

1 AN ACT concerning health.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Children's Mental Health Act of 2003 is  
5 amended by changing Sections 1 and 5 as follows:

6 (405 ILCS 49/1)

7 Sec. 1. Short title. This Act may be cited as the  
8 Children's Mental Health Act ~~of 2003~~.

9 (Source: P.A. 93-495, eff. 8-8-03.)

10 (405 ILCS 49/5)

11 Sec. 5. Children's Mental Health Partnership; Children's  
12 Mental Health Plan.

13 (a) The Children's Mental Health Partnership (hereafter  
14 referred to as "the Partnership") created under Public Act  
15 93-495 and continued under this amendatory Act of the 102nd  
16 General Assembly shall advise State agencies on designing and  
17 implementing short-term and long-term strategies to provide  
18 comprehensive and coordinated services for children from birth  
19 to age 25 and their families with the goal of addressing  
20 children's mental health needs across a full continuum of  
21 care, including social determinants of health, prevention,  
22 early identification, and treatment. The recommended

1 strategies shall build upon the recommendations in the  
2 Children's Mental Health Plan of 2022 and may include, but are  
3 not limited to, recommendations regarding the following: ~~The~~  
4 ~~State of Illinois shall develop a Children's Mental Health~~  
5 ~~Plan containing short term and long term recommendations to~~  
6 ~~provide comprehensive, coordinated mental health prevention,~~  
7 ~~early intervention, and treatment services for children from~~  
8 ~~birth through age 18. This Plan shall include but not be~~  
9 ~~limited to:~~

10 (1) Increasing public awareness on issues connected to  
11 children's mental health and wellness to decrease stigma,  
12 promote acceptance, and strengthen the ability of  
13 children, families, and communities to access supports.  
14 ~~Coordinated provider services and interagency referral~~  
15 ~~networks for children from birth through age 18 to~~  
16 ~~maximize resources and minimize duplication of services.~~

17 (2) Coordination of programs, services, and policies  
18 across child-serving State agencies to best monitor and  
19 assess spending, as well as foster innovation of adaptive  
20 or new practices. ~~Guidelines for incorporating social and~~  
21 ~~emotional development into school learning standards and~~  
22 ~~educational programs, pursuant to Section 15 of this Act.~~

23 (3) Funding and resources for children's mental health  
24 prevention, early identification, and treatment across  
25 child-serving State agencies. ~~Protocols for implementing~~  
26 ~~screening and assessment of children prior to any~~

1 ~~admission to an inpatient hospital for psychiatric~~  
2 ~~services, pursuant to subsection (a) of Section 5-5.23 of~~  
3 ~~the Illinois Public Aid Code.~~

4 (4) Facilitation of research on best practices and  
5 model programs and dissemination of this information to  
6 State policymakers, practitioners, and the general public.  
7 ~~Recommendations regarding a State budget for children's~~  
8 ~~mental health prevention, early intervention, and~~  
9 ~~treatment across all State agencies.~~

10 (5) Monitoring programs, services, and policies  
11 addressing children's mental health and wellness.  
12 ~~Recommendations for State and local mechanisms for~~  
13 ~~integrating federal, State, and local funding sources for~~  
14 ~~children's mental health.~~

15 (6) Growing, retaining, diversifying, and supporting  
16 the child-serving workforce, with special emphasis on  
17 professional development around child and family mental  
18 health and wellness services. ~~Recommendations for building~~  
19 ~~a qualified and adequately trained workforce prepared to~~  
20 ~~provide mental health services for children from birth~~  
21 ~~through age 18 and their families.~~

22 (7) Supporting the design, implementation, and  
23 evaluation of a quality-driven children's mental health  
24 system of care across all child services that prevents  
25 mental health concerns and mitigates trauma.  
26 ~~Recommendations for facilitating research on best~~

1 ~~practices and model programs, and dissemination of this~~  
2 ~~information to Illinois policymakers, practitioners, and~~  
3 ~~the general public through training, technical assistance,~~  
4 ~~and educational materials.~~

5 (8) Improving the system to more effectively meet the  
6 emergency and residential placement needs for all children  
7 with severe mental and behavioral challenges.

8 ~~Recommendations for a comprehensive, multi faceted public~~  
9 ~~awareness campaign to reduce the stigma of mental illness~~  
10 ~~and educate families, the general public, and other key~~  
11 ~~audiences about the benefits of children's social and~~  
12 ~~emotional development, and how to access services.~~

13 ~~(9) Recommendations for creating a quality driven~~  
14 ~~children's mental health system with shared accountability~~  
15 ~~among key State agencies and programs that conducts~~  
16 ~~ongoing needs assessments, uses outcome indicators and~~  
17 ~~benchmarks to measure progress, and implements quality~~  
18 ~~data tracking and reporting systems.~~

19 ~~(10) Recommendations for ensuring all Illinois youth~~  
20 ~~receive mental health education and have access to mental~~  
21 ~~health care in the school setting. In developing these~~  
22 ~~recommendations, the Children's Mental Health Partnership~~  
23 ~~created under subsection (b) shall consult with the State~~  
24 ~~Board of Education, education practitioners, including,~~  
25 ~~but not limited to, administrators, regional~~  
26 ~~superintendents of schools, teachers, and school support~~

1 ~~personnel, health care professionals, including mental~~  
2 ~~health professionals and child health leaders, disability~~  
3 ~~advocates, and other representatives as necessary to~~  
4 ~~ensure the interests of all students are represented.~~

5 (b) ~~The Children's Mental Health Partnership (hereafter~~  
6 ~~referred to as "the Partnership") is created.~~ The Partnership  
7 shall have the responsibility of developing and updating the  
8 Children's Mental Health Plan and advising the relevant State  
9 agencies on implementation of the Plan. The Children's Mental  
10 Health Partnership shall be comprised of the following  
11 members:

12 (1) The Governor or his or her designee.

13 (2) The Attorney General or his or her designee.

14 (3) The Secretary of the Department of Human Services  
15 or his or her designee.

16 (4) The State Superintendent of Education or his or  
17 her designee.

18 (5) The Director of the Department of Children and  
19 Family Services or his or her designee.

20 (6) The Director of the Department of Healthcare and  
21 Family Services or his or her designee.

22 (7) The Director of the Department of Public Health or  
23 his or her designee.

24 (8) The Director of the Department of Juvenile Justice  
25 or his or her designee.

26 (9) The Executive Director of the Governor's Office of

1 Early Childhood Development or his or her designee.

2 (10) The Director of the Criminal Justice Information  
3 Authority or his or her designee.

4 (11) One member of the General Assembly appointed by  
5 the Speaker of the House.

6 (12) One member of the General Assembly appointed by  
7 the President of the Senate.

8 (13) One member of the General Assembly appointed by  
9 the Minority Leader of the Senate.

10 (14) One member of the General Assembly appointed by  
11 the Minority Leader of the House.

12 (15) Up to 25 representatives from the public  
13 reflecting a diversity of age, gender identity, race,  
14 ethnicity, socioeconomic status, and geographic location,  
15 to be appointed by the Governor. Those public members  
16 appointed under this paragraph must include, but are not  
17 limited to:

18 (A) a family member or individual with lived  
19 experience in the children's mental health system;

20 (B) a child advocate;

21 (C) a community mental health expert,  
22 practitioner, or provider;

23 (D) a representative of a statewide association  
24 representing a majority of hospitals in the State;

25 (E) an early childhood expert or practitioner;

26 (F) a representative from the K-12 school system;

1 (G) a representative from the healthcare sector;

2 (H) a substance use prevention expert or  
3 practitioner, or a representative of a statewide  
4 association representing community-based mental health  
5 substance use disorder treatment providers in the  
6 State;

7 (I) a violence prevention expert or practitioner;

8 (J) a representative from the juvenile justice  
9 system;

10 (K) a school social worker; and

11 (L) a representative of a statewide organization  
12 representing pediatricians.

13 (16) Two co-chairs appointed by the Governor, one  
14 being a representative from the public and one being a  
15 representative from the State.

16  
17 The members appointed by the Governor shall be appointed  
18 for 4 years with one opportunity for reappointment, except as  
19 otherwise provided for in this subsection. Members who were  
20 appointed by the Governor and are serving on the effective  
21 date of this amendatory Act of the 102nd General Assembly  
22 shall maintain their appointment until the term of their  
23 appointment has expired. For new appointments made pursuant to  
24 this amendatory Act of the 102nd General Assembly, members  
25 shall be appointed for one-year, two-year, or four-year terms,  
26 as determined by the Governor, with no more than 9 of the

1 Governor's new or existing appointees serving the same term.  
2 Those new appointments serving a one-year or 2-year term may  
3 be appointed to 2 additional 4-year terms. If a vacancy occurs  
4 in the Partnership membership, the vacancy shall be filled in  
5 the same manner as the original appointment for the remainder  
6 of the term.

7 The Partnership shall be convened no later than January  
8 31, 2023 to discuss the changes in this amendatory Act of the  
9 102nd General Assembly.

10 The members of the Partnership shall serve without  
11 compensation but may be entitled to reimbursement for all  
12 necessary expenses incurred in the performance of their  
13 official duties as members of the Partnership from funds  
14 appropriated for that purpose.

15 The Partnership may convene and appoint special committees  
16 or study groups to operate under the direction of the  
17 Partnership. Persons appointed to such special committees or  
18 study groups shall only receive reimbursement for reasonable  
19 expenses.

20 ~~monitoring the implementation of the Children's Mental Health~~  
21 ~~Plan as approved by the Governor. The Children's Mental Health~~  
22 ~~Partnership shall be comprised of: the Secretary of Human~~  
23 ~~Services or his or her designee; the State Superintendent of~~  
24 ~~Education or his or her designee; the directors of the~~  
25 ~~departments of Children and Family Services, Healthcare and~~  
26 ~~Family Services, Public Health, and Juvenile Justice, or their~~

1 ~~designees; the head of the Illinois Violence Prevention~~  
2 ~~Authority, or his or her designee; the Attorney General or his~~  
3 ~~or her designee; up to 25 representatives of community mental~~  
4 ~~health authorities and statewide mental health, children and~~  
5 ~~family advocacy, early childhood, education, health, substance~~  
6 ~~abuse, violence prevention, and juvenile justice organizations~~  
7 ~~or associations, to be appointed by the Governor; and 2~~  
8 ~~members of each caucus of the House of Representatives and~~  
9 ~~Senate appointed by the Speaker of the House of~~  
10 ~~Representatives and the President of the Senate, respectively.~~  
11 ~~The Governor shall appoint the Partnership Chair and shall~~  
12 ~~designate a Governor's staff liaison to work with the~~  
13 ~~Partnership.~~

14 (c) (Blank). ~~The Partnership shall submit a Preliminary~~  
15 ~~Plan to the Governor on September 30, 2004 and shall submit the~~  
16 ~~Final Plan on June 30, 2005. Thereafter, on September 30 of~~  
17 ~~each year, the Partnership shall submit an annual report to~~  
18 ~~the Governor on the progress of Plan implementation and~~  
19 ~~recommendations for revisions in the Plan. The Final Plan and~~  
20 ~~annual reports submitted in subsequent years shall include~~  
21 ~~estimates of savings achieved in prior fiscal years under~~  
22 ~~subsection (a) of Section 5-5.23 of the Illinois Public Aid~~  
23 ~~Code and federal financial participation received under~~  
24 ~~subsection (b) of Section 5-5.23 of that Code. The Department~~  
25 ~~of Healthcare and Family Services shall provide technical~~  
26 ~~assistance in developing these estimates and reports.~~

1       (d) The Illinois Children's Mental Health Partnership has  
2 the following powers and duties:

3           (1) Conducting research assessments to determine the  
4 needs and gaps of programs, services, and policies that  
5 touch children's mental health.

6           (2) Developing policy statements for interagency  
7 cooperation to cover all aspects of mental health  
8 delivery, including social determinants of health,  
9 prevention, early identification, and treatment.

10          (3) Recommending policies and provide information on  
11 effective programs for delivery of mental health services.

12          (4) Using funding from federal, state, or  
13 philanthropic partners, to fund pilot programs or research  
14 activities to resource innovative practices by  
15 organizational partners that will address children's  
16 mental health. However, the Partnership may not provide  
17 direct services.

18          (5) Submitting an annual report, on or before December  
19 30 of each year, to the Governor and the General Assembly  
20 on the progress of the Plan, any recommendations regarding  
21 State policies, laws, or rules necessary to fulfill the  
22 purposes of the Act, and any additional recommendations  
23 regarding mental or behavioral health that the Partnership  
24 deems necessary.

25          (6) Employing an Executive Director and setting the  
26 compensation of the Executive Director and other such

1 employees and technical assistance as it deems necessary  
2 to carry out its duties under this Section.

3 The Partnership may designate a fiscal and administrative  
4 agent that can accept funds to carry out its duties as outlined  
5 in this Section.

6 The Department of Healthcare and Family Services shall  
7 provide technical and administrative support for the  
8 Partnership.

9 (e) The Partnership may accept monetary gifts or grants  
10 from the federal government or any agency thereof, from any  
11 charitable foundation or professional association, or from any  
12 reputable source for implementation of any program necessary  
13 or desirable to carry out the powers and duties as defined  
14 under this Section.

15 (f) On or before January 1, 2027, the Partnership shall  
16 submit recommendations to the Governor and General Assembly  
17 that includes recommended updates to the Act to reflect the  
18 current mental health landscape in this State.

19 (Source: P.A. 102-16, eff. 6-17-21; 102-116, eff. 7-23-21.)

20 Section 99. Effective date. This Act takes effect January  
21 1, 2023.