



**Children's Mental Health Plan  
Steering Committee – Meeting #1**

Thursday, July 8, 2021

2:00p – 3:30p

**Minutes**

**Present by Zoom:** Kristine Argue-Mason (Early Intervention Co-Chair), Regina Crider (Treatment Co-Chair), Andrea Durbin (Social Determinants of Health Co-Chair), Julie Hamos (System Expert), Niya Kelly (Social Determinants of Health Co-Chair), Gudelia Lopez (WSS Consultant), Julianna McHale (ICMHP Program Coordinator), Jennie Pinkwater (Early Intervention Co-Chair), Barbara Shaw (System Expert), Sameer Vohra (ICMHP Interim Chair), John Walkup (Treatment Co-Chair), Amanda Walsh (ICMHP Director), Marlita White (Promotion and Prevention Co-Chair), Carol White (WSS Consultant), Kuliva Wilburn (WSS Consultant)

**I. Welcome – Goal of Plan and this Steering Committee 2:00p – 2:10p**

The meeting began with introductions of the ICMHP staff and Wilburn Strategic Solutions, inc. (WSS) staff. Sameer explained the purpose of this convening was to see what they could do to improve the children's mental health systems. Sameer discussed the importance of meeting the unique needs cross-systems and to break down silos to create brighter futures, as well as the need to think more broadly about wellness and development across the lifespan.

**II. Introduction of Steering Committee Members 2:10p – 2:25p**

- a. What brings you to child and family wellness and this Plan?

The Steering Committee co-chairs and system experts introduced themselves and provided more information on their backgrounds.

**III. History of ICMHP and Previous Plan 2:25p – 2:40p**

Amanda discussed the Children's Mental Health Act of 2003, which involved creating ICMHP. ICMHP has been tasked with creating the Children's Mental Health Plan and monitoring annually thereafter.

The committee briefly review the statutory requirements as well as the 2005 plan, which ICMHP staff will send to the committee. The statute identifies 9 categories that must be considered. However, HB212 adds a tenth category regarding access to mental health treatment and education in all school settings, which is currently pending on the Governor's desk.

#### **IV. Process and Goals of Workgroups**

**2:40p – 2:55p**

Amanda explained the purpose of each workgroup, which will help with the overall collaboration and alignment. Barbara shared a few additional historical ICMHP documents, which would provide additional context to the past efforts. These reference documents will be provided to the committee through the Steering Committee login on the website.

- Children's Mental Health: An Urgent Priority for Illinois (circa 2001, lead to the creation of the Children's Mental Health Act)
- Report on Early Intervention for Children and Youth with Emergent Social, Emotional, or Mental Health Concerns (2015)
- Guidelines for School Community Partnerships

#### **V. Level Setting 2:55p – 3:20p**

Amanda explained the level setting process and asked if there was anything missing from the presentation. John stated we should capture snapshots of demands and services. We could bring in the voices of insurers to figure out how to avoid insurance barriers.

Kuliva discussed the theory of change and landscape analysis process. John said we should include workforce and workforce development in the landscape analysis. Barbara added that we should focus on the implementation process and accessing resources.

Kuliva said each recommendation is accompanied by action steps and then an action framework. There will be two to three action steps for each recommendation. For example, action step 1 would be one year, action step 2 would be two years, and finally action step 3 would be implemented at the end of the strategic process. Barbara added that ICMHP used to receive \$10 million dollars a year with demonstration projects and grants to schools. She asked the committee to think about how much should be devoted to each of the four goal areas.

Sameer said the Plan will aid in determining the new organizational structure around the Partnership itself. The frameworks are shaped by the theory of change, which will help us understand the role of ICMHP and role in supporting the state in implementing the plan. We will discuss the delineation of the theory of change in future meetings. John stated we should create a cost analysis - what it will cost for a robust system and what it costs now not to have a robust system for behavioral health. We need to create something for those who fund these projects to decide to do this or not. Kuliva said we will build this into the plan. There is not enough time for a cost analysis, but it will be built into the recommendations.

## **VI. Goals for Next Meeting**

**3:20p – 3:30p**

- a. In your opinion or experience, what are the gaps in services, programs, policies, or partnerships in the state’s children’s mental health ecosystem?

Amanda said in accordance with OMA, ICMHP must comply with posting minutes publicly on the website. We are figuring out the most streamlined way to distribute meeting materials, but we will have our website as a tool to access everything you need. The agenda and meeting minutes will be public, but the recordings and other materials will be password-protected. We will be scheduling our workgroup meetings to begin in August. Once invites go to workgroups, those meetings will be established. We will have more information by our next meeting on Tuesday, July 13.