

THEME	SUBTHEME	ILLUSTRATIVE QUOTES
A. Ramp up advocacy strategies	1. Utilizing social media/expanding PR	<i>Video clips, great marketing tool. Put videos on NCIMHA website, one link directs to all videos.</i> <i>As providers, use social media a little more to get our voices out there too.</i>
	2. Sharing information with staff/other professionals	<i>Preschools focused on teaching and not on social/emotional development – Taking information from today and educating them.</i> <i>Use the materials from today to share with your staff, target intact meetings.</i>
	3. Parents as advocates	<i>Parent advocacy. Working with us and spreading the word.</i>
B. Expand use of existing resources	1. Books, websites, studies, etc.	<i>Mecklenburg access portal – information resources and referral – will be completed in Jan 2014, there is a Facebook page.</i> <i>Read <u>How Children Succeed</u> by Paul Tough – includes research from many different studies, filled with data and stories.</i>
	2. Organizations/services	<i>Guilford County's Bringing Out the Best, mental health consultations. No cost. Filling the gap working closely with CDSA. Model has been working pretty effectively.</i> <i>Tristan's Quest to do luncheons to talk about their services.</i>
C. Collaborate with individuals and groups that are not professionals in the field of infant / young child care or mental health	1. Faith community	<i>Reach out to faith community. They sometimes do work that no one else does. Helps to reach more people.</i> <i>Public awareness. Utilize faith community.</i>
	2. Business & philanthropic community	<i>Need to find creative ways to reach out to business community, retired business people. Broader skill set (marketing, etc.)</i> <i>Importance of drawing on resources of philanthropic community. Share list of funders and organizations that can help fund infant/young child mental health. There might be small foundations that we don't even know about.</i>
	3. Moms	<i>Stay at home moms. Intelligent, free time, networking. Want to be advocates.</i>

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D. Create a clearinghouse/resource guide of services		<p><i>We need a clearinghouse (electronic) of what our programs and resources are across the state so we can see what is happening in other counties.</i></p> <p><i>Submit your resources to the resource guide. Forward the SurveyMonkey link to friends, colleagues, etc.</i></p>
E. Identify service gaps	1. Workforce gaps	<p><i>There are medical professionals in the community that don't communicate effectively about MH. Need education. NCIMHA – contact pediatricians and talk about how we can best communicate MH needs with parents. Brainstorm together to combine skills.</i></p>
	2. Age gaps	<p><i>The 3 year old gap - Between early head start and kindergarten - Servicing gap because of the school calendar year - Who would you want to talk to about closing this gap? - Talk to each county.</i></p> <p><i>Large group of children birth-3 have no designated person to handle their care and are not eligible for CDSA services.</i></p>
	3. Financial gaps for families	<p><i>For families in the middle class who can't get Medicaid, are there resources available to them to help them pay? Sliding scales? – still some families can't afford it.</i></p>
F. Establish ways for professionals in the infant/young child care and mental health field to stay connected after workshops	1. Electronic communication between workshop participants	<p><i>A way to know each other and what we do. Map out who we are and what we do. Listserve? LinkedIn? Need someone to lead.</i></p> <p><i>Follow NCIMHA on Twitter -- @NCIMHA</i></p>
	2. New/more group meetings for professionals	<p><i>NCIMHA and participants have expressed an interest in having NCIMHA chapters within a wider statewide level organization. Regional leaders? Join NCIMHA!</i></p> <p><i>Expressed interest in a follow up meeting, inviting other people who have an interest. Will we all have another opportunity to follow up from this meeting?</i></p>