



Advocacy and Action
for Connecticut's
Mental Health

**Testimony of the National Alliance on Mental Illness (NAMI) Connecticut
Before the Committee on Children, February 25, 2015
Regarding**

**SB No. 841, AN ACT CONCERNING THE IMPLEMENTATION OF A
COMPREHENSIVE CHILDREN'S MENTAL, EMOTIONAL, AND BEHAVIORAL
HEALTH PLAN. (in support of)**

Good afternoon Senator Bartolomeo and Representative Urban, and members of the Children's Committee, my name is Susan Kelley and I am the Public Policy Manager of Child/Adolescent/Young Adult Issues for the National Alliance on Mental Health of Connecticut (NAMI Connecticut). NAMI Connecticut is a grassroots organization dedicated to building better lives for all individuals and families affected by and/or living with mental illness. I am speaking today on behalf of NAMI Connecticut and also as a representative of the Children's Committee of the Keep the Promise Coalition, which is the largest group of mental health stakeholders with a united voice on mental health issues in Connecticut. My testimony concerns **SB 841**.

We support SB 841's establishment of an Implementation Advisory Board. We commend with great appreciation the Children's Committee serious attention to children's mental health through its mandate for a Children's Behavioral Health Plan under PA 13-178, and applaud DCF for its hard work in developing a solid roadmap for the changes that lie ahead to improve children's mental health. We are excited about the prospects for meaningful improvement in children's behavioral health under the Plan.

With this background to raised SB 841, we would like to seek clarification of its two categories of appointments; and make a request regarding subsection (c)'s call for non-state agency appointments to be made solely by the Department of Children and Families (DCF).

Regarding our clarifications, does subsection (b) (1) and its designation of "eight [members] representing families of children" with mental health diagnoses specify individual family members representing their children or does this category also include organizations that also represent children, such as NAMI CT, or both?

In addition, does subsection (b) (4) and its designation of "three [members] representing private advocacy groups that provide services for children" specify only advocacy groups providing direct services to children or does this category also include organizations like NAMI CT which provides education/support/advocacy but no direct services and the Keep the Promise Coalition's (KTP) Children's Committee that is a pure advocacy group, or both? Because the input of advocacy groups is essential to ensuring collaboration and transparency in the implementation process, we would request that this category designate a total of 5 advocacy groups to be

appointed as members, which can be a combination of pure advocacy groups and advocacy/services groups.

Regarding appointments under subsection (c), we are not in favor of its call for appointments of non-state agency Board members, designated as (1)-(9) of subsection (b), to be made solely by the Commissioner of the Department of Children and Families (DCF).

As the designer of the Plan, DCF's sole appointment of non-state agency members to the Advisory Council overseeing development of the Plan was appropriate. We believe, though, that implementation of the Plan, which will extend over several years and require extensive multi-agency decision making and systems change across private and public sectors, requires oversight and continued participation by members of the Children's Committee and legislature that have played an integral role in the state's commitment to improving behavioral health for all Connecticut children under PA 13-178. This is particularly important because the appointments under SB 841 are for a three year term. As the Plan states:

although developed under the guidance of DCF, this Plan...aspires to be owned by the diverse set of organizations and individuals who had a part in its design and hopefully will be invested in making it a reality."

To that end, we request that non-state agency appointments to the Implementation Advisory Board be shared by Commissioner Katz and the legislature, as the legislature generally makes appointments to oversight entities and task forces, such as the Young Adult Behavioral Health Task Force.

Thank you very much for this opportunity to address the Children's Committee. I would be happy to answer any questions you may have.

Respectfully submitted,

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NAMI Connecticut; Staff to Keep the Promise Coalition