CHILDREN'S BEHAVIORAL HEALTH SYSTEM STATE BOARD MEETING — AUGUST 27, 2019

Purpose. Legal updates are prepared by the nonpartisan Legal Services Division of the Legislative Services Agency. A legal update is intended to provide legislators, legislative staff, and other persons interested in legislative matters with summaries of recent meetings, court decisions, Attorney General Opinions, regulatory actions, federal actions, and other occurrences of a legal nature that may be pertinent to the General Assembly’s consideration of a topic. Although an update may identify issues for consideration by the General Assembly, it should not be interpreted as advocating any particular course of action.

Date and Location. The Children’s Behavioral Health System State Board (State Board) held its first meeting on August 27, 2019, at Iowa Lutheran Hospital in Des Moines.

Proposed Administrative Rules Revisions. Mr. Rick Shults, Division Administrator, Mental Health and Disability Services (MH/DS), Department of Human Services (DHS), presented a discussion draft of proposed revisions to 441 IAC ch. 25. Under 2019 Iowa Acts, House File 690, Iowa Code section 225C.52, the State Board is not authorized to adopt administrative rules but rather is required to provide consultation services to agencies regarding the development of administrative rules for the Children’s Behavioral Health System. The State Board’s recommended rule changes must be approved by the MH/DS Commission before public notice and comment. The proposed revisions concern MH/DS regional services and the Regional Service System and are based on the definitions and duties set out in 2019 Iowa Acts, House File 690. The proposed revisions include the addition of definitions for “behavioral health inpatient treatment” or “mental health inpatient treatment,” “behavioral health outpatient therapy,” “child” or “children,” “children's behavioral health services,” “children’s behavioral health system” or “children’s system,” “early identification,” “early intervention,” “education services,” “mental health inpatient treatment” or “behavioral health inpatient treatment,” “prevention,” “serious emotional disturbance,” and “state board.”

The proposed revisions also provide that MH/DS regions shall ensure the following core services are available for children in a region: assessment and evaluation relating to eligibility for services, behavioral health inpatient treatment, behavioral health outpatient therapy, crisis stabilization community-based services, crisis stabilization residential services, early intervention, early identification, educational services, medication prescribing and management, mobile response, and prevention. Certain of these required behavioral health core services must be implemented by July 1, 2020, and must meet access standards on or before July 1, 2021. The remaining required core services must be implemented, and access standards met, by July 1, 2021. The proposed revisions also establish the new access standards and service availability criteria.

The proposed revisions also include revisions to MH/DS Regional Service System standards and definitions including provisions requiring a governing board to comply with the provisions of Iowa Code section 331.390, Iowa Code chapter 69, and other applicable laws; provisions regarding the membership of a governing board; provisions regarding a regional administrative entity staff including one or more coordinators of children’s behavioral health services; and provisions for required formation and assigned responsibilities for one or more regional advisory committees for children’s behavioral health services. The proposed revisions also establish eligibility requirements for children’s behavioral health services including financial eligibility requirements and requirements for a region’s annual service and budget plan and annual report.

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Definition of Social-Emotional Behavioral Health. Mr. Brad Niebling, Chief, Bureau of Learner Strategies and Supports, Department of Education (DOE), provided a draft definition of “social-emotional behavioral health (SEBH)” as “[s]ocial, emotional, and mental well-being that affects how we think, feel, communicate, act and learn. These contribute to resilience, how we relate to others, respond to stress and emotions, and make choices (mentalhealth.gov). Knowledge and skills that promote SEBH include: self-awareness, self-management, responsible decision making, social awareness, and relationship skills (CASEL) [Collaborative for Academic, Social, and Emotional Learning] that support positive well-being and academic success.”

State Board members discussed inclusion of the term “mental well-being” instead of “behavioral well-being” or “social, emotional, behavioral, and mental well-being” in the definition.

Updates from Subcommittees and Panels.

Workforce Subcommittee. Ms. Beth Townsend, Director, Iowa Workforce Development, updated the State Board on the work of the workforce subcommittee. The subcommittee has identified gaps in behavioral health services and barriers to services for children. There is a need for more psychiatric residencies in Iowa. There are not enough providers, especially in rural areas. The subcommittee discussed possible loan forgiveness programs and additional scholarship opportunities for those willing to work in underserved areas. The subcommittee also discussed apprenticeship programs. Behavioral health specialist apprenticeship programs will be added to the list of registered apprenticeship programs through Future Ready Iowa.

Universal Screening Panel. Dr. Joyce Vista Wayne, Chairperson, presented the Universal Screening Panel's recommendations and a list of tools that the panel recommends for screening. Three broad goals were identified:

- Provide public education about the critical need to attend to social and emotional behavioral health and well-being.
- Implement universal screening informed by panel recommendations capitalizing on existing efforts and the natural opportunities to engage families.
- Provide enhanced family support, targeted training, and funding support throughout the state.

The panel recommends that screenings shall be all of the following:

- Accessible to all children in Iowa.
- Administered at key developmental stages of childhood by qualified individuals after informed consent is given by the child's parent or guardian.
- Developmentally appropriate for the child or adolescent being screened.
- Linked to appropriate assessments and services.
- Valid and reliable in identifying children and adolescents in need of further assessment.
- Administered at multiple locations including but not limited to schools, primary care clinics, and detention centers.

The panel also presented guidelines, made 10 specific recommendations, recommended screening tools, and specified screening practice parameters which can be found at dhs.iowa.gov/about/mhds-advisory-groups/childrens-system-state-board.

Metrics and Outcomes Subcommittee. Mr. Dave Tilly, Deputy Director and Administrator, Division of Learning and Results, DOE, presented information contained in an initial Metrics and Outcomes Subcommittee summary draft of the suggested metrics to be used in determining whether the stated outcomes are attained. The draft includes outcomes and suggested metrics relating to health promotion, prevention, and well-being; targeted interventions and supports; and complex needs.

Educator Training Workgroup. Mr. Ryan Wise, Director, DOE, discussed professional development opportunities including establishing a public/private mental health clearinghouse of resources, job-imbedded training, and the need to build on already successful programs.
**Update from Area Education Agencies (AEA).** Mr. Dan Cox, Chief Administrator, Northwest AEA, stated that the AEAs received a $2.1 million appropriation for training of educators through the AEA utilizing the Youth Mental Health First Aid curriculum. This curriculum is being expanded for mental health training of elementary, junior high, and high school educators. Individual AEAs are piloting approaches such as sharing social workers between different agencies, establishing crisis supports, and utilizing trauma-informed classrooms.

**Next Steps.** Co-Chairperson Gerd Clabaugh, Director, Department of Public Health and Interim Director, DHS, asked the State Board for suggestions on next steps including all of the following:

- Developing a plan for the next legislative session.
- Reviewing funding options and reimbursement rates.
- Providing a presentation by a panel of MH/DS regional directors regarding what they need moving forward.
- Delineating the specifics for a screening tool and outcome measurements.
- Determining how to manage the needs of children identified through screening.
- Providing workforce incentives.
- Providing a presentation on prevention strategies for young children.
- Determining changes to current law to support the purposes of the board, including apprenticeship programs, scholarships, and loan forgiveness.
- Providing training opportunities for nurses and other professionals to address workforce issues.
- Providing a presentation by law enforcement regarding what they are seeing on the streets and in real-life situations.

The State Board discussed holding two meetings prior to the 2020 Legislative Session and tentatively determined that the next meeting should focus on recommendations from the Universal Screening Panel and the Metrics and Outcomes Subcommittee.

**Open Meetings, Conflicts of Interest and Ethical Considerations of Board Membership.** Ms. Gretchen Kraemer, Assistant Attorney General, provided general information regarding open meetings law, conflicts of interest, and ethical issues of board membership.

**Public Comment.** Ms. Teresa Bomhoff, Chairperson, Iowa Mental Health Planning Council, and Ms. Chaney Yeast, Director of Government Relations and Medical-Legal Projects at Blank Children’s Hospital, provided public comment.

**Next Meeting.** The next meeting will take place on November 5, 2019, at Polk County River Place.

**Children’s Behavioral Health System State Board Materials may be found at:** [dhs.iowa.gov/about/mhds-advisory-groups/childrens-system-state-board](dhs.iowa.gov/about/mhds-advisory-groups/childrens-system-state-board)

LSA Staff Contacts: Adrienne Seusy 515.281.3444 adrienne.seusy@legis.iowa.gov
Jess Benson 515.281.4611 jess.benson@legis.iowa.gov
Patty Funaro 515.281.3040 patty.funaro@legis.iowa.gov
Kathy Hanlon 515.281.3847 kathy.hanlon@legis.iowa.gov