

South Florida HATS Strategic Planning Meeting
Agenda 5-9-14
1pm-3pm

In attendance: Carmen Rodriguez, Children's Medical Services; Claudia Leary, Dade Schools, Jill Brookner, Dade Schools; Daniela Campos, Epilepsy Foundation of Florida; Dr. Lanetta Jordan, Foundation for Sickle Cell Disease Research; Lisa Friedman-Chavez, Project 10: Transition Education Network; Dr. Stefanie Brown, Residency Program at Jackson Memorial

1. Introduction

- a. JRE Lee Educational Center Culinary students provided HATS participants with an overview of their program and their baking skills, along with delicious baked goods! (THANK YOU!!)
- b. Dr. Stephanie Brown- Dr. Brown discussed the Med-Peds program at UM and how a Med-Peds physician is strategically placed to assist patients in their transition from pediatric to adult care. Dr. Brown discussed the difficult for pediatric physicians to work with children who are developing historically adult diseases – such as diabetes, as well as the challenges faced by adult care providers working with youth and young adults with complex medical needs that are traditionally considered pediatric illnesses. Dr. Brown's full presentation is attached.
- c. Introductions & announcements
 - i. The group took time to introduce themselves and provide information regarding other taskforces and coalitions they work with, that work on similar topics. The agencies discussed were:
 1. Miami-Dade Transition Taskforce
 2. Broward interagency Coalition
 3. Special Needs advisory coalition SNACK
 - a. Work groups within this group include: transition to independence for youth 16-22; TWEEN for middle school students
 4. Children's Services Coalition of Broward (CSC provides stipends for individuals with unpaid internships.
 5. School Medical Health Advisory Counsel
 6. State Secondary Transition Commission(SSTIC)
 7. Mailmen Center Consumer Advisory Panel
 8. Developmental Disability Counsel
 9. Gift Conference
 10. American Academy of Developmental medicine and dentistry (program has 12 CE webinars)

2. Strategic Prioritization

- a. To be strategic means to be planned, calculated and look at what way someone can be most advantageous in this moment
- b. The group reviewed the barriers and opportunities from our visioning meeting, the strengths and themes discussed in our second meeting and the forces of change discussed in our third meeting to formulate strategic priorities.

- c. In small groups, the following strategic priorities were identified and written in the form of a question:
- i. How to educate and increase providers for medically complex individuals?
 - ii. Is there a health transition checklist that could be made into an app to link to available resources and providers?
 - iii. How to empower youth and young adults to actively get them involved with health care transition activities?
 - iv. How to increase access to electronic resources including: websites, apps, social media, etc?
 - v. How do we reach more patients, families, health care providers involved to advocate to and educate them- and have them become advocates themselves?
 - vi. How do we better link patients and families with adult services including medical, housing, career, vocational, education, and financial services?
 - vii. Who are the adult care providers we can rely on?
 - viii. How can patients and parents become more involved in co-management of the patient's health care transition?
 - ix. How can we bring more awareness to the political platform?
 - x. How to increase and develop access to electronic resources?
 - xi. Increase education to create more advocates amongst providers, young adults and families?
- d. These Priorities were then discussed and consolidated where possible. The group also discussed the immediacy of each priority. Below is a chart outlining that discussion

Strategic Priority	Immediate or Future Action	Consequences/ other discussion
How do we better patients and families with adult services including housing, career, vocational, education, and financial services?	Immediate	If there are no resources for patients, where do they transition too?
How to increase access to electronic resources including: websites, apps, social media, etc?	Immediate	Resources exist, but not all patients have Individualized plan through school
How do we increase / find adult care providers to refer people to?	Immediate	
How can we bring more awareness to the political platform?	Future	There are other taskforces working on this, we do not have to take the lead
How do we empower families to be involved and act as co-management in their care	Immediate	
How can we increase education to create more advocates amongst providers, families, and youth and young adults?	Immediate	

- e. PEACH Process (Popular Empirical Assessment of Community Health)
 - i. Each participant imagined that they had \$100 to spend on the above priorities and could allocate that \$100 as they saw fit.
 - ii. The breakdown, from most allocated 'funds' to least were:
 1. How to increase education to create more advocates among youth, young adults, families and providers? (\$215)
 2. How do we increase / find adult care providers to refer people to? (\$175)
 3. How to increase and develop access to electronic resources (\$110)
 4. How to empower families and youth to be involved and act as co-management (\$100)
 5. How do we better patients and families with adult services including housing, career, vocational, education, and financial services? (\$80)
 6. How can we bring more awareness to the political platform (\$20)
- 3. Goals & Objectives
 - i. During our June 5th meeting, the group will look at the top 4 priorities and develop goals and objectives
- 4. Wrap up
 - a. FINAL session on June 5th
 - i. Goals and Objectives
 - ii. ACTION PLAN
 - iii. How this group will move forward
 - b. The group changed the time to 1pm to accommodate a graduation taking place at the JRE Lee Educational Center (CONGRATULATIONS to their students!)
 - c. PLEASE ARRIVE READY TO START ON TIME on June 5th
 - d. This final meeting will be available online and in person. If you can make it in person, please do so- as this will be a trial run for the blended technology.
 - i. In order to combine the conversations between participants, both in person and online, PLEASE RSVP to the invitation that will be sent out.
 - ii. If you would like to participate online, please let me know, I will provide you with a link and conference call information