



Endowment for Health IMPROVING THE MENTAL HEALTH OF NEW HAMPSHIRE'S CHILDREN AND THEIR FAMILIES

Theme Implementation Evaluation: PY2008-PY2012

Executive Summary

Improving the Mental Health of New Hampshire's Children and Their Families (CMH) was selected as a theme in PY2005 when the Endowment committed to at least 5 years of funding to it. Early planning work led to the conclusion that the children's mental health field in New Hampshire was in substantial disarray.

The Problem

- The mental health needs of children as unique from those of adults were not recognized nor included in planning to improve the system.
- Services were delivered in a highly fragmented way across various systems and there was little collaboration and communication among providers and across stakeholders.
- Mental health providers tended to rely on practices that were “practice-based” rather than on practices that had a strong evidence or research base.
- There were significant workforce shortages, particularly of child psychiatrists, which resulted in long waiting lists for appointments and the need for children living in rural areas to travel long distances for treatment
- There was little “voice” for reforming the children's mental health delivery system and advocacy efforts were largely reactive and uncoordinated.
- There was no leadership to tackle the organizational and environmental changes needed to transform the children's mental health system.

The Approach

The Endowment's approach to the theme is based on the recognition that its financial contributions to the field are modest compared to public funding sources and the need for CMH services. Its role is not to provide services but rather to foster **the systems changes** necessary to ensure a strong and sustainable children's mental health service delivery system. This is being accomplished through knowledge development, convening, technical assistance, leadership, investments in service-model development, advocacy, and public policy. With input from a Theme Advisory Committee convened at the start of the theme, the Endowment identified three outcomes which have been used to guide its work and educate partners and grantees about its priorities:

What Success Will Look Like

- Outcome #1: Mental health care for children and their families is integrated, co-located and/or coordinated within a system of care.

- Outcome #2: Children and their families' mental health care is of high quality and utilizes research-based interventions.
- Outcome #3: The capacity to advocate for children and their families' mental health is strengthened.

Accomplishments

Building the Field: Enhancing Knowledge, Advancing Leadership, Promoting Collaboration

According to stakeholders, the Endowment's most substantial contribution thus far has been to "bring the field together." Specifically, it has:

- *Enhanced Knowledge*: Invested in key baseline research and "first ever" analyses, helping to establish CMH as a problem which needs policy attention. They also created a baseline of knowledge for policymakers, advocates and government.
- *Established leadership*: Emerged as a key leader on CMH in the state and is currently working to develop the leadership of others by convening the NH Children's Behavioral Health Collaborative (CBHC). The Endowment's role as a leader is far greater than initially anticipated and according to several stakeholders, results from a leadership vacuum in the state. The challenge is ensuring that others can take on leadership roles in the future and this is one of the goals for the CBHC.
- *Convened the CBHC to develop a state plan*: Co-funded the CBHC to develop a state plan for children's behavioral health that sets forth a vision and a solid strategy for the field where one did not exist. The draft plan was a key component to a recent grant proposal and positioned the NH Department of Health and Human Services (DHHS) to secure federal SAMHSA planning and implementation grants valued at nearly \$4.5 million over the next four years to roll out a state strategic plan. This work has also well positioned the state to respond to federal funding opportunities that may arise in the mental health arena as a result of health reform.
- *Promoted collaboration*: The Endowment's greatest contribution, according to stakeholders, has been in the area of convening and influence of the process and players. Stakeholders more frequently cited this area of work as a benefit to the system than money. There is enhanced collaboration at the statewide level as well as at the local level among stakeholders.

Mental health services for children and their families that are better integrated, co-located and/or coordinated within a system of care (Outcome #1)

- Funded statewide system-of-care models that show promise in demonstrating positive impacts for children and youth and that appear to have potential for sustainability. Trained and supported 48 staff in 7 community mental health centers (CMHCs) to deliver the Rehabilitation for Empowerment, Natural Supports, Education and Work (RENEW) program which has been provided to 168 transition-age youth and has realized positive outcomes.

Investments have developed a statewide system to conduct early childhood screenings, training 122 staff in community organizations across the state. 585 children have been screened over the past two years. Funded two pilot wraparound projects that were not replicable due to sustainability concerns. Learning from these initiatives informs needed infrastructure development and policy changes.

- Funded integration of mental health services into organizations serving vulnerable children and their families. Provided intensive, evidence-based services to 54 high-need homeless families with trauma histories in Manchester; evaluation results indicate statistically significant improvement in functioning and well-being outcomes.
- Provided funding to enhance the capacity of ancillary systems to identify mental health problems in children and youth experiencing trauma and connect them to needed services. Provided funding to plan and build statewide capacity to train and support domestic violence advocates in a national curriculum to identify and address child trauma symptoms including referral. Implementation has just begun and to date, 21 advocates have been trained.

Ensuring that children and their families' mental health care is of high quality and utilizes research-based interventions. (Outcome #2)

- Enhanced the capacity of CMHCs and other providers in New Hampshire to deliver key research- and evidence-based practices (EBPs) for children and youth. Clinical staff in ten CMHCs in the state and NH Hospital has been trained in two evidence-based practices (Trauma Focused – Cognitive Behavioral Therapy and Helping the Non-Compliant Child) and are using these to improve children's mental health outcomes. Thirty clinicians across the state are trained in Child Parent Psychotherapy and are improving outcomes for children. Clinical staff in 7 CMHCs are trained and deliver RENEW with positive results. Children's directors report substantial increase in the acceptance of EBPs among CMHC staff since the start of the theme.
- Laid the foundation for a statewide telemedicine infrastructure for delivering training and coaching in research- and evidence-based behavioral health interventions. A video-conferencing technology infrastructure now exists to link all 10 CMHCs and NH Hospital to state and national experts for training and coaching in EBPs.
- Supporting development of a competencies framework to strengthen the CMH workforce. Supported planning for a statewide competency system for the children's mental health workforce that is now being implemented.

Strengthening the capacity to advocate for children and their families' mental health (Outcome #3)

- Convened the statewide CBHC which is finalizing a state plan for children's mental health. The plan for Children's Behavioral Health will be disseminated in the Fall of 2012.
- Improved communication and public education efforts to increase awareness of and action on issues important to children and their families' mental health. Supported messaging

work that will form the basis of communication activities of the statewide plan. Co-funded documentary film, *Who Cares About Kelsey?* highlighting the RENEW intervention, which has had statewide and national exposure.

- Funded capacity-building of key children’s mental health advocacy organizations. The Endowment supported a statewide, grassroots advocacy organization with a five-year operating grant as part of this theme. A project supporting legal advocacy has tackled organizational and systemic policy barriers to alter the trajectory for youth with emotional and behavioral health needs within the juvenile justice system.

Challenges

The Endowment has also faced some hurdles in trying to realize its outcomes and strategies:

- *Complexity of the CMH delivery and funding systems.* Separate funding structures, resource challenges, and lack of leadership make it difficult to develop new and sustainable funding streams. This has been particularly challenging as resources at NH DHHS are diminished.
- *Finding models that can be sustained in difficult economic times.* The vision of creating new or enhanced funding models has been hampered by resource challenges, as well as little capacity to foster systemic changes. The Endowment has had mixed success in funding pilot projects that can be sustained or replicated.
- *Finding partners to do statewide work.* Low capacity in some organizations creates challenges to implement projects that have meaningful impact at a statewide level.
- *Changing policy.* Fostering policy change in the CMH field is challenging—more so recently as the economic and political climate has changed. The delivery systems are complex, there are limited staff resources within the state dedicated to this issue, and there is a lack of leadership within government to spearhead needed policy changes.

Threats and Opportunities

The context for children’s mental health has changed substantially since the CMH theme was first launched. Among the threats are:

- *Reduced state funding for CMH Services.* Declining state resources have negatively affected the children’s mental health sector and will continue to do so for the foreseeable future. For the Endowment, this has resulted in enhanced vigilance around sustainability for demonstration projects and has reinforced the need for coordinated advocacy and a vision for a reformed, cost-effective delivery system.
- *Recent policy decisions negatively affecting mental health services.* Policy decisions have had negative consequences for vulnerable children and youth with behavioral health concerns, most notably the reduction in funding for CHINS and decimation of prevention funding for home visiting, family resource centers, parent support and education which is likely to result in higher prevalence rates of children with emotional and behavioral health problems over time.

- *Implementation of Medicaid Managed Care.* Managed Care can be seen as both an opportunity and a risk. If done well, managed care could be a catalyst for creation of a more integrated children's mental health system with flexibility to address problems earlier and to individualize care based on the family and child's needs. However, from the provider community, there is significant concern and uncertainty about implementation and the impact on the system. This rapidly changing environment could distract from the strategic plan and ongoing workforce development initiatives.
- *Weak state leadership capacity in CMH.* Decreased staffing and resources within DHHS for children's mental health has created substantial capacity concerns. Given that the Endowment's time-limited commitment to the CMH theme, this is of substantial concern. The CBHC and the statewide plan are fostering external leadership and advocacy capacity.

The opportunities in the current environment include:

- *National health reform.* Several provisions in the law have the potential to benefit children with emotional and behavioral health problems and their families. This offers the potential to partner with government to redesign the children's behavioral health delivery system.
- *Lawsuit against the state in response to policy decisions negatively affecting mental health services.* The 2011 lawsuit filed by the Disabilities Rights Center on behalf of adults with disabilities and mental illness, provides the potential to raise public awareness, and to highlight the insufficiency of current services and to present an opportunity to transform the system.
- *Leveraged Federal Funding.* There are several significant federal funding opportunities that could be leveraged to maximize the EHs investments, including the SAMHSA System of Care Expansion Cooperative Agreement, the Balance Incentive Program (BIP), and Project LAUNCH.
- *Momentum created by five years of Endowment investment and development of the Children's Behavioral Health Plan and CBHC.* The state plan for Children's Behavioral Health will be released in the Fall of 2012 and will provide priorities to be addressed and a platform for advocacy and forward movement. The CBHC is expected to continue to play a leadership role as the plan is implemented.
- *Greater involvement of NH Charitable Foundation.* The NH Charitable Foundation has co-funded the CBHC through its substantial donor fund focused on substance abuse. As the state strategic plan's recommendations are finalized there is an opportunity for the two foundations to partner on important projects and use their influence to change public policy and financing to sustain these investments.

Recommendations

The Endowment has made progress relative to its outcomes and strategies while working in an increasingly difficult environment. Its most substantial contribution has been to bring the CMH field together using both grantmaking and non-grantmaking tools. Through strategic investments in pilot projects the Endowment has begun to address some of the most basic

challenges facing the CMH system. Through its leadership and convening power, the Endowment has helped to bring diverse stakeholders together to shape a common vision for CMH in the state and to begin setting priorities.

Substantial momentum and readiness now exists. Conversations with the CMH Program Director and Interim President, as well as a comprehensive review of stakeholder feedback, point to a continued commitment by the Foundation for the next five years to institutionalize successful projects, seize new opportunities, and to plan carefully for an exit transition. Priorities include:

- *Finalize state plan and identify next steps for implementation and outreach.* The state plan will guide CMH priorities in the state. As a plan that represents the input of many stakeholders, it should also begin to set the stage for a transition of “ownership” and leadership in CMH from the Endowment to a broader set of players, including the state.
- *Transition the CBH Collaborative into a leader and advocate for children’s behavioral health in NH.* The Endowment has used coalition building as a key strategy for advancing the work, especially relative to advocacy and policy change, in its theme areas. It is the Endowment’s intention that the CBHC will play this role in children’s mental health in the state and this entity will need support in its initial years.
- *Promote an effective and coordinated communications plan and framing of children’s mental health.* Using the CBHC as an organizing body, there are opportunities to coordinate communications activities to promote the New Hampshire’s children’s behavioral health plan.
- *Promote family and youth leadership.* The Endowment can play a role in strengthening the organizational capacity of family organizations that currently exist to promote parent and youth leadership.
- *Continue to prioritize workforce development issues.* The Endowment has contributed to substantial progress in enhancing the quality of service delivery in CMH by promoting evidence-based practices and defining competencies. There is a continuing role for the Endowment to help establish a competency framework – in both early childhood and the children’s mental health delivery systems - to enhance the workforce as well as to continue to promote use of EBPs.
- *Support efforts to create a new and rational financing system for CMH.* The financing system for CMH is a substantial barrier to successful replication and expansion of on-the-ground efforts to improve the system of care and workforce improvements. The Endowment can play a role in working with the state to explore ways to coordinate and redirect funding streams through convening and technical assistance.
- *Continue to fund demonstration projects and support for ancillary systems.* The Endowment has committed to several new projects and expects to continue to fund these efforts and possibly expansion if successful. Demonstration projects should focus on vulnerable and under-served populations that have unique barriers to accessing high quality children’s mental health care.

- *Enhance primary care involvement in children’s mental health.* The Endowment can play a role in piloting and replicating models that involve physicians in the mental health system by promoting research-based screening tools to identify problems earlier when they can be more easily addressed and use of evidence-based prescribing of psychotropic medications.
- *Develop and communicate a clear exit strategy for the final two years of investment (2016-2017) in the theme.* While the Endowment envisions that it will continue to play a role in CMH after its formal work in the theme has ended (just as it has in oral health and will likely do in transportation)to strategically fund work in advocacy and policy change. However, the Endowment must articulate a clear strategy for exiting the theme.

The Endowment for Health would like to thank all of its grantees and partners for their commitment to enhancing mental health services for New Hampshire’s children and their families.