

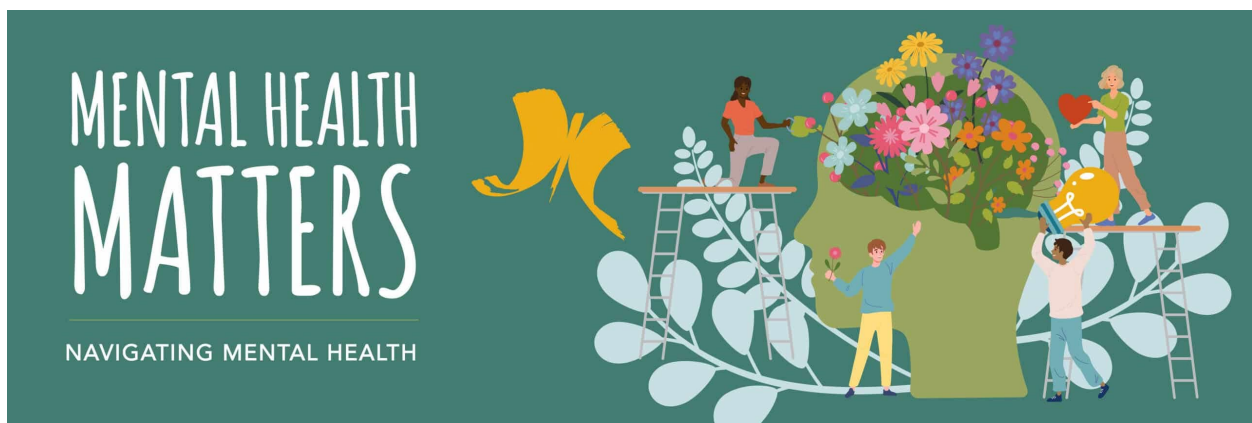
Local Children's Roundtable Guide **Strengthening the Availability and Delivery of** **Mental Health Services and Treatment for Children and Families**

Purpose

In 2023, the Pennsylvania State Roundtable convened the Mental Health Workgroup to examine the impact of mental health on Pennsylvania's child welfare and dependency systems. The Workgroup was also charged with analyzing and developing strategies to improve access to mental health services and treatment for said children and families. Workgroup members include experienced court, child welfare, mental health, and state system professionals.

This Local Children's Roundtable Guide is intended to assist each Pennsylvania Local Children's Roundtable (LCRT) as it begins or continues to collaborate with the mental health system on issues impacting services and treatment for children and families at the local level.

The LCRT allows local system leaders to discuss, learn about, and plan solutions for issues impacting child welfare and dependent children. Counties that want improved mental health collaboration can utilize the guide below, which was designed to be flexible enough for counties to determine where they are in the process and begin implementation from that point. The flexibility of the guide also allows counties to revisit steps as they review and refine their work. Finally, due to the uniqueness of each county's LCRT meeting schedule, some counties may be able to complete several steps in one meeting.

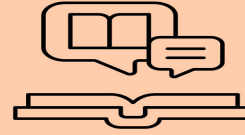


LOCAL CHILDREN'S ROUNDTABLE GUIDE

STRENGTHENING THE AVAILABILITY AND DELIVERY OF MENTAL HEALTH SERVICES AND TREATMENT FOR CHILDREN AND FAMILIES

1. INITIAL CONSIDERATIONS

The Lead Dependency Judge and Child Welfare Administrator meet to identify key considerations for prioritizing mental health at the Local Children's Roundtable.



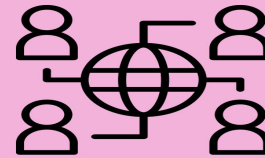
2. PLANNING THE FIRST MEETING

The Lead Dependency Judge and Child Welfare Administrator convene an initial planning meeting to determine what is needed.



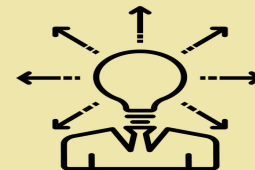
3. FIRST MEETING

The first meeting establishes the foundation for future success. It is important to provide clear direction, timelines, and expectations.



4. CONSIDER EDUCATION TOPICS

After the foundation has been set for systemic collaboration, consideration should be given for short education segments on various mental health topics.



5. AWARENESS OF COUNTY MENTAL HEALTH RESOURCES

Create a county resource catalogue for services and treatment for mental health challenges.



6. SECOND AND SUBSEQUENT MEETINGS

The agenda for your second and subsequent meetings will come naturally based on the discussions and information gathered. Understand the challenges before seeking solutions.



7. MOVE INTO ACTION

Once you fully understand the challenges, strengths and barriers to mental health service delivery in your county, it's time to move into finding solutions.



8. REVIEW, REFINE, AND CELEBRATE

Throughout the process of systemic collaboration, it is important to measure the impact of your efforts, readjust when needed, and celebrate your accomplishments.



Local Children's Roundtable Guide

Strengthening the Availability and Delivery of Mental Health Services and Treatment for Children and Families

Step #1 – Initial Considerations – Dependency Judge and Child Welfare Administrator

- ☐ Is there a need for the LCRT to focus on improved mental health collaboration for child welfare and dependent children? If so, continue through the guide.
- ☐ Should mental health be a primary focus of the LCRT or a subcommittee of the LCRT?
- ☐ Is there a lack of adequate mental health services and treatment in the county, causing children to become involved or remain involved in the dependency system?
- ☐ Do dependency system professionals have a satisfactory understanding of the mental health system, services, and treatment available?
- ☐ How can the human services director, if applicable, support the efforts of the LCRT and mental health?

Step #2 – Planning the First Meeting – Dependency Judge and Child Welfare Administrator

- ☐ Identify which mental health system professionals should be included (i.e., county mental health administrator, Managed Care Organizations, mental health providers, primary contractors, chief probation officer, etc.).
- ☐ Send the invitation to participants jointly from the lead dependency judge and child welfare administrator.
- ☐ Determine the format of the meetings, including how often you should meet and for how long.
- ☐ Identify initial goals/outcomes.
- ☐ Determine what mental health-related data is available and needed. *Refer to the Mental Health Workgroup's **Mental Health Data Considerations**.*
- ☐ Create the agenda for the first meeting. Keep it simple.
- ☐ Decide who will lead the meeting and the agenda discussion items.
- ☐ Identify someone to take notes.
- ☐ Create a meeting schedule for the next six to twelve months. Be mindful of holidays.

Step #3 – First Meeting

- ☐ Recognize the mental health professionals for their attendance and collaboration at the LCRT.
- ☐ Explain the Pennsylvania State Roundtable Communication Structure and the Mental Health Workgroup charge from the State Roundtable.
- ☐ Provide a copy of the State Roundtable's Mental Health Workgroup's reports and resources.
- ☐ Explain the expectations of team members, including being open to learning different perspectives and mandatory attendance. Your work will build from one meeting to the next. Missing meetings will slow progress.
- ☐ Establish ground rules: seek to understand, keep conversation respectful, maintain a focus on established goals and identify the issues before seeking solutions.
- ☐ Begin foundational discussions around:
 - Strengths and barriers to mental health services and treatment in the county; and
 - Education topics for future LCRTs to better understand the mental health system.
- ☐ Consider administering a survey at the end of the first meeting to measure progress.
- ☐ Ask if anyone critical to the purpose is missing from the meeting and should be added to future meetings.
- ☐ Provide future meeting dates, times, and locations.

****It is recommended that introductory topics be used to build trust and understanding during this first meeting and that more difficult discussions around sensitive topics be saved for future meetings.***

Step #4 – Consider Education Topics

At the first and subsequent meetings, identify education topics and speakers. Keep this short, no more than 15 minutes of your meeting time. The goal is to enhance your team's knowledge while allowing time for other agenda items. Topic considerations may include:

- ☐ Understanding the Statewide and County Mental Health System
- ☐ The Role of Each System Professional in Addressing Mental Health
- ☐ Mental Wellness and the Importance of Early Intervention
- ☐ Collaboration for Complex Mental Health Cases
- ☐ Levels of Service (least restrictive to most restrictive)

- ☐ Peer Support Programs
- ☐ Supplemental Services (community, child welfare)
- ☐ Understanding the Mental Health Funding Stream and Preventing Duplication of Services
- ☐ Transition Points for Youth with Mental Health (child system to adult system, inpatient to step-down to reunification, etc.)
- ☐ The Importance of Family and Kin Connections in Reducing Trauma
- ☐ How to Handle Individuals Refusing Treatment

Step #5 – Awareness of County Mental Health Resources

Identify individuals to begin developing a County-Specific Resource Catalog. The Catalog should include mental health, child welfare, and community resources for those with mental health challenges. It should emphasize early interventions, community-based, inpatient, and transition resources. Due to the various areas of support, representation from the mental health, child welfare, and provider communities is recommended.

Step #6 – Second and Subsequent Meetings

The agenda for your second and subsequent meetings will likely come naturally from your first meeting. Caution: Do not move on to solutions until the team fully understands the problems.

- ☐ Identify who will create the agenda
- ☐ Identify who will lead the discussion on each agenda item
- ☐ Identify someone to take notes
- ☐ Remember to continue prioritizing short education segments in your agenda.

Step #7 – Move Into Action

Once you have a good idea of the barriers, services, supports, gaps, and challenges, it's time to determine how systems can collaboratively move into action. Action that is doable, measurable, and successful motivates team members.

- ☐ Prioritize the items to address during a meeting. Don't try to solve everything at once.
- ☐ Select one to three (no more than that) actions that can be easily accomplished and will have a significantly positive impact on individuals with mental health. Examples of action might include:
 - Cross-systems education for child welfare, mental health, dependency system professionals, and the community

- Developing a Mental Health Peer Support Program
 - Implementing a process to collect necessary data. Refer to the Mental Health Workgroup's ***Mental Health Data Considerations for Counties.***
 - Examining the availability and effectiveness of current mental health programs and services. ***For information on national and statewide programs and practices, refer to the Mental Health Workgroup reports.***
- ☐ Determine if specific subcommittees are needed.

Step #8 – Review, Refine, and Celebrate

- ☐ Set goals for identified action items to keep your team engaged and motivated.
- ☐ Measure the impact of the actions you implement.
- ☐ Continue to meet and work on your action items. Keep your plan of action fluid to adjust to changing times and challenges.
- ☐ Celebrate your successes, both big and small.

