

OVERVIEW

THE AUDITOR
STATE OF HAWAII

A Study of the Memorandum of Agreement for Coordinating Mental Health Services to Children

Summary

Adequate mental health services for public school children has been a continuing legislative concern. To better coordinate these services, the Legislature in 1980 required the Department of Health (DOH) and the Department of Education (DOE) to develop a memorandum of agreement. In reviewing the memorandum of agreement, we found that it has not served the purpose intended by the Legislature because the two departments have no ongoing collaborative process for keeping the agreement current and for resolving issues.

The 1985 memorandum between the two departments has not been updated to incorporate new statutory requirements enacted in 1988. The departments have not met regularly to monitor the memorandum and resolve systemwide problems. DOH and DOE personnel at the local level find it difficult to work together effectively because they lack the authority to resolve departmental policies that are unclear, contradictory, or simply nonexistent.

Among issues that need to be resolved is agreement on who is to be served. The memorandum does not set priorities that clearly define the target clientele. The departments also have not agreed on what financial information should be required on each client's ability to pay for mental health services. Nor have they collaborated on collecting statistical data on mental health services or the needs of public school children. Policies on confidentiality of students' psychological reports are another source of conflict between the two departments. The DOH children's teams are also concerned that DOE has not given them adequate space for treatment services.

We believe that the requirement for a memorandum of agreement should be retained but the agreement must be made meaningful and useful. For collaboration to work, the departments must first define their respective responsibilities for mental health services for public school students. The DOE is accountable under federal law to provide or to purchase mental health services for special education students. Some special education students have not received mental health services because of funding limitations at DOH. To avoid federal lawsuits, the DOE needs to ensure more predictable mental health services.

State law requires the DOH children's mental health program to provide a wide range of services for eligible children under age 18. The DOH has not developed a manageable mission or priorities for the program, and the children's mental health teams are unsure about their roles. The DOH needs to decide how it can best serve the mental health needs of children, establish priorities, and organize a program to carry out these priorities.

The Legislature could encourage departmental action by pressing them for more specific information on expenditures for mental health services including information on how much money and how many positions each department used for mental health services. The Legislature could also amend the statutes to establish clearer missions and priorities.

Recommendations and Responses

We recommended that the Department of Education and the Department of Health strengthen their commitment to collaboration by developing a mechanism such as an interagency task force to implement, monitor, and update the memorandum of agreement. The Department of Education should ensure predictable mental health services for special education students; it may wish to contract with DOH for some of these services, and to seek federal Medicaid funds to help pay for the services. The Department of Health should define the primary mission and priorities of the children's mental health program, clarify the role of the children's mental health teams, and issue rules to formalize the mission and priorities. The Legislature should consider requiring each department to submit information on mental health expenditures and services, and it should consider working with them to amend Chapter 301 and Chapter 321, HRS, to clarify their respective missions, priorities, and responsibilities.

The Department of Health did not respond to our recommendations that the director of health clarify the role of the children's mental health teams and issue rules to formalize the mission and priorities of the children's mental health program. The department did acknowledge the need for greater collaboration and reported that it recently began meeting with the Department of Education to map out a functional agreement based on our report. The Department of Education also did not respond to our recommendations. It stresses that no amount of collaboration can overcome the problem of inadequate funding.

The Department of Education should recognize that limitations in funding do not mean the memorandum of agreement will be a futile exercise. Instead, limited funding makes it even more important that the two departments define their respective missions, responsibilities, and priorities in terms of what can feasibly be carried out with available resources and work collaboratively to maximize the services that can be offered with limited funding.

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