

## DCS/CMHC Regional Roundtable Discussions

August 24, 2016

Rick Crawley, CEO, Wabash Valley Alliance Sam Criss, Deputy Director of Child Welfare Services, DCS

# Purpose

- Enhance communication and collaboration between CMHCs and DCS
- Foster opportunities for creative planning/problem solving
- Review issues hindering the provision of services to clients in need
- Identify 2-3 themes to focus on during your discussion
- Document tangible next steps and timelines
- Provide feedback to the CMHC/DCS steering committee
- Give the opportunity for cross-regional sharing of successes and barriers



#### CMHC/DCS Steering Committee

- CMHC/DCS Steering Committee
  - -History: First meeting held 5/11/2010 and each month since
  - -Goal: To ensure that CMHCs and DCS are resolving shared issues and barriers
  - -Introduction of Members



#### **CMHC Survey**

- In November and December 2015, 25
   CMHCs were interviewed by Jeff Jamar,
   Behavioral Health Consultant for Children and families Futures
- 10 overarching themes identified and communicated to DCS and CMHC Leadership



#### Cross-Training of Systems

A desire for on-going training for both DCS and CMHC staff to improve the understanding of both systems and philosophies of service. Without a shared understanding of the two systems, the effectiveness of care for both adults and their children may be diminished.



#### Improved Sharing of Referral Information

Improved sharing of referral information from DCS to the CMHCs can help minimize inadequate assessments, lost time locating clients and difficulty in determining case details to appropriately identify service goals.



#### Improved Communication Efforts Between Child Welfare and Treatment Staff

Improved communication between local/regional DCS and CMHC leadership would lead to increased opportunities for creative planning and problem solving.

It appeared from the survey that those DCS counties and/or regions that had standing meetings, had better working relationships with their providers.



#### Medication Assisted Treatment (MAT)

The survey indicated that there was some opposition to MAT in several CMHCs, some DCS offices, and in some courts.

While MAT is neither desired nor appropriate with all SUD clients, more discussion is needed to ensure clients receive individualized treatment based on needs.



### Variation in Service Delivery from County to County

The variation in service delivery throughout the state presents substantial operational challenges for everyone involved in these systems.



#### Peer Mentors

The substance abuse recovery community has a long history of utilizing individuals in recovery to help others establish and maintain recovery. Twelve-step programs have been an invaluable resource for countless individuals.

The survey indicated that there are few CMHCs that have incorporated practice into their array of services. Stated reasons included difficulty in recruitment, training restrictions/requirements, and reimbursement.



#### Lack of Medical and Social Detox

CMHCs indicated that to get inpatient medical detox the medical necessity protocol required the clients to be in jeopardy of dying in the detox process. Few clients will meet this requirement, and therefore few get this service.

Nonetheless detox is one of the initial and almost insurmountable steps in recovery for some people.

\*Does the recently passed rules regarding Medicaid reimbursement for detox impact this issue?



#### SUD Treatment Specific to Youth

Most CMHCs did not have SUD treatment specific to youth. A number reported that they had designed programs, but received virtually no referrals for them, and therefore discontinued them.

CMHC's indicated that DCS does not usually refer for SUD assessment for youth.



Shortage of Trained and Qualified Behavioral Health Professionals
And
Transportation

These two themes are being reviewed by the DCS/CMHC Workgroup



## Next Steps

- Report-Out Document
- Due to many CMHC's in one region, we ask that the DCS Regional Manager, or their designee report out.
- 2-3 themes to focus on at the regional level
- 1 item you recommend DCS/CMHC steering committee work to address
- Steering Committee directory
- Time allotted for discussion: 1.5 hours

