



**DEPARTMENT OF CHILDREN AND FAMILIES
TESTIMONY OF
DEPUTY COMMISSIONER HEIDI McINTOSH
REGARDING THE 2010 FEDERAL CMHS BLOCK GRANT**

**APPROPRIATIONS, PUBLIC HEALTH AND
HUMAN SERVICES COMMITTEES
SEPTEMBER 15, 2009**

Good morning distinguished members of the Appropriations, Public Health and Human Services Committees. My name is Heidi McIntosh and I am the Deputy Commissioner of the Department of Children and Families.

I thank you for the opportunity to present to you the Department's proposed 2010 Spending Plan for the children's portion of the Federal Community Mental Health Services Block Grant. The Department proposes to use the funds from this Block Grant congruently with its vision for a comprehensive community-based behavioral health service system for children and their families.

DCF has been partnering with the Department of Mental Health and Addiction Services through the Mental Health Block Grant and the Mental Health Transformation State Incentive Grant. For example, through the Mental Health Transformation State Incentive Grant, implementation of a Community-Based Wrap-Around Model for youth involved with the juvenile justice system is now underway in two communities. This will be complemented by workforce development and training initiatives, funded through the Mental Health Block Grant. These federal dollars are an integral part of creating a transformed behavioral health system in Connecticut that results in positive outcomes and allows children to realize their fullest potential.

The services and supports under the Block Grant are important components of the foundational elements that DCF has embraced through the System of Care model, which is to maintain children with serious emotional disturbances in their homes and communities through the efforts of local consortiums, and through the CT Behavioral Health Partnership. In collaboration with the fourteen (14) DCF Area Offices, community providers, state agencies and families, the Department is working to ensure that children and their families receive the care and services that they need. Similar to years past, the Block Grant continues to provide families with access to local, community-based services and supports that have typically been unavailable through traditional, categorical funding models.

Consonant with the Department's goals, DCF proposes to use the FFY 2010 Block Grant, in the amount of \$ 1,698,292, to support the following services and activities:

- Family Advocacy Services \$ 467,300
This service provides support, guidance and educational resources to families caring for a child or youth with mental health needs. Family advocacy assists parents with accessing

and effectively participating in services that aid in maintaining their children in the home and the community. This service is an integral part of advancing an outcome oriented behavioral health agenda that is based upon family strengths. The proposed 2010 allocation will support the consortium of diverse family advocacy organizations to aid service and system development including local, grass-root family advocacy efforts.

- Respite for Families \$ 425,992

This program is a vital community-based service that supports children receiving behavioral health care in their community. Respite offers families temporary relief from the continuous care of a child with serious emotional disturbance and provides opportunities for age appropriate social and recreational activities.

- System of Care Workforce Development/Training & Culturally Competent Care \$ 110,000

This allocation is targeted to assist with ensuring accountable, quality services for the provision of community-based care for children. These funds support activities that maintain and/or enhance providers' competencies and allow for the implementation of family-centered, strengths-based, culturally competent behavioral health care practices. During 2010, the Department is seeking to enhance the work of the 25 local System of Care Community Collaboratives by offering technical assistance, infrastructure support, training and consultation to Care Coordinators and other stakeholders, and leadership development for family advocates and caregivers.

- Extended Day Treatment: Model Development and Training \$ 90,000.

The Department is implementing a standardized, clinically effective model of care in Extended Day Treatment (EDT) programs across the state. EDT is an essential component within the continuum of care for emotionally troubled children, adolescents and their families. It provides a less expensive alternative to inpatient services and maintains participants in the least restrictive family-based setting. The Department has been engaged in a multi-year initiative to improve provider competencies and skills in engaging families in all aspects of treatment, improving clinical services to children and adolescents, and implementing child/family outcome measures to evaluate the effectiveness of services. Training will continue to be provided with a focus on family engagement protocols, trauma-based, relational treatment, therapeutic recreation resources, and Ohio Scales for measuring outcomes.

- Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) Learning Collaborative \$ 435,000

Many clients who are served at outpatient psychiatric clinics for children have experienced significant trauma and will benefit from this well-researched, clinic-based, short-term treatment modality. Through contract with the Connecticut Center for Effective Practice as the Coordinating Center to oversee this initiative, six outpatient clinics, each having an 8 to 10 person core team have been selected to participate in the 12-month Learning Collaborative. The purpose of this training is to increase access to and availability of trauma-specific, evidence-based treatment for Connecticut's children, youth and families.

- Youth Suicide Prevention/Mental Health Promotion \$ 50,000

These funds are targeted to support important prevention and early intervention efforts in the community. Suicide prevention training, and proposed school or other community-based programming that targets at risk youth are projects that will be occurring with these dollars. These funds supplement state funds that the Department has committed to assist with Connecticut's youth suicide prevention initiative.

- Best Practices Promotion & Program Evaluation \$ 100,000.

These funds support consultation and technical assistance to identify best practices for specific populations and to evaluate existing models and services to improve the community-based system of care. Areas of focus may include outpatient psychiatric services, intensive in-home services, and the system of care/care coordination, particularly applying what has been learned from the wrap-around initiative.

- Other Connecticut Community KidCare \$ 20,000

These funds support the involvement of community stakeholders in strategic planning, implementation and assessment of the system of care. Further, congruent with federal legislation that requires review of the state's Mental Health Block Grant by Connecticut's Mental Health Planning Council (Planning Council), the Department proposes to use a modest amount of funding to support their activities. In particular, these dollars are identified to support the convening of the Planning Council meetings, and allow for broader, diversified participation into the service planning and Mental Health Block Grant review activities of the Council.

TOTAL \$ 1,698,292.

In closing, congruent with the federal mandate to "transform" the state's mental health system and create a comprehensive care agenda, these funds are incorporated into the Department's overarching strategy and vision for a broad array of quality, accountable, family-centered and culturally competent services for children with complex behavioral health needs and their families. The services and activities funded through the Mental Health Block Grant are integral to the Department's ongoing efforts to reduce reliance on residential levels of care and augment the continuum of services available to state-funded outpatient providers.

The FFY 2010 allocations for the Mental Health Block Grant will join with state funding to augment the activities of existing community-based services, the Community Collaboratives, the CT Behavioral Health Partnership, and the workgroups under the Mental Health Transformation State Incentive Grant to create an integrated system of care for Connecticut children with serious emotional disturbance and their families. The Department thanks the General Assembly for its vision for behavioral health care in Connecticut, and its continued support to DCF in implementing this important mandate.