Maryland Consortium on Coordinated Community Supports

Framework, Design & RFP Subcommittee

Co-Chair Superintendent Mohammed Choudhury

October 17, 2022

Objectives for Today's Meeting

- Finalize key questions for public comment.

- Consider definitions for Behavioral Health Services and Wraparound Services for key questions for public comment.

- Discuss coordination around public comment period with Outreach Subcommittee.

- Discuss update to full Consortium on October 18.

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Framework Subcommittee Membership

Members: : Superintendent Mohammed Choudhury (co-chair), Sadiya Muqueeth, DrPH (co-chair), Linda Rittlemann, John Campo, Russell Leone, Maria Rodowski-Stanco (MDH)

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Re-cap Key Activities

October-December 2022

1. Hold Subcommittee meetings.
2. Host public comment period and engage public on structured questions to inform the recommendations of the Framework Subcommittee.
3. Develop consensus on key recommendations for the design of the statewide framework for community support partnerships and first RFP.

4. Coordinate with the Data and Outreach Subcommittees.
5. Present update and potential recommendations of the Framework Subcommittee to the Consortium during November 15 meeting.
6. Summarize findings in a written report to be included in the Consortium's report to Maryland General Assembly – Due December 2022.

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Definitions – Behavioral Health Services

- "Behavioral Health Services" are defined in the Blueprint bill (HB 1300 (2020); Md. EDUCATION Code Ann. §7-4470) as: "trauma-informed prevention, intervention, and treatment services for the social-emotional, psychological, and behavioral health of students, including mental health and substance use disorders."

- "Behavioral Health Services" are defined in the Maryland Health General Code (Md. HEALTH-GENERAL Code Ann. § _7.5-101) as including: "prevention, screening, early intervention, treatment, recovery, support, wraparound, and rehabilitation services, for individuals with substance related disorders, addictive disorders, mental disorders, or a combination of these disorders.

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Statutory Definition – Wraparound Services

- Wraparound services" are defined in statute as, "(1) Extended learning time, including before and after school, weekends, summer school, and an extended school year; (2) Safe transportation to and from school and off-site apprenticeship programs; (3) Vision and dental care services; (4) Establishing or expanding school-based health center services; (5) Additional social workers, mentors, counselors, psychologists, and restorative practice coaches; (6) Enhancing physical wellness, including providing healthy food for in-school and out-of-school time and linkages to community providers; (7) Enhancing behavioral health services, including access to mental health practitioners and providing professional development to school staff to provide trauma-informed interventions;

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Statutory Definition – Wraparound Services (cont.)

(8) Providing family and community engagement and supports, including informing parents of academic course offerings, language classes, workforce development training, opportunities for children, and available social services as well as educating families on how to monitor a child's learning; (9) Establishing and enhancing linkages to Judy Centers and other early education programs that feed into the school;
(10) Enhancing student enrichment experiences, including educational field trips, partnerships, and programs with museums, arts organizations, and cultural institutions;
(11) Improving student attendance; (12) Improving the learning environment at the school; and (13) Any professional development for teachers and school staff to quickly identify students who are in need of these resources."

HB 1300 (2020); Md. EDUCATION Code Ann. § 9.9-101

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National Wraparound Implementation Center Definition - Wraparound

"Wraparound is an ecologically based process and approach to care planning that builds on the collective action of a committed group of family, friends, community, professional, and cross-system supports mobilizing resources and talents from a variety of sources resulting in the creation of a plan of care that is the best fit between the family vision and story, team mission, strengths, needs, and strategies."

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Public Comment - Questions for Consideration

1A. How should Behavioral Health Services be defined, for the purposes of the Consortium? For reference (see Slide 7).

1B. What types of behavioral health services should be prioritized for funding in the first round of Coordinated Community Supports Partnership grants?

2A. In addition to behavioral health services, what other kinds of social services, supports, and wraparound services should be supported by Consortium grant funding to ensure a "holistic" approach, minimize stressors, and "address related challenges?" (See Slide 8).

2B. What requirements should exist for these "other" potentially grant-funded services to ensure activities are in alignment with the Consortium's mission?

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Public Comment - Questions for Consideration

3. How should the program be structured in order to direct funding where it is most needed? How might 'need' or underserved communities be calculated/determined?

4. How could grant funding be used to: address challenges in hiring and retaining behavioral health personnel, build capacity/train/expand the behavioral health workforce, and ensure new staff positions will be sustained?

5. If grant funding is to be awarded competitively, what should the review criteria be?

6. When the CHRC issues the first Consortium Call for Proposals in CY 2023, what activities, services, and other capacity building costs should be allowed as permissible grant funding expenses?

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Meeting Schedule

Monday, October 17, 1:00 – 2:00 pm

Full Consortium meeting: Tuesday, October 18, 2022

Wednesday, October 26, 10:00 – 11:00 am

Wednesday, November 2, 12:00-1:00 pm

Wednesday, November 9, 10:00 – 11:00 am

Full Consortium meeting: Tuesday, November 15, 2022

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