



February Meeting 1

Date: February 15, 2024, 10:30 am- 12:00 pm, 5:30-7:00 pm.

Attendees

Tori Buckert, Jeff McFadden, Rebekah Ridgeway,

Agenda

1. Review group agreements.
 - a. Adding confidentiality to the agreement
2. Overview of work
3. Mental health/wellness check-ins
4. Location and providers.
 - a. Council members were surprised to learn that we only have 4 Pedis staff in our entire region.
 - b. New Pedi just joined in Hancock County.
5. Mental and behavioral health introduction
 - a. I know the resources esp. from my job but our barrier is that we aren't our child isn't old enough to be referred out to them. I didn't know that we could be referred to the ROE. Our referrals started at the NICU, so we were lucky to have had that opp.
 - b. Knowing what each service offers in our region. Where or who does what?
 - c. Had a child that won't be seen until they are 6 years old.
 - i. Still a large stigma and judgment in Hancock County about Mental AND Behavioral Health.
 - ii. As more people are seeing traits with their children the waitlists are growing. (traveling to another state to get services)
6. Housekeeping
 - a. Survey
 - b. Next meeting- Tuesday 27th of February Morning and evening options offered.

Rebekah, jeff

Gave time for mental health check-in and introductions.

Went over questions that need to be answered for the year.

Back in late October, my daughter had an incident at daycare, and she had a friend she wasn't happy with the friend's way that she was playing so my daughter introduced her shoe to her best friend's face, and it was serious. We made the appt with Pedi's. I had a parent-teacher conference set up the next week and took all the documents from the meeting to the doctor. When we were at the doctor she wasn't bad, we were able to get referred and went to the ROE for that referral for mental and behavioral services for our 4-year-old.

"I want her to act right, right now" – how parents are referring to their child.

Bridgeway sent the referral.

Doctor to ROE

The age is a roadblock "not old enough to be referred to us yet"

I know the resources esp. from my job but our barrier is that we aren't our child isn't old enough to be referred out to them. I didn't know that we could be referred to the ROE.

Our referrals started at the NICU so we were lucky to have had that opp.

Knowing what each service offers in our region. Where or who does what?

"a lot of this bounces back to Postpartum care"

Not just how you get your 5-year-old a referral but the support for families behind it.

Where do you go if your child is under 5

*** Memorial Hospital does 2 and up for mental health.*****

Individual notes: It felt like we had to push to get referrals. One reason providers are hesitant to refer is because there is no one to refer to. We've spent hours on the phone trying to get appointments and referrals. Sometimes there's a delay because the staff doesn't know how to

make a referral in their system. Our EI caseworker was good and very helpful. PT and OT are most needed in Fulton county.

Members asked what does the mental health providers numbers in the data include? What does the network of support look like starting with post partum.



February Meeting 2

Date: February 27, 2024

Attendees

Claire Happle Ashe, Tori Buckert, Andrea Garnett, Jeff McFadden, Rebekah Ridgeway, Chidimma Umeaduma, Kelly Nelson,

Agenda

1. Review group agreements
 1. In agreement no changes. Previously added confidentially
2. Mental health/wellness check-in
 1. What are we doing to take care of ourselves.
 1. Ideas were shared in the group.
3. New Department Of Early Childhood Structure
 1. Went over the new structure and timeframe.
4. Illinois Mental Health Overview
 - a. Blueprint of Transformation Plan
 1. "They only accept fax right now and people are paying to fax their information in when they can barely pay to do that."
 - b. Illinois Children's Mental Health Plan
5. County I-Plans
6. Who we've talked to

1. Informed council that we would like to talk to others in our and would like a warm hand off.
7. Discussion and questions
 1. Referral struggles
 1. Trying to schedule visits for foster children was harder and not everyone took insurance that they held and if they did it would be several months out before they could be seen.
 2. For mental health we have been able to stay in the area at MDH.
 1. Play therapy is offered at MDH (possibly down to age 3)
 2. Who is missing out on the opportunity of mental health and the list the barriers?
 1. Kids in care qualify for mental health services but the families that bring the children into care don't qualify for the mental health services as a secondary trauma result. A barrier would be cost because it was out of pocket for us.
 3. Who do we need to talk to or what other data can we supply/
 1. Nutrition impact, data behind that.
 4. When it comes to mental health for you and the community what factors or concerns?
 1. We need more options, we weren't able to get our child diagnosed locally and the wait lists were 9-18 months long. We were told to get on every single waitlist that we could just to have a fighting chance to get into someone first. We need to have someone who will see children under 5 in our region, or more than one option. We traveled 3 hours to be seen for our child's diagnosis.
 2. What are we doing to bring providers here and what are we doing to make it worth it.
 3. Children are being referred to PT and OT before they can be seen to get a diagnosis but insurance won't cover the services without the diagnosis.

"If there are limited resources before the age of 5 is telehealth an option for kids?"