

Children's Mental Health Initiative

Serving Cass County, ND and Clay County, MN

How Important is Early Intervention?

One Mom's Story

Parenting children with special needs can be a challenge. There is no "cookie cutter" approach that works for every child. Choosing to treat your child as a unique individual may give you the opportunity to discover and utilize options that can create outcomes that may positively impact you and your child for the rest of their life.

I am a mother of three children, each of whom have brought their own unique issues to the table. When my son was three, I sought out services to assist him with some issues he was having. I went through Early Intervention services and my pediatrician. A combination of medication and therapy was the best course of action for him to strengthen his abilities.

At the same time I saw my then two year old daughter beginning to demonstrate anxiety issues that made it very difficult for her to leave my side. She was stuck to my side so much we called her "Velcro." I began talking with Early Intervention about her and we started to use some intervention practices that did make some small strides forward for her. At the age of three, I needed to get a bit more aggressive in helping her so I enrolled her

into Head Start, Early Intervention. We worked together to help her, with some, but limited success. They suggested I visit with her pediatrician about the continued anxiety. Our pediatrician made a referral to a child psychologist who diagnosed her and recommended a combination of medication and play therapy. She continued with these interventions until 5 years of age. She had huge successes with play therapy and was able to attend kindergarten with some assistance.

While my oldest daughter attended play therapy, my youngest, age two, was showing signs that she also may need some support. My four year olds play therapist suggested asking my pediatrician for a referral for play therapy for her as well. At the age of 2 ½ in play therapy she began to learn some techniques that helped her with issues of being in a room with a closed door, riding in an elevator, and being alone, among others, all things she would have to learn to be successful in life. Techniques without medication, helped

strengthen her abilities to succeed. I will never forget the first time she got in an elevator. She was nervous, but got in and showed me what she had learned in order to ride. This was the beginning to her world opening up. Her play therapist was so impressed by her "therapy only" achievements, she presented on her case at a national conference.

I believe actively perusing and receiving early intervention in the form of play therapy at such an early age is the reason that now at age of 11, I still see my daughter use techniques that she learned. She was taught needed life skills to succeed that are no less important than potty training and tying a shoes. She is proof that early intervention is critical and positively impacts lives.



Fall 2008 

Issue 3

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2008 Children's Mental Health Summit

On Tuesday, September 23rd, 51 professionals, parents and other community stakeholders gathered to evaluate the status of the children's mental health system in our community.

The summit began with an overview of the progress made on the 2007 Children's Mental Health Initiative (CMHI) Summit goals. Resources such as the Children's Mental Health Resource Guide and table, "half a child" postcards promoting the website and CMHI newsletters were presented and available for attendees.

Participants were given the opportunity to introduce themselves and provide an update of their agency, group or activities related to children's mental health, which assisted in providing community service awareness and education for those attending.

Douglas County, MN presented their project: "Beautiful Minds: Early Identification of Child Mental Health Needs." This project utilizes a hand held e-tablet containing the Ages and Stages Questionnaire-Social/Emotional (ASQ-SE) or the Pediatric Symptom Checklist (PSC), depending on age. Parents and/or guardians complete the tool while waiting to see their physician. The tools identify social-emotional, behavioral and mental health concerns. Children with elevated scores are referred to a care coordinator for follow-up, consultation, referrals and advocacy. Since the start of the project, 392 children have been screened, with 23% of them identified as having social-emotional concerns.

Summit participants later split into discussion groups to determine what CMHI goals should continue and to identify new goals to improve our children's mental health system, including the possibility of a pilot project similar to Douglas County's. Children's mental health consultation, in the form of phone and web-based services was also presented as a new option. Participants identified ways to enhance the current goals of the initiative and supported the possibility of the consultation programs.



"If you want your children to improve, let them overhear the nice things you say about them to others."



Wraparound and Family Group Decision Making

Wraparound and Family Group Decision Making (FGDM) are strength-based, family-driven, solution-focused planning and problem solving processes to help children and families with complex needs. Because the process is individualized, every child/family gets a unique plan that fits their beliefs and values. Wraparound and FGDM, also known as Family Support Models, help families achieve important changes by assisting them in identifying and meet their needs.

Family Support Models are different from traditional services in that the family drives the plan and the most important focus is the family strengths that can be drawn upon to make a positive change. A positive element of Wraparound and FGDM is that everyone who participates (adults AND children) are an important, integral part of the team. There is no blame and shame in the process. There may be issues that need to be worked out, but the neutral facilitator tries to make sure that the process is respectful and barriers are reduced.

Goals, strategies and ideas to meet unmet needs are never discussed without the family present. Team members don't create a plan for families based on their own ideas, opinions and agendas, the family, driven by the team, creates the plan. The plan consists of the family's mission or purpose for the meeting. It details what will be focused on and what they want life to look like in the future. The plan also identifies strengths, addresses needs and concerns, and ultimately sets a plan of action for how barriers will be removed and the plan will be carried out to ensure that needs are met.

If you are interested in learning more about these programs please call Aimee at: 218-287-2839

Children's Mental Health Crisis Service Program (Mobile Crisis Team)

This program is designed to serve children and their families in the MN tri-county area (Clay, Otter Tail, and Wilkin County). This program was jointly developed by the tri-county area upon receiving a grant from the State of MN with the goal to decrease the number of inpatient hospitalizations and out-of-home-placements.

The Mobile Crisis Team (MCT) provides the following:

- On-site assistance for families to address mental health and behavioral issues that a child is experiencing (ages birth to 18 years of age).
- Stabilization services with the focus of de-escalating current situation.
- Reduction of out-of-home placement and inpatient hospitalization through intervening in the child's and family's environment.
- Access to services to prevent future crises through referral to on-going services.
- Flexibility to provide crisis services to children and families who may be new to the mental health system or who are ineligible for MA or commercial third party billing due to lack of diagnostic assessment or health care coverage.
- Coordination with ongoing mental health service providers delivering ongoing services to support continuity of care.

The Mobile Crisis Team can be accessed after hours by contacting the emergency phone systems that are available throughout the three counties. The practitioner taking the call from the emergency line will determine if a call will should be forwarded to the on-call mental health professional for further consultation. The mental health professional will provide initial telephone assessment of current crisis needs and, if needed, will dispatch a two-member mobile crisis team comprised of mental health practitioners. Six mental health practitioners will be available for dispatch (two practitioners on-call in each county). These practitioners are employed by various mental health agencies under subcontract with Lakeland Mental Health Center. The on-call mental health professional will determine the most appropriate practitioner for dispatch based on the geographical location of the child and family. Dispatch of the team may be in coordination with law enforcement or by the two-member team. The mental health professional would be available for clinical consultation as needed. Hours of operation will be weekdays: 4:00 – 10:00 pm & weekends/holidays from 1:00 – 11:00 pm. If you are interested in learning more about this program, call Beth at 218-299-6674.

Laughing Matters!

How laughter can reduces stress at home and strengthen the bond between you and your child

Look for opportunities to laugh no matter how busy life gets!

Humor 101

1. When possible, make fun of a part of your daily life. Share funny things that happen in your day with your child.
2. Keep things in perspective. Can you laugh at your mistakes? How about your child's?
3. Acknowledge and reward appropriate humor in your child with attention, laughter and compliments.

Have Fun!

1. Put on comedy skits or make up commercials with your family. See funny movies.
2. Read joke books with your child. Pick out the funniest jokes and tell others!

Here is an example: Q: What did the 0 say to the 8? A: Nice belt!

**“The main ingredient
in resilience is a
sense of humor!”**

Event Calendar Fall/Winter 2008-2009

December

December 2 - "Understanding Grief & Loss through the Eyes of an Adolescent," 8:30 - 3:00pm, Marriot, Moorhead.

Cost \$55.00, NDSU Extension. Register at: www.extension.umn.edu/YouthWorkInstitute

December 6 - Gym and Supper Club, Federation of Families, 1102 2nd Ave. S., Fargo, 5:30-8:00pm (see article below)

December 16 - Rise and Shine, "Advocacy for Children," Prairie St. Johns, 8:00 - 9:00am

December 23 - Prairie Presents "Dynamics of Suicide and Self-Mutilation," Prairie St. Johns, 12:00 -1:00pm

January

January 3 - Gym and Supper Club, Federation of Families, 1102 2nd Ave. S., Fargo, 5:30 - 8:00pm (see article below)

January 20 - Rise and Shine, "Current Drug Trends from a Law Enforcement Perspective," Prairie St. Johns, 8-9:00am

January 27 - Prairie Presents "Current Drug Trends from a Medical Perspective," Prairie St. Johns, 12:00 -1:00pm

February

February 7 - Gym and Supper Club, Federation of Families, 1102 2nd Ave. S., Fargo, 5:30 - 8:00pm (see article below)

February 17 - Rise and Shine, "The Circle of Conflict: Finding the Hidden Gems," Prairie St. Johns, 8:00 - 9:00am

* Trainings at Prairie St. Johns are held at 510 4th Street S., Fargo. Trainings are free but registration is required at: registration@prairie-stjohns.com

Clay County Local Advisory Council for Children's Mental

The Clay County Local Advisory Council for Children's Mental Health meets on the second Wednesday of each month at 8:30 am at the Family Service Center at 715 11 St. N. , Room 2 in Moorhead. The council is comprised of parents and professionals who advise the Clay County Board of Commissioners on the state of children's mental health services, including gaps in services, needs of the family and child, and the strengths of our current service delivery system. We invite parents of children with mental health needs and other interested parties to attend our monthly meetings.

Federation of Families for Children's Mental Health

The Federation of Families will hold its monthly Gym and Supper Club from 5:30pm – 8:00pm at 1102 2nd Ave S., Fargo, on the following Saturday's: Dec. 6, 2008, Saturday, Jan. 3, 2009, and Sat. February 7, 2009. Gym and Supper Club is open to all families, siblings included, who have children with mental health needs and emotional behavioral disorders. It is a safe and caring place for children to interact with one another, play and make new friends and for parents to connect with other parents. Dinner is potluck with each family bringing a dish to share. If you have any questions, call Deb at 235-9923.

Children's mental health resources, links and training information are available at:

www.halfachild.com

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The Children's Mental Health Initiative is generously funded by Dakota Medical Foundation, in partnership with Region V Children's Services Coordinating Committee