

5 County Children’s Local Advisory Council - Mental Health Intervention

GOAL #1: Increase access to children’s mental health services by decreasing barriers

What is the Problem or Need related to this goal?		What is the data or evidence that this is a problem/need?	What are strengths we can build on related to this need/problem?	Past or Possible Future Examples of Strategies for Change <i>(these are examples only)!</i>
Parents	Providers			
Lack of Transportation Stigma/Fears include: <ul style="list-style-type: none"> • being labeled • children being taken away • professionals judging them Lack of Quality Crisis services for youth Missing school or work to get to apts. Confusing/frustrating process to apply for services	Lack of Transportation No shows Staff turnover Non-traditional hours for employees	- 39% of consumers & 61% of providers see transportation as a barrier - 45% of providers & 28% of consumers see stigma/fear as a barrier - 72% of providers see ‘no-shows’ as a barrier - 39% of providers see staff turnover as a barrier - 61% of providers see missing work/school as a barrier - 50% of providers see process to apply for services as a barrier - 39% of providers see staff turnover as a barrier - All consumers who took the LAC Survey rated crisis services as not helpful or very not helpful (2016 LAC Survey)	School-linked mental health in many schools Public transit in some locations (CCT, Heartland, ...) Many professionals informed in ACEs and trauma Seasoned PAC parents see progress (less stigma) from experiences in “the system” years ago (although there is still a <u>long</u> way to go). But change is possible.	Rideshare for mental health appointments (tokens for public transit, volunteer drivers, etc.) Present SHARE data to kids in schools Meet with MH Directors about quality and purpose of crisis services for youth. Stigma reduction activities for communities Develop materials for parents and professionals related to stigma. Assisting in application for disability benefits.

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GOAL #2: Promote increase in children’s mental health services

What is the Problem or Need related to this goal?	What is the data or evidence that this is a problem/need?	What are strengths we can build on related to this need/problem?	Past or Possible Future Examples of Strategies for Change <i>(these are examples only!)</i>
<p>Lack of Services and MH Professionals: There are more mental health needs than what the current “system” can support. The following are areas in which we need more providers, but are unable to obtain them.</p> <ul style="list-style-type: none"> • Child psychiatry (neuropsychiatry) • School psychologists/school based mental health • Providers that specialize in fetal alcohol syndrome and reactive attachment disorder • Paraprofessionals with specific training on childhood mental illness • Respite care – both providers and funding • Services and facilities for children with violent, aggressive, sexualized and other challenging behaviors (need for psychosexual evaluations for younger children) • There is a huge need for more therapeutic foster homes and specialized day care providers 	<p>Focus groups with professionals in our five counties</p> <p>Focus group with Parent Advisory Committee</p> <p>33% of providers say services are not available but recommended</p> <p>45% of providers say consumers wait too long for services</p> <p>(2016 LAC Survey)</p>	<p>Our collaborative has experience in working and partnering together to write grants, develop programs, etc.</p> <p>ACES has raised awareness of trauma and been an impetus for pursuing more trauma-informed therapists</p> <p>Mobile Crisis Team is not 24 hours/7 days a week in 3 of our counties, and is for adults and kids</p> <p>text4life is a great stateside resource for youth/individuals in mental health crises</p>	<p>Expand school-linked mental health—meet with MH directors and school administrators to encourage expansion.</p> <p>Support efforts of MH providers to recruit and retain quality staff</p> <p>Support services for special populations such as: youth with violent behaviors, Somali, Hispanic and other cultures, co-occurring disorders</p> <p>Support training for mental health staff in new practice models.</p> <p>School-linked mental health services in every school</p>

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GOAL #3: Strengthen continuity of care for children with mental health needs

What is the Problem or Need related to this goal?	What is the data or evidence that this is a problem/need?	What are strengths we can build on related to this need/problem?	Past or Possible Future Examples of Strategies for Change <i>(these are examples only!)</i>
<p>Continuity of care needs strengthening in:</p> <p>Youth with mental health needs or emerging needs transitioning to adult services</p> <p>Many child protection cases become children’s mental health cases. Kids are experiencing trauma due to witnessing violence and drug-related activities in their homes.</p> <p>Children in placement outside their home county</p> <p>Youth transitioning to and from inpatient treatment and school, transitioning from one parent to another</p> <p>ISOLATION: Families are isolated and/or have limited informal supports; some experience no sense of community and have children with extreme needs.</p>	<p>Focus groups with professionals in our five counties</p> <p>Focus group with Parent Advisory Committee</p> <p>LAC Consumer and Providers Surveys</p> <p>County data, information and statistics</p>	<p>Started awareness at the legislature by initiating rural transition pilot project.</p> <p>Our collaborative is very progressive in working outside of silos and across systems on behalf of families, such as:</p> <ul style="list-style-type: none"> • Wraparound • Crossover youth project in Kandiyohi County • Circles in Kandiyohi and Yellow Medicine counties • Family Group Decision Making • Multiple case managers working together • Guia program • Behavioral Health Homes (Woodland Centers) • Mobile Crisis (24/7) 	<p>Continue legislative work around transition funding</p> <p>Teaching/advocating for strength-based and trauma informed care.</p> <p>Training in listening skills for providers/educators.</p> <p>Projects to develop resilience and support for parents.</p> <p>Projects that expand or build on current strengths.</p> <p>Continue and build on team-based, cross-system approaches</p> <p>Follow up to Family Finding Training</p> <p>Mentoring programs for youth and adults; CIRCLE model</p> <p>Engage faith-based community more; create a focus group</p>

