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Creating an Informed System of Care: Taking it to the Next Level

April 20, 2015

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Child, Adolescent and Family Branch
Center for Mental Health Services
Substance Abuse and Mental Health Services Administration
Rockville, MD

DEPARTMENT OF HEALTH & HUMAN SERVICES · USA

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Behavioral Health is Essential To Health

Prevention Works

Treatment is Effective

People Recover

SAMHSA'S STRATEGIC INITIATIVES

1. Prevention of Substance Abuse and Mental Illness
2. Trauma and Justice
3. Health Care and Health Systems Integration
4. Recovery Support
5. Health Information Technology
6. Workforce Development

Key Areas of Focus

- Did you know?
- Sustainable systems of care
- SAMHSA-CMS Bulletin
- High-Fidelity Wraparound
- Family peer support
- Youth engagement
- Early onset psychosis
- Now is the Time

Did you know?

- It is estimated that 20% of children and adolescents have a diagnosable mental, emotional, or behavioral disorder, and this costs the public $247 billion annually.
- 1 in 10 adolescents had a Major Depressive Episode in the past year. 1 in 5 young adults aged 18 to 25 (18.7%) had any mental illness in the past year and 3.9% had a serious mental illness.
- At least 1 in 10 people has a SED at some time in their life.
- In 2010, suicide was the 2nd leading cause of death among youth ages 12-17.
- The life-time and current prevalence of anxiety disorders among children aged 3-17 years is 4.7% and 3%, respectively.
- ADHD occurs in about 8.4% of children ages 3-17.

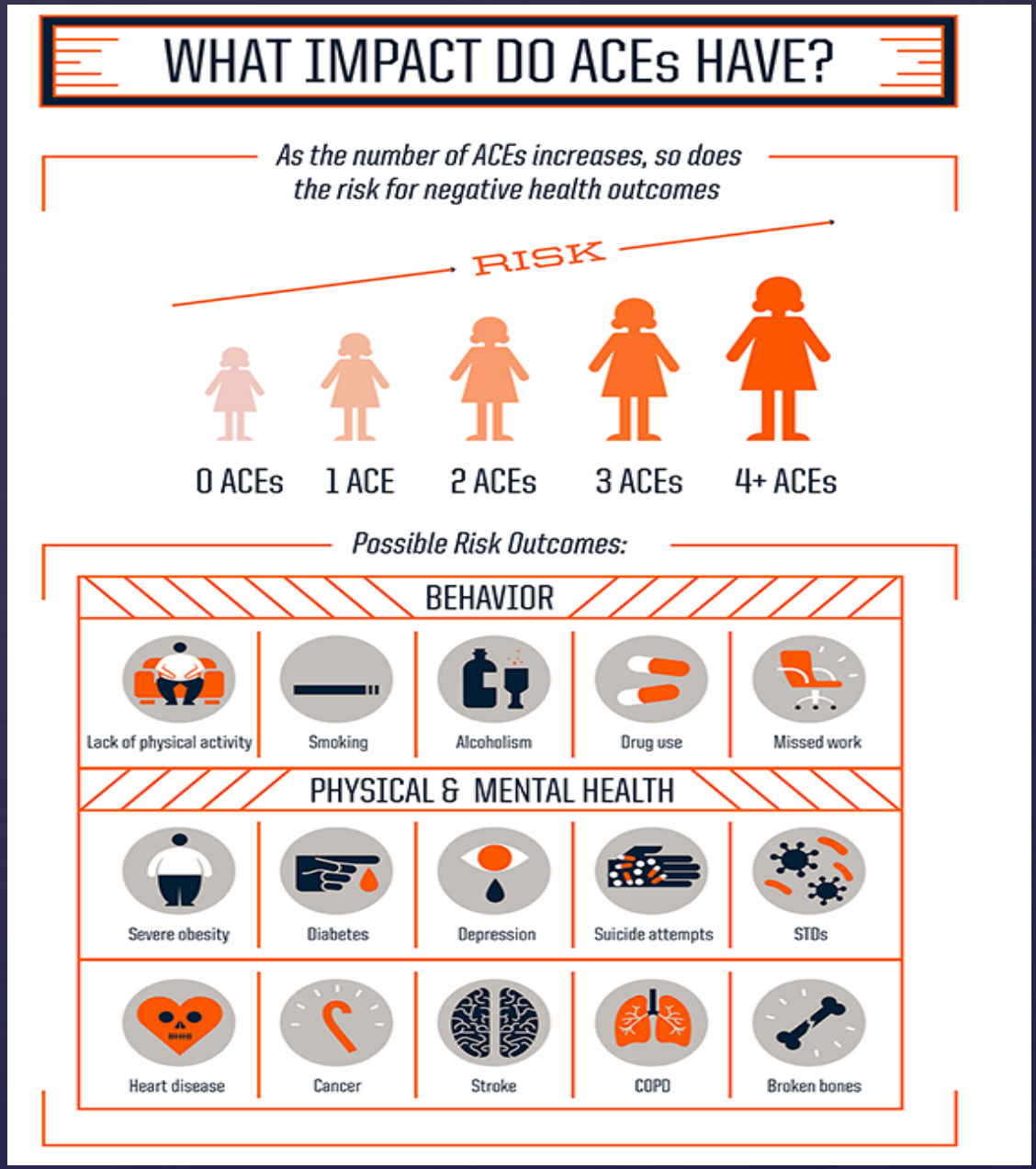
Did you know?

- 7.5% of all children aged 6-17 years used prescribed medication during the past 6 months for emotional or behavioral difficulties.

- 40.4% of youth ages 16-25 receiving mental health outpatient care use psychotropic medication, the second most frequently accessed service.

- Childhood trauma is prevalent: 39% of 12 - 17 year olds reported witnessing violence, 17% reported being a victim of physical assault and 8% reported being the victim of sexual assault.

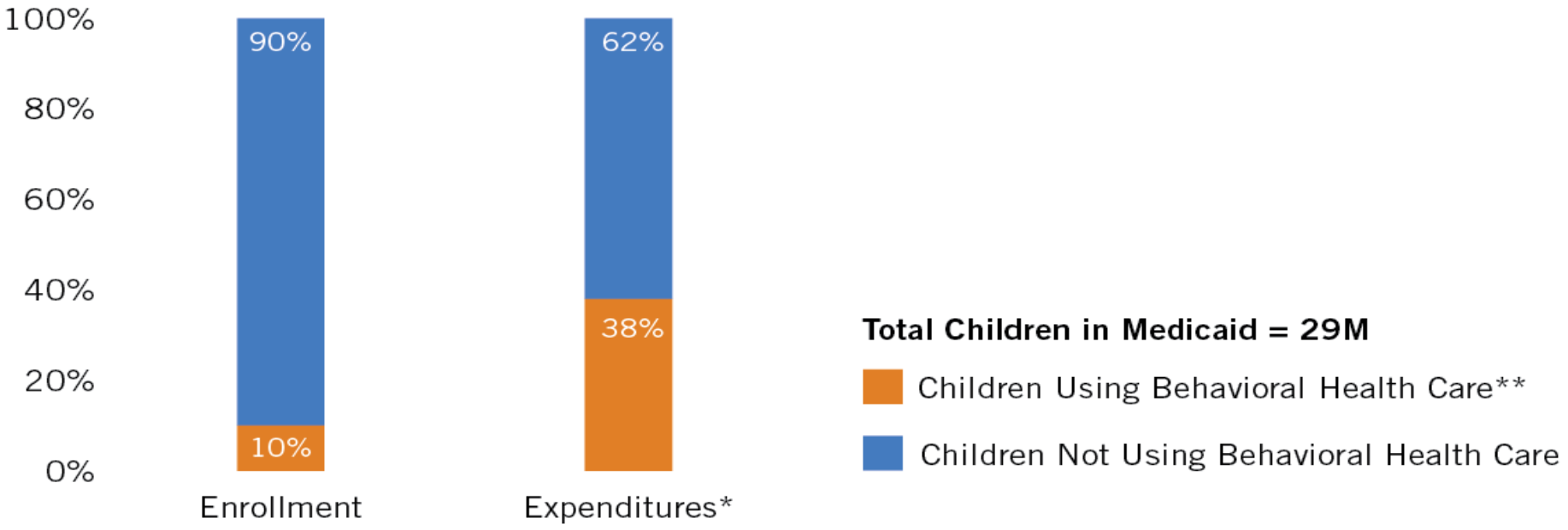
Adverse Childhood Experiences *(ACES)* & Childhood Trauma



rwjf.org/vulnerablepopulations

Mental Health Disorders are the MOST Expensive Conditions in Childhood

CHILDREN USING BEHAVIORAL HEALTH CARE AS A PROPORTION OF TOTAL MEDICAID ENROLLMENT AND EXPENDITURES



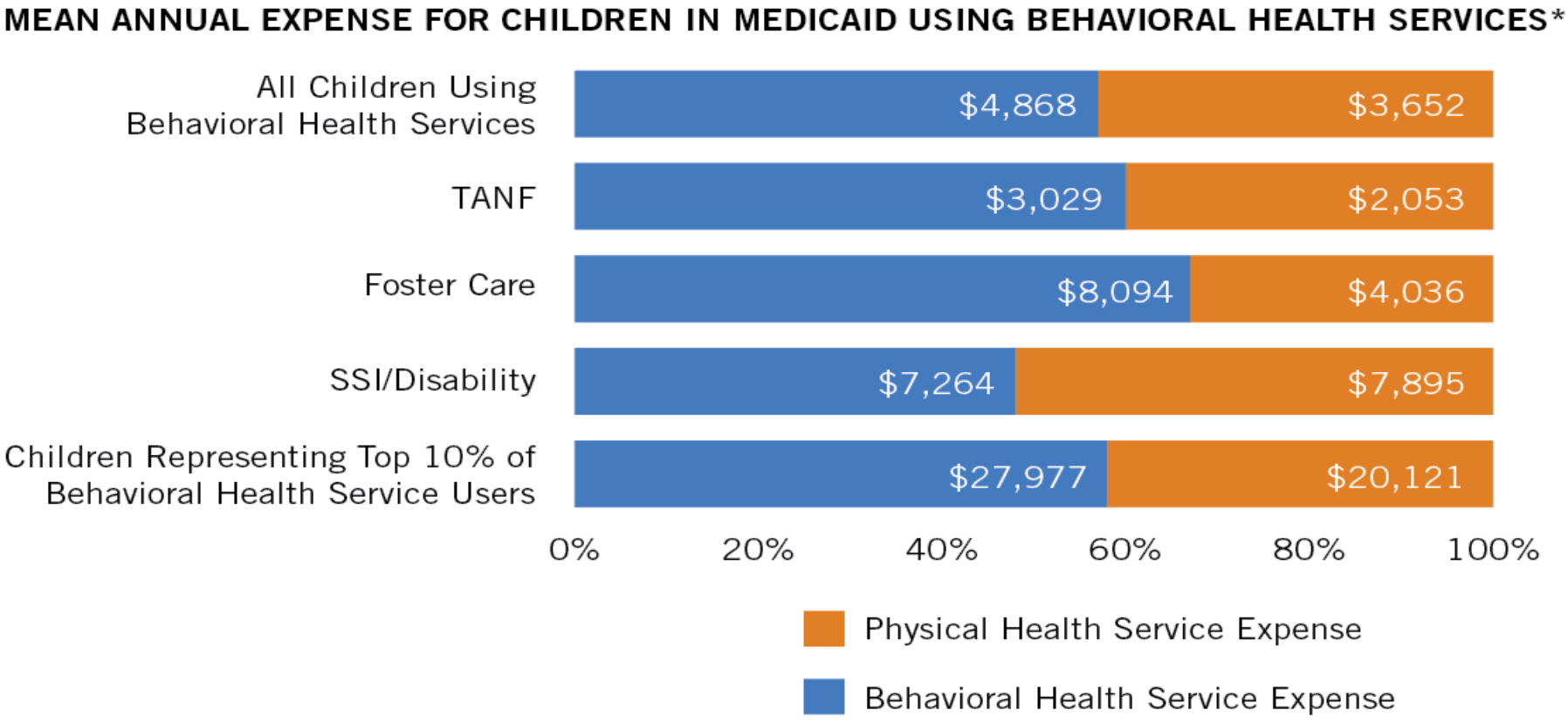
* Total combined expenditures for all children in Medicaid in 2005 from: Centers for Medicare & Medicaid Services, Center for Medicaid and State Operations: Statistical Report on Medical Care: Eligibles, Recipients, Payments, and Services (HCFA 2082), Medicaid and Statistical Information System. 2008 Statistical Supplement.

** Children using behavioral health care in 2005, N= 2,787,919.

© Center for Health Care Strategies 2013

Source: S. Pires, K. Grimes, T. Gilmer, K. Allen & R. Mahadevan. "Faces of Medicaid: Examining Children's Behavioral Health Service Utilization and Expenditures." Center for Health Care Strategies, December 2013.

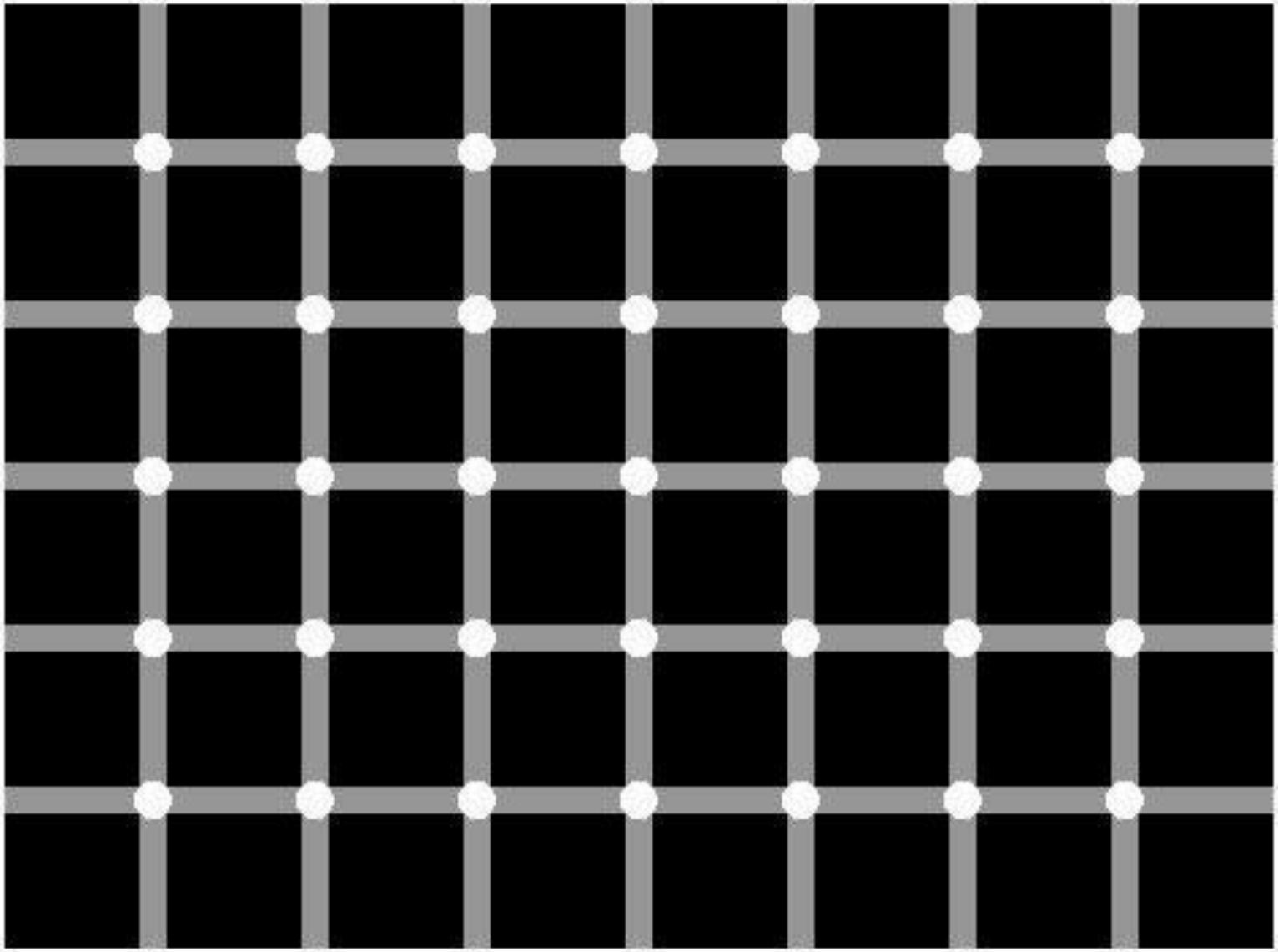
Behavioral Health Accounts for Significant Expenditures Even Among Children With Chronic Physical Conditions

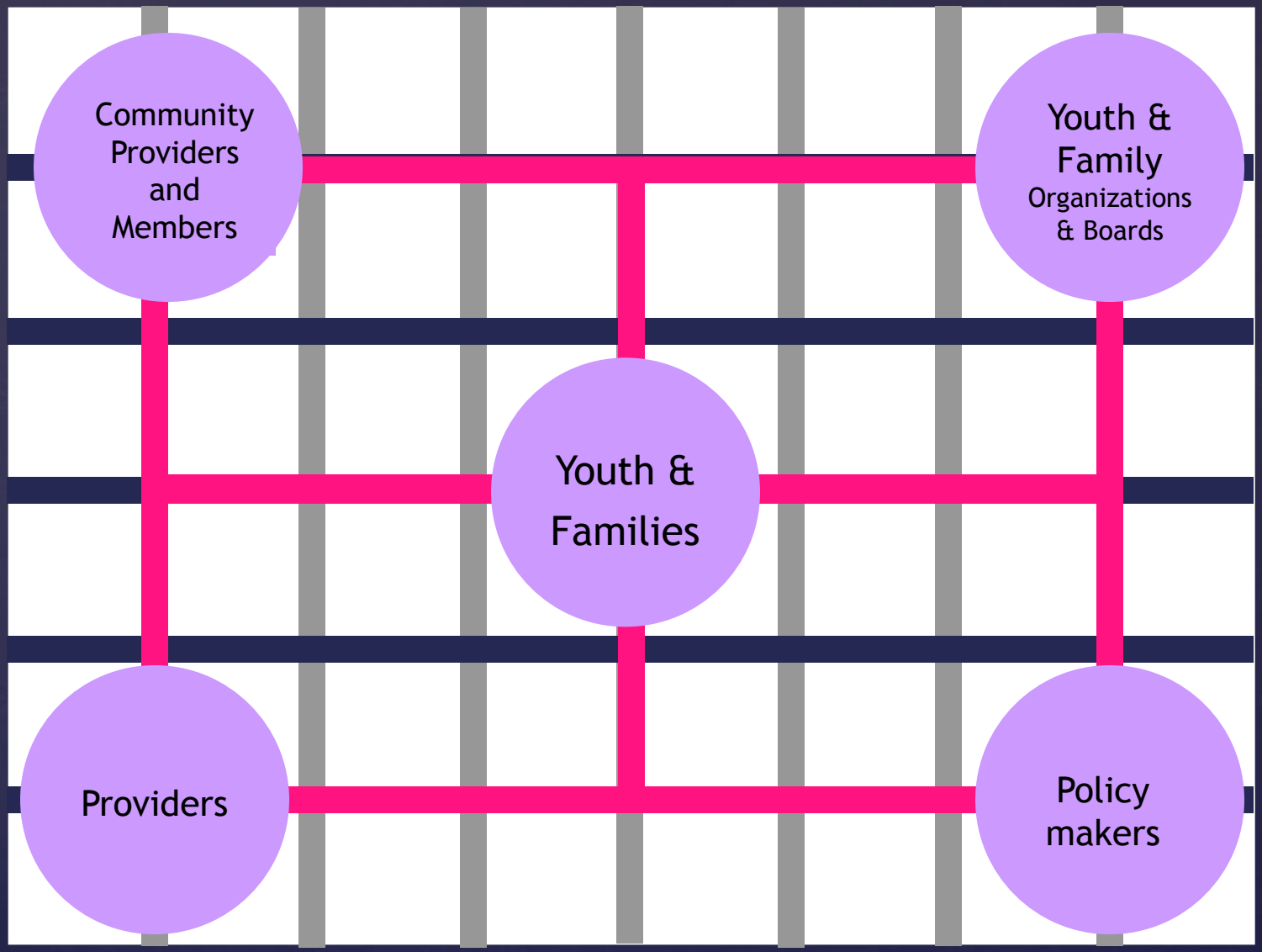


* Includes children with at least one claim for a behavioral health service in 2005 with or without concomitant psychotropic medication use, N = 1,213,201.

© Center for Health Care Strategies 2013

Source: S. Pires, K. Grimes, T. Gilmer, K. Allen, & R. Mahadevan. "Faces of Medicaid: Examining Children's Behavioral Health Service Utilization and Expenditures." Center for Health Care Strategies, December 2013.




Community Providers and Members
Youth & Family Organizations & Boards
Youth & Families
Providers
Policy makers

Gary has a fever…

And the only prescription is more systems of care

A System of Care (SOC) is…

A spectrum of effective, community-based services and supports for children and youth with or at-risk for mental health or other challenges and their families…

…is organized into **coordinated networks;**

…builds meaningful **partnerships** with families and youth;

…addresses **cultural and linguistic needs**

…in order to help families function better at home, in school, in the community, and throughout life.

Stroul, B., Blau, G., & Friedman, R. (2010). Updating the system of care concept and philosophy. Washington, DC: Georgetown University Center for Child and Human Development, National Technical Assistance Center for Children's Mental Health.

System of care is, first and foremost, a set of values and principles that provides an organizing framework for systems reform on behalf of children, youth and families.

Stroul, B. 2005. Georgetown University. Washington, D.C.

Fundamental challenge and rationale for building systems of care:
No one system controls everything. Every system controls something.

Pires, S. 2004. Human Service Collaborative. Washington, D.C.

Transformation Equation:

$$T = (V + B + A) \times (CQI)^2$$

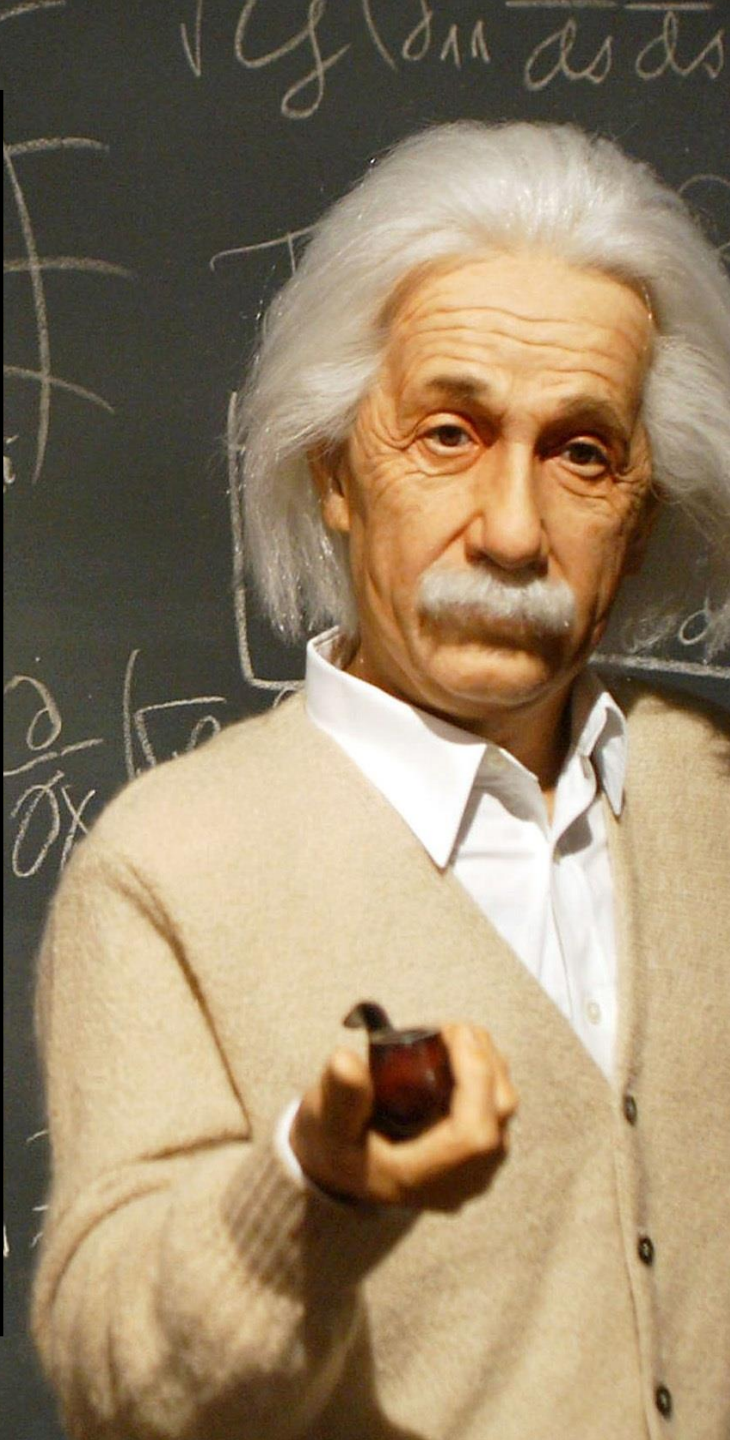
Family Driven

Youth Guided

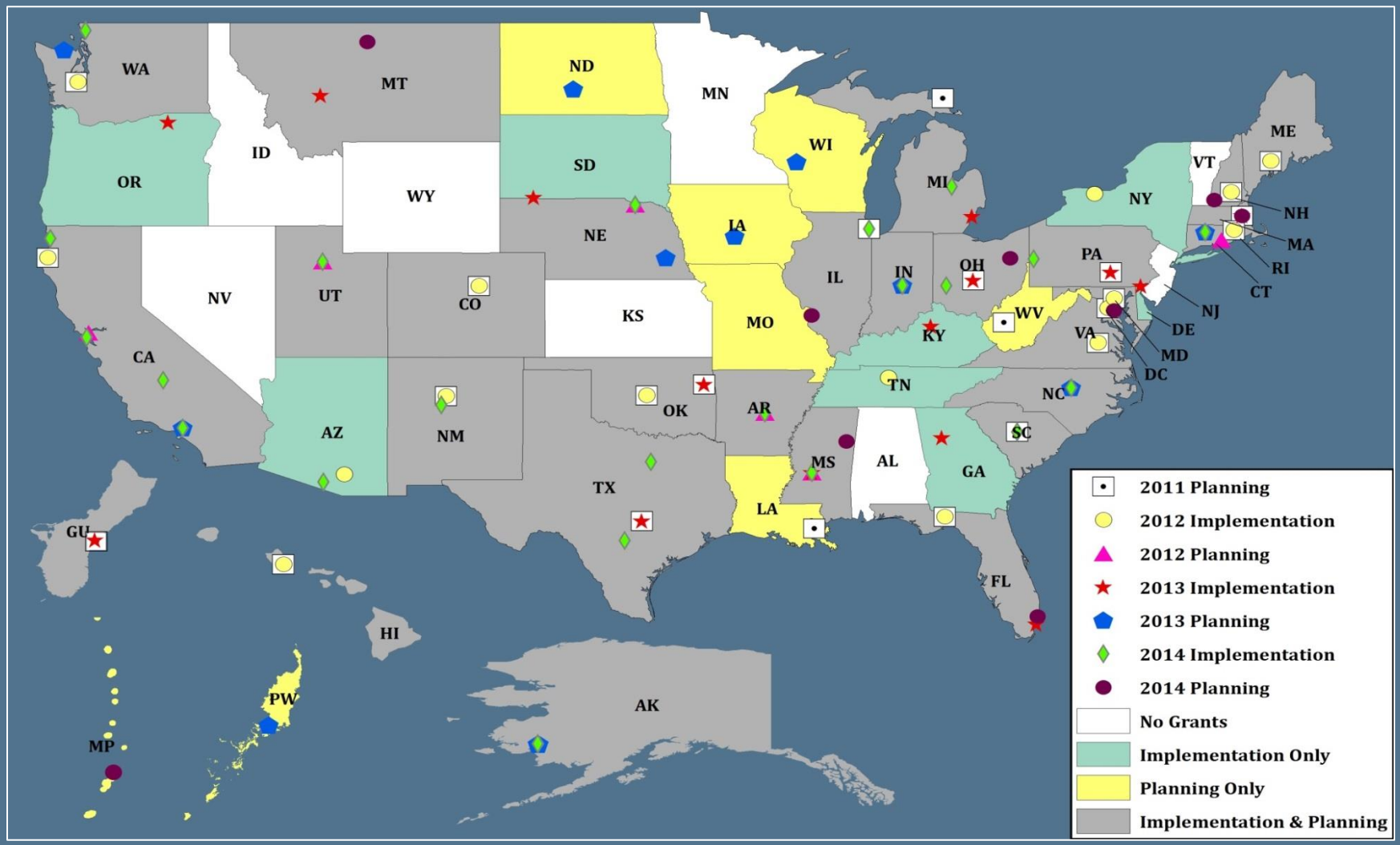
Cultural & Linguistic Competence

Evidence Based Practices & Clinical Excellence

Continuous Quality Improvement



Children's Mental Health Initiative (CMHI) Expansion Planning & Implementation Awards (*2011-2014*)



What do the data say?

Shared Goals

At home, in school, out of trouble

Now kick back and enjoy some data highlights

Courtesy of ICF International

National evaluation of Children's Mental Health Initiative (CMHI)

- SAMHSA-funded initiative
- 106 sites initially funded from 2002 to 2010

- More than 125,000 children and youth have received services
- Data collected between October 2003 and December 2014 on outcomes of children and youth receiving SOC services

National Evaluation of Systems of Care

Methods

- Caregivers interviewed within 30 days of their child's first service event (and every 6 months)
- Youth aged 11 years and older were also interviewed at intake (and every 6 months)

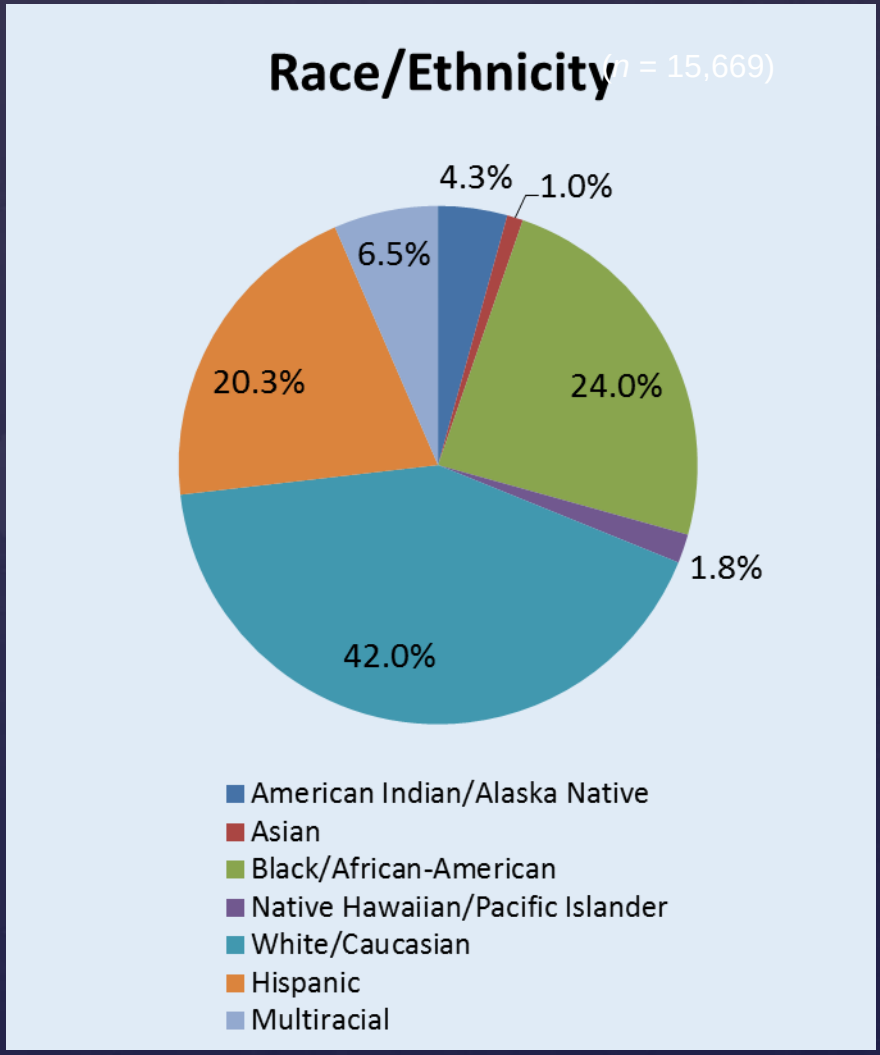
- Only data from intake interviews used in these analyses
- Measures include
  - Child Behavior Checklist (CBCL)
  - Columbia Impairment Scale (CIS)

Analysis Strategy

- Mixed Linear Modeling
  - Modeling symptoms levels at intake
    - Symptoms are centered around the grand mean
- Fixed effect predictors include race/ethnicity, gender, age (linear and quadratic), and referral source
- Year of funding nested within the grant cohort
  - 1st, 2nd, 3rd, etc. year of funding within grant cycle

Demographics of Study Participants, Grantees Initially Funded 2002-2010

Gender (*n* = 15,793)	**Percentage**
Male	62.5%
Female	37.5%
Poverty Status (*n* = 13,314)	**Percentage**
Below Poverty	58.8%
At/Near Poverty	15.2%
Well Above Poverty	26.0%
Age (*n* = 15,785)	
Mean Age	11.20 (*SD* = 5.0)



Most Common Diagnoses of Children Served by Grantees Initially Funded 2002–2010

Diagnosis (*n* = 13,560)	Percentage*
Mood Disorders	37.5%
Attention-Deficit/Hyperactivity Disorder	35.8%
Oppositional Defiant Disorder	22.8%
Adjustment Disorders	13.6%
Anxiety Disorders	9.3%
PTSD/Acute Stress Disorder	8.9%
Disruptive Behavior Disorder	8.3%
Substance Use Disorders	7.6%

Diagnoses based on *DSM–IV* criteria.
*Because children may have more than one diagnosis, percentages for diagnoses may sum to more than 100%.

- Improvement in behavioral & emotional symptoms
- Fewer internalizing and externalizing symptoms
- Improvements in levels of clinical impairment
- Fewer suicidal thoughts & attempts

#1

Enrollment in a SOC resulted in

significantly improved clinical outcomes

#2

After enrollment in a SOC, youth were

less likely to be arrested

#3

After enrollment in a SOC, children were

less likely to visit an emergency room

- Higher rates of educational achievement
- Improved school attendance
- Fewer suspensions & expulsions

#4

Enrollment in a SOC resulted in

improved educational outcomes

Significantly Improved Outcomes in Systems of Care

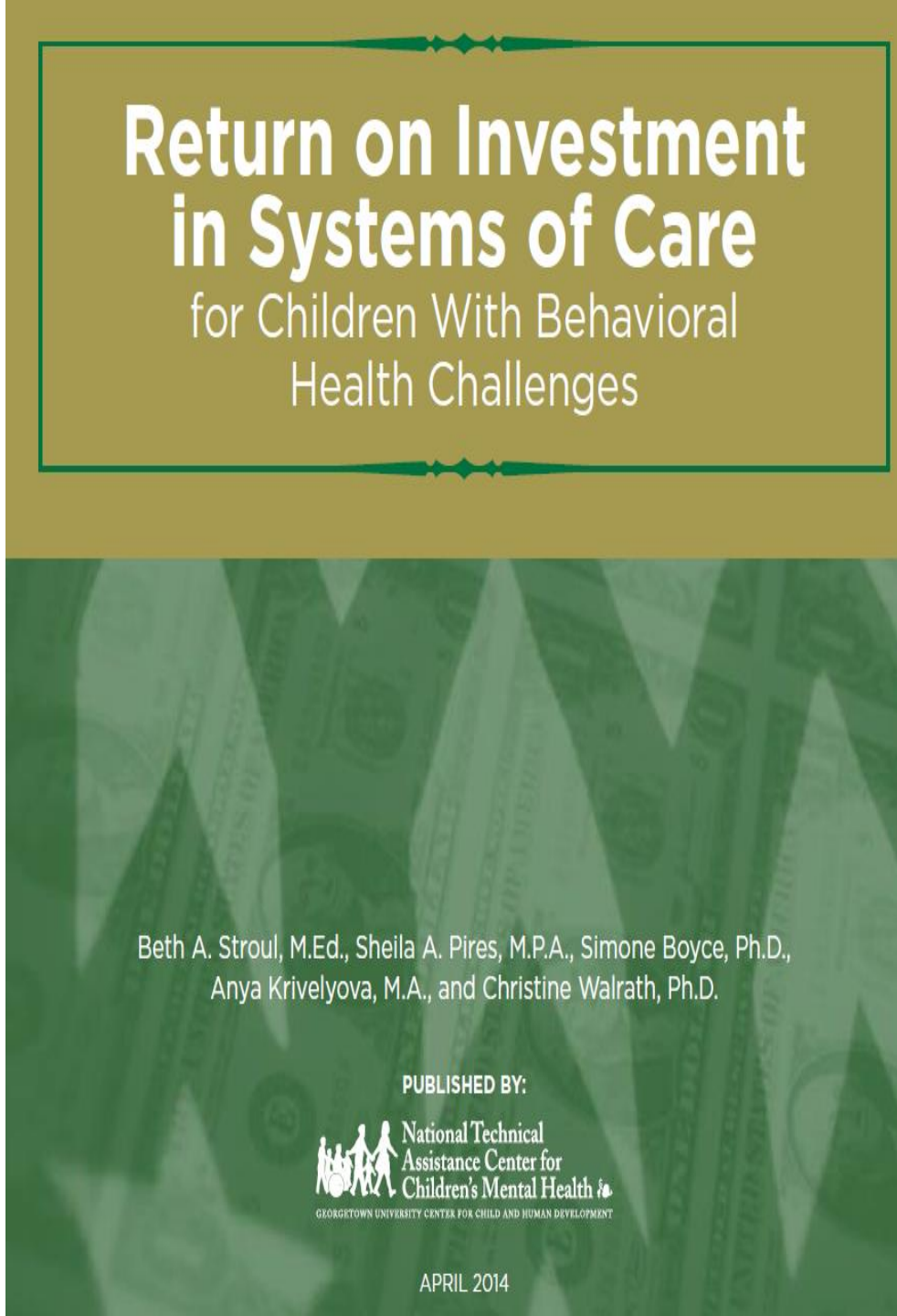
- Improved emotional/behavioral functioning
- Reduced high risk behaviors
- Enhanced family functioning
- Expanded and improved service delivery system
- Increased placement stability

Stroul, B., Pires, S., Boyce, S., Krivelyova, A., & Walrath, C. (2014). Return on investment in systems of care for children with behavioral health challenges. Washington, DC: Georgetown University Center for Child and Human Development, National Technical Assistance Center for Children's Mental Health

And *substantial* cost-savings!

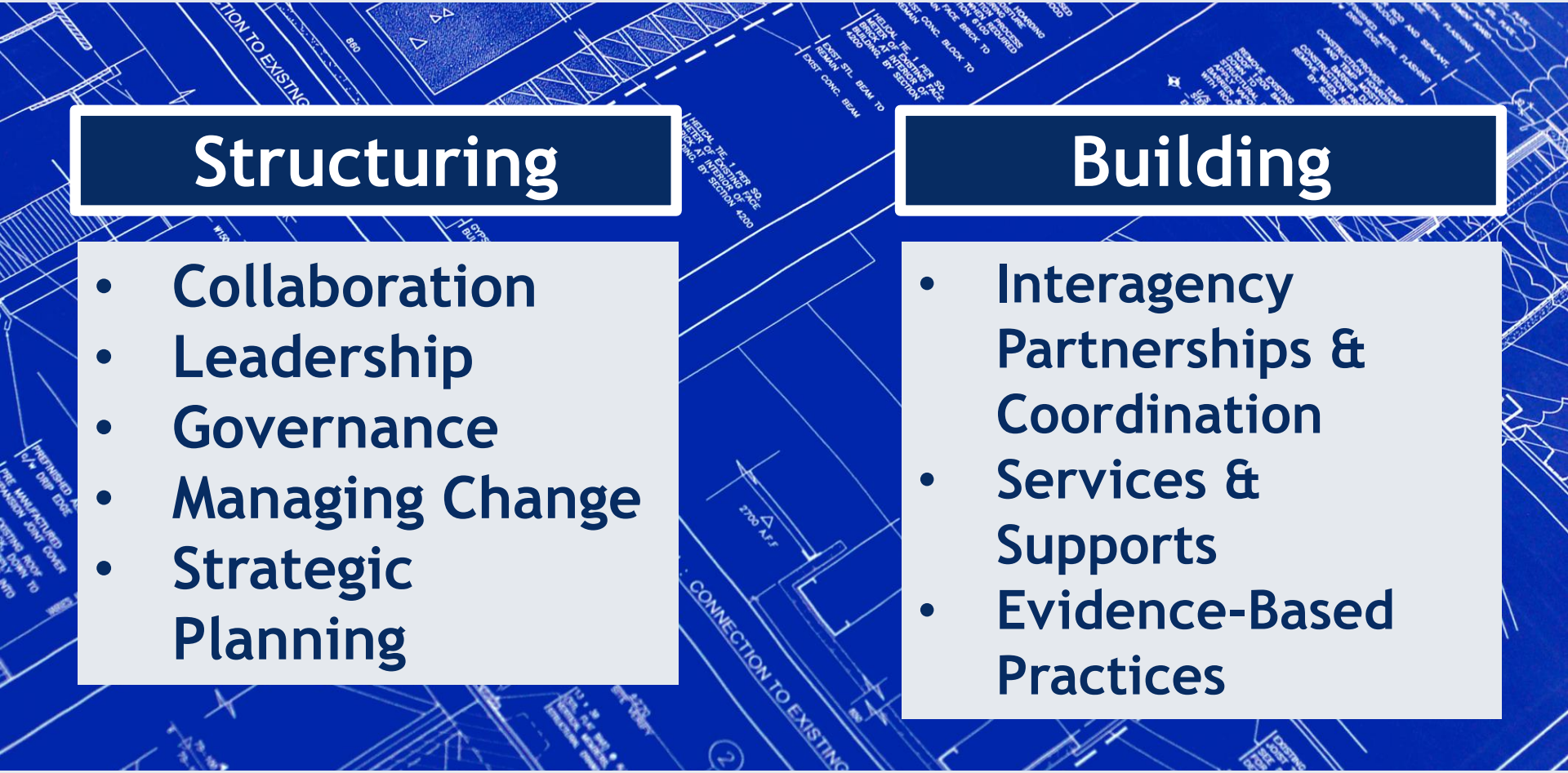
Cost savings are realized as a result of…

- Fewer out-of-home placements/diversion from higher levels of care
- Fewer ER visits
- Better school-related outcomes
- Fewer arrests
- Greater capacity for caregivers to work



Let’s take a closer look at some systems of care approaches…

Your Blueprint for Systems of Care



Structuring

- Collaboration
- Leadership
- Governance
- Managing Change
- Strategic Planning

Building

- Interagency Partnerships & Coordination
- Services & Supports
- Evidence-Based Practices

Want to learn more? Visit http://www.tapartnership.org/SOC/SOCimplementing.php
Or download *Building Systems of Care: A Primer (2nd Edition)* by Sheila A. Pires

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CMS
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CENTER FOR MEDICAID & CHIP SERVICES

Joint CMCS and SAMHSA Informational Bulletin

DATE: May 7, 2013

FROM: Cindy Mann, Director
Center for Medicaid and CHIP Services

Pamela S. Hyde, J.D., Administrator
Substance Abuse and Mental Health Services Administration

SUBJECT: Coverage of Behavioral Health Services for Children, Youth, and Young Adults with Significant Mental Health Conditions

May 2013 CMS & SAMHSA Joint Bulletin: http://medicaid.gov/Federal-Policy-Guidance/Downloads/CIB-05-07-2013.pdf

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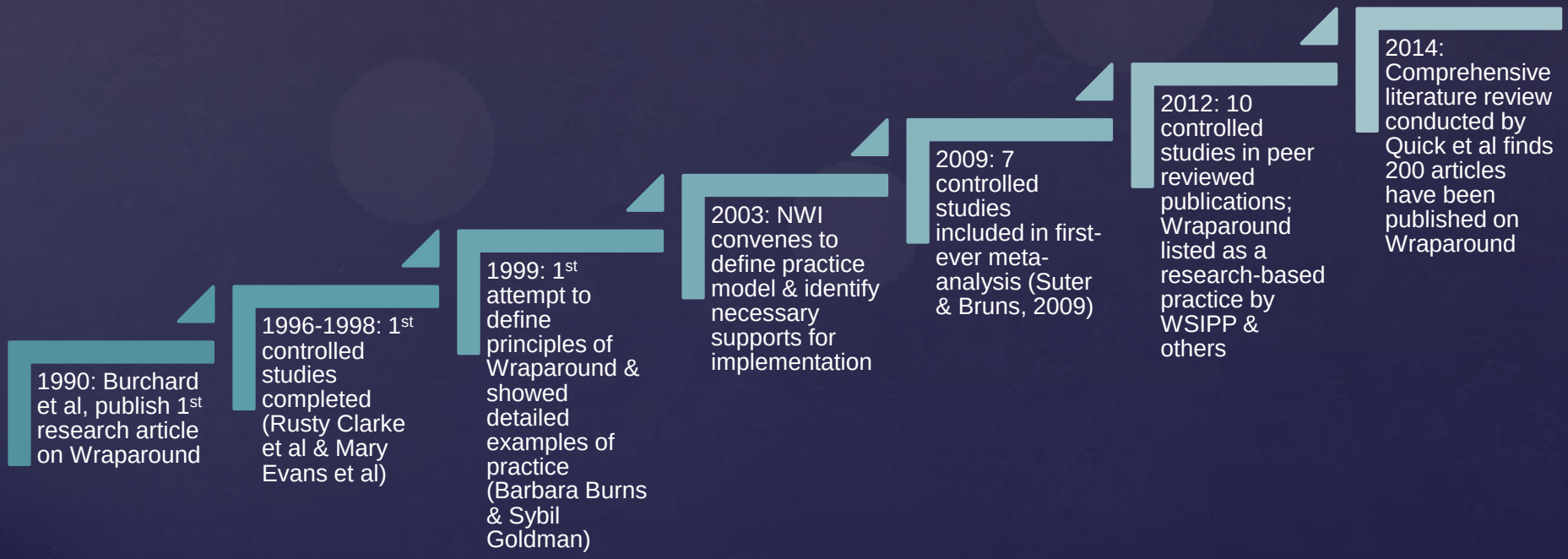
"The Wraparound approach is a form of intensive care coordination for children with significant mental health conditions. It is a team-based, collaborative process for developing individualized care plans for children and youth with complex needs and their families…Information about wraparound can be found on the website of the National Wraparound Initiative…"

Wraparound: Moving from practice-based evidence to research-informed practice



-Eric Bruns, Ph.D.
Director, UW Wraparound Evaluation and Research Team

Introducing NWIC: The National Wraparound Implementation Center!

- A partnership among the 3 leading universities involved with Wraparound implementation:
  - The University of Washington, School of Medicine, Department of Psychiatry and Behavioral Sciences;
  - Portland State University, School of Social Work; and
  - The University of Maryland, Baltimore, School of Social Work,
- Grounded in implementation science
- Works with sites at any stage of Wraparound implementation;
- Collaboratively designs a comprehensive implementation support plan;
- Accesses in-person and technology-enabled strategies

NWIC National Wraparound Implementation Center

CMS Guidance: *www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Benefits/Downloads/Clarifying-Guidance-Support-Policy.pdf*

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Pamela S. Hyde,
Substance Abuse

SUBJECT: Coverage of Behavioral Health Services for Children, Youth, and Young Adults with Significant Mental Health Conditions

"*Peer Services: Parent and Youth Support Services*
Parent and youth support services include developing and linking with formal and informal supports; instilling confidence; assisting in the development of goals; serving as an advocate, mentor, or facilitator for resolution of issues; and teaching skills necessary to improve coping abilities."

Parent Peer Support Partners (PSPs):

Bring shared feelings, history, connection and common experience.

Assist and support family members to navigate through multiple agencies and systems through mutual learning that comes from common lived experience.

Assist the family in reducing isolation and stigma related to emotional, behavioral and mental health disorders.

Work with the family to reinforce hope and build confidence about their ability to manage life without formal support.

The Institute for Innovation & Implementation, University of Maryland School of Social Work (2014).

Parent Support Makes a Difference

- School-based parent support programs have been shown to help families with a child with an emotional disorder to:
  - Access needed mental health services
  - Increase family empowerment
  - Increase school attendance and improve reading scores

  (Kutash, Duchnowski, Green & Ferron, 2010)

- When compared to clinician-led family support programs, family-led family support programs are more likely to:
  - Be affiliated with national or local family-run organizations and
  - Address caregiver isolation and to provide information and education.

  (Hoagwood, Cavaleri, Olin, Burns, Slaton, Gruttadaro & Hughes, 2010)

Youth Engagement and Leadership

Promoting Youth Involvement in Systems of Care

YOUTH MOVE NATIONAL

- **81 chapters throughout the country!**
  - Representing 37 total states, DC and 3 tribes
  - Engaging over 9,000 young people
- **Recent accomplishments include:**
  - National Young Leader's Network
  - Replicating the *What Helps What Harms* policy initiative on a national scale
  - Establishing the National Commission on YPS with SAMHSA funding
  - Contributing to 4 SAMHSA publications

www.youthmovenational.org

Early Onset Psychosis

5% Mental Health Block Grant Set-Aside to Support EBPs

- "The majority of individuals with severe mental illness experience their first symptoms during adolescence in early adulthood."
- Collaborative effort between SAMHSA and NIMH
- Evidence-Based Treatments for First Episode Psychosis: Components of Coordinated Specialty Care

USA

MENTAL HEALTH FIRST AID

THE WHITE HOUSE
WASHINGTON

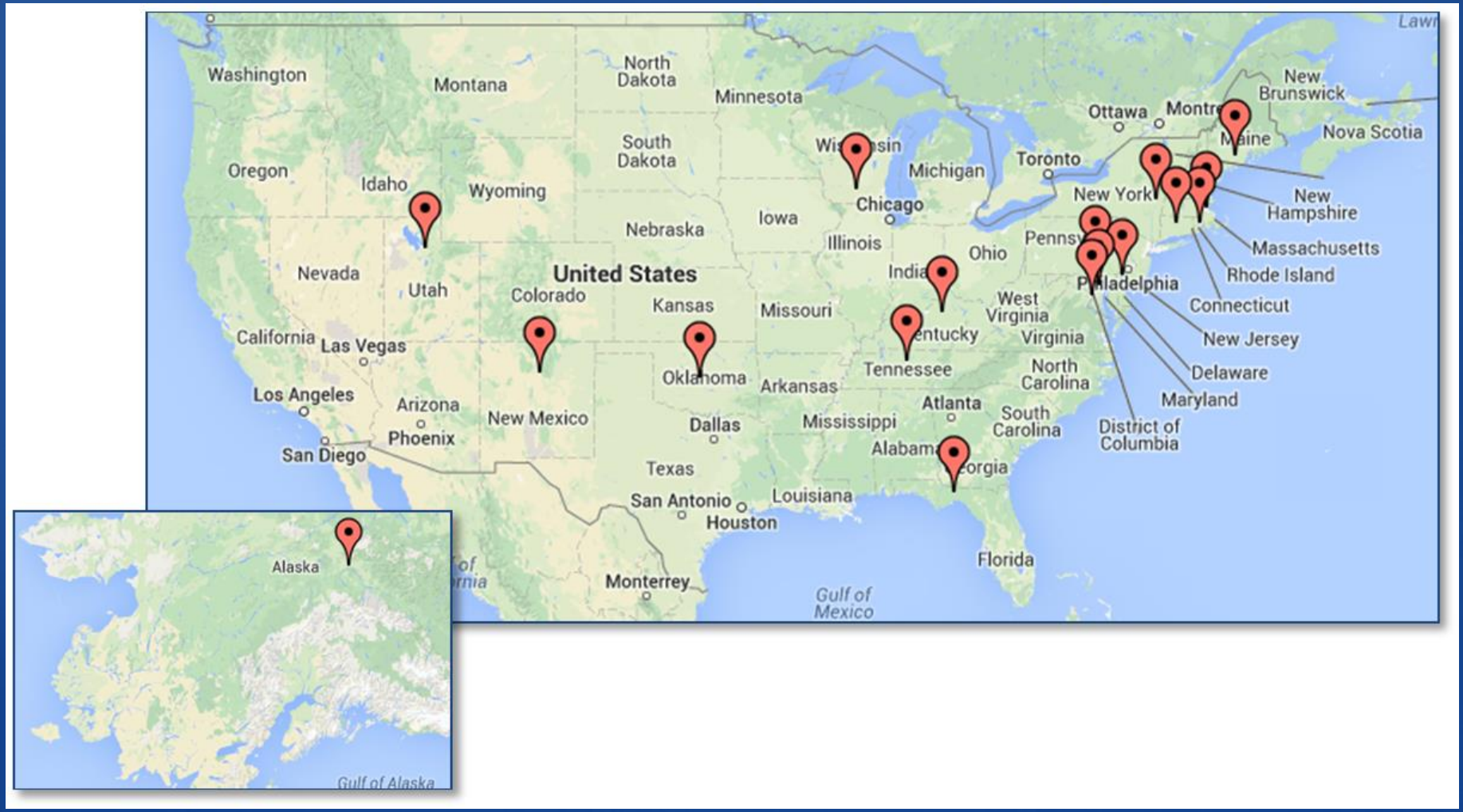
NOW IS THE TIME

The President's plan to protect our children and our communities by reducing gun violence

WH.GOV/NOW-IS-THE-TIME

JANUARY
SIXTEENTH
TWO THOUSAND AND THIRTEEN

FY2014 Healthy Transitions Grantees



3 Steps to Transforming Lives

1 Be on the lookout for new opportunities

#ACA IS WORKING

Millions of young adults have gotten covered on their parent's plan, because the law says they can now do so until they turn 26.

Like us on Facebook

twitter

flickr

Substance Abuse and Mental Health Services Administration
SAMHSA blog

YouTube

Check Out Our PSAs!

Follow me on Twitter!

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@GaryBlauPhD

4 Lists

TWEETS	FOLLOWING	FOLLOWERS	FAVORITES	LISTS
768	326	791	15	4

Gary Blau
@GaryBlauPhD

Branch Chief, Child, Adolescent & Family Branch of Center for Mental Health Services at the Substance Abuse and Mental Health Services Administration (SAMHSA)

samhsa.gov/children
Joined July 2012

Tweet to Gary Blau

Tweets | Tweets & replies | Photos & videos

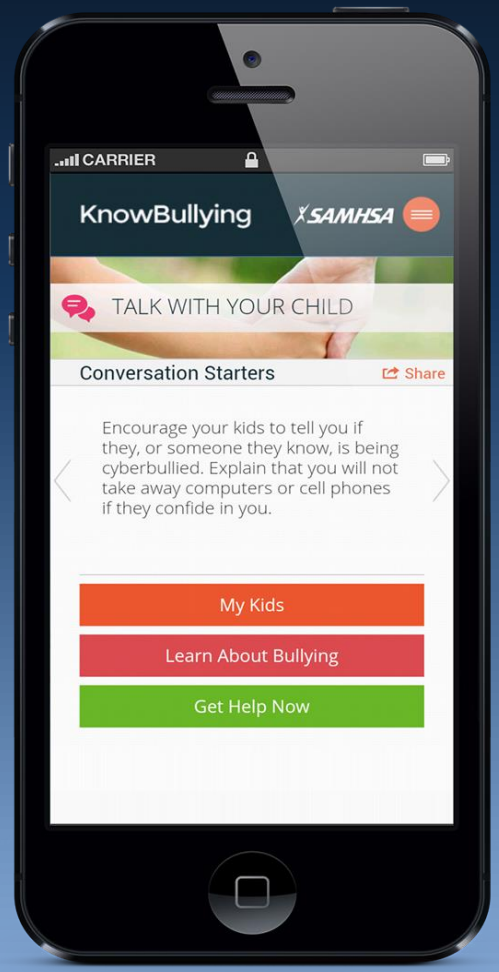
Gary Blau @GaryBlauPhD · 3h
#Funding #Grant Opp from @SAMHSAgov: #Minority Serving Institutions Partnerships w/Community-Based Orgs, due May 26: 1.usa.gov/1CuUxke

1

Gary Blau @GaryBlauPhD · 21h
Read @NIMHgov Director Dr. Insel's blog on research targeting #suicide

Want to help young adults with behavioral health needs?

There's an app for that!



Coming soon....

Suicide Safe:

The Suicide Prevention App for Behavioral Health and Primary Care Professionals

FIND youth INFO

View Resources by Topic: Select... Go

search website Search

Subscribe to the Newsletter

Home | Youth Topics | Youth Voices | Map My Community | Funding Search | Collaboration Profiles | Evidence & Innovation | Federal Resources | About Us

Updated Youth Topic: LGBT Youth

Addressing LGBT-related stigma, discrimination, and violence; building on the strengths of LGBT youth; and fostering supports such as family acceptance and safe, affirming environments in schools and other settings will help improve outcomes for LGBT young people. See our updated youth topic on LGBT youth.

Click for the full story

Previous Pause Next

READ THE PLAN & SHARE YOUR IDEAS

Strategic Plan for Youth

What do you think?

What is the biggest opportunity to move Pathways for Youth forward?

Read & Comment

Youth Topics

Through the Youth Topics series, the Interagency Working Group on Youth Programs provides information, strategies, tools, and resources for youth, families, schools and community organizations related to a variety of cross-cutting topics that affect youth.

Choose a topic:

Stay Connected

Subscribe to our newsletter for information on funding, events, publications, and more.

Email: Enter your e-mail Subscribe

See us on: YouTube LinkedIn

Don’t miss KSOC-TV!

View all of the KSOC-TV webisodes on the SAMHSA YouTube channel or by going to www.samhsa.gov/children

THE TA NETWORK

the technical assistance network for children's behavioral health

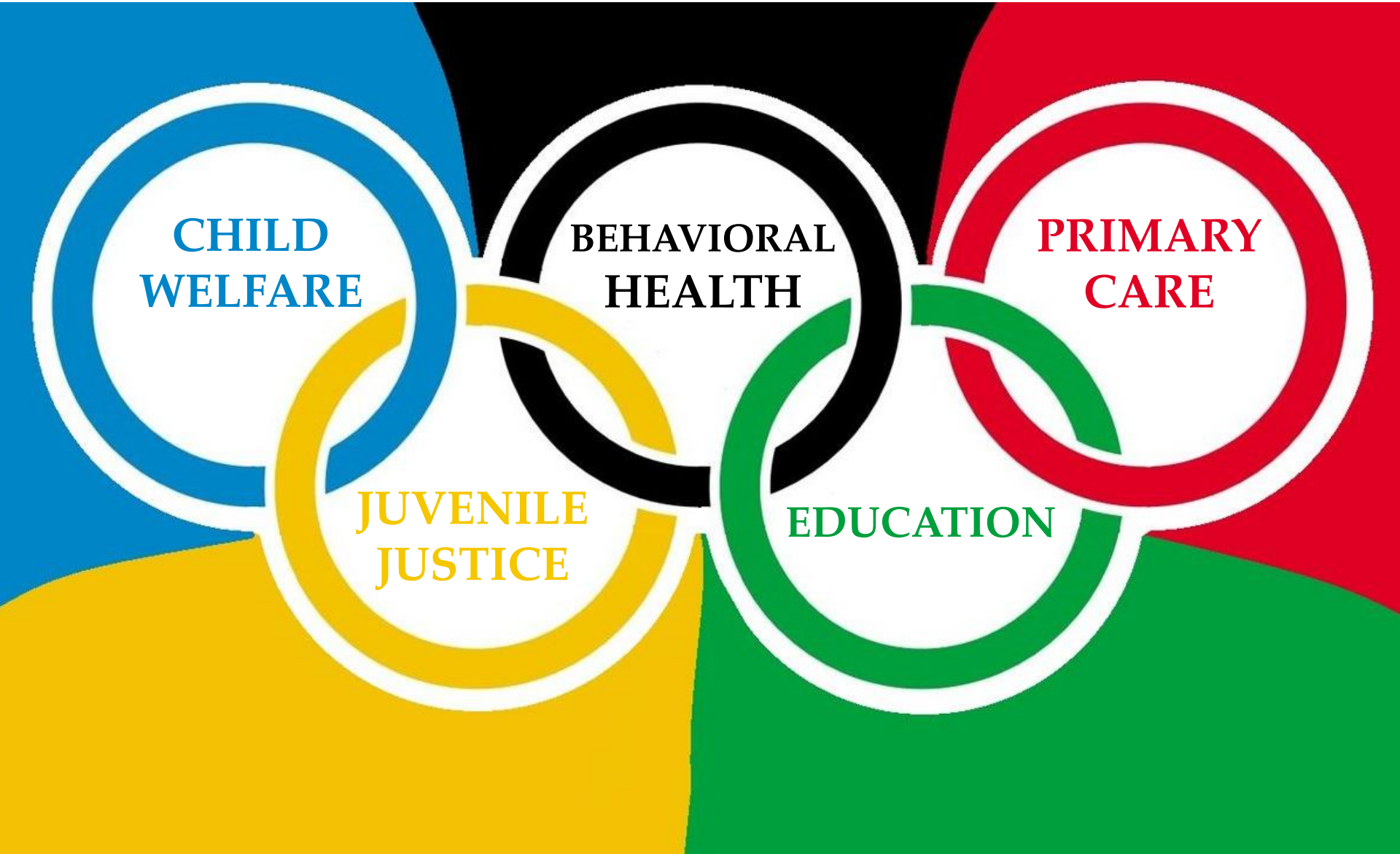
Introducing Our TA Partners

For All Your Systems of Care Needs

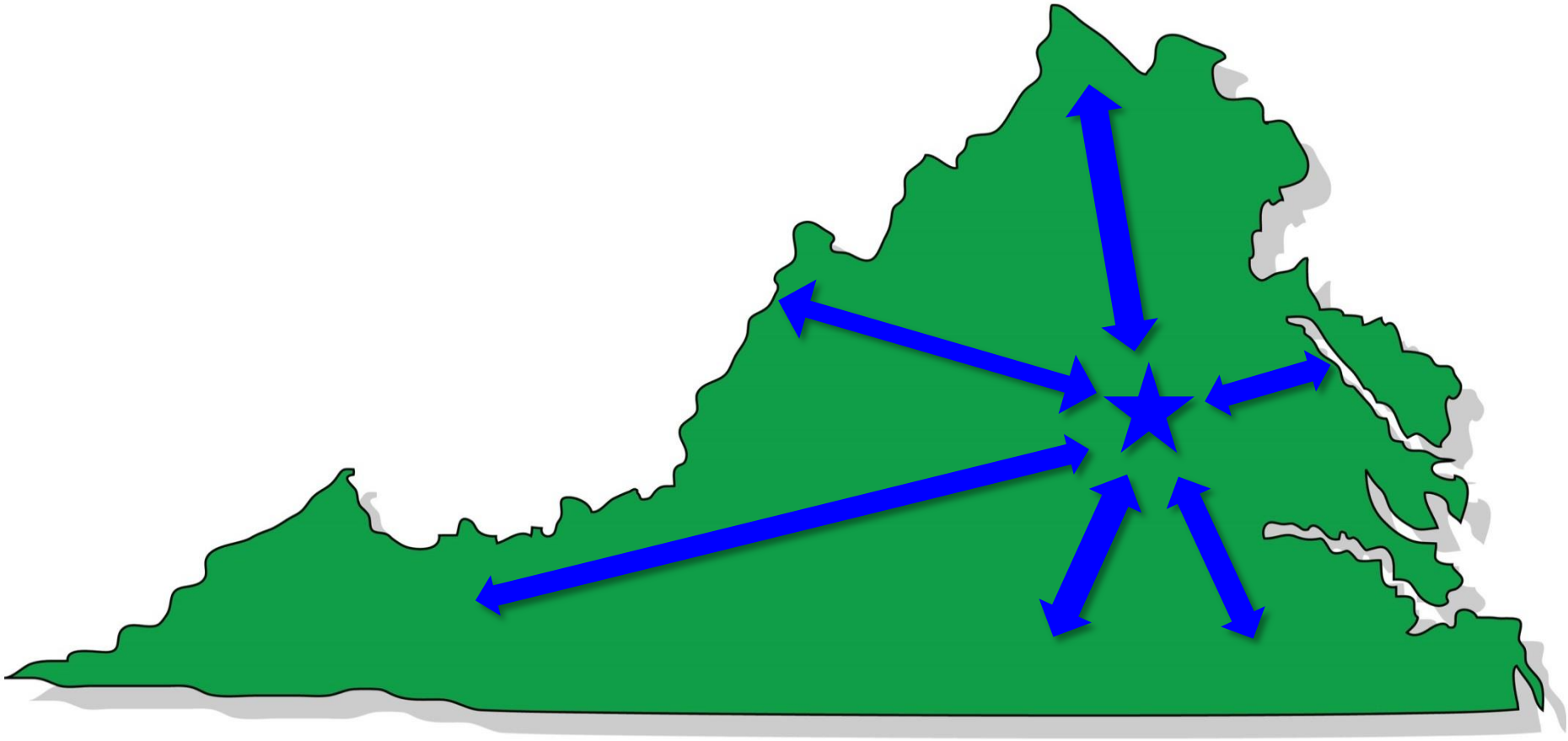
National Technical Assistance Center for Children's Mental Health

2 Use the buddy system when working on systems change…

Link with System Partners



Partnerships At All Levels



3 Be a Champion

NATIONAL CHILDREN'S MENTAL HEALTH AWARENESS DAY

www.samhsa.gov/children

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Check out the 2014 Children's Mental Health Awareness Day Webcast at

http://www.samhsa.gov/children/national.asp

Save the Date: May 7, 2015

Prioritize being a Supporter of Child, Youth & Family Mental Health!

We would not want you to leave with prehistoric ideas…

Don’t be a dinosaur!!

However, if you were a dinosaur……

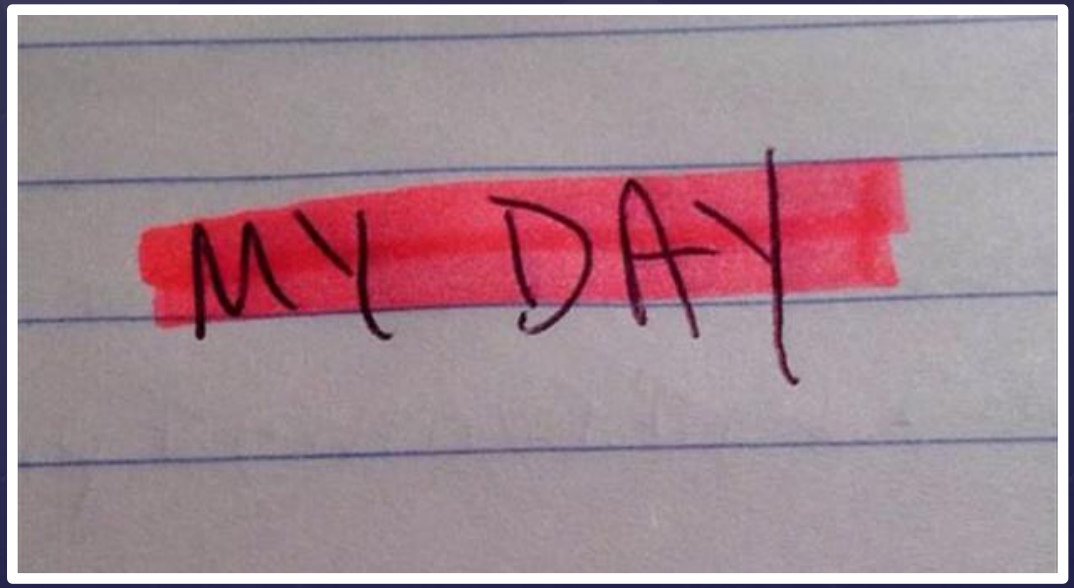
You would be an

AWESOMEASAURUS

We want you to spread the word about systems of care!

Now get excited…You have an AMAZING conference ahead of you!

Get Busy…

…And Get to Work!

This has been the highlight of my day