

Understanding the Interaction of Child Serving Systems and Navigating Coordinating Systems of Care



Agenda

- Children's Behavioral Health
- Unique Service Challenges
- Children's System of Care
- The Interaction of Systems
- Navigating Systems & Coordinating Care

Children's Behavioral Health: The American Reality

- 1 out of every 5 children in the US meets criteria for a major mental disorder.
- 50% of adult mental illness occurs by age 14; 75% by age 24
- 13-20% of children and adolescents have a diagnosable mental, emotional, or behavioral disorder, and this costs the public \$247 billion annually.
- In 2015, suicide was the third leading cause of death among youth ages 10-14 and the second leading cause of death between ages 15-34.
- 6.9% of 12-17 year olds in the US meet the standard psychiatric criteria for substance use disorder.
- Emotional disturbance is associated with the highest rate of school dropout among all disability groups.

Lifetime Impact

- Untreated or poorly managed behavioral health problems have serious social repercussions.

Absenteeism

Job loss

School drop-out

Injuries/Accidents

Suicide

Incarceration

Gambling

Poverty

Homelessness

Crime

Children's Behavioral Health Unique Service Challenges

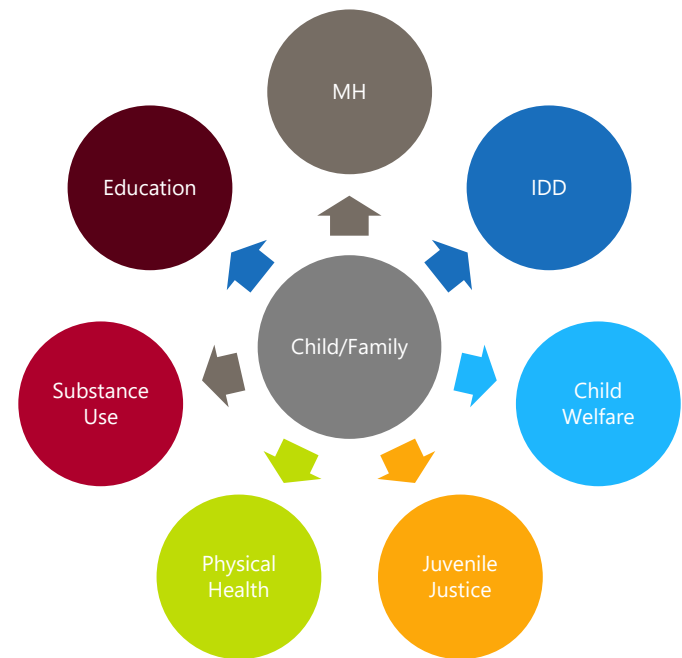
- Have different mental health diagnoses and diagnoses change often
- Impacts development and overall skill acquisition
- Requires active involvement from family members
- Outcomes affected by family relationships and family behavior
- Children are generally involved in 2 or more child serving systems at any given time
- Complex rules and regulations among child serving systems is associated with poor coordination, duplication, and service redundancy.

Children's System of Care



Overview of Children's System of Care

- Office of Mental Health (OMH)
- Office for People with Developmental Disabilities (OPWDD)
- Office of Children & Family Services (OCFS)
- Office of Addiction Services and Supports (OASAS) – formerly Office of Alcoholism and Substance Abuse (OASAS)
- Department of Health (DOH)
- Juvenile Justice
- Education



Office of Mental Health

- OMH oversees a public mental health system that includes over 1,300 community-based programs serving children and youth (ages 0-21), including approximately 595 licensed outpatient and residential programs and 745 support programs.
- Each year, nearly 160,000 children receive mental health services in NYS. OMH approves licenses and/or funds over 70 different types of programs that provide emergency, inpatient, outpatient, residential, and support services.
- In 2015 an estimated 124,000 children with SED received services from the public mental health system. Roughly, 75% of these children are reported to be enrolled in Medicaid.

Office for People With Developmental Disabilities (OPWDD)

- OPWDD provides services to children with intellectual and/or developmental disabilities with complex medical conditions, who are under the age of 18 and living at home.
- Offers an array of services and supports to help people with developmental disabilities live in the home of their choice; find employment and other meaningful activities in which to participate build relationships in the community, and experience health and wellness.

Office of Children and Family Services (OCFS)

State Level

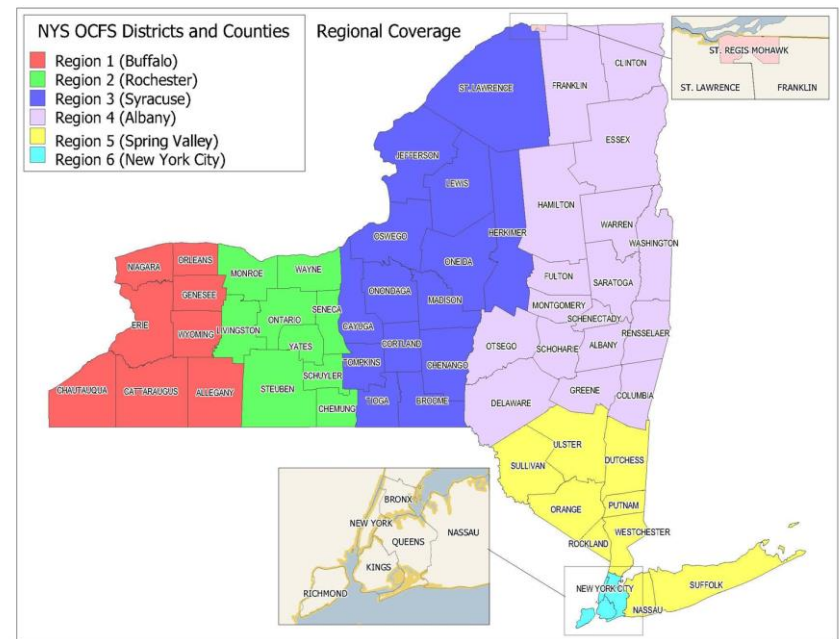
NYS Office of Children and Family Services (OCFS)

County Level

Local Departments of Social Services (DSS)

Administration for Children's Services (ACS) - NYC

Services are provided by state and local agencies as well as contracted service providers



New York State Child Welfare System

- **Four primary functions of local departments of social services**

- Child Protective Services
- Preventive Services
- Foster Care Services
- Adoption Services



Office of Addiction Services and Supports (OASAS)

- Formerly known as the Office of Alcoholism and Substance Abuse (OASAS)
- OASAS oversees an addiction treatment service system that provides a full array of service.
- Over 480,000 youth receive recurring prevention services annually. Treatment services are provided in inpatient, outpatient, and residential settings. NYS' service continuum also includes school- and community-based prevention services as well as intervention, support, crisis, and recovery services.
- This includes the direct operation of 12 Addiction Treatment Centers, which provided primarily inpatient rehabilitation service to approximately 350 youth aged 18–21 in 2015.

Office of Addiction Services and Supports (OASAS)

- Adolescents and young adults require specialized treatment services designed to target their unique culture as young people as well as their developing brains and cognitive processes.
- In 2016 OASAS began implementation of Youth Clubhouses across the State. These Clubhouses serve youth ages 12–21 who are in recovery from, or at-risk of, a SUD.

Department Of Health Medically Fragile

- The Care At Home waiver program enables children/youth under the age of 21 who are determined to have a physical disability and require nursing home or hospital LOC to access HCBS Medicaid services. The goal of the Program is to ease that burden and avoid unwanted institutional care for some of New York's most fragile and vulnerable citizens.
- The program offers case management, respite, home adaptations, vehicle modifications, and palliative care services.

Juvenile Justice



A separate system created to respond to offenses specifically committed by children and youth.

It is a vehicle for protecting the public from young offenders, with a strong focus on the best interest of the child.

Created under the belief that children are different than adults, are in the process of maturing, and have a greater capacity for change.

Juvenile Justice



Addressing mental health needs in school is critically important. Psychosocial & Mental Health problems often are major factors interfering with effective school performance.



Increasingly, school systems are joining forces with community health, mental health, and social service agencies to promote student well-being and to prevent and treat mental health disorders.

Schools can be a great place for mental health promotion and early identification and intervention

Education

- **Support for students come in many forms:**
 - Community Programs
 - General Education Supports
 - Special Education
 - School Based MH Clinics
 - School Based Health Centers



The Interaction of Systems



The Interaction of Systems

- Youth who have complex needs and may be involved in multiple systems at once. Behavior problems are often apparent in school, where youth spend a good portion of their day. These behavioral problems are often rooted in mental health concerns, and at times families under stress may find themselves involved with the Child Welfare system. These various systems have a significant impact on child outcomes.

The Interaction of Systems

- **Behavioral Health and Justice involved youth**

- Many Juvenile Justice involved youth have unmet behavioral health needs. Community-based treatment can be an effective solution to address issues that can lead to justice involvement. Even in cases where youth enter the system, referring them to behavioral health services within their communities can help mitigate the likelihood of re-arrest and stays in detention or placement

The Interaction of Systems

- **Child Welfare and Justice Involved Youth**

–The Child Welfare System, which aims to protect children from harm, has a growing understanding of the dynamics between the delinquent behavior of youth and abuse and neglect. Issues such as: sexual abuse, physical abuse and placement instability are strong risk factors for Juvenile Justice involvement. Child Welfare and Juvenile Justice are faced with the challenge of developing solutions for youth who are involved in both systems.

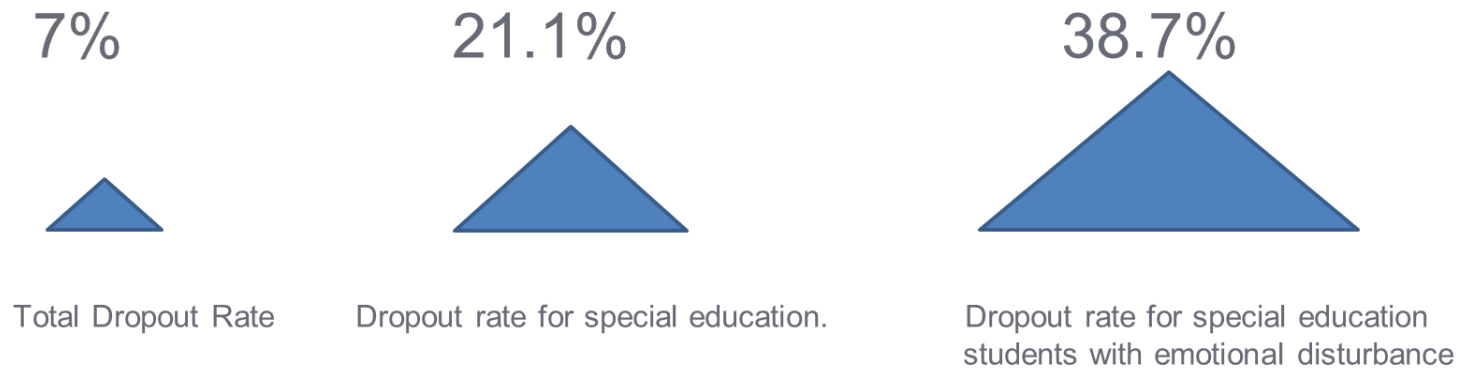
The Interaction of Systems

- **The School System and Justice Involvement**

- Behavioral concerns often become apparent in school. When these concerns are not addressed, the chance of justice system involvement increases.
- As problems escalate, disciplinary actions may lead to police involvement. Children with disabilities are at even greater risk. Approximately 70 percent of youth who enter the justice system have a mental health, sensory or learning disability, and anywhere between 28 percent and 43 percent of detained or incarcerated youth have special education needs.
- Understanding and addressing the underlying educational and social/emotional needs of children and youth is essential to avoiding juvenile justice system involvement.

The Interaction of Systems

Mental health and learning disorders are tied to higher dropout rates.



childmind.org/report/2016-childrens-mental-health-report/mental-health-impacts-schools

The Interaction of Systems

- High-school dropouts are 63 times more likely to be jailed than four-year college graduates
- 68% of state prison inmates have not completed high school
- Dropout leads to poor quality of life
- Persons without a high-school education live 9.2 fewer years than persons who graduate from high school

Navigating Systems and Coordinating Care



Navigating Systems and Coordinating Care

- **Understand how the current system operates and the existing service array available to children and families**
 - Inventory what services are available to youth and families in your area
 - Identify providers who offer effective, evidence informed approaches and who offers them in the community
 - Identify community services that attend to the Social Determinants of Health (i.e. food, shelter)

Navigating Systems and Coordinating Care

- **Partnering with families**

- Listen to families to understand their needs
- Engage families and youth in their own treatment planning and decisions.
- Assist families in identifying any natural supports that may be able to assist them
- Educate families on the availability and types of services
- Detail the process for accessing these services and provide linkages.
- Encourage the family to make decisions that will work best for their family.

Navigating Systems and Coordinating Care

- **Assess Service Utilization**

- Determine which agencies have a waiting list versus those who do not
- Identify if there is there underutilization of a particular service
- Is a particular service available in all areas

Navigating Systems and Coordinating Care

- **Work collaboratively across a broad range of systems**
 - Engage key partners who provide services to children (i.e. agency leaders, schools, probation)
 - Conduct outreach to non-traditional providers of services and support, such as peers and community and faith-based organizations

Navigating Systems and Coordinating Care

- **Intervene Early**

- Providers should look to intervene as early as possible to prevent the development of serious behavioral health conditions.
- Develop a process to identify at-risk children
- Identify screening measures used by community based agencies across the system sector and refer children as appropriate.
- Ensure timely access to services

Navigating Systems and Coordinating Care

- **Building Relationships**

- Identify partners who directly impact the health and wellbeing of the children and cultivate these relationships.
- Ensure responsiveness and follow through with responsibilities
- Develop a shared vision and common goals with partners
- Make sure you are speaking the same language

Navigating Systems and Coordinating Care

- **Information Sharing**

- Provide opportunities among members to exchange best practices for service provision

Navigating Systems and Coordinating Care

- **Leveraging Resources**

- Identify what each provider entity brings to the table and how that can be leveraged as part of the collaborative work.
- Focus on common concerns
 - ✓ Academic achievement
 - ✓ School attendance
 - ✓ Safety
 - ✓ Permanency

Navigating Systems and Coordinating Care

- **Monitor services provided to youth and family**
 - Has the family had meaningful involvement in their care?
 - Are services delivered in a culturally and linguistically competent manner?
 - Are treatment plans strengths based?
 - Develop a referral/transition tracking system
 - Address barrier to referrals
 - Check with families to learn the quality and impact of service delivery

Resources

- <https://www.omh.ny.gov/>
- <https://ocfs.ny.gov/main/>
- <https://oasas.ny.gov/>
- <https://www.criminaljustice.ny.gov/ofpa/jj/jj-index.htm>
- <https://opwdd.ny.gov/>
- <https://childmind.org/report/2016-childrens-mental-health-report/mental-health-disorders-common>