

The Evolution of Kentucky's State & Regional Interagency Councils

Mid 1980s

Kentucky agencies that work with children and youth recognize the lack of programs to serve the everincreasing number of children with behavioral health needs

2012

CHFS charged childserving agencies with realigning the way behavioral health services and supports for children and TAY and their families were accessed, delivered, and reimbursed.

980

Kentucky Interagency Mobilization for Progress in Adolescent and Child Treatment (IMPACT) was created.

The new law established SIAC, RIACs, and LIACs to oversee and carry out the work of IMPACT in all 120 KY counties. 2013

System of Care expansion grant awarded to Kentucky by SAMHSA. The intent was to redesign services for families and children to be more timely, integrated, and effective.

MCOs providing physical and behavioral health and Medicaid insured individuals in Kentucky were charged with authorizing TCM services based on medical necessity.

BHSOs established

SB 200 signed into legislation

RIACs/LIACs purpose changes to operating as the regional locus of accountability for the system of care.

SIAC and RIAC increased efforts to strengthen family and youth voice, coordinate services using interagency involvement and collaboration, use community-based services, be culturally competent, be outcomebased, and utilize evidence-based practices.

New legislation effective July 14, 2018.

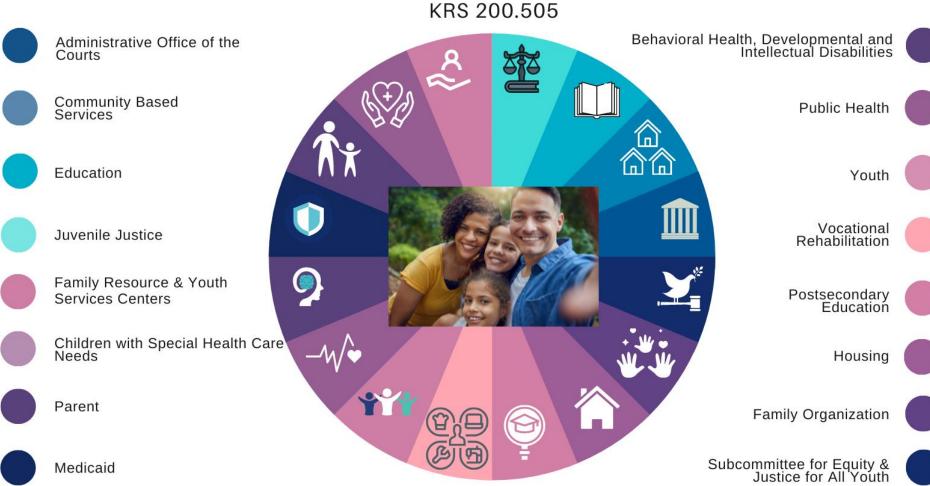
Statewide efforts continue to strengthen and expand Kentucky's system of care.



- History: Statutorily created body in 1990
- Monthly meeting of membership:
 - Commissioner-level representatives from 12 state agencies (across 5 Cabinets) that serve children, transition-age youth, and their families;
 - Nonprofit Family Organization;
 - Youth Representative;
 - Parent Representative; and
 - Subcommittee for Equity & Justice for All Youth (SEJAY).



SIAC Mandated Membership



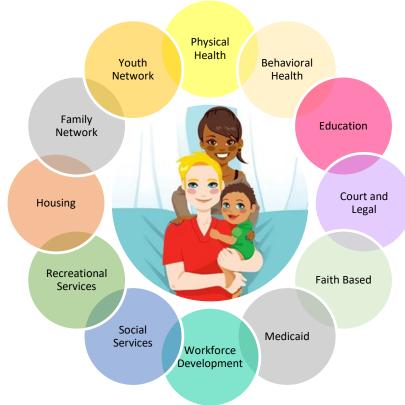
Alignment with System of Care Approach

The SIAC operates in accordance with System of Care (SOC) approach and encourages community partners to do the same. Kentucky's SOC expansion has evolved

similarly to federal changes.

The system of care concept holds that all **life domains** and needs should be considered rather than addressing mental health treatment needs in isolation, and so systems of care are organized around overlapping dimensions.

Pires, S. (2002). Building Systems of Care: A Primer



System of Care Definition*

- A spectrum of effective communitybased services and supports for children and transition-age youth (TAY), with or at risk of behavioral health needs or other challenges, and their families that...
 - Is organized into a coordinated network,
 - Builds meaningful partnerships with families and youth, and
 - Addresses their cultural and linguistic needs

...in order to help them function better at home, in school, in the community, and throughout life.

System of Care

What it <u>IS</u>

- Organizational framework for system reform
- Value base for systems & services
- A guide to implement in a way that is flexible for innovation
- Adaptive based on context and environment
- Applicable to different age groups, levels of need, different populations, agencies, and cultural groups

What it is **NOT**

- Exact model to be replicated
- Single program
- Discreet treatment or clinical intervention that directly improves child and family outcomes without accompanying changes at the practice level



System of Care Core Values*



^{*}Stroul, B., Blau, G., & Friedman, R. (2010). Updating the system of care concept and philosophy. Washington, DC: Georgetown University Center for Child and Human Development, National Technical Assistance Center for Children's Mental Health.

System of Care Guiding Principles*

Children, Youth, & Families have access to:

- A comprehensive array of services and supports that are
 - Effective,
 - Community-based,
 - Developmentally appropriate,
 - Evidenced-informed and promising practices,
 - Least restrictive, and
 - Provided without discrimination
 - while protecting their rights
- Effective care management

- Individualized, strength-based service planning
- A continuum of behavioral health services from promotion to recovery
- A system that
 - Supports provider
 accountability and quality
 improvement, and
 - Partners with families and youth

SIAC & RIAC Mission

Promoting healthy children and transition-age youth across Kentucky: Building a collaborative system of care (SOC) to promote children's and transition-age youth's social, emotional and behavioral well-being where they live, learn, work, and play.



SIAC Population of Focus

Per KRS 200.503 (effective July 14, 2018)

- "Child with a behavioral health need"
 means a child or transition-age youth
 with, or at risk of developing an emotional disability, substance
 use disorder, or mental, emotional, or behavioral needs
- "Child with an emotional disability" means a child or transitionage youth with a clinically significant disorder of thought, mood, perception, orientation, memory, or behavior that is listed in the current edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders

SIAC Purpose

Per KRS 200.505 (effective July 14, 2018)

- Make annual recommendations to the Governor and Legislative Research Commission
- Direct RIACs to:
 - Operate as regional locus of accountability for the SOC
 - Participate in Family Accountability,
 Intervention, and Response (FAIR) Teams
- Assess effectiveness of RIACs
- Meet at least monthly
- Develop a comprehensive array of services and supports
- Adopt interagency agreements as necessary

2022-2023 ANNUAL RECOMMENDATIONS to the Governor and Legislative Research Commission

State Interagency Council (SIAC)
for Services and Supports to Children and Transition-Age Youth

RECOMMENDATIONS SUMMARY

The SIAC seeks, in all recommended actions, to create, promote, and provide an environment of diversity, equity and inclusion for all children, youth, families, and service providers regardless of race, age, color, ethnicity, gender, gender identity, sexual orientation, disability, and socioeconomic background.

That the commonwealth

- 1. Address the worsening crisis in child, adolescent, and young adult mental health by supporting the design, implementation, and monitoring of a state children's behavioral health plan to build and fund comprehensive and coordinated evidence-based, evidence-informed, and culturally-responsive behavioral health services, programs, and supports for the children, adolescents, and young adults and their families of Kentucky.
- Change Kentucky Revised Statutes to take into account the developmental ages and stages of children and youth and enact developmentally-responsive laws.
- Support legislative efforts to identify and eliminate disproportionality and disparities among all agencies and prioritize equitable service delivery to children and transition-age youth and their families.
- 4. Require all public school districts to participate in the statewide administration, at least biennially, of a student-completed population-based surveillance survey designed to anonymously gauge middle and high school student mental health and suicidality, use of substances, interpersonal conflict, perceptions of school safety, and risk and protective factors.
- 5. Amend Kentucky Revised Statute (KRS) 600.050 to clarify that relinquishment of custody is not a condition for receipt of behavioral health services delivered or funded by the Department for Community Based Services (DCBS) to reduce the unnecessary relinquishment of parental custody with the goal of preventing children, youth, and/or their families from becoming involved with DCBs.
- 6. Modify Kentucky Administrative Regulations regarding leave requirements for classified employees (101 KAR 2.102) to allow (1) the use of sick time to address behavioral health needs and for those responsible for the care for or transport of a member of the employee's immediate family for behavioral health care and (2) the use of sick leave for these purposes to be at the discretion of the employee.
- 7. Útilize data systems and health records, to include fields that collect needed and preferred American Disability Act, Individuals with Disabilities Education Act, Section 504 of the Rehabilitation Act of 1973 accommodations, for agencies to meet each person's unique disability and needs.

Per KRS 200.505, the State Interagency Council (SIAC) for Services and Supports to Children and Transition-age Youth is required to make recommendations annually to the Governor and the Legislative Research Comregarding the system of care for children and transition-age youth with or at ris of behavioral health needs.





SIAC Standing Committees



Standing Committees

- Disabilities
- Racial, Ethnic, & Equity Disparities
- Social & Emotional Health & Wellbeing
- Service Array

Meet monthly to work on assigned tasks based SIAC's strategic plan goals Anyone can join

Quarterly updates to SIAC

SIAC Strategic Plan History

- August 2020
- April 2018
- April June 2016
- January 2014 System of Care Strategy Session
- May 2012
- April 2011

*Strategic planning is not addressed in SIAC policy

SIAC Strategic Plan

Goal 1

Build Organizational and Community Capacity to Promote the Social and Emotional Health and Wellbeing of Kentucky's Children and Transition-age Youth & Our Workforce

Standing Committee: Social and Emotional Well-Being

Goal 2

Support the development of a compassionate workforce to reduce the compounding stigma that results from the intersectionality of issues faced by children and transition-age youth with and at risk of developing behavioral health needs

Standing Committees: Disability and REED

SIAC Strategic Plan

Goal 3

Increase Equity in Service Access and Outcomes

Standing Committees: Disability and REED

Goal 4

Utilize SIAC to Increase Participation in the Governance of Kentucky's System of Care

Ad hoc committee:
Outreach and Promotion



SIAC Strategic Plan

Goal 5

Assess the current service array available and accessible to Kentucky's children, young adults, and families

Standing Committee: Service Array

Goal 6

SIAC Member Agencies Commit to Operationalizing the Core Value of Being Family- & Youth-Driven

LEAD KY

SIAC Successes

Engagement 🔐

In 2020, SIAC switched to virtual meetings, which led to increased:

- stakeholder access
- statewide participation
- engagement in Standing Committees



- 5 Justice for All: Moving from Protest to Policy Panel Discussions
- Substance Use Disorder Through the Lens of Race & Equity one-pager
- Cross-agency data presentations
- Introduction of GARE's* racial equity impact assessment



- Voting Members of SIAC and participants in each Standing Committee
- Featured in quarterly SIAC Newsletter
- Surveyed to gather input on Access to Services
- Monthly LEAD KY (Lived Experience Authentically Driven in Kentucky) meetings to implement strategic plan





State Interagency Council

Overview

The State Interagency Council for Services and Supports to Children and Transition-age Youth (SIAC) is a group consisting of state agency representatives, a youth, a parent of a child or transition-age youth with a behavioral health need, and a member of a nonprofit family organization.

SIAC oversees coordinated policy development. comprehensive planning, and collaborative budgeting for services and supports to children and transition-age youth with or at risk of developing behavioral health needs and their families. SIAC strives to design and implement a system of care that is youth- and familydriven, community-based, culturally- and linguisticallyresponsive, trauma-informed, and recovery-oriented. SIAC conducts monthly meetings that are open to the public.

Regional Interagency Councils (RIACs) operate as the locus of accountability for the system of care, providing a structure for coordination, planning and collaboration of services and supports at the local level to children, adolescents, and transition-age youth and their families, to help them function better at home, in school, in the community and throughout life.

There are 18 RIACs across the commonwealth. Each council is composed of members representing the following: Regional Community Mental Health Centers;

Contact Information

275 F. Main Street 4WG Frankfort, KY 40621 Phone: (502) 564-4456 Fax: (502) 564-9010 Hours: Monday-Friday 8:00 am-4:30 pm ET

Crisis Lines by County Hotlines/Other Contacts Suicide Prevention Hotline

Contact Us

Program Administrator Lea Taylor (502) 782-6138

Related Links

Calendar of Events Provider Directory

Indicators of Social & Emotional Health & Wellbeing of Kentucky

Kentucky IMPACT

SIAC Documents

SIAC Meeting Schedule

SIAC Meeting Summaries and Handouts

SIAC Membership List

- Dashboard created by Social Emotional Health & Wellbeing Standing Committee
- Meeting summaries
- Membership list
- Flyers & recordings from all Justice For All panel discussions
- **SIAC Documents:**
 - Highlights
 - **Org Chart**
 - Annual recommendations
 - Policies & **Procedures**
 - Youth & Parent Application
 - Link to SIAC Newsletter

DBHDID Home Page

Crisis Numbers and Hotlines

Commitment to

WESTERVANNS

Crisis Lines by County

Hotlines and Other Contacts

Suicide Prevention Hotline

Report Suspected Abuse, Neglect and Exploitation

Adult Abuse

Child Abuse

Programs and Services

Behavioral Health

Developmental and Intellectual Disabilities

Program Integrity

Community Mental Health Centers

Facilities

RIAC Purpose

Per KRS 200.505 (effective July 14, 2018)

RIACs operate as the regional locus of accountability for the system of care; providing a structure for

- > coordination,
- > planning, and
- > collaboration of services and supports at the local level to children and transition-age youth, with or at risk of developing behavioral health needs, and their families.

Local interagency councils (LIACs) may be formed at the discretion of the RIAC to advance the functions of the RIAC at the city, county, or other local community level.

RIAC Accountability

Per KRS 200.505 State Interagency Council for Services and Supports to Children and Transition-age Youth (SIAC) shall:

- Direct each RIAC to
 - Operate as the regional locus of accountability for the system of care;
 - · Participate on FAIR teams; and
- Assess effectiveness of RIACs



The SIAC and RIAC Administrators will make periodic site visits to RIAC meetings to:

- ✓ Provide coaching and support to RIACs in the development of the RIAC's Action Plan;
- ✓ Provide technical assistance and support around policies and procedures that support implementation of the Action Plan; and
- ✓ Ensure RIACs are implementing and periodically updating their regional Action Plans.

Questions?



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https://dbhdid.ky.gov/dbh/riac.aspx

RIAC YouTube for archived trainings and Learning Series:

https://www.youtube.com/channel/UCAPblsjQXYnwJhMa tPpamw