## WI CPCP Community Advisory Committee Meeting Minutes

Date: W	/ednesd	ay, July	19, 2	2023
---------	---------	----------	-------	------

**Time:** 12:15 – 1:00pm

**Committee Members Present:** Andrea Chao, MD (South Region) \_X\_Angela Lunn, FNP-C (North Region) Bethany Weinert, MD (Southeast Region), Emily Sullivan (Wisconsin Women's Health Foundation), Karen Kujawski (National Alliance on Mental Illness), Scott Radtke (Catalpa), Rosa Kim, MD (Medical Director), Leah Ludlum (DHS), Elizabeth Nelson (Program Manager) **Guest:** Heidi Massey (DHS)

Committee Members Absent: Peter Roloff, MD (Northeast Region), Trina Kaiser, FNP-C (West Region), Jolyne Check Ostrowski, APNP (North Region)

AGENDA TOPICS	NOTES		
Introductions & Committee Business	Members introduced themselves and shared news from their practice or organization. New CAC members were introduced; Angela Lunn, APNP from Northlakes Community Clinic in Ashland, and Emily Sullivan, Program Director from WWHF. Leah Ludlum announced her retirement next month and introduced Heidi Massey, who will step in as DHS Liaison for WI CPCP going forward. Of note, all 3 PCPs in the group today mentioned their health system had recently add IBH and/or e-consult services for pediatric MBH.		
<ul> <li>WI CPCP Updates</li> <li>Key Performance Indicators</li> <li>Increasing emphasis on</li> </ul>	WI CPCP year-end dashboard of key performance indicators was shared (attached). > 10% growth has occurred in all 3 categories each of the past 3 years. This year, the number of new PCPs joining WI CPCP was at 98% of our goal, indicating we are reaching PCP enrollment saturation, which is expected in mature access programs. The natural next step is to increase mental and behavioral health educational offerings, to allow enrolled PCPs to continue to gain expertise and confidence.		
education. o Bi-annual conference November 3, 2023	Details about WI CPCP educational activities and offerings were shared, as follows: The WI CPCP Bi-annual Pediatric Mental Health in Primary Care Conference will be held Nov. 3, 2023, in Pewaukee (in-person or virtual attendance). Four CME credits are offered. CAC members are encouraged to attend and may do so at no cost.		
<ul> <li>Case conference Series</li> </ul>	Quarterly case conference series continues after a successful inaugural year. Attendance was far beyond expectations. Dr. Weinert mentioned scheduling conflict with last year's dates for many CW Pediatricians. The current year's schedule tries to take CW scheduling needs into account. Dr. Kim encouraged PCPs from other health care systems to let us know if similar scheduling issues occur for them.		
<ul> <li>Clinic staff education</li> </ul>	<ul> <li>This initiative came directly from this committee's input, siting the need for triage nurses and other office staff to be better able to support PCPs in managing the behavioral health issues with patients &amp; families.</li> <li>We hired a psychiatric RN to develop and deliver this education content.</li> <li>3 videos were filmed this spring: Suicidality, Psychiatric Medication Triage, Behavioral Dysregulation.</li> </ul>		

## WI CPCP Community Advisory Committee Meeting Minutes

Compassion resiliency	<ul> <li>Promotion begins this fall; video launch January 2024.</li> <li>Live education sessions with our Psych RN will be offered as well.</li> <li>Following up on this topic, which came up at our last CAC meeting, Dr. Kim shared that compassion resiliency was discussed at a WI CPCP All-staff meeting. The experience of WI CPCP clinicians has been and continues to be that nearly every encounter with a PCP includes an element of support for the challenges they face in daily practice. We plan to include the topic in our current efforts to re-vitalize check-in meetings with clinics. Karen shared that NAMI recently completed a pilot project with Rogers Behavioral Health on Compassion Resiliency. She will share information on that project with WI CPCP.</li> </ul>	
<ul> <li>CAC Input: open discussion</li> <li>What can WI CPCP do or change to better support PCPs?</li> </ul>	Dr. Chao expressed frustration that pediatricians are not able to diagnose autism, but must wait for neuropsychological testing, which takes a long time to get in to and costs families a lot of money. Dr. Kim stated that even child psychiatrists cannot make a formal diagnosis of autism, which is required to access therapies that children need. Karen recommended local Autism society chapters, where the most up-to- date resources can be found. Scott shared that Catalpa offers neurospych testing but has not been able to hire enough clinicians to meet community needs, noting that kids on Medicaid are severely underserved in this regard. Angela stated that the closest testing site for her patients is Duluth. Dr. Chao stressed that families are having to pay unreasonable amounts of money to get appropriate care and that systemic change is needed. Leah offered the advocacy group "Family Voices" as a possible avenue for raising the issue politically. Dr. Kim will connect with a colleague whose child psychiatry practice is focused almost exclusively on autism.	
Action items for WI CPCP	<ul> <li>Provide conference registration information to CAC members in a separate email.</li> <li>Gather information about how the group can advocate for a change to the process for autism diagnosis that better meets the needs of Wisconsin children and families.</li> <li>Send appointment for next CAC Meeting on January 17, 2024, to members.</li> </ul>	