

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

Baseline Update

WV Kids Thrive Collaborative

August 9, 2022



## Agenda:

- Evaluation Framework
- Highlights from provider and community data collection
- Highlights from youth and caregiver data collection
- Ongoing Work

# Evaluation Framework

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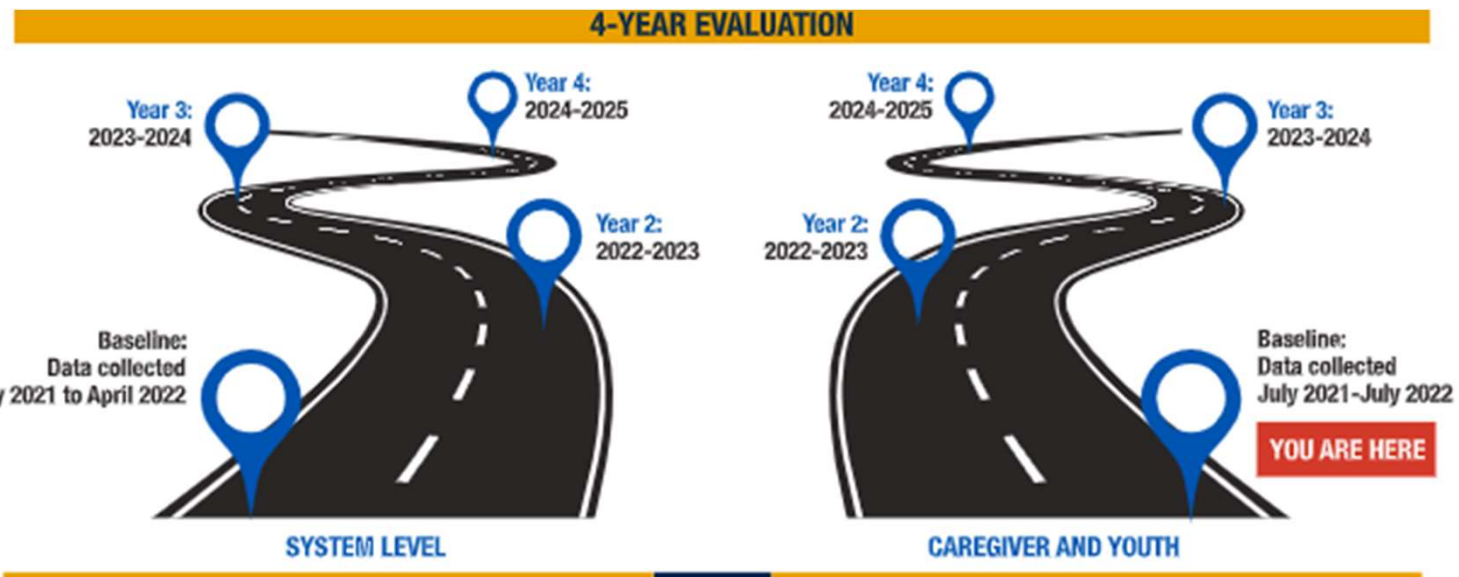
## Assessment Levels



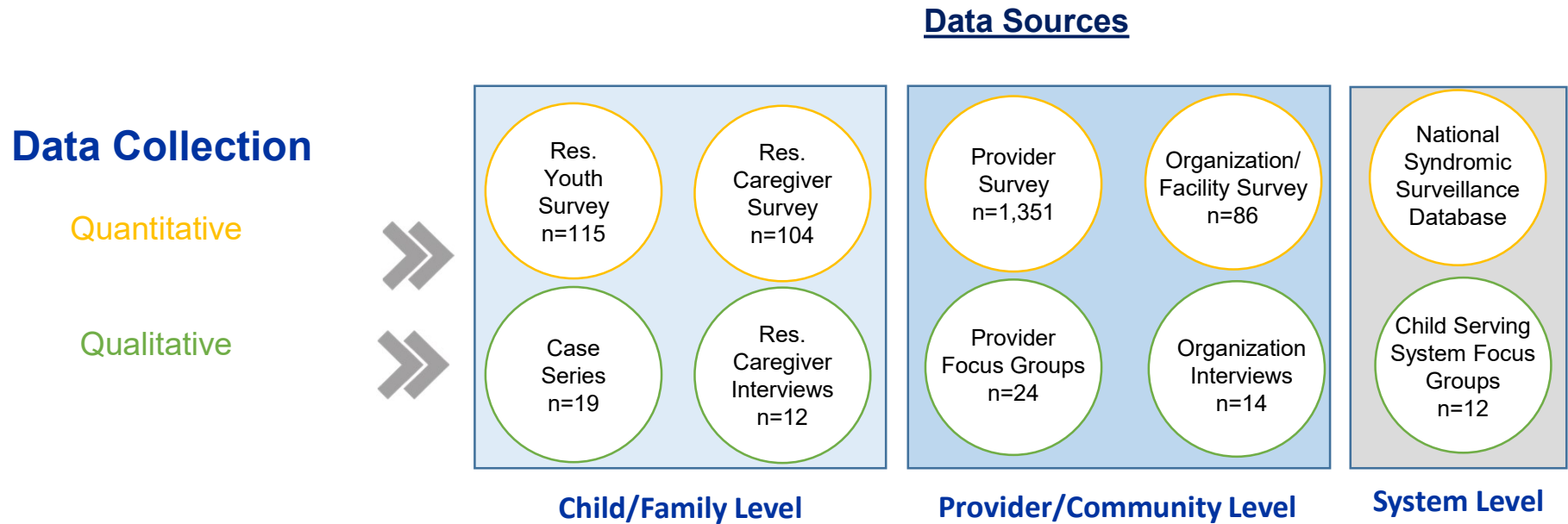
Complex Issue = Robust Mixed-Methods Approach

- Qualitative & quantitative data collection at each level

# Evaluation Roadmap



# Evaluation Data Sources (baseline)



# Highlights

(System and Provider/ Community Level)

# Positive Perception in the Community

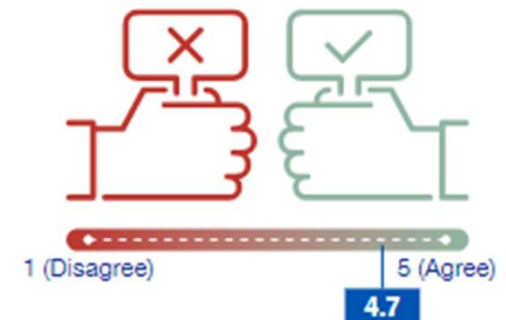
- Several providers have **acknowledged a shift in the prioritization** of service delivery from residential to community-based treatment
- The majority of health providers and professionals supporting children's mental health continuum of care ***believe all services being implemented are beneficial.***
- There is a clear preference among ***all*** evaluation participants for community-based services over residential treatment.



# Implementation Efforts Aligned w/ Needs

- Respondents want more of the services currently being expanded.
- Respondents report that the services being implemented do help to keep children in the home and community.
- Trainings being offered are working and helpful.

I have the necessary training to function in my current role:



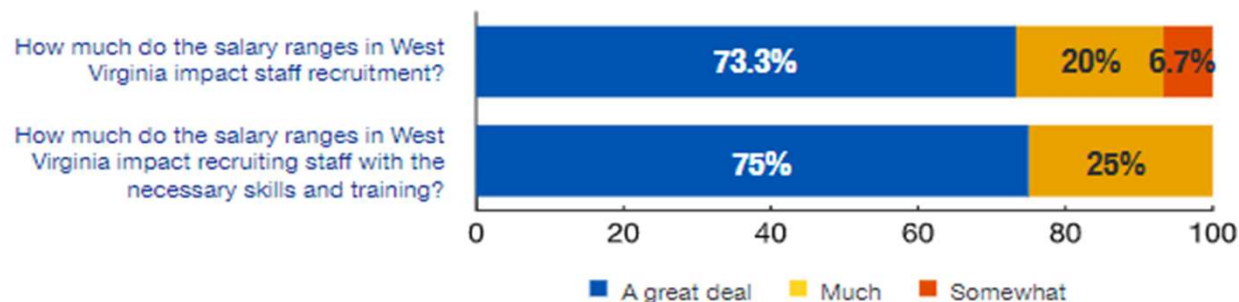
# West Virginia's Children's Mental Health Staffing Crisis

- Staffing shortages affect the quality and the quantity of services available.
- Providers reported difficulties with youth receiving individual therapy and counseling due to long wait times and lack of providers.
- There is a need for more staff to do assessments.
- 75% of survey respondents said that there were mental or behavioral health positions with particular capabilities, skillsets, or credentials that were hard to retain or fill.



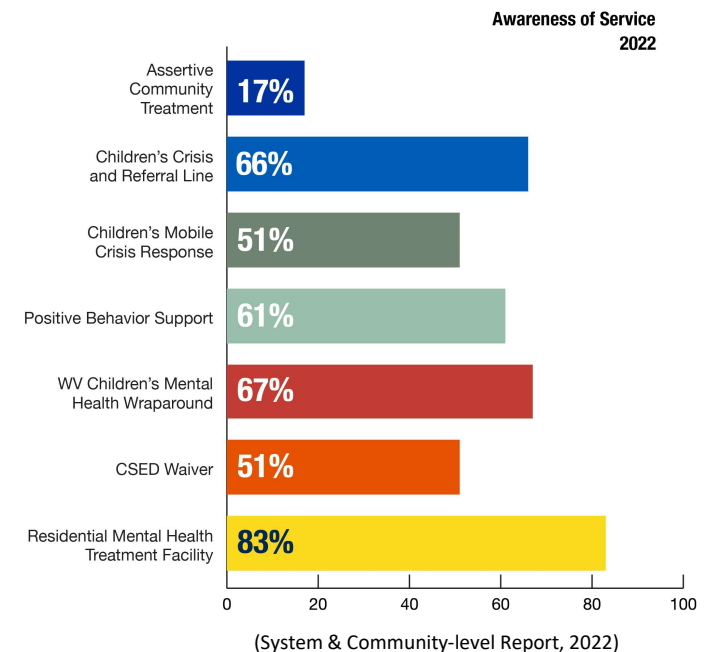
# There are Solutions to WV's Children's Mental Health Staffing Crisis

- Bring wages in line with those of neighboring state salaries.
- Simplify the state licensing process; reported as confusing & lengthy.
- Consider allowing for “years of experience” to qualify for licensure, instead of only formal educational attainment.



# More Educational Initiatives Could Impact Service Implementation

- Focus education and awareness activities on least known services: ACT & CSED.
- Target law enforcement officers for training on Mobile Crisis Response engagement.
- Implement more provider education and training programs for all services, prioritizing regions most in need.



# Address Service Gaps

- More intensive outpatient treatment is needed for children and youth to stay in their homes while receiving a high-level of care and support.
  - Feedback from providers indicated that mental health issues faced by youth are often "too severe" or "not severe enough" for the types of community-based services available in WV.
- Stepdown options for youth discharged from RMHTFs are needed.

An organizational leader  
said about RMHTF:



"We see frequently with the kids that are in DHHR custody not appropriate to be discharged to a foster home or shelter, something like that. But they need a residential placement."

# Highlights

(Youth and Caregiver Level - Residential)

# Demand for Services

- Caregivers and youth think that services are making a difference.
- Community-based services are valued, although there is a need for more of them.
- Areas of opportunity exist to expand awareness and use.

# Accessing Services

- Access to services is a challenge: for 46% of caregivers who said that they had challenges starting services, it was due to lack of services in their area.
- Nearly half of the caregivers surveyed reported that their understanding of how to access services improved over the last 12 months.
- Caregivers reported during interviews that there are significantly longer wait times for in-state residential treatment than for out-of-state placement.
- Caregivers and youth seemed aware of service and staffing shortages.



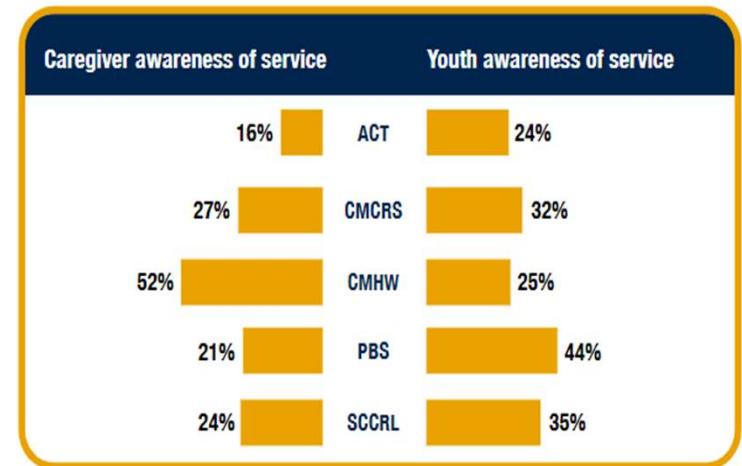
# Accessing Care Through Emergency Services

In response to youth needs, over the last 12 months:



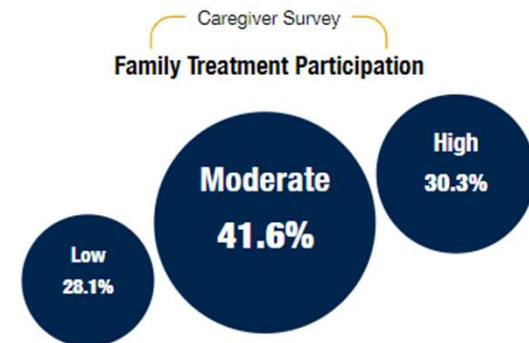
# Awareness of Services

- Caregivers and youth have varying levels of awareness of community-based mental health services.
- Awareness of community-based services was low.
- Mental health system terminology does not always resonate with caregivers and youth.



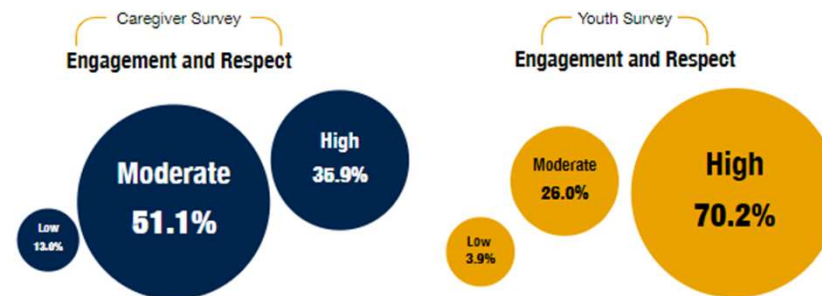
# Experiences Participating in Treatment

- Caregiver engagement is impacted by their experiences navigating the system, which they report as being too complicated.
- Caregivers want to be engaged and involved in treatment and discharge planning.
- Better communication and information sharing is desired.
- Distance from the family home to the service affected participation in treatment.



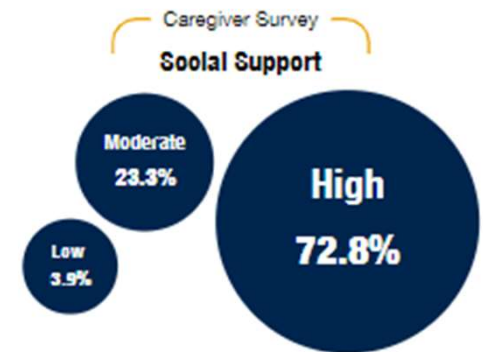
# Experiences with Providers and Staff

- Investments in cultural competence training are reflected in high levels of engagement and respect.
- Caregivers had mixed experiences whether the people helping their youth stuck by them no matter what.
- They also expressed mixed experiences regarding the care team informing them of care plan changes.



# Youth and Family Wellbeing

- Social supports are an important component of caregiver and family wellbeing.
- Findings suggest several bright spots of service participation, including more youth going to school and an increase in youth medication administration.



# Ongoing Work

# Future Data Collection

## Phase 3

(Aug 2022 – July 2023)

- Provider Survey
- Organization & Facility Survey
- Residential Surveys
  - Youth and Caregivers
- At-Risk Surveys
  - Youth and Caregivers
- At-risk Caregiver Interviews
- Case Series
  - Residential and At-risk
- Syndromic Data

Thank you



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