



FAMILY SERVICE &
GUIDANCE CENTER

February 18, 2020

**Testimony to House K-12 Budget Committee
on Kansas State Department of Education Budget**

Chair Kristey William and members of the Committee, my name is Brenda Mills. I am the CEO of Family Service & Guidance Center (FSGC) in Topeka, KS. FSGC is a licensed Community Mental Health Center (CMHC) serving the pediatric population of Shawnee County. As part of the licensing regulations, CMHCs are required to provide services to all Kansans who need them, regardless of their ability to pay.

FSGC was one of CMHCs included in the initial School Mental Health Pilot established by the 2018 Kansas Legislature. We support the operational provisions of HB 2582 that would put the school mental health intervention team into statute.

Accomplishments/Successes:

The best way to understand the value of the school mental health intervention teams is through some real life cases. By working closely with the schools and improving the identification and referral process to collectively bring resources to students and families we have numerous success stories of improved lives. Here are just some real life examples:

Licensed therapist has admitted two high school aged students this fall who attend one of the alternative schools here in Topeka. Both were described as “written off” by their parents, had intermittent contact with the police, failing grades, poor school attendance, and major behavioral and social concerns. In the last two weeks both have transitioned back to their “home” schools and are doing great. They are continuing services at this time to ensure maintenance of progress but there is a plan in place to close due to progress made. Both of these students have demonstrated improved school attendance, grades, and behavioral interactions to “earn” their way back in to their home schools. One has found success in developing healthier relationships and the other is maintaining a job. Both report improved relationships with parents.

Licensed therapist and case manager work with a high school aged student who was doing poorly academically and expressing some suicidal ideation with plan. She was hospitalized and upon discharge from the hospital was fired from her long term job due

to missing a day of work during her hospitalization, which amped up some increased suicidality. In working with us we helped her secure funds for Washburn Tech, she found a new (and better) job, and is doing really well. She recently participated in the youth and family panel at a recent ICE (Interactive Community Event) training in Topeka.

Licensed therapist and case manager work with a young elementary age male who along with his mom, also recently spoke at the ICE training event. Their success is defined in what having access to services through the MHIT program has meant for them. Mom had been a consumer of services and her memory is that of “bad” experiences with FSGC as a young person. Despite his needs mom was really struggling to put him through what she felt she had gone through to address his issues. With time, patience, and a new avenue to services she was able to give it a chance and is now a self-proclaimed FSGC advocate. The child’s behaviors are improving, but also so is the family as a whole, based on what they are learning and doing in his services.

Last but not least, a client of licensed therapist and case manager who had a sad story of poor grades and attendance, but this kid was much more of an internalizer who has a very well-known younger brother who is much more active in services. Because of this younger brother tends to get the attention and older brother sits in his sadness. He had no hopes of graduating and no plans of what he wanted to do with the rest of his life. He has been engaged in therapy and case management with the MHIT program and is now in a healthy relationship with his girlfriend, getting good grades, on track to graduate, and attending Tech. He also has a hobby of picking up basically junk, cleaning it up to sell it, and uses the money to buy materials to build benches. He is working on one right now to donate back to his school for their support. He’s a great kid!

Improved relationship with schools:

We’ve always had an established route of communication with the schools but through this project we have definitely developed an increased understanding of what each other’s roles are and new appreciation of such. We have created a universal referral stream for all schools to use and worked with the school staff to help identify potential candidates for service. We have accompanied school staff to the homes of some of our clients to try outreach for those who do not have transportation or phones, but the kids still have needs.

The more indirect work comes from the relationships the FSGC team is able to build with the parents and kids, and how we then use that relationships to help the schools. We also have the opportunity to role model some interventions with the students that later a staff person comments on or starts to use, so we are finding success with the kids in this “shared language” in some situations.

There are currently 255 students in USD 501 actively served in the MHIT pilot with therapy and case management, an increase of 100 students since last school year. 177 of those are determined to be SED. 42 are uninsured and those tend to be the students who are struggling the most. Case managers work to assist the family to access Medicaid resources when appropriate. There are 44 new referrals pending, with staff attempting outreach.

With the kind of success we have seen in the first one and one-half years of the school mental health pilot/MHIT this has clearly been an excellent return on investment. I ask that you support the provisions of HB2582 that would put the school mental health intervention team into statute. A generation of children will benefit from this important work.