

**OMHSAS CHILDREN'S  
ADVISORY COMMITTEE  
Children's Bureau Updates**

April 7, 2011




# National Children's Mental Health Awareness Day


## Tuesday, May 3, 2011

- } This year's special focus: building resilience in young children dealing with trauma
- } WITF 89.5 Radio SmartTalk, 9:05-10:00 a.m., May 3: featuring Dr. Chris Petersen and Michele Walsh as panelists
- } Member of OCYF's youth advisory board selected as a youth panelist for the national event
- } Lots of resources for local communities available at [www.samhsa.gov/children](http://www.samhsa.gov/children)


# System of Care

- } System of Care – we are working with 5 counties (Chester, Erie, Lehigh, Montgomery, and York) currently, and will select 5 counties later this year, and another 5 in 2012.
  - } Retreat for State Leadership Team and local governance teams from the 5 counties to be held in May.
  - } We have applied to the National Technical Assistance Center for Children’s Mental Health for technical assistance on how to take the System of Care initiative Statewide – expect to hear soon.
- 

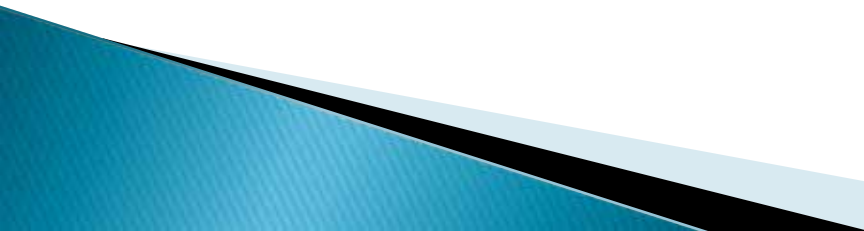
# New SAMHSA Opportunity

- } SAMHSA announced the availability of Planning Grants for State Expansion of the Comprehensive Community Mental Health Services for Children and their Families.
  - } The purpose is to develop a comprehensive strategic plan for improving and expanding services provided by Systems of Care for children and youth with serious emotional disturbances and their families.
- 


# High Fidelity Wraparound

- } There are 10 counties involved in High Fidelity Wraparound, the 5 System of Care Counties: **and** 6 others: Allegheny, Bucks, Delaware, Fayette, and Northumberland.
  - } Over 500 youth and their families have been served since the initiation of HFW in 2008.
  - } We are working with counties/BHMCOs to expand the availability of HFW to more counties.
- 

# Money Follows the Person

- } We have applied to be approved for Money Follows the Person, which will provide additional funds from Medicaid to assist youth in moving from RTFs to community placement.
  - } Youth that have been in an accredited RTF for 90 days or more can have community services paid through Medicaid with enhanced federal match (77%).
  - } Administrative services (training, coaching, and monitoring of High Fidelity Wraparound) is at 100% federal match.
- 

# Our MFP Plan

- } We will work with counties that have highest utilization of RTFs;
  - } We will provide training for new staff in High Fidelity Wraparound focused on youth in RTF;
  - } We will explore innovative ways of enabling youth to be served in their home communities;
  - } We plan to start by serving 20 youth in 2011.
- 

# Residential Treatment Facilities


- } 7/13/09 we had 2,807 Accredited and 1,281 non-accredited
  - } 4,088 beds total beds in 2009
  
  - } 3/1/11 we have 1,960 Accredited and 501 non-accredited,
  - } a decrease of 1,627 beds in two years
  - } a total of 2,461 beds in 2011
- 

# Accredited RTF

- } 4,213 youth served in FY 2008-09 with expenditures of \$218 million
- } 3,691 youth served in FY 2009-10 with expenditures of \$188 million

# Budget Proposal– RTF

OMHSAS will work with counties and BHMCOs :

- } To develop county-specific action plans with benchmarks for reducing over-reliance on RTF services in FY 2011-12;
  - } Increase access to community-based alternatives focused on development of evidence-based practices;
  - } Revise RTF Regulations to increase quality and effectiveness of service.
- 

# Budget – BHRS Plans

- } Work with counties/BHMCOs to expand utilization of more clinical, time-limited alternatives;
  - } Streamline administrative requirements;
  - } Define the appropriate use of TSS within the behavioral health continuum, focusing the service where outcomes are realized;
  - } Support continued development of “Shared TSS” whereby 1 TSS will be able to serve multiple students in one class room, even one school;
  - } Review financing structure to ensure that there are not financial incentives to over-prescribe;
  - } Examine EBPs for children with ASD as alternatives to TSS.
- 