

# Advocate for a Resilient Iowa



## IOWA ACES POLICY COALITION: 2019 LEGISLATIVE RECOMMENDATIONS

### 1<sup>ST</sup> FIVE HEALTHY DEVELOPMENT INITIATIVE

- **Expand the 1st Five Healthy Mental Development Initiative** statewide to increase access to developmental health and family resources.
  - *Counties currently without 1st Five: Cherokee, Clinton, Ida, Iowa, Jackson, Johnson, Lyon, Plymouth, Scott, Sioux, and Woodbury.*

### CHILDREN'S MENTAL HEALTH

- **Develop a Statewide Children's Behavioral Health System** including a multi-tiered system of
  - Prevention, early identification, early intervention and community prevention;
  - Comprehensive crisis services;
  - Behavioral health treatment; and
  - Community-based flexible support services.
- **Promote Universal Social, Emotional and Cognitive Developmental Screening (Beginning at Birth).**
- **Establish Core Pediatric-Specific Behavioral Health Services Accessible to All Children in Iowa.**
- **Address Workforce Shortages within Children's Behavioral Health** through workforce incentives such as Future Ready Iowa, tuition reimbursement programs, tax credits for behavioral health professionals, and student loan forgiveness programs.
- **Establish a State and Regional System of Governance which Consists of Experts in Children's Behavioral Health** to ensure a comprehensive array of core services is available to children within their regions.
- **Expand Funding for Children's Behavioral Health Services.** Eliminate the Children's Mental Health Home and Community Based Services Waiver waiting list, and expand access to the Pediatric Integrated Health Homes (Medicaid population) and System of Care Programs (privately insured population).

### MEDICAID AND CHILDREN'S HEALTH

- **Create a Pediatric Advisory Board** to advise Iowa Medicaid Enterprise (IME) and the Managed Care Organizations (MCOs) to make recommendations on strategies to improve health outcomes for children covered by Medicaid and hawk-i.
- **Extend Early, Screening, Diagnosis and Treatment (EPSDT)** to children covered in Iowa's separate CHIP program (hawk-i).

### PRENATAL HOME-VISITATION

- **Continue state investment into home-visiting** programs as a primary prevention and early intervention strategy for childhood trauma and family stress.
- **Increase access to prenatal and maternal health home-visiting programs.**

### TRAUMA-INFORMED CHILD WELFARE SYSTEM

- **Reducing the caseloads of Iowa DHS Social Workers** to meet the recommended Child Welfare League of America standards of no more than 12 cases per social worker investigating child abuse, and no more than 17 cases per social worker for ongoing in-home cases.
- **Investing in the Comprehensive Child Welfare Information System** to support the critically needed data system overhaul to ensure the state is able to ensure program quality and the safety of children in Iowa's child welfare system.
- **Advancing evidence-based practices** which support children, families and professionals in multiple disciplines and settings, to reduce the need for out-of-home placement in the child welfare system.

*For more information, visit [www.iowaaces360.org](http://www.iowaaces360.org) or contact [iowaACES@gmail.com](mailto:iowaACES@gmail.com).*