



Region 1 Action Council Meeting Notes.

Location: via Zoom.

Date & Time: February 27, 2024 1:30pm - 3:00pm.

3:00pm - 4:30pm.

Council Members present: Katie Janssen, Brittney Brokaw, Cassie Delaney, Sarah Farha, Carol Harlow, Molly Dunn-Steinke, Rosemary Grace, Tina Combs.

Welcome/Icebreaker: Attendees were reminded of the importance of the community agreements, especially when discussing sensitive topics such as mental health and encouraged to take breaks from the discussion as needed. The importance of confidentiality was emphasized. A light hearted icebreaker asked participants to share their preference for time travel.

Mental and Behavioral Health Landscape: Data was presented on the ratio of pediatricians to children in their region and the importance of parent-child relationship. The challenges faced by parents in accessing developmental screenings and other services were discussed, including long wait times and lack of options. Council members discussed mental health issues within the context of cultural standards and norms, particularly among males of color, and the need to destigmatize these issues. They also addressed the fear among parents of their children's impulsive actions leading to involvement from Child Protective Services (CPS).

The severe shortage of mental health professionals in Illinois, which is affecting the accessibility of mental health services for children. Results of Regional survey data highlighted that the waitlist for services can extend up to 4 to 6 months. Concerns expressed over the over-reliance on medication due to the mental health workforce shortage, and the potential risks associated with this trend. One member mentioned that the trend of prescribing medication and the types of adult drugs prescribed to children have increased. One Council member who is a mental health practitioner discussed the problem that people were traveling two hours to either St. Louis, Iowa City, or Springfield to see specialists - two of these three options are out of state. Discussion of the challenges faced by families dealing with childcare and referral services with an emphasis on the need for empathy and support for families struggling to find the right program for their child. The process to obtain services is time-consuming for parents, who often have to repeat their story and switch resources. Some conversation about the Infant and Early Childhood Mental Health Consultant model - hands-on approach, which includes brief information, surveys, meetings, observations, and discussions with teachers and parents.

Guest Speaker: Cassie Delaney (Project Director, Crisis Systems of Care, Memorial Behavioral Health):

Cassie discussed the growing need for mental health services, particularly for children under 8 years old. She highlighted the prevalence of trauma and stress-related disorders in this age group and the challenges of retaining trained personnel to provide mental health support. Cassie also noted the rise in ADHD and other attention disorders among young people. She stressed the importance of partnerships with schools and the need for services that accommodate working parents. Cassie also shared data from SAMSA, indicating the increasing need for mental health services, and identified primary care physicians, school social workers, self-referral walk-ins, and inpatient admissions as common referral sources for this age group.

She also highlighted the need for crisis intervention services, especially in schools and daycares, and the difficulties that staff often encounter in managing behavioral issues. Cassie stressed the importance of understanding insurance coverage, as it can significantly affect the cost and availability of mental health services. She noted that many providers offer sliding scales based on income and encouraged individuals to explore financial support options. Lastly, Cassie underscored the necessity of ensuring that children have insurance coverage, not only for their mental health but also for their overall well-being.

Mobile Crisis Response Service in Illinois: Cassie discussed the mobile crisis response service available in eight counties in Illinois, which is a state-initiated program aimed at reducing the number of individuals visiting the ER for mental health needs. She explained that this service, which includes specialized training for crisis specialists, is available to all ages and operates 24/7. Cassie also highlighted the 988 service, a nationwide option that connects to local mobile crisis response teams if an in-person assessment is needed. She then outlined the treatment process for mental health issues, emphasizing the importance of screening tools, family involvement, goal setting, and follow-up calls.

Consent, Challenges, and Solutions in Mental Health Services: Cassie discussed the importance of consent for young individuals, particularly those aged 12 and above, in accessing mental health services. She emphasized the legal protection this affords for discussing sensitive issues and the need for services even if parents do not consent. Cassie also highlighted the challenges associated with providing specific services such as case management and handling cases of child abuse. She also touched on the scarcity of mental health professionals in Illinois, with a lower provider to population ratio than the national average, leading to longer wait times and higher turnover rates among clinicians. Cassie suggested several options for families to consider in the interim, such as primary care support, telehealth, and school-based programs.

Mental Health Provider Shortages Discussion: The issue of provider shortages in mental health services, particularly in rural areas was a point of discussion. Cassie explained that short-term support services are typically funded by insurance or Medicaid billing. These services are provided by behavioral health clinicians, who only require a bachelor's degree. Regionally, short term supports such as the use of Behavioral Health Consultants (clinicians embedded in pediatrician or any PCP office) to provide coordinated support and consultation for families as they navigate the child mental health landscape are currently used by some providers. Most Council members voiced support for the model with the caveat that proper training is crucial. The model could be advantageous in rural areas where mental health stigma is high. Concerns were raised about the possibility of the model being used by individuals with political, religious, or cultural agendas.

They also discussed the impact of provider shortages, including increased burden on primary care physicians, impacts on vulnerable populations, over-reliance on medication, and economic impacts on families. Council members expressed interest in spreading awareness about available resources such as community mental health centers and mobile crisis response units. Council members emphasized the need for changes in the education sector, particularly in addressing teacher burnout and classroom sizes when addressing these issues and providing support for families. The existence of stigmas surrounding these topics and the difficulties in engaging some parents in support programs was noted by all Council members. Another potential issue is salary scales and the emotional impact of the work for ECEC providers. One idea to address this is to offer reflective supervision to teachers, as practiced by the Ericsson Institute program, as a form of support. Also, the possibility of creating a toolkit for home visitors and teachers to support families. Bridget mentioned the difficulties in finding mental health first aid training in Illinois, specifically for children under the age of 10 years. This is another resource that could improve outcomes for professionals in the ECEC field.

Updates on Regional Work: Time did not allow for this agenda item, but updates will be provided at the next meeting.

Announcements: Next meeting is March 12, 2024 when Molly Dunn-Steinke will present information about the I/ECMCH model in Illinois from her perspective as a private and public Infant and Early Childhood Mental Health Consultant in the state of Illinois.