Children and Youth Behavioral Health Work Group (CYBHWG) Notes

April 19, 2022

<table>
<thead>
<tr>
<th>Chair</th>
<th>Alternate</th>
<th>Co-Chair</th>
<th>Non-Voting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lisa Callan</td>
<td>Avreayl Jacobson</td>
<td>Michele Roberts</td>
<td>Noah Seidel</td>
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<tr>
<td>Keri Waterland</td>
<td>Kristin Houser</td>
<td>Joel Ryan</td>
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<tr>
<td>Hannah Adira</td>
<td>Nichole Jensen</td>
<td>Mary Stone-Smith</td>
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<tr>
<td>Tony Bowie</td>
<td>Barb Jones</td>
<td>Representative My-Linh Thai</td>
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<td>Representative Michelle Caldier</td>
<td>Kim Justice</td>
<td>Dr. Eric Trupin</td>
<td>Senate Judy Warnick</td>
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<tr>
<td>Lee Collyer</td>
<td>Michelle Karnath</td>
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<td>Lillian Williamson</td>
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<tr>
<td>Representative Carolyn Eslick</td>
<td>Judy King</td>
<td>Claire Wilson</td>
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<tr>
<td>Dr. Thatcher Felt</td>
<td>Amber Leaders</td>
<td>Dr. Larry Wissow</td>
<td>Jackie Yee</td>
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<tr>
<td>Tory Gildred</td>
<td>Bridget Lecheile</td>
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<td>Jackie Yee</td>
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<tr>
<td>Dorothy Gordan</td>
<td>Laurie Lippold</td>
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<td>Jackie Yee</td>
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<tr>
<td>Summer Hammons</td>
<td>Cindy Myers</td>
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<td>Jackie Yee</td>
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</tbody>
</table>

Guest Speaker

Ingrid Ulrey, Department of Health and Human Services (HHS), Region 10 Director

See TVW recording (14:51)

Highlights

- Health and Human Services (HHS) leadership and agencies are deeply committed to health equity.
- Region 10 consists of Washington, Oregon, Idaho, Alaska, and 272 federally recognized tribes.
- Primary duties of HHS are intergovernmental relations and external affairs.
- HHS looks at funding streams and policies, including the interface between state and federal policies.
- A National Mental Health Strategy has been created which includes money that has already been invested, new grants announced by SAMSA and a look forward to signal congress that these are the president’s fiscal priorities.
- Many initiatives from the National Mental Health Strategy are embedded in president’s budget proposal for 2023.
- HHS looks at funding streams, policies, and the interface between state and federal policies.
- Top priorities of HHS region 10:
  - COVID – response and recovery
  - Behavioral health – Mental health and SUD
  - Access to care – Coverage & Access and workforce
  - Health Across the Life Span – maternal, child and elder
  - Tribal health – government to government relations
Recommendation timeline and process

See TVW recording (46:57); see page 4 for slides

DEI article: Highlights to inform our work
Avreayl Jacobson, King County Behavioral Health and Recovery

See TVW recording (51:50); see page 6 for slide

Article Link: https://hbr.org/2022/02/do-your-diversity-initiatives-promote-assimilation-over-inclusion

Legislative Session review

See TVW recording (1:07:56); see page 7 for slides

2022 interim-working toward 2023 session recommendations

See TVW recording (1:22:53)

Update on 988 work & Crisis Response Improvement Strategy (CRIS) Committee
Sen. Manka Dhingra, Rep. Tina Orwall, Betsy Jones (Health Management Associates), & Kashi Arora (Seattle Children’s)

See TVW recording (2:04:03); see page 10 for slides

Chat:

Resources


#CrisTalk: https://talk.crisisnow.com/learningcommunity/

CRIS Website: https://www.hca.wa.gov/about-hca/behavioral-health-recovery/crisis-response-improvement-strategy-cris-committees

Public Comment

See TVW recording (2:38:12)

PUBLIC COMMENT from Jerri Clark, PAVE
1. WA Mental Health Summit is Live at UW and virtually on May 17: https://www.wamhsummit.org/
2. Children’s Mental Health Summit, sponsored by WSCC, is virtual Monday, May 2: https://wsccsupport.org/event/childrens-behavioral-health-summit/
3. PAVE offers a new Behavioral Health toolkit that consolidates information about crisis, school, medical, family-serving agencies, advocacy (i.e. this committee's work) and more: https://wapave.org/behavioral-health-toolkit-for-navigating-crisis-school-based-services-medical-services-family-support-networks-and-more/

Attendees

Kashi Arora, Seattle Children's
Kelsey Beck, Kaiser Permanente
Kevin Black, Legislative staff
Marta Bordeaux, Child, and Adolescent Clinic
Karen Brady, Ryther Center for Children & Youth
Mary Beth Brown
Eric Bruns, University of Washington (UW)
Rachel Burke, Health Care Authority (HCA)
Monica Burke, Department of Health (DOH)
Megan Celedonia, Government's Office
Jerri Clark, PAVE
Mary Clogston, Legislative staff
Diana Cockrell, HCA
Christine Cole, HCA
Joe Conris, Community Health Plan of Washington (CHPW)
Thalia Cronin, CHPW
Kiki Fabian, HCA
Mary Sprute Garlant
Camille Goldy, Attorney General’s Office
Zach Hall, Legislative staff
Mark James, Rod’s House
Negheen Kamkar, Washington Association of Community Health
Kelci Karl-Robinson
Erik Kiffe, legislative staff
Chris Ladish, Mary Bridge
Cameron Long, Legislative staff
Ashley Mangum, MultiCare

Pavi Montes, Urban League
Liz, Nelson, Washington Association of School Social Workers (WASSW)
Corban Nemeth
Julia O’Connor, The Washington council
Alice Palosarri, Legislature
Nelson Rascon, Dad’s Move
Janice Schutz, DOH
Jonathan Seib
Sharon Shadwell, Department of Children, Youth & Families (DCYF)
Tamara Sheehan, Providence Health Care
Alexa Silver
Daniel Smith, CHPW
Maureen Sorenson, Coordinated Care
Christian Stark, Office of Superintendent of Public Instruction (OSPI)
Anne Stone, Department of Social and Health Services (DHS)
Roz Thompson, Association of Washington School Principals (AWSP)
Renee Tinder, DOH
Andy Toulon, Legislative staff
Ingrid Ulrey, Department of Health and Human Services (HHS)
Amber Ulvenes
Megan Veith, Building Changes
Cynthia Wiek, HCA
Kristin Wiggins
Children and Youth Behavioral Health Workgroup (CYBHWG) Meetings

- April 19, 2022: Session debrief
- June 10, 2022: First reports from subgroups
- July 11, 2022: Implementation updates
- September 15, 2022: Draft recommendations presented
- October 2022 (TBD): Members decide on prioritized recommendations
- November 1, 2022: Submit prioritized recommendations to the Legislature
- November 17, 2022: Decide on Statements of Support
- December 1, 2022: Submit Statements of Support to the Legislature
Children and Youth Behavioral Health Work Group (CYBHWG) Recommendations process

Stakeholders
The work group and its subgroups are made up of stakeholders, including:
- Young people who have received behavioral health services
- Their parents and other family members, and
- Organizations that provide behavioral health services and/or support children, youth, and families

Family Youth System Partner Round Tables
Regional FYSPTs provide a forum for families, youth, system partners, and communities to identify barriers to access in behavioral health and provide community-based approaches to addressing them. Issues and recommendations for legislative and/or system changes are passed on to the Youth and Young Adult Continuum of Care (YACC) subgroup.

Work Subgroups
CYBHWG subgroups who meet to identify issues affecting children, youth, and families’ access to behavioral health services and develop recommendations for legislative and system changes to address them.

There are currently 5 subgroups:
- Behavioral Health Integration Subgroup
- Prenatal to Five Relational Health Subgroup
- School-based Behavioral Health & Suicide Prevention Subgroup
- Workforce & Rates Subgroup
- Youth and Young Adult Continuum of Care Subgroup

Subgroup members represent:
- Hospitals
- Local governments
- Medical clinics
- Head Start
- Pediatricians
- School directors
- Physicians
- School counselors
- Managed care organizations
- School districts
- BH providers
- ESDs
- Psychologists
- University of Washington
- Social service providers
- Counselors
- Social workers
- Advocates
- State agencies
- Community supports
- Private insurers
- Family support organizations
- Legislators
- Youth and young adults
- Tribes
- Parents

Children and Youth Behavioral Health Work Group
Each fall, the CYBHWG decides which recommendations to move forward, submitting prioritized recommendations and statements of support for other groups’ initiatives to the Legislature and the Governor.

Subgroups make recommendations to the CYBHWG.
I came across this article in the Harvard Business Review called Do Your Diversity Initiatives Promote Assimilation Over Inclusion?...

Below is excerpt from the article.

“Along those lines, it’s vital to remember that authorship is ownership. We see many companies trying to create DEI programs to support a particular group without including this group in the process. It’s surprising how often this piece is missing.

To serve marginalized employees, you need to give them a say in these initiatives, design programs that consider their needs, and gain their buy-in. At the same time, ensure that your efforts don’t place the burden or responsibility solely on them. Be clear about your rules of engagement and clarify your efforts to avoid “spotlight stress” and tokenization. You need to ask:

- What role have the program participants played in the decision-making process?
- How did I determine the needs of the participants?
- How will I check in with the participants to determine whether the program was successful?

Diversity, equity, and inclusion aren’t realized as a result of a program or because of good intentions. If your organization’s process for professional development places the burden solely on the individual, it’s time to reexamine your approach and expectations. Just like the need to prioritize this work is unquestionable, so is the understanding that if employees change and their environments don’t, diversity-focused professional development won’t lead to progress.”
<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Bill</th>
<th>Budget</th>
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<tbody>
<tr>
<td>Increase Medicaid rates by 7%</td>
<td></td>
<td>✓</td>
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<tr>
<td>Develop a Strategic Plan for Washington’s children, youth, young adults and</td>
<td>2SHB 1890</td>
<td>✓</td>
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<tr>
<td>their families</td>
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<tr>
<td>Provide stipends for people with lived experience that participate in the</td>
<td>2SHB 1890</td>
<td>✓</td>
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<tr>
<td>work</td>
<td></td>
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<tr>
<td>Provide funds for eligible primary care clinics to establish behavioral</td>
<td></td>
<td>✓</td>
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<tr>
<td>health integration</td>
<td></td>
<td></td>
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<tr>
<td>Reimbursement for non-licensed staff in primary care clinics</td>
<td></td>
<td>✓</td>
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<tr>
<td>Develop a sustainable, alternative payment model for Certified Community</td>
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<td>✓</td>
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<td>Behavioral Health Clinics (CCBHC)</td>
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<td>Create a clinical supervision to reduce barriers to certification</td>
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<tr>
<td>Expand the Parent Support Warm Line to better support new and expectant</td>
<td>HB 1800</td>
<td>✓</td>
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<tr>
<td>parents</td>
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<tr>
<td>Provide grants to put more behavioral health clinicians in schools to meet</td>
<td></td>
<td>X</td>
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<tr>
<td>urgent needs of students</td>
<td></td>
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<td>Funding to ensure stable housing and care coordination for youth exiting</td>
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<td>✓</td>
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<td>inpatient settings</td>
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<tr>
<td>Convene stakeholders to design, further define, and implement a parent portal</td>
<td>HB 1800</td>
<td>✓</td>
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<tr>
<td>Invest in a communications/outreach position at HCA to share information</td>
<td>HB 1800</td>
<td>✓</td>
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<tr>
<td>with providers and families</td>
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<tr>
<td>Recommendation</td>
<td>Bill</td>
<td>Budget</td>
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<tr>
<td>Strengthen and fund behavioral health loan repayment program</td>
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<td>✓</td>
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<tr>
<td>Increase rates by 7% for services that are not covered by Medicaid</td>
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<td>✓</td>
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<tr>
<td>Provide bridge funding grants to community behavioral health agencies participating in federal certified community behavioral health clinic expansion</td>
<td></td>
<td>✓</td>
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<tr>
<td>Provide grants to nonhospital based community behavioral health providers receiving payment for Medicaid services through Medicaid MCO’s for immediate workforce retention</td>
<td></td>
<td>✓</td>
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<tr>
<td>Stabilize three infant and early childhood mental health consultation FTE’s</td>
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<td>✓</td>
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<tr>
<td>Expansion support for the School-Based Health Center (SBHC) program to increase access to behavioral health care in academic settings</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Increase funding to support staffing ratios for school nurses, social workers, psychologists, guidance counselors, safety staff and parent involvement coordinators</td>
<td>HB 1664</td>
<td>✓</td>
</tr>
<tr>
<td>Add coverage for partial hospitalization and intensive outpatient services for children under 18 of age the Medicaid state plan</td>
<td>SB 5736</td>
<td>✓</td>
</tr>
<tr>
<td>Certification of peer counselors to expand their use to more settings</td>
<td></td>
<td>X</td>
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</tbody>
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# Children and Youth Behavioral Health Work Group

## Additional 2022 legislation that aligns with work group goals

<table>
<thead>
<tr>
<th>Legislation objective</th>
<th>Bill</th>
<th>Budget</th>
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<tbody>
<tr>
<td>Funding to increase the number of Children’s Long-term Inpatient Program (CLIP), and rates for CLIP by 4.5%</td>
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<tr>
<td>Funding to increase Medicaid reimbursement rates for Parent Child Assistance program (PCAP)</td>
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<tr>
<td>Funding to align reimbursement (fee-for-service and managed care) for Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) services with the American Academy of Pediatrics’ Bright Futures guidelines</td>
<td>SB 5912</td>
<td>✓</td>
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<tr>
<td>Funding to establish a Lifeline for Independent Living program (Lifeline)</td>
<td>HB 1883</td>
<td>✓</td>
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<tr>
<td>Child assessment and training funding for the current version of the diagnostic classification: 0-5 classification system of mental health developmental disorders infant and early childhood</td>
<td>2SHB 1325</td>
<td>✓</td>
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<tr>
<td>Community supports for children (DDA) will increase staff by two full time employees to review and maintain the no-paid services caseload</td>
<td>SSB 5819</td>
<td>✓</td>
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<tr>
<td>Funding to contract for Youth IP navigator services in 4 regions, through clinical response teams</td>
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<td>✓</td>
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<tr>
<td>Fund a new facility in Vancouver to increase Behavioral Rehabilitation Services (BRS).</td>
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<td>✓</td>
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<tr>
<td>Funding to provide a semi-annual report of Behavioral Rehabilitation Service (BRS) placement and continuum</td>
<td></td>
<td>✓</td>
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<tr>
<td>Funds to coordinate and lead a multi-agency approach to youth suicide prevention and intervention.</td>
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<td>✓</td>
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<tr>
<td>Funds to increase wraparound with intensive services for youth ineligible for Medicaid as outlined in the settlement agreement</td>
<td></td>
<td>✓</td>
</tr>
<tr>
<td>Increase school funding allocations to increase school nurses, teacher librarians, social workers, school psychologists and counselors</td>
<td>HB 1664</td>
<td>✓</td>
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Update on 988 Work and the Crisis Response Improvement Strategy Committee

Children and Youth Behavioral Health Work Group (CYBHWG)

April 19, 2022
HB 1477, establishes the Crisis Response Improvement Strategy Committee, Steering Committee, and Subcommittees to make recommendations necessary to implement and monitor the progress of the 9-8-8 crisis hotline in Washington, and for the statewide improvement of behavioral health crisis response and suicide prevention services.

- **January 1, 2022:** First progress report to the Governor and Legislature, including results of comprehensive assessment of the current system and preliminary 988 funding recommendations

- **January 1, 2023:** Second progress report to the Governor and the Legislature, including recommendations related to crisis call center hubs, and final 988 funding recommendations

- **January 1, 2024:** Final report to the Governor and Legislature, including recommendations in 13+ areas outlined by the legislation
Overview of HB 1477 Steering Committee, CRIS Committee, and Subcommittees

Steering Committee
Role: Make Recommendations to the Governor and Legislature

CRIS Committee
Role: Advise the Steering Committee as it formulates recommendations

Subcommittees
Role: Provide professional expertise and community perspectives on discrete topics

| Tribal 988 Subcommittee | Credentialing and Training Subcommittee | Technology Subcommittee | Cross-System Crisis Response Subcommittee | Confidential Information Subcommittee | Rural & Agricultural Communities | Lived Experience |

* Five of the seven subcommittees are established by HB 1477. The Steering Committee established two additional subcommittees: Lived Experience, and Rural & Agricultural Communities
The Steering Committee approved the CRIS High-Level Workplan, which will provide an organizing framework for our work ahead to ensure the full continuum of crisis response.

- **Objective 1**: A place to contact – NSPL call centers
- **Objective 2**: Someone to come – Mobile crisis rapid response teams
- **Objective 3**: A place to go – Broad range of crisis stabilization services
- **Objective 4**: Pre- and Post-Crisis Care – Immediately upstream and downstream of crisis events
- **Objective 5**: Crisis system infrastructure and oversight

State agencies are responsible for implementation of this work, and the Steering Committee, CRIS and Subcommittees will provide recommendations.

- State agency partners will be providing regular and timely updates regarding implementation planning across the crisis response continuum to engage meaningful committee feedback.
<table>
<thead>
<tr>
<th>Date</th>
<th>Committee/Subcommittee Meetings</th>
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</table>
| 4/14  | Rural & Agricultural Communities Subcommittee  
(Input on the draft vision and principles; Begin discussion of opportunities to center equity) |
| 4/18  | Lived Experience Subcommittee  
(Input on the draft vision and principles; Personal stories to inform system-level recs) |
| 4/20  | Tribal 988 Subcommittee  
(Input on the draft vision; Tribal Consultation on the HB 1477 Technical and Operational Plan) |
| 4/20  | Confidential Information Compliance & Coordination Subcommittee  
(Understand NSPL call center privacy standards, federal and state privacy laws) |
| 4/21  | Credentialing and Training Subcommittee  
(Understand current federal NSPL call center staffing and training standards) |
| 4/25  | Technology Subcommittee  
(Review and Input on the HB 1477 Technical and Operational Plan) |
| TBD   | Cross System Collaboration Subcommittee (1st meeting 3/17)  
(Inform development of cross-system intersections and coordination) |
| 5/10  | CRIS Committee Meeting |
| 5/19  | Steering Committee Meeting |
CRIS and Steering Committee meeting dates, agendas, materials and other resources are available on the CRIS webpage - https://www.hca.wa.gov/about-hca/behavioral-health-recovery/crisis-response-improvement-strategy-cris-committees