and visit as well as go on nature hikes
- Therapeutic activities include evidence based mind wise suicide prevention, depression screenings, mindfulness meditation, and they can connect with clinicians
- 7 seeds of Camp: I didn't cause it, I can't cure it but I can take care of myself
- Youth can continue to go to camps or graduate and then can come back and be a junior counselor
- Due to COVID-19, Camp Mariposa website is full of fun activities to do which is updated weekly
- Camp is sending out care packages to the youth with different types of activities included such as tote with fabric pen to color on it, planting kits, fidgets, letter from mentor, booklet “can't control addiction but you can control—“
- Camp Mariposa will have a May 2nd virtual camp: hip hop fusion
- There is a waitlist to attend Camp at this time

Youth Advocacy and Empowerment Report Out – Briana Mason

- YAE discussed:
 - Adulting 101 – series of workshops in partnership with the Healthy Transition Grant to teach “adult” skills to youth is currently on hold due to COVID-19
 - Last month: Conversation on luck: being based on getting out there and creating more opportunities
 - St. Patrick’s day scavenger hunt and Dr. Seuss day activities

Reminder of the Youth Advocacy and Empowerment Group

- YA&E launched an Instagram page @swwa_yae Follow and support our page Please follow the Facebook page also <https://www.facebook.com/FYSPRT/>
- Next YA&E Meeting - We meet the first Monday of every month (May 4th). May’s YAE meeting will be held virtual via Zoom. Topics include:
 - COVID-19 check in
 - Self-care
 - Developing routines
 - Pictionary
 - Create a positivity image as a group
 - HOPE hospice letters

WISe Update – Katie Favela

- WISe is currently serving 230 families which is currently the most they’ve served at one time
- WISe services are being conducted via Telehealth as well as minimal in person support
- Intakes are still occurring during COVID-19
- Screened 112 people
- Youth mobile health crisis: remote support, you do not have to be suicidal, providing services for anyone needing support
- Crisis stabilization is still occurring remotely through the ER and Youth Mobile Crisis Intervention (YMCI)

COVID-19 Check In: How have you connected with your family and/or is there something new you have started with your family during these times? – Michelle Karnath

FYSPRT discussed ways that members are connecting with family or friends and other activities started during the COVID-19 quarantine. FYSPRT members are:

- Going to different backyards for dinners
- National adopt a senior 2020 Facebook page for those graduating this year
- Going on family walks and virtual conversations
- Yoga videos from Jerri Clark on YouTube, she takes requests for classes
- Gardening
- Obstacle course for adults all over the house

- People checking in more regularly and trying to keep connected
- Dropping gifts off at people's houses

Respite Check In – Michelle Karnath

FYSPRT discussed respite service challenge through the state FYSPRT

Respite Care Services definition - A service provided with State-only or local funding to sustain the primary caregivers of children with serious or emotional disorders or adults with mental illness. This is accomplished by providing observation, direct support and monitoring to meet the physical, emotional, social and mental health needs of an individual consumer by someone other than the primary caregivers.

- Respite: service provided with state only or local funding for youth or adults with serious mental illnesses, taken care of by someone other than primary caregivers
- Is respite available in your region?
 - No, not even always for foster parents
 - DDA respite: very difficult to become a respite provider, family has to find the person and then they have to go and become certified
 - Difficult to get respite from Kinship program
 - Yakima Valley School planned respite, more institution based
 - Discussed potentially DDA respite in Longview
- Which situations would respite to be helpful?
 - Loved one taking care of an individual with dementia
 - Extended behavioral or mental health supports
 - Being trained on specific needs of the individual when you cannot send them to a day care/etc. because their needs can't be met by natural supports
 - Help to keep individuals from spiraling into a more acute stage of symptoms
 - Anytime you're caring for someone
 - Help create continuum between hospitalization/institutionalization and having to keep them home
 - Allow individuals to have rest in the home or a place to drop off youth (we will need to define more clearly what we are talking about with the term respite)
 - Help to lower the burn out rate of care providers
 - Keep natural supports from burning out
- How do we provide individuals with support and training?
- When there is an escalation in behaviors or symptoms, but hasn't reached the criteria from other types of systems, what can be done?
- Caregivers also need of support and stabilization; how can they manage their own mental health symptoms?
- Respite can be therapeutic tool, reward system for good behavior
- Recommendations/Ideas:
 - Local, not hours away
 - Can't be limited, false promises, needs to be a robust program
 - Not just Medicaid eligibility, not too many constraints to access
 - If just "medically necessary", Insurances can pay for it, but may also make it harder to access

- Enough people to do it
- Technology and physical modifications of space
- Safety for caregiver and those who are getting care
- The right type of people who have empathy
- Having respite of person who understands and might get that help back if they provide respite
- Respite also needs to be for preventative care so that we don't end up having parents dropping them off at the ED just to get a few hours of sleep
- A lot of modalities for respite need to be used, not just one type/model such as going into the home or planned time away from home, etc...
- Need clarification to due to worries about who gets it, who makes decisions about it, how much do you access
- Would respite only be for WISe youth who are most critical?

Wrap up and Evaluations