Roadmap of Services in Central Iowa to Support Children’s Mental Health

2013

*Helping Children Grow Strong Socially, Emotionally, and Developmentally*
Acknowledgements

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Visual Representation of Roadmap
Goal and vision of this roadmap...

This “roadmap” was created in the hopes of providing information about the many resources, supports, and services that are available to help best support the mental health and educational needs of children and their families.

The services that help support the healthy social and emotional development of children can be somewhat overwhelming and confusing at times.

This guide is not intended to be an exhaustive list of every available option nor is it intended to promote certain agencies within the community. It is to be used only as a guide and easy to reference source of information. Intended audiences include families, school personnel, mental health professionals, human service providers, and so on. We hope you find this guide useful for your specific needs...

For more information about specific services, agencies, and contact information that might provide the services outlined in this roadmap, please refer to:

The Visiting Nurse Services (VNS) Community Resource Directory


2-1-1 Information and Referral Search

2-1-1 provides free and confidential information and referral. Call 2-1-1 for help with food, housing, employment, health care, counseling and more. Learn more about your local 2-1-1 by looking it up here.

http://www.211.org/

Call 2-1-1 or from a cellphone (515) 246-6555
**Early Intervention**

*Early Access*

- Early ACCESS is a partnership between families with young children, birth to age three, and providers from the Departments of **Education**, **Public Health**, **Human Services**, and the **Child Health Specialty Clinics**.
- The purpose of this program is for families and staff to work together in identifying, coordinating and providing needed services and resources that will help the family assist their infant or toddler to grow and develop.
- The family and providers work together to identify and address specific family concerns and priorities as they relate to the child’s overall growth and development. In addition, broader family needs and concerns can be addressed by locating other supportive/resources services in the local community for the family and/or child. All services to the child are provided in the child’s natural environment including the home and other community settings where children of the same age without disabilities participate.
- Requirements and Eligibility: an infant or toddler under the age of three (birth to age three) who,
  - has a condition or disability that is known to have a high probability of later delays if early intervention services were not provided, OR
  - is already experiencing a 25% delay in one or more areas of growth or development.
- Services required to be provided to children and families include:
  - Service Coordination
  - Screenings, evaluation and assessments
  - "Individualized Family Service Plan" (IFSP)
  - Assistive Technology
  - Audiology
  - Family Training/Counseling
  - Health Services
  - Medical evaluations to determine eligibility
- 1-888-IAKIDS1

*Early Childhood Educational Support Services*

- **Early Head Start (0-3 years)**
  - Early Head Start (EHS) is a federally funded community-based program for low-income families with infants and toddlers and pregnant women. Its mission is simple: to promote healthy prenatal outcomes for
pregnant women, to enhance the development of very young children, and to promote healthy family functioning.


  - **Head Start**
    - Head Start is a federally funded comprehensive child development program that serves income eligible children ages 3 to 5 and their families.

  - **Universal Preschool (UPK)**
    - Universal preschool is a state funded program designed to provide voluntary, universal access to high-quality preschool education programs for the state's 4-year-olds.

  - **Early Childhood Special Education (ECSE)**
    - Early Childhood Special Education (ECSE) services are available for eligible children three to five years of age. ECSE staff assist in the identification, assessment and development of an individualized educational plan for eligible children. A continuum of services are available tailored to meet the individual needs of each student. See Special Education section for more information.

  - **Other Early Childhood Programming**
    - Other early childhood programming may be available through private organizations, child care centers, religious organizations, etc. Fees or costs to families may vary. Things to consider when choosing a preschool program: program accreditations (Quality Preschool Program Standards [QPPS], Iowa Early Learning Standards [IELS]), certification and education level of staff, instructional curriculums used, etc.

**Prevention Programming for Infant to Early Childhood-aged Children and their Families (Birth to 8 years)**

- Types of services provided by various organizations and agencies geared toward early intervention include:
  - Home visits
  - Case management
  - Prenatal, post-partum and parenting education
  - Child development screening and education
  - Perinatal depression screening and referral
  - Support groups
  - Referrals to community resources and support in accessing services
  - Parent involvement opportunities
  - Bilingual case managers and interpreters
  - Monitoring progress of well-child check-ups (medical)
• Nurturing a healthy bond and attachment between child and caregiver
• Facilitating access to child care and early education opportunities/preschool
• May assist with transportation
• Mental Health screening for caregivers

Helpful Links & Websites regarding Early Intervention
  o Early Childhood Iowa: www.earlychildhoodiowa.org
  o Iowa State Extension: https://www.extension.iastate.edu/families/child-care-education-families
  o Project LAUNCH: http://www.projectlaunchiowa.org/
  o First Five: http://www.idph.state.ia.us/1stfive/
  o Center on the Social and Emotional Foundations for Early Learning: http://csefel.vanderbilt.edu/
  o Technical Assistance Center on Social Emotional Intervention for Young Children: http://www.challengingbehavior.org/
  o Zero to Three: http://www.zerotothree.org/
  o National Association for the Education of Young Children (NAEYC): http://www.naeyc.org/

School Programs

Special Education—Individualized Education Program (IEP)
  o The Individuals with Disabilities Education Act (IDEA) was originally the Education for all Handicapped Children Act of 1975 (also commonly referred to as P.L. 94-142).
  o Creates an affirmative duty for schools to provide a free and appropriate public education including specialized instruction and related services to eligible students with disabilities
  o Applies ONLY to pre-school, elementary, and secondary education
  o Is a civil rights law that DOES create an entitlement
  o An IEP is a written statement for each child with a disability that is developed, reviewed, and revised at least annually by a team including educators, parents, the student whenever appropriate, and others who have knowledge or expertise needed for the development of the child’s special education program.
  o Entitlement for Special Education can be put into place for academics and/or behavior.
  o To become entitled for Special Education, a formalized problem solving process must be completed.
  o Special Education consists of specially designed instruction AND accommodations
Problem Solving Process

- A problem-solving model is a systematic approach that reviews student strengths and weaknesses, identifies evidence-based instructional interventions, frequently collects data to monitor student progress, and evaluates the effectiveness of interventions implemented with the student.
- Problem solving is a model that first solves student difficulties within general education classrooms.
- If problem-solving interventions are not successful in general education classrooms, the student’s response to general education interventions becomes the primary determinant of his or her need for special education evaluation and services (Marston, 2002; Reschly & Tilly, 1999)
- During the problem-solving process, a student is protected under IDEA as well

504 Plan

- Section 504 of The Rehabilitation Act of 1973
  - Prohibits discrimination on the basis of disability in any program or activity that receives federal money
  - Contains special rules that apply to preschool, elementary, and secondary education
  - Is a civil rights law that DOES NOT create an entitlement
- Guarantees a free appropriate public education (FAPE) to individuals that may not qualify for specialized instruction through special education, but may require appropriate accommodations within general education
- A physical or mental impairment that substantially limits one or more major life activities
- Contact school guidance counselor or administration for more information about 504 plans

School Counselor

- Professional school counselors are certified/licensed educators with a minimum of a master’s degree in school counseling and are uniquely qualified to address the developmental needs of all students through a comprehensive school counseling program addressing the academic, career and personal/social development of all students.
- Professional school counselors are employed in elementary, middle/junior high and high schools; in district supervisory positions; and counselor education positions.
- Provide school guidance curriculum, individual student planning, responsive services, and system support
- Contact school guidance counselor and/or school social worker to find out information regarding what types of student groups might be offered within the school setting (e.g. Grief/Loss, Social Skills, etc.)
School Social Worker

- Provide a vital link among the school, home and community.
- Most School Social Workers are involved in providing services to all students.
- Most provide direct services to students and their families including casework, group work and classroom presentations as well as providing crisis intervention and consultation and making referrals to community agencies.
- School Social Workers are part of the assessment process for special education students as well as often providing direct and indirect services to those students.
- School Social Workers consult with teachers and administrators and frequently participate on teams within the schools.
- School Social Workers in the State of Iowa hold a minimum of a master’s degree in social work and are licensed through the State of Iowa Board of Social Work.
- Contact school guidance counselor and/or school social worker to find out information regarding what types of student groups might be offered within the school setting (e.g. Grief/Loss, Social Skills, etc.)

School Based Mental Health Therapist

- School-based mental health services are outpatient mental health/early intervention services delivered in school to improve access to mental health services for children and families who would not otherwise access services.
- Therapists are master’s-level, licensed mental health professionals.
- School-based mental health services go beyond the direct delivery of outpatient mental health services. Therapists provide on-site consultation and training for school staff in the field of children’s mental health. They establish and maintain links between educators, mental health and human service resources, all of whom support the family and enhance the academic and functional development of children who face school failure due to mental health problems.

Early Childhood Mental Health Consultation (ECMHC)

- Early childhood mental health consultation (ECMHC) is provided by a master’s level professional consultant with mental health expertise working collaboratively with early childhood education staff, programs, and/or families.
- Provides specialized child mental health education and assistance to parents, educators, child care professionals and others who care for children or influence their social and emotional development.
• ECMHC improves the ability of staff, programs, and families to prevent, identify, treat, and reduce the effect of mental health problems among children.

**SUCCESS Case Manager (Des Moines Public School District)**

• SUCCESS is a strengths based program serving students and their families from age 3-21 years of age. SUCCESS is located in 19 elementary schools, 10 middle schools, five high schools, one alternative high school and 2 early childhood case managers.

• A SUCCESS case manager connects and builds relationships with students and families in order to provide intensive coordination of services in the areas of education, health, and human services.

• Students are identified and referred to the SUCCESS program based on the DMPS Early Indicator System (EIS) which identifies students who are at risk of dropping out of school due to poor attendance, lack of identification to school/behavior, poor or failing grades, and low achievement scores.

• Similar case management services may be available in other Iowa School Districts

• SUCCESS Case Managers hold a minimum of a bachelor’s degree.

**Parent and Educator Connection (PEC)**

• The Parent-Educator Connection (PEC) works to develop and sustain effective partnerships between families, educators, and community providers to promote success for all children and youth with disabilities.

• What PECs do for families and educators:
  - Link families and educators with needed services and resources
  - Assist parent-educator support groups
  - Network with other agencies and programs who work with parents and educators
  - Connect families and educators with similar needs and interests
  - Inform and encourage state and local educational groups to support home-school relationships
  - Conduct workshops on various subjects for families and educators
  - Provide books, pamphlets and video/audio tapes on issues regarding special education, parenting and disabilities

**Other School Liaisons (may include)**

• Juvenile Court School Liaison
  - Link between juvenile court and school setting
  - Can work preventatively with groups of students informally
  - Targeted toward delinquency versus mental health
Roadmap of Services in Iowa to Support Children’s Mental Health

Case Management Services

- Formal, trained support person who serves as a gatekeeper for access to community and mental health resources as well as funding
- Providers will have obtained a minimum of a bachelor’s degree
- Referrals/Access to case management services often come from Dept. of Human Services, School, or a Community Agency
- Types of case management can include: Targeted Case Management, Intensive Case Management, etc.
- Transitional Services – ages 16 and up

Foster & Adoptive Support

Iowa Foster & Adoptive Parents Association (IFAPA)

- The Iowa Foster and Adoptive Parents Association empowers, supports and advocates for foster, adoptive and kinship families in Iowa. IFAPA provides training, peer support and resources to promote safety, permanency and well-being for Iowa’s children.
- Supports provided include:
  - Eleven Peer Liaisons (licensed, trained foster parents, some adoptive parents) who provide peer support by phone, email, and attendance at IFAPA training, events, and support groups; provide information; clarification of policy and procedures; and mentoring to the families. They understand the child welfare system, the needs of the children who do not live at home, the issues facing foster/adoptive/kin families and are experiencing some of the challenges of parenting these children on a daily basis.
  - Two Resource Information Specialists help families successfully meet the challenges of parenting the children placed in their home through telephone support, educational materials, knowledge of available services, and connections to other families.
  - Support Groups – There are support groups that provide training, resources, and networking and support opportunities to families across the state. IFAPA’s website www.ifapa.org provides updated information on the groups, the times they meet and events and training.
  - Training for foster, adoptive, and kin families and providers of child welfare

IFAPA understands the children in care may have special emotional, cognitive, physical and behavioral needs that parents may have never encountered or may feel ill-prepared to handle. IFAPA offers a variety of continuing education trainings designed to help you deal with the daily needs of your child, work more effectively with the child’s birth parent(s) as well as feel more connected to other parents going
through a similar experience as your own. Training can be obtained through our 2 hour, 3 hour, and six hour trainings plus yearly state conference. These are listed in our training publications and are on the website. They are free of charge except for the conference.

- **Information resources – booklets, website, list-serves, weekly word, and newsletters** IFAPA produces the News and Views newsletter on a quarterly basis. Policy updates, peer support, training opportunities and resources relating to foster, adoptive and kinship families are core subjects of this newsletter. IFAPA also produces a Weekly Word newsletter that is sent electronically to all IFAPA members. This newsletter contains information regarding IFAPA’s programs, training and other information helpful to foster, adoptive and kinship families. The latest issues of these newsletters are available on the IFAPA website which is [www.ifapa.org](http://www.ifapa.org).
- IFAPA publishes a variety of resource materials (booklets) for Iowa’s foster, adoptive and kinship parents to assist them in understanding the Iowa Department of Human Services’ system, as well as to sharpen their foster/adoptive parenting skills. Some of the publications are:
  - Adoption Basics for Educators - How Adoption Impacts Children and How Educators Can Help
  - The Child Abuse Assessment - A Guide for Foster Parents
  - Completing the Circle - Uncovering, Discovering & Creating Connections for Your Foster & Adoptive Children
  - Confidentiality - A Guide for Foster Parents
  - Foster Parents and the Courts
  - Kinship Caretakers - How to Navigate Iowa's Child Welfare System
  - Navigating Iowa’s Adoption Subsidy Program
  - Raising Relatives’ Children
  - Resource Parents Partnering with Birth Parents to Benefit Children
  - Transracial Parenting in Foster Care and Adoption: Strengthening Your Bicultural Family

- Administers the Subsidized Adoption Respite where adoptive families who receive a subsidy can receive partial payment for 5 days of respite.

**IowaKidsNet**
- IowaKidsNet is a statewide collaboration of six Iowa agencies dedicated to children and families. IowaKidsNet currently has the responsibility to recruit, train, license, and support Iowa’s foster and adoptive parents. IowaKidsNet agencies also partner on other child welfare initiatives with the goal of helping all of Iowa’s children reach their potential for greatness.
- IowaKidsNet provides post-adoption support to Iowa’s foster adopt families with the goal to keep a child and family stable. Free post-adoption support services are available to any family currently receiving adoption subsidy from Iowa DHS. Post-adoption support includes:
  - Visiting your family at home
  - Developing service goals that meet your needs and help stabilize the child’s placement
- Provide behavior management plans and assistance
- Respond to crisis calls from your family
- Assist and support your family's relationship with a birth family or kin
- Advocate with schools, DHS and service providers for a child's treatment or needs
- Coordinate with licensing workers or providers connected to your family
- Services may be accessed by calling 1-800-243-0756

System & Family Navigation

Integrated Health Home (Utilizes the System of Care Model)
- An Integrated Health Home (IHH) is a team of professionals working together to provide whole-person, patient-centered, coordinated care for adults with a serious mental illness (SMI) and children with a serious emotional disturbance (SED). The IHH will be administered by the Medicaid Behavioral Health Care Managed Care Organization (Magellan Behavioral Care of Iowa) and provided by community-based IHHs.
  - IHHs expand Care Coordination by:
    - Providing an entire team of professionals to assist with comprehensive care coordination.
    - Includes the individual and family, as appropriate, as an equal partner in decision making.
    - Includes Peer Support and Family Support Services.
    - Provides care coordination using a whole-person, patient-centered approach which removes silos of care and supports an integrated system.
    - Assures effectiveness based on health care indicators and quality of life performance and outcome measures.
  - The System of Care Model is a broad, flexible array of effective services and supports for children and youth involved in multiple systems, which is organized into a coordinated network, integrates care planning and care management across multiple levels, is culturally and linguistically competent, builds meaningful partnerships with families, and with youth at service delivery, management and policy levels, has supportive management and policy infrastructure, and is data-driven.
  - Eligibility for IHHs:
    - Enrolled in Medicaid and
    - An adult with a Serious Mental Illness (SMI) – SMI includes a diagnosis of schizophrenia, schizoaffective disorder, bipolar disorder, major depression, or other serious mental health conditions that cause significant impairment in daily functioning or;
• **A child or youth with a Serious Emotional Disturbance (SED)** – SED includes a diagnosable mental, behavioral or emotional disorder of sufficient duration to meet diagnostic criteria specified within the most current Diagnostic and Statistical Manual of mental disorders (DSM) that results in a functional impairment.

**Care Coordination**
- Care coordination is a process that facilitates the linkage of children and their families with appropriate services and resources in a coordinated effort to achieve good mental and physical health. Care coordinators meet with families, providers, and supports, to ensure the family voice is heard and the team is moving toward the goals the family has set. Care coordinators assist with referrals to helpful supports and services and assist families with navigating the system.

**Family Peer Support/Navigation**
- Family Peer Support and Navigation provides assistance to families who have children with multiple or intensive needs. The Family Peer Support Specialist helps the family navigate the complex systems of care by providing facilitation, ongoing support, and follow-up.

**Family 2 Family (F2F) Support Person**
- An inclusive term describing an experienced family member of a person who has a disability, special health care need, or mental health condition, or is a person with a disability, special health care need, or mental health condition that has completed training which meets recognized standards and competencies.
- These persons have completed one or more certification processes along a continuum of varying skill sets. For example, a family support person who wishes to be matched with referred family members for supports such as moral support, provision of basic information or joint support group attendance/leadership.
- Accomplishes different competency training than a family support person who provides services such as assistance with waiver applications, understanding care coordination, or navigation services.
- Often, family support persons begin with individual support or community support competencies and progress to systems level competencies. The term “family support person” as used in this document is relevant to, inclusive of and interchangeable with, all family support persons with any skill set relevant to Family-to-Family support.
- Some frequently used synonyms from various skill sets include “Family Navigator”, “Professional Family Person”, “Professional Parent”, “Family Mentor”, “Parent Mentor”, “Support Family Member”, and “Support Parent”.

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*Roadmap of Services in Iowa to Support Children’s Mental Health*
Affordable Care Act (ACA) Navigator
- Affordable Care Act (ACA) Navigator (Nationally the Navigators will not be identified until Oct. 2013)
- Will assess any enrollee with a grievance, complaint, or question regarding their health plan, coverage, or a determination under an insurance plan.
- Maintain expertise in eligibility, enrolment and program specifications (will have 30 hour training by the federal government) and conduct public education activities to raise awareness about coverage.

Wraparound Meetings
- Wraparound meetings are an intensive, individualized care planning and management process typically associated with intensive care coordination through a System of Care. The process aims to achieve positive outcomes by providing a structured, creative and individualized team planning process that, compared to traditional treatment planning, results in plans that are more effective and more relevant to the child and family. The wraparound plans tend to be more holistic than traditional care plans in that they are designed to meet the identified needs of caregivers and siblings and to address a range of life areas.

- The values of wraparound are consistent with system of care in that it begins from the principle of “voice and choice,” that the perspectives of the family, including the child or youth, must be given primary importance during all phases and activities of wraparound. The values also require that the planning process, as well as services and supports should be individualized, family driven, culturally competent, and community based. The process should increase the “natural support” available to a family by strengthening interpersonal relationships and utilizing other resources that are available in the family’s network of social and community relationships. The wraparound process should also be “strengths based,” including activities that purposefully help the child and family to recognize, utilize, and build talents, assets, and positive capacities.

Family Team Meetings (DHS must be involved to access)
- A Family Team Meeting is a voluntary process to support the family, however, in most cases, the family has been referred by a DHS caseworker as eligible for a family team meeting. Meetings are for the family where the family is an active partner in the shared decision making process and is designed to engage and support the family in case planning, case management, and case closure process. The family gets to decide whom they would like to have invited to the meeting. There may be people who must be invited because of legal reasons and are necessary to have input from if the family is involved with them such as DHS Child Protective Services Social Workers/Case Managers. A facilitator will be present to ensure people stay focused on the family’s goals and will write up what the team talks about and decides. The
family gets a voice in setting the goals and purpose of the meeting; however, there may be certain non-negotiables that DHS may require to be addressed.

**Respite Services**

- Provided for a temporary (short-term) period; services give relief to the usual caregiver and provide all the necessary care that a usual caregiver would provide during that period
- Shall not be provided during caregiver's hours of employment
- Formal respite is available through the State of Iowa Waiver Programs
- Adoption Respite can be obtained for adoptive families for their subsidized adopted children. Respite care provides adoptive parents with a break from the constant demands of caring for their special needs adopted child (children). It may be used for planned activities or emergency situations.
- Informal Respite Options—Informal respite can also be provided by friends, neighbors, relatives, etc.

**Waiver Services (DHS)**

**Access waiver information through the local Dept. of Human Services (DHS) or the online website: http://www.ime.state.ia.us/HCBS/help_ownhome.html; when applying for a waiver make sure to update personal contact information with DHS, due to the requirement to respond within 30 days of being contacted.**

**Intellectual Disability Waiver (ID)**

- Provides service funding and individualized supports to maintain those diagnosed with an intellectual disability by a psychologist or psychiatrist in their own homes or communities who would otherwise require care in a medical institution
- Includes respite, SCL, home and vehicle modifications, consumer directed attendant care (assistance to the member with self-care skills—dressing, hygiene, employment support, cooking, eating, etc.), consumer choice options (allotted amount of money for family to determine which services to utilize)

**Children’s Mental Health Waiver (CMH)**

- Exists to meet the needs of children under 18 with serious emotional disturbance (SED). Many children with SEDs must leave their homes to seek support in a medical institution. The parents of eligible children (waive)
using services in an institution and choose instead to use services and individual supports to keep children in their own home. The intent of the CMH waiver is to identify services and supports that are not available through other mental health programs or services. The CMH waiver offers a range of services that include: Environmental Modifications; Family and Community Support Services; In-home Therapy; Respite Care Services

**Brain Injury Waiver**
- Provides service funding and individualized supports to maintain eligible members in their own homes or communities who would otherwise require care in a medical institution.
- Eligibility—Determined to have a brain injury diagnosis included in a definitive list identified in the Iowa Administrative Code, Chp. 441—83.81; IME Medical Services will confirm the Brain Injury Diagnosis

**Health and Disability Waiver**
- Provides service funding and individualized supports to maintain eligible members in their own homes or communities who would otherwise require care in a medical institution.
- Eligibility—Determined blind or disabled by the disability determination services, determined by IME medical services to need nursing facility, skilled nursing facility, or medical facility (Children that are on the Autism Spectrum may typically qualify for this waiver)

**Associated Services Under Waivers**

**Family Community services**
- Support the child and the child’s family by helping them develop and implement strategies and interventions that will result in a reduction of stress, depression and will increase a child and family's social and emotional strength

**Supported Community Living & Respite**
- **Supported Community Living (SCL)**
  - Provided to eligible persons to develop a support system and learn skills that will enable them to live, learn, work and socialize in the
community. Services are individualized, and need and abilities-focused

- **Respite**
  - Provided for a temporary (short-term) period; services give relief to the usual caregiver and provide all the necessary care that a usual caregiver would provide during that period
  - Shall not be provided during caregiver’s hours of employment
  - Formal respite is available through the State of Iowa Waiver Programs

**In-Home Therapy**

- Skilled therapeutic services to the child and family. These services are to be provided in the child’s home. Services will increase the child and family’s ability to cope with effects of serious emotional disturbance on the family relationships. The goal of in-home family therapy is to maintain a cohesive family unit. The service must support the family in developing coping strategies that will enable the child to continue living within the home

**Environmental Modifications**

- Adaptive devices and therapeutic resources; that includes items installed or used within the child’s home that address specific documented health, mental health, or safety concerns. Such as smoke alarms, window/door alarms, motion sensors, fencing

**Habilitation Services**

- Habilitation Services is a program to provide Home and Community Based Services (HCBS) for Iowans with the functional impairments typically associated with chronic mental illnesses. The federal Deficit Reduction Act of 2005 permitted states to offer home- and community-based services (HCBS) as a state plan option effective January 1, 2007. Using this option, the Department worked with the Centers for Medicare and Medicaid services to design a program to meet the service needs of Iowans with the functional limitations typically associated with chronic mental illness.

- Habilitation Services are designed to assist participants in acquiring, retaining and improving the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. Services available through the program include:
  - Case Management - Provides service coordination and monitoring. Available as a Habilitation service when the individual does not
otherwise qualify for targeted case management (Iowa Plan or IME funded).

- **Home-Based Habilitation** - Services provided in the person's home and community. Typical examples would be assistance with medication management, budgeting, grocery shopping, personal hygiene skills, etc.

- **Day Habilitation** - Services that are usually provided in a day program setting outside the home. Focuses on areas such as social skills, communication skills, behavior management, etc.

- **Prevocational Services** - Can be provided in a variety of settings, and focus on developing generalized skills that prepare a person for employment. Typical examples include attendance, safety skills, following directions, and staying on task.

- **Supported Employment** - Assists in obtaining and keeping a job in the community. Assists in placing the individual in a job in a regular work setting with persons without disabilities at minimum wage or higher, and provides support to maintain the job. Typical examples would include: skills assessments, consultation with the employer, job coaching, and behavior management.

### Supplemental Security Income (SSI)

- Only individuals who have a disability and meet medical criteria may qualify for benefits under the program.
- In most states, beneficiaries will automatically be eligible for Medicaid.
- SSI disability benefits are payable to:
  - individuals age 65 or older
  - adults who are disabled or blind
  - children who are disabled or blind
- Eligibility requirements:
  - have limited income and resources meet the living arrangement requirements
  - a U.S. citizen or national, or in one of certain categories of aliens.
  - The monthly payment varies up to the maximum federal benefit rate, which may be supplemented by the state.
- Applications can be completed online or at:
  - 1-800-772-1213
  - Riverpoint OFC Complex
    455 SW 5th STE F
    Des Moines, IA 50309

**hours of operation are 9:00am to 3:00pm, Mon. Tue., Thur., Fri., and 9:00am to 12:00pm Wed. Visitors must have a valid picture ID to gain entrance**
Mental Health Therapy & Services

Overall Definition

- Therapeutic interaction or treatment contracted between a trained mental health professional and a person/individual, family, couple, or group
- Problems addressed are psychological in nature
- Practitioners include those who have obtained a minimum of a master’s degree and should be licensed.
- Within the first few sessions, the following areas should be covered with the therapist:
  - Completed a comprehensive intake to better understand past history, current functioning, and a discussion about diagnoses
  - A treatment plan should be developed with you, discussing treatment goals, a crisis plan, and sharing information about other helpful resources
  - A discharge plan should be completed as therapy should not continue indefinitely
  - Most problems or concerns may take a longer time (more than 3 sessions) to change based on how complex the problem is. Change does not just occur in an office setting
  - It is helpful to discuss concerns about therapy with the therapist and try to determine if this partnership will be a good fit for you/your family
  - Options to seek another provider but beware of “doctor/therapist shopping”
- A mental health professional/therapist may make a referral for a:
  - Psychiatric services and evaluation (see additional notes below under Assessment)
    - A psychiatric evaluation is not mental health therapy
  - Psychological services and evaluation (see additional notes below under Assessment)
    - A psychological evaluation is not mental health therapy

**Research supports that therapy services paired with psychiatric and/or psychological services are often most effective

Specialty Areas

- Specialty areas of practice may vary depending upon the training and experience of the mental health professional
- Specialty areas include: Trauma, Grief/Loss, Early Childhood (0-5 years), Abuse, Attachment Disorders, ADHD, Anxiety Disorders, Mood Disorders,
Eating Disorders, Family and Parenting Issues, Behavioral Concerns, Adoption Issues, Foster Care, etc.

Assessment

Psychiatric Assessment/Evaluation
- Therapeutic assessment provided by a psychiatrist or psychiatric nurse practitioner to evaluate psychopharmacological interventions to determine what medications could be potentially effective and monitor on-going usage
- A psychiatrist is a medical doctor who specializes in preventing, diagnosing, and treating mental disorders; can prescribe medication
- If you are working with a psychiatrist, a lot of the treatment may be focused on medication management. Sometimes medication alone is enough to treat the mental illness. Sometimes a combination of medication and psychotherapy or counseling is needed
- A psychiatrist has more specialized training and experience in treating mental health disorders in comparison to a general practitioner/ family doctor/primary care physician

Psychological Assessment/Evaluation
- Completed by a licensed psychologist
- A psychologist has a doctoral degree (PhD, PsyD, or EdD) or master's degree in psychology
- Licensed psychologists are qualified to do counseling and psychotherapy, provide treatment for mental disorders, and complete psychological assessments (psychologists cannot prescribe medication—psychologists are not medical doctors)
- Both formal and informal assessments
- May include standardized assessment tools that may cover intellectual, adaptive behavior, and emotional functioning
- Differs from a mental health evaluation

Substance Abuse Assessment/Evaluation
- Provide assessments by certified substance abuse counselors typically an hour in length
- With client permission and when appropriate, significant others and/or family members are invited to participate in the assessment
- All information shared during the assessment is confidential
- Referrals to substance abuse treatment and/or other services that would be helpful to client are provided, based on individual circumstances and needs
Behavioral Health Intervention Services (BHIS)—Formerly Remedial Services

- Supportive, directive and teaching interventions provided in a community-based or residential group care environment designed to improve the individual’s level of functioning (child and adult) as it relates to a mental illness, with a primary goal of assisting the individual and his or her family to learn age-appropriate skills to manage their behavior, and retain self-control
- Often coincides with outpatient therapy services
- Must be eligible for Title 19/Medicaid
- Providers include those who have obtained a minimum of a bachelor’s degree
- Referral must be made by a licensed mental health professional
- Improves skills such as anger management and conflict resolution, coping, social skills, communication, and emotions
  - BHIS is not mentoring, tutoring, babysitting, tracking, hygiene (self-care), visit supervision
- Family involvement is required
- Voluntary service
- Services are time limited based on need

Group Foster Care

Children’s Residential Group Foster Care

- Group care is a very broad term that encompasses many different forms of residentially-based placement and treatment services provided to children and youth with a wide range of needs. It is a placement option or service at the intersect of the three major child serving systems - child welfare, mental health and juvenile justice.

Mobile Crisis Response Team (MCRT) & Hospitalization

Mobile Crisis Response Team (MCRT)

- The Mobile Crisis Response Team (MCRT) provides short term crisis management for children, youth, and adults experiencing a mental health crisis. A mental health crisis can be defined as the onset of an emotional disturbance or situational distress involving a sudden breakdown of an individual's ability to cope.
MCRT is a collaborative effort where registered psychiatric nurses and mental health professionals are dispatched at the request of law enforcement to complete assessments and stabilize situations with on-site crisis management, provide one time medication management and referral for services, and assist with an emergency room mental health evaluation; if necessary.

- **How to Access MCRT**
  - Tell the person answering the call clearly what the situation is and that it is a mental health crisis.
  - If you have a mental health crisis and are in need of emergency assistance, call 911.
  - If you would like to speak with a MCRT member regarding a non-emergent issue, please call Des Moines Dispatch at (515) 283-4811 and ask to speak with a MCRT member.

- **MCRT goal** is to stabilize the student/child in his or her environment.
- If hospitalization is necessary, MCRT will generally call the hospital to inform them of the transport and give general information over the phone. MCRT may also act as a liaison at the hospital to assist with the evaluation process.

**Types of hospitalization**

- **Inpatient Hospitalization**—This level of care offers intensive treatment in a 24-hour, secure care environment.
- **Partial Hospitalization**—This is a structured therapeutic setting for children and adolescents, who attend a daytime treatment program and go home every evening.
- Admission to the hospital will be determined by the psychiatrist and qualified hospital staff.

**Psychiatric Mental Institute for Children (PMIC)**

- **Psychiatric Medical Institutions for Children**
- **Residential treatment program** that serves youth under the age of 21 with a diagnosis of mental illness or substance abuse.
- **PMIC programs** often provide intensive treatment for children with a serious emotional disturbance that makes them unable to function in their homes, schools and communities.
- **Eligibility** often requires an:
  - Independent team including a physician with competence diagnosing and treating a mental illness preferably in child psychiatry, certifies that community ambulatory care resources do not meet the recipients treatment needs, that the psychiatric condition requires in-patient services, services can reasonably be
expected to improve the recipient’s condition or prevent further regression
○ 12 in state PMIC facilities in Iowa

**Primary Care Physician (PCP)**
○ Medical doctor typically found in a medical clinic with a broad understanding of medical issues but likely does NOT specialize in providing psychiatric services (i.e. mental health diagnoses and services).

**Qualified Community Health Centers**
○ For more than 45 years, HRSA-supported health centers have provided comprehensive, culturally competent, quality primary health care services to medically underserved communities and vulnerable populations.
○ Health centers are community-based and patient-directed organizations that serve populations with limited access to health care.
○ Health Center Program Fundamentals
  ● Located in or serve a high need community (designated Medically Underserved Area or Population). [Find MUAs and MUPs](#)
  ● Governed by a community board composed of a majority (51% or more) of health center patients who represent the population served. [More about health center governance](#)
  ● Provide comprehensive primary health care services as well as supportive services (education, translation and transportation, etc.) that promote access to health care.
  ● Provide services available to all with fees adjusted based on ability to pay.
  ● Meet other performance and accountability requirements regarding administrative, clinical, and financial operations.
○ Types of Health Centers
  ● Grant-Supported Federally Qualified Health Centers are public and private non-profit health care organizations that meet certain criteria under the Medicare and Medicaid Programs (respectively, Sections 1861(aa)(4) and 1905(l)(2)(B) of the Social Security Act and receive funds under the Health Center Program (Section 330 of the Public Health Service Act).
  ● Non-grant-supported Health Centers are health centers that have been identified by HRSA and certified by the Centers for Medicare and Medicaid Services as meeting the definition of “health center”
under Section 330 of the PHS Act, although they do not receive grant funding under Section 330. They are referred to as "look-alikes."

- Outpatient health programs/facilities operated by tribal organizations (under the Indian Self-Determination Act, P.L. 96-638) or urban Indian organizations (under the Indian Health Care Improvement Act, P.L. 94-437).

**Children’s Support Groups**
- Formal and Informal
- May include a variety of topics (foster care, grief, psychoeducation, etc.)
- Can be facilitated by a variety of providers with various training and/or certifications
- Differs from group therapy—therapeutic group therapy would be provided by a licensed mental health practitioner
- For a list of providers that often provide these groups, please contact your school social worker/guidance counselor/administrator, your mental health provider, or refer to the links to the community directories above.

**Parent Education/Support Groups/Advocacy**
- Formal and Informal
- May include a variety of topics (Parent Education, Foster Care, Adoption, Special Health Care Needs, Serious Emotional Disturbance, etc.)
- Can be facilitated by a variety of providers with various training and/or certifications
- Differs from group therapy—therapeutic group therapy would be provided by a licensed mental health practitioner
- May meet one time or more
- For a list of providers that often provide these groups, please contact your school social worker/guidance counselor/administrator, your mental health provider, or refer to the links to the community directories above.

**Ask Resource Center (ASK)**
- Access for Special Kids (ASK) Resource Center is a training, information and advocacy center for children and adults with disabilities and their families throughout the state of Iowa. Through various projects and partnerships, ASK Resource Center provides a broad range of training, advocacy, support, referral and direct-services coordination related to the needs of persons with all types of disabilities.
- A single contact of ASK will provide individuals and families a direct link to the most appropriate services and supports to meet their needs regarding
legal matters, special education, health care coordination, mentoring opportunities, and more. ASK Resource Center is there for you - just ASK

- www.askresource.org

**Families of Iowa Network for Disabilities (FIND)**

- FIND (Families of Iowa Network for Disabilities) is an interactive social networking site designed to give families of children and youth with disabilities a new way to make connections.
- [www.findfamilies.org](http://www.findfamilies.org)

**Mentoring Services**

- Mentoring services for children/youth often consist of adult volunteers who dedicate their time to empower youth to succeed by establishing trusting relationships.
- Mentors can have a significant impact on youth by providing guidance and developing consistent, long-term friendships.
- For a list of providers that often provide these groups, please contact your school social worker/guidance counselor/administrator, your mental health provider, or refer to the links to the community directories above.

**National Alliance on Mental Illness (NAMI)**

- **NAMI** is the National Alliance on Mental Illness, the nation’s largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. NAMI advocates for access to services, treatment, supports and research and is steadfast in its commitment to raise awareness and build a community for hope for all of those in need.
- NAMI is the foundation for hundreds of NAMI State Organizations, NAMI Affiliates and volunteer leaders who work in local communities across the country to raise awareness and provide essential and free education, advocacy and support group programs.

**Disabilities & Developmental Assessment (e.g. Iowa City CDD & Blank Developmental Center)**

- For infants and children with developmental, learning, or behavioral problems, a team can evaluate, diagnosis and care for the child; taking a close look at the medical and psychosocial aspects of developmental and
Roadmap of Services in Iowa to Support Children’s Mental Health

behavioral problems to offer appropriate intervention and treatment options.

- Provides early diagnosis and comprehensive treatment for children with developmental disabilities.
- Specially trained multidisciplinary team of medical specialists and therapists will develop a unique, personalized program for each child.
  - Speech and Language Pathologist (SLP); Occupational Therapy (OT); Social Worker; Etc.
- An essential feature of the Developmental Center is a family-centered approach in which diagnosis and treatment plans are individualized for each child and family.

**Informal Supports**

- Important to remember to utilize informal supports if available (typically anyone who is trustworthy and empowers family and/or individual) such as:
  - Family, Friends, Church, School, Youth Group Leader, Coaches, Neighbors, etc.
    - Who do you feel supported by?
    - What is their role in your life?

**Delinquency Concerns—Juvenile Court (intake officer decides program)**

*Informal—Diversion Programs; no judge; Juvenile Court Officer—Not Adjudicated*

- Court Based Intervention (12 yrs & older)—case manager 1-3 months
- Early Services Project (12 yrs & under)
- Field Unit (informal & formal cases)

*Formal—appear before a judge and become adjudicate; tracking and mentoring*

- Juvenile Court School Liaison
- School Resource Officer (SRO)

**Crisis, Emergency, Respite & Shelter Services**

- Emergency Shelter or Respite is temporary care for children during times of crisis or family emergency.
- Respite may also be a resource for families faced with overwhelming stress before the situation becomes unmanageable or abusive.
Crisis, Emergency, and Shelter services can be utilized by youth and/or their families when facing situations in which the immediate safety and/or shelter of the individual is endangered. Shelter services can help provide safety and support during crisis situations. Possible reasons a person may seek shelter include:

- Youth without a safe place to spend the night
- Risk of physical harm
- Homelessness

This list is not exhaustive, but local agencies that often provide Crisis, Emergency, Respite & Shelter Services include (contact agency directly for more information):

- **Youth Emergency Services & Shelter (YESS)—Voluntary**
  - Care is available 24-hours a day, seven days a week at Youth Emergency Services & Shelter (YESS). Shelter and respite care offers children safety and support in a supervised and structured environment. During the time the child is staying at YESS, families have the opportunity to have a brief time out during a difficult situation, resolve a crisis, work through problems and/or get additional assistance when needed.
  - 515-282-YESS (9377)
  - 24-hour crisis line

**Adult Mental Health Services**

*Overall Definition*

- One in four adult Americans suffers from a diagnosable mental health illness every year.
- Outpatient mental health services—typically includes individual, couple and group counseling as well as psychiatric assessments and medication management. Services are most often provided by an experienced team of psychiatrists, therapists, nurse practitioners and so on.
- A wide range of mental health services are available for adults based upon need, similar to the continuum of services offered for youth. Service types include:
  - Outpatient
  - Inpatient
  - Residential
  - Case Management & Service Coordination
  - Substance Abuse Treatment
  - Etc.

**IowaCare (IME)**
Roadmap of Services in Iowa to Support Children’s Mental Health

- IowaCare is a health care program that provides limited services for people who are not otherwise eligible for Medicaid. The purpose of IowaCare is to provide some health care coverage to people who would otherwise have no coverage.

- IowaCare covers adults ages 19 through 64; and
  - Whose family income is no more than 200% of the federal poverty level
  - Who are not eligible for Medicaid and/or Medicare
  - Who are uninsured or whose health insurance does not cover the medical condition for which they need treatment
  - Who are U.S. citizens or lawful permanent residents

- Services covered include:
  - Inpatient & outpatient hospital services
  - Doctor & Advanced Registered Nurse Practitioner services
  - Limited prescription drug services
  - Limited dental services
  - Routine preventative medical examinations
  - Services to help you quit smoking