



Notes from Breakout Groups on Integration of Efforts

Questions that groups wanted answered:

- Who maintains the system?
- What would you call the clearinghouse so that it is found in internet searches?
- What is the sustainability power of the website?
- Are there feature update capabilities?
- Will there be a site evaluation or areas where we can provide feedback?
- What are its purpose, criteria for content inclusion, standards, and keywords?
- What is the target audience?

Current Clearinghouses/Online Resources for Integration in Local Communities

Themes	Ideas
<p>Current Online clearinghouses</p>	<ul style="list-style-type: none"> • Listserv at EMPOWER Colorado • DV Developing Early Childhood Clearinghouse • YouthNet online database of programs • Forum for Youth Investment • DU-Marsico • ASPIRE (3000 non-profit organization, foundations) • National Clearinghouse of Alcohol and Drug Information • Bipolar association • National Initiative for Children’s Healthcare Quality • Healthy Kids, Healthy Care: Parents as Partners • National Homelessness Project • State best practices webpage, mental health section • 2-1-1 program website • Workforce Colorado resource for youth and families • BHOs and CMHC websites • Bazelon Center • SAMSHA website • NAMI- national and Colorado chapter • NASP • Facts for families • AAP • American Academy of Child and Adolescent Psychiatry • Piton Foundation • Washington State Medical Home Web Portal

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<p>Model Approaches to include in a Clearinghouse</p>	<ul style="list-style-type: none"> • Wrap around services, system of care • Integration efforts between: <ul style="list-style-type: none"> ○ Substance abuse and mental health ○ Behavioral and physical health ○ Multiple counties ○ Multiple systems that are co-located with integrated assessments • Mental health programs in safety net • United Way model • Evidence-based practices
<p>Integrated Policies and Programs</p>	<ul style="list-style-type: none"> • HB 1451 (Collaborative Management Program) • SB 94 (Juvenile Justice) • San Louis Valley Mental Health Center • Youth Networking Group-Colorado Development Team • Youth State Agency Networking launches • Prevention Leadership Council • Colorado Prevention Partners Management Team • Child and Youth Friendly City Initiative • RMC • Advisory council on adolescent health • SAMSA grants- Department of Local Affairs • Guidebook groups • Family voices hotline
<p>Other Systems Info needed in a Clearinghouse</p>	<ul style="list-style-type: none"> • Research on integration of schools with health insurance (Medicaid, Private Insurance) • Info on creating electronic health records • How to create funding for the whole child (school, medical, Mental health) • Coordinating with medical home initiative • Places where parents and youth can get training to start advocating • How to fund wrap around services at the community level—state could offer TA around wraparound and restorative justice • How to institutionalize family leadership development • Need to honor the cultural difference of family vs. providers and have a “family enter here” button

Barriers to Integration in Local Communities (Possible Clearinghouse Topics)

Themes	Ideas
<p>Disempowered Families</p>	<ul style="list-style-type: none"> • Mental health providers not willing to hear what parents have learned from other sources. • Credentials more important than family experience; don’t understand we all have something to contribute.

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	<ul style="list-style-type: none"> • When calling police, need people to believe it really is a mental health issue and not a parenting issue. • Power differential between provider/police/family voice (ex. not being at the governor’s table; having parents there at the beginning prevents problems later on)
Sharing information	<ul style="list-style-type: none"> • Dearth of resources regarding early childhood • Parents don’t have a common language; they need time to sit and listen, especially with legislation (providers also have this problem with legislation) • Lack of trust to say in a meeting “I don’t understand”; printed out materials would help • Acronyms are too confusing • Each entity has different reporting systems, even within the same system, and technology itself can be at different levels within a system • Different service providers can’t talk because of HIPPA/consent issues; need to be aware of how to get around it if possible. • Consumer has to give info to different providers multiple times because agencies may have different forms or assessments; need policy around these issues so resources are not duplicated • Attitudinal barriers- Diagnosis may lead to denial within schools, police, and child welfare. • Substance abuse programs have the most stringent requirements for info sharing • Possibly develop a card (i.e. like a credit card) with personal info on it • Is the information being shared for the best interest of the child or only for statistical data • De-identified child versus identified; want to avoid stigmatization across systems
Sharing services	<ul style="list-style-type: none"> • Local variances on how services are provided, including trainings • District boundaries for human services, schools, juvenile justice, and regional are all different • Important to talk to each other to share information • Disconnect within the state agencies; how do you model what you’re asking the communities to do? • Misunderstandings/lack of knowledge of roles and responsibilities of other agencies; “We don’t do that”- issue of what to do if the responsibilities don’t fall under what we provide (Silos, how to break down these barriers) • People must fit the “label profile” • Cross sections of priorities- how do you agree? How do they match up servicing the same folks but with different priorities? • Hidden agendas- new people don’t know what is going on behind the scene; different missions impact how well collaborations work-even with common goals, how to get there can be so different depending on each group’s mandate

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	<ul style="list-style-type: none"> • The systems of mental health and substance abuse seem to point at one another are difficult to align
<p>Communication and support</p>	<ul style="list-style-type: none"> • Parents are in a qualm; inadequate information coming from the state which is incredibly difficult to navigate • Lack of public education, community resource knowledge, and support • Agencies don't know what other agencies are doing • Some parents are unable/unwilling to advocate and "go knock on doors" • Lack of childcare and respite care for children with behavioral issues (this can lead to unsafe conditions) • Not educated about available tools to avoid duplication • Need to find out who has information on specific issues and how to use 211 more effectively (211 updates information every 2 days) • Physicians are not talking with behavioral health providers—mother is the medical home coordinator • Parents aren't given choice to be proactive • Communication problem between schools and private physicians • Mistrust can underlay communications • Family members do not know what services are available and how to access needed services—they do not know their rights (such as with IEPs in schools) • Families may have too many meetings, all with different requirements, whereas some families are at all the meetings—not enough diversity • Too much technical language and lingo used
<p>Service Delivery and accessibility</p>	<ul style="list-style-type: none"> • Some families, immigrants, homeless, incarcerated individuals, etc. may not have computer access and may have language barriers or disabilities • Limited services based on definitions; parents just want to know "how do I get help for my kid?" • In mental health treatment often treating just the client rather than treating the family as a unit • School psychologists who don't want to deal with mental health issues • Some people who are least able to advocate are those who are made to run the tightest mazes • Have to hurt themselves or someone else to get help • Education in the Eastern Plains is lacking • Gate Keepers- medical model changed- instead of how to keep people out, we should look at how to get them in. • Point of Access can be a barrier for rural areas; they have high difficulty finding appropriate services • Language and cultural barriers • Mental ill consumers need a navigator and someone who can help them fill out the forms

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	<ul style="list-style-type: none"> • Too much time required to collaborate • Direct service becomes prescriptive and accountability measures restrict preserving family centered care. • Different definitions of success and/or failure of treatment • Need cultural competency of the deaf/hard of hearing • Skills/knowledge/training gaps and/or differences • Community Mental health centers may be a resource, but many people don't access services there • There is no prevention piece or education-based services
<p>Funding/Policy Change</p>	<ul style="list-style-type: none"> • Funding streams are not crossing over; pulling funds from juveniles to fund adults • Managing budgets rather than figuring out what people need • Outcome driven decisions rather than needs based • Crisis driven legislation; reactive rather than proactive • Funding and consequent delivery requirements are strict; mandates • System is so fragmented • Funding may drive gatekeepers from accepting people • We need to fund real “hands-on” help • “Save the Resources” is a barrier • Limited capacity • No one wants to give up any money • Inflexible/restricted funding • Need to lighten up “direct service” billable hours • No funding for all kids that need to be served • Would like to reallocate the funds make things less rigid
<p>Systems</p>	<ul style="list-style-type: none"> • BOCES not always reliable • Systems of care is not a shared philosophy • Need transitions between systems supporting investments • Local control vs. State control • Incongruent policies between systems • Lack of coordination and alignment • Systems are not adequately funded or resourced • Resources given are misallocated to various systems • Colorado is top heavy with institutionalizing children; need to shift away from institutionalizing • Not program based- change services • Cultural barriers between systems • Need integration of services between agencies such as social services/schools/sheriffs, rural/metropolitan communities, 1451-SB94 • Some people in school systems levels are not knowledgeable about mental health issues and systems

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Resources to be Included in a **Direct Service** Level Online Clearinghouse

Themes	Ideas
	<ul style="list-style-type: none">• Consumers and family users may be more interested in services available rather than organizations and systems.• How to expand age groups that practices cover• Need handouts that teachers can pass out• Provide resource materials across area schools and in doctor's offices• Include in the packets that are given out to students to list resources (parent to parent resources)• How to get information to people who need it before they need it• Best practices for schools- social emotional screenings are not being done because it takes too much time and schools won't spend the money• Find a way to connect people who are working together and co-located so they can better communicate• Facilitation piece• Case studies• Evidence based programs• Giving money to people you want to integrate with in order to integrate• CPP strategic prevention framework• Train management to reward collaborations• How to fundraise and issues surrounding sustainability• Getting TA• Workforce development• Latina population is the highest population for suicide; need to get information to help them.• Info with key packets (birth certificates, IDs, etc.)• Overview of services• Educate work force about what's out there• Resources need to be better known in community, build in trainings in job descriptions• Family friendly "community crisis" hotline staffed by a real person; 211 is not yet statewide• Would like the ability to input info about needs and be directed to appropriate resources• Have a live person to help navigate and filter• Create a partnership with 211 to help those who do not have access to the internet