

Fact Sheet: Improving Children's Mental Health through a System of Care (SOC)

Updated: September 23, 2016

<p>Overview</p>	<p>DSHS has, for several years, been engaged in a systematic review and redesign of its children's mental health system with the goal of improving outcomes and reducing costs. A number of initiatives are aligned and driving improvements, including:</p> <ol style="list-style-type: none">1. Legislative Direction<ul style="list-style-type: none">• SSHB 1088 passed in 2007 - development of Children's Behavioral Health Measures of Statewide Performance.• ESSHB 2536 passed in 2012 - regarding the increased use of evidence/researched-based and promising practices.2. Systems of Care (SOC) Planning and Implementation Grants-awarded in October 2011 and 2012, to work towards the following goals:<ul style="list-style-type: none">• Infuse SOC values in all child-serving systems. Those values include being family driven, youth guided, culturally and linguistically competent, and community based.• Expand and sustain leadership roles for families, youth, and system partners.• Establish an appropriate array of services and resources statewide, including home and community based services.• Develop and strengthen a workforce that will operationalize SOC values.• Build a data management system for decision making and tracking outcomes.• Develop sustainable financing and align funding to ensure services are seamless for children, youth, and families.3. Administration of Children and Families (ACF) Creating Connections Grant - awarded in October 2012.<ul style="list-style-type: none">• Enhance the safety, permanency, and wellbeing of children and youth in foster care by facilitating effective linkages to appropriate and research-based mental health services.4. Children's Long-term Inpatient Program (CLIP) Improvement Team (CLIP-IT) started 2011 - Washington engagement in the National Building Bridges Initiative.<ul style="list-style-type: none">• Changing how residential treatment is used as part of our continuum of care.• Implementing Washington Children's Mental Health principles (based on SOC values) in service delivery.• Reducing length of stay in out-of-home treatment.• More fully integrating residential and community based resources.5. Implementation of Wraparound with Intensive Services (WiSe).6. Consistency in the availability of intensive home and community-based mental health treatment for Medicaid youth.7. Increasing the number of transition aged youth that get help early when facing onset of
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	<p>psychosis</p> <p>Through the above initiatives and other efforts, system improvements are being designed to be effective, coordinated, community-based, and culturally responsive. They will have an array of flexible and coordinated outpatient home- and community-based services and supports.</p> <p>The result for youth and families will be a reduction in avoidable hospitalizations, institutionalization, and criminal detention while increasing success at home, in school, and in the community.</p>
Eligibility Requirements	<p>Washington’s public mental health system serves children and youth on Medicaid with mental health challenges, and their families. Additional services are available for those with no insurance or private coverage if they are in crisis or as local systems have funded added services and supports.</p> <p>Regional Behavioral Health Organizations and Managed Care Organizations and their contracted Community Behavioral Health Agencies address moderate to intensive and acute mental health needs. The SOC Implementation Grant and the implementation of WISe are designed to improve services for children and youth with serious emotional challenges, in out-of-home or at-risk of an out-of-home placement, and/or have juvenile justice/child welfare histories.</p>
Authority	N/A
Budget (Current)	<ul style="list-style-type: none"> • Medicaid (Title XIX) • System of Care Implementation and Expansion Grant federal funds. • Substance Abuse and Mental Health Services Administration Federal block grant funds. • State funds.
Primary Partners	<p>DBHR is partnering with other DSHS administrations and other state and local child-serving agencies, higher education, families, youth, providers, and Regional administrators to reach our common goals of improving access and service delivery essential to children, youth, and families. Tribal consultation, planning, and communication are ongoing.</p>
Oversight	<ul style="list-style-type: none"> • CMS • Governing bodies as outlined in the T.R. et al. v. Kevin Quigley and Dorothy Teeter Settlement Agreement • DBHR Certification and Licensing for Community Mental Health Agencies
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