

DIVISION XIII
CHILDREN'S MENTAL HEALTH AND WELL-BEING

Sec. 64. CHILDREN'S MENTAL HEALTH CRISIS SERVICES — PLANNING GRANTS.

1. The department of human services shall establish a request for proposals process, in cooperation with the departments of public health and education and the judicial branch, which shall be based upon recommendations for children's mental health crisis services described in the children's mental health and well-being workgroup final report submitted to the department on December 15, 2015.

2. Planning grants shall be awarded to two lead entities. Each lead entity should be a member of a specifically designated coalition of three to four other entities that propose to serve different geographically defined areas of the state, but a lead entity shall not be a mental health and disability services region.

3. The request for proposals shall require each grantee to develop a plan for children's mental health crisis services for the grantee's defined geographic area that includes all of the following:

a. Identification of the existing children's mental health crisis services in the defined area.

b. Identification of gaps in children's mental health crisis services in the defined area.

c. A plan for collection of data that demonstrates the effects of children's mental health crisis services through the collection of outcome data and surveys of the children affected and their families.

d. A method for using federal, state, and other funding including funding currently available, to implement and support children's mental health crisis services.

e. Utilization of collaborative processes developed from the recommendations from the children's mental health and well-being workgroup final report submitted to the department on December 15, 2015.

f. A recommendation for any additional state funding needed to establish a children's mental health crisis service system in the defined area.

g. A recommendation for statewide standard requirements for children's mental health crisis services, as defined in the children's mental health and well-being workgroup final report submitted to the department of human services on December 15, 2015, including but not limited to all of the following:

(1) Standardized primary care practitioner screenings.

(2) Standardized mental health crisis screenings.

(3) Standardized mental health and substance use disorder assessments.

(4) Requirements for certain inpatient psychiatric hospitals and psychiatric medical institutions for children to accept and treat all children regardless of the acuity of their condition.

4. Each grantee shall submit a report to the department by December 15, 2016. The department shall combine the essentials of each report and shall submit a report to the general assembly by January 15, 2017, regarding the department's conclusions and recommendations.

Sec. 65. CHILDREN'S WELL-BEING LEARNING LABS.

The department of human services, utilizing existing departmental resources and with the continued assistance of a private child welfare foundation focused on improving child well-being, shall study and collect data on emerging, collaborative efforts in existing programs engaged in addressing well-being for children with complex needs and their families in communities across the state. The department shall establish guidelines based upon recommendations in the children's mental health and well-being workgroup final report submitted to the department on December 15, 2015, to select three to five such programs to be designated learning labs to enable the department to engage in a multi-site learning process during the 2016 calendar year with a goal of creating an expansive structured learning network. The department shall submit a report with recommendations including lessons learned, suggested program design refinements, and implications for funding, policy changes, and best practices to the general assembly by January 15, 2017.

Sec. 66. DEPARTMENT OF HUMAN SERVICES — ADDITIONAL STUDY REPORTS.

The department of human services shall, in consultation with the department of public health, the mental health and disability services commission, and the mental health planning council, submit a report with recommendations to the general assembly by December 15, 2016, regarding all of the following:

1. The creation and implementation of a statewide children's mental health crisis service system to include but not be limited to an inventory of all current children's mental health crisis service systems in the state including children's mental health crisis service system telephone lines. The report shall include recommendations regarding proposed changes to improve the effectiveness of and access to children's mental health crisis services.

2. The development and implementation of a children's mental health public education and awareness campaign that targets the reduction of stigma for children with mental illness and that supports children with mental illness and their families in seeking effective treatment. The plan shall include potential methods for funding such a campaign.

Sec. 67. CHILDREN'S MENTAL HEALTH AND WELL-BEING ADVISORY COMMITTEE. The department of human services shall create and provide support to a children's mental health and well-being advisory committee to continue the coordinated efforts of the children's mental health subcommittee and the children's well-being subcommittee of the children's mental health and well-being workgroup. Consideration shall be given to continued service by members of the children's mental health and well-being workgroup created pursuant to 2015 Iowa Acts, ch. 137, and representatives from the departments of human services, public health, and education; the judicial branch; and other appropriate stakeholders designated by the director. The advisory committee shall do all of the following:

1. Provide guidance regarding implementation of the recommendations in the children's mental health and well-being workgroup final report submitted to the department on December 15, 2015, and subsequent reports required by this Act.
2. Select and study additional children's well-being learning labs to assure a continued commitment to joint learning and comparison for all learning lab sites.