

## TCB May Meeting Minutes

May 14<sup>th</sup>, 2025

2:00 PM – 3:30 PM

Zoom

### Attendance

Alice Forrester  
Allison Vanette

Gerald O’Sullivan  
Howard Sovronsky

Michael Moravecek  
Michael Patota

Tammy Venega  
Yann Poncin

Carolyn Crandall  
Catherine Foley  
Geib

Javeed Sukera  
Jeff Vanderploeg

Michael Williams  
Mickey Kramer

Yvonne Pallotto

Ceci Maher  
Christina Ghio  
Claudio Gualtieri  
Derrick Gordan

Jody Bishop Pullan  
Karen Snyder  
Kimberly Karanda  
Lorna Thomas  
Farquharson

Nicole Taylor  
Sean King  
Shari Shapiro  
Sinthia Sone-Mayano

Erin Williamson  
Gabrielle Hall

Mariam Miller  
Melvette Hill

Stephanie Bozak  
Tammy Freeburg

### TYJI Staff

Emily Bombach  
Erika  
Nowakowski  
Jacqueline Marks  
Stacey Olea

### **Welcome and Introductions:**

The meeting was opened with welcoming all attendees.

### **Acceptance of TCB Meeting Minutes:**

A motion to accept the April meeting minutes was put forward. The motion was moved, seconded, and unanimously approved.

### **Overview of the Meeting:**

The May Monthly Meeting was opened with legislative updates from the TCB Tri-chairs, followed by administrative updates from TYJI. Health Equity Solutions conducted a focus group to gather insight on transformative community engagement from committee members. The Prevention Workgroup Co-chairs presented an overview of prevention terminology, frameworks, and prevention strategies.

### **Legislative Updates:**

The Tri-Chairs shared an update on the TCB committee bills going through the legislative process. A tri-chair explained any legislative recommendation that has an appropriated amount will likely be a part of the budget bill and when legislation needs to be implemented, it will be a part of the budget implementor bills. The tri-chair elaborated that there is money set aside in the governor's budget, proposed budget, and the appropriations budget to make Medicaid rate adjustments based on the Medicaid rate study. The specific details pertaining to the Medicaid rate study will be a product of final budget negotiations. The member followed up by asking if she could get clarity on the process for children's behavioral health to increase Medicaid rates. The tri-chair answered that the appropriations committee budget does have priorities so between

that committee and the governor's budget, it should be a part of what both committees are prioritizing. The committee thanked the tri-chair and added she would like to continue the conversation offline. The Tri-chair added that HB 7263 is going through the appropriations committee and would allow for the Behavioral Health Advocate and two providers of substance abuse disorder who treat youth to be appointed as members of the TCB committee. Lastly, the Department of Public Health (DPH) provided a brief update on HB 6976, which mandates hospitals to notify DPH when they go on diversion and allows the DPH to aid hospitals that go on diversion.

**Administrative Updates:**

TYJI updated the TCB committee on all the work groups' upcoming meetings and current focus areas. The system infrastructure workgroup's next meeting is on May 20th on Zoom. The meeting will focus on systems of care, consisting of three presentations on the history of systems of care, the process of embedding systems, and the current landscape of CT. The services workgroup's next meeting is on June 4th on Zoom. Peer-to-peer is a priority for the workgroup. CHDI presented on the Peer Support Study and will update the work group once the results from the study are finalized. The Services Workgroup will dive deeper into current data and needs for Crisis Continuum, while continuing its work with UConn Innovations on the Services Array Survey. The School-Based workgroup's next meeting will be held on June 2nd on Zoom. The School-Based workgroup is focused on the School-Based Health Center Study and the School Behavioral Services billing review. The work group is currently discussing language regarding the study and having discussions regarding the scope of work. The Prevention Workgroup's next meeting is on May 15th on Zoom. The Prevention workgroup will have presentations from the SEPI CT program and Early Childhood Prevention. The workgroup is focused on mapping services, barriers in services, data collection methods for behavioral services, and identifying funding for services.

**Community Engagement Interactive Focus Group:**

Health Equity Solution (HES) provided a brief overview of their vision and mission. The presenter explained that the purpose of the focus group is to support the framework of the upcoming youth summit by engaging the committee members to share their vision around community engagement. The presenter opened the breakout room segment with the poll question, *what does engaging community members mean to you?* Committee members added an array of responses, such as listening, learning, respect, connection, transparency, authenticity, and communication. The committee then broke into two breakout rooms, where questions such as *"How do you envision community engagement as part of the TCB committee's work, and what are some of your goals? What do you hope to accomplish?"* and *"What does co-creation and power sharing mean to you, and how do you see it as part of the TCB committee work?"*. Discussion was had amongst breakout rooms prior to going back to the main room.

The committee members rejoined from breakout rooms and continued in an open dialogue of additional questions from HES. HES conducted polls asking the committee to answer on a scale of 1 through 5, 1 not being prepared at all, and 5 being very well prepared. The first poll asked, *how prepared is the committee in terms of knowledge and understanding in meaningful community engagement work?* The poll response indicated 30% voted 2, 35% voted 3, and 30% voted 4. The second question asked, *how prepared is the committee in terms of openness and commitment to engage in meaningful community engagement work?* The poll response results showed 5% voting 1, 9% voting 2, 18% voting 3, and 64% voting 4. HES asked the committee members what challenges or tensions might emerge as the committee depends on its community engagement work. Committee members answered, defining community, time to develop relationships and trust, ensuring children with disabilities are included in the conversation, tension in compromising the different family and patient needs for long-lasting recovery, identifying alignment and shared outcomes of community and committee, and identifying balance in all community experiences. The last question to the committee was, *what would make the upcoming summit successful?* A committee member answered, gaining more knowledge, leaving inspired, and having youth share their lived experience. Other committee members responded that building connections to deepen the understanding of youth experience in recovery, involving children with disabilities, and believing improvement is possible. The presenters thanked the committee members for their participation. HES also added that they are building trust with TCB to best support community integration into TCB's work in a sustainable, transformative way. HES closed by noting that the findings from the focus group, along with collaboration from the CVW workgroup, will be used to create an expansive and supportive summit.

### **Prevention Workgroup Level Setting:**

The Prevention Workgroup co-chairs opened with an overview of the workgroup's purpose, objectives, and call to action. The co-chairs elaborated on what prevention is, what prevention is not, why prevention matters, and the different levels of prevention. The co-chairs noted that behavioral health prevention focuses on mental health, substance misuse, and suicide, as well as addressing risk and protection factors at various levels to promote a positive childhood. Furthermore, the co-chairs identified that child experience is the number one risk factor for children, emphasizing that children will face abuse, neglect, and household challenges. The co-chairs stress the significance of positive outcomes and protective factors for children to maintain a sense of belonging and safety at school and in their communities. The co-chairs went over strategies and the impact of the prevention framework models: Public Health Model, SAMHSA Strategic Prevention Framework (SPF), Continuum of Care, and Social Ecological Model. The presentation concluded with a call to action emphasizing to committee members that prevention is everyone's responsibility, urging alignment around a shared framework, and investing in the prevention work upstream to build healthy communities.



Making connections. Informing solutions.

**Next Meeting:**

June 18, 2025

Time: 2:00 P.M. – 4:00 P.M.

ZOOM ONLY