Northeast Florida Heath and Transition Services Coalition Meeting  
Thursday, September, 25, 2014, 11am-12:30pm  
UF Health Learning Resource Center, 1st Floor Elm Room

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<th>Attendants:</th>
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<td>Sheila Broderick, Anne Wilson, Sherri Henderson, Trey Henderson, Aubrey Greenwell, Sharon DeBriere Vista, Terry DeBriere Vista, Pamela Bowers, Pablo Saldana, Cristin Picciano, Erin Pfeffer, RayKay Santa, Laura Edmunds, Charlotte Temple, Sherry Buchanan, David West, Chanda Jones, Dr. Diana Mercado, Rebecca Feyerick, Carol Fulton, Dr. Rita Nathawad, Dr. David Wood, Janet Hess (via phone)</td>
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Welcome/Opening

- Dr. David Wood thanked everyone for coming and mentioned of his departure of the UF and NEFL HATS Coalition and made introductions of the key personnel that will fulfill the duties of administering the JaxHATS program and NEFL HATS Coalition, Dr. Rita Nathawad, Chanda Jones, ARNP Carol Fulton and interim Medical Director, Dr. Jeff Goldhagen.
- Dr. Rita Nathawad thanked Dr. Wood for his enormous contributions to JaxHATS and FLHATS and the great work he had started for healthcare transition in the NE FL area. Dr. Nathawad welcomed all participants and asked that everyone to give brief introduction of themselves.

Review of Agenda

- Rita Nathawad read the agenda for today’s meeting also stating that she hopes we can address most of the topics at hand.

Past Minutes

- Dr. Nathawad mentioned that because of shortness time it if everyone would take time to read past minutes at their leisure as some of the same items would be mentioned on the current agenda for today’s meeting. An email will be distributed to request minutes’ approval.

Action Plan

1. Strategic/ Action Plan
   a. Dr. Nathawad began to do give a brief overview about the goals of the plan with focusing on accomplishing attainable outcomes.
2. Forming a ongoing position of marketing and knowledge to expose the Coalition to the area community:
   a. Transition website that will offer CME credits and introduce new staff to the medical portion of transition offering well organized and knowledge based modules.
   b. Think of resources available/weblinks from other organizations/interdisciplinary within the community to add to the Coalition website to offer support and knowledge.
3. How are we (JaxHATS) doing?
   a. Focus on being patient and family orientated.
   b. Explore patient youth advisory board to get a better understanding of the needs and hear the voice of our patients.
   c. Maybe nominate youth of other organizations to help with launching and leading the youth-peered groups.
4. 1.4- Ways we can better connect with other organizations in the community to bridge the gap of medicine and education transition:
   a. RayKay Santa is a part of School Health Advisory Council for Duval County School District.
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| There is a subcommittee that focuses on the health matters for youth in schools and she would like to introduce Dr. Nathawad to the committee.  
b. Laura Edmunds, with Alden Road School for ESE mentioned that giving information Project ID to distribute.  
c. Dr. Nathawad asked Janet Hess on the completion of health care transition education training for educators. At this time Ms. Hess stated it has not been completed, but in the interim to use the FLHATS toolkit, which offer a vast of resources for educators.  
d. Sharon with the ARC of Jacksonville shared that the medical piece is a major need and that is something the ARC is trying to address with a medical meet and greet with organization. She will get more details for the upcoming meeting to share for the group.  
e. Pablo Saldana, with Nemours mentioned that UF colleagues Jenne Repetto,PhD and Susan Horky, LCSW offer a webinar about education in healthcare transition. These are collaborated classes for medical and educational interdisciplinary groups looking to broadening their career with integrated aspect of the medical and educational transition studies.  
f. Sharon Henderson, parent and VP of Henderson Haven gave way to parents don’t always look for the information about transition, because they may not know what to look for. She believes that this information should be a part of included training for teachers. She suggested that maybe a representative should bring this to the attention of the local universities and colleges (UNF and FSCJ).  
g. Laura Edmunds stated health wasn’t a prior focus for Duval County Schools, until now and they are starting to look at this and implementing curriculum.  
h. Sherry Buchman with CMS shifted the conversation to state lack of transition education is not just solely a issue for ID/DD population, but also for youth/caregivers caring for youth with severe medically chronic diseases and this population needs advocacy as well.  
i. Dr. Nathawad asked how we can as this coalition transition with an even more robust medical and educational approach so it will not always be at that crisis moment, but a preventive measure and start early to well inform youth, parents and community. Janet Hess mentioned using FL HATS HCT education materials geared toward middle/high school students for marketing and education- which she can provide upon request.  |
|   |   |
| 5. What strategies can we use to be more involved with sub-strategies?  
6. North East Florida Medical Legal Partnership:  
a. Rebecca Feyerick, JALA gave a brief description of the NEFLMLP. She explained that a group of local lawyers offer pro-bono services to referred clients from medical facilities or organizations that need assistance financially with law services such: guardianship, power of attorney, disability rights, immigration, SSI/SS applications/denials and custody issues. Her focus is to train more healthcare personnel about their services to focus to improve more social determination in healthcare.  
b. Charlotte Temple, ARC asked in regards to completing guardianship forms could NEFLMLP assist with teaching a staff of a community organization or if another volunteer lawyer could introduce Dr. Rita Nathawad to the Duval County Subcommittee  |
|   |   |
| 5a.-Email NEFLMLP referral form for the group to use. |   |
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<td>can offer a legal clinic for parents and caregivers? Rebecca stated that a lot of problems could arise while completing guardianship forms. She recommends filling them out on a one on one basis (lawyer/trained personnel with client). A legal clinic for power of attorney application would be more attainable compared to guardianship. Rebecca stated that it could be done, but to note again of problems and longer to address each individual situation. Anne Wilson, UF CARD suggested maybe taken the approach of REAL Sense tax services for the legal form completion. Also it was suggested that at these meetings not to forget those that are deaf or Spanish speaking.</td>
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| 7. | CMS and Coalition creating a stronger alliance:  
   a. Sherry Buchman informed that Cassandra Paisley, Nurse/Lawyer and new CMS Leader in Tallahassee sounds very committed to this area for advancement.  
   b. Dr. Wood mentioned it would be very helpful to have a CMS in-service for the new JaxHATS team to go over modules for better clarification and overview of the program.  
   c. Janet Hess mentioned she and others are trying to implement a required training module that would work best systematically for healthcare transition in medical settings. |

| Closing | Janet Hess shared with the NEFL HATS Coalition the USF Coalition recently proposed strategies and objectives to help with awareness with the following:  
1. Coalition take the message to other coalitions, organizations, community collaborative groups and make them aware of healthcare transition and as part of integration to include healthcare transition as a action plan into their groups. |

| Next Meeting Date: | Tuesday, November 18, 2014 at 5:30pm. Place to be determined. Email notification from Chanda Jones |
| Tentative Future Meeting Dates: |  
   - February 17, 2015 at 5:30pm. Place to be determined. Ratify at next meeting  
   - May 19, 2015 at 5:30pm. Place to be determined. |

| Meeting Adjourned: | Dr. Rita Nathawad |