

# Position Statement

2021

## Allowing Telemedicine Alternatives for School Linked Mental Health Services & Intermediate School District Mental Health Services for Children & their Families

### Proposal

**Issue:** The ability to provide comprehensive mental health services for children and adolescents throughout the entirety of the State of Minnesota is challenging under normal circumstances. With the onset of the COVID-19 Pandemic, the delivery of in-person mental health services has been nearly impossible in many areas of the state. Changes in the delivery of mental health services are necessary to eliminate barriers preventing service delivery. Alternatives to the traditional office visits are necessary for areas of the state which struggle with mental health professional shortages and geographic locations which require lengthy travel to attend medically necessary mental health appointments.

**Implementation Strategy:** While it is recognized that many mental health interventions are best provided in-person, due to mental health professional shortages, geographic locations and the nature of the COVID-19 Pandemic, this is not possible. To ensure that children and families continue to have access to needed mental health services, changes in service delivery are crucial to address mental health care.

In the short-term:

- Due to the uncertainty of the pandemic, school linked mental health services & intermediate district mental health services for children and their families can be delivered through telemedicine when other service modalities are unavailable.
- Due to staffing shortages related to mental health professional shortages or staffing shortages created by the COVID-19 Pandemic, school linked mental health & intermediate district mental health services can be delivered via telemedicine.
- The provision of telemedicine will adhere to professional standards supported by ethical guidelines and principles.

In the long-term:

- Due to geographic locations within the State of Minnesota which limit access to mental health services, school linked mental health & intermediate district mental health services can be delivered via telemedicine.
- Due to staffing shortages related to mental health professional shortages, school linked mental health & intermediate district mental health services can be delivered via telemedicine.
- The provision of telemedicine will adhere to professional standards supported by ethical guidelines and principles.

### Systemic Priority Alignment (highlight all that apply and explain why)

- **Equity**
- **Integrated Services**
- Fiscal Framework

From the GARE Toolkit (See [www.racialequityalliance.org](http://www.racialequityalliance.org)): What are the racial equity impacts of this particular decision? Who will benefit from or be burdened by it? Are there strategies to mitigate unintended consequences?

**Comments:**

By allowing telemedicine services, inequities due to income will not prevent a child or adolescent from receiving mental health services. The services will go to the child/adolescent rather than the family having to obtain transportation to services. By bringing services to the child/adolescent directly, families will be able to remain at work which creates equity for those who may not have flexibility in their work schedules.

The provision of school linked mental health services provides an integrated services network between the school district, the child/adolescent, the family system and the mental health provider. This allows problem solving to be completed around the academic success of the child/adolescent and the mental health struggles which may inhibit academic success.

**Relevant Committee  
(highlight all that apply and explain why)**

- **Adult Services**
- **Behavioral Health**
- **Children's Services**
- **Modernization**
- **Policy**
- **Self-Sufficiency**

**Why:** This position statement falls within the auspices of the delivery of Children's Services as it directly impacts the delivery of mental health services to children/adolescents.

**Rationale/Background:**

In order to provide the equitable delivery of mental health services throughout the entirety of the State of Minnesota, the use of telemedicine should be used in those instances supported by professional standards when in-person services cannot be offered during the time of a pandemic, due to mental health professional shortages or due to geographic locations of a child/adolescent which inhibit accessing services.



Submitted by: Catie Lee, Brad Vold & Jennifer Westrum

Approved on: