



# 2018



# Report to the Community

# RESILIENT kids



Fostering life long resilience  
starts with family and  
community efforts; allowing  
our children to *grow stronger*  
and *learn to fly*  
when faced with adversity





# Table of Contents

<b>01</b>	Letters to Stakeholders
<b>03</b>	Connections History
<b>05</b>	Background
<b>06</b>	Partnerships
<b>07</b>	Structure & Governance
<b>09</b>	Funding
<b>10</b>	Children & Youth Served
<b>11</b>	Youth & Family Involvement
<b>23</b>	Cross System Youth
<b>27</b>	Integrated Care
<b>29</b>	School Based Mental Health
<b>31</b>	Special Populations
<b>35</b>	Improving Service Quality
<b>37</b>	Early Childhood
<b>39</b>	Trauma Informed Care
<b>40</b>	Cultural & Linguistic Competency
<b>41</b>	SOC Expansion Grant
<b>43</b>	Workforce Development
<b>45</b>	Outcomes



*Congratulations on your ninth annual System of Care Report to the Community event! Thank you for inviting me to share this wonderful time with you. On behalf of the Detroit Wayne Mental Health Authority Board of Directors and staff, we are honored to be a part of this important and critical work, serving children, youth and families in Wayne County.*

*I love the theme of today's celebration, "Resilient Kids," because that is what we as professionals strive to do every day. We help people "spring back" or "rebound" and show them there is hope in the midst of adversity. Our strong System of Care, comprised of hundreds of caring and compassionate professionals, is here to help.*

*We are proud of the System of Care and the solid partnerships that have been established. We understand this kind of work takes dedication and commitment and we are grateful for your compassion in all that you do to help those that you serve every day.*

*Thank you for your unwavering dedication and compassion, for your service and your sacrifices. Congratulations on another successful year!*

*Best Regards,  
Cheryl C. Munday, Ph.D.  
Chairperson, DWMHA Board of Directors*





Dear Stakeholders,

Wow, what an amazing year! It may have been a roller coaster of changes but can anyone say, System Transformation?!

To note a few of the changes...our SAMHSA grant came to an end in June after 5 years but not without impacting system change by creating cultural and linguistic awareness, increasing parent and youth voice, and increasing trauma informed care.

This is our third year providing prevention services to children and youth in schools. This initiative has allowed us to strengthen the partnership between the education and behavioral health system, and I look forward to the continued growth in this area. We have also transformed the way we collect data to improve service delivery.

Additionally we have streamlined our crisis screening process to make it more efficient for families and providers, plus allowing us to utilize the data to improve services.

There are so many things that have occurred this year that I cannot name them all, but what I can say is, it wouldn't have happened without you! The Children's System of Care continues to thrive because of your dedication to children, youth and their families. Thank you to each and every person who has contributed in some way to our SOC.

Here's to another great year!

Crystal Palmer, LMSW  
Director of Children's Initiatives





# CONNECTIONS HISTORY

## 1980s

The children's mental health field took a major step forward in the mid-1980s with the initiation of the Child and Adolescent Service System Program (CASSP), which provided modest funding to states to enhance their capacity to improve children's mental health services and introduced the concept of a system of care that served as a foundation for systems and services for more than 25 years. In 1986, the first monograph on systems of care as a philosophy and framework for serving children was published.

## 2000-2006

Chief Judge Mary Beth Kelly initiated dialogue with a group of children's providers, Detroit Wayne County Community Mental Health Agency (DWCCMHA), Department of Health and Human Services, and Wayne County Child and Family Services in an effort to better coordinate services for juvenile justice children and youth with behavioral health needs. The Unified Service Collaborative was established. At the same time, DWCCMHA developed the Children's Initiatives to address the low number of children and youth in care and to supplement core services in the CMH system.

## 1990-1993

The State of Michigan received the CASSP grant in 1990 and allocated funds to Wayne County. Funds were utilized to begin coordinating a system of care (SOC) around children with mental health needs. In 1992, SAMHSA launched a competitive grant program in an effort to translate the system of care concept into systems' reforms and concrete services that would benefit children, youth and families, and these grant funds were used to plan and implement initial system reform work.

## 2007

DWMHA secured the State Mental Health Block Grant funds that were used to forward the goals of the Unified Services Collaborative, now named Wayne County-System of Care (WC-SOC). Community Mental Health (CMH) agencies in partnership with Detroit Wayne County Community Mental Health Agency (DWCCMHA) hired and housed six staff members to implement the WCSOC Initiative; the staff were also housed in part at various schools throughout Wayne County in an effort to identify barriers/challenges schools faced around behavioral concerns, as well as inform/connect educators and/or parents to CMH services. The staff covered six communities, five school districts and thirteen K-9 schools.

## 1997

Southwest Counseling Solutions (SWCS), in partnership with Michigan Department of Community Health (MDCH), Detroit-Wayne County Community Mental Health Agency (now Detroit Wayne Mental Health Authority) and Association of Children's Mental Health (ACMH), received a federal SAMHSA SOC grant. SWCS - SOC worked to transform systems, build family voice, strengthen community involvement and expand Wraparound services in the southwest Detroit community. When the grant concluded, ACMH-Detroit Chapter and Youth United continued to be an integral resource to children, youth and families in southwest Detroit.

## 2009

The Human Services Community Collaborative convened under the tenure of Edward McNamara, Wayne County Executive. Wayne County Systems of Care was renamed Connections-Wayne County System of Care. A governance structure was established to provide a framework for outgoing system activities and sustainability. The Cross Systems Management Committee wrote and developed Operating Guidelines with the purpose to build and maintain a collaborative relationship between all public and private systems serving children and families in Wayne County.

## 2010-2011

Implementation of the High End User Project began, which was developed to improve service coordination and reduce cost across systems. The project identified an extremely high rate of early childhood trauma and extensive time spent in the behavioral health system and out-of-home placement. Guided by this data, Connections began to build a trauma-informed system of care. In partnership with Development Centers, Inc., local parents founded Family Alliance for Change (FAFC) to support parents in Wayne County who have children with special needs. Youth leadership continued to expand to include more Youth Advocate leaders at partner agencies and increased youth participation across the county. Recognizing the unique mental health challenges experienced by LGBTQ children and youth and the need to improve access to culturally competent services, Connections partnered with the Ruth Ellis Center (REC). REC began providing Medicaid eligible mental health services in 2011 and continues to provide specialized training and technical assistance around LGBTQ issues.

## 2012-2013

Connections continued to grow with the development of several new initiatives, including the Wayne County Fatherhood Initiative, Cornerstone replication projects, and Screening Kids in Primary Care Plus (SKIPPP). Services to youth involved with Juvenile Justice (JJ) improved due to the development of the Medical Behavioral Health Court, the Juvenile Justice Training Academy, and the Mental Health Innovation Grant which funded home based services to JJ-involved youth. The SAMHSA System of Care Expansion Grant was received in partnership with American Indian Health and Family Services (AIHFS) and The Guidance Center (TGC), and partnerships with education strengthened through the Safe Schools and Healthy Students.

## 2014-2015

The Parent and Youth Advisory Council was formed in 2014, and the Crossover Youth Practice Model (CYPM) began serving youth involved in both Juvenile Justice and Child Welfare. Early Childhood services were strengthened through the Early Childhood Comprehensive Systems Grant, a learning community focused on quality improvement and trauma-informed care, and participation in research studies evaluating the impact of Infant Mental Health. The Michigan Child Care Collaboration (MC<sub>3</sub>) model also launched in Wayne County, providing psychiatric support to primary care providers.

## 2016

New initiatives expanded services to reach children involved in different systems. The School Based Mental Health Initiative was launched to provide additional mental health supports and resources within school settings. The collaboration was facilitated by holding an Education Roundtable designed to identify existing resources, supports, and barriers to building behavioral/mental health services in school settings. The Juvenile Mental Health Court (JMHC) began as a problem solving court that combines judicial supervision with community mental health supports. As part of the System of Care (SOC) expansion work, a Cultural and Linguistic Competency (CLC) organizational needs assessment was conducted among participating organizations. The Children's Cultural and Linguistic Conference held in the spring focused on increasing system capacity to deliver culturally and linguistically competent services.

## 2017

Family Alliance for Change became an agency within the Southwest Solutions family of organizations. Parent Support Partner services were assumed by providers, and three agencies began training staff to deliver Parent-Child Interaction Therapy (PCIT), an evidence-based treatment for young children with emotional and behavioral disorders. Wayne County Baby Court became a specialized docket. Additional grants resulted in new opportunities to serve children and families. With support from the Ethel and James FLINN Foundation, Cognitive Behavioral Intervention for Trauma in Schools (CBITS) began implementation throughout Wayne County schools. Funding from the federal The Race to the Top Early Learning Challenge (RTT-ELC) allowed Connections to provide social and emotional consultation to childcare and Head Start providers throughout Wayne County.





# BACKGROUND

## CONNECTIONS' GOALS

- 1 Increase access to services
- 2 Improve quality of services
- 3 Increase youth and parent voice
- 4 Improve quality of workforce



## Connections' System of Care Approach

System of Care (SOC) is not a program, but rather a spectrum of effective community-based services for children and youth with Serious Emotional Disturbance (SED) and their families. SOC is organized into a coordinated network of cross-system collaboration. This organization builds meaningful partnerships with families and youth and addresses their cultural and linguistic needs in order to help them to function better at home, in school, in the community, and throughout life.



### Family Driven & Youth Guided

The strengths and needs of the child and family determine the support and services a child and family receives.



### Community-Based

The array of services, as well as system management, rest within a supportive, adaptive infrastructure of processes, structures, and relationships with the community.



### Culturally and Linguistically Competent

Agencies, programs, and services reflect the cultural, racial, ethnic, and linguistic differences of the population they serve in order to facilitate access to and utilization of appropriate services as a strategy to address disparities and achieve quality.

## SYSTEM PARTNERS

- ▶ Detroit Wayne Mental Health Authority (DWMHA)
- ▶ Detroit Department of Health and Wellness Promotion
- ▶ Institute for Population Health
- ▶ Michigan Department of Health and Human Services—Wayne County
- ▶ Southeast Michigan Community Alliance
- ▶ Third Judicial Circuit Court of Michigan
- ▶ Wayne County Department of Health, Veterans and Community Wellness
- ▶ Wayne Regional Educational Service Agency (RESA)

## COMMUNITY PARTNERS

- ▶ APPRECOTS-Applied Research Consultants
- ▶ Black Caucus Foundation of Michigan
- ▶ Catholic Social Services
- ▶ Child’s Hope
- ▶ Children’s Hospital of Michigan
- ▶ Detroit Public Schools Community District
- ▶ Easter Seals
- ▶ Educational Achievement Authority
- ▶ Family Alliance for Change (FAFC)
- ▶ Great Start Collaborative—Wayne
- ▶ Lincoln Park School District
- ▶ Michigan Alliance for Families
- ▶ Michigan Association for Infant Mental Health
- ▶ The Milestones Agency
- ▶ Neighborhood Service Organization
- ▶ St. Joseph Mercy Health System

## SERVICE PROVIDERS

- ▶ American Indian Health and Family Services
- ▶ Arab American and Chaldean Council
- ▶ Arab Community Center for Economic and Social Services
- ▶ Assured Family Services
- ▶ Black Family Development, Inc.
- ▶ Bridgeway Services
- ▶ CareLink Network
- ▶ Center for Youth and Families
- ▶ Clinic for Child Study
- ▶ Community Care Services
- ▶ Community Living Services
- ▶ ConsumerLink Network
- ▶ Development Centers
- ▶ Growth Works, Inc.
- ▶ Hegira Programs, Inc.
- ▶ Integrated Care Alliance
- ▶ Lincoln Behavioral Services
- ▶ New Center Community Services
- ▶ New Oakland Family Services
- ▶ Northeast Guidance Center
- ▶ Ruth Ellis Center
- ▶ Southwest Counseling Solutions
- ▶ Starfish Family Services
- ▶ TEAM Wellness
- ▶ The Children’s Center
- ▶ The Guidance Center
- ▶ Wellplace, Michigan

## UNIVERSITY PARTNERS

- ▶ Eastern Michigan University
- ▶ Michigan State University
- ▶ University of Michigan
- ▶ Wayne State University
- ▶ Western Michigan University



# PARTNERSHIPS



# STRUCTURE & GOVERNANCE

## **HUMAN SERVICES COMMUNITY COLLABORATIVE**

The Human Services Community Collaborative (HSCC) is the designated Multi-Purpose Collaborative Body for Wayne County. It is an action-focused, inter-agency collaborative body, comprised of members from both the private and public sector. Its membership consists of representatives from law enforcement, education, community mental health, substance use, child welfare, juvenile justice, hospitals, public health, human services, courts, and early childhood. The HSCC is the system-wide governing body for Wayne County's Connection System of Care. The mission of the HSCC is to improve the development, financing, collaboration and delivery of inter-agency services that enhance life, reduce disparities and provide opportunities for all children, families and communities. The HSCC continues to barrier-bust issues and concerns that impact the lives of the children, youth and families collectively served by each system.

## **CROSS SYSTEM MANAGEMENT**

Members of this subcommittee make strategic decisions and inform policy regarding Wayne County Connections System of Care. The team consists of individuals with decision-making authority within their system.

## **SYSTEM OF CARE IMPLEMENTATION TEAM**

The Implementation Team was a governing body that provides oversight and direction for collaborative activities associated with the Substance Abuse and Mental Health Administration (SAMHSA) System of Care (SOC) Expansion Grant, and consists of select SOC leadership and grant employees. The Implementation Team provides oversight of the Cultural and Linguistic Competency Assessment based policy changes, youth and parent involvement related to grant goals and activities, and ensures grant tasks are completed in a timely fashion. The Implementation Team was dissolved at the conclusion of the SOC Expansion Grant on June 30, 2018.

## **PARENT & YOUTH ADVISORY COUNCIL**

The Parent and Youth Advisory Council is utilized to organize parents and youth who are, or have been, involved in services, with the purpose of building a structure that represents parent and youth "voice" within the System of Care (SOC). In recent years Family Alliance for Change developed a Parent Advisory Council and Youth United developed a Youth Advisory Council to increase parent and youth involvement in the SOC. Members of both councils began as dedicated volunteers who were provided with trainings designed to empower them to effectively engage in SOC workgroups and committees. Leaders within the established councils and other workgroups have developed a combined SOC Parent and Youth Advisory Council to provide guidance on policies and procedures impacting youth and parents throughout the System of Care. The mission of the SOC Advisory Council is to "Advise Connections: Wayne County System of Care, to advocate for youth and families receiving services in Wayne County, and inform system practices." Youth and parents have transitioned into leadership roles in the SOC Advisory Council and elected youth and parent co-chairs. The SOC Advisory Council is now youth and family-led with staff transitioned to supportive roles.

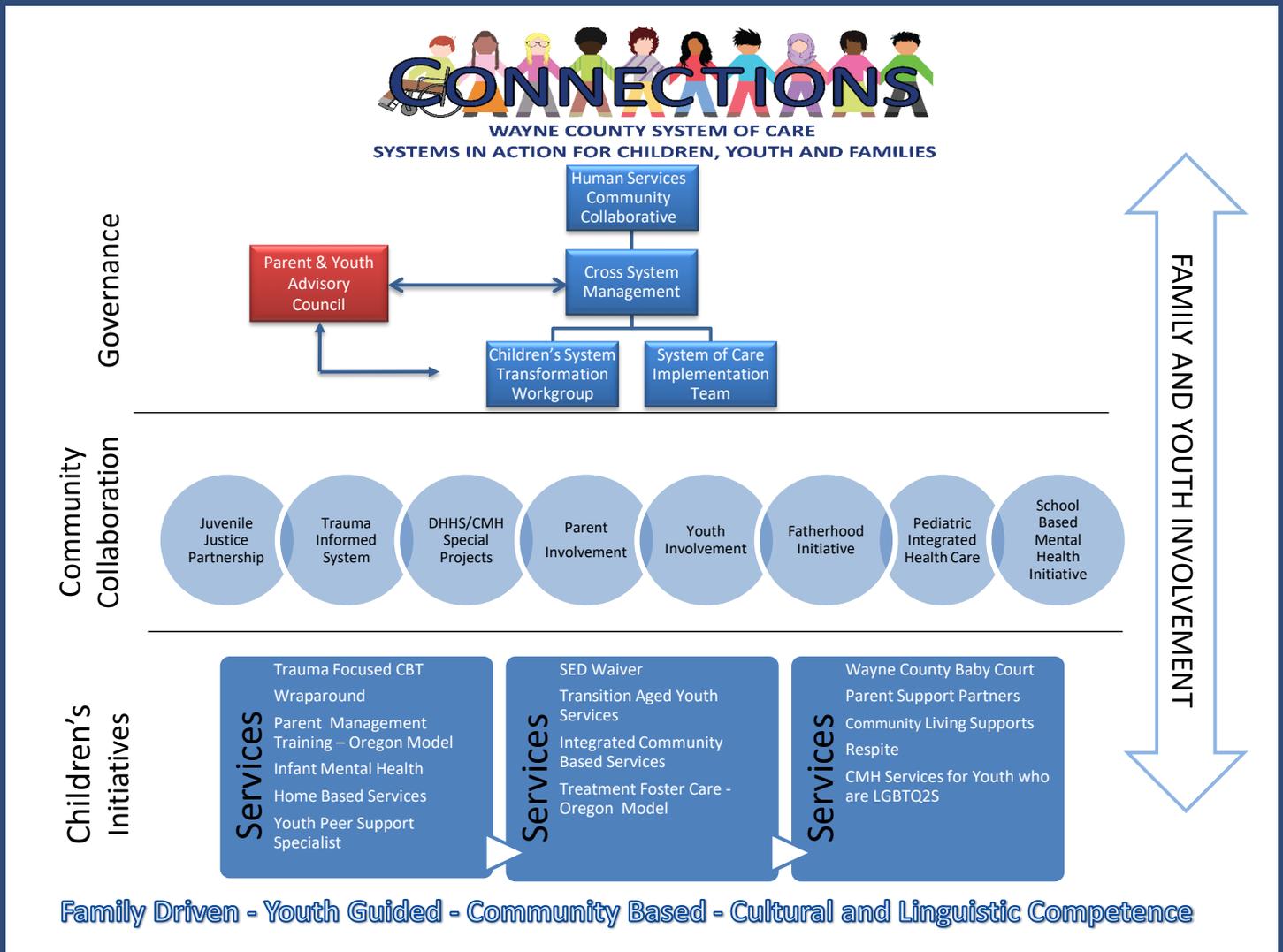
## **CHILDRENS SYSTEM TRANSFORMATION**

This is a task-oriented subcommittee focusing on Evidence-Based/Promising Practices of Wayne County Children's Initiatives and ensures the System of Care principle of a "flexible array of services & supports."

# SYSTEM OF CARE COMMITTEES

- ▶ Baby Court Steering Committee
- ▶ CAFAS/PECFAS – MCPN
- ▶ CAFAS/PECFAS – Provider
- ▶ DHHS/CMH Special Projects
- ▶ Early Childhood Task Force
- ▶ Fatherhood Initiative
- ▶ Home-Based Task Force
- ▶ Juvenile Justice Partnership
- ▶ LGBTQ2S Task Force
- ▶ Parent Involvement Meeting
- ▶ Children’s Practice Standards
- ▶ School Based Mental Health Initiatives
- ▶ Trauma Leadership
- ▶ Youth Involvement Committee
- ▶ Youth Peer Support Services Workgroup
- ▶ Wraparound

# SYSTEM OF CARE FRAMEWORK





# FUNDING

## SOC BLOCK GRANT

For the 12th year in a row, Connections received a **\$1.04 million** SOC Block Grant from the State of Michigan. Funds are used for specialty positions, programs designed to focus on system change, special projects, evaluation, advocating for parent and youth voice, and development of the workforce that serves children, youth and their families in Wayne County.

## CBITS

The Ethel and James FLINN Foundation has provided DWMHA \$150,000 over two years for the implementation of Cognitive Behavioral Intervention for Trauma in Schools (CBITS) in Wayne County Schools. The grant period is from January of 2017 through December of 2018 with **\$75,000** each year. Development Centers was selected to implement the CBITS intervention through the School Based Mental Health Initiative.

## SOC SAMHSA EXPANSION GRANT

In July 2013, DWMHA, in partnership with American Indian Health and Family Services (AIHFS) and The Guidance Center (TGC), was awarded a \$4 million, 4-year System of Care (SOC) Expansion Grant from the Substance Abuse and Mental Health Services Administration (SAMHSA). In May 2017, DWMHA was awarded a No Cost Extension, allowing grant work to continue until June 30, 2018 to ensure all grant activities were completed. A carryover request was approved in June 2017 for the amount of **\$274,743** with DWMHA matching funds 1:1 in the No-Cost Extension Year.

## RACE TO THE TOP

The Race to the Top Early Learning Challenge (RTT-ELC) is a federal grant made to the state of Michigan which focuses on improving early learning and development programs for young children. Development Centers was selected by DWMHA to provide specialized consultation to meet the social-emotional needs of young children ages birth to five in child care, based on a history of providing similar services. The initial award of \$88,813 was for one (1) FTE position to begin January 2017. Beginning in FY17-18, the grant was expanded to **\$160,000** and two (2) FTEs, based on community need.

## MICHIGAN CHILD COLLABORATIVE CARE PROGRAM (MC3)

The Michigan Child Collaborative Care Project (MC<sub>3</sub>) and Behavioral Health Consultation Project provides behavioral health consultation for local primary care providers with MC<sub>3</sub> child, adolescent and perinatal psychiatrists. Starfish Family Services provides local oversight, in collaboration with MC<sub>3</sub> program, of the Behavioral Health Consultant as they implement MC<sub>3</sub> in Wayne County as well as work in concert with other regional Behavioral Health Consultants. The funding for the project via the University of Michigan is **\$73,739**.

## TFCO

The Michigan Department of Health and Human Services has provided funding via Wayne State University for **\$150,366** to Detroit Wayne Mental Health Authority for implementation of the Treatment Foster Care Oregon (TFCO) Project. TFCO is an evidence-based practice developed as a community-based alternative to hospital, residential, and other inpatient treatment settings for children with significant emotional and behavioral challenges. TFCO offers intensive, behaviorally-focused, and data-driven clinical treatment in a non-restrictive and community-based setting. The Children's Center was selected to implement this project.

**TOTAL FUNDING**  
**\$1,777,430**



# CHILDREN & YOUTH SERVED

**17,823** Children, Youth & Families Served

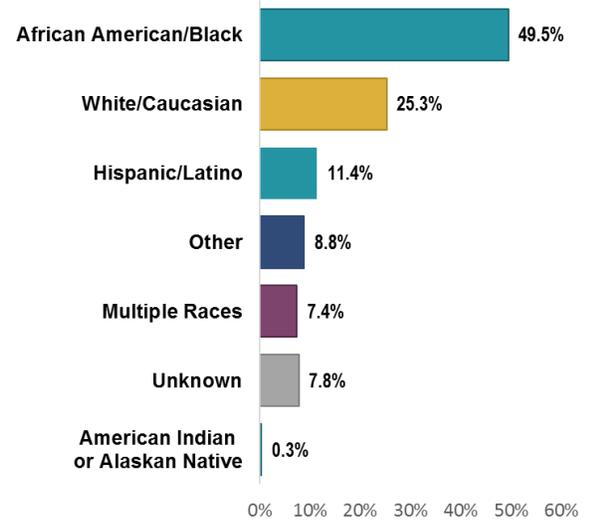
## CHILDREN SERVED BY FISCAL YEAR



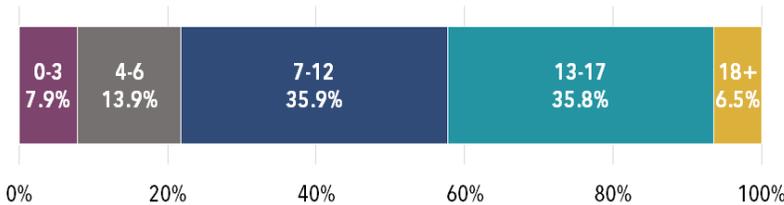
## GENDER



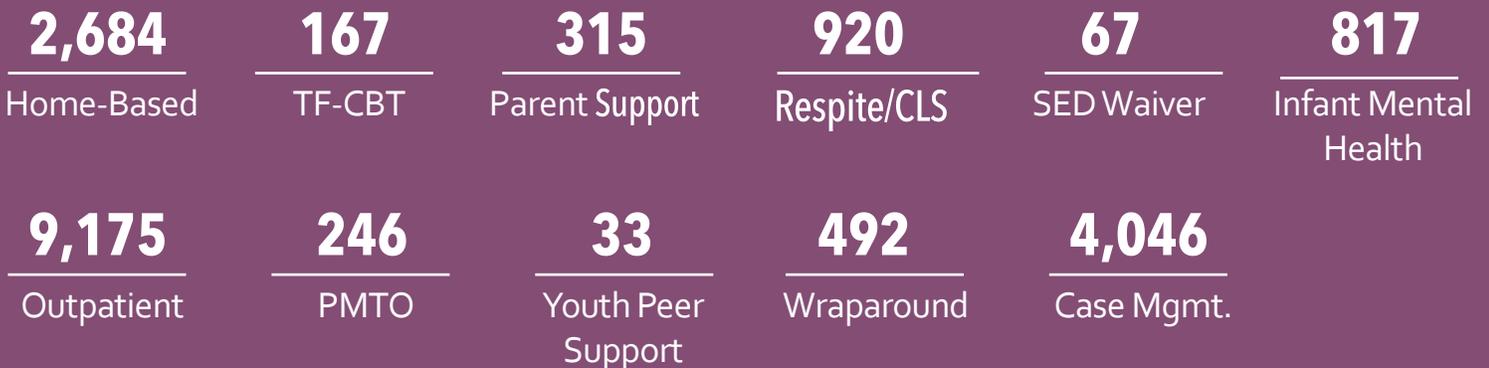
## RACE/ETHNICITY



## AGE GROUP



## SERVICES RECEIVED



\*Numbers based on program reporting or claims data collected from MHWIN in November, 2018. Claims may have a 90 day lag. Counts are not unduplicated, as individuals may receive more than one service. Race/Ethnicity is based off of primary race/ethnicity.



# YOUTH AND FAMILY INVOLVEMENT

- ▶ Youth United
- ▶ Family Alliance for Change
- ▶ Fatherhood Initiative
- ▶ Youth Peer Support



## Youth United

Youth United is a youth-led initiative whose purpose is to promote youth voice and youth involvement throughout CONNECTIONS (Wayne County System of Care).

**Youth Involvement** is a system approach designed to promote meaningful youth participation in all aspects of the system of care. Decision making should start within a youth's personal treatment. Over time, youth leaders should advance to actively participating in agency activities, sitting on committees, and providing feedback for new and/or existing policies and programs. Youth involvement is simply a group of young people coming together to make a difference on various topics.



### FY HIGHLIGHTS

- ▶ Increased system involvement in Wayne County Youth Involvement Meetings by engaging new partners
- ▶ Engaged community youth and parents in SOC events
- ▶ Participated in the hiring of new SOC staff
- ▶ Partnered with system partners and provider agencies to plan and host youth events and activities
- ▶ Represented Connections at DWMHA marketing meetings
- ▶ Created two one-minute videos highlighting youth personal stories and developed a Memorandum of Understanding (MOU) for the use of the videos at partner agencies
- ▶ Celebrated youth involvement with the 2nd Annual Youth Spotlight Award Banquet
- ▶ Hosted the statewide Youth M.O.V.E. Summit in Dearborn
- ▶ Lead Children's Mental Health Awareness Day activities
- ▶ Shared the impact of youth involvement in Wayne County at state and national conferences



### METRO DETROIT YOUTH DAY 2018

Youth United participated in Metro Detroit Youth Day, the largest youth event in Michigan, by hosting a table in the education tent. Resources were provided and attendees could play a Fact or Fiction game on mental health topics. Participants were able to get a prize if they answered whether the statement was fact or fiction.

# Children's Mental Health Awareness Day 2018

## CHILDREN'S MENTAL HEALTH AWARENESS DAY WALK

On May 10, 2018, Youth United hosted a Children's Mental Health Awareness Day Staff Walk at the Detroit Wayne Mental Health Authority. This event consisted of staff wearing green and taking a 15 minute walk with a banner that read "Children's Mental Health Awareness Day," in order to support Youth United and raise awareness for Children's Mental Health Awareness Day. Youth United also added some friendly competition by rewarding the floor with the most participants with a pizza party. Everyone was able to enjoy a nice refreshing walk and enjoy a cake reception afterwards. There were **88** staff members in attendance.



## INDOOR CARNIVAL



On May 19, 2018, in celebration of Children's Mental Health Awareness Day, Youth United hosted an indoor carnival at Wayne County Community College-Northwest Campus. The theme was Partnering for Health and Hope Following Trauma. This was a free event for youth and families. During the event, attendees enjoyed food, a

photo booth, carnival games, and prizes. Resources were distributed and there was a great performance from a local group of youth called "Young Fresh and Friends," who danced and laughed with the families and even did their own live dance competition. Over **120** people attended the event, had fun, and learned about mental health resources.



## SOCIAL MEDIA



FACEBOOK PAGE

[www.facebook.com/WCYouthUnited](http://www.facebook.com/WCYouthUnited)  
295 Likes



TWITTER

[www.twitter.com/wc\\_youthunited](http://www.twitter.com/wc_youthunited)  
331 Followers



# NORTHWEST REGION

## FOCUS: AWARENESS & STIGMA

Stigma refers to the attitudes and beliefs that lead people to reject, avoid, or fear those that they perceive as being different. The Northwest Region works to decrease stigma associated with youth receiving mental health services.

## 2ND ANNUAL YOUTH SPOTLIGHT AWARD BANQUET

On September 27, 2018, Youth United hosted a Youth Spotlight Award Banquet for youth and families at Burton Manor. The theme of the event was "A Starry Night." Youth and their families were able to come out, take home amazing red carpet pictures, eat dinner and dessert, and enjoy a night dedicated to recognizing youth throughout Wayne County. The recipients dedicated their time and efforts to accomplish personal goals, create change in the System of Care, and make a difference within their own communities. Lacea Zavala, Kids-TALK supervisor, provided the keynote address, "Shining a Light on Resiliency," and asked everyone to identify youth that they know personally, who are resilient as well.

Seven youth and one adult were selected from nominations to receive trophies. Among those recipients were youth from Youth United, Youth MOVE Detroit, Love Detroit Prevention Coalition, The Children's Center, and an adult support from Development Centers.

Youth and their families dressed in formal attire and shared this amazing moment with each other. Attendees included youth, adult supports, adult champions, leadership, as well as family and friends. **70** people attended the event.



## AWARD WINNERS

### PERSEVERANCE "RISING STAR" AWARD

Kemarian Thacker (Youth Advocate for Youth United)

### YOUTH ADVOCATE "ACHIEVEMENT" AWARD

Elizabeth Stewart (former Youth Advocate for Youth United)

### ADVOCACY "SHINING STAR" AWARD

Sharelle Stubbs (Secretary of Youth MOVE Detroit)

### VOLUNTEERISM "SERVICE EXCELLENCE" AWARD

Sha'Kenya Walker (Vice President of Youth MOVE Detroit)

### YOUTH PEER SUPPORT "MAKING A DIFFERENCE" AWARD

Jakira Gibson (Youth Peer Support Specialist at The Children's Center)

### CHANGE MAKER "VISIONARY AWARD"

Bethany Boik (Lead Youth Advocate for Youth United)

### ADULT YOUTH CHAMPION "EXCELLENCE" AWARD

Thomastine Ureh (Adult Support at Development Centers)

### LEADERSHIP "OUTSTANDING LEADERSHIP"

Love Detroit Prevention Coalition (a Youth Group within Wayne County)





## “Reflections” Book

Youth United has been working on publishing a book titled “Reflections.” This book depicts the resilience of youth despite overcoming intense obstacles. Youth United facilitated multiple workshops with a variety of youth groups in order to obtain their personal stories and capture their real life experiences within the book. This book is truly written by youth, for youth, with stories that are real, honest, and relatable. After editing and adding the finishing touches to the book, the book will be finalized, printed, and released at a book release event. Youth United looks forward to sharing this book with youth throughout the community.



### Pledge to End Stigma

I will treat others with dignity and respect.

I will work to end the stigma associated with mental health issues.

I will use my knowledge of mental health and stigma to educate others.

I will be a voice to educate others on stigma.

If I see or hear stigma being placed on others, I will speak up.

If I see someone in crisis, I will encourage them to seek help.

I will be an advocate for raising awareness of mental health issues.

## Stigma Pledges

In the past, Youth United has collected stigma pledge cards at various youth events. These pledge cards were created in order to remind youth that there is stigma surrounding mental health, but by recognizing it, we can reframe how we discuss mental illness and work towards reducing stigma. On July 11, 2018, Youth United participated in this year’s

Metro Detroit Youth Day event at Belle Isle by providing a resource table. At the table, youth were able to enjoy a game of “Spin the Wheel,” answering questions about mental health and winning a prize. Youth were also able to pick up resources and join us in the fight to end stigma, by taking the pledge. Nearly **40** stigma pledge cards were collected.

## FOCUS: TRAINING

Youth United’s East Region facilitates trainings throughout all of Wayne County and Michigan for youth and stakeholders. Most trainings range from two to four hours and include a variety of interactive activities and discussions on topics that help youth become comfortable with who they are and how they can make a change in the community.

### University of Maryland Training Institutes

Youth United presented on “Empowering Youth In Systems of Care: Communication, Engagement and Partnership,” at the University of Maryland, Baltimore Training Institutes on July 26th in Washington DC. Participants also took a youth involvement survey that helped to shed light on how youth-friendly their agency or organization may be. The presentation was well received by the **60+** participants.

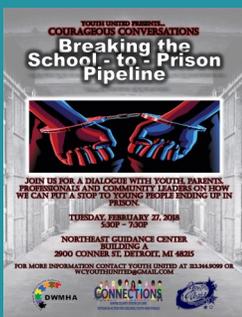


### Family Alliance for Change (FAFC) Parent Training

On June 27th, Youth United presented to parents at the Family Alliance for Change Parent Booster training. Parents were able to ask questions and gain information on how to get their children involved with Youth United as well as how to refer others to Youth United as needed.

## Courageous Conversations: A Community Forum for Youth, Parents, and Community Leaders

The Courageous Conversations series was developed to provide youth, parents, and community partners with a platform to have conversations around topics that are not occurring in everyday conversations. These conversations provide insights on ways community members can work together to overcome barriers and support young people with mental health needs.



### FEBRUARY: SCHOOL TO PRISON PIPELINE

The inaugural Courageous Conversation, held at Northeast Guidance Center, focused on the School to Prison Pipeline and its impact in Detroit and the state of Michigan. A presentation by Virdell Thomas from StarrVista was followed by a panel discussion with professionals and community leaders. **42** people attended the event.



### MAY: BREAKING BARRIERS

The second Courageous Conversation, also held at Northeast Guidance Center, was called Breaking Barriers and focused on youth mental health needs and ways in which others can offer support. The program consisted of young people sharing their stories and engaging adults in a conversation about what they have experienced and what support looks like. A panel discussion followed, which included two youth, a parent advocate with Family Alliance for Change, and the System of Care Special Projects Coordinator. **29** people attended.



# SUICIDE PREVENTION TRAINING

## Davis Aerospace High School

In May, Youth United provided a Bullying and Suicide training at Davis Aerospace High School in Detroit. The Student Advisory Council initiated the training to engage students in a conversation about suicide and bullying following recent cases of suicide ideation and attempts. **152** students attended, and were encouraged to ask questions and share their own personal experiences as they relate to suicide/bullying or knowing someone that have attempted suicide.

## Faith-Based Conference

Youth United presented the Suicide and Bullying Training at the DWMHA Faith-Based Conference in July. There were **12** youth participants and adults. The training focused on the signs and symptoms of suicide and what to do when someone may be having suicidal thoughts. The "Suicide Hotline" video by the artist Logic. The discussion allowed youth to recognize the signs and symptoms as well as share some personal stories of their own.

## Suicide Awareness and Back to School Event at Ford Field

Youth United helped provide arts and craft activities for the Back To School Rally in September. Youth United lead t-shirt and mask making activities and offered Youth United resources and information. The day consisted of performances by local artists, presentations, sports and fitness activities, as well as plenty of local resources for everyone. All youth and children participants were able to get a book bag full of supplies before they left. There were over **300** participants.



## Princes and Princesses to Kings and Queens

The East Region's collaboration with Black Family Development, Inc.'s Youth Advocate Program (YAP) started July 2nd and ran through August 15th. The program met every Wednesday after the first week. There were 25 participants. The first day consisted of ice breaker activities, ice cream and watching the movie "Life of a King" which is about a man who went to prison and learns the game of chess. After watching the movie there was a guided discussion about the movie and how it applied to some of the current situations the YAP participants were facing. At the next session, participants received SOC 101 and Youth Involvement training along with activities. The youth were open to understanding how the System of Care relates to them and mostly wanted to discuss the impact of their actions and the juvenile justice system. The following session focused on Suicide and Bullying Training. The training consisted of facts and fiction questions about suicide and bullying, an overview of important signs and symptoms of suicide, and watching the "Suicide Hotline" video by the artist Logic and the "It Gets Better" video by Todrick Hall with a discussion following. Youth also heard personal stories shared by Youth Advocates and were given an opportunity to share some of their own personal stories as they relate to suicide and bullying. The youth also participated in trainings on Conflict Resolution, Youth and Trauma, Character and Relationship Building and Job-Seeking Skills.

The closing ceremony for the Youth United and BFDI YAP program collaboration was held on August 15th. Youth participants were awarded for their completion of the program through the summer. As they received their awards, they were crowned as a King or Queen and shared a few words about their experiences in the program. Over **22** youth completed the program.

# CENTRAL REGION

## FOCUS: ADVOCACY

Youth United's Central Region focuses on promoting advocacy for youth by ensuring youth representation on committees, promoting youth-friendly environments, and guaranteeing youth voices are being heard throughout the System of Care.



### Xtras Comic Book Launch Party

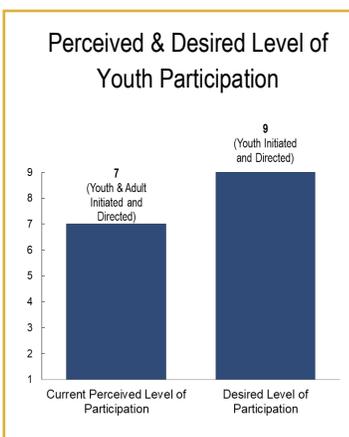
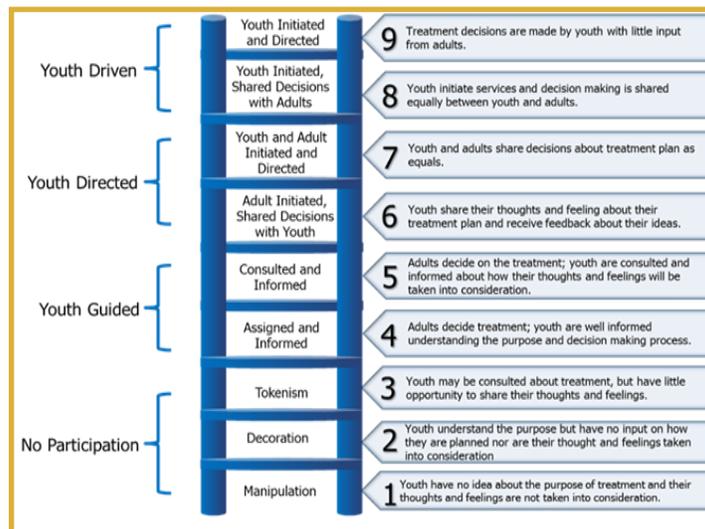
In October 2017, the collaborating team (Youth United, DWMHA, Youth MOVE Detroit, and The Children's Center) hosted a launch party for the release of Esteem Multimedia's Comic Book, "The Xtras: Forces of Courage and Change Vol.1." The launch party was held at The Children's Center and had over **50** attendees. The anti-stigma comic book was created to empower youth with mental illnesses, cultural differences, and multiple qualities that people presume to be weaknesses or things that make them appear different. The comic book includes youth who have bipolar disorder, ADHD, Asperger's Syndrome, OCD, Depression, a LGBTQ youth, and a youth that stuttered and hallucinated. Each of these characters are able to use their differences in a way that reflected a super power. During the event attendees enjoyed food, activities, and were given a free copy of the comic book. Youth and families were able to come learn about the new comic book, network, and obtain resources.

### Certifying Positive Youth Involvement Sites

To become a Certified Positive Youth Involvement Site, agencies must commit to working with Youth United in order to create an environment where young people feel informed, consulted, valued, and supported, which will enhance the quality of youth services.

Last year, "Youth Friendliness" surveys were handed out to 30 youth. The survey was based on "Hart's Ladder of Youth Participation" to certify sites that meet certain standards. Data is still being reviewed. Those who don't meet requirements will receive recommendations and also have an opportunity to take the survey again to achieve certification.

### HART'S LADDER OF YOUTH PARTICIPATION



Youth completing the survey were asked to share ways the agency has helped them feel welcomed, comfortable, or empowered:

- ▶ "By being open minded and helping me get through decision making problems..."
- ▶ "Helped me get out of my comfort zone and socialize with other kids."
- ▶ "They let me make my own decisions, they let me decide if I want to continue here or not."
- ▶ "Being understanding and treating me as they would a friend."
- ▶ "Let me make decisions concerning my treatment."
- ▶ "Took my feelings seriously."

# Youth M.O.V.E. Detroit

Youth M.O.V.E. Detroit is Youth United's Youth Advisory Council. This council was created to serve as a System of Care committee for youth throughout Wayne County. The Youth M.O.V.E. Detroit meetings give youth the tools to build their leadership, presentation, communication, and a host of other skills to add to their resume. These meetings also allow them to share concerns and find solutions by utilizing their community and lived experiences, network and share information that other youth can benefit from, attend multiple training opportunities, and empower youth throughout Wayne County. **M.O.V.E. stands for Motivating Others through Voices of Experience.**

## Statewide Youth Summit

On August 9 of 2018, several partners hosted the 2nd Annual Statewide Youth Summit in Dearborn. There were nearly **100 youth** in attendance who enjoyed workshops about racism, community organizing, and social media and marketing.

This year's keynote speaker was Fable the poet, a Grand Rapids based Mental Health Awareness Advocate and Teaching Artist. He talked about empowering youth by sharing personal stories and inspirational spoken word. Attendees shared their talents of singing, poetry, comedy, and spoken word during the open mic portion of the event.



Youth who attended shared very powerful feedback and expressed interest for attending the next summit.



## Youth Rockstar Leadership Award

During the University of Maryland, Baltimore Training Institutes Conference located in Washington D.C., Youth M.O.V.E. Detroit received a national Youth Rockstar Leadership Award for "Youth Chapter of the Year." Receiving this award shined a light on all the hard work of Youth M.O.V.E. Youth United was even given the opportunity to send one of the Youth M.O.V.E. Detroit members to participate in the conference and to accept the award on behalf of Youth M.O.V.E. Detroit.

## Open House

On September 14, 2018, Youth M.O.V.E. Detroit and Youth United hosted an Open House at The Children's Center which was attended by over **40** people. This event was geared towards Youth M.O.V.E. Detroit recruitment for the youth advisory council. The theme was Artistic Expression and youth speakers came out to share some comedy, singing, dancing, poetry, and spoken word. A few Youth M.O.V.E. Detroit members were able to come speak about their experience with being a part of Youth M.O.V.E. Detroit and how it has impacted them. In addition to activities and food, attendees were also able to connect to resources.



## Executive Leadership Calls

Youth M.O.V.E. Michigan is a collaborative body made up of various chapters within the state. It is part of a national movement devoted to improving services and systems that support positive growth and development by uniting the voices of individuals who have lived experience in various systems. A bi-monthly executive leadership conference phone call was initiated, which allows Youth M.O.V.E. executives to partner with Youth United to coordinate creating their own agendas and projects. The leaders had input on what projects they would like to work on, agendas for meetings, icebreakers, team builders, as well as topics and speakers for upcoming meetings. Youth were also able to team up with FAFC and utilize workshops they previously created in Youth M.O.V.E. Detroit meetings and facilitate these workshops with their Future Stars Group.



# FAMILY ALLIANCE FOR CHANGE

Family Alliance for Change (FAFC) is a parent driven, peer-to-peer service with the objectives of supporting, educating and empowering parents with special needs children to meet their family’s goals. FAFC provides a family/youth friendly atmosphere where family support, advocacy, referrals, resources and education are offered to all Wayne County Families.

## TRAINING & ADVOCACY

### PARENT FORUMS

FAFC partnered with Southwest Counseling Solutions (SWCS), Northeast Guidance Center, The Children’s Center and Hegira Programs Inc. in hosting quarterly Parent Forums, with a total of **83** participants. The Forums discussed the following topics, “When is Medication Necessary in Treatment,” “Opioid Crisis,” “Community Safety,” and “Caring for someone with a Mental Illness.”

### FOCUS GROUPS

FAFC partnered with four CMH contract provider agencies, two Detroit Public Schools Community District schools, and one church to host Focus Groups, where participants shared their community concerns, community needs, training needs, and solutions. **103** new parents attended.

### THREE-WEEK PARENT LEARNING SERIES

FAFC partnered with four CMH contract provider agencies to host a three week Parent Learning Series, where **42** new parents/caregivers were trained on Trauma, Secondary Trauma, the Fatherhood Initiative, Self-Care, Boundaries and SMART Goals.

### SOC ADVISORY COUNCIL MEETINGS

**157** parents participated in the SOC Advisory Council meetings. The council worked on developing Operating Guidelines and implementing Cultural and Linguistic Competency (CLC) Tenets and assessment recommendations.

### TWO-PART TRAUMA TRAINING

FAFC partnered with four CMH contract provider agencies, two local churches, and one DPS Community District school to train over **115** new parents on “Introduction to Caring for Children who have Experienced Trauma,” and “Secondary Trauma.”

## Parent Support Partners (PSPs)

Since FAFC transitioned to Southwest Counseling Solutions in September 2017, PSPs now work in-house at their assigned CMH contract provider with Southwest Counseling Solutions hosting the FAFC Hub.

**315**

FAMILIES SERVED

**4**

NEW HIRE PARENT SUPPORT PARTNERS

**15**

PARENT SUPPORT PARTNERS ACROSS WAYNE COUNTY

**12**

PSP PROFESSIONAL DEVELOPMENT/ TECHNICAL ASSISTANCE MEETINGS WITH AVG 80% ATTENDANCE

**15**

PSPs ATTENDED WRAPAROUND CONSULTATION

## EVENTS & ACTIVITIES

### OPEN HOUSE 2017

FAFC/SWCS hosted an open house on September 29, 2017 to engage the community, announce the new FAFC location, and educate about continuing services. **164** people attended.

### HARVEST FEST

FAFC partnered with Inner Circle for a Harvest Fest on October 31, 2017. This free community event was held at the Michigan Science Center. FAFC gave out **600** free admission tickets across Wayne County, representing half of the event capacity of 1,200. FAFC also provided shuttle services, and around 50 families utilized the transportation to attend the event.

### AUTUMN COMMUNITY DINNER

FAFC hosted an Autumn Community Dinner on November 15, 2017, celebrating and honoring the community. This event was held at St. Anthony's Church with **200** guests attending.

### SANTA DAY

FAFC collaborated with American Indian Health and Family Services and Youth United for the annual Visit with Santa event. Over **50** people attended the event held at AIHFS.

### EASTER EGG HUNT

FAFC collaborated with Southwest Housing Solutions Resident Services, American Indian Health and Family Services, and Youth United for the annual Easter Egg Hunt on March 29, 2018. The hunt was held at St Anthony's Church and **200** people attended.

### BACK TO SCHOOL BASH

FAFC collaborated with Youth United on a Back to School Bash held at Clark Park on August 16, 2018. **300** uniforms and over **300** backpacks filled with school supplies were distributed. **1,096** people attended the event.

### FUTURE STARS

FAFC collaborated with Youth MOVE Detroit and Youth United, in facilitating the monthly Future Stars program. **50** youth ages 8—16yrs were engaged to take leadership roles throughout the SOC.

## SUPPORT GROUPS

### SPANISH SUPPORT GROUP

**148** Spanish Speaking parents attended FAFC's bi-monthly Spanish Support Group.

## BILINGUAL SELF-HELP CENTER

**75**

WAYNE COUNTY RESIDENTS SERVED

**5**

TRAINED LEGAL SELF-HELP NAVIGATORS





# FATHERHOOD INITIATIVE

The mission of the Wayne County Fatherhood Initiative (WCFI) is to support healthy families through nurturing fathers and male caregivers.

## MARCH DADNESS

WCFI hosted the second annual March DADness event on March 16, 2018. This event was held simultaneously at three locations, in midtown at The Children's Center, in southwest Detroit at Southwest Counseling Solutions and in east Detroit, and at the Samaritan Center by Black Family Development, Inc. Dads were able to watch their favorite college teams play in the national college basketball tournament as they received resource information pertaining to Fatherhood programs, health services, legal aid, education and employment opportunities, as well as services provided by the community health agencies. This event drew **105** attendees.



## DAD-AND-ME 3-ON-3 BASKETBALL TOURNAMENT

WCFI, Detroit Health Department and S.A.Y. Detroit Play partnered to present this event which was held on September 15, 2018. Fathers and father-figures captained teams of four, which included their sons and daughters, and competed in this basketball tournament at the S.A.Y. Detroit Play center. Vendors provided health related information and attendees were able to receive free blood pressure tests. Former Detroit Piston Grant Long spoke to the crowd about the importance of fathers and family engagement. He also presented trophies to first and second place teams. This event drew **50** participants.



## MOVIE DAY FOR DADS

WCFI partnered with the Detroit Health Department and Black Family Development, Inc. to host "Movie Day for Dads." This event was held on June 16, 2018 at the Bel Air Theater in Detroit. Families were able to treat dads to a viewing of the movie "The Incredibles 2," receive a free blood pressure check-up, and go home with resources pertaining to safe sleep, mental health and breastfeeding. This event drew **120** attendees.





## WCFI 6TH ANNUAL FATHERHOOD FORUM

“Fathers Breaking Barriers” was the theme of the Fatherhood Forum, held at Greater Grace Temple. The keynote address, “Unmasking Fatherhood,” was presented by Cole Williams. Mr. Williams addressed the role of fatherhood vs. manhood and the impact that role modeling has on fatherless fathers. This event drew **159** attendees.

### Event Highlights:

- ▶ Q&A workshop with the Wayne County Friend of the Court, providing information about services and programs that support dads
- ▶ “Breastfeeding for Brothers,” which provided information about how fathers can support mothers as they breastfeed infants
- ▶ The “Strong Fathers, Strong Families” panel, made up of fathers of diverse backgrounds, discussed the importance of engaging with children and shared some of the personal barriers that they have faced



## LOOKING AHEAD TO 2019

The WCFI committee will continue to expand with new representation by the Early Childhood Head start program Thrive by Five, fatherhood programs “Good Fathers Only” and F.A.R.M. (Family Assistance for Renaissance Men), and Southwest Counseling Solutions/FAFC.

Upcoming projects for 2019 include:

- ▶ 3rd Annual March DADness: March 2019
- ▶ 7th Annual WCFI Fatherhood Forum: June 2019
- ▶ CHI RHO DELTA: A partnership between WCFI, The Children’s Center and Detroit Health Department to develop a program supporting fathers and young males through various workshops



# CROSS SYSTEM YOUTH

▶ CYPM ▶ ICBS ▶ Baby Court ▶ Juvenile Mental Health Court ▶ TFCO ▶ SED-Waiver

## Crossover Youth Practice Model (CYPM)

The Crossover Youth Practice Model (CYPM) addresses the unique needs of youth that are at risk of or are fluctuating between the child welfare and juvenile justice systems. These youth are commonly referred to as “crossover youth.”

### CYPM IMPLEMENTATION TEAM

The implementation team meets monthly to discuss ways that the CYPM can be consistently implemented within a system and ensure that resources are shared between systems to maximize their impact. A monthly case analysis is presented between the Care Management Organizations (CMOs) and Department of Health and Human Services (DHHS) case worker to establish an action plan for the youth and assist in creating an open communication forum between the agencies, ensuring that workers are exchanging information in a timely manner, and maximizing the services utilized by each system to prevent crossover from occurring. The team also develops ways to improve peer-to-peer learning opportunities with other sites in the CYPM network. Ongoing implementation of the CYPM initiative can help jurisdictions strengthen their organizational structure and develop or improve practices that have an impact on the day-to-day experiences of youth who have crossed over or are at risk of crossing over.

### TRAINING

There have been five trainings and an additional one will be scheduled on the Practice Model. The trainings are a collaborative effort by DHHS, Wayne County Health Veterans and Community Wellness and Assured Family Services.

The CYPM has four goals:

1. Reduction in the number of youth crossing over and becoming dually-involved;
2. Reduction in the number of youth placed in out-of-home care;
3. Reduction in the use of congregate care; and
4. Reduction in the disproportionate representation of youth of color, particularly in the crossover population.

**25 youth served**





# Integrated Community Based Services (ICBS)

**100%**

Youth had a SED or DD Designation

ICBS is a collaborative partnership between Community Mental Health and Juvenile Justice to ensure clients receive all available services. Youth are linked to treatment and support services in addition to or in lieu of mental health treatment.

**73%\***

Linked to services and supports

\*Based on figures from 4/5 CMOs.

**747**

Youth received ICBS Care Coordination in FY17-18

**5**

Partnering CMOs

## % OF YOUTH CONNECTED TO SERVICES BY CMO

**78%** Bridgeway

**68%** Central Care Management Organization (CCMO)

**74%** StarrVista

**70%** Western Wayne Care Management Organization (WWCMO)



# Baby Court

The Wayne County Baby Court is a specialized court within the judicial process with a focus of providing Infant Mental Health (IMH) services for infants and toddlers under the jurisdiction of the Family Court. In collaboration with Department of Health and Human Services (DHHS) and Community Mental Health providers, Baby Court aims to improve safety, permanency, and well-being for children in foster care. One goal for Baby Court is to secure funding to hire a coordinator to support and expand the cross system collaboration, coordinate referrals, and track outcome data. Wayne County also participates in state-led Baby Court efforts, including a new plan to develop an educational video to help increase support from stakeholders.

## ACCOMPLISHMENTS

- ▶ Baby Court remains a specialized docket. This process was first implemented in FY16-17.
- ▶ In August 2018, a Baby Court Training occurred which trained **26** IMH Clinicians, **9** DHHS workers and **10** Lawyer-Guardian Ad Litem (LGALs).
- ▶ DHHS and Child Protective Services (CPS) are making efforts to minimize removals by increasing the number of "in-home" placements.





# Juvenile Mental Health Court

The Juvenile Mental Health Court (JMHC) is a problem-solving court that combines judicial supervision with community mental health and other support services in an effort to reduce court contact and improve the quality of life for program participants.

## MISSION

The mission of the Third Circuit Court’s Juvenile Mental Health Court is: to identify youth with mental health issues and divert them from the formal court docket; to connect youth and their families to appropriate services in the community; to reduce the number of youth with mental health issues who reoffend; and to increase adherence to appropriate services for mental health issues by using a multidisciplinary team approach to develop and monitor service plans and compliance.

## SERVICES

- ▶ Youth and their families have **weekly status review hearings** and Judge Edward Joseph closely monitors JMHC cases. The Judge rewards progress through the program with various incentives and sanctions noncompliance with graduated sanctions.
- ▶ **Clinical services**, such as clinical assessments, home-based therapy, medication reviews, and group therapy are provided by DWMHA partners.
- ▶ **Case management** and other community support services, such as drug testing, assessment and treatment referrals, are provided through the Court’s Case Management team.
- ▶ **Education Advocacy** is provided by the Michigan Children’s Law Center. They assist in scheduling and attending and designing Individual Education Plans, 504 Plans, Determination Review Hearings, and school disciplinary proceedings.
- ▶ JMHC engages in **community service projects** and hosts **educational events** such as NAMI In Our Own Voices and the Michigan Organization on Adolescent Sexual Health (MOASH) Sexual Awareness class.



Judge Joseph, Clinic Staff, and JMHC staff at Gleaners Community Service Project



Judge Joseph, Zenell Brown, Deborah Nelson, Roland Smith, Dr. Lindsay Carr, Judith New and Sam Porter speaking at Fellowship Chapel for Adoption and Foster Care Month. Event sponsored by Michigan Children’s Law Center.

## CLINICAL SERVICE PROVIDER PARTNERS

- |    |                             |   |                                |
|----|-----------------------------|---|--------------------------------|
| 15 | Clinic for Child Study      | 1 | Southwest Counseling Solutions |
| 1  | Starfish Family Services    | 2 | The Guidance Center            |
| 3  | Development Centers         | 1 | The Children’s Center          |
| 1  | Lincoln Behavioral Services |   |                                |



Youth & Families Served



Successful Graduates



Active Participants



Pending Admissions



# Treatment Foster Care Oregon (TFCO)

Treatment Foster Care Oregon (TFCO) is an evidence-based practice developed as a community-based alternative to hospital, residential, and other inpatient treatment settings for children with significant emotional and behavioral challenges. TFCO offers intensive, behaviorally-focused, and data-driven clinical treatment in a non-restrictive and community-based setting. Detroit Wayne Mental Health Authority (DWMHA) is one of two sites in Michigan chosen to pilot this model, offered as a service for children and youth enrolled in the Serious Emotional Disturbance Waiver (SEDW). The Children’s Center (TCC) was selected as the first service provider by DWMHA to serve children in Wayne County.

## ACCOMPLISHMENTS

- ▶ **2** therapeutic homes successfully completed the MDHHS licensing process.
- ▶ **4** therapeutic homes are currently completing the licensing process.
- ▶ **4** therapeutic parent orientations were held for prospective therapeutic parents.
- ▶ **11** therapeutic parents and prospective therapeutic parents attended the TFCO Therapeutic Parent Training
- ▶ **5** TCC clinical staff completed the TFCO Clinical Training
- ▶ A client screening and referral form was created and disseminated to program partners and potential referral sources throughout Wayne County.
- ▶ **5** client referrals were received and reviewed with TFCO Consultants, with first placement planned for October 2018.



Team Leader, Julia Cohen, and Recruiter, Marian Kidd, with therapeutic parents after completing the TFCO Therapeutic Parent Training.

The Serious Emotional Disturbance Waiver (SEDW) program provides an array of community mental health services to children and youth ages 0-21 who are involved with child welfare, have been adopted, or are seeking community mental health services under Medicaid.

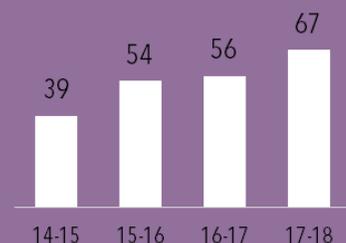
## ACCOMPLISHMENTS

- ▶ Two additional sites were added to the SEDW provider listing, resulting in an increase in the number of youth served during the fiscal year.
- ▶ DWMHA hosted a training for all 5 SEDW providers outlining the process and procedures.
- ▶ Protocols and procedures were created to eliminate SEDW providers’ direct entry into the statewide CHAMPS system.
- ▶ The Treatment Foster Care Oregon (TFCO) model launched as a Children’s Therapeutic Foster Care (CTFC) treatment service for children and youth enrolled in SEDW.

## AGENCIES

- ▶ Black Family Development, Inc.
- ▶ Development Centers
- ▶ Southwest Counseling Solutions
- ▶ The Children’s Center
- ▶ The Guidance Center

# Served by Fiscal Year



# SED Waiver



# INTEGRATED CARE

## Screening Kids in Primary Care Plus

Screening Kids in Primary Care Plus (SKIPP) continues to work successfully in two clinic sites, Beaumont Family Medicine in Westland and Henry Ford Pediatrics, New Center One location. The embedded Pediatric Behavioral Health Consultant works on the medical team to detect mental health and other needs during the pediatrician visit and co-manages patient care within the medical team. A total of 655 patients were served, including 407 at the clinics and 248 receiving phone service.

### TRAINING & WORKFORCE DEVELOPMENT

- ▶ Resident training on Children's Mental Health and Social Determinants of Health
- ▶ MSW training on Integrated Health Care
- ▶ Community-based CMH "Rounds" program for medical Residents who spent 1/2 day in the children's mental health program to learn about the system and services provided to children in their service community.



#### TRAINING FEEDBACK

One Resident wrote: *"When I envision the future of medicine the services you provide fuel my thoughts on how to add back the caring and compassion that has gradually been muted in medicine."*



### TRAUMA-INFORMED CARE

The Behavioral Health Consultant brings trauma-informed practices to medical clinic patients by implementing trauma screenings during patient assessments and providing psychoeducation regarding the impact of trauma on childhood development to families. Additional trauma-focused trainings were offered to clinic staff and medical students, and pamphlets, posters, and handouts were developed about trauma and the importance of trauma-informed care.



# MC3: Michigan Child Collaborative Care

The MC3 is a contracted service provided by the University of Michigan to Wayne County through a sub-contract with the DWMHA to Starfish Family Services. The MC3 program provides psychiatry support to primary care providers in Michigan who are managing patients with behavioral health problems. Psychiatrists are available to offer guidance on diagnoses, medications and psychotherapy interventions so that primary care providers can better manage patients in their practices. Support is available through same-day phone consultations to referring providers. MC3 also provides an embedded Pediatric Behavioral Health Consultant to a pediatric medical practice in Wayne County.

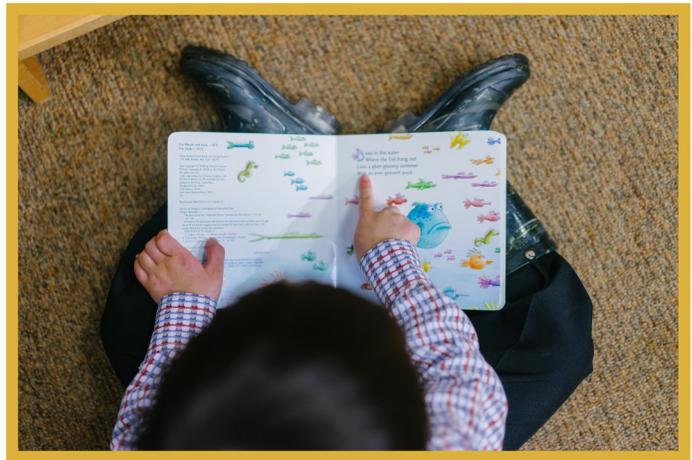
## ACCOMPLISHMENTS

- ▶ A second pediatric clinic was added, and the clinic's three providers were trained on the importance of screening and early intervention for mental/behavioral health concerns. Over **107 families** received services at the clinic.
- ▶ The embedded Behavioral Health Consultant was able to complete over **190 consults** in the original clinic and establish a referral workflow with providers and other local CMH agencies that support the clinic's patients.
- ▶ MC3 has increased its capacity to provide same day psychiatric consultations to family medicine and perinatal providers.
- ▶ Utilization rates for MC3 services have **increased by 65%**.

# MC3 Encounters



FY16-17      FY17-18



## Pediatric Integrated Healthcare Workgroup

The Pediatric Integrated Health Care work group is a sub-committee of the Cross Systems Management leadership collaborative for children's service providers in Wayne County. Committee membership is comprised of children's service providers and system partners currently working toward having an integrated model of mental and physical care for their patients. The focus of the group is to create a model for managing physical health issues that impact pediatric patients (specifically diabetes, obesity, and asthma), identifying barriers, system problem solving and advocating for changes in order to create a cohesive integrated health care model for all children's providers.

In FY17-18, the Workgroup refocused attention to the management of children's health diagnoses for Children's Mental Health providers. The group is working to better equip providers to address the physical health care needs of children in care. Asthma will be the first health care need addressed, followed by obesity. The group has created a baseline of care and a training package for Children's Mental Health providers pending feedback and approval from the Cross Systems Management team. Barriers to actual service provision and billing for services provided will also be addressed as the group moves forward.



# SCHOOL BASED MENTAL HEALTH

## School Based Mental Health Initiative (SBMHI)

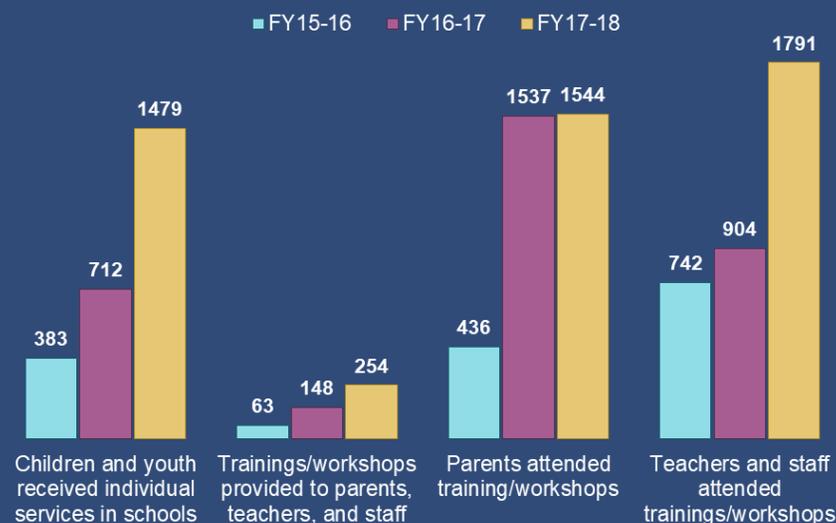
The School Based Mental Health Initiative (SBMHI) is provided by 12 Community Mental Health agencies in Wayne County. The focus of SBMHI is to deliver prevention services to Tier 2 children and youth as well as parent education groups and professional development for educators. Tier 3 children and youth will be directly referred for Community Mental Health Services.

### SERVICES OFFERED BY CMH PROVIDERS

- ▶ Assessments
- ▶ Individual and group therapy
- ▶ Crisis intervention
- ▶ Targeted case management
- ▶ Parent education groups
- ▶ Professional development for educators

Behavioral health services are provided by **12 DWMHA agency partners** to students and families of **73 Wayne County Schools**

Numbers Served Over 3 Years



	# Trainings	Attendance
Parents	128	1,544
Teachers/Staff	126	1791
Total	254	3,335

### HICKS ELEMENTARY PILOT

Development Centers moved into a partnership with Hicks Elementary at the beginning of the school year. This is a pilot program that is looking to screen all students for potential mental health/behavioral concerns and connect those eligible with CMH services or prevention services.

Since the beginning of the school year, Development Centers has had a therapist located at Hicks Elementary full time. Development Centers has worked with the school staff and administration to integrate into the school culture and meet students, teachers, and parents. Development Centers is in the beginning stages of screening ALL students using the Strengths and Difficulties Questionnaire (SDQ), and with rescreening all students with Tier 2 and Tier 3 two additional times throughout the school year. This pilot will utilize the 3 Tier system. Hicks Elementary will provide data for students regarding attendance, tardiness, suspensions and grades.

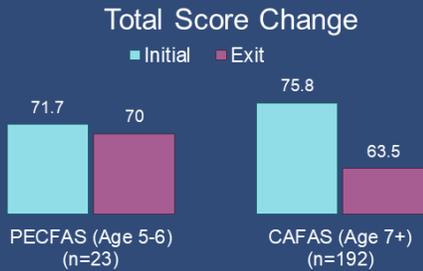


# OUTCOMES

The Child and Adolescent Functional Assessment Scale (CAFAS) and the Preschool and Early Childhood Functional Assessment Scale (PECFAS) are used to assess functioning across critical life subscales and yield both a total score and subscale scores (See page 45 for more information). Functional outcomes were measured for children and youth receiving individual CMH services through the SBMHI.

## AVERAGE TOTAL SCORE CHANGE

The CAFAS or PECFAS total score can be used as an overall measure of functioning. A reduction in Total Score indicates improvement.



## SIGNIFICANT FUNCTIONAL IMPROVEMENT

Significant Improvement is defined by a reduction in score of at least 20.

AGE 5-6  
(N=23)



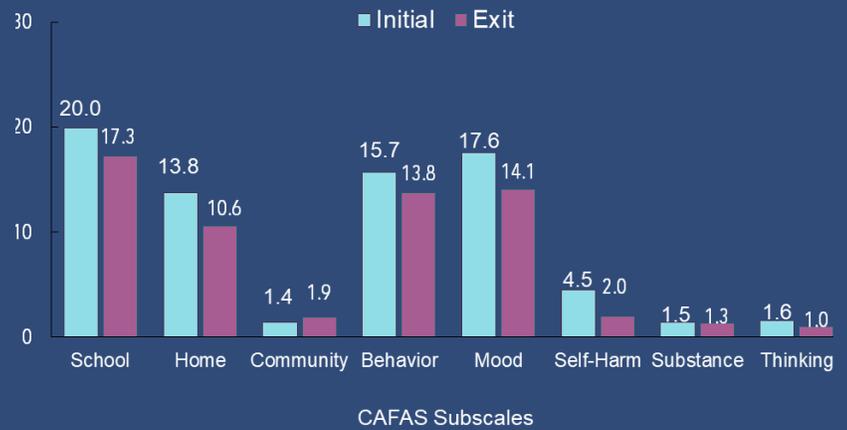
AGE 7+  
(N=192)



## AREAS OF IMPROVEMENT

Change in subscale scores demonstrate improved functioning in specific life domains. Paired sample t-tests revealed significantly reduced scores on average for School ( $t=-3.52, p<.01$ ), Home ( $t=-4.93, p<.001$ ), Behavior ( $t=-3.35, p<.01$ ), Mood ( $t=-5.62, p<.001$ ), and Self-Harm ( $t=-4.42, p<.001$ ).

## Average CAFAS Subscale Scores at Initial and Exit

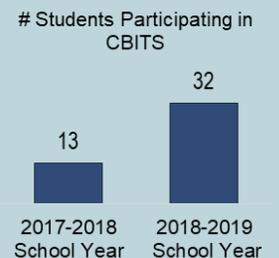
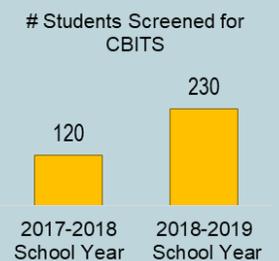


N=192 youth age 7+. Youth must have more than one assessment and be inactive or have an Exit CAFAS during the fiscal year.

# Cognitive Behavioral Intervention for Trauma in Schools (CBITS)

Cognitive Behavioral Intervention for Trauma in Schools (CBITS) is a program designed to be implemented in the school setting using both groups and individual interventions. It is designed to reduce symptoms of PTSD, depression, and behavioral problems. It is also designed to improve functioning, grades, attendance, support, and coping skills. CBITS can be used with students in 5th through 12th grade who have witnessed or experienced traumatic life events such as community and school violence, accidents, physical abuse, violence, and disasters. CBITS uses cognitive behavioral techniques such as psychoeducation, relaxation, problem solving, cognitive restructuring, and exposure.

During the 2017-2018 school year, Development Centers implemented CBITS in three schools in Wayne County. Overall, over 120 students were screened for eligibility for the CBITS group. Of those students that were screened, interviewed, and consent was obtained, 13 students participated in CBITS groups. At the start of the 2018-2019 school year, Development Centers screened over 230 students in three schools. At this time, interviews are being conducted to determine eligibility and parent consent is being obtained. It is anticipated that approximately 32 students will participate in CBITS groups.





# SPECIAL POPULATIONS

## Cornerstone: Transition Age Youth

Cornerstone is an evidence-supported practice which provides a bridge for youth and young adults ages 16-21 as they transition into adulthood. Cornerstone services can occur individually or in a group format. Clinical topic areas focus on independent living and life skills to support youth in successfully transitioning to adulthood.

**Development Centers** has seen an increase in group engagement evidenced by increased attendance. Participants have demonstrated improvements in social skills, interpersonal relationships, and conflict resolution, and DC has developed and utilized pre/post surveys to help measure whether group objectives have been met. One participant's success included completion of Trauma Focused Cognitive Behavioral Therapy (TFCBT), which included narrative sharing with Cornerstone Group facilitator, demonstrating the connectedness and safety that the youth felt with staff. Another youth attributes employment success to skills learned in the group. Overall, participants report feeling safe and supported in this group and continue to return despite obstacles.

The **Southwest Counseling Solutions** Cornerstone group covered topics including suicide prevention; social skills; healthy relationships; art and creativity; emotional wellbeing; diversity, equality and inclusion; and self-esteem. The group also received Question, Persuade, and Refer (QPR) training and LGBTQ2S 101 training by the Ruth Ellis Center. The program also organized multiple field trips which included traveling to Lansing for the Association for Children's Mental Health (ACMH) Children's Mental Health Awareness Celebration and college campus visits. The youth celebrated many accomplishments together as 12 youth graduated high school; one made the high school football team; eight youth went on to post high school education/certificate programs; and 15 obtained employment.



At **Northeast Guidance Center**, Cornerstone groups focused on Sexual Awareness including topics such as human trafficking, self-defense, sexual abuse, and self-esteem for the first half of the year. The group embarked on an entrepreneur project, which consisted of an eight week strategic lesson based curriculum and culminated at "Lemonade Day," held at Eastern Market, where the youth earned \$1200 in lemonade sales. Total sales were matched by local business owner Dr. Ahmed Elwaseem, increasing total profit to \$2,400. Additionally, three Cornerstone members celebrated high school graduation this year and four other youth secured summer employment.

**The Children's Center** continues to see encouraging growth in youth participation in Cornerstone, more than doubling the average number of participants who attend each session compared to last year. Group topics have included self-care and self-esteem; mental and physical health; goal setting; stress management; anger management; positive relationships; money management; and job readiness and career development. TCC had a youth graduate from the Cornerstone program after being in services for over a year, which has inspired and set a positive example for peers.

**The Guidance Center** had a successful first year of Cornerstone Implementation for FY17-18. They offered two group cycles with 17 sessions that focused on topics such as social skills, financial skills, "Taking Care of You-Health," "Beyond High School-Education," and "Employment: Careers, Responsibility and Independence." To further grow attendance, TGC continues to elicit teen and parent feedback on group topics, times and barriers. Four of the youth who attended in August also returned in October, which was attributed to the friendships established within the group context.



**145**

Total youth participating in Cornerstone program

**124**

Total group sessions throughout FY17-18

**5**

Agencies utilizing the Cornerstone model

**2**

Certified Youth Peer Support Specialists

**2**

New staff trained in the Transition to Independence Program (TIP) model

**33**

Youth Served by Youth Peer Support Specialists (with an active caseload)

## Youth Peer Support Services

Youth Peer Support is a service provided by young people ages 18-26 who have lived experience with receiving mental health services, and who are willing and prepared to use their experience to support and empower the youth they are working with.

**33**

**YOUTH SERVED**

Youth Peer Support Specialists (YPSS) provide support to qualifying youth through shared activities and interventions. This Medicaid billable service can be provided individually or in the group setting. YPSS are great additions to the clinical treatment team as they work closely with the clinician and other clinical team members to help youth and families achieve the goals identified in their Individualized Plan of Service.

**2**

**NEWYPSS STAFF**

Provider agencies see the value in YPSS services and how it can augment treatment goal success and completion for youth and families. Currently, five agencies are committed to providing and expanding this service and are at various points in the hiring process.

**5**

**PARTICIPATING AGENCIES**



# LGBTQ2S



## Ruth Ellis Center (REC)

Connections partners with the Ruth Ellis Center (REC), a social services agency with a mission “to provide short-term and long-term residential safe space and support services for runaway, homeless and at-risk lesbian, gay, bi-attractional, transgender, questioning and two-spirited (LGBTQ2S) youth.” The Ruth Ellis Center serves runaway and homeless LGBTQ2S youth ages 10-30 who reside in Wayne County.

**500** LGBTQ2S young people were served at the Ruth Ellis Center in 2017

**55** Trainings held for system partners with a total of **222** participants

### GOALS

- ▶ Divert at-risk youth from the streets, institutions, inpatient/psychiatric care and substance abuse facilities.
- ▶ Reduce prevalence of suicide, risky sexual behavior, and illegal substance abuse of which is disproportionately high among LGBTQ2S youth

### SERVICES

- ▶ Quick visits for general medical issues (sore throat, rash, ear infection, cough/cold)
- ▶ Visits for longer term medical issues (asthma management, healthy weight, high blood pressure, diabetes)
- ▶ Vision and hearing screening tests with referrals
- ▶ STD testing and treatment
- ▶ HIV testing and guidance
- ▶ HIV prevention services
- ▶ Transition care for transgender youth
- ▶ Birth control
- ▶ Screening for need for emergency services

## Accomplishments

- ▶ In 2018, REC grew from 15 to 54 staff members and tripled the operating budget.
- ▶ REC was approved for 43 units of permanent supportive housing for transgender women of color that will include onsite services.
- ▶ REC hired a CFO to achieve higher level of financial planning and accountability and preparing for the 2018 Single Audit review.
- ▶ Margaret Cho was selected by Ruth Ellis Center to receive the Legacy Award at its annual Voices Gala on September 27, 2018 at the Sound Board Theatre.
- ▶ REC completed CARF survey to demonstrate standards have been met for quality services.

## EDUCATIONAL INSTITUTE

The Educational Institute was designed to create a world where LGBTQ2S youth can be safe and supported in all systems of care. It centers the experiences of LGBTQ2S youth to reform and change nationwide systems of care through educations and evaluation. This is done by:

- ▶ Focusing on restorative collaboration with a system of care
- ▶ Supporting Family Preservation
- ▶ Prioritizing evidence-based practice for quality and permanency
- ▶ Believing LGBTQ2S youth are experts in their own lives

## JUVENILE JUSTICE SERVICES

REC partners with Detroit and Wayne County Care Management Organizations (CMOs) Juvenile Justice Specialists and providers, jurists, attorneys, and other stakeholders to develop effective policies, programs and direct services for LGBTQ2S youth in the juvenile justice system. Services include training, development, and policy work offered by the Ruth Ellis Institute, as well as ancillary programming at the policy and practice levels offered by Ruth Ellis Behavioral team. Direct services can include individual, group and family therapy facilitated on-site at participating agencies and providers or at Ruth Ellis Center's Health and Wellness Center.

## FAMILY GROUP DECISION MAKING (FGDM)

FGDM assists LGBTQ2S children and youth who may be at risk for removal from their families by the State (Child Protective Services) and there is evidence that parental mistreatment may be related to the youth's sexual orientation, gender identity and or gender expression. The key goals of the FGDM are family engagement, preservation and support.

## RUTH'S HOUSE

The residential program services LGBTQ2S youth ages 12–17 in the foster care or juvenile justice systems by providing trauma-based services in a home-like setting that meets the individual needs of the youth while in care. Currently, Ruth's House may serve up to nine youth in foster care at any given time.

## FAMILY SUPPORT SERVICES PROGRAM

LGBTQ2S young people are at increased risk for a range of negative health and educational outcomes, including significant challenges to permanency. Ruth Ellis Center's Family Support Services Program is participating in a new federally funded program to increase well-being and permanency for LGBTQ2S children and youth in care. Core services of the program include targeted education to increase caregiver's knowledge and understanding of their child's orientation and gender identity to increase wellbeing and support; culturally grounded guidance to assist caregivers to engage in affirmative parenting to decrease risk and increase permanency and wellbeing for LGBTQ2S children and youth; and skill building, coaching, peer support and counseling to help caregivers address barriers to supportive placements and to increase positive interactions, support and acceptance for LGBTQ2S children and youth.



## RUTH ELLIS HEALTH AND WELLNESS CENTER (HWC)

The HWC was designed to address the critical unmet need of improving overall health and wellbeing outcomes for homeless LGBTQ2S youth in Metro Detroit as a direct result of increased access to high-quality, culturally competent health care at no cost to youth. Ruth Ellis Center entered into a formal service agreement with Henry Ford Health Systems (HFHS) School-Based and Community Health Program and the HFHS Global Health Initiative (GHI). 150 consumers were served in 2017.

The HFHS GHI is aimed at identifying health issues that affect marginalized and vulnerable populations at home to implement and evaluate sustainable solutions. This type of health service coordination is the first of its kind in Michigan.

## THE SECOND STORIES DROP-IN CENTER

A 5,000 square foot space located on the second floor of 77 Victor St. in Highland Park, the Drop-In Center provides low-barrier access to critical safety-net and support services. Services include cyber center and internet access, recreational space, peer-facilitated workshops, peer support and social identity groups, leadership development, and food and personal care items.



# IMPROVING SERVICE QUALITY



## Parent Management Training-Oregon (PMTO)

241

Families Served

10

Clinicians

12

Trainees

3

FIMPers (Fidelity Raters)

3

Coaches

### ACCOMPLISHMENTS

- ▶ 3 new candidates went through the PMTO individual state training.
- ▶ 2 new candidates from Black Family Development, Inc. were involved in the pilot of teaching PMTO candidates the group model first.
- ▶ 3 therapists were certified.
- ▶ 3 PMTO-informed two-day trainings were held.
- ▶ Coach Susanna Hathaway from Starfish Family Services and her colleagues presented at the World Association of Infant Mental Health (WAIMH) conference in Rome on the intersection of PMTO and IMH.
- ▶ 2 parents represented Wayne County by sitting on the parent panel at the PMTO state conference in Kalamazoo in June.
- ▶ Starfish Family Services received the Golden Loop award presented at the statewide conference which recognized their dedication to PMTO in Wayne County.
- ▶ CAFAS data is being tracked and agencies are working on cleaning up the CAFAS data as a statewide initiative.

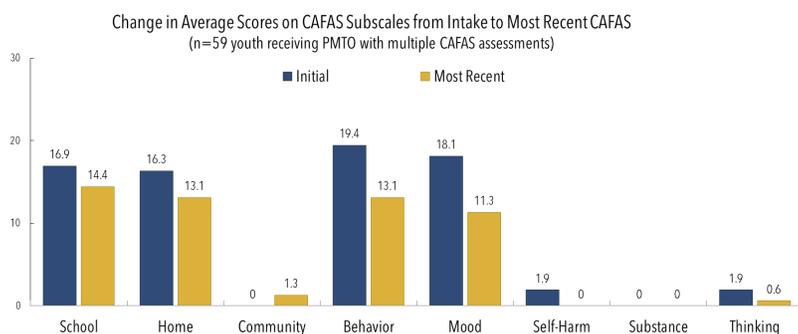
The Parent Management Training-Oregon model (PMTO) is an evidence-based intervention to help parents and caregivers manage the behavior of their children. Tailored for serious behavior problems for youth from preschool through adolescence, PMTO empowers parents as primary treatment agents to promote and sustain positive change in families.



"Golden Loop Award" goes to Starfish Family Services

### OUTCOMES

CAFAS score changes on subscales (see page 45 for information on the CAFAS) from the Initial Assessment to the Most Recent assessment showed improvement in all life domains except Community, which increased slightly.



Parents from PTC Group

# Wraparound Fidelity

Wraparound is a team-driven and family-led process involving the family, child, natural supports, agencies and community services. The process is individualized to each family and supports build on strengths to meet the needs of children and families.

## ACCOMPLISHMENTS

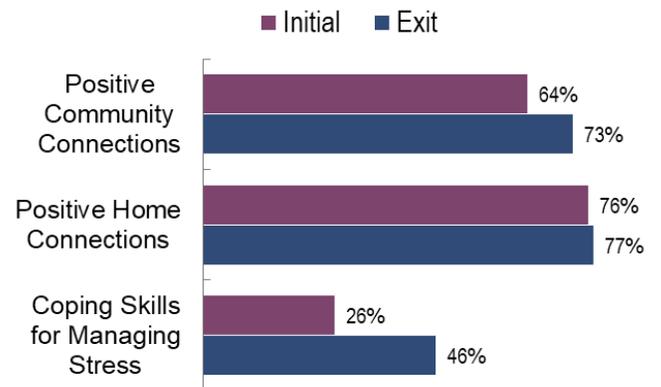
- ▶ Convened monthly Wraparound coordination meetings with provider agencies
- ▶ Updated documentation, including Continuing Care Plan, Transition Plan, and Outcome Measurement
- ▶ Developed a policy for serving families who receive Wraparound but decline clinical services
- ▶ Offered quarterly Brown Bag/Lunch and Learn trainings to all facilitators and supervisors
- ▶ National Wraparound Consultant, Pat Miles provided technical assistance to Wayne County Wraparound programs in September. She met with Wraparound Supervisors, Family Alliance for Change, and Youth United, and also provided a half day training on working with various system partners, working with "at-risk" kids and kids with self-harming behaviors, and engaging caregivers throughout the Wraparound process.



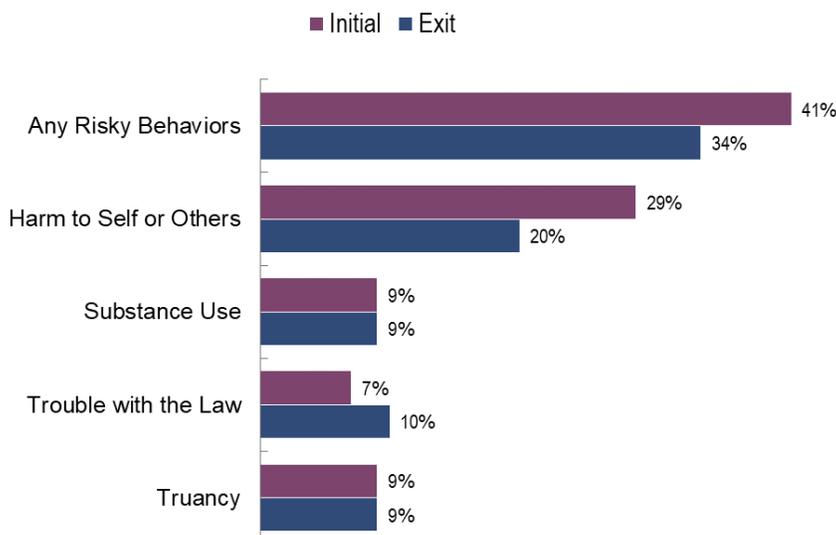
## FAMILY STATUS REPORT OUTCOMES

The Family Status Report is completed quarterly to collect dozens of indicators across a wide range of variables that examine strengths and risks in the family. The data is used to track the effectiveness of the model at the individual and county level. Selected indicators presented here represent the change from Initial to Exit for **1,446** Wraparound participants ages 7-19, served in FY14-17.

Change in Resiliency Factors

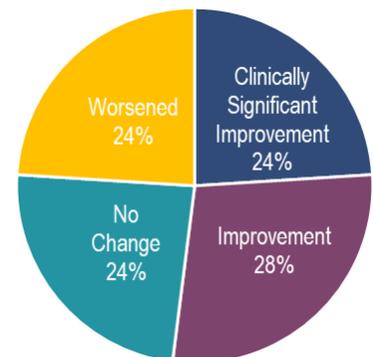


Change in Risky Behaviors



Change in Functioning (based on CAFAS)

Clinically significant improvement in CAFAS scores is a decrease of 20+ points





# EARLY CHILDHOOD

## Race to the Top

The Race to the Top: Early Learning Challenge grant is an award made to the Michigan Department of Education (2014-18) aimed in part at increasing quality in child care providers serving high need communities. As part of this grant, through funding awarded to DWMHA, Development Centers has been providing infant and early childhood social and emotional consultation to home and center-based childcare providers throughout Wayne County since January of 2017.

Childcare providers can receive programmatic consultation, which focuses on the whole center and results in improvements in environment, teaching, approach to families, and adult-child interactions that benefit all children in a center. When an individual child has been identified as having some concerns, the consultant can do a targeted consultation with the child, teacher and parents to provide additional support, and if needed, referrals to community services, including mental health.

- ▶ 12 Children have received targeted assessment and consultation
- ▶ 50 participating providers
- ▶ 2,000 Children impacted indirectly through programmatic services since January 2017

### RACE TO THE TOP GOALS

- ▶ Increase the quality of social emotional wellness in the home/center
- ▶ Provide workforce development support, tools/resources, training and ongoing coaching around social emotional health and development.



Providers have shared the following regarding the importance of these services:

*"I am writing to share with you how wonderful it has been to work with my social/emotional consultant. She has given the staff and myself ideas with how to understand children that display different behaviors. She has also helped us in understanding the parents and how to get them work as a team with us. The center has definitely improved, now we have been able to handle the kids with behavioral issues."*

*"...Social emotional consultation is one of the best resources we have been introduced to... We have seen nothing but improvement throughout our entire program. We would like to keep our consultant FOREVER."*



## Parent-Child Interaction Therapy (PCIT)

Parent-Child Interaction Therapy (PCIT) is an evidence-based treatment for young children with emotional and behavioral disorders that places the emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns. Staff at three agencies began learning this model in May of 2017.

Parent feedback has been positive, with one parent stating her relationship with her child has improved and **"PCIT was the best intervention by far."** Another parent reported more optimism regarding the relationship with her child and noted an increase of appropriate play. Overall, participants in this model report desired changes in their child's behavior and increased confidence in parenting skills.



# Infant Mental Health Endorsement

All Community Mental Health (CMH) Services Program staff delivering home-based services for infants and young children, birth to 47 months, and staff providing Prevention-Direct Services Models (IMH, Child Care Expulsion Prevention) must have, as a minimum, the Michigan Association for Infant Mental Health (MI-AIMH) Endorsement, Level II (Infant Family Specialist), with Level III (Infant Mental Health Specialist) preferred. Each endorsement level requires hours of specialized training, or coursework specific to Infant Mental Health (IMH) competencies.

## MI - AIMH Training

For FY17-18, DWMHA collaborated with the Michigan Association for Infant Mental Health (MI-AIMH) to offer a training series specific to Infant Mental Health/Early Childhood clinicians and supervisors.

**569** participants were trained on various topics such as Cultural Sensitivity; Reflective Supervision; IMH During Pregnancy and Newborn; Young Children and Trauma; Insecure Attachment; Trauma, Loss and Grief; Immigration Policies; Advocacy in Child Welfare; Sensory Processing; and Supervising IMH Cases.



# Home-Based Task Force

The Home-Based Task Force is a collaboration of service providers working to improve home based services throughout Wayne County.

## SUMMIT

This FY, the Home-Based Task Force hosted its 2nd Annual Home-Based Summit. Over 80 clinicians attended. The Summit focused on Secondary Trauma, which included a training from the Home-Based consultant, Carol Oleksiak.

## CONSULTATION & TRAINING

DWMHA has hired a consultant to provide consultation and training to the Home-Based supervisors and their teams. The consultant provided 64.5 hours of training in FY18.

## HOME-BASED CLINICIANS BY AGENCY

- 1 Arab American and Chaldean Council
- 8 Black Family Development, Inc.
- 4 Clinic for Child Study
- 8 Development Centers
- 7 Hegira Programs
- 3 Lincoln Behavioral Services
- 2 Northeast Guidance Center
- 4 Southwest Counseling Solutions
- 13 Starfish Family Services
- 6 The Children's Center
- 12 The Guidance Center



# TRAUMA-INFORMED CARE

Trauma-Informed Care continued in FY18. The Trauma Leadership (TL) Committee held six successful meetings working on various projects, one of which is the Biannual Trauma Stakeholders Leadership Breakfast. Stakeholders from different systems shared updates on ongoing trauma informed work throughout the county. There have also been various community events and activities providing education and support to schools and community groups about trauma and its potential impact on children and youth. The TL group was also tasked with updating trauma educational flyers, which will be shared across the SOC in early FY19.



## Trainings in the Community

	Attendance
Trauma and Health <i>Katie Gorney, LMSW</i>	15
Children’s Mental Health Lecture Series (CMHLS) - Resiliency Film Screening <i>Jennifer de Beausset, LPC</i>	81
CMHLS- Secondary Traumatic Stress When Working with Youth and Families <i>Tamieka S. Caldwell, MA, LLP, MPH</i>	86
Trauma and Young Children (2 trainings) <i>Michigan Association for Infant Mental Health (MI-AIMH)</i>	91

## KidsTALK Trainings

Kids Talk conducted **68 training** events October 2017- September 2018 and trained **1,809** individuals on various topics such as:

- ▶ Abuse and Neglect
- ▶ Darkness to Light
- ▶ Intimate Partner Violence
- ▶ Secondary Traumatic Stress
- ▶ Adverse Childhood Experiences (ACES)
- ▶ Mandated Reporting

## Trauma-Focused CBT

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) is an evidence-based treatment for children and adolescents impacted by trauma.

### ACCOMPLISHMENTS

- ▶ **49** total staff representing **7** agencies participated in **2** training cohorts
- ▶ **12** staff from previous FY cohorts completed training process

**46** Active TF-CBT clinicians

**161** Children & Youth Served



## CLC Assessment

In 2016, over 900 community members completed a survey assessing perception of cultural and linguistic competency in service provision, procedures, and policy. Having received results last year, participating agencies began implementing recommendations in FY18.

**Operating Guidelines:** Cross Systems Management reviewed the System of Care Operating Guidelines and added a special population consultation standard and the expectation to include Cultural and Linguistic Competency on each agenda. Additionally, the SOC Advisory Council was added to the governing bodies and the SOC Framework. CSM members signed the revised document.

**SOC Orientation Packet:** Cross Systems Management and other system/agency partners reviewed and edited the System of Care Orientation Packet to include the SOC Expansion Grant from SAMHSA, the SOC Advisory Council, and updated SOC Framework.

**Training:** Trainings were developed based on CLC assessment findings. The recommendations drove topics areas addressed in the summit, and individual providers also developed and hosted trainings and built recommendations into their strategic planning based upon the information from the reports.

**CLC Assessment Brochure:** A brochure describing the CLC Assessment is being developed and will be distributed to families.

## CHILDREN'S CULTURAL AND LINGUISTIC COMPETENCY SUMMIT

The 3rd annual Children's CLC Summit was held in 2018. Attendance was 132, a 40% increase from the previous year, and included youth and families as well as professionals. The CLC Summit will be sustained through Connections in future years.

### SUMMIT AGENDA:

- Keynote: Truth, Healing, and Radical Imagination for Change with *Elizabeth Whittaker-Walker, Director of Learning Services and Policy at the Council of Michigan Foundations (CMF)*
- Workshop A: Biased. Who Me? Couldn't Be... Then WHO? with *Daicia Price*
- Workshop B: Detroit's History and Its Impact on Implicit Bias: A Self Reflection with *Freda Sampson*
- Workshop C: Cultural Competency: An Essential 21<sup>st</sup> Century Skill with *Virginia Winters*
- Workshop D: Cultural Humility and Responsiveness (Youth Workshop) with *Kirk Lewis (Youth Workshop)*
- Workshop E: Equity and Empathy: Seeing Through a Different Lens with *Harry Weaver*
- Workshop F: Implementing Change for Cultural and Linguistic Competency: Where Do We Go From Here? with *Sandra Momper*
- Workshop G: Cultural Competency: Treating the Arab American Family with *Mona Elhady*
- Workshop H: A Taste of Culture (Youth Workshop)
- Closing: Moving Off Automatic with *Dr. Grenaé D. Dudley*

### OPEN TABLE

SOC representatives attended the Open Table Conference to learn more about the model, a faith-based model that convenes a group of community members to support young people as a team of life specialists, encouragers, and connectors to social capital. Although it was deemed not a good fit for Connections, attendees became aware of the gap in faith-based collaborations and began to identify ways to bridge that gap. Conference participants reached out to faith-based leaders during the last fiscal year, and the SOC Manager and a youth representative began attending DWMHA's Faith Based Committee to increase communication and collaboration.



# CULTURAL & LINGUISTIC COMPETENCY



# WHEN WE WORK TOGETHER THEN WE ARE WISE

“Pii Maamwinokiyaang Miidash Nibwaakaayaang”

The System of Care (SOC) Expansion grant is a partnership between Connections and American Indian Health and Family Services (AIHFS) that focuses on expanding Wayne County’s System of Care, increasing Cultural and Linguistic Competency throughout the SOC, and promoting youth and family voice. While originally a four-year off-the-shelf grant ending on June 30, 2017 the grant was awarded a one-year No Cost Extension to complete the original goals of the grant. The grant ended on June 30, 2018.



623

NATIVE YOUTH SERVED THROUGHOUT THE LIFE OF THE GRANT

## FY ACCOMPLISHMENTS

- ▶ Recommendations based upon the Cultural and Linguistic Competency Assessment were implemented.
- ▶ A Parent Support Partner hiring process was developed.
- ▶ A Parent Forum process was developed.
- ▶ Youth at AIHFS continued to meet regularly throughout the No Cost Extension Year to develop a Tribal Youth M.O.V.E. Chapter.

## TRAINING & WORKFORCE DEVELOPMENT

*From July 2017—June 2018*

- ▶ **265** individuals completed “Developing Cultural Competence in Systems of Care” online course training
- ▶ **286** individuals completed “Gender Identity/Expression in Children & Youth: Basics for Addressing Cultural Aspects” online course training
- ▶ **201** individuals completed “Intergenerational Trauma” online course training
- ▶ **248** individuals completed “Secondary Trauma” online course training
- ▶ **454** individuals completed “Trauma 101” online course training
- ▶ **36** individuals attended the February 2018 Quarterly Leadership Training on Implementation Strategies to Achieve the National CLAS Standards presented by Adam Becenti
- ▶ **130** individuals attended the 3<sup>rd</sup> Annual Cultural and Linguistic Competency Summit on June 22, 2018



## SOC ADVISORY COUNCIL

The SOC Advisory Council has made great progress in becoming sustained during the No Cost Extension (NCE) Year. The group is now led by both a parent and youth co-chair, has developed Operating Guidelines, and is working on finalizing Youth and Parent Involvement Protocols. This group provides voice and advocacy for Wayne County's System of Care. Parents and youth who are SOC Advisory Council members also regularly attend other SOC meetings to increase communication between the various bodies. In May 2018, the group elected its first secretary to help build the council's infrastructure and capacity. FAF's Parent Involvement Manager is the staff liaison for this group post-award.

18

### CURRENT MEMBERSHIP OF SOC ADVISORY COUNCIL

## PEDIATRIC INTEGRATED CARE COLLABORATIVE

In the NCE Year, AIHFS began participating in the Pediatric Integrated Care Collaborative (PICC). The PICC works with national experts, primary care providers, mental health professionals, and families to increase the quality and accessibility of child trauma services by integrating behavior and physical health services in Native communities. The learning collaborative requires a team of 5-6 individuals (including a family representative, administrator, mental health, primary care, and metrics representative) interested in improving trauma-informed care. Participants receive coaching/support from national experts in trauma-informed care for native populations, networking opportunities with tribal and urban sites, trauma-informed care tools and resources, and funding for travel and lodging. The learning collaborative includes two in-person meetings plus three webinars focused on primary care, community engagement, and metrics (ECHO model), and ongoing support. PICC is funded by Indian Health Services and is based at the Center for Mental Health Services in Pediatric Primary Care, part of the John Hopkins School of Public Health.

Participation resulted in new operational goals, policy development, implementation shared electronic records within the agency, the placement of a Behavioral Health Specialist in the medical department to provide screening, assessment, and referral services and the overall result of improved integrative care services within the agency. Healthy Start and Maternal Infant Health Program (MIHP) have been incorporated into the process.

## American Indian Health & Family Services (AIHFS)

- ▶ In the No Cost Extension (NCE) Year, AIHFS served **5** children and families in their Wraparound program
- ▶ AIHFS provided **102** Child Welfare workers training on the Indian Child Welfare Act (ICWA)
- ▶ In partnership with AIHFS youth, AIHFS staff developed a **youth engagement training** that was presented at the May 14<sup>th</sup> Wraparound Brown Bag Lunch Series and was later presented at the State Wraparound Conference
- ▶ During the No Cost Extension Year, AIHFS Youth met consistently to establish a **Tribal Youth MOVE chapter**. At this time, they are still in the developmental phase and have not yet applied for chapter membership. However, the youth have been fundraising to attend native leadership conferences and meeting to build infrastructure and capacity for their group
- ▶ In the NCE Year AIHFS hired **3 Youth Liaisons** to build youth voice throughout the agency and the community





# WORKFORCE DEVELOPMENT

## Core Competency

Core Competency trainings continued in FY18 with the help of Core Competency Trainers who provide training to all Community Mental Health (CMH) clinical staff. 307 staff received training on 7 foundational topics:

- ▶ CAFAS and PECFAS
- ▶ Crisis and Safety Plans
- ▶ Family Service Plans
- ▶ Measurable Goals/ Objectives
- ▶ Strength-Based Assessment
- ▶ Supervision
- ▶ SOC 101



## CAFAS and PECFAS

FY18 trainings were successful thanks to provider network trainers who volunteer their time to ensure the workforce receives CAFAS/PECFAS Rater Reliability training.

### CAFAS Training

- ▶ 19 Trainers
- ▶ 3 to be trained
- ▶ 6 CAFAS Initial Trainings
- ▶ 12 CAFAS Boosters

### PECFAS Training

- ▶ 10 Trainers
- ▶ 3 to be trained
- ▶ 6 PECFAS Initial Trainings
- ▶ 5 PECFAS Boosters

## Quarterly Leadership Training Series

The Quarterly Leadership Training Series was developed in FY17-18 based on feedback that more opportunities were needed to support supervisors and managers in their own growth and learning. There were four Leadership Topics offered that focused on ways to collaborate and share management, supervisory, and leadership best practices that promote quality care and efficient teams.

Quarterly Leadership Training Topics	Attendance
<b>Secondary Traumatic Stress: Policy Guidance for Organizational Leadership</b> <i>Kim Hinton, LMSW; Kevin Spizarny, LMSW; Michelle Milligan, LMSW; and Christina Crim, MS LLP</i>	14
<b>Culturally and Linguistically Appropriate Services (CLAS) Standards Implementation Strategies</b> <i>Adam Becenti, MPP</i>	36
<b>Collaborative Documentation</b> <i>Amy Delira, LMSW, IMH-E® (III); Janae Kinn, LLMSW; Riley Banks, LLMSW</i>	10
<b>Reflective Supervision</b> <i>Carol Oleksiak, LMSW, IMH-E® (IV); Sarah Shea, PhD, MSW; and Kelly Sipotz, LMSW, IMH-E® (III)</i>	4

# Peer to Peer Training Series

The Peer to Peer Training Series offers Children’s Mental Health Professionals (CMHPs) additional opportunities to further develop skills and expertise in working with youth and families, while also providing additional opportunities to earn CMHP credits.

Peer to Peer Training Topics	Attendance
<b>Integrated Health Learning Session</b> <i>Michelle Duprey, LMSW</i>	5
<b>Transitional Age Youth and Serving Minors 14+ Without Consent</b> <i>Shelly Bultje, LMSW; Michele Clark, LMSW; Melodi Litkouhi, LMSW; Noah Nelson, LLMSW; and Joseph Smith</i>	12
<b>Case Management and Supports Coordinator Community Resource Share</b> <i>Katie Gorney, LMSW</i>	7

# Children’s Mental Health Lecture Series

The Children’s Mental Health Lecture Series offers monthly training opportunities designed to improve practice. Topics of interest are identified each year by the workforce.

	Training Topic	Attendance
OCTOBER	<b>Intimate Partner Violence in Our Community: Status Offenses and Children’s Mental Health Services In Wayne County</b> <i>Sara Thornton, MA</i>	102
NOVEMBER	<b>Human Trafficking in Michigan &amp; Ethical Practice</b> <i>Angelique Yvette Robinson, MS, LLP, QMHP, CMHP; Duane Breijak, LMSW-Macro; and Jessica Lynn Winalis, LLBSW, QIDP</i>	144
JANUARY	<b>Ethics and Children's Mental Health Services</b> <i>Abigail H. Eiler, LMSW</i>	152
MARCH	<b>Resiliency Film Screening</b> <i>Jennifer de Beausset, LPC</i>	112
APRIL	<b>Substance Use and Mental Health: Differential Diagnoses and Stage Matched Treatment</b> <i>Katie Gorney, LMSW</i>	106
MAY	<b>Early Onset Psychosis</b> <i>Jeffrey A. Stanley, PhD and Linda Saab</i>	57
JUNE	<b>Your Work and the Family Acceptance Project: Working with LGBTQ Youth and Their Families</b> <i>Jessie Fullenkamp, LMSW</i>	28
JUNE	<b>Secondary Traumatic Stress: When Working with Youth and Families</b> <i>Tamieka S. Caldwell, MA, LLP, MPH</i>	86
JULY	<b>A Primer on HEDIS in the Medical World; Pain Management Issues in ADHD, Asthma, and Obesity</b> <i>Teresa Holtrop, MD</i>	55
AUGUST	<b>School-Based Mental Health Services: A Comprehensive, Community-Centered Approach</b> <i>Bethany Bowen, LMSW; Rebecca Nieman, LMSW and Candance Ziglor, LMSW</i>	89
SEPTEMBER	<b>Working with Transitional Age Youth and Their Families</b> <i>Michele Clark, LMSW and Kristina Dristy, BA</i>	102



# OUTCOMES

## MEASURING OUTCOMES

### Infants & Toddlers Age 0-3

The Devereaux Early Childhood Assessment (DECA) is used to measure social and emotional functioning in domains depending on the child's age, including initiative, attachment, self-regulation, self-control, and behavioral problems. Scores from each domain are summed into a total score and normed by age. Children scoring at or below 40 are considered to have at least one "Areas of Need," between 41-59 are considered to be "Typical," and 60+ have above average "Strengths." Positive outcomes result from an increase in total protective factors, both overall and in individual domains. The FY18 outcome analysis included **252 children** with more than one completed assessment.

### Children Age 4-6

The Preschool and Early Childhood Functional Assessment Scale (PECFAS) is used to measure functional change for preschool age youth. This assessment is an adaptation of the CAFAS, differing only in the modification of items and a lack of the Substance Use subscale. Outcomes were calculated for **856 children** whose most recent assessment was during FY18. To be included, children must have had more than one completed assessment for comparison.

### Children & Youth Age 7-21

The Child and Adolescent Functional Assessment Scale (CAFAS) is for children 7-21. Both the CAFAS and PECFAS assess functioning across critical life domains and yield both a total score and subscale scores. Subscales are rated from 0 (no impairment) to 30 (severe impairment). CAFAS/PECFAS uses several outcome indicators including a reduction in score ( $\geq 20$  points), reduction in the number of severe impairments, and reduction of score in certain subscales. Outcomes were calculated for **2,607 children and youth** with Exit Assessments during FY18.



## AVERAGE LENGTH OF STAY

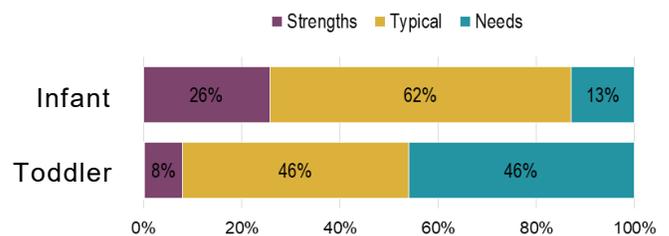
### INITIAL TO MOST RECENT ASSESSMENT

Infants & Toddlers 0-3:	11.6 months
Children Age 4-6:	10.2 months
Children & Youth 7-21:	12.8 months

## Infants & Toddlers (0-3)

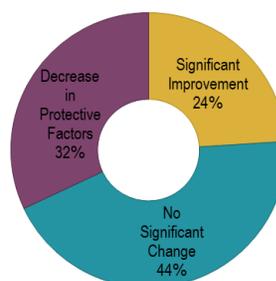
### TOTAL PROTECTIVE FACTORS AT INITIAL

Initial assessments were completed for 274 children in Fy18.

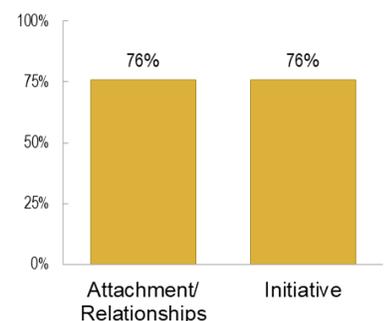


### SOCIAL & EMOTIONAL IMPROVEMENT

Change in Total Protective Factors



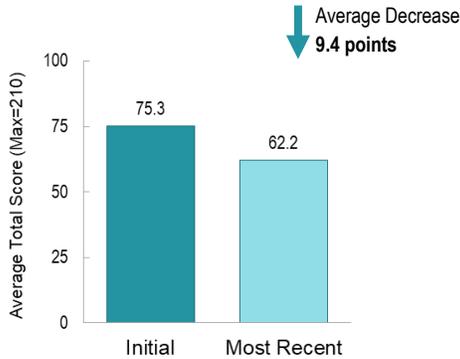
Improvement or Maintenance by DECA Domain



# Children (4-6)

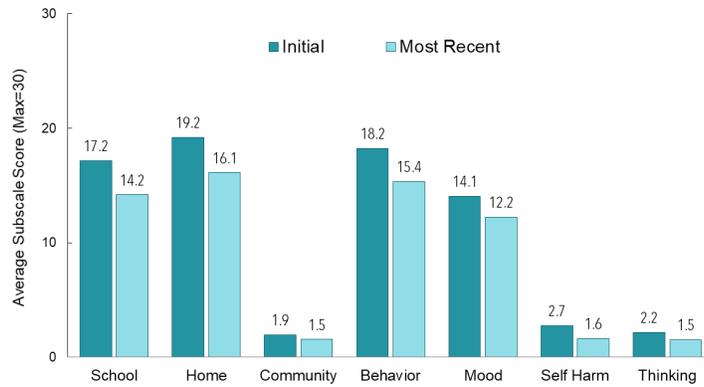
## TOTAL SCORE CHANGE

The PECFAS total score ranges from 0—210 and measures overall impairment. A 20 point reduction is considered meaningful improvement.



## SUBSCALE SCORE CHANGE

Subscales measure functioning on key life domains, and range from 0 (no impairment) to 30 (severe impairment) on that subscale.



## AT THEIR MOST RECENT ASSESSMENT:

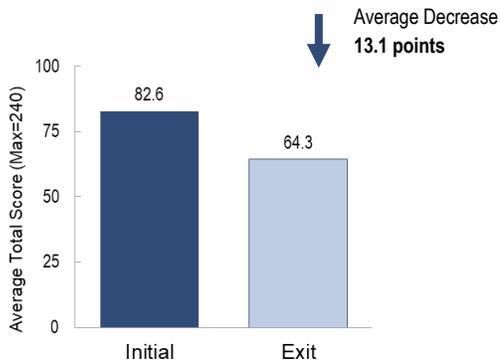
**41%** of children had a *reduction in Total Score of 20 or more points*

**49%** of children with severe impairment on at least one subscale at intake had *no severe impairments*

# Children & Youth (7-21)

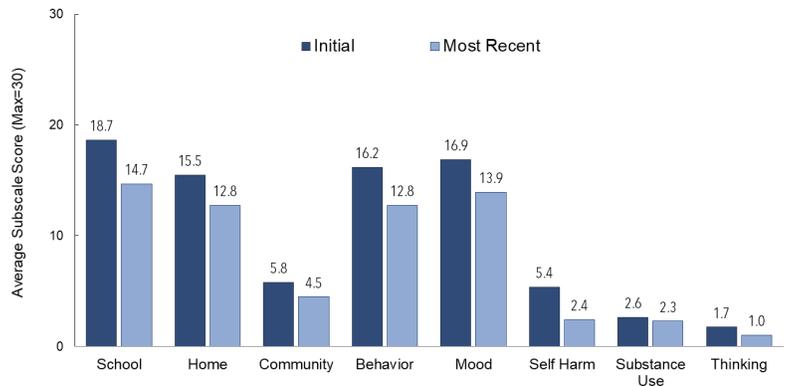
## TOTAL SCORE CHANGE

The CAFAS total score ranges from 0—240 and measures overall impairment. A 20 point reduction is considered meaningful improvement.



## SUBSCALE SCORE CHANGE

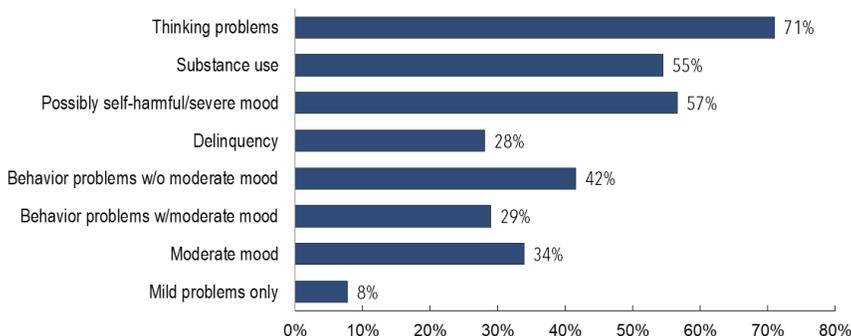
Subscales measure functioning on key life domains, and range from 0 (no impairment) to 30 (severe impairment) on that subscale. The CAFAS has an additional subscale from the PECFAS (Substance Use).



## TIER CHANGE

Subscale scores on the CAFAS are used to create hierarchical profiles called Tiers. The tiers are ranked based on the type and severity of need, with Thinking Problems ranked as the most severe and Mild Problems as the least. A decrease in tier severity is considered a positive outcome.

% Youth with Positive Tier Change by Initial Tier



## AT THEIR MOST RECENT ASSESSMENT:

**48%** of children & youth had a *reduction in Total Score of 20 or more points*

**48%** of children & youth with severe impairment on at least one subscale at intake had *no severe impairments*

**42%** of children & youth had a *decrease in Tier Severity*



“I like to say that the resilience of a child is distributed. It’s not just in the child. It’s distributed in their relationships with the many other people who make up their world. There are many different systems that contribute. And those are what I call *‘ordinary magic.’*”

- Ann Masten

**THANK YOU**

*to all our system  
partners for another  
successful year*



**WAYNE COUNTY SYSTEM OF CARE**  
**SYSTEMS IN ACTION FOR CHILDREN, YOUTH AND FAMILIES**