

Charge to Work Groups

ZORRO

Zeroing in on Resilience and Recovery in Oklahoma

The Oklahoma Department of Mental Health and Substance Abuse Services and the Oklahoma Health Care Authority thank you for your participation in the ZORRO Summit!

Our goal is to create the best public behavioral health service system in the nation.

This cannot be done without help from experts like you. That is why we have asked you to participate in the work day and in an ongoing work group.

The work groups are time limited to six months. However, if a group is able to complete their work and submit their recommendations sooner, that is also fine. We just want to have recommendations in time to create any needed permanent rules in the fall, to take effect July 1, 2014, and/or to schedule any other needed system changes before then.

Each group is asked to make specific recommendations in their topic area (addressing the topics of trauma, overall wellness, integrated treatment, and workforce within the scope of the main topic), that have the potential to:

- **increase access;**
- **maximize resources (based on data and cost effectiveness as demonstrated in other states, etc.);**
- **utilize best, promising and evidence base practices based on nationwide trends, data and research; and**
- **Improve quality, again based on research and data.**

We are asking each group to utilize a group process to determine their top two to three recommendations. Each group may decide their own process which may or may not include in-person meetings. Groups might do work via email and conference calls and/or video conferencing.

In order to expedite the work, we have reached out to some of the most passionate and dedicated champions for children, in each topic area, to serve as work group leads. We have also supplied an assistant to help with logistics and legwork to facilitate the work of each group.

Our commitment to you is that once the group has submitted a recommendation (may submit as completed, or all at once), Recommendations will be vetted

through existing advisory groups such as the Behavioral Health Advisory Council (BHAC), the Planning and Advisory Council, and the State Advisory Team for children's behavioral health. They will also be directly studied and considered by the ODMHSAS and OHCA leadership for possible implementation.

There will a spot on the website where updates will be available, and stakeholders can go and see what the progress is on each recommendation.

Once again, thank you for your willingness to help us in this very important work.