

FAMILY SERVICE &
GUIDANCE CENTER

March 15, 2024

Re: Testimony supporting HB 2669-MHIT

Thank you Chairwoman and Members of Senate Education Committee.

My name is Kathy Mosher, Licensed Clinical Psychotherapist, and CEO of Family Service & Guidance Center (FSGC) in Topeka. FSGC is a Community Mental Health Center (CMHC) specializing in youth and families for over 50 years. Our MHIT school and outreach services are operational in 22 schools. This program gets great results:

| FSGC Outcomes | 2023 | 2022 | |
|--|-------------|-------------|--------------------------|
| Improved school attendance: | 85% | 79% | 145 out of 189 students. |
| Improved academic performance | 77% | 76% | 192 out of 263 students. |
| Improved externalizing behaviors | 72% | 71% | 259 out of 360 students. |
| Improved internalizing behaviors: | 79% | 63% | 233 out of 296 students. |

MHIT uses very few state tax dollars since it does not fund the cost of the MHIT system. In its genius development, it makes efficient use of our existing system and incentivizes cost effective partnerships between CMHCs and schools. When schools choose us to provide their MHIT program, the funding covers under 15% of our cost. The schools receive partial funding for a School Mental Health Liaison position and collect data to evaluate program impact. The state's return on investment exceeds many results gained from other best practice interventions. Students who were high risk are now thriving and saving cost in many other budget areas of the state.

Our MHIT teams and services are formed based on the needs of the school. Additional school based services include crisis services, social emotional skill-building groups, wrap around parent/family support, and coordination of whole person care: physical, behavioral, foster care, basic needs, etc. Our CMHC staff are trained in evidenced-based practices and have broad depth in experience, crisis management, and specialized services. Therefore, one therapist in a school has access to many more best practices and many more specialized services like our youth Anxiety Boot Camp program.

Our MHIT staff intervened in 214 crisis situations so far this school year. FSGC diverted over 76% of hospitalizations and referrals for out of home placements in 2023.

There are countless opportunities for earlier intervention which frees up acute hospital beds which are over capacity.

Success Story:

“One day a young man in alternative education came up to one of our staff. He was asking to see a specific clinician who, at that time, was out in the community. The young man said he knew that he needed to get into services, or he was going to die. He was a freshman in high school and had recently been arrested for aggression at school and had charges pending. The clinician he was requesting (he remembered her from the year before) adjusted her schedule and met him within 20 minutes. He was de-escalated and they went to the home to better engage the legal guardian. This built trust and offered convenience for the parent, who then consented to additional services. I am proud to say that young man has completed treatment successfully. He is thriving at school, became a peer leader, established a student government, and now gives back to our community every day.”

MHIT just makes sense

MHIT expands access to quality mental health care at a fraction of the cost, and makes efficient use of a workforce in short supply.

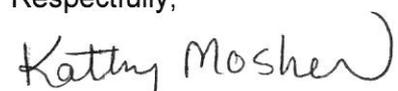
MHIT is not about providing one service to kids when school is in session. It is about offering treatment that is medically necessary to succeed, connecting kids and families to a treatment program that is consistent and not just available when school is in session; it's also about working with a multi-disciplinary team and hardworking school staff who all do their part.

It's about partnering with the school district to address problems and find solutions and fill gaps. It's not necessary to expend funding that duplicates a system that already exists. It's about bringing the systems together and only funding the gaps.

The program currently is funded for one year at a time, which makes it hard to grow the program. This bill will move MHIT from a one year pilot to a line item in the state budget.

I support HB 2669 and to put school MHIT into statute. Your support could well be a legacy that helps generations of families in your community be healthier and more productive adults. I am happy to answer questions when it is time.

Respectfully,



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