

Department of Human Services 2009-11 Policy Option Package

Division Name: Addictions and Mental Health Division

Program Name: Child and Adolescent Mental Health

Policy Option Package Initiative: Oregonians have access in their communities to the mental health care and addictions treatment they need.

Policy Option Package Title: Training Additional Child Psychiatrists

Policy Option Package Number: 412

Related Legislation:

Summary Statement:

This package improves children's health and safety by extending psychiatric services and keeping kids in their homes and schools rather than sending them to institutions to receive specialty services. There are too few child psychiatrists in Oregon, but in this package, consulting psychiatrists would be hired and trained to work with local physicians who often prescribe powerful medications to children, but lack specialty training in child and adolescent brain development and treatment. The children's public mental health system will be improved, including the prescribing of medications. These changes will upgrade the quality of treatment for children.

1. **WHAT WOULD THIS POLICY OPTION PACKAGE (POP) DO AND HOW WOULD IT BE IMPLEMENTED?** This package will provide additional resources to Oregon Health and Sciences University Division of Child and Adolescent Psychiatry to train two additional child psychiatry fellows each year, increase consultation by child psychiatrists to community mental health programs in the Portland area and statewide via telepsychiatry, improve the training of Pediatric and Family Practice residents in child mental health care, develop and support models of collaboration and integration between child psychiatry and pediatric care, develop and support a medically sound statewide system of pediatric psychopharmacology prescribing guidelines and informed consent, and increase child psychiatry research and specialty clinics. This would be implemented through a contract between the Department and OHSU Division of Child & Adolescent Psychiatry.

2. **WHY DOES DHS PROPOSE THIS POP?** There are too few child psychiatrists to provide the care needed for children with severe emotional disorders. These children are frequently prescribed powerful brain altering medications by physicians who lack specialty training in child and adolescent brain development and in the treatment of children with these disorders. This is a serious problem for children in the care and custody of the child welfare system. The more rural areas of Oregon have difficulty accessing medical care of any kind and it is very difficult to access child and adolescent psychiatry expertise.

3. **HOW DOES THIS FURTHER THE AGENCY’S MISSION OR GOALS?** This package will improve the health and safety of Oregon’s children with mental disorders and their families.

4. **IS THIS POP TIED TO A DHS PERFORMANCE MEASURE? IF YES, IDENTIFY THE PERFORMANCE MEASURE. IF NO, HOW WILL DHS MEASURE THE SUCCESS OF THIS POP?** If funded, the goals of this proposal will be achieved through contract with Oregon Health and Sciences University Division of Child and Adolescent Psychiatry. The contract will pay for two additional fellows to receive training. The department will request detailed reporting regarding the availability and quality of child psychiatrists for children and their families who are accessing public mental health services

in Oregon. Evidence of the amount and quality of coordination between child psychiatrist and pediatricians will also be requested through the contract with OHSU.

5. DOES THIS POP REQUIRE A CHANGE(S) TO AN EXISTING STATUTE OR REQUIRE A NEW STATUTE? IF YES, IDENTIFY THE STATUTE AND THE LEGISLATIVE CONCEPT.

No

6. WHAT ALTERNATIVES WERE CONSIDERED AND WHAT WERE THE REASONS FOR REJECTING THEM? There are no federal resources for training child psychiatry fellows. Oregon can continue training fewer child psychiatrists each year with the same outcomes, too few children with the most severe disorders will not access the expertise needed to effectively treat their mental and emotional disorders.

7. WHAT WOULD BE THE ADVERSE EFFECTS OF NOT FUNDING THIS POP? Children with the most serious disorders will be prescribed powerful medications without the benefit of oversight and support from child psychiatrists with specialty training in child and adolescent brain development and reaction to medications.

8. WHAT OTHER AGENCIES (STATE, TRIBAL AND/OR LOCAL GOVERNMENT) WOULD BE AFFECTED BY THIS POP? HOW WOULD THEY BE AFFECTED? Access to specialty consultation would be improved for county and tribal mental health programs, treatment for children in the custody of child welfare will be improved and increased access to child psychiatry will be beneficial to the Oregon Youth Authority.

9. WHAT ASSUMPTIONS AFFECT THE PRICING OF THIS POP?

Implementation of this POP requires \$780,000 per year.

Implementation Date(s): October 1, 2009

End Date (if applicable): Ongoing

a. Will there be new responsibilities for DHS? Specify which division(s) and describe their new responsibilities. No

- | | |
|--|---|
| <input type="checkbox"/> Administrative Services | <input type="checkbox"/> Addictions and Mental Health |
| <input type="checkbox"/> Children, Adults and Families | <input type="checkbox"/> Public Health |
| <input type="checkbox"/> Division of Medical Assistance Programs | <input type="checkbox"/> Seniors and People With Disabilities |

b. Will there be new administrative impacts sufficient to require additional funding? Specify which office(s) and describe how it will be affected. No

- | | |
|---|--|
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Payment Accuracy and Recovery |
| <input type="checkbox"/> Information Security/Privacy | <input type="checkbox"/> Investigations and Training |
| <input type="checkbox"/> Document Management | <input type="checkbox"/> Facilities |
| <input type="checkbox"/> Audit and Consulting | <input type="checkbox"/> Contracts and Procurement |
| <input type="checkbox"/> Information Services (computers) | <input type="checkbox"/> Budget, Planning and Analysis |
| <input type="checkbox"/> Financial Services (accounting) | <input type="checkbox"/> DHS Office of Communications |

c. Will there be changes to client caseloads or services provided to population groups? Specify how many in each relevant program. No

d. Will it take new staff or will existing positions be modified? For each classification, list the number of positions and the number of months the positions will work in each biennium. Specify if the positions are permanent, limited duration or temporary. No

- e. **What are the start-up costs, such as new or significant modifications to computer systems, new materials, outreach and training?** The funds will be contracted to OHSU.
- f. **What are the ongoing costs?** Annual costs into the future see above.
- g. **What are the potential savings?** None
- h. **Based on these answers, is there a fiscal impact?** Yes
- i. **What are the sources of funding and the funding split for each one? Include grant names and fund type, such as “Medicaid, General and Federal Funds.”** General Funds