

Strengthening the Mental Health Systems of Care for Children and Adolescents in Connecticut

March 2013

Executive Summary

Connecticut's leading stakeholders representing the rights and interests of children and adolescents have agreed on a set of guiding principles and recommendations to strengthen the mental health systems of care across the home, school, and community settings:

- I. **Ensure access to quality community mental health services for all of Connecticut's children.** Every child in every neighborhood deserves access to mental health services irrespective of insurance status, setting, or system involvement (child welfare, juvenile justice, behavioral health, school).
- II. **Promote early identification and intervention of mental health problems in young children.** Every child in every neighborhood has access to an early childhood specialist and to a pediatric healthcare clinician trained to identify and triage mental health problems in infants and toddlers.
- III. **Expand and improve access to school-based and school-linked mental health services.** Every child in every neighborhood attends a school staffed by a full-time school social worker and school psychologist, each of whom has a manageable caseload.
- IV. **Ensure that quality mental health services are adequately reimbursed and funded.** All health plans are held accountable for any and all violations of the Mental Health Parity and Addiction Equity Act of 2008.

*Child Health and Development Institute
Child FIRST
Connecticut Association of School Psychologists
Connecticut Association of School Social Workers
Connecticut Chapter of the American Academy of Pediatrics
National Alliance on Mental Illness (NAMI), Connecticut Chapter
Connecticut Commission on Children
Connecticut Council of Child and Adolescent Psychiatry
Connecticut Juvenile Justice Alliance
Connecticut Office of the Child Advocate
Connecticut Office of the Healthcare Advocate
Keep the Promise Coalition
National Association of Social Workers Connecticut*

Joint Recommendations by Stakeholders for Strengthening the Mental Health Systems of Care for Children and Adolescents in Connecticut

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Page 1 of 2

I. Ensure access to quality community mental health services for all of Connecticut's children.

- a. **Increase the number of care coordinators** in each of the DCF community collaboratives to support youth and families with multiple service needs.
- b. **Promote the delivery of evidence-based treatments** that are community-proven and reflect best practices.
- c. **Train providers** in best practice trauma-focused and evidence-based treatment approaches.
- d. **Build a child psychiatry consultation network** based on the Massachusetts model to support primary care physicians and school mental health personnel.
- e. **Expand access to tele-mental health services** by requiring public and private insurers to reimburse providers for mental health services delivered via telecommunications technology.
- f. **Expand access to mental health services based on child and family need**, irrespective of insurance status, setting, or system involvement (child welfare, juvenile justice, behavioral health, school).
- g. **Expand access to milieu-based extended day treatment services** for children and adolescents to keep them in community-based settings and out of inpatient hospitals or residential treatment facilities.

II. Promote early identification and intervention of mental health problems in young children.

- a. **Adequately fund prevention, early identification and intervention initiatives** such as Child FIRST, Early Childhood Consultation Partnership, and Nurturing Families.
- b. **Improve Birth to Three Services eligibility criteria** to ensure that children with, or at risk for, mental health issues receive services as part of their Individual Family Service Plan (IFSP).
- c. **Mandate reimbursement for early childhood mental health services without requiring that the child have a formal diagnosis.**

III. Expand and improve access to school-based and school-linked mental health services.

- a. **Expand access to school-based health centers** and restore all related funds that were cut in the Governor's proposed budget.

- b. Expand access to school-based mental health for all youth by employing enough school social workers and school psychologists** to meet two minimum standards: a) every school building is staffed by at least one school social worker and one school psychologist; b) every school building meets minimum professional staffing ratios.
- c. Provide training** to school staff in trauma-focused and behavioral evidence-based school-based and classroom-based interventions.
- d. Introduce at least one school-based care coordinator** for every school district.
- e. Require community-based mental health care agencies to sign memoranda of understanding with all schools** in their respective catchment areas to foster communication and collaboration.

IV. Ensure that quality mental health services are adequately reimbursed and funded.

- a. Ensure that providers are adequately reimbursed** for delivery of evidence-based mental health services and that barriers to care are eliminated.
- b. Require health plans to reimburse health and mental health care providers for care coordination services.**
- c. Require health plans to reimburse for mental health care services delivered in the home and school settings.**
- d. Mandate that all state behavioral health contracts devote 10% of their contracts to quality assurance** in order to improve and ensure the quality of mental health care.
- e. Promote interagency, braided funding streams** to ensure sustainability and to reduce barriers to accessing quality care across systems and agency silos.

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