

RECOMMENDATIONS FOR CONSIDERATION

1. Service Coordination Assistance

- Have an approved “family friendly” resource list in each region for families to address problems when they arise.
- Provide a service coordinator to families that can coordinate and link the various services and providers.
- Implement prevention, intervention, and treatment services to address substance abuse.

2. Access to Services and Information Lacking

- Address the gaps in children’s behavioral health services by increasing training for providers specific to children and adolescent specialties to include mental health clinicians, respite care providers, day care providers, and foster care providers.
- Provide financial incentives for students in the mental health field to specialize in the children’s services field (currently a bill in congress that is addressing the shortage of children’s mental health care workers.)
- Provide a service array that includes early identification and intervention for children’s behavioral health screenings provided by pediatricians and medical personnel beginning at birth and throughout adolescence including transition services to adulthood.
- Address policies that restrict access to children’s behavioral health services.
- Do away with custody relinquishment merely to access services and to ease the burden from the courts, and use saved funds for support and direct services to families such as transportation, and respite care.
- Revise the reunification process for children removed due to behavioral health issues, to accelerate the investigation process and work with parents to provide the most appropriate services for behavioral health diagnosis.
- Initiate flexible funding strategies.

3. Awareness of MI Programs are Necessary

- Initiate a public awareness campaign (brochures, CD’s, flyers, video’s) on children’s behavioral health issues including substance abuse, on signs and symptoms, known treatments, and available services.
- Widely distribute awareness materials through a variety of settings using Nebraska Federation of Families for Children’s mental Health, NAMI, other Nebraska family support and advocacy groups to disseminate awareness materials to parents, physicians, behavioral health professionals, the public, schools, churches, day care/respite providers, businesses, etc.
- Support the dissemination of information regarding school services to parents in an uncomplicated format that makes available qualification requirements to receive accommodations for children with behavioral health disorders.

4. Array of services available with trained providers

- Address the need for community based and in-home based services for behavioral health disorders.

- Stabilize the service system to keep essential services in place such as school based wraparound services.
- Increase training for service professionals, school professionals, and paraprofessionals in family centered care practices, moving toward sanctuary models and seclusion free facilities.

5. Advocacy for Families with Mentally Ill Children

- Enhance family advocacy services to assist parents to work more effectively with the service system, so that parents' voices are heard in addressing their children's specific needs.
- Initiate a method of follow-up from professional services for families to monitor progress following services.
- Augment access to services by reducing barriers to affordable services and medications for children with behavioral health disorders.

6. Parent Persistence is essential to access services

- Formalize a comprehensive family support system by creating a single source for collaboration and coordination of family supports across Nebraska. Currently there are many family support organizations that work independently of one another, thus creating fragmentation in our family supports. An organized family support network would ensure smooth flow of services across geographical and provider boundaries, eliminating travel restrictions for families.
- Compensate families for participation in advisory committees to reduce the financial difficulties for taking time off work, for child care, and travel costs.
- Devise a method to assist families to make application for SSI less complicated and not restricted due to parent income.

7. School Adaptation Needed

- Utilize service coordinators as family advocates to support and collaborate with the schools.
- Train school personnel on behavioral health disorders and effective classroom interventions.

8. Identified Needs

- Increase the availability of Wraparound services across the state
- Organize support groups for parents, and siblings living with mental/behavioral disorders.

10. What Works

- Enhance professional partners to include service coordinator roles and functions and coordination with schools to standardize behavioral interventions.
- Train law enforcement officers on crisis intervention training. NAMI has a 1-week model used to assist officers to recognize and deescalate psychiatric crisis.
- Continue with the implementation of Family Centered Care practices for Protection & Safety and HHSS Caseworkers.

- Records for children and youth need to follow them to services.
- Provide Integrated Coordination Care Units in each Behavioral Health Region.

11. Cultural Concerns

- Because every encounter is cross-cultural develop partnerships with our families maintaining cultural humility to better understand the historical, familial, community, occupational, and environmental contexts.
- Initiate training on cultural beliefs and practices for professionals serving families to increase minority-friendly services that enhance inclusion and culturally based interventions.
- Ensure culturally sensitive and competent practices for interventions that can be individualized and applied in a family-centered fashion.

12. Youth Issues

- Include the importance of confidentiality in awareness training for professionals, para-professionals, education personnel, therapists, and treatment providers.
- Address issues of bullying in school settings.
- Continue to support youth groups such as the YES Group.
- Provide education to youth on medications used in treating mental health symptoms.
- Provide training for educators regarding mental health symptoms including medication for symptoms, and positive methods to interact with youth experiencing difficulty.
- Update treatment materials for youth hospitalized for behavioral health disorders.
- Initiate support groups for parents and siblings of youth with behavioral health disorders.