



WV Children's In-Home and Community-Based Services Improvement Project Evaluation

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Sound Strategies / Improve LivesSM

Background

WVU's Health Affairs Institute partnered with DoHS to evaluate the State's mental and behavioral health system for children and youth under the age of 21 (hereafter referred to as youth).

This multiyear, mixed-method evaluation captures perspectives and experiences of stakeholders at all levels of the mental and behavioral health system.

Stakeholders

- Starting in 2021, surveys, interviews, and focus groups* were conducted with >1,000 stakeholders during each year of the Evaluation, including:
 - Youth in RMHT and their caregivers
 - At-risk / community-based youth and their caregivers
 - Providers
 - Provider organizations
 - Juvenile justice partners
 - System-level administrators

*focus groups were conducted in 2021 and 2023/2024

Services of Interest

- Assertive Community Treatment (ACT)
- Behavioral Support Services (including Positive Behavior Support)
- Children's Mobile Crisis Response and Stabilization (CMCRS)
- CSED Waiver Mobile Response
- CSED Waiver Wraparound
- Children's Mental Health Wraparound (CMHW)
- Children's Crisis and Referral Line (CCRL; 844-HELP4WV)
- Residential mental health treatment (RMHT)

This Year's Reports by Topic:

- Awareness of Services
- Barriers to Access and Engagement
- Case Series
- Collaboration and Referrals
- Use of Mental and Behavioral Health Services
- Workforce Capacity and Resources

Key Takeaways

Awareness of Community-Based Services



Bright Spots

- All stakeholders expressed interest in increasing their awareness of mental and behavioral health services and resources
- DoHS efforts are recognized and appreciated by providers and juvenile justice partners

Caregiver and Youth Awareness

- Findings were consistent across years and setting
- Were most familiar with:
 - Mental and behavioral health interventions (counseling, therapy)
 - Service provider organizations (e.g., Prestera)
- ~40% aware of Wraparound and Behavioral Support Services
- ~30% aware of crisis services (e.g., CMCRS, CCRL)

Provider Awareness

- Varied by provider type
 - Highest among mental health, behavioral health, and social service providers
 - >70% awareness for all services except ACT
 - Moderate awareness among probation officers
 - Awareness was lowest among healthcare providers and attorneys
- Statewide, providers were most familiar with 844-HELP4WV (**84%**) which is a **14% increase** since 2021

Increasing awareness is important because it affects perceived availability, referrals, access, and use

Youth and Caregivers

Would like service descriptions, information about eligibility criteria, and contact information for specific people

Providers & Judges

Would like a centralized online platform with service descriptions and up-to-date information about available providers

Key Takeaways

Use of Mental and Behavioral Health Services



Bright Spots

- Use of Wraparound, Behavioral Support Services, and crisis services helped delay RMHT, according to caregivers
- Youth and caregivers appreciated mental and behavioral health services and overall felt that they were working
 - When services “worked,” they improved caregiver-youth relationships, and promoted positivity, optimism, and perceived progress toward better overall health and wellbeing

Most Used Services and Interventions

Reported by youth and caregivers

- Counseling, therapy, and/or behavioral health services
- Medication management
- Juvenile justice-related services
- Screenings and assessments
- Transition services
- Hospital-based services
- Waiver services (CSED, IDD)

Contributors to Out-of-Home Placements

Reported by providers and juvenile justice partners

- Lack of community-based services
 - Need for more specialized services
 - Co-occurring disorders involving autism spectrum disorder and IDD, suicidality, aggressive behaviors
 - Workforce capacity and turnover
- Clinical necessity
- Home environments

Key Takeaways

Barriers to Access and Engagement

Top Barriers for Youth and Caregivers

Reported by youth and caregivers

- Difficulty reaching providers
- Difficulty navigating the system
 - DoHS caseworkers and staff, and probation officers were highly valued
- Perceived lack of available services
- Reluctance to engage
- Stigma

Additional Opportunities

Reported by youth and caregivers

- Different types of therapy (animal, trauma)
- Structured recreational activities, including peer mentorship
- Medication management
- Communication and rapport with providers
 - Consistent, individualized
- Transition services
- Family-based services

Key Takeaways

Workforce Capacity and Resources



Bright Spots

- More providers and organizations offered mental and behavioral health services, interventions, and resources in 2023 than in previous years
- Providers are interested in expanding their skills through additional trainings
 - Most feel “prepared” to work with youth with mental and behavioral health needs
- Providers are committed to their roles and organizations

Additional Areas for Opportunity

Reported by organizations, providers, and juvenile justice partners

- Hiring and retention
 - More qualified professionals who can conduct psychological evaluations
 - Individuals with graduate degrees that would qualify them for licensure
 - Psychiatrists and psychologists
 - Case workers and case managers
 - Staff who can work nights and weekends
- Competition with other mental and behavioral health agencies, and neighboring states

Key Takeaways

Collaboration and Referrals



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- Providers and organizations felt that DoHS policies encourage collaboration
- More providers and organizations helped coordinate youth's care than in previous years
 - Also reported additional capacity



Bright Spots

- More providers referred youth to HCBS over time
 - Biggest increase observed for CSED Waiver between 2022 and 2023
- MDTs, when available and working well, were valued by judges

Next Steps

Future Work

- Evaluation work will continue for 4 more years
- Focus will align with DoHS activities and priorities
- The voices of caregivers, youth, and service providers will continue to be represented in the evaluation

Thank you!

- Questions or feedback for the WVU Health Affairs Evaluation team can be sent to wvfamilies@hsc.wvu.edu