



CHILDREN'S MENTAL HEALTH AND WELL-BEING WORKGROUP LEGISLATIVE REPORT

Workgroup Legislative Mandate. [Senate File 505](#) (FY 2016 Health and Human Services Appropriations Act) charged the Department of Human Services (DHS), in cooperation with the Department of Education (DE) and the Department of Public Health (DPH), to convene a workgroup of stakeholders to facilitate a study and make recommendations on children's mental health and children's services systems.

Workgroup Members. The Children's Mental Health and Well-Being Workgroup [membership](#) consists of a variety of providers, advocates, policymakers, and stakeholders from across the state of Iowa. The selected members of the workgroup were divided into two subcommittees to work on their respective segments of the workgroup charge. The Workgroup plans to continue efforts to evaluate results and make recommendations for 2017 and beyond. The workgroup also plans to include the DHS, the DPH, the DE, and the juvenile justice system to help the workgroup's efforts. The workgroup envisions a collaborative effort between agencies to develop and execute the new children's mental health and well-being framework.

Children's Well-Being Subcommittee. The Children's Well-Being Subcommittee focused on examining the systems and funding streams that play a role in the development and safety of children and families. The number of currently disconnected programs that are regulated by state and federal statute creates a complex system that touches families in early childhood, at schools, through health care (Medicaid, private insurance, and the under/uninsured), the child welfare system, and the juvenile justice systems.

The Children's Well-Being Subcommittee worked to identify barriers to child and family success, operating elements for coordinated cross-system child and family support, and emerging examples of this approach in Iowa. In the Workgroup's [Legislative Report](#), the Children's Well-Being Subcommittee recommends the development of three to five "learning labs" and requires systems engaged in cross-system, family-focused case management to report on approaches and outcomes. The Subcommittee also recommends that an advisory group be established to prepare the learning labs, continue the Subcommittee's efforts, and coordinate with the Children's Mental Health Subcommittee. Finally, the Subcommittee recommends the General Assembly appropriate \$300,000 to support the learning labs. The Subcommittee plans to define the parameters for use of appropriated funds, while simultaneously preparing the process for soliciting agency involvement in learning labs during the spring of 2016.

Children's Mental Health Subcommittee. The Children's Mental Health Subcommittee identified, defined, and prioritized a core set of mental health services for children; however, the Subcommittee determined it would be difficult to implement the entire array of children's mental health services at once. Therefore, the Subcommittee recommended a process to phase in children's mental health crisis services two geographic regions of the state through planning grants.

Children's Mental Health Crisis Priorities. The Children's Mental Health Subcommittee identified the following services as children's mental health crisis priorities for immediate implementation:

- Substance abuse prevention, early identification, and early intervention
- Mental health and substance use disorder treatment
- Recovery supports
- Community-based flexible supports

The Children's Mental Health Subcommittee seeks to implement a statewide program that provides education regarding the signs, symptoms, and effective responses for mental health and substance use disorder conditions in children. The program is intended to support children experiencing mental health challenges and their families, and to also provide public awareness regarding mental health issues. The program will provide educational training to youth (particularly youth with a severe emotional disturbance (SED)), parents and family, educators, other child care providers, and the community at-large, especially peers of the involved youth. The statewide approach to the early identification and

early intervention components of children's mental health crisis services will include training for primary care providers regarding the signs, symptoms, and effective responses for mental health or substance use disorder conditions of children, and a standard screening tool will be recommended for use by primary care providers in all well-child visits.

The treatment of children's mental illnesses and substance use disorders will consist of a holistic health assessment by a licensed mental health professional, and medication prescription and management will be coordinated with care providers.

The Subcommittee outlined plans for two telephone services to augment and support the coordination of mental health care across the state: 1) a telephone consultation service that will provide licensed prescribers access to a board-certified child psychiatrist to consult with in regards to medication management and prescription; and 2) a single, statewide crisis telephone line for children's mental health crisis intervention and stabilization. The Subcommittee intends for the services to be free of charge to all callers.

Further statewide coordination for recovery support will involve the child's school. The education support will provide a child with an SED an individual education program plan (IEP) that ensures the child receives the appropriate mental health and/or substance abuse supports for the child to be successful in school, and with the approval of the family and child, the child's mental health treatment is incorporated into the child's education program.

Children's Mental Health Subcommittee Recommendations for Funding and Coordination. The Children's Mental Health Subcommittee recommends a \$300,000 appropriation to the DHS in FY 2017 for a Request for Proposals (RFP) for two planning grants for children's mental health crisis services. The Subcommittee recommends that the DHS develop an RFP to award these funds in consultation with the DPH, the DE, and the Iowa Judiciary.

Recommendation for Additional Study. The Subcommittee recommends the General Assembly require the DHS to provide a report evaluating the following:

- Barriers that exist for providing remote access to critical clinical services including child psychiatry through the expansion of telehealth
- Existing informational and referral or crisis mental health telephone lines in Iowa Legislature
- Current Iowa Code regarding children's mental health services

Children's Well-Being Subcommittee Recommendations. The Subcommittee is proposing three recommendations for action by the General Assembly during the 2016 Legislative Session. These recommendations are based on the Subcommittee's stated need for a gradual approach to defining, testing, and implementing the Children's Well-Being Committee's multi-year strategy.

- Learning Labs: A year-long learning network should be designed, consisting of:
 - Three to five learning labs, including 200-250 cases in aggregate
 - Both urban and rural projects to ensure better cross-learning
 - Target population must include mental health and at least two systems (i.e., public health, education, the justice system, and/or human services)
- Advisory Group: An advisory group should be activated at the beginning of 2016, with the inclusion of the Subcommittee members and representation from the DHS, the DPH, the DE, and the state's judiciary system. The group will prepare for and manage learning labs, continue the Workgroup's efforts to evaluate results and make recommendations for 2017 and beyond, and continue to coordinate with the Children's Mental Health Subcommittee until the future children's mental health system structure is established.
- Appropriation: Funding of \$300,000 should be appropriated to the DHS to support the Learning Labs

More Information. The Children's Mental Health and Well-Being Workgroup's updates, meeting materials, and minutes are available on the [Workgroup Webpage](#).

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