

# Children's Community Based Mental Health Services

Prevention and Response Protocol Subcommittee of the House Select Committee on School Safety
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Margaret Nimmo Holland, Voices for Virginia's Children Margaret@vakids.org



#### The Bigger Picture

- Trauma-informed schools
- State budget investments that have begun to change the landscape for children's behavioral health in communities
- Initiatives in Medicaid and child welfare are going to affect access to MH services
- Questions the House Select Committee might ask



#### Voices for Virginia's Children

- We champion public policies that improve the lives of VA's children, especially in areas of:
  - Child welfare and foster care
  - Mental health and health
  - Early care and education
  - Family economic success
- Privately funded, nonprofit, nonpartisan
- Data and research on children's well-being:
   KIDS COUNT



### Why focus on kids' mental health?

#### THE ONSET OF MENTAL HEALTH DISORDERS CAN START EARLY IN CHILDHOOD





#### CHILDREN'S MENTAL HEALTH DISORDERS ARE PREVALENT ACROSS VIRGINIA



KIDS LIVE WITH A MENTAL HEALTH CONDITION IN VIRGINIA

**75,000** 

YOUTH (AGE 12-17)

report suffering from at least one major depressive episode in the past year



For Virginia

#### Why focus on kids' mental health?

IN VIRGINIA

19%

OF CHILDREN HAVE EXPERIENCED TWO OR MORE ACES



## **Trauma-informed Schools**

- Focus on "what happened to you?";
   NOT "what's wrong with you?"
- Incorporate the 4 R's of a trauma-informed approach
  - Realize, Recognize, Respond in practice, Resist retraumatization
- Work at the systems level
  - Virginia Tiered Systems of Support & Positive Behavior Interventions and Support



## **Supporting Trauma-informed Schools**

- Determine what is needed to bring VTSS and PBIS to scale
- Support efforts to ensure that all school personnel, including SROs, understand and can recognize childhood trauma
- Add support staff positions to help implement evidence-based interventions and identify need
- Better connections to mental health services

## **GA: Community-Based Services**

#### **Child/Youth-Specific**

- Child psychiatry and crisis response services (\$8.4 m
   GF/year plus Medicaid billing)
- Services for transition-age youth who have experienced their first episode of psychosis (\$4 m GF/year plus MHBG and SAMHSA grant)

#### **Impacting Kids**

- Same-day access (as part of STEP-VA); primary care screening and outpatient up next
- Alternative transportation for people being TDO'd



### **Medicaid Changes**

- Medallion 4.0 carves in early intervention (Part C) services and community-based mental health services
- BH transformation of Medicaid services (DMAS working with Farley Center): redesigned continuum of services starting at the beginning of life
  - "early intervention" should include early childhood mental health/parent-child therapy
  - school-based mental health services
  - integration of primary and behavioral health services

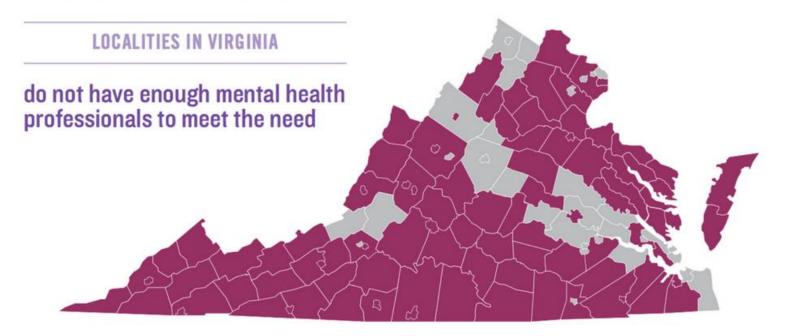


### Family First Prevention Services Act

- Fundamental change in use of Title IV-B and IV-E dollars in the child welfare system: prevent placement of children in foster care
- Reimbursement for mental health services, substance-use treatment, and in-home parenting-skill training (home visiting, parent training, individual/family therapy) before children are removed from their homes
- Evidence-based models and trauma-informed practices

#### Workforce

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#### **Questions for House Select Committee**

- How do schools need to address children's mental health needs to further a learning environment and achieve safety?
- How can Virginia ensure a cohesive vision and action plan for school-based trauma and mental health services?
- How can schools collaborate with other community partners (public and private)? Do we have an inventory of what's available now?
- How will Virginia train an adequate MH workforce for school and community settings?