

Washoe County Mental Health Consortium 2002 Progress Report

Goals of the Consortium

Goal One: Develop a coordinated and integrated behavioral health system for children and families in Washoe County that is seamless and easy to access. Build on the strengths of local communities by implementing locally controlled systems of care.

Goal Two: Implement a system of services and supports that is customized to meet the needs of families and not focused on agencies and providers. The system will provide early access to behavioral health systems for children and families that empower families to raise their own children. Program development will focus on a consistent, collaborative and family-centered approach that provides support and growth for Nevada children and families.

Goal Three: Support the development and expansion of human resources so that we can better utilize the resources of our local communities and meet the needs of Washoe County children and families. Families and staff must be empowered in their efforts to succeed by providing them information, education and support.

Goal Four: Expand consumer involvement at all levels of decision making involving behavioral health services and supports for Washoe County children and families.

The following chart shows the action steps, progress towards goals and pending actions taken, realized and proposed by the Consortium to allow us to reach the goals outlined above.

Action Steps	Accomplishments	Pending Actions
Assess duplicated services and develop a plan to coordinate existing resources to expand capacity and decrease fragmentation of services	<ul style="list-style-type: none"> • Set up committee called “Coordinated Assessment” Committee met and mapped: <ul style="list-style-type: none"> • Core components of a psychological assessment needed by all the agencies involved with the Consortium • Discussed the what the core components of a uniform medical screening would need to be 	Committee identified the need to: <ul style="list-style-type: none"> • Determine a way to coordinate efforts to ensure that if certain testing is required to fully evaluate a youth it will be provided • Develop paperwork that can be shared • Deal with the issue of confidentiality to ensure that agencies can share information and also include parents and advocates

<p>Utilize results of recent surveys of parents, staff, cultural experts, and stakeholders to further assess and identify perceived gaps in services.</p>	<ul style="list-style-type: none"> • Set up committee called “Survey Group” <p>Committee met and completed the following:</p> <ul style="list-style-type: none"> • Identified a population to survey – parents with children deemed SED by the school district • Reviewed survey and made modification to make it easier to understand, “parent-friendly” and complete using a focus group to determine changes; ensure the data collected could be correlated to previous data collected • Through collaborated efforts of Consortium members sent 305 surveys out and ? returned. 	<ul style="list-style-type: none"> • Continue to identify populations to survey
<p>Review each agency’s financial commitment to SED youths and explore the feasibility of reallocating existing funds or pooling funds to increase capacity.</p>	<ul style="list-style-type: none"> • Pooled resources of the Consortium to submit two grant proposals: • WIN Project (Washoe Integrated Network) , federal grant request – did not receive funding but did receive feedback on the grant and will be resubmitting during next funding cycle if requests for proposals are solicited. • Assisted Consortium members in applying for grant to create and fund a Crisis Intervention Team – concept of the proposal is to send an interdisciplinary team into closed classrooms serving the SED population when a situation occurs that might result in the removal of a child and placement 	<ul style="list-style-type: none"> • Establish a committee that will plan action steps

	with Juvenile Services; grant submitted to Juvenile Justice Title V – received \$42,500 of \$50,000 grant proposal, currently seeking funds for remainder of funds needed – the Mental Health Consortium agreed to serve as the Advisory Board for the project.	
Explore methods for providing assistance to children/adolescents who are deemed SED but their parents have little or no insurance to pay for needed behavioral health services.	<ul style="list-style-type: none"> • Continuing dialogue with NV Medicaid • Conducting internet and publication searches for possible funding opportunities 	<ul style="list-style-type: none"> • Continuing dialogue with NV Medicaid • Conducting internet and publication searches for possible funding opportunities
Involve parents and representatives of all cultural groups as partners in the development of an integrated service delivery system.	<ul style="list-style-type: none"> • Parent Advocates actively participate on the established committees • Increased Consortium membership by adding an additional Parent Advocate 	<ul style="list-style-type: none"> • Actively recruit Consortium members from culturally diverse populations
Establish interagency protocols and memoranda of understanding that form agreements that dictate how agencies will communicate and share information, expend pooled funds (if feasible), provide inter-agency cross training and coordinate/integrate case management.	<ul style="list-style-type: none"> • No progress to date 	<ul style="list-style-type: none"> • Establish a committee that will plan action steps
Establish protocols for the use of uniform assessment instruments, a common intake process, and a uniform release of confidential information form.	<ul style="list-style-type: none"> • Set up committee called “Coordinated Assessment” • Committee formulated plan; identified funding for; and scheduled training of Consortium members in the administration and use of the CALOCUS 	<ul style="list-style-type: none"> • Conduct the training – scheduled for January 2003 • Establish protocols for use and sharing of results of the CALOCU assessment with Consortium members • Develop a uniform release of information form • Develop a uniform intake form
Implement protocols for confidentiality exchanging between agencies that	<ul style="list-style-type: none"> • Consortium members shared confidentiality protocols specific to each 	Establish a committee that will plan action steps

eliminates the need for families to redo assessments and intake forms.	agency and discipline	
The Consortium will establish a working committee to specifically address family empowerment.	<ul style="list-style-type: none"> • Began work on a resource manual to describe each Consortium member agency's services and protocols 	<ul style="list-style-type: none"> • Continue work on resource manual include parent's rights and expectations to ensure a family's successful participation in agency's programs.
Establish and implement policies that level the playing field for family members to get involved	<ul style="list-style-type: none"> • No progress to date 	<ul style="list-style-type: none"> • Integrate need into all present and future committee work
Develop policy to protect parents who participate in any Consortium activity from any adverse or retaliatory actions or effects from Consortium agencies	<ul style="list-style-type: none"> • No progress to date 	<ul style="list-style-type: none"> • Integrate need into all present and future committee work