

Children Waiting for Services



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Our children's mental health system is in crisis. There simply aren't enough services available, especially for children with complex needs – including aggressive behaviors and intense suicidality. These are the children who are often boarding in the emergency department or in a hospital bed while waiting for residential care or intense in-home supports.

During the past few years, hospitals have been referring these families to child protection and child protection has been screening them in. This leads to an investigation which can disrupt the family, put parents' jobs at risk and threaten keeping the entire family together.

These parents are not neglecting their children. The children's mental health system is neglecting their children. There are not enough services or staff for these families to take their children back home and keep them and other family members safe. Referring families to child protection does not generate the appropriate services – child protection cannot magically develop necessary services. Many of these families have a children's mental health case manager, have placed their children on multiple waiting lists, have worked hard to find appropriate services and have stayed engaged with their child. Several of the families NAMI Minnesota has worked with had adopted their child out of the child protection system.

NAMI Minnesota raised this issue two years ago and the child protection unit agreed to include some language in their screening document. The document published in October 2023 states that:

Situations where parents or guardian/s are seeking services needed to keep a child safe or meet the child's needs but are unable to access necessary services should not be screened in as neglect. When screening these reports, local welfare agencies should consider whether the issue is due to lack of service options for families or lack of capacity within appropriate treatment options.

Examples of situations that may be a result of systemic capacity issues may include, but are not limited to a child:

- Reported to be in an emergency department or hospital setting due to mental and/or behavioral health needs and cannot be safely discharged to their family; however, there is a lack of treatment or support options available. Family is seeking services, or recently has sought services, or the child has been placed on a waiting list, and maintains ongoing contact with their child and the local welfare agency, if already involved.*
- Currently located in a facility requesting parent/guardian pick up or transport to another facility and the parent/guardian is unable to meet the child's needs if they return home or the child's behaviors/needs are a risk to others in the home, and a facility or resource for placement is not available.*

While these reports are not appropriate to screen in for a child protection response, a voluntary children's mental health or child welfare referral may be helpful to support families in accessing services.

Hospitals state they have a duty to report to child protection when a parent refuses to pick up their child from the emergency department or hospital for any reason. They see the circumstance of a parent not bringing their child home due to lack of services as falling under child neglect. However, under MN Chapter 260E neglect is defined as:

Subd. 15. Neglect. (a) "Neglect" means the commission or omission of any of the acts specified under clauses (1) to (8), other than by accidental means:

(1) failure by a person responsible for a child's care to supply a child with necessary food, clothing, shelter, health, medical, or other care required for the child's physical or mental health when reasonably able to do so;

Note the phrase "when reasonably able to do so." Clearly in these situations, parents are not able to reasonably be able to meet the needs of their child without additional services.

Despite the current law and the current screening guidelines, we are seeing families being reported to child protection and counties screening in these children. This is happening across the state, not just in one county.

It is simply wrong to put these families into child protection when the fault lies with our system. NAMI Minnesota wants the law to state clearly that in these situations referrals to child protection should not be made. Please support SF 1682.