



January Prevention Workgroup Meeting Agenda

January 15th, 2025

3:00-4:00PM

ZOOM

1. Welcome and Introductions
2. TCB Administrative Updates
3. Draft 2026 Workplan Discussion

Prevention Workgroup Meeting
January 15th, 2026
3:00 PM – 4:30 PM
Zoom

TCB January Prevention Monthly Meeting Summary

Attendees

Kris Robles

Katie Rudek

Sarah Lehberger

Sarju Shah

Pam Mautte

Lorna Thomas-Farquharson

Emuna Patterson

Adrianna Ramirez

Darcy Lowell

Ingrid Gillespie

TYJI Staff

Emily Bohmbach

Abbie Stoll

Agenda:

❖ TCB Administrative Updates

- TCB and Workgroup Updates

❖ Draft 2026 Workplan

Meeting summary:

1. TCB Administrative Updates

- a. The TCB Senior Project Manager shared updates from the January meeting, including a preview of potential 2026 legislative recommendations and a presentation to the Commission on Women, Children, Seniors, Equity, and Opportunity on disordered eating recommendations. The next monthly meeting will be held on February 11th and streamed on TYJI's YouTube channel and CTN. Upcoming meeting dates for the System Infrastructure, School-Based, and Services workgroups were also reviewed with the workgroup.

2. Draft 2026 Workplan

- a. The TCB Senior Project Manager introduced the draft 2026 Workplan, noting that feedback and ideas from the prior meeting were incorporated in blue text, while previously identified priorities in red were highlighted for further discussion. Members were reminded that the document remains a working draft and were encouraged to provide input either during the meeting, or following.
 - i. The group discussed clarifying the age range referenced in the work plan, acknowledging inconsistencies across systems, such as statutory definitions, insurance coverage through age 26, and special education eligibility through age 22. Members suggested aligning language to ensure clarity and consistency across TCB efforts. In addition, participants recommended explicitly incorporating equity, innovation, and policy into

the purpose statement to reinforce a commitment to advancing equitable outcomes and addressing disparities affecting children and families.

- b. A recurring theme was the central role of caregivers. Members emphasized that serving children requires treating families as essential partners in prevention, treatment, and recovery. The discussion highlighted the need to incorporate language around family readiness, community readiness, and individualized approaches that meet families where they are. Participants stressed the importance of addressing social drivers of health, trauma exposure, housing and food insecurity, and caregiver well-being as foundational to child outcomes, and of shifting from prescriptive, one-size-fits-all approaches to collaborative, strengths-based engagement that supports incremental progress and empowerment.
3. The Handle with Care model was discussed as a promising strategy to strengthen trauma-informed coordination between law enforcement and schools. Members discussed opportunities to expand implementation statewide and integrate related efforts, such as Drug-Endangered Children protocols, community-based follow-up supports, and therapeutic responses for very young children exposed to trauma. Additional cross-sector models, including social worker-police partnerships and community canvassing initiatives, were noted as examples that could inform the work plan.
 - a. In reviewing short- and medium-term goals, the group discussed expanding evidence-based classroom strategies to include preschool settings and parenting interventions explicitly. Participants also proposed incorporating healthy relationship education and intimate partner violence prevention for adolescents, recognizing the mental health implications of early exposure to unhealthy relationships. Members affirmed the importance of maintaining and strengthening priorities, including early screening, embedded prevention strategies, and addressing service access gaps identified in prior work.
4. The group further explored opportunities to monitor and potentially inform relevant legislation during the shorter legislative session. While acknowledging that formal engagement may require leadership guidance, members expressed interest in tracking prevention-related bills, particularly those related to early childhood, substance use, and cannabis policy, and identifying opportunities to strengthen alignment with the workgroup's priorities. Legislative updates will continue to be shared, and additional clarification will be sought regarding the group's role in providing feedback or recommending language.
- 5. Next Steps**
 - a. The draft Work Plan will be circulated for written feedback and revised before presentation to TCB leadership. Members will also consider adjustments to the 2026 meeting cadence, including the option of alternating workgroup meetings with smaller task-focused sessions. The meeting concluded with a reaffirmed commitment to a prevention-focused, family-centered, and cross-sector approach that advances early relational health, equity, and improved outcomes for Connecticut's children and youth.

The next workgroup meeting will be on **Thursday, February 18th at 3:00 PM on Zoom**

DRAFT PREVENTION ANNUAL WORKGROUP WORKPLAN 2026:

Workgroup Co Chairs: Ingrid Gillespie, Director of Prevention, Liberation Programs Inc & Pamela Mautte, Director, Alliance for Prevention & Wellness Program of BH Healthcare

Draft Purpose Statement: The Prevention Workgroup of the Transforming Children’s Behavioral Health Policy and Planning Committee (TCB) is committed to strengthening children’s behavioral health prevention services and programming. We collaborate to identify challenges, examine solutions, and provide advisory recommendations to enhance prevention efforts statewide.

Priorities:

- Preventing substance use and overdose by promoting evidence-based strategies and addressing emerging trends.
- Evaluating how to expand access to suicide prevention and behavioral health services to facilitate early intervention and reduce crises.
- Promoting resilience and emotional well-being through education, community engagement, and policy advocacy.
- Integrating behavioral and physical health care to create a more cohesive, accessible, and effective support system.
- Embedding brief screenings in healthcare, schools, and community programs to improve early identification, build social-emotional learning (SEL) skills, reinforce positive choices, and connect individuals to appropriate supports.

Short Term Workgroup Goals:

- Identify meeting schedule, frequency of meetings, and meeting presentations with the workgroup
- Identify and finalize workgroup priorities with feedback from the workgroup
- Establish/Maintain a Workgroup Foundation
 - Set terms of engagement and community engagement for the workgroup to set the tone and operationalize how we engage
 - Create space for workgroup members to share their personal priorities, biases, or special interests that bring them to the workgroup, connect, feel a sense of belonging and discuss how that intersects with the priorities of the workgroup
 - Compile, discuss and share initial definitions important for active participation (defining primary, secondary, tertiary prevention)
 - Level-set with the workgroup with an overview of progression or lack of prevention efforts across the State

Medium Term Workgroup Goals (2026):

- Create an inventory of services and programs in the state for ages 0-5, to evaluate what services are in place and identify any gaps and barriers in services

- o Utilize information gathered in both the CT Children’s Behavioral Health Survey once complete to further assess needs and gaps for the early childhood age group
- o Collaborate with the Office of Legislative Research, to create a cross walk of existing services in the state for ages 0-5
 - Utilize the workgroup’s Prevention Report Card to score services identified in both the CT Children’s Behavioral Health Survey, as well as the crosswalk on existing services, by further assessing how services address risk and protective factors at the individual, family, and community levels, particularly to better identify gaps at the community level.
 - From the Report Card, identify gaps to inform potential legislative recommendations.
- Explore evidence-informed, classroom-based strategies that may complement existing approaches for pre-school to high school age students.
 - o The workgroup will have various presentations to further evaluate services for this age group and expand the report card to evaluate, identify and measure protective factors and strengths.
 - o Evaluate innovative approaches to prevention, such as an evaluation of current apps, and programs, to further see the impact these programs have, what resources they provide, and evaluate what works and what does not, by overall looking at protective factors of services and programs.
- Investigate resources, services, and vocational supports for transition age youth (18-26) and identify any gaps and barriers to services.
- Assess data collection methods for prevention services data in the State
 - o Map out various data collection methods in a crosswalk
 - o Identify best practices, best data collection methodologies for reporting, and identify barriers and gaps in data reporting
 - o Create a report card for CT- what data are we lacking, what needs to be improved?
- Narrow in on the substance use data results from the services array survey and build opportunities for collaboration with DCF and OSAC and other key partners to develop policy and service recommendations.
- Develop a set of 2027 draft recommendations with the workgroup and present recommendations to the TCB committee in fall of 2026
 - o TCB leadership will review drafts and provide feedback
 - o Draft Workgroup recommendations will be presented at the October TCB Meeting

**The workgroup may not develop a set of recommendations for the 2027 legislative session, depending on priorities, and progress within the group. If the group does come up with a set of recommendations, the recommendations may not be included in the 2026 legislative package depending on committee and leadership feedback*

Long-Term Workgroup Goals (2026-2028):

*Other priority areas and strategies identified in the strategic plan will be added to the workplan annually

- Utilize the results of the services array to build sustainable recommendations and priorities in 2026, 2027, and in subsequent years.
- Utilize information from the workgroup to plan for 2027, 2028, and in subsequent years.

Meeting Schedule: Prevention Workgroups reoccur on the third Thursday of the month from 3:00-4:30 PM. All meetings will be virtual. Meeting agendas and the zoom link will be sent out prior to the meeting each month.

Prevention Workgroup Operational and Engagement Rules

1. Membership & Roles

Workgroup Composition

- Members will include representatives from key stakeholders such as legislators, state agencies, school administrators, educators, mental health professionals, parents, students, and advocacy organizations.
- Participation is voluntary, but active engagement is expected.
- Additional members may be invited based on expertise and workgroup needs.

Roles & Responsibilities

- **Chair/Co-Chairs:** Lead meetings, set agendas, facilitate discussions, and ensure accountability.
- **Members:** Provide expertise, review policy proposals, participate in discussions, and contribute to assigned tasks.
- **TYJI Staff:** Handle scheduling, documentation, and logistical support.

2. Meeting Structure & Procedures

Frequency & Scheduling

- Meetings will be held at least once a month, with additional sessions scheduled as needed.
 - School-Based Workgroups are set to begin **April 7th, 2025**, and reoccur on the **first Monday of the month** from **3:00-4:30 PM**. All meetings will be virtual. Meeting agendas and the Zoom link will be sent out before the meeting, each month.
- Meetings may take place in person or virtually to accommodate accessibility.

Agenda & Documentation

- Agendas will be shared prior to each meeting to allow for preparation.
- Meeting minutes will be documented and distributed within one week following each meeting.
- Action items and follow-ups will be tracked to ensure accountability.

3. Decision-Making Process

Consensus-Based Approach

- The workgroup will prioritize consensus in policy recommendations and decisions.
- If consensus cannot be reached, differing viewpoints will be documented.

4. Confidentiality

- As participants, we will respect the confidentiality of all discussions and information shared during the meeting. We will not disclose any sensitive or personal information outside of the meeting without explicit consent.

5. Respectful communication

- We will treat each other with respect and courtesy. We will use inclusive language and avoid any form of discrimination, bullying, or harassment. We will express disagreements constructively and respectfully.

6. Accountability

- We will take personal responsibility for our actions and commitments. We will follow through on agreed-upon tasks and deadlines. Should any of us be unable to fulfill a commitment, we will communicate openly and promptly to find a solution or reassign the task.

7. Meeting Conduct & Logistics

- Mute microphones when not speaking (for virtual meetings) and use chat features professionally.
- Follow the meeting agenda while allowing flexibility for emergent topics as needed.
- Submit agenda items in advance when possible to ensure efficient discussions.