

Summary Comments – ITC Planning Retreat (6/10)

What – Content	How to provide	Who - Providers	Who - SCs	Who - LSMs
Social/emotional IMH	-Offer webinars and real time help	X	X	X
	-Establish and support peer mentoring/veteran providers	X		
	-Incorporate a module on social and emotional well being in early/ongoing training	X		
	-Connect professional networks via the internet and regional groups		X	
	- Offer real time access to expertise and training content		X	
Invite and collaborate with local resources knowledgeable about infant mental health	-Resource and referral to identify (for use by Michigan licensure model) -Link with communities	X		
Behavior and parenting strategies		X		
Assistive Technology	-Online modules with video -Professional networks/listserv *local and statewide *problem solve *Voluntary *real-time	X	X	
Writing Effective IFSPs	-Online module with examples of case studies		X	
Writing Effective Outcomes		X		
Know about community resources and childcare providers			X	
Community Practice - Peer mentoring with veteran providers	-Discussion threads with moderator -Mentoring in regions by topic		X	

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Building Learning Communities	-Cross-professional pre/in/cross sector -Locally, Regionally, Virginia, National		X	
DATA	-Understanding and using trends and changes			X
Practical Skills for Job	-tracking data and QMR for Medicaid -How to use forms			X
New Provider Orientation	-How to: *individuals *agencies			X
TCM	-How to: -Monitoring -DMAS Webinars		X	X
Specific Characteristics				
Leadership management	-responsibilities to Part C			X
Strengthen relationship between Part C staff and logical system managers	-Regional meetings			X
Technology training (build capacity)	-Pay attention to technology SNAFUs; providers may need tutorials -Use portal -Post webinar content so that folks can access later -Use list-serv to answer questions about TCM -Develop FAQs by DMAS -Ask the expert			X
All Things Fiscal	-Monitoring -Budget planning -Reporting			X
Stress Management (overwhelmed too much)	-Listen and work together (Part C and LSMs) -Guided conversation -change the situation			X

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Leading by the promotion of balance (within process)	<ul style="list-style-type: none"> -Recognition of work -Integration of elephant, rider and path 			X
Avoid EI jail	<ul style="list-style-type: none"> -Use framework of SWITCH to offer guidance, get support as needed, coaching -Bigger, stronger, kinder wise -When necessary, take charge; otherwise default to following your needs -Use technology -Be very specific with tasks and directions -Avoid “trickle down grumpy” 			X
Recognition of work	<ul style="list-style-type: none"> -Share success stories -Find another how to find out more about needs 			X
Supervision	<ul style="list-style-type: none"> -build skills -how to be a leader -staff support/supervision 			X

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<p>OTHER IDEAS/STRATEGIES:</p> <ul style="list-style-type: none"> -Use expertise of national technical assistance resources like MSRRC, NECTAC, DAC -Use supervision and monitoring for system improvement-not threatening and built on trust (the tail is wagging the dog right now: tail= accountability) -Identify discussion topics, like child fund and transition to engage providers/administrators/SCs -Strengthen training and mentoring -Take advantage of social networking opportunities (like NING) -Knowledgeloam.org (Brown University) -Establish regional service coordination meetings -Regional trainings -Attend to mechanisms for follow up to professional development 	X	X	X
<p>Embed evidence based practices into the training/ professional development programs</p>			