

## 18. Children and Adolescents M/SUD Services-Required MHBG, Requested SABG

1. Does the state utilize a system of care approach to support:
  - a) The recovery and resilience of children and youth with SED?  Yes  No
  - b) The recovery and resilience of children and youth with SUD?  Yes  No
2. Does the state have an established collaboration plan to work with other child- and youth-serving agencies in the state to address behavioral health needs:
  - a) Child welfare?  Yes  No
  - b) Juvenile justice?  Yes  No
  - c) Education?  Yes  No
3. Does the state monitor its progress and effectiveness, around:
  - a) Service utilization?  Yes  No
  - b) Costs?  Yes  No
  - c) Outcomes for children and youth services?  Yes  No
4. Does the state provide training in evidence-based:
  - a) Substance misuse prevention, SUD treatment and recovery services for children/adolescents, and their families?  Yes  No
  - b) Mental health treatment and recovery services for children/adolescents and their families?  Yes  No
5. Does the state have plans for transitioning children and youth receiving services:
  - a) to the adult behavioral health system?  Yes  No
  - b) for youth in foster care?  Yes  No

### **6. Describe how the state provide integrated services through the system of care (social services, educational services, child welfare services, juvenile justice services, law enforcement services, substance use disorders, etc.)**

The Community Guidance Center partners with government and nongovernment organizations to address behavioral health in the CNMI. Within the Community Guidance Center, the wellness and recovery services, transitional living center, and substance abuse prevention and mental health promotion of behavioral health in the community. The Family and Youth Enhancement Program under the Division of Youth Services, Department of Community and Cultural Affairs work with youth who have mental health or substance use concerns mainly students who are experiencing educational difficulties within public school system within the middle school and highschools. The Wellness Clinic under the Community Guidance Center are able to provide services for youth who are may be considered victims of crimes.

The Commonwealth of the Northern Mariana Islands (CNMI) Commonwealth Healthcare Corporation (CHCC) was awarded funding in Fiscal Year 2014 for the System of Care Planning and in Fiscal Year 2015 for the System of Care Implementation Project. The System of Care Project will engage key stakeholders to collaboratively implement an efficient, consumer friendly system of care that promotes integrated health, social, and support services for children and youth with Serious Emotional Disturbances and their families/caregivers. The CNMI SOC goals include the following: 1) Implementation of efficient and standardized policy, regulatory, and partnership improvements that are understood by all youth and family serving groups; 2) Development of a System of Care that allows for continuity of services

throughout the continuum of need (inclusive of: at-risk, crisis, recovery, and maintenance of recovery); 3) Consistent generation of funding sufficient to maintain adequate services throughout the continuum of need (inclusive of: at-risk, crisis, recovery, and maintenance of recovery); 4) Provision of training, technical assistance, and coaching to strengthen SOC understanding and delivery; 5) Generation of community-wide support for the mental health service delivery system. The CNMI SOC project and its goals are grounded on core SOC principles and values in a partnership of care for all CNMI children and youth, age birth to 21, with serious emotional disturbances and their families. The SOC model is multi-dimensional and an interdisciplinary linking of services of care with families as partners in a child and youth focused, family driven, community based, and culturally competent service delivery system.

Measurable objectives of the CNMI SOC project include the following: 1) develop a SOC Oversight Committee and Executive Advisory Council; 2) identify and review current policies/procedures/memoranda of understanding within and among stakeholder agencies; 3) develop a web-based SOC registry; 4) develop a SOC that allows for continuity of services throughout the continuum of need; 5) increase the utilization of community-based supports; 6) develop a standardized process of referral that is known to all stakeholders groups and allows for easy access for services, as well as, easy transition between services based on the fluctuating needs of the client/consumer; 7) develop a Financial Oversight Sub-committee; 8) develop relationships with private businesses in the community who can contribute financially to the mission of SOC; 9) develop fundraising strategies that include youth/families; 10) develop a “resource pool” that is accessible to all youth/family serving groups; 11) develop a community pool of trainers available to instruct youth and family serving groups; 12) develop relationships with community-based agencies that can help with training related to ancillary service needs; 13) develop a Mental Health First Aid training program; 14) develop social marketing strategies that aim to educate the community regarding SOC and mental health issues; 15) organize a yearly Mental Health Fair. These CNMI SOC project goals and objectives will guide a data-driven process which will inform decision-making at all levels.

The SOC strategic plan provides the proposed road-map toward the development of a System of Care in the Northern Marianas that lives up to the SOC vision (The Commonwealth of the Northern Marianas is actively committed to a coordinated, collaborative, family-focused System of Care that provides for the needs and advancement of youth experiencing and youth at risk of SED) and mission (To promote the improvement of care and opportunity for youth with, and youth at risk of Severe Emotional Disturbances through improved collaboration between youth and family serving groups), thus becoming ingrained practices within the community as a whole. The target population of children with and at-risk of developing SED is grossly underserved due to the lack of an adequately developed infrastructure and system of care. Through the System of Care Expansion grant, the CNMI SOC aims to narrow the gap between children in need of services and those receiving services, adhering to the definition of SED as “a child or youth with an emotional, socio-emotional, behavioral or mental disorder diagnosable under the DSM IV or ICD-9-CM equivalents and only those substance use disorders and developmental disorders that co-occur with another diagnosable serious emotional, behavioral, or mental disorder” and will focus on children and youth from birth-21 (inclusive of providing for a smooth transition from youth to adult mental health services).

The SOC will develop guidelines for individualized care planning for children/youth with serious mental, substance use, and co-occurring disorders. The effort for providing individualized care includes measures for the hiring of professional staff including Licensed Mental Health Therapists. Under the direct supervision of the Project Manager/Psychologist, the Licensed Child and Family Mental Health Therapist will evaluate, diagnose, and treat mental and emotional disorders through the provision of individual/group/family therapy, and/or psycho-education. The Licensed Child and Family Mental Health Therapist will develop and implement individualized treatment plans that clearly specify the modality of treatment, the frequency, intensity, and duration of services to be expected by the client and/or guardian.

The individualized treatment plan will be recovery-focused and will specify a strategic plan with achievable action steps aimed at stabilization of symptoms. To the greatest extent possible, the least restrictive services will be implemented, focusing on community and home-based care/supports rather than inpatient services. Individualized Treatment Planning will incorporate the client's and/or guardian's voice throughout, and whenever possible, services will be provided in the client's native language. The Licensed Child and Family Mental Health Therapist will be responsible for consulting with key stakeholders also involved in the client's life to ensure effective implementation of treatment recommendations. This can include, but is not limited to, consultations with the client's psychiatrist, primary care physician, assigned wrap-around coordinator, and family members. The Licensed Child and Family Mental Health Therapist will participate in weekly group supervision with the Project Manager/Psychologist and weekly individual supervision with the Child Mental Health Program Manager to assist in ongoing treatment planning.

The CNMI System of Care project will focus on a state-level system of care approach. The Community Guidance Center, under the helm of the Commonwealth Healthcare Corporation, is designated by the CNMI government as the state mental health agency. As the state mental health agency, CGC will collaborate with key state agencies and private sectors who serve the SOC focus population and are stakeholders in the SOC project. The CNMI SOC will continue to develop and strengthen its network with key stakeholders through consistent communication and involvement in stakeholder meetings throughout the implementation process. The SOC project stakeholders include the following: Division of Public Health, Division of Youth Services, CNMI Superior Court, CNMI Public School System, Northern Marianas Protection and Advocacy System, Office of Vocational Rehabilitation, Medicaid Office, Legislature, Department of Public Safety, Probation Office, Northern Marianas College, and Developmental Disabilities Council.

A large component of the CNMI SOC strategic plan includes strategies and action steps toward the provision of training opportunities for service delivery professionals, community members, parents, and youth. Trainings include topics such as an introduction to SOC philosophy and services, Mental Health First Aid, Suicide Prevention, Substance Abuse prevention/awareness, and information related to Wrap-Around services. Training plans will be an incorporated feature of each employee's performance evaluation.

The CNMI System of Care project will be centered on the concept of utilizing data to direct the decision making process and ensure that goals are met, strategies are utilized as action steps, and activities employed by the SOC project staff are engaged by its stakeholder group in alignment with the overall efforts of the project. The CNMI SOC strategic plan serves as a blue-print in navigating efforts towards successful outcomes. The overarching goals call for a comprehensive approach to improve health access/use/outcomes for the population of focus—children and youth ages birth to 21 experiencing or at-risk of serious emotional disturbances. At the program level, every effort made towards improving the lives of the targeted population, will be made consistent and parallel to the SOC goals and objectives and thus tracked through current applications and instruments employed. Through its provision of data support, CGC will continue to utilize its administrative system-Integrated Client Database System-, along with Prevention database application-Minimum DataSet-or its proposed equivalent and the Data Collection Plan Worksheet. These applications and instrument will be thoroughly reviewed to determine feasibility and applicability towards each strategy.

The CNMI SOC, through data support provided by CGC, will utilize data to enhance the decision making process and to improve health access, use, and outcomes in all aspects of its consumer needs. The consumers of focus and noted as the intended or targeted population, are those ages birth to 21 who are at risk or diagnosed with Serious Emotional Disturbance. In tracking access, use, and outcomes, CGC will continue to utilize its administrative system- Integrated Client Database System-, along with Prevention

database application-Minimum DataSet-or its proposed equivalent, and the Data Collection Plan Worksheet. Each application will cater to a specific measure, from which outcomes can be gauged to determine progress made in relation to the proposed strategies and goals of the SOC project. Moreover, the specialty population will be closely monitored to determine if access, use and outcomes, show promising signs towards progress and are aligned towards reducing or ultimately eliminating disparity in general. To facilitate this process, the CGC Data Manager, will generate quarterly reports and will analyze the data collected and determine where progress has been made. These findings will be shared with the CGC Director and SOC Project Manager. Moreover, the CNMI SOC will utilize this assessment data to improve, modify or increase efforts where they are most vital.

The CNMI SOC Project Coordinators will assist schools in assuring identified children are connected with available mental health and/or substance abuse treatment and recovery support services. The SOC is developing a network of agencies collaborating to ensure that identified children/youth with SED are provided the appropriate services through a coordinated system of care.

As delineated in the grant funding, the SOC will serve children and youth from birth to age 21. The SOC is working on developing its standard operating procedures to outline service procedures, including transitioning children/youth receiving services to an adult behavioral health system or foster care.

**Please indicate areas of technical assistance needed related to this section.**

The Commonwealth Healthcare Corporation, Community Guidance Center welcomes technical assistance related to Children and Adolescents Behavioral Health Services