

## Children's Issues Committee, November 13, 2018, 1:00pm

Children's Administrators Forum Update – Gwenda Summers – CEI

Gwenda reviewed the October and November minutes from the CAF meetings. From the October meeting, she gave details on the MC3 presentation given by Anne Kramer. Some questions regarding this were how to transition individuals from CMH psychiatry services to the community-based psychiatry/Primary Care Physicians, and Collaborative support through the transition period. Group wondered if this was a nation-wide project, and Kim Batsche-McKenzie clarified it was a Michigan program. Gwenda then spoke about details from the November meeting on IEP's and BH TED reporting. Phil Chvojka from MDHHS spoke on the BH TEDS topic, giving details on the policy and process during that meeting. Group wondered if EDIT had the information from that meeting. Gwenda clarified that this meeting just took place last week and information from that will go to the next EDIT meeting. Gwenda stated that the Hawthorn Medical Director may be coming to their meeting in 2 months.

DHHS Updates – Kim Batsche-McKenzie – MDHHS

Kim stated that Juveniles deemed incompetent and unable to be restored due to SED is what is being discussed regarding BH TEDS. This data hasn't been being collected but will be moving forward.

Kim reported that Sheri Falvay will be retiring effective November 30, 2018. An e-vite will be forwarded to this group after the meeting. She stated that Jeff Wierich has officially taken Tom Renwick's vacated position with the Department.

Kim reported that the State has received a Healthy Transition Grant and will be using the TIP model in Kalamazoo and Kent Counties. They are working to hire a project manager and one other position.

A letter has gone out to the PIHPs addressing youth that are kind of stuck at Hawthorn. This may interface with the MIPAD groups work.

Christine Gebhard asked about psychiatric residential treatment facilities (PRTF). Kim stated this is a Medicaid service, and is not part of the State's plan as of right now. Michigan is focusing on the community-based array. They are currently looking at other states who do have PRTFs and finding out how their models are working or not working. Conversation about the need for these is taking place within the Department. This would only be for kids coming out of Hawthorn, and is still in the very early preliminary stages, and a Waiver would have to be written for this. Annette wondered if advocates had been involved in these discussions. Kim stated they have not due to the earliness of this process, but she will mention to the Department that this should be done. Kim also stated that since there are only crisis beds for youth in Northville, the appealing benefit of this PRTF program is that there would be more, and across the state.

Legislative Update – Alan Bolter

Alan stated that the legislature will be coming back in session in a couple of weeks for Lane Duck. He spoke about Juvenile Mental Health Courts, wondering if anyone currently had this in place and how it was going. Trinilda stated that Wayne County has one in place, and it is going quite well. She will send contact information for Judge Joseph for Alan to gain information on this. He spoke about potential topics that could come up in Lane Duck, including a supplemental budget, Direct Care Wage, Minimum Wage legislation adjustments (including DCW going up as Minimum Wage does), school safety grants, and House CARES Task Force Bills. He stated that there are 30 new Senate members and 46 new House members. The Association will be working to avoid any drastic changes to the 298 process, with the belief that 11<sup>th</sup> hour decision making is not the best idea for helping the Mental Health System. Alan stated that we may see the rainy-day fund surplus added into a Bill that preempts the incoming Governor from being able to spend that; essentially putting this into a "lock-box". Alan stated that educating the new, incoming legislators will be key to helping to achieve our goals. Group discussed the parallel path for DCW increases alongside with Minimum Wage. Annette wondered why we started at \$2 above minimum wage and settled on 75 cents. Alan explained that this was to match the proposed increase in the Minimum Wage from \$9.25 to \$10.00.

Biggest areas of challenge with children/youth/families brainstorm round-robin. What are the trends?

Connie explained that she would like to hear from everyone what the biggest issues in their areas were.

Gwenda Summers – children receiving services, but in the child welfare system. Lack of psychiatric hospital and psychiatry.

Kim Batsche-McKenzie – continuum of services statewide differs... strengths vary in different areas. Intensive crisis stabilization should help to meet some needs and fill some gaps. Treatment Foster Care – Oregon (EBP) needs to grow and be better utilized.

Janet Reynolds-Snyder – feels same needs for services and filling gaps statewide that Kim referenced. Out of home placements are driven up by these factors.

Trinilda Johnson – shortage and turnover in the workforce. Respite and CLS services have a big gap as well.

Annette Downey – feels we need to have a "back to basics". Children do better with family situations. Permanency planning is needed more than ever. Under-utilization of community living supports. I/DD transition needs a focus on community options. Family driven youth guided (added by Kim).

Julie Bayardo – Staffing issues, foster care homes and therapeutic homes shortage, accepting kids referred to psych beds, finding balance between medicating appropriately and helping the family, lack of placement options for autistic youth.

Julia Rupp – Increased Early Intervention and Prevention Systems

Christine Gebhard – rural areas hard to get services such as PMTO, lack of child psychiatry, suicide rates.

Lois Shulman – foster care system needs more in supports for the families, physical and mental health exams before adoption.

Kay Randolph-Back – early diagnosis being used optimally, and child actually gets into a system of care.

Linda Schneider – get back to basics with permanency plans, work to have State policy help this, not fight it.

Heidi Fogarty – staff retention, lack of placement, documentation requirements, rate for behavior techs.

Mary Chaliman – recruiting foster parents and offering supports for them, after care family for the child to return to.

Connie Conklin – Autism Funding, Youth Diversion Specialist for Behavioral Intervention Teams.

Committee Focus Areas for 2018 – Still relevant for 2019

- a. Collaborative efforts to support students, especially those expelled, suspended or at risk with mental health needs
- b. Are the needs of the child/youth/family changing?
- c. If so, how?
- d. What are the current gaps in our continuum of services/supports?
- e. Child Psychiatric Beds
- f. Service Models for transition age youth

Other

Kay Randolph-Back asked about the education of the new legislators on the points that the group discussed in the round robin. Bob Sheehan stated that we will focus on our system and how it runs first. Getting too deep in the weeds right off the bat may lose the new legislators, but it is very important to have this list of current, updated Children's Issues, just as it will be important to have similar lists from other groups and committees with key points stemming from their specialty/focus area. Alan stated it's good to have these lists, and that the deeper levels of dialog can and should take place between the legislators and actual members from these groups/committees – not just he or Bob.

The next meeting of the Children's Issues Committee is scheduled for Tuesday, January 15, 2019, 1:00pm, CMHAM office, Lansing. Meeting adjourned at 2:15pm.