**Children and Youth Behavioral Health Work Group (CYBHWG)** 

Recommendations for 2023

January 17, 2023

**Senate Human Services Committee** 

#### **Presenters**

**Dr. Keri Waterland**Director, Division of Behavioral Health & Recovery
Health Care Authority

#### **Diana Cockrell**

Manager, Prenatal through 25 Lifespan Section
Division of Behavioral Health
& Recovery, Health Care Authority

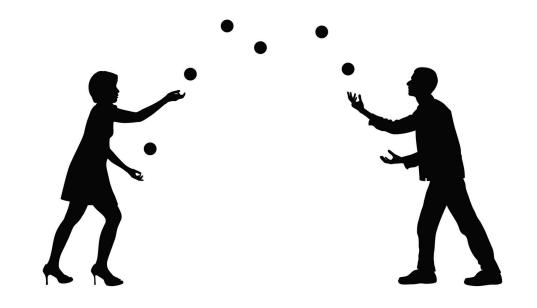




### **2023 Context**

# The challenge

Meeting the immediate critical needs of children, youth and families in crisis...



....and addressing the foundational issues that lead to and exacerbate crises – particularly workforce.

### **2023 Context**

# The workforce shortage affects everything

It will be important to note that workforce is a foundational need in any recommendation that includes the language "expand", "increase" or "extend" services.\*

I think the vote speaks to the intensity and urgency of the behavioral health crisis. We need programmatic interventions immediately and we need the workforce to bring it alive.\*



\*Comments by participants in the work group's November decision-making meeting.

### **2023 Goals**

### Recommendation overview

The 2023 recommendations can be broadly grouped into three areas addressing:

- Workforce capacity
- Immediate crises that youth and families are facing
- Making intentional upstream improvements aimed at preventing crises

# Decision-making

The work group prioritized recommendations by:

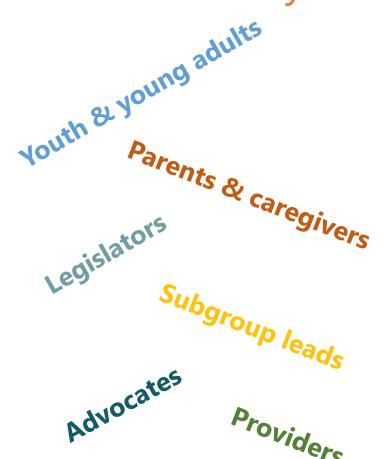
- Determining whether any recommendations are overarching or essential to the success of all other recommendations
- Deciding, through votes, on the next 10 prioritized recommendations for the 2023 session
- Passing, by consensus, a list of additional recommendations that are also considered critical

The recommendations are listed in priority order at the end of the slide deck.

The <u>2023 Recommendations report</u> provides more information about the recommendations and includes statements of support for other groups' initiatives.

## **Children & Youth Behavioral Health Work Group (CYBHWG)**





...and so many other people and organizations...

#### **Advocates and Community Organizations**

**Building Changes** Center for Children and Youth Justice Child Care Aware of Washington ChildStrive Children's Alliance Children's Campaign Fund

Children's Home Society of Washington citiesRISE

Committee for Children

Communities in Schools of Washington State Network

Families of Color Seattle

Family, Youth & System Partner Round Tables (FYSPRTs)

First 5 FUNdamentals

Foundation for Healthy Generations Friends of Children of Walla Walla

Justice for Girls Coalition

King County Best Starts for Kids

M.H.A SPEAKOUT SPEAKUP

**Mockingbird Society** 

North Central Washington Peer Connection

National Council for Mental Well-being

NorthStar Advocates

Partners for Our Children

TeamChild

The Learning Project Training Center

Treehouse

Washington Association for Community Health Washington Association for Infant Mental Health Washington Association of School Social Workers Washington Chapter of the American Academy

of Pediatrics

Washington Council for Behavioral Health

Washington Frontiers of Innovation Washington Mental Health Counselors Association

Washington National Alliance on Mental Illness Washington PAVE Washington Psychiatric Association Washington School-Based Health Alliance Washington School Counselor Association

Washington State Alliance of Boys and Girls Clubs

Washington State Association of Counties Washington State Association of School

**Psychologists** 

Washington State Community Connectors Washington State Council of Child and

Adolescent Psychiatry

Washington State Hospital Association Washington State Medical Association

Washington State Parent Teachers Association UW Barnard Center

Washington State Pharmacy Association Washington State Psychiatric Association

Washington STEM

World Relief Western Washington YouthCare

#### **Education and Research**

Behavioral Health Institute **Brewster School District Burlington-Edison School District** Center for the Study of Social Policy Chief Leschi School District **Educational Service District 101 Educational Service District 105** 

**Educational Service District 113 Educational Service District 114**  Educational Service District 171 **Educational Service District 189** Forefront in the Schools

**Highland School District** 

Lower Columbia School Gardens

Medical Lake School District Monroe School District

Mount Vernon School District

Puget Sound Educational Service District

Richland School District Ridgefield School District Seattle Public Schools

Skagit Preschool and Resource Center Snoqualmie Valley School District

South Bend School District South Kitsap School District Spokane Public Schools

Sumner-Bonney Lake School District

**UW Department of Psychiatry** 

**UW Evidence-based Practice Institute** 

UW School of Social Work

**UW SMART Center** 

Vancouver Public Schools

Washington Association of Educational Service

Districts

Washington Association of School Principals

Washington Education Association

Washington State School Directors Association

#### **Philanthropic Organizations**

Ballmer Group Health Career Fund Perigee Fund

# Children & Youth Behavioral Health Work Group (CYBHWG) Work group and subgroup member panel

#### Michelle Karnath

- > Parent lead for the Young Adult Continuum of Care subgroup
- > Statewide parent tri-lead Family, Youth & System Partner Round Table (FYSPRT)
- Family Assistance Specialist, Clark County Juvenile Court

#### Lillian Williamson

- > Young adult lead for the Youth and Young Adult Continuum of Care subgroup
- > UW student

# Addressing workforce capacity

	Recommendation	<b>Relative Cost</b>
Overarching	Medicaid rate increase Implementation of a Medicaid rate increase for all providers of pediatric behavioral health services, as well as a 15% rate increase for the Children's Long-Term Inpatient Program (CLIP).	<b>\$\$\$\$</b>
Prioritized	Reduce the educational debt burden for clinicians Allocate funds to recruit and support master-level students with conditional grants, create a loan repayment fund for individuals employed in community behavioral health agencies, and provide funds to support loan repayment awards to address retention challenges in a variety of settings.	<b>\$\$\$\$</b>
	<b>Teaching clinic enhancement rate</b> Allocate funds for a .5 FTE at the HCA to participate in a public/private partnership to implement the behavioral health teaching clinic demonstration project led by the Washington Council for Behavioral Health.	\$

#### **Key to cost estimates**

**\$**<\$500,000 **\$\$**=\$500,000-\$999,000

**\$\$\$**=\$1 million-\$10 million **\$\$\$**\$>\$10 million

These estimates were decided on by subgroups and were not developed by agency staff. They should not be used in legislative proposals.

# Addressing workforce capacity

	Recommendation	<b>Relative Cost</b>
Prioritized	Reduce behavioral health workforce barriers  Amend the Revised Code of Washington (RCW) to allow inclusion of Washington in the national Counseling Compact; and reduce or eliminate identified administrative burdens.	\$
	Certified Community Behavioral Health Clinics (CCBHCs) Funds to build on existing work to develop a sustainable prospective payment system for comprehensive community behavioral health services by refining the CCBHC model.	TBD
Prioritized	Continue and expand supports for behavioral health integration in primary care Funding to continue and expand behavioral health integration in primary care through the Partnership Access Line (PAL), Mental Health Referral Service for Children and Teens, and First Approach Skills Training (FAST).	<b>\$-\$\$</b>
	Create a flexible fund to pilot the utilization of technological innovations across the behavioral health continuum of care Allocate flexible funds to stimulate broader adoption of technological innovations in the mental health and addiction services sector.	TBD

# Addressing immediate crises

	Recommendation	<b>Relative Cost</b>
Prioritized	Expand services and codify a consistent approach to support the needs of youth who are effectively "stuck" in hospitals  Funding to expand the capacity in DDA in-home and out of-home services, expand the capacity and capability of the WISe program to serve high-needs youth, provide ABA supports, explore a therapeutic educational residential placement in Washington state through an evaluation/study, and codify a new approach to service and placement plans for children.	TBD
Prioritized	Expand the number of school- and community-based clinicians serving students and expand the Partnership Access Line (PAL) in Schools pilot statewide  Funding to increase the service capacity for schools across the state to provide access to and promote positive outcomes for Tier 2 and Tier 3 mental health interventions for all students by expanding the number of school and community-based practitioners and expanding the PAL in Schools program statewide.	TBD
Prioritized	Increase the Early Childhood Education and Assistance Program (ECEAP) and Child Care Complex Need Funds (CNFs) Increase funding for these CNFs to meet the overwhelming unmet need for supports for providers serving children with developmental delays, differing abilities, or challenging behaviors.	<b>\$\$\$\$</b>

# Making intentional improvements to prevent crises

	Recommendation	<b>Relative Cost</b>
Prioritized	Targeted investments in behavioral health and suicidality for indigenous youth Provide funds to tribes and Indigenous organizations to spend on behavioral health services as they see fit.	TBD
Prioritized	Scale up culturally affirming mental health care for children and families (CARE project) Fund the next phase of the CARE project by bringing together diverse communities to develop an initiative to expand, train and support a culturally diverse child mental health workforce.	<b>\$-\$\$\$</b>
Prioritized	Behavioral health respite for youth and families  Direct HCA to continue to explore Medicaid waiver options for respite care for youth with behavioral health challenges, without adversely impacting the DDA and DCYF respite waivers, and continue to expand the System of Care respite pilots.	TBD

# Making intentional improvements to prevent crises

	Recommendation	Relative Cost
Prioritized	Designate a lead agency for students' behavioral health Designate a lead agency for ensuring student access to the continuum of behavioral health and wellness services in school settings. In Year One, allocate funding for this agency to develop a work and project plan. In Year Two, include flexible funding to education service districts (ESDs) and school districts for development of comprehensive behavioral health services, support in becoming a licensed behavioral health provider, and/or partnering with community-based organizations (CBOs) and other licensed providers.	TBD
	Expand Infant Early Childhood Mental Health Consultation (IECMH) to meet need Funding to provide IECMH consultation services by linguistically and culturally matched consultants, expand capacity to provide individualized mental health consultation services to more providers, and address on-going program needs to maintain quality and access to a variety of services.	<b>\$-\$\$\$</b>

# Making intentional improvements to prevent crises

Re	ecommendation	<b>Relative Cost</b>
in HC na exp	nprove awareness and navigation support for parents and caregivers for families a the perinatal stage and children through age 5. CA should direct a comprehensive analysis of relationally based awareness and avigation supports that is directly informed by parents/caregivers with lived experience seeking support for medical issues, developmental delays, and/or mental ealth.	\$
Exp be	eer services for youth and families appears to peer services for parents/caregivers and youth/young adults accessing ehavioral health services by funding Center of Parent Excellence (COPE), to sustain the rogram.	TBD
Fur ad	ontinue development of a parent portal and tool kit unds to convene stakeholders including parents, caregivers and youth and young dults to develop a work plan to design the Parent Portal, look for funding partners, and send out an RFP for ongoing care and management of the portal.	\$

### Prioritized list of recommendations

#### 1. Overarching: Medicaid rate increase

- 2. Expand services to support the needs of youth who are "stuck" in hospitals
- 3. Expand the number of school- and community-based clinicians serving students
- 4. Increase the ECEAP and Child Care Complex Needs Funds
- 5. Supports for behavioral health integration in primary care
- 6. Targeted investments in behavioral health and suicidality for indigenous youth
- 7. Scale up culturally affirming mental health care for children and families (CARE project)
- 8. Reduce the educational debt burden for clinicians
- 9. Behavioral health respite for youth and families
- 10. Reduce behavioral health workforce barriers
- 11. Designate a lead agency for students' behavioral health

# Thank You!

#### **CYBHWG Co-chairs:**

- Representative Lisa Callan lisa.callan@leg.wa.gov
- Keri Waterland keri.waterland@hca.wa.gov
- Work group e-mail: <u>cybhwg@hca.wa.gov</u>
   To join a subgroup or be added to our mailing list.
- Website: <a href="https://www.hca.wa.gov/about-hca/behavioral-health-recovery/children-and-youth-behavioral-health-work-group-cybhwg">https://www.hca.wa.gov/about-hca/behavioral-health-recovery/children-and-youth-behavioral-health-work-group-cybhwg</a>

This year's recommendations report is available under **Recommendations** on the home page.

