

An Act to Protect Children's Mental Health Services

H. 1736 (Representative Malia) / S. 1154 (Senator Keenan)

What problem does this bill address?

Since 2007, the court monitor for the Rosie D. remedy services, known as the Children's Behavioral Health Initiative (CBHI) has been acting in an ombuds role, helping families to resolve barriers to mental health care access. As the court and the Commonwealth plan for termination of court oversight, the establishment of a children's mental health ombuds position within the Office of the Child Advocate is key to ensuring that families of children with mental health conditions continue to have a place to bring their concerns.

What difference will this bill make?

The bill would mandate the establishment of an ombuds position with the power and authority to identify barriers to mental health treatment. The ombuds would monitor and ensure compliance with relevant child mental health statutes, regulations, rules, and policies and receive, investigate, and resolve complaints filed on behalf of a child.

The ombuds will be "hands on," helping families resolve problems they encounter when trying to access mental health care for their child. The ombuds will help families navigate the children's mental health care system, offer guidance and information, listen to their concerns, and assist in problem-solving and conflict resolution.

The ombuds will be a function of the Office of the Child Advocate, and will work across agencies and secretariats, engaging providers, insurers and others as necessary to ensure that the rights of families and children are respected and that they are treated fairly in all interactions. The ombuds will track trends and make recommendations to policy-makers as necessary to address systemic deficiencies.

Why is this bill needed NOW?

Despite significant improvements in the availability of mental health care—especially for children who are covered by MassHealth—it is still hard for many children and their families to get the care that they need. Some of the difficulties they face include:

- Finding the right point of entry to receive care;
- Finding clinicians who speak their language and understand their culture and who also take their insurance;
- Long waits for outpatient and in-home care and lengthy stays in emergency departments or other non-psychiatric settings as clinicians try to find inpatient placement:
- Lack of coordination among care providers, schools, and/or state agencies;
- Difficulty in finding the appropriate authority to address a concern or resolve a conflict.