

**Medina County Family First Council  
Planning Committee Meeting  
Tuesday, March 24, 2009**

**Attending:** Lynne Castele, Vincent DeGeorge, Diane Dockrill, Debbra Grace, Julie King, Jan Manes, Christine Ruf, Nick Solar, Phillip Titterington and Brad Williams

**Guest:** Don Hartman

Nick Solar welcomed everyone and called the meeting to order at 7:50 a.m. Phillip Titterington made a motion to approve the minutes from February 24, 2009. Jan Manes seconded. The motion passed.

**1. Recap of the First Lady's Family and Children First Council Regional Forum**

Vincent DeGeorge, Debbra Grace, Christine Ruf, Nick Solar, Randy Stepp and Sharon Tahajod attended the First Lady's Regional Forum on March 4, 2009. Nick Solar noted that the Forum was very confusing in that 60 out of 88 counties reported the number one priority was flexible funding, yet there is no flexible funding. The First Lady's key issue is that she is listening to Family First Council's concerns. Sharon Tahajod provided an excellent presentation about her family's situation, in that early intervention was the key. Vincent DeGeorge noted that there is uncertainty on a majority of the issues presented by the First Lady.

Discussion from the visit included:

- Five counties were represented at the Forum.
- Deputy Directors were with the First Lady at the Forum.
- The Governor's budget must be passed through the House and the Senate.
- Initiatives were discussed on what is expected by Councils across the state.
- Decreased funding for HMG.
- TANF and GRF funding.
- HMG staying under the local administration of Council.
- Possibly tap into Medicaid dollars to offset the decreased funding.
- Weekly HMG teleconferences are being held.
- Early Childhood will be under the auspices of the Department of Education.
- "Access to Better Care" is now "Systems of Care."
- Council must do this pursuant to the Ohio Revised Code.
- Be involved in the system of care by collaborating with other agencies.
- Intensive home components.
- FAST funding will flow through Council and will not have to have a mental health diagnosis.
- Increased school involvement.
- Proposing a person in every school building to get families involved with Systems of Care.
- A Family Engagement position, comparable to Ken Bender and the CareTeams.
- Help in getting people the assistance they need.
- Ratio of 1:500 in the lower grades and 1:900 in the higher grades.
- State would pay for these positions but it would be under the auspices of FFC.
- Who would hire the individuals in these positions?
- What funds would be used to hire the people in these positions?
- What would the sustainability portion be?
- Can FFC's do what they are supposed to do in statute?
- Vincent DeGeorge has been selected to participate in dialogue with transition issues. He is one of ten individuals around the state asked to participate.
- Counties spoke up on what is working and what is expected in the future.
- Budget issues.
- Collaboration issues.
- Integration issues.
- Initiatives.
- What happens if we cannot do the initiatives or will not do the initiatives?

**2. Senior Focus**

Nick Solar reiterated that Sandy Calvert attended the last Planning Committee meeting and requested administrative assistance with Senior Focus. The issue was brought forth to the Administrative Committee. Consensus from the Administrative Committee is to allow Jayme McCourt to assist Sandy Calvert and Senior Focus. Sandy has received positive feedback from Senior Focus on this decision.

Vince DeGeorge noted that he is looking at the senior issues, priorities and the PfS Light Logic Model Process. Sandy is amicable to Council not expending financial support at this time. There is information circulating at the state level about our Council's commitment to life span.

### **3. Wellness Committee Request for Teen Pregnancy Prevention Funds**

Diane Dockrill announced the Wellness Committee is advocating for funds for teen pregnancy prevention. Teen pregnancy is rising at the national level. Since the County Commissioners cannot fund the programs, the Wellness Committee came to consensus to request financial support from our carryover balance. The funds would allow Council to support the CareTeams from the PfS process and continue some teen pregnancy prevention programs. The Wellness Committee will meet on April 3, 2009 and officially make the request to the Administrative Committee on April 21, 2009. Vince DeGeorge distributed the Program Budget Request (copy attached to original minutes). Vince reviewed some of the carryover funds from the last eleven years. Some of the carryover funds are from grants and programs. Research indicates teen pregnancy rates increased over the last two years. Vince has been investigating funding for teen pregnancy, without success. The Wellness Committee is notifying the Planning Committee that they are making the request to the Administrative Committee.

Questions and answers:

**Question:** Is this CareTeam funding?

**Answer:** Yes and after school funding. This would be the only funding to the CareTeams plus the current funding from the Commissioners.

**Question:** Are the program recipients using outcome measurements?

**Answer:** Catholic Charities programs administer pre- and post-testing and adhere to their objectives by following the PfS process. All data is recorded on a quarterly basis and has been incorporated into the Wellness Surveys. We no longer have funding for the standardized county wide evaluation. Catholic Charities is not just abstinence based teachings. It is sex education by making the right choices. They go into entire classrooms at the middle school and high school levels to teach this and no one is singled out or left out. All students need this information on prevention and not just at-risk kids. If they are given a choice, then it delays the onset of sexual intercourse. They make better choices concerning safe sex practices. Each year the students need to get the same information.

**Question:** Where would the money go? Make it clear where the money goes.

**Answer:** The funding currently goes the CareTeams, Catholic Charities and Edwards Middle School. Decisions made on where to fund based on needs that have been conducted via the PfS process and how to get the biggest bang for the few dollars allocated.

**Question:** Would this start on July 1, 2009?

**Answer:** There is no set time frame on the funds.

**Question:** What is the average number of youth affected by the programs?

**Answer:** Edwards Middle School 40. Catholic Charities 1,000. CareTeam in Wadsworth 35. CareTeam in Medina less than 30 per school (approximately 90). Lodi and Union Square 0.

**Question:** What is the total goal for the CareTeams?

**Answer:** The target number is 30 to 35 for Wadsworth. Medina's sustainability group has not met, so figures cannot be projected. There are CFIT people in the schools but CFIT is in a state of transition.

**Question:** What is expected and what is being requested?

**Answer:** Mentoring is a possibility. Katie Castele was the exception in the program as she made it workable. At that time there was no reimbursement for gas, cell phone, housing or support and there is no way to do this now. The Juvenile Justice Stimulus Plan and the creation of new jobs could be a possibility.

**Question:** What resources can be brought to the table to do this? Can we make a recommendation to mobilize the community to partner with some of these initiatives? Perhaps partner agencies? \$12,000 to \$25,000 does not continue a sustainable program. They should be much higher to accomplish change.

**Answer:** Planned Parenthood provides some services at Union Square even though they were not funded by Council. There is no continuum of care. We are funding Planned Parenthood and 50% of the kids tested had sexually transmitted diseases.

**Question:** What did the Wellness Survey cost?

**Answer:** \$2,500. The Wellness Committee worked hard at getting that rate and unfortunately was not able to retain that rate.

**Question:** Can you hire an expert? For \$12,000 you could have a symposium of teachers, parents and kids.

**Answer:** Catholic Charities does this now by inviting the community and parents.

## **Discussion included:**

- Change of behavior
- Target 10 to 12 girls at Union square and focus on those kids
- Not against the programs
- Looking at 2013 and sustaining 30 kids
- Planning for the future
- Lifespan approach
- Water down the programs
- Costly
- Have to look at areas where our resources take us
- Working in our silos
- Prior training and county wide training systemic level to the whole county when we had the funding
- County wide initiatives
- School linkages
- Gazette was involved in recognizing these accomplishments
- Had continuum of care
- Will not fund abstinence only programs
- Come together and share results
- Population in our county grew from 123,000 to 173,000
- 136 pregnancies in 2003 down to 85 last year
- Our population has increased but pregnancy rates reduced
- Need to be more focused
- Need to have continuum of care
- Appropriate to the developmental stage of growth

Diane Dockrill thanked everyone for their input and she will take the information to the Wellness Committee for completion of the formalized request.

### **4. Youth Advisory Consortium (YAC)**

Jan Manes distributed the Youth Advisory Consortium proposed mission statement (copy attached to original minutes). YAC is working in conjunction with the mission statement of Medina County Family First Council. YAC is looking to the Planning Committee for support of this mission statement. YAC would add this to their brochure. The term "adolescence" is a very vague and the Health Department's structure needs the age to be 21. The Planning Committee supports the statement but would prefer it be a "purpose" rather than a "mission." The statement is succinct for all of the organizations that are represented.

### **5. Mid-CAT**

Christine Ruf distributed a recap from June 26, 2008 to present, Self-sufficiency Continuum and Ratings, Logic Model and a spreadsheet on Needs and Resources (copy attached to original minutes). The group looked at services needed and the goals of the Mid-CAT group. They compiled a logic model and identified the strategies, goals, risk assessment tools, pre- and post-test to evaluate the needs, referral, criteria for referral and identified the three systems to be referred. Three incidents of first responders would override the three systems. They identified agencies that would need to be on Mid-CAT that would be most impacted. Those agencies provided a name of a person to be on Mid-CAT and are listed in the recap. At this time Christine Ruf is devoting about four hours a month to Mid-CAT and will continue as the facilitator until June 30, 2009. At that time they will look at the process, reanalyze the role and see if someone can take over as facilitator. The new participants will be at the next meeting and they will look at the forms from Senior ICAT and Youth ICAT and establish Mid-CAT's own forms. After that they will look at how it will work. Chris reiterated that the mid level is difficult to serve. By bringing the agencies to the table we can come together with a plan and provide the same message to the individuals.

Nick Solar noted that Mid-CAT is a good pilot program that is working without funding. This took over a year of involvement to get to this point. All the ICAT's are working well, Youth, Senior and Housing. When Mid-CAT gets fully functional it would eliminate the need for Housing ICAT.

### **6. Adjournment**

Debra Grace made a motion to adjourn. Phillip Titterington seconded. The motion passed. The meeting adjourned at 9:00 a.m.

Respectfully submitted by,  
Jayme McCourt