

FY 16 ANNUAL REPORT TO THE GOVERNOR

MAKING CHILDREN'S MENTAL HEALTH A PRIORITY IN ILLINOIS



Dear Governor Rauner,

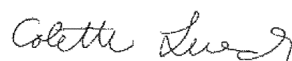
On behalf of the members and partners of the Illinois Children's Mental Health Partnership (ICMHP), we are pleased to present you with our Eleventh Annual Report. The FY16 report serves as a critical reminder of the essential role that ICMHP plays in Illinois as the only public/private partnership and collective change agent working to support comprehensive children's mental health. Since the passage of the Children's Mental Health (CMH) Act in 2003, which created ICMHP to develop and monitor the implementation of the Children's Mental Health Strategic Plan (2005), Illinois has served greater numbers of children at younger ages and earlier stages of need, reduced fragmentation of services, and enhanced interagency collaboration.

ICMHP has relied primarily on State funding to maintain its structure and support public/private partners to implement innovative strategies and pilot programs. For example, ICMHP is most known for its collaborative efforts to: design and implement Social/Emotional Learning Standards in Illinois schools; develop and implement a best practice model of Infant and Early Childhood Mental Health Consultation – work that has been recognized nationally; support community-based linkage to services for youth discharged from correctional facilities to reduce rates of recidivism; and, reduce stigma through the statewide Say It Out Loud public awareness campaign. ICMHP's dedicated members, partners, and volunteers continued to carry our vision for comprehensive children's mental health forward in FY16 despite the challenging funding circumstances. We recognize our current funding model does not allow us to maintain ICMHP's broader functions and purpose beyond FY17. **Therefore, it is critical that we secure a minimum investment of \$211,750 from the State to support ICMHP's structure and mandate under the CMH Act.**

The creation of the Cabinet on Children and Youth (Cabinet) and Illinois' Health and Human Services (HHS) Transformation efforts present timely opportunities to achieve the State's vision of a comprehensive children's mental health system. It is clear that this Administration recognizes the importance of children's mental health and is working to enhance interagency collaboration to maximize Illinois' resources, which will lead to better outcomes for children and their families. Although children's mental health was not selected as one of the three project-based initiatives of the Cabinet, there was agreement among Cabinet members that children's mental health remains a critical public health issue. ICMHP provides the State with a well-established platform for children's mental health initiatives to be coordinated and for progress to be communicated. Moreover, through ICMHP, Illinois can leverage our significant accomplishments, our expertise in children's mental health, and our public/private partnership.

ICMHP is a vehicle that communicates, collaborates, and unites stakeholders around shared goals for a comprehensive children's mental health system in Illinois. We recognize that these challenging times coupled with the dramatic changes occurring across our State systems present opportunities for new ways of thinking, collaborating, and improving outcomes. As the only public/private partnership committed to children's mental health in Illinois, ICMHP is in a unique position to support the vision and momentum created by the HHS Transformation efforts and the Illinois Cabinet on Children and Youth. With the State's support, we can fully embrace these changes, which we know will lead to brighter and healthier futures for Illinois children and their families.

Sincerely,



Colette Lueck
Chair, ICMHP

Illinois Children's Mental Health Partnership FY16 Members

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Colette Lueck

Partnership Members

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State Representative

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Illinois Department of Human Services, Division of Mental Health

Christina Bruhn

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Veronica Martinez

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ACKNOWLEDGEMENTS

The Illinois Children’s Mental Health Partnership (ICMHP) would like to thank its members, partners, volunteers, and advocates who continue to engage in ICMHP’s work during a period of tremendous strain and fiscal hardship in the State of Illinois. Through the unwavering commitment and perseverance of those who champion ICMHP’s vision for comprehensive children’s mental health, we were able to navigate FY16 – a historic fiscal year that tested us all.

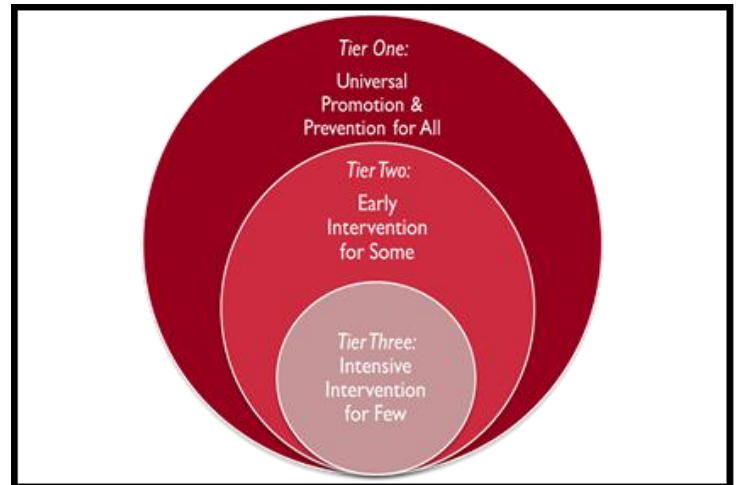
We are especially grateful for the leadership, expertise, and time that each of our ICMHP Committee Chairs dedicated toward collectively creating a brighter future for Illinois children and their families. We would also like to express our deep appreciation to the Irving Harris Foundation and the Governor’s Office of Early Childhood Development for the many ways they have gone above and beyond to support ICMHP and advance Illinois’ access to and cross-system support for infant/early childhood mental health consultation.

ILLINOIS CHILDREN'S MENTAL HEALTH PARTNERSHIP

Who We Are

The Illinois Children's Mental Health Partnership (ICMHP) is the only statewide, public/private partnership of policymakers and advocates in Illinois **committed to improving the scope, quality, and access of mental health programs, services, and supports for children and their families.**

ICMHP takes a broad look at children's mental health by using a public health approach. Our members and partners believe that a comprehensive children's mental health system must be built on a foundation of quality prevention, promotion, early intervention/identification, and treatment services and supports.



Why We Exist

ICMHP was created by the Children's Mental Health Act in 2003 to convene the child-serving state agencies, parents, youth, policymakers, providers, and advocates to identify needs and gaps, and recommend innovative solutions to improve children's mental health in Illinois. ICMHP is responsible for developing and monitoring the implementation of the Illinois Children's Mental Health Plan, which was implemented in 2005.

ICMHP's top three strategic priorities are to:

1. Increase public awareness and understanding of children's mental health needs
2. Promote collaborations and culturally inclusive partnerships
3. Increase mental health promotion, prevention, early intervention, and treatment services

NEW OPPORTUNITIES

The creation of the Governor's Cabinet on Children and Youth and the Illinois Health and Human Services (HHS) Transformation efforts present timely opportunities to accelerate improvement of children's mental health. By leveraging ICMHP's accomplishments and public/private partners, Illinois can build on over a decade of work and maximize existing resources to achieve shared priorities and goals. In the immediate future, we can work collectively to advance the following efforts:

- Increase stakeholder participation in statewide efforts to transform the children's mental health system such as, but not limited to, the Illinois 1115 Demonstration Waiver, Healthy Illinois 2021, and the Irving Harris Foundation's Action Plan to improve infant and early childhood mental health in Illinois.
- Facilitate better coordination and integration across child-serving systems that deliver children's mental health prevention, early intervention and treatment services to improve outcomes and reduce costs.
- Build a qualified workforce equipped to address children's mental health through capacity-building strategies that utilize evidence-based practices and leverage existing technical assistance resources.
- Reach children and their families at younger ages and earlier stages of need by implementing a universal, high quality infant/early childhood mental health consultation model in Illinois.

HOW WE CAN HELP

In the coming fiscal year, ICMHP will focus on an intentional alignment of the Illinois Children’s Mental Health Strategic Plan, and ICMHP’s funding, activities and structure to advance HHS Transformation efforts and the goals and project-based work of the Governor’s Cabinet on Children and Youth. For example, the crosswalk below illustrates ways ICMHP’s accomplishments and experience can support the Cabinet’s goals. **Indicates activity occurred in FY16.*

Cabinet Goals for Illinois Children

Alignment with the Illinois Children’s Mental Health Partnership’s Accomplishments

HEALTHY

- ▶ Raised awareness of children’s mental health and reduced stigma through the statewide Say It Out Loud public awareness campaign*
- ▶ Championed the passage of the Perinatal Mental Health Disorders Prevention and Treatment Act
- ▶ Developed service descriptors for the Illinois Department of Healthcare and Family Services’ expansion of the Medicaid-funded home and community service array
- ▶ Supported the implementation of the Illinois DocAssist Program: pediatric primary care behavioral health consultation

SAFE

- ▶ Improved community-based linkages to services for youth discharged from correctional facilities
- ▶ Created educational materials for families to be effective advocates for youth in the juvenile justice system
- ▶ Implemented early intervention programming for children of incarcerated parents
- ▶ Integrated mental health consultation into the Maternal, Infant and Early Childhood Home Visiting Program*
- ▶ Strengthened trauma-informed systems*

WELL-EDUCATED

- ▶ Implemented the Illinois Social and Emotional Learning (SEL) Standards
- ▶ Designed and implemented a cross-system Mental Health and School Collaboration Model
- ▶ Increased capacity of afterschool providers to recognize and respond to the mental health needs of children*
- ▶ Created School and Community Partnership Guidelines

SELF-SUFFICIENT

- ▶ Implemented regional family leadership structure to empower parents of children with mental health concerns
- ▶ Built capacity for parent/caregiver support in the children’s mental health system*
- ▶ Created tools to help parents effectively navigate residential treatment services
- ▶ Advanced mental health consultation practices in Illinois, reaching children and their families at younger ages and earlier stages of need*

CROSS-SYSTEM COLLABORATION

- ▶ Participated on the Irving Harris Foundation’s Action Plan Leadership Team and now provides leadership for the associated Mental Health Consultation Initiative*
- ▶ Convened regular ICMHP and working committee meetings*
- ▶ Co-Chaired the Statewide Children’s Services Sub-Committee

Investment in Children’s Mental Health Priorities

Illinois has a long history of investing in the strategic priorities of the Children’s Mental Health Strategic Plan (2005). In FY06, ICMHP first secured significant public and private investments and in-kind services totaling over \$750,000 from Illinois state agencies, corporations and foundations to establish and support ICMHP’s basic operational structures and begin implementation of select priorities from the Strategic Plan. Since that time, public investments specifically designated to support these priorities peaked at \$9 million in FY 08 and FY09, and over time decreased to \$3 million in FY15, and finally dropped to \$0 by FY16. ICMHP has weathered fiscal uncertainty over the years, but FY16 has proved to be the most difficult year by far.

With the loss of State funding dedicated to the Children’s Mental Health Strategic Priorities, the capacity of the State to address children’s mental health in a comprehensive fashion has been dramatically impacted. For example, in FY16, Illinois lost the ability to scale a number of collaborative, statewide initiatives such as, but not limited to, the Children’s Mental Health Public Awareness Campaign, Early Intervention and Treatment Services for Justice Involved Youth, the Illinois Childhood Trauma Coalition, and Regional Family Leadership and Support Activities. This loss of funding also challenged our ability to carry out ICMHP’s broader purpose and ability to monitor statewide mental health prevention, early intervention and treatment strategies that support all children and youth, from birth to 21 years of age. In addition, ICMHP could not bring pilot projects to scale and discontinued support for innovative children’s mental health initiatives through targeted grant programs that reach children at early ages and stages of need. Consequently, ICMHP’s FY16 Annual Report looks very different compared to previous years. Moreover, it has become overwhelmingly clear that without a new source of State funding to support ICMHP’s broader mission and purpose, ICMHP will no longer be able to fulfill its mandate under the Children’s Mental Health Act.

In spite of these significant funding challenges, ICMHP was able to maintain and expand its infant/early childhood mental health consultation (I/ECMHC) work in FY16. This work endured Illinois’ dire fiscal environment because of cross-system endorsement for I/ECMHC and generous federal and private funding. As a result, the FY16 Annual Report focuses almost exclusively on I/ECMHC and related funding. Although ICMHP’s I/ECMHC work in FY16 was progressive and nationally recognized, we cannot forget how these funding constraints have severely limited ICMHP’s broader functions and reach across the State.

In FY16, we recognize that these challenging times coupled with the dramatic changes occurring across our State systems present opportunities for new ways of thinking, collaborating, and improving outcomes. As the only public/private partnership committed to children’s mental health in Illinois, ICMHP is in a unique position to support the vision and momentum created by the HHS Transformation efforts and the Governor’s Cabinet on Children and Youth. We embrace these changes, which we know will lead to brighter and healthier futures for Illinois children and their families.

FISCAL YEAR 2016 HIGHLIGHTS

Infant/Early Childhood Mental Health Consultation

Infant and Early Childhood Mental Health Consultation (I/ECMHC) is a multi-level, proactive approach that focuses on supporting and enhancing children’s social emotional development and overall health and well-being. I/ECMHC teams multi-disciplinary infant/early childhood mental health professionals with those who work with young children and their families in a wide variety of settings.

For over a decade, ICMHP has led several mental health consultation initiatives in home visiting, afterschool, and early childhood settings throughout Illinois. ICMHP’s Early Childhood Mental Health Consultation Project and the

Infant/Early Childhood Mental Health Consultation (continued)

Healthy Families Illinois/Parents Too Soon Consultation Projects were discontinued in FY16 due to loss of State funding. Fortunately, the Irving Harris Foundation and the Governor's Office of Early Childhood Development have recognized ICMHP's success in demonstrating mental health consultation as a cost-effective prevention and early intervention strategy. As a result, ICMHP secured private support to advance I/ECMHC practices throughout Illinois. In addition, ICMHP has been able to access federal funding through the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program to expand its delivery of I/ECMHC services to home visiting programs throughout the State. **Public and private support has been critical to sustain and expand ICMHP's I/ECMHC work in FY16.**

Mental Health Consultation Initiative

In 2014, the Irving Harris Foundation recognized the importance of infant and early childhood mental health and coordinated a statewide planning process to build on the current strengths and close gaps in the I/ECMH system. The Foundation worked with state leaders to develop the *Illinois Action Plan to Integrate Early Childhood Mental Health into Child and Family Serving Systems, Prenatal through Age 5 (Action Plan)*. During this process, there was strong consensus among stakeholders that I/ECMHC is an effective and necessary strategy to improve mental health outcomes for young children and families. The Foundation determined the timing was right to design a best-practice I/ECMHC model and workforce development plan that allows for adaptation and sustainability across all early childhood serving systems; this work has become known as the Mental Health Consultation (MHC) Initiative in Illinois. ICMHP was identified as a natural leader to spearhead the MHC Initiative.



The MCH Initiative has three distinct phases. Launched in September 2015, Phase I of the initiative included: conducting a scan of the current I/ECMHC workforce and assessing the readiness of the workforce across systems to provide increased I/ECMHC services; establishing a Leadership Team of public and private partners to provide strategic oversight and guidance as well as to explore opportunities to collaborate and align resources that could support I/ECMHC in their systems; developing an I/ECMHC model that will be flexible enough to work in multiple systems, and ultimately lead to better outcomes for young children, families and the programs serving them; and, creating a theory of change for a sustainable, cross-sector, public/private partnership to expand access to I/ECMHC in Illinois. The Irving Harris Foundation, the Illinois Children's Healthcare Foundation, and an anonymous donor collectively supported Phase I's budget of \$67,785.

Phase II began in May, 2016 with a projected budget of \$324,160. From May, 2016 to April, 2017, phase II will focus on the pilot and evaluation design of the I/ECMHC model as well as the creation of a workforce development plan. The workforce development plan will build and sustain the I/ECMHC workforce across multiple systems through expansion of reflective learning groups, coaching/mentoring support, other professional development opportunities, and increased support for consultant credentialing and certification. ICMHP will continue to work with the Leadership Team to create a public/private plan for cross-system support of the I/ECMHC workforce, and will engage evaluation consultants to design both a systems and outcome evaluation plan that will measure the impact of the Illinois I/ECMHC model pilot in Phase III.

IIECMHC and the Maternal, Infant and Early Childhood Home Visiting Program

ICMHP's mental health consultation services provided to the Maternal, Infant and Early Childhood Home Visiting (MIECHV) Program were expanded in FY16, which impacted approximately **3,920 children and families**. ICMHP partners with the Governor's Office of Early Childhood Development to offer mental health consultation services to 13 Illinois communities whose home visiting programs receive MIECHV funding. The goal is to increase the capacity of MIECHV-funded home visiting program staff to identify and address the mental

"Infant Early Childhood Mental Health Consultation (IIECMHC) has been a vital service funded by MIECHV in Illinois. It is a key component to support and build capacity of home visiting programs in addressing the needs of multi-system issue families with young children. It allows programs to better respond to the mental health needs of young children, and the mental health of parents and caregivers."

— Teresa Kelly, Project Director, Strong Foundations Partnership - Governor's Office of Early Childhood Development

health needs of the young children and families, and to help instill reflective practices into their organizational culture. In addition to those 13 communities with 26 home visiting sites, mental health consultation is offered to 41 other home visiting programs through a maternal depression prevention curriculum training and consultation to support that work. In FY16, ICMHP received \$332,579 through MIECHV to support and coordinate mental health consultation services and training.

In addition, MIECHV communities receive a monthly reflective learning group designed specifically for supervisors of the programs. The supervisors of each home visiting site are offered the opportunity to gather together and reflect on issues that arise in the course of their work. MIECHV consultants also offer evidence-based trainings including the Mothers and Babies curriculum, the 4 Ps "I am Concerned" by Dr. Ira Chasnoff, and Futures Without Violence.

Child Welfare Project

With support through MIECHV, ICMHP is participating in a Child Welfare Project workgroup led by the Early Learning Council to identify strategies to better support the needs of young women involved in the child welfare system and are now either pregnant or parenting. The group is working with researchers to design a home visiting model that will be piloted in approximately 6 sites around the state. The model will include mental health consultation for home visitors serving this very specific population. ICMHP has been chosen to provide mental health consultation during the pilot.

Gateway to Opportunity Registry

In early 2016, ICMHP was approved as an Authorized Entity of the Gateways to Opportunity Registry. Gateways to Opportunity, managed by the Illinois Network of Child Care Resource and Referral Agencies (INCCRRA), is a statewide professional development support system designed to provide guidance, encouragement, and recognition to individuals and programs serving children, youth, and families. As an Authorized Entity, approved trainings offered by ICMHP staff and consultants are now eligible for Gateway credits. ICMHP's participation in the Gateway system has formalized its training processes and procedures, and has enhanced its ability to track performance and training outcomes. MIECHV funding supports ICMHP's ability to maintain its status as an Authorized Entity and manage trainings through the Gateway system.

National I/ECMHC Work

ICMHP is fortunate to work with the highly sought after Illinois-based I/ECMHC subject-matter expert, Ms. Linda Delimata, ICMHP's Mental Health Consultation Coordinator. Ms. Delimata was selected to work with national infant/early childhood mental health leaders to inform the work of the newly established Center of Excellence for I/ECMHC through the Substance Abuse and Mental Health Services Administration and other federal partners. This opportunity has brought Illinois' infant/early childhood mental health work to the attention of national leaders. It has also connected Illinois with national experts and technical assistance to inform ICMHP's Mental Health Consultation Initiative.

Ms. Delimata and several I/ECMH consultants were also involved in the design of the online Infant/Early Childhood Mental Health Consultation (I/ECMHC) professional development tool, which launched in 2016. This professional development resource was created through a partnership between Georgetown's Early Learning Center and Head Start. The tool offers information on the core competencies and components of I/ECMHC, and access to numerous resources and case examples that inform best practice and skill development. The new tool will enrich the work of infant/early childhood mental health consultants throughout the nation. To learn more about this valuable tool, visit: <https://eclkc.ohs.acf.hhs.gov/hslc/tta-system/health/mental-health/ec-mental-health-consultation/mh-consultation-tool>.

ICMHP Pilot Projects

Afterschool Mental Health Consultation Project

ICMHP partnered with the Illinois Collaboration on Youth (ICOY) to provide onsite mental health consultation to afterschool programs participating in ICOY's Building Resiliency Using a Trauma Informed Approach Project. Combining efforts of ICOY's trauma-informed capacity building services and ICMHP's mental health consultation services, which were supported by \$12,500 in private funds, ICOY and ICMHP increased the ability of direct service staff members and supervisors to use skills such as reflective supervision and reflective group learning to promote the positive mental well-being of the children and families served while using a trauma-informed lens.

Parent and Caregiver Support

Support groups are a cost-effective way to improve parents' and caregivers' skills and resilience, and improve the lives of children and families. Between January, 2015, and January, 2016, ICMHP worked with 11 community-based organizations to support the development and facilitation of support groups for parents and caregivers of children and adolescents with behavioral health needs. Parents/caregivers who participated in these groups were asked to complete a survey about their group experience. Below is a summary of the responses from 53 group participants.

- 98% gained skills or resources to help their child
- 98% learned to be better advocates for their child
- 98% feel less isolated because of their group

ICMHP's parent and caregiver support and family leadership efforts were discontinued in FY16 due to State funding constraints.

Public Awareness

New Website & Family Help Guide

ICMHP relaunched its website at the beginning of March, 2016, and in the first month it received over **1000 unique visitors** and over 1500 total visits. This is a 15% increase in unique visitors compared to the same period last year. The updated website allows ICMHP to create new ways to support ongoing communication and education about children's mental health in Illinois. For example, ICMHP's website is now mobile-friendly, allowing easy access to the website from any mobile device.



One of the most significant additions to the website is the Family Help Guide. This section of the site includes educational materials and resources to support parents regarding children's mental health. We have also added a special section to the Guide that highlights personal stories from parents called, "A Parent's Voice" – another way we continue to address stigma and offer hope.

Say It Out Loud



With volunteer support, ICMHP maintained participation in the 2016 Say It Out Loud (SIOL) Poster Contest. **Over 1540 votes were cast**, with 6 winners chosen from grades 4th – 12th. Winners were announced on the ICMHP website on Children's Mental Health Awareness Day, May 5, 2016. Although ICMHP is actively exploring ways to sustain the SIOL campaign, it is likely that the SIOL poster contest will be discontinued in FY17. **Illinois is at risk of losing this important effort to reduce the stigma surrounding mental health.**

Illinois Childhood Trauma Coalition

Since 2005, ICMHP has worked closely with the Illinois Childhood Trauma Coalition (ICTC) to educate the public on the impact of trauma, as well as to advocate for systems-level change to promote trauma-informed practice. In the past, nearly 12% of ICMHP's allocation from the Medicaid Trust Fund had been used to support ICTC's work. With the elimination of ICMHP's core source of funding in FY16, ICTC was significantly impacted. As a result, ICMHP and ICTC maximized existing resources by sharing staffing support from ICMHP's Program and Administrative Associate in FY16 as ICTC managed its transition to its new home at Ann and Robert H. Lurie Children's Hospital. ICMHP and ICTC are in the process of exploring new and strategic ways to advance trauma-informed practices throughout Illinois.

Conferences and State Meetings

ICMHP was a voice for children's mental health at over 15 conferences and statewide meetings in FY16, including ICMHP's Annual Mental Health Consultant Retreat, the State Health Improvement Plan Behavioral Health Action Team, and the HHS Transformation Consumer Advocacy Work Group. These meetings enabled ICMHP to raise awareness of children's mental health and the work of ICMHP, reaching approximately 2,500 professionals, students, parents, caregivers, and advocates.

ICMHP Committees

In FY16, the number of ICMHP committees was significantly reduced due to loss of funding. The work of the Advocacy and Early Childhood Committees was maintained to monitor and provide recommendations regarding Illinois' changing children's mental health landscape and ICMHP's I/ECMHC work. Both committees also promoted the report published in August, 2015 by ICMHP's Children's Behavioral Health Integration Initiative (CBHII). CBHII's Report on Early Intervention for Children and Youth with Emergent Social, Emotional, or Mental Health Concerns and the complimentary Early Intervention Framework, provides comprehensive recommendations and maps the essential work of building capacity and expanding services over time and across child-serving systems. Lastly, the work of the School-age Policies and Practices Committee was put on hold in FY16. Previously, this committee led several large scale initiatives to enhance school and community partnerships and build the capacity of school mental health professionals. ICMHP is in the process of adjusting its committee structure to organize its members and partners in a way that supports Illinois' HHS Transformation efforts and the work of the Governor's Cabinet on Children and Youth.

Screening, Assessment and Support Services (SASS) Program

The Children's Mental Health Act of 2003 required the Department of Healthcare and Family Services (HFS) to develop protocols for screening and assessing children and youth prior to any admission to an inpatient hospital that is to be funded by the Medicaid program. In response to this requirement, HFS, in collaboration with the Departments of Children and Family Services (DCFS) and Human Services (DHS), developed the Screening, Assessment and Support Services (SASS) program. The SASS program model is built upon the core values and principles of Systems of Care, which calls for an organized service system that emphasizes comprehensive, individualized, and culturally competent services provided in the least restrictive environment. The model calls for the full involvement of families in treatment and planning, interagency collaboration, a strengths-based approach, and care coordination at the community level to address children's needs in all the domains of their interactions.

Since July 1, 2004, the SASS program has operated as a single, statewide system serving children and youth who are experiencing a mental health crisis and whose care requires public funding from one of the three Departments. SASS operates 24 hours a day, 7 days a week, and is responsible for providing: crisis intervention services; facilitating inpatient psychiatric hospitalization, when clinically appropriate; and, providing case management and treatment services following a crisis event to children and youth served by the publicly funded fee-for-service children's mental health system. SASS features a centralized point of intake known as the Crisis and Referral Entry System (CARES) Line. The CARES Line receives referrals for children and youth in crisis, determines whether the youth's level of acuity meets the threshold of crisis, and refers the call to the most appropriate community resource, which may include the dispatch of a SASS crisis responder. Historically, it was believed that the SASS program would cost-avoid approximately \$19 million dollars annually from unnecessary inpatient hospital fee-for-service Medicaid expenditures.

SASS Program (continued)

As the State's Medicaid infrastructure began to evolve in Fiscal Year 2015 through the introduction of care coordination and managed care service delivery systems, the State's approach to crisis response also had to evolve. Many of the children and youth traditionally served by the SASS program are now being served by Mobile Crisis Response programs administered and funded by the various HFS-contracted managed care entities. Additionally, HFS, DCFS and DHS have piloted a new model of Mobile Crisis Response within the context of the Choices Demonstration Project located in Champaign, Ford, Iroquois, and Vermilion counties – aligning mobile crisis response with care coordination. Finally, in Fiscal Year 2016 the SASS program was enhanced to become more accountable for children and youth enrolled in the Individual Care Grant (ICG) program.

Although ICMHP is not directly involved in SASS activities, the CMH Act requires ICMHP to include the SASS program's cost-savings in its annual report. In light of the changes to Illinois' healthcare service delivery models – changes in the infrastructure of crisis response from SASS to Mobile Crisis Response and the ongoing evolution of the State's fee-for-service SASS program – HFS is unable to provide an annual cost savings or cost avoidance figures. However, the following utilization figures are available:

| FY2016 CARES Calls | |
|---------------------------|---------|
| Total Calls to CARES | 125,153 |
| Total Crisis Calls | 117,923 |

| FY2016 SASS Utilization | |
|--|--------|
| Children/Youth Experiencing a Crisis Event | 16,217 |
| Episodes of Crisis (90 Day Spans) | 18,245 |

| FY2016 Mobile Crisis Response Utilization in Managed Care as Referred by CARES | |
|---|--------|
| Children/Youth Experiencing a Crisis Event | 10,967 |
| Episodes of Crisis in Managed Care | 12,017 |

| ICG Enrollment Data on 6/30/2016 | |
|---|-----|
| ICG Eligible | 153 |
| ICG Youth in Residential Care | 59 |

PROTECTING OUR PROGRESS

ICMHP has the experience and the public/private partnership needed to put children and their families at the center of the children's mental health service delivery system. However, ICMHP's ability to serve as a vehicle that communicates, collaborates, and unites stakeholders around new shared goals for a comprehensive children's mental health system in Illinois depends on new State funding. To that end, ICMHP requests \$211,750 from the State of Illinois to maintain compliance with the minimum requirements of the Children's Mental Health Act and to continue to serve as a change agent for children's mental health system transformation.

The table below demonstrates how ICMHP would use the State's investment to align its core functions to support HHS Transformation efforts and the goals and project-based work of the Governor's Cabinet on Children and Youth (Cabinet). There are also immediate opportunities to align ICMHP's current infant/early childhood mental health consultation (I/ECMHC) work with the Cabinet's priority project related to improving Illinois' early childhood services and supports and the I/ECMHC priority initiative identified in Illinois' 1115 Demonstration Waiver application. These are both critical and specific opportunities for ICMHP to help the State maximize its investment in infant and early childhood and family mental health, which will lead to improved outcomes and significant cost-savings across our child-serving systems.

| Proposed Activities to align with HHS Transformation and Children's Cabinet Goals | Projected Revenue Needed |
|--|---------------------------------|
| ICMHP Staffing for CMH Act mandated activities | \$150,000 |
| Fiscal Sponsor Fee (10% of direct costs) | \$19,250 |
| Children's Mental Health Public Awareness Campaign | \$25,000 |
| Statewide Communications & Website | \$12,500 |
| Children's Mental Health Summit | \$5,000 |
| | |
| Total | \$211,750 |

RESOURCES FOR FURTHER INFORMATION

This Annual Report highlights some of the FY16 activities of the Illinois Children’s Mental Health Partnership (ICMHP) and its member agencies and organizations. Many more activities related to children’s mental health are occurring within Illinois, too numerous for this report. To learn about additional activities that are advancing children’s mental health in our State, please contact representatives from the agencies listed below. The following websites are also available to track Illinois’ behavioral health transformation efforts:

HHS Transformation: <https://www.illinois.gov/sites/hhstransformation/Pages/default.aspx>

Illinois Children’s Cabinet: <https://www.illinois.gov/gov/children/Pages/default.aspx>

Illinois Children’s Mental Health Partnership: www.icmhp.org

| Organization/Agency | Contact | Phone | E-mail |
|--|--|----------------|--|
| Illinois Children’s Mental Health Partnership | Christina LePage, <i>Managing Director</i> | (312) 516-5569 | clepage@voices4kids.org |
| | Alli Schuck, <i>Program and Administrative Associate</i> | (312) 516-5567 | aschuck@voices4kids.org |
| | Linda Delimata, <i>Mental Health Consultation Coordinator</i> | (815) 535-8188 | lindadelimata@hotmail.com |
| | Jean Meister, <i>Project Coordinator</i> | (708) 837-3055 | jmeister@voices4kids.org |
| Department of Children and Family Services, Office of Child Well-being | Cynthia Tate, <i>Deputy Director</i> | (312) 814-2405 | Cynthia.Tate@illinois.gov |
| Department of Juvenile Justice | Jennifer Jaworski, <i>Chief of Mental Health Services</i> | (630) 983-9181 | Jennifer.Jaworski@doc.illinois.gov |
| Department of Human Services, Division of Mental Health | Lisa Betz, <i>Deputy Director, Child and Adolescent Services</i> | (312) 793-1372 | Lisa.J.Betz@illinois.gov |
| Department of Healthcare and Family Services | Shawn Cole, <i>Manager</i> | (217) 557-0985 | Shawn.Cole@illinois.gov |
| Illinois Childhood Trauma Coalition | Colleen Cicchetti, <i>Director</i> | (312) 227-8318 | ictc@luriechildrens.org |
| Illinois Children’s Healthcare Foundation | Amy Starin, <i>Senior Program Officer: Children’s Mental Health</i> | (630) 571-2555 | AmyStarin@ilchf.org |
| Illinois Department of Public Health | Andrea Palmer, <i>Chief, Division of Maternal, Child and Family Health Services & Title V Director</i> | (312) 814-1815 | andrea.palmer@illinois.gov |
| Illinois State Board of Education | Michele Carmichael, <i>Principal Consultant for Behavioral Health Supports and Schools</i> | (217) 782-5589 | mcarmich@isbe.net |
| Irving Harris Foundation | Denise Castillo Del Isola, <i>Program Officer</i> | (312) 621-3814 | ddellisola@irvingharrisfdn.org |
| Kennedy Forum Illinois | Kelly O’Brien, <i>Executive Director</i> | (312) 532-4881 | kelly@thekennedyforum.org |
| Youth & Family Peer Support Alliance (Illinois’ Family Run Organization) | Regina Crider, <i>Director</i> | (217) 898-8777 | regina@youthandfamilyalliance.org |



For more information, contact

Illinois Children's Mental Health Partnership

c/o Voices for Illinois Children

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