



# **Maryland Consortium on Coordinated Community Supports**

**December 6, 2022**

## **Presentation to the State Board of Education**

**Mark Luckner, Executive Director**

**Maryland Community Health Resources Commission**

# Overview

---

- Background on the Consortium
- Background on the Community Health Resources Commission (fiscal agent)
- Main activities in 2022
- Next steps

# Background on the Consortium

---

- Added as an amendment to HB 1300 of 2020, Blueprint for Maryland's Future (Kirwan).
  - Legislators wanted to do more to address student behavioral health
  - “Housed” at CHRC
- Modified by SB 802 of 2022, effective July 1, 2022.
  - Added four additional members to Consortium
  - Changed designation of Chair
  - Clarified CHRC as fiscal agent

# Background on the Consortium

---

- A new state agency to expand access to student behavioral health services and related “wraparound” needs.
  - Develop a **statewide** framework for Partnerships
  - Maximize Medicaid
  - Positive classroom environment
  - Grant program (next slide)
- Former Del. David D. Rudolph appointed chair in July 2022.
- National Center for School Mental Health provides technical assistance.

# Consortium Membership – 24 total

---

**David D. Rudolph**, Chair

**Robin Rickard**, Exec Dir, Opioid Operational Command Center

**Emily Bauer**, Two-Generation Pgm Ofcr, Dept of Human Services

**Mohammed Choudhury**, Superintendent, MD State Dept of Education

**Edward Kasemeyer**, Chair, CHRC

**Cory Fink**, Dep Sec for Community Ops, Dept of Juvenile Services

**Mary Gable**, Asst Superintendent, Div of Student Support, Academic Enrichment, & Educational Policy, MD State Dept of Education

**Christina Bartz**, Dir of Community Based Programs, Choptank Community Health Sys

**Dr. Derek Simmons**, Superintendent, Caroline County Public Schools

**Tammy Fraley**, Allegany Cty Board of Education

**Russell Leone**, President, Teacher's Association of Anne Arundel Cty

**Gail Martin**, former Baltimore Cty Public Schools Team Leader, School Social Work

**D'Andrea Jacobs**, School Psychologist, Baltimore Cty Public Schools

**Dr. John Campo**, MD, Dir of Mental Health, Johns Hopkins Children's Center, JHU Hospital

**Sadiya Muqueeth**, DrPH, Dir of Community Health, National Programs, Trust for Public Lands, and member, CHRC

**Linda Rittelmann**, Senior Manager, Medicaid Behavioral Health ASO, Maryland Dept of Health

**Larry Epp**, Ed.D., Dir of Outcomes and Innovation, Families and Communities Service Line, Sheppard Pratt

**Gloria Brown Burnett**, Dir, Prince George's Cty Dept of Soc Svcs

**Michael A. Trader, II**, Asst Dir of Behavioral Health, Worcester Cty Health Dept

**Dr. Kandice Taylor**, School Safety Manager, Baltimore Cty Public Schools

**Senator Katie Fry Hester**

**Delegate Eric Ebersole**

*The Consortium currently has two vacancies.*



# Background on the Community Health Resources Commission

---

## Statutory Responsibilities of CHRC

1. Expand access to health care in underserved communities;
2. Support projects that serve low-income Marylanders, regardless of insurance status;
3. Build capacity of safety-net providers;
4. Implement the Maryland Health Equity Resource Act;
5. Council on Advancement of School-Based Health Centers;  
and
6. Maryland Consortium on Coordinated Community Supports.

# CHRC Commissioners

---

**Edward J. Kasemeyer**, CHRC Chair, Former Senator and Chair of the Maryland Senate Budget & Taxation Committee

**J. Wayne Howard**, CHRC Vice Chair, Former President and CEO, Choptank Community Health

**TraShawn Thornton-Davis**, Assistant Service Chief, OB/GYN, DCSM, Mid-Atlantic Permanente Group

**Scott T. Gibson**, Chief Strategy Officer, Melwood Horticultural Training Center, Inc.

**Flor Giusti**, Johns Hopkins University

**David Lehr**, Chief Strategy Officer, Meritus Health

**Karen-Ann Lichtenstein**, Former President and CEO, The Coordinating Center

**Roberta Loker**

**Carol Masden**, LCSW-C

**Sadiya Muqueeth**, Dr.PH, Director of Community Health, National Programs, Trust for Public Lands

**Destiny-Simone Ramjohn**, PhD, Vice President, Community Health and Social Impact, CareFirst

# Impact of CHRC Grants

---

- Awarded 668 grants totaling \$117 million.
- Supported projects in all 24 jurisdictions.
- Served more than 500,000 Marylanders; many have received services, including those with complex health and social service needs.
- Leveraged \$31.8 million in additional resources.
- 75% of grants sustained at least one year after funding expired.



# CHRC – Some areas of focus

---

- Expanding Access to Primary Care Services
- Providing Dental Care for Low-income Children and Adults
- Addressing diabetes and chronic disease
- Promoting Comprehensive Women's Health Services and Reducing Infant Mortality
- Addressing behavioral health, including mental health and the ongoing impact of the opioid crisis
- Supporting School-Based Health Centers and school health programs

# Coordinated Community Supports Partnership Fund

---

- Grant program to support the delivery of services and supports to meet students' holistic behavioral health needs and related challenges.
- Consortium will develop policy framework, CHRC will act as fiscal agent.
- Grant funds must be supplemental to and may not supplant existing funding.
- First Call for Proposals will be issued by CHRC in calendar year 2023.

# Consortium Activities in 2022

---

The Maryland Consortium on Coordinated Community Supports held 4 meetings:

- August 17, 2022
- September 22, 2022
- October 18, 2022
- November 15, 2022

The Consortium will hold its final meeting of CY 2022 on December 13, 2022.

# Consortium Subcommittees

---

- 1. Framework, Design, & RFP** – Superintendent Mohammed Choudhury and Dr. Sadiya Muqueeth
- 2. Data Collection/Analysis & Program Evaluation** – Dr. Larry Epp
- 3. Outreach and Community Engagement** – Tammy Fraley and Robin Rickard
- 4. Best Practices** – Dr. John Campo and Dr. Derek Simmons

# Framework, Design, & RFP Subcommittee

---

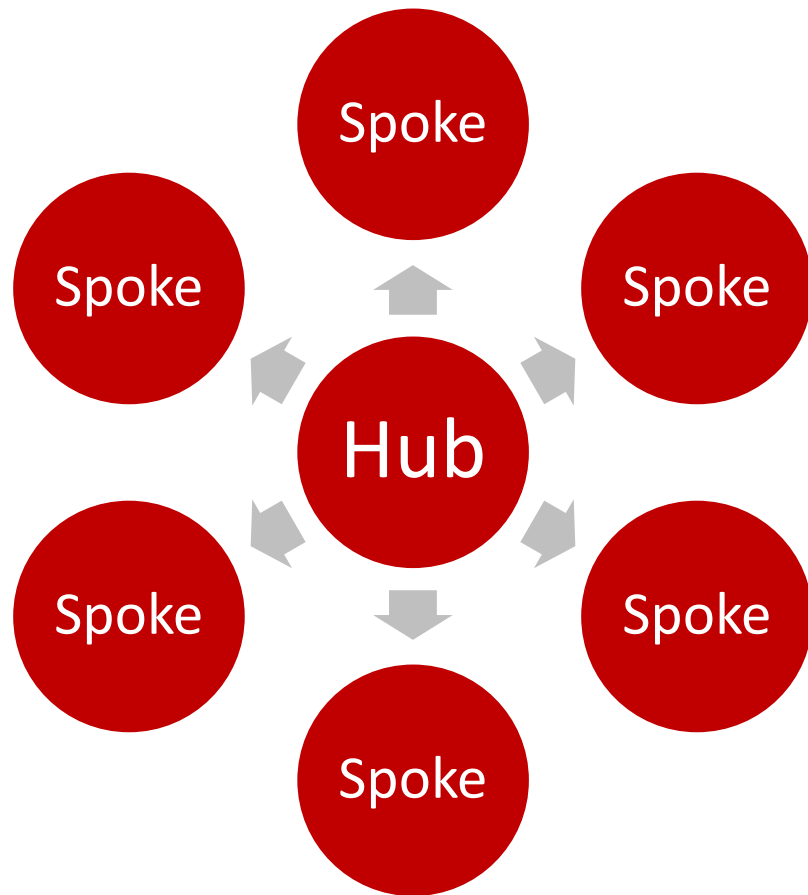
**Chairs:** Superintendent Mohammed Choudhury and Sadiya Muqueeth, DrPH

## **Responsibilities:**

- Design overall program structure
- Recommend contours of first RFP
- Study Medicaid reimbursement

# Framework Subcommittee: Hub and Spoke model

---



- Collective Impact model.
- **Hub** is the Partnership/lead grantee
  - “backbone” of Collective Impact model.
  - new or existing organization.
  - coordinate the activities of spokes, manage financial and data responsibilities.
  - geographic - can be at jurisdiction level, sub-jurisdiction or multi-jurisdiction.
- **Spokes** are the service providers/sub-grantees; “partners” of Collective Impact model.
- Close coordination and MOU with the schools.

# Framework Subcommittee: First RFP

---

The first RFP is likely to support BOTH capacity building/planning AND service delivery/expansion/enhancement.

Year 1 applicants/grantees may include both:

- A. Hubs/backbones:** Organizations that could become Partnerships. Grant dollars support planning grants and technical assistance.
- B. Spokes:** Service providers. Grant dollars support access to services.

# Framework Subcommittee: Who can be a Hub?

---

- Hub could be a new or existing organization (e.g., Local Management Board, Local Behavioral Health Administration, etc.).
- Preference for a Hub to be non-profit, to have an advisory board, participation of residents in governance, regular audits, etc.
  - Current thinking is that an LEA or school would not be a Hub, but Hubs must closely coordinate with LEAs and schools.
- Spokes delivering services may be non-profit or for-profit.
  - Current thinking is that an LEA or school would not be a Spoke, but Spokes must closely coordinate with LEAs and schools.



# Data Collection/Analysis & Program Evaluation Subcommittee

---

**Chair:** Dr. Larry Epp

## **Responsibilities:**

- Develop quantifiable accountability metrics for Consortium as a whole
- Develop quantifiable accountability metrics for grantees
- Recommend data to assess care at the individual student level

# Data Subcommittee

## Potential examples of impact of Consortium

---

- A. Expand access to behavioral health and related services** – number of students and families impacted by programs, wait time to access services, Medicaid dollars leveraged
- B. Improve student wellbeing and readiness to learn** – improvements in student wellbeing and anxiety, reductions in substance misuse
- C. Other** – increased use of positive classroom strategies, reduction in disciplinary incidents and justice system referrals



*These are still being finalized.*

# Outreach and Community Engagement Subcommittee

---

**Chairs:** Tammy Fraley and Robin Rickard

## **Responsibilities:**

- Launch public comment period to gather information on key design and other questions
- Receive feedback from stakeholders and communities
- Inform stakeholders and communities about future grant opportunity

# Outreach Subcommittee: Public Comment Period

---

- October 26 – November 16, 2022
- 12 questions to solicit feedback on program design, scope of potential grant activities, data metrics
- Comments accepted in writing or orally at meeting on November 10
- 81 responses
  - responses from across the state
  - wide range of stakeholders
  - both behavioral health and education
- Subcommittees are currently reviewing responses
- Responses will be used to inform the overall design of the program as well as the upcoming RFP

# Public comments received – some themes

---

- All three tiers of Multi-Tiered System of Supports (MTSS - universal, targeted, individual)
- Group therapy highlighted
- Working with families, not just students
- Substance Use programs
- Transportation to services
- Prevention
- Cultural and linguistic competency
- Focus on areas with provider shortages and socioeconomic needs
- Workforce – wages, work environment, trainings, sustainable positions
- Training for how to use and collect data
- Provide key data to applicants and grantees
- Use data to inform treatment plans

# Best Practices Subcommittee

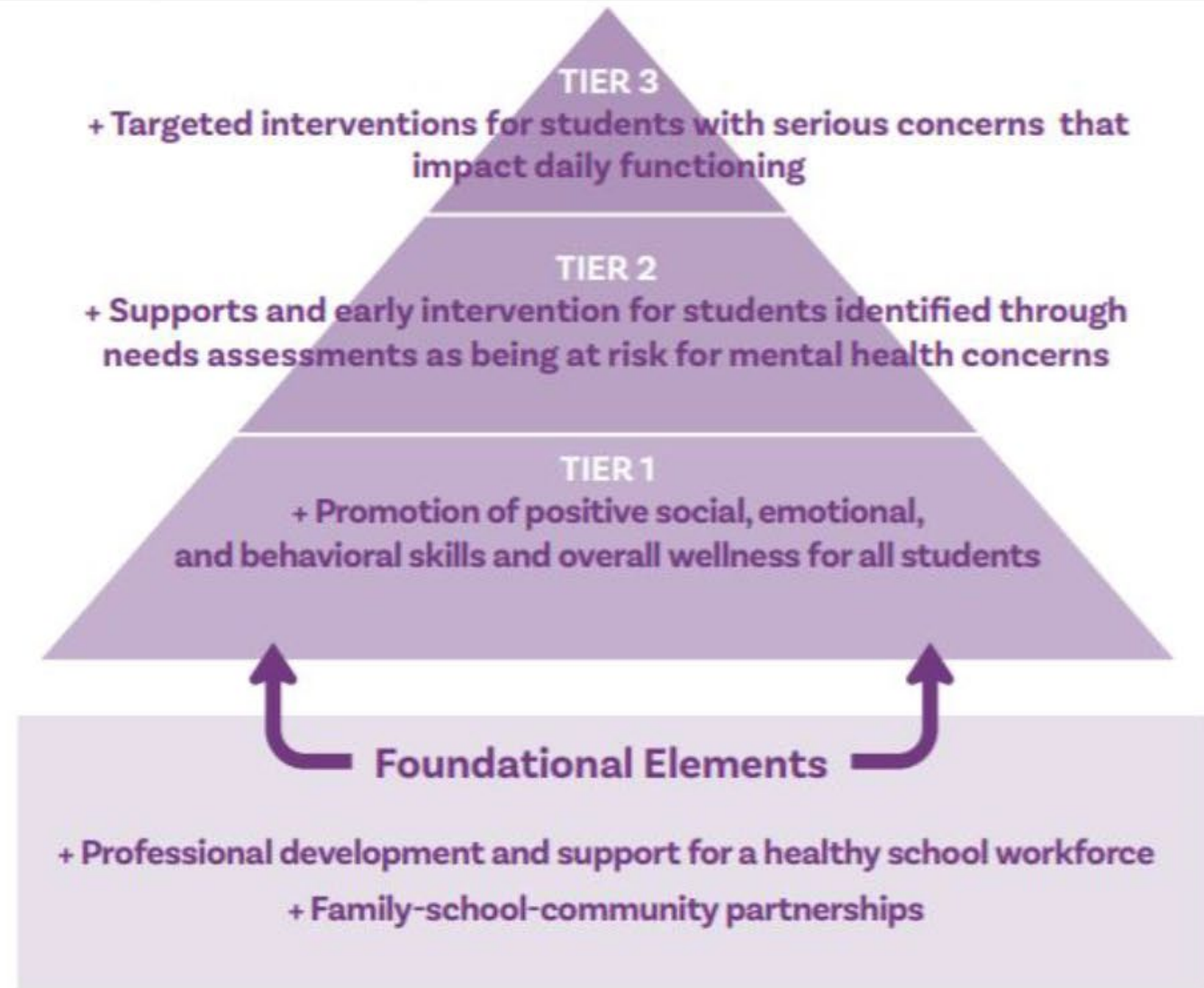
---

**Chairs:** Dr. John Campo and Dr. Derek Simmons

## **Responsibilities:**

- Develop best practices in the delivery of behavioral health and wraparound services
- Develop best practices for positive classroom environment

# Best Practices Subcommittee



The Subcommittee plans to develop a list of best practices for the delivery of services at each level of the Multi Tiered System of Supports.

# Best Practices Subcommittee

---

- Which Evidence-Based Best Practices should be *recommended* for grantees?
- Which Evidence-Based Best Practices should be *required* for all grantees?



# Consortium - Next Steps

---

**December 2022** – Consortium submits first legislative report

**Early 2023** – Consortium presents recommendations to CHRC

**Mid 2023** – CHRC issues first Coordinated Community Supports Partnerships RFP, awards grants

- The full Consortium will continue to meet regularly (Dec. 13, Jan. 10).
- Subcommittees will continue to meet, review public comments, and develop recommendations for the overall program design and RFP.

# Questions?

---

Mark Luckner  
CHRC Executive Director  
Mark.Luckner@Maryland.gov