

FACT SHEET: SB 1291 (BEALL)

SUMMARY

Foster children are at an increased risk for homelessness, incarceration, poor health, and lower educational outcomes compared with non-foster youth. Children in the state's care who do not receive timely, appropriate, and quality mental health services face long-lasting consequences that may be irreversible.

PROBLEM

California does not have a comprehensive approach to oversee and monitor the mental health services available to foster youth. The delivery, oversight and accountability for mental health services is split between two state departments for foster youth: the Department of Social Services (DSS) and the Department of Health Care Services (DHCS).

DSS is obligated to ensure children in their care receive mental health services, yet DHCS oversees the funding, services and providers. To eliminate a troubling gap in the coordination of services, SB 1291 calls for consolidating data from existing sources into a single existing review process, the External Quality Review Organization, under the oversight of the appropriate regulatory agency, Department of Health Care Services (DHCS).

This bill provides more accountability and oversight for the delivery of mental health services. It also addresses the Center for Medicare and Medicaid Services' concerns about California's lack of oversight and monitoring of services delivered under the 1915 (b) waiver.

PROPOSED BILL

Specifically, this bill:

1. Calls for the existing External Quality Review Organization (EQRO) to include specific data related to mental health services --from prevention to crisis services -- available to and segregate by foster youth for the purpose of tracking access, quality and outcomes;
2. Requires DHCS to review the EQRO data relating to foster youth for deficiencies and communicate with the counties the deficiencies identified; and
3. Requires the results of the EQRO to be publicly available to provide greater transparency.

BACKGROUND

A vast majority of California's children and youth in foster care do not receive safe, quality mental health services during their time in care despite a well-documented need.

An August 2011 report found California's child welfare system reported only 34.7% of foster children and youth received mental health services, excluding medication and case management - well below national prevalence rates. At the same time, 25% of foster children ages 6-17 are receiving one or more psychotropic medications and over 50% of children in group homes are receiving these powerful drugs.

Last year, the California State Senate sponsored a bill package to curb the over

prescribing of psychotropic drugs to foster youth and address gaps in the courts and child welfare system. The legislation instituted much needed protections in those systems, but it did not address prescribers or mental health programs delivered under the Medi-Cal program.

San Luis Obispo County Department of Social Services
Therapists for Peace & Justice
The Jamestown Community Center
Woodland Community College Foster and Kinship Care Education
Four individuals

SPONSOR

National Center for Youth Law

SUPPORT

Advokids
American Association for Marriage and Family Therapy
Bay Area Youth Center
California Alliance of Child and Family Services
California Association of Marriage and Family Therapists
California Court Appointed Special Advocates
California Council of Community Behavioral Health Agencies
California Youth Connection
California Youth Empowerment Network
Center for the Study of Social Policy
Children's Advocacy Institute
Children Now
Children's Partnership
Consumer Watchdog
County of Contra Costa
Family Voices of California
First Focus Campaign for Children
Hillsides
John Burton Foundation for Children without Homes
Kids in Common
Mental Health America of California
National Association of Social Workers
Pacific Juvenile Defender Center
Peers Envisioning and Engaging in Recovery Services

OPPOSITION

None received

FOR MORE INFORMATION

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