



STATE OF TENNESSEE  
**COUNCIL ON CHILDREN'S MENTAL HEALTH**

601 Mainstream Drive  
Nashville, TN 37243-0800  
(615) 741-2633, (FAX) 741-5956  
1-800-264-0904

Council on Children's Mental Health

October 18, 2012

10 a.m. – 3 p.m.

Otter Creek Church of Christ

**MEETING SUMMARY**

***Attendee List:***

Susan Bell	Kathy Gracey	Anne Robertson
Carol Beltz	Mike Herrman	Mary Rolando
Kathy Benedetto	Mary Katsikas	Mary Linden Salter
Bonnie Beneke	Dustin Keller	Sukey Steckel
Mona Blanton-Kitts	Kristy Leach	April Stewart
Shawn Brooks	Kisha Ledlow	Millie Sweeney
Pam Brown	Loraine Lucinski	Heather Taylor
Charlotte Bryson	Mamie McKenzie	Andrea Thaler
Susan Cope	Angela McKinney-Jones	Pat Wade
Janet Coscarelli	Michael Myszka	Sej West
Shani Cutler	Nneka Norman-Gordon	Jude White
Janice Davidson	Linda O'Neal	Zanira Whitfield
Bill Dobbins	Steve Petty	Jennifer Williams
Deborah Gatlin	Laurie Powell	
	Dawn Puster	

**Welcome and Introductions (Linda O'Neal)**

O'Neal welcomed the participants and thanked them for coming. She explained Commissioner Varney was attending a Safety Subcabinet meeting so the Update portion of the agenda will be later.

**Acceptance of Meeting Summary (O'Neal)**

- August 23, 2012 Meeting Summary Acceptance (**SWEENEY, MOTION, SALTER SECOND, PASSED UNANIMOUS**)

## **Governor's Children's Cabinet and Early Childhood Advisory Council (Jude White)**

*Refer to handout, "Tennessee Governor's Children's Cabinet"*

- Jude White is the Executive Director of the Governor's Children's Cabinet, which was created by Executive Order in January 2012 and consists of the Commissioners for the Departments of Health, Mental Health and Substance Abuse Services, Children's Services, Human Services, Education and TennCare.
- The purpose of the Cabinet is to coordinate, streamline and enhance the state's efforts to provide needed resources and supports to Tennessee's children, with a focus on health and mental health, education, safety and overall well-being.
- A retreat was held in June and Cabinet members learned about other departments and how services align at the local level.
- White also discussed a project of the Cabinet, the Early Childhood Advisory Council (ECAC), created with a \$2.4 million three-year grant from the Administration for Children and Families. The Goals of the ECAC are to:
  1. Align and enhance existing statewide early childhood system of care and education for children ages birth through five to promote school readiness.
  2. Conduct a needs assessment that identifies availability and defines indicators of quality of early childhood education opportunities delivered by state agencies for children up to age five, and how those providers interact at the local level to assure efficiency. ECAC has an inventory of approximately forty needs assessments, with about 20-25 that are relevant to ECAC.
  3. Enhance collaboration and coordination across state departments in the areas of training for early childhood educators and providers and parent engagement and empowerment. White said nationally known early childhood expert Carol Brunson Day is leading some aspects of this project. The goals of this project are to:
    - Determine and communicate a statewide definition of school readiness in Tennessee.
    - Develop and communicate consensus about core competencies needed by all early childhood providers and educators, with written recommendations regarding the state's capacity to teach the competencies and implement professional development plans.
    - Provide professional development and training of early childhood providers, educators and parents.

Nashville-based communications company, iostudio, is leading the parent engagement/empowerment aspect of the project.

- Research existing state approaches to parent outreach and education.
- Develop and implement strategies to align and update current state methods of parent outreach and market those resources.

4. Develop recommendations for sharing appropriate child data across state departments and for the establishment of a unified data collection system. DHS takes the lead on this as they are already doing so to an extent.
5. The ECAC grant was awarded at the end of the Bredeesen administration and consists of American Reinvestment and Recovery Act (ARRA) dollars. The grant will end August 31, 2013.

#### **In-Home Based Services Study Continuation Update (Mary Rolando)**

- Rolando reported that the group has been using very clean data from TennCare and the MCOs have been collaborating, making data-informed decisions on the array of services that will keep children in their homes.
- Child and Adolescent Needs and Strengths (CANS) is being used as the assessment tool. Objective Arts and Vanderbilt took the project over from the Governor's Office of Children's Care Coordination. Statewide data will be aggregated and analyzed. Contract talks commence next week. There will be one master contract with Objective Arts with a number of business agreements with providers tied to that.
- The CANS assessments are submitted to Objective Arts and the usual authorization request is sent to the MCO. Demographic and CANS information are used to develop a preliminary algorithm for the future that can be revised as necessary. The MCOs insist that they must review each case. Treatment will be trauma-focused. Children receiving treatment can remain in their homes longer, stay in school and begin to succeed.
- Providers for the pilot are Centerstone, McNabb, Mental Health Co-Op, Professional Counseling Services and Youth Villages.

#### **Prevention Policy Academy and SPE Grant (Angie McKinney Jones, Susan Steckel and other attendees)**

*(Refer to handouts: "SAMHSA's 2012 State Policy Academy on Preventing Mental and Substance Use Disorders in Children and Youth" and "Tennessee State Prevention Framework State Enhancement Grant")*

- Tennessee was one of only six states chosen to participate in the Policy Academy, SAMHSA's first on Prevention. Seven individuals attended: Bruce Behringer, Deputy Commissioner of the Department of Health, Dr. Michelle Fiscus, Vice President, TN Chapter of the American Academy on Pediatrics, Dustin Keller, Director of CCMH, Angie McKinney-Jones, DMHSAS Director of Prevention, Sukey Steckel, DMHSAS Director of Children & Youth Services, Millie Sweeney, Assistant Director of Program Services for TN Voices for Children, and Sejal West, DMHSAS Assistant Commissioner for Mental Health Services. The participants attended a two and a half day training session in Washington in September.
- The goal is to identify children and young adults at risk for Mental, Emotional and Behavioral (MEB) disorders proactively, provide education and consultation and, where

appropriate, referral to services. McKinney-Jones stated that Tennessee's focus is on screening, as there is much common ground in prevention. She noted much good work has been done by Dr. Quentin Humberd, through a TennCare awarded grant, for very young children, with his Screening Tools and Referral Training – Evaluation and Diagnosis (SMART-ED) program. The focus of the Policy Academy will be youth aged 13 to 21. Cross-departmental and multi-agency collaboration, as with the Recovery philosophy, will be planned for, with more involvement from the primary care community. Universal screening should be done with the involvement of parents, as a part of routine care.

- The objectives are to establish a task force to develop and disseminate screening guidelines and educational materials, select the screening tools and to educate and train providers on the guidelines.
- The SPE is a one-year planning grant to strengthen Tennessee's prevention infrastructure. The grant establishes a Policy Consortium consisting of Assistant Commissioner-level attendees of the DMHSAS Divisions of Mental Health and Substance Abuse Services, the Tennessee Primary Care Association, the Tennessee Alcoholic Beverage Commission, the Department of Children's Services Division of Juvenile Justice, the Department of Education Office of Safe and Supportive Schools, the Governor's Highway Safety Office and the Department of Health. A Steering Committee has approved the Five Year Plan required by the grant and will develop an MOU between departments to continue the work and develop a one-stop shop website.
- In addition to the Policy Consortium, there will be two workgroups: Coordination of Services, and Technical Assistance and Training and Data/Evaluation. The goals of the Five Year Plan are:
  - 1 Increase service system capacity to build emotional health and prevent/delay substance abuse and mental illness.
  2. Prevent or reduce consequences of prescription drug misuse and abuse.
  3. Prevent or reduce consequences of underage drinking and adult problem drinking.
  4. Prevent suicides and attempted suicides among populations at high risk.
  5. Prevent or reduce tobacco use among youth and adults.

#### **TDMHSAS Update (Sejal West, Assistant Commissioner for Mental Health Services)**

- West explained that Commissioner Varney was attending the Safety Subcabinet meeting and regretted he could not attend the CCMH meeting. He asked her to report that all the Commissioners of the Subcabinet were committed and dedicated. The group will steer implementation of the Prescription Drug Safety Act. As always, he very much appreciates the participation of the CCMH members.
- A high priority is the rollout of the four-year System of Care Statewide Expansion Implementation (SOC-EXP) grant. He thanked Dustin Keller and TCCY staff who assisted in getting the grant application submitted.

- Commissioner Varney should have an update on the TDMHSAS budget for FY2014 at the February CCMH meeting.
- Tennessee is one of the states hit hardest by the prescription drug abuse epidemic and there has been a dramatic increase in cases of neonatal abstinence syndrome (NAS). NAS occurs when babies are born addicted to opioids. Approximately 500 cases were reported last year, mostly babies born to mothers on TennCare. However, it was stressed that this may be the only reportable data, and NAS likely crosses all economic/income levels. More information should be available in the future, and this could be an agenda item at a subsequent meeting.

### **Study of Disproportionate Minority Contact (DMC) in the Tennessee Juvenile Justice System (Dustin Keller)**

*(See handout, “DMC in Juvenile Justice System”)*

- The study is required by a federal mandate and was last done in 2003 by Tennessee State University. The study primarily looks for the rate of contact based on the population for minorities. This project was to assess the extent and causes of disproportionate confinement of minority youth in the Juvenile Justice System.
- DMC exists in nearly every state, and a Federal Juvenile Justice and Delinquency Prevention Act core requirement is that each state address minority overrepresentation in the juvenile justice system. The problem can be addressed by strategies such as the following:
  - Ensure equitable treatment;
  - Provide effective delinquency prevention and early intervention programs;
  - Educate system participants and educate policy makers;
  - Provide cultural sensitivity and competency training for law enforcement, judges, teachers, attorneys, service providers and concerned citizens;
  - Use more objective decision-making criteria throughout the system;
  - Make changes in processing policies and procedures;
  - Allocate limited system resources and programs equitably;
  - Implement better juvenile justice data collection and analysis systems;
  - Provide better monitoring of the operation of the system.
- The full report can be found at <http://www.tennessee.gov/tccy/dmcrep.shtml>

### **In-Home Tennessee – Department of Children’s Services Initiative (Jennifer Williams)**

*(See handout, “In Home Tennessee”)*

- In Home Tennessee was a result of a federal Child and Family Services Review that had three review findings for improvement: children receiving appropriate and adequate services to meet their educational, physical and mental health needs; service array development; and service accessibility and services to families to protect children in the

home and prevent removal or re-entry into foster care. In Home Tennessee is a prevention program for the non-custodial population.

- DCS has a partnership with the Atlantic Coast Child Welfare Implementation Center to provide training, technical assistance and resources to support optimum implementation of In Home Tennessee. It began in 2009 and continues through September 2013. As of 2012, seven (DCS) regions are in the process of implementing In Home Tennessee.
- The program aligns with recommendations in the Governor's Top to Bottom Review that DCS develop and strengthen provider and community partnerships and create monthly communication with partners and communities.
- Some regional successes thus far include:
  - Davidson County is partnering with the Metro Health Department and a \$1.5 million grant for absent parent engagement.
  - Upper Cumberland region contracted with four potential visitation sites.
  - New Life Project is providing father peer mentors to work with Davidson County fathers involved in CPS cases.
  - Knox County is partnering with the Center for the Study of Social Policy and a pregnant/parenting teen grant.
  - Anderson County identified a resource that will pay for housing for youth ages 18-21.
  - Monroe County identified a grant program through Douglas Cherokee – Team Dad – a responsible fatherhood program that works to get fathers more involved.
- To view the In Home Tennessee Framework revised in September 2012, go to <http://www.tn.gov/youth/childsafety/Framework%209.10.2012.pdf>

#### **Discussion Plans for Future Meetings / Announcements (Linda O'Neal)**

- CCMH staff will try to reschedule Dr. Quentin Humberd to present on the Rapid Recognition program.
- Other topics identified include:
  - E-Health Tennessee
  - MCO Medical Home Initiatives
  - Standing Update on the SOC Expansion Grant
  - Budget
  - Legislation
- Keller and Steckel will be doing a survey to assess community SOC readiness and what technical assistance and/or training is needed.