Agenda

1. Qualified Independent (QI) Assessment Process

2. Reducing the Reliance on Residential (R3) Stakeholders Meetings and Next Steps

3. Bridge Program Call for Information Survey Results

4. Children with Serious Emotional Disorder (CSED) Waiver Updates

5. Outreach to Families and the Weekly Resource Rundown

6. Updates from the U.S. Department of Justice (DOJ)

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1. QI Assessment Process

- Preventing placements for children who do not meet the criteria for residential intervention

- Pilot initiated in mid-August

- Phased geographic implementation through May 2023

For youth at imminent risk of residential intervention or currently in residential placement without a QI assessment

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2. R3 Stakeholders Meetings and Next Steps

- Meeting held October 6 at DHHR offices in Charleston

- Subgroups began working on priorities

- Meeting held yesterday, November 30 at Marion County DHHR offices in Fairmont

- Next steps

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Bridge Program Call for Information Survey Results

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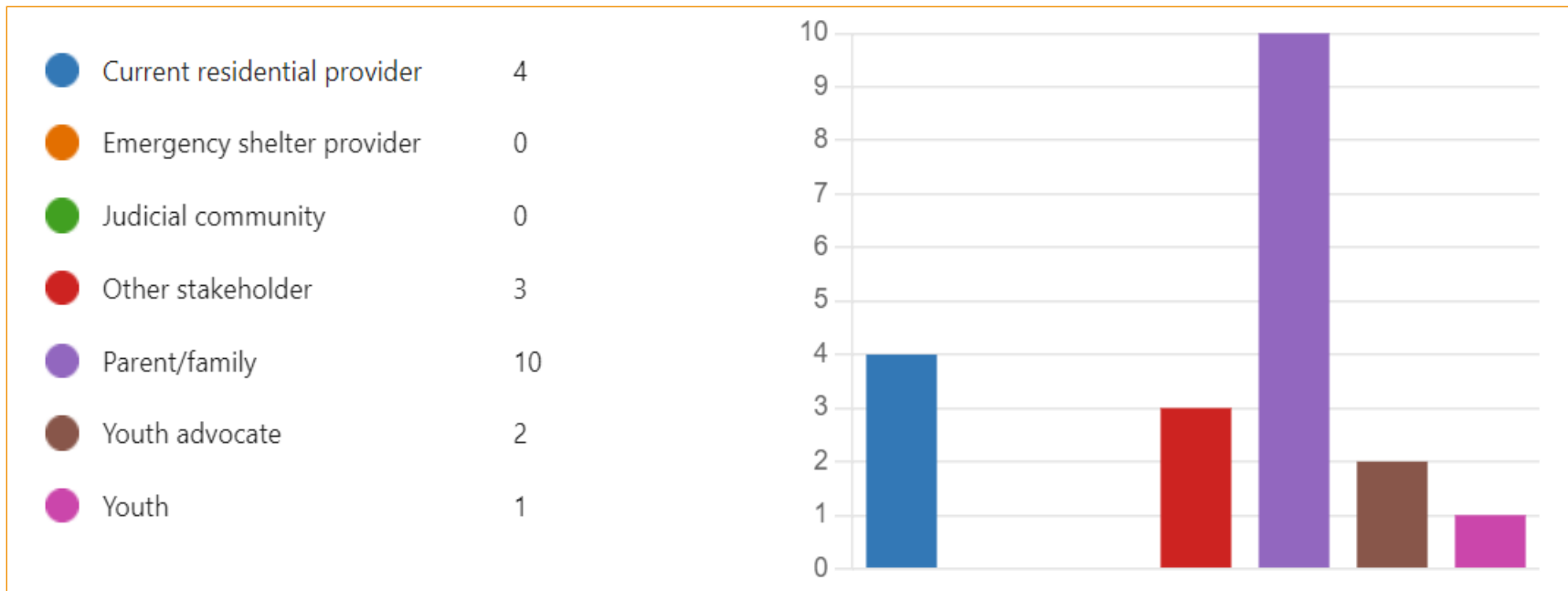WEST VIRGINIA Department of Health & Human Resources

Purpose of the Survey

- To collaborate with the community on reducing the State's reliance on residential mental health treatment intervention.

- Encourage the community to provide innovative ideas for serving youth who do not meet clinical diagnostic criteria for residential mental health treatment but are unable to be matched with another clinically appropriate option or family-like setting.

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Who Were the Respondents

- Survey was available on the Kids Thrive Collaborative website for eight weeks

- Survey was provided to stakeholders through the Kids Thrive Collaborative listserv

- 19 stakeholders responded to the survey (one response was a test response)

● Current residential provider	4
● Emergency shelter provider	0
● Judicial community	0
● Other stakeholder	3
● Parent/family	10
● Youth advocate	2
● Youth	1

Key Takeaways: Services

- A clear model and new funding stream is needed to grow the number of independent and supportive living programs for youth statewide.

- Smaller group homes would allow youth to transition, be supported successfully, and reduce recidivism as youth receive a lower level of care while they transition.

- Two main supports needed statewide:

  - Programming that supports relationship building and natural supports as youth transition.

  - Least-restrictive, community-based programming options for youth who are lower functioning and have challenging behaviors.

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Key Takeaways: Programs

- Increasing access to step-down programs and placing youth within their community of origin are two ways to mitigate gaps in sustainable support for youth in care.

- Creating transitional programs that mirror home-environments and provide supports as needed and individualized for youth as they transition home or to independence is key. This supports sustainable independence outside of formal services.

- Small group home programs provide a higher level of support, which requires daily room rates to support this model.

Key Takeaways: Individualized Services

- An individualized transition plan with flexible options works best with youth in care who have experienced trauma and other mental health issues.

- When designing programs for youth and families, some of the most important components are engagement and active listening of the entire team, individualized programming to support the identified needs, strengths-based practice focused on building skills for both youth and family, and trust building.

- Maintaining connections with siblings and friends is critical for youth in foster care. Finding ways to keep those connections can be challenging, but the benefits outweigh the effort.

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Key Takeaways: Family Support

- More hands-on training for parents is needed so that youth are successful when transitioning out of care. Training could focus on individual specific concerns but could also be common topic areas.

- Proactive planning and identifying resources is needed to better support resource families and youth.

- Building on natural supports for families and youth is important to create a sustainable plan for future success. A consistent process/program will support not only the workers providing the services but help with community engagement as they support the families in their own communities.

- Utilization of the team approach is needed to support youth in care. While there can be a point-person, all team members are needed to work through issues, share insights, etc.

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Key Takeaways: Community

- Targeted outreach to business owners and residents within the community is needed to increase resources for youth.

- Forging relationship within a community can help change the perceptions of youth in foster care, and the child welfare system can be seen as prevention focused rather than reactive.

- Support is needed for public educators who are teaching many youth in foster care. Schools are not equipped to support them in a public-school setting. Additional resources may be needed to provide an individualized education for youth with significant needs.

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Youth Feedback

- I want to be loved. And your "services" can't give me that.

- When we most need our people, you take us away from them and you try and replace them sometimes with YOUR people. I want MY people.

- Ask us what we need and who we need. It's different. Don't try to make us fit your services. We are not puzzle pieces to be made to "fit" your puzzle.

- Treatment doesn't look at the things in the home that impacted what brought me there. I get defined as being "the problem," and that is not fair.

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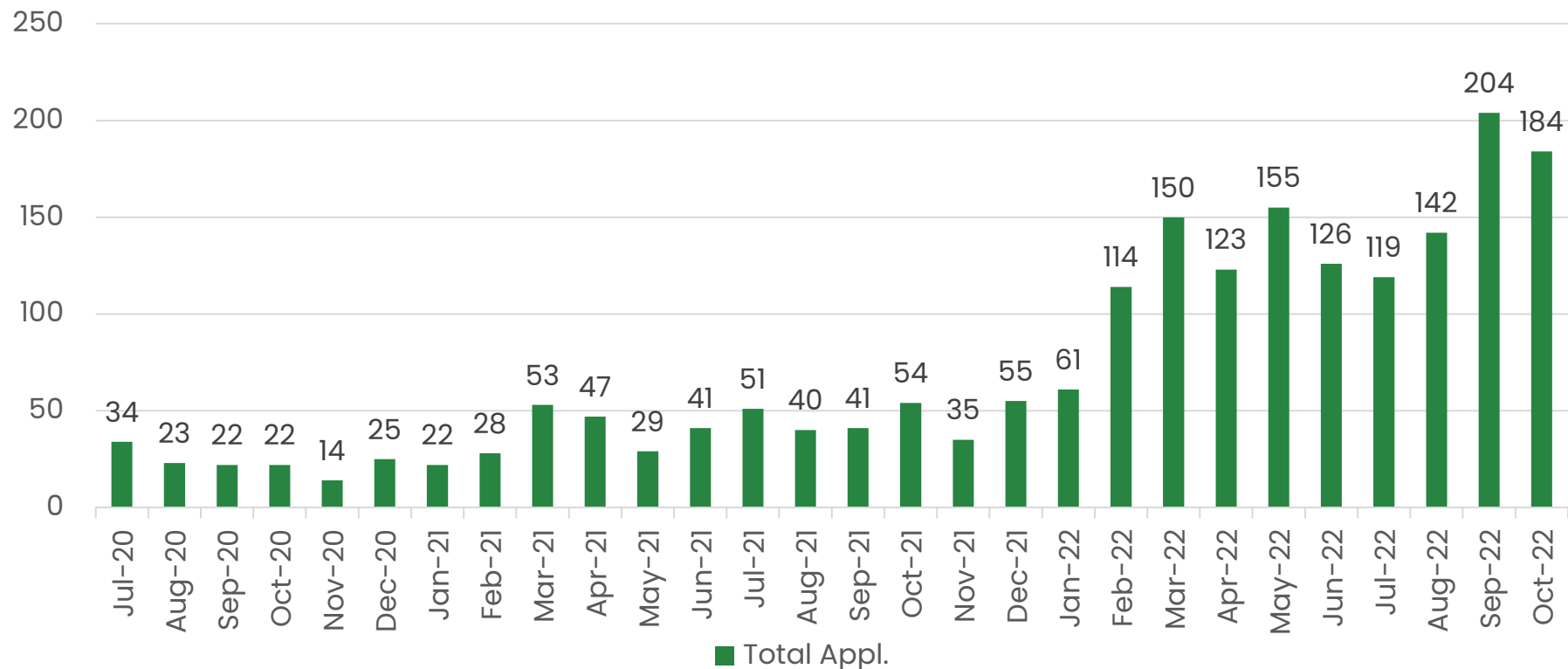WEST VIRGINIA Department of **Health & Human Resources**

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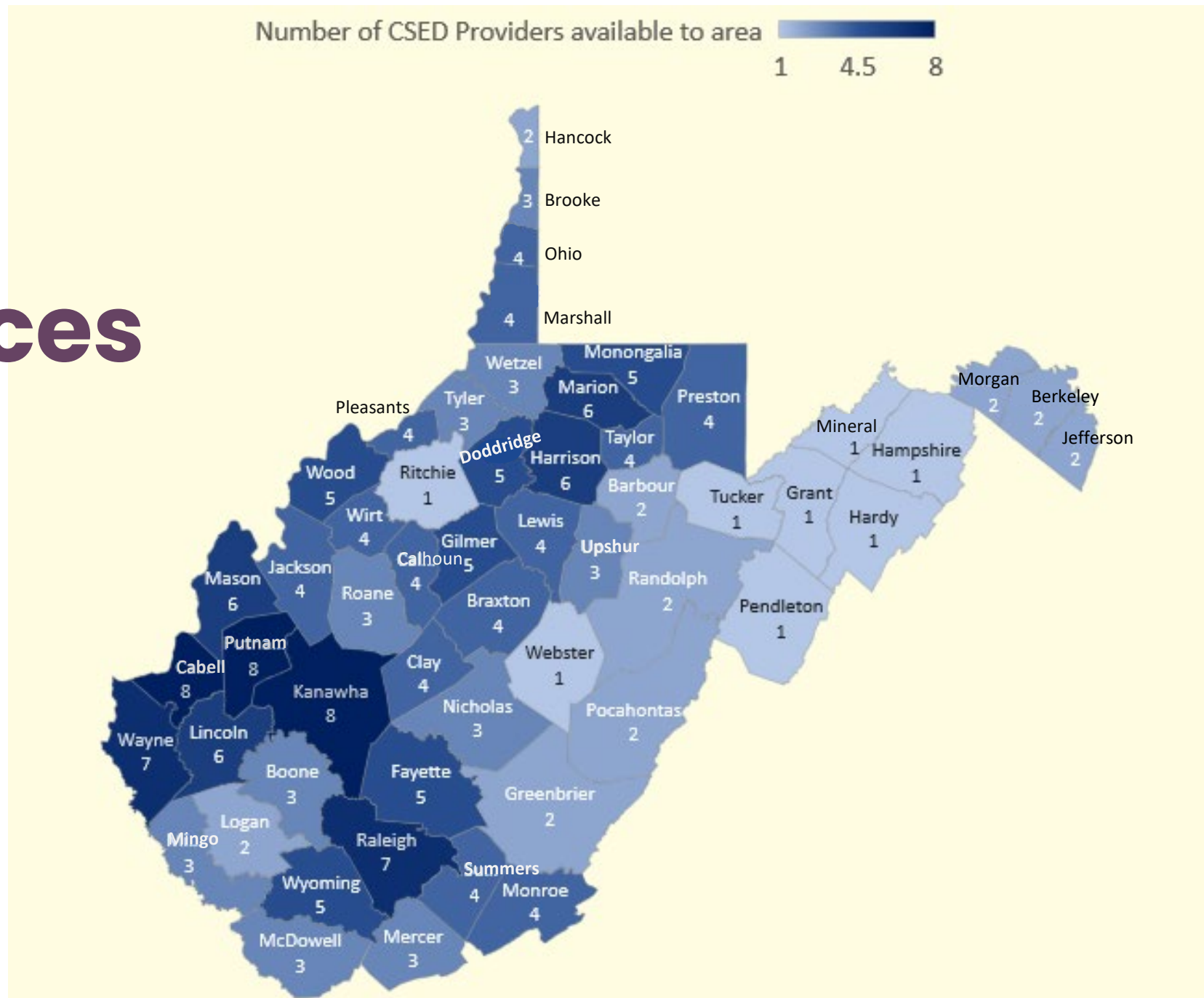# Children with Serious Emotional Disorder (CSED) Waiver Updates

CSED Waiver Application Trends

Continued trend up, aligning with implementation of the Assessment Pathway. From July 2021 through June 2022: 73% of applications were approved, 8% were denied, 1% were pending, and 18% were closed.

July 2020 through October 2022

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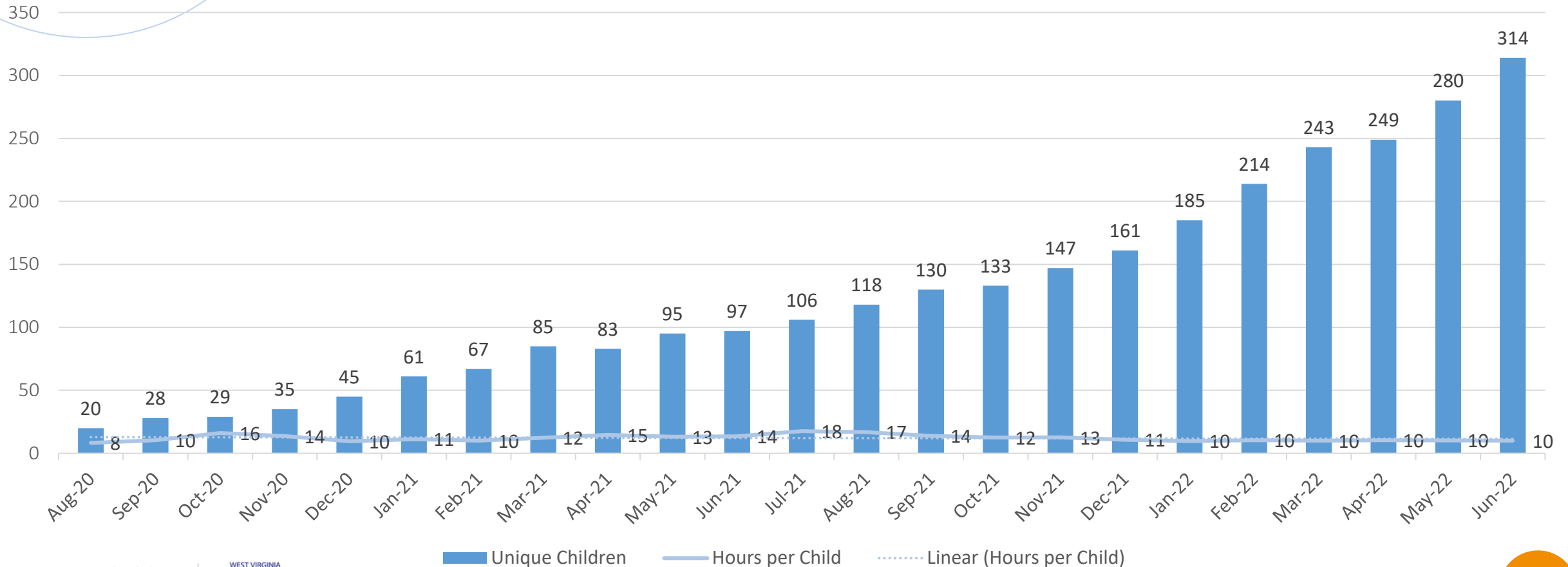WEST VIRGINIA Department of Health & Human Resources

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Data source: Kepro

Agencies Offering CSED Services by County

CSED Waiver Service Utilization

The graph below captures average utilization for children accessing hourly CSED Waiver services from August 2020 through June 2022.

CSED Waiver Service Utilization, Excluding Independent Evaluations

Unique Children — Hours per Child ...... Linear (Hours per Child)

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Data source: MMIS Claims

CSED Service Utilization: Work in Progress

- Average hours per child has remained steady despite significant increase in the number of children accessing services

- DHHR recognizes average utilization is lower than expected given the intensive nature of services

- Work in progress includes:

  - Fidelity Review report

  - Training of Wraparound Facilitators

  - Educating providers on documenting and billing services

  - Utilization analysis through the life cycle of services

  - Understanding the level of needs for children (and anticipated cross-system data in 2023)

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5. Resource Rundown

- Began in August on Tuesdays at noon for parents and caregivers or those providing support to families

- Focus is contacting 844-HELP4WV to get help or information for child's mental health needs

- So far this year:

  - 8 attendees per week, on average

  - 78 total attendees, unduplicated

  - 713 "first visits" (a.k.a. unique users) to the Resource Rundown webpage

  - 1,590 total views to the Resource Rundown webpage

- Next: "Did You Know?" miniseries

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KidsThrive can help

kidsthrive.wv.gov
kidsthrive@wv.gov

- Not sure about calling HELP4WV, and **want to read more information** first?

- Don't **understand your options**?

- **Too much jargon** to take in?

- **Have questions** not addressed here?

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Calling 844-HELP4WV does not mean you are involved with the police or Child Protective Services

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Updates from the U.S. Department of Justice

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Thank you!

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