

Family-driven Leadership Team Meeting  
May 14, 2009  
4pm  
Monticello CMMHC

Those present: Tara Freed, Christine Schmid, Michelle Ulfers, Bill Affeldt, Fartun Hussien, Doug Henning (via conf. call); Julie Martindale; Walter Bardell; Linda Larson

1. Team members: This team includes everyone in attendance plus Ivan Antonio and Mayuli Bales.
2. Team mission/purpose: Tara and Bill discussed the initial purpose of the team – as planned during the developed of the Family-driven Training with Trina. They said that this team was developed to continue driving family-driven practice and philosophy in the community – through ongoing education, training, development of a workplan, evaluation, monitor and mentor training teams, etc.
3. Team status: The committee went through the training team and reviewed their progress. 6 of the 8 training teams have met or have a set date to meet. Many have their 1<sup>st</sup> training date set. 2 of the training teams were unaccounted for (meaning, Tara hasn't received info from them).
  - a. Bill Affeldt's team (Team A) will present on June 9 – 1 hour dialogue on FD practice, then dialogue with providers on developing a list of actions/practices/behaviors that represent fd care.
  - b. Chris wanted to make sure that everyone knows the Family Support Specialists are there to help the other parents on the team, not act as main presenters.
4. Specific behaviors/activities/practices that represent or demonstrate family-driven care
  - a. Each training team should do this, plus each member of this team should ask 3 parents what they think FD care should look like. Tara will be the main point of contact for this. She will create a form that will show what skills, practices, behaviors, language and environments represent FD care. Some of the ideas:
    - i. Present intention – being very deliberate
    - ii. Positive recognition of the family for taking the step of being there.
    - iii. To state the diagnosis, having the providers tell the truth and be vulnerable.
    - iv. To eliminate the use of “unmotivated or resistant”. (language impacts behavior)
5. Evaluation: An evaluation was discussed, something that could measure the success of Family-driven care and practice.
  - a. Suggestion: a survey that established a list of desired behaviors that define “family-driven care”.
  - b. No need to ‘reinvent the wheel’ as to defining the current status of care, but to list specific desired behaviors/practices that would define family-driven care.
  - c. A suggestion of obtaining this list from the clients and their families.
  - d. Further discussion of a research project and the National significance of such a research project.

Next meeting: June 1, 2009 – 4pm – Monticello CMMHC (Fartun will chair)

