

Sen. Meg Loughran Cappel

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10200SB3889sam002

LRB102 24255 RJT 36640 a

1 AMENDMENT TO SENATE BILL 3889 AMENDMENT NO. _____. Amend Senate Bill 3889 by replacing 2 everything after the enacting clause with the following: 3 "Section 5. The Children's Mental Health Act of 2003 is 4 5 amended by changing Section 5 as follows: 6 (405 ILCS 49/5) 7 Sec. 5. Children's Mental Health Plan. 8 (a) The State of Illinois shall develop a Children's 9 Mental Health Plan containing short-term and long-term recommendations to provide comprehensive, coordinated mental 10 health prevention, early intervention, and treatment services 11 for children from birth through age 18. This Plan shall 12 include but not be limited to: 13 (1) Coordinated provider services and interagency 14

referral networks for children from birth through age 18

to maximize resources and minimize duplication of

1 services.

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- (2) Guidelines for incorporating social and emotional development into school learning standards and educational programs, pursuant to Section 15 of this Act.
- (3) Protocols for implementing screening and assessment of children prior to any admission to an inpatient hospital for psychiatric services, pursuant to subsection (a) of Section 5-5.23 of the Illinois Public Aid Code.
- (4) Recommendations regarding a State budget for children's mental health prevention, early intervention, and treatment across all State agencies.
- (5) Recommendations for State and local mechanisms for integrating federal, State, and local funding sources for children's mental health.
- (6) Recommendations for building a qualified and adequately trained workforce prepared to provide mental health services for children from birth through age 18 and their families.
- (7) Recommendations for facilitating research on best practices and model programs, and dissemination of this information to Illinois policymakers, practitioners, and the general public through training, technical assistance, and educational materials.
- (8) Recommendations for a comprehensive, multi-faceted public awareness campaign to reduce the stigma of mental

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illness and educate families, the general public, and other key audiences about the benefits of children's social and emotional development, and how to access services.

- (9) Recommendations for creating a quality-driven children's mental health system with shared accountability among key State agencies and programs that conducts ongoing needs assessments, uses outcome indicators and benchmarks to measure progress, and implements quality data tracking and reporting systems.
- (10) Recommendations for ensuring all Illinois youth receive mental health education and have access to mental health care in the school setting. In developing these recommendations, the Children's Mental Health Partnership created under subsection (b) shall consult with the State Board of Education, education practitioners, including, but not limited to, administrators, regional superintendents of schools, teachers, and school support personnel, health care professionals, including mental health professionals and child health leaders, disability advocates, and other representatives as necessary to ensure the interests of all students are represented.
- (11) Recommendations on how to more effectively meet the emergency and residential placement needs for all children with severe mental and behavioral challenges.
- (b) The Children's Mental Health Partnership (hereafter

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referred to as "the Partnership") is created. The Partnership shall have the responsibility of developing and monitoring the implementation of the Children's Mental Health Plan as approved by the Governor. The Children's Mental Health Partnership shall be comprised of: the Secretary of Human Services or his or her designee; the State Superintendent of Education or his or her designee; the directors of the departments of Children and Family Services, Healthcare and Family Services, Public Health, and Juvenile Justice, or their designees; the head of the Illinois Violence Prevention Authority, or his or her designee; the Attorney General or his or her designee; up to 25 representatives of community mental health authorities and statewide mental health, children and family advocacy, early childhood, education, health, substance abuse, violence prevention, community mental health provider trade organizations, and juvenile justice organizations or associations, to be appointed by the Governor; and 2 members of each caucus of the House of Representatives and Senate appointed by the Speaker of the House of Representatives and the President of the Senate, respectively. The Governor shall appoint the Partnership Chair and shall designate a Governor's staff liaison to work with the Partnership.

(c) The Partnership shall submit a Preliminary Plan to the Governor on September 30, 2004 and shall submit the Final Plan on June 30, 2005. Thereafter, on September 30 of each year, the Partnership shall submit an annual report to the Governor and

1 the General Assembly on the progress of Plan implementation 2 and recommendations for revisions in the Plan. The Final Plan and annual reports submitted in subsequent years shall include 3 4 estimates of savings achieved in prior fiscal years under 5 subsection (a) of Section 5-5.23 of the Illinois Public Aid 6 Code and federal financial participation received under subsection (b) of Section 5-5.23 of that Code. The Department 7 of Healthcare and Family Services shall provide technical 8 9 assistance in developing these estimates and reports.

10 (Source: P.A. 102-16, eff. 6-17-21; 102-116, eff. 7-23-21.)".