#### Theme Clusters from SAC Retreat 9/12/14

## Care Coordination - geographic differences

existing funding issues need utilization data early intervention buildi

early intervention building capacity (need to have service system in place)

## Providers - need for different approaches

financing services to encourage partnerships reluctant partners, \$\$\$ driven 360 degree survey of relationships with providers customer feedback workforce development issues

#### DCF - safe time with DCF

contradictions with mission & funding

system design issues - short service & late intervention

lots of \$\$\$ going to New Haven

needs to guide the RACs on what it needs help with

needs to hear from the community of perceived needs

continuation of data, initiatives, clear communication around strategies and any gaps that exist

provide information

looks for guidance from RAC

need to bring 10 Performance Expectations to outside

staff shifts are problematic in building relationships

geography - less resources highlighted in report that three regions get less \$\$\$ allocated

change in DCF management every 4 to 6 years hard to manage change

because it changes momentum - must herald this in legislature maximize impact

# SAC - accept receipt of RAC recommendations & put on list

continue to voice what RACs need to bring back

where do RACs interact with SAC in recommendation process?

provide direction on need

provide feedback

tough question of connection of RAC to SAC

visits to RACs

disconnect SAC representation holes

questions to RAC - conduct statewide survey (snapshots)

appointments not going through

utilization of RAC-SAC-Legislature - funding around mental health initiative - look

at this legislative session as opportunity to champion the cause

maximize impact

RAC - what happens to recommendations that the RAC makes

clarify process re: recommendations, how does it get back to region

Reg. #5 - disconnect with SAC, RAC struggle with 4 sub-committees focusing on specific issues, but how does that relate to the SAC advisory (Foster Care,

Mental Health, Staff Knowledge, Education

Reg. #5 - get a lot from DCF support, direction, structure & coordination

Reg. 4 - restructuring of RAC has concluded

clarify RAC/SAC relationship

Reg. #2 - Two offices - one city/14 towns

needs more family representation

information flow, DCF/RAC/families

used as forums for providers to understand such things as RBA/Racial Justice that drives DCF

bring state level into to RAC meetings, room on agenda to bring in presenter every other meeting, OEC, Raise the Grade

RACS can help share the higher level program development information and policy change with the most amount of providers in the region. maximize impact

<u>CONNECT</u> - Reg. #3 - great representation of community/great energy

<u>13-178</u> 13-178 - CONNECT-energy

relationship with CONNECT grant - with integrated network of care & RAC role

<u>Families</u> - family conversations with difficult issues affect of 13-178

representation on SAC/RAC