

Slide deck annotated
following meeting

Prenatal to 5 Relational Health Subgroup

September 14, 2021

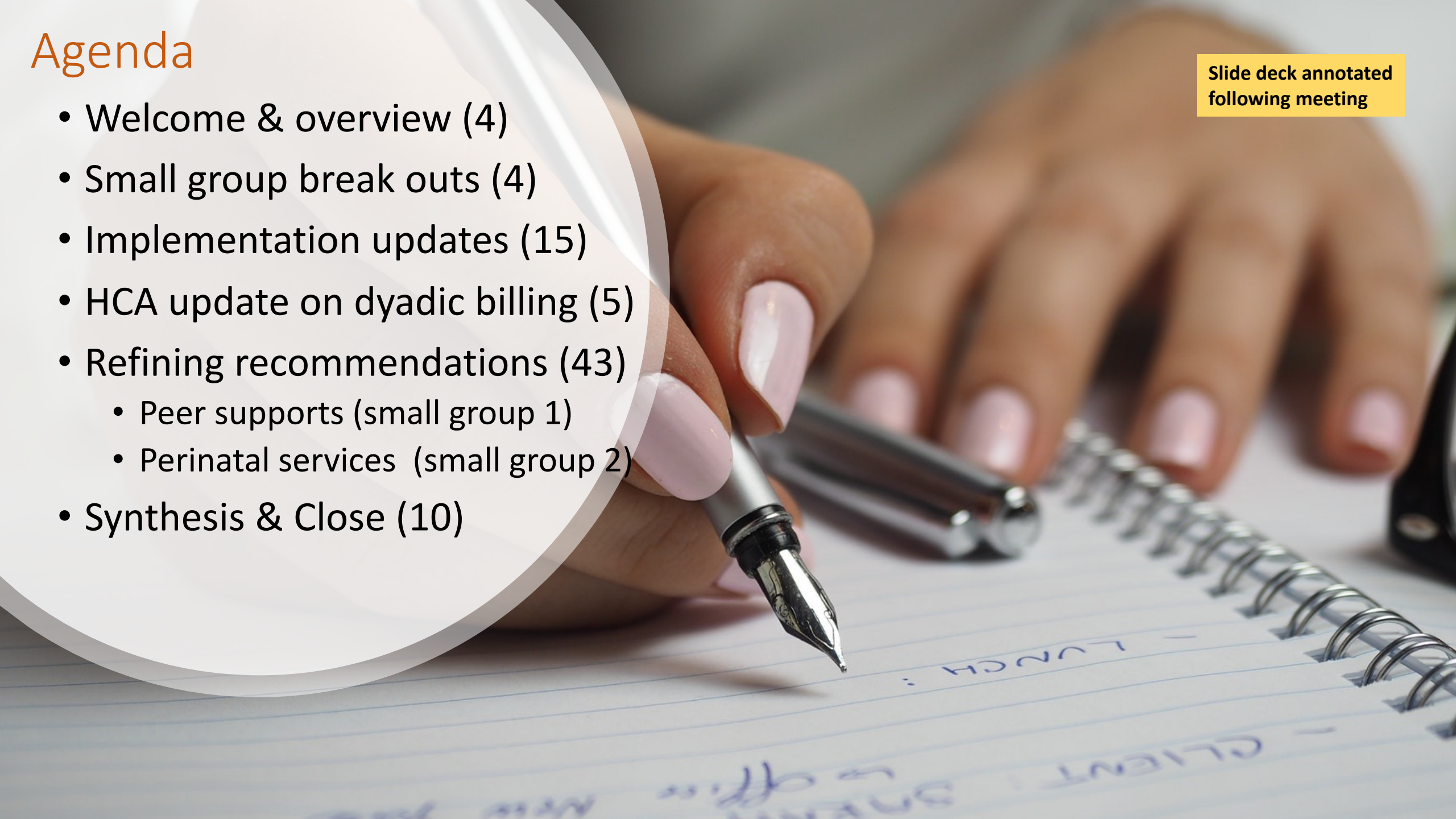
Monthly Meeting | 2-3:30pm



Agenda

- Welcome & overview (4)
- Small group break outs (4)
- Implementation updates (15)
- HCA update on dyadic billing (5)
- Refining recommendations (43)
 - Peer supports (small group 1)
 - Perinatal services (small group 2)
- Synthesis & Close (10)

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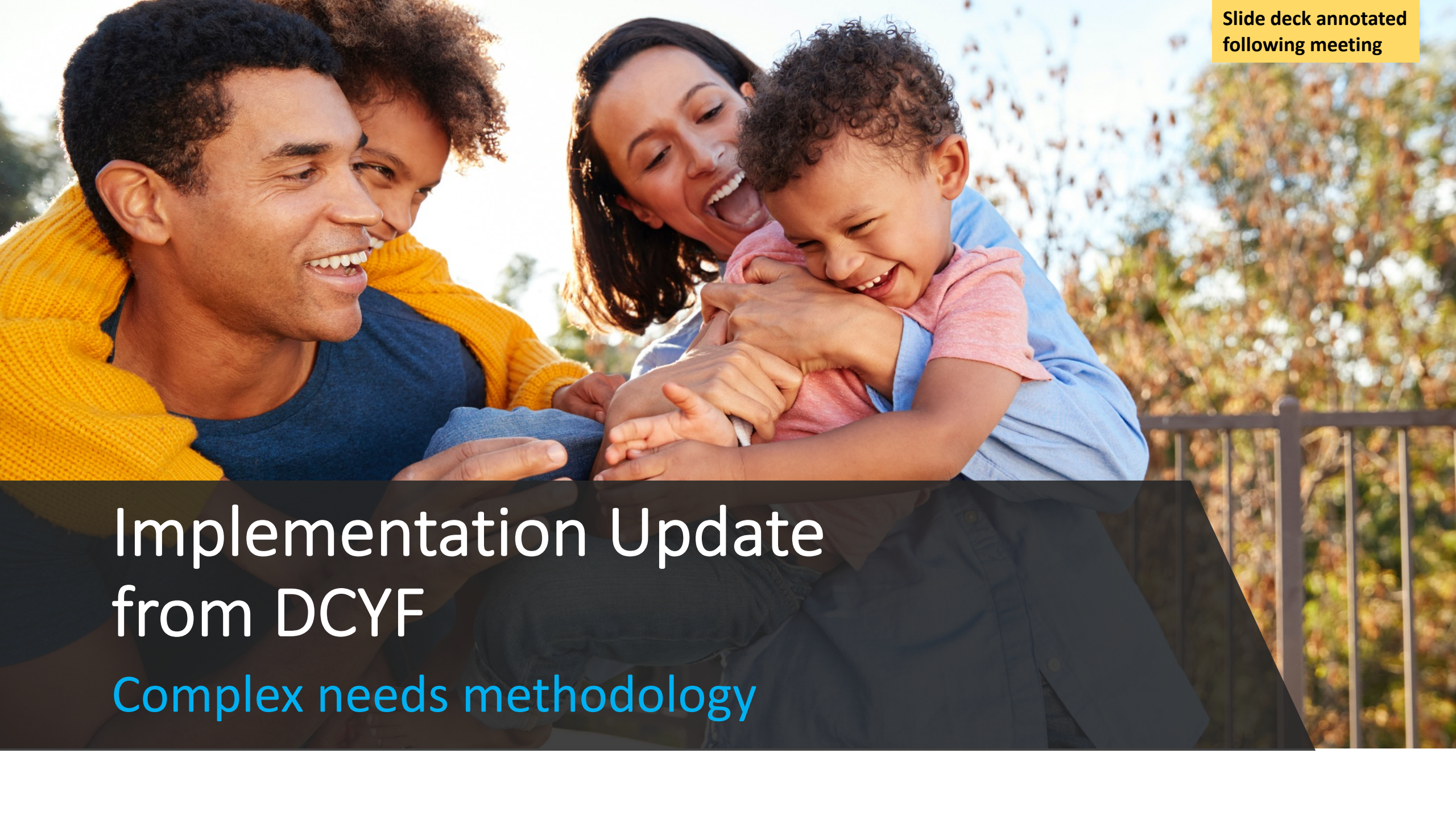




Participants

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1. Sarah Brady
2. Rachel Burke
3. Diana Cockrell
4. Christine Cole
5. Mia Edidin
6. Ayan Elmi
7. Rep. Debra Entenman
8. Andrea Estes
9. Kiki Fabian
10. Janet Fraatz
11. Jess Galvez
30. Kim Gilsdorf
31. Carrie Glover
33. Dana Guy
34. Dr. Nucha Isarowong
35. Byron Jackson
36. Elizabeth Krause
33. Bridget Lecheile
34. Edna Maddalena
35. Lou Olson
36. Casey Osborn-Hinman
37. Avery Park
38. Kristina Peterson
39. Jennifer Rees
40. Joel Ryan
41. Caroline Sedano
42. Sharon Shadwell
43. Hikma Sherka
44. Victoria Cherniak
45. Beth Tinker
46. Cara Towle
47. Megan Veith
48. Cynthia Wiek
49. Kristin Wiggins
50. Dr. Mary Ann Woodruff



Implementation Update from DCYF

Complex needs methodology

Implementation Update

Complex needs fund

- DCYF will be posting an open position soon to coordinate the complex needs funds (ECEAP and early learning providers)
- Grant applications for ECEAP complex needs fund are anticipated to be available to ECEAP contractors in mid-September

IECMH Consultation Expansion

- Hiring update: Four positions for infant and early childhood mental health consultants remain open until filled:
 - **OlyPen:** <https://ccacwa.org/about-us/employment-at-ccac/>
 - **Southwest WA:** <https://www.governmentjobs.com/careers/esd112?pagetype=jobOpportunitiesJobs&jobId=3152420&jobName=ece-mental-health-consultant&tab=1>
 - **Central WA:** <https://www.paycomonline.net/v4/ats/web.php/jobs/ViewJobDetails?job=16917&clientkey=C1A65B0EC9649FE92569BE73C9B9D589>
 - **King/Pierce:** <https://drive.google.com/file/d/1-XY4UKbW9bfE2wk8WAdjKrWifP78RRwg/view>
- When hiring is complete there will be 15 consultants (6 existing plus 6 per expansion in Fair Start for Kids Act plus 3 funded through a federal, time-limited grant)
- IECMH-C expansion outlined in Fair Start for Kids Act included professional development and reflective supervision for the program situated at Child Care Aware of WA. A reflective supervisor has been hired.



DC:0-5™

Diagnostic Classification
of Mental Health and
Developmental Disorders of
Infancy and Early Childhood

ZERO TO THREE



Implementation Update

Developmentally appropriate mental health assessment and diagnosis for birth through age 5

- Still moving forward with January 1 timeline
- Crosswalk of DC:0-5™ diagnoses & ICD-10 Medicaid billing codes
 - Developing a Washington-specific interim crosswalk by adapting the national Zero to Three crosswalk
 - Feedback welcome on crosswalk development: Contact Christine Cole (christine.cole@hca.wa.gov) or Kiki Fabian (kiki.fabian@hca.wa.gov) with input or questions
 - Crosswalk development will take apx. 6 months with aimed publish date July 1, 2022

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DC: 0-5 slide 1 of 2

Interim Crosswalk	Community-Informed Crosswalk
Uses the National/Zero To Three crosswalk as starting point, minimal changes made to align with Washington Medicaid billing guidelines	Will use the Interim crosswalk as a starting point, changes will be made to reflect community consensus on what is clinically and developmentally appropriate
Reviewed primarily by HCA billing staff	Reviewed by community partners, stakeholders, advocates, and IECMH providers
Published as soon as possible (Jan 2022 at the latest)	Anticipate at least a 6-month process of workgroup meetings to complete, published once consensus is reached, hoping to publish by July 1, 2022.

Billing for Dyadic Services

Survey on Infant Early Childhood Mental Health Services for Pregnant/Postpartum Persons & Children Birth -5

The Washington Association of Infant Mental Health and Barnard Center for Infant and Early Childhood Mental Health are partnering with Healthcare Authority staff in developing a survey to understand the unique needs & challenges in serving this population to inform future training opportunities.

- This survey is intended licensed and license-eligible clinicians in the state of Washington working with pregnant/post-partum persons and children birth to 5.
- Access the survey: <https://www.surveymonkey.com/r/8WS2LF3>
- Please feel free to share with your community! For more information, you can contact Christine Cole at christine.cole@hca.wa.gov.

Vision: Washington's children, youth, and young adults have access to high-quality behavioral health care.

Mission: Identify barriers to and opportunities for accessing behavioral health services for children, youth and young adults (prenatal to 25 years old) and their families that are accessible, effective, timely, culturally and linguistically relevant, supported by evidence, and incorporate tailored innovations as needed; and to advise the Legislature on statewide behavioral health services and supports for this population.

Important Elements of Work Group Charge:

- Support the unique needs of children and youth (prenatally through age 25), including promoting health and social and emotional development in the context of children's family, community, and culture
- Develop and sustain system improvements to support the behavioral health needs of children and youth

Racial equity norms – The P5RHS has spent years addressing issues of racial equity

P5RHS Calendar

Date	Actions	Slide deck annotated following meeting
June 14	First subgroup report	
June 15, 2-3:30	P5RHS meeting <ul style="list-style-type: none">Recap last session & follow-up implementation; Identify potential priorities	
July 20, 2-3:30	P5RHS meeting <ul style="list-style-type: none">Issue groups refine prioritized recommendations & P5RHS further refine	
August 17, 2-3:30	P5RHS meeting <ul style="list-style-type: none">Issue groups refine prioritized recommendationsSubgroup members help with outreach and vetting	
September 14, 2-3:30	P5RHS meeting <ul style="list-style-type: none">P5RHS finalizes prioritized recommendationsGenerate message content for recommendation FAQs and talking points	
September 17	Draft P5RHS recommendations due to CYBHWG (Due to staff in advance of 9/17)	
October 5	Input on refined draft P5RHS recommendations due to Kristin & Casey	
October 12, 2-3:30	P5RHS meeting – review final recommendations	
October 15	Final recommendations due to CYBHWG (Due to staff in advance of 10/15)	
November 1	CYBHWG report due to the Legislature	
November 9, 2-3:30	P5RHS meeting	
December 14	P5RHS meeting	

Our Focus

- **COMMUNITY-INFORMED** - Prioritizes approaches and ideas that strengthen child and family well-being, as shared by members of impacted communities and those that serve them
- **CENTERS & ADVANCES EQUITY** – Holds the promise to measurably close gaps in health access and outcomes
- **ACHIEVABLE** – Size and scope are appropriate for Washington’s policy landscape
- **CAPACITY** – Implementation could be described and executed well and quickly
- **STRENGTHENS/TRANSFORMS** – Helps to build, sustain, or transform foundational systems
- **FIT** – Fits within the P5RHS and CYBHWG scope, and avoids duplicating the work of other groups



Small Groups

Prioritized Issues

1. Peer Supports – Discuss research questions and investigation topics

Objective for today: Develop research questions and identify investigation topics

Group discussion and agreement that this concept needs further work. Group identified some research questions and will continue exploring questions for this work (for leading into the 2022 recommendation process).

2. Perinatal Services & Supports – Review and discuss draft Warm Line expansion recommendation

Objective for today: Refine draft recommendation (no major changes). Commit to collecting input.

Group is enthusiastic about the recommendation to expand the Warm Line so that 1) more families can access the line and 2) there is greater public awareness about the Warm Line and other relevant supports. Next step is to continue vetting draft recommendation with community members and refining accordingly.

- 1. COMMUNITY-INFORMED -** Prioritizes approaches and ideas that strengthen child and family well-being, as shared by members of impacted communities and those that serve them
- 2. CENTERS & ADVANCES EQUITY –** Holds the promise to measurably close gaps in health access and outcomes
- 3. ACHIEVABLE –** Size and scope are appropriate for Washington’s policy landscape
- 4. CAPACITY –** Implementation could be described and executed well and quickly
- 5. STRENGTHENS/TRANSFORMS –** Helps to build, sustain, or transform foundational systems
- 6. FIT –** Fits within the P5RHS and CYBHWG scope, and avoids duplicating the work of other groups

Wrap Up

Next steps

1. **Next meeting –
October 12, 2-3:30**
2. Request for vetting
with your colleagues
by October 5

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- Stay healthy
- Keep moving the prenatal to 5 relational health systems forward!