



# MACSSA

Minnesota Association of County Social Service Administrators

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March 2, 2021

Representative Peter Fischer, Chair  
Behavioral Health Policy Committee  
551 State Office Building  
St. Paul, MN 55155

RE: Support for HF 1532 – DHS community supports administration policy modifications

Dear Chair Fischer and Members of the Behavioral Health Policy Committee:

MACSSA supports language in House File 1532 that streamlines children's mental health screening reporting requirements for the purposes of program evaluation and improvement. The change will maintain critical data protections for children and families, while allowing for more efficient data collection and reporting methods by the Department of Human Services.

Established in 2004, Children's mental health screening grants integrate mental health screening into current practice, promote the use of effective and efficient mental health screening instruments, facilitate referral of children for diagnostic assessments, and make funds available for screening and uncompensated mental health services. Mental health screening is a brief process to detect potential mental health problems. Children identified with mental health concerns through the screening process are then referred to a mental health professional who further determines a mental health diagnosis. The Department of Human Services (DHS) provides grant funding to counties and tribes to conduct these screenings.

In an effort to better track the effectiveness of the grant, beginning in 2020, DHS changed the required Children's Mental Health Screening data that is collected from counties and tribes. The goal of the change was to allow DHS to enhance its monitoring and data analysis capabilities of the children's mental health screenings.

To meet the requirement, some of the required data is able to be collected/extracted by the Department of Human Services (DHS) from the Social Service Information System (SSIS). However, to complete the required data set, additional social service data, as well as data from the juvenile justice system need to be gathered or submitted by county staff to DHS. This requirement resulted in county staff compiling spreadsheets and manually entering and tracking data. This data requirement by DHS Behavioral Health (BH) is burdensome for county staff, labor intensive and prone to inaccuracies based on manual inputting of data leaving the validity of the data in question.

MACSSA supports provisions in HF 1532 that addresses data collection needs for reporting and evaluation purposes, while protecting the privacy of children and families. This proposed change allows DHS to directly pull

the necessary data to meet the Children's Mental Health grant requirements. MACSSA urges passing of these timely and important provisions.

Sincerely,

A handwritten signature in black ink, appearing to read 'Matthew Freeman', with a long horizontal flourish extending to the right.

Matthew Freeman  
Executive Director, MACSSA