September 20th, 2018

Name of Program: EMPS Mobile Crisis Intervention Services

<u>Program Explanation</u>: Mobile Crisis is a voluntary statewide crisis stabilization/hospital diversion program for youth who are experiencing mental health or behavioral health crises. Mobile Crisis does not define what constitutes a crisis as crises can look very different for individuals and their families. In addition to phone support, Master's level clinicians can respond to crises in the community, often school or home, to evaluate the child, de-escalate the crises and develop a crisis plan with the family. The program provides linkages to other services in the community and follow-up visits until clinical services are secured. Mobile Crisis can also provide clinicians and resources to respond to any unexpected community tragedies.

<u>Target population of program:</u> Youth who are 17 years and younger (no minimum age) and older individuals who are still in high school/currently at the school.

<u>Referral process</u>: Call 211, press 1, then press 1 again. Anyone can call into 211 with concerns for a child. Mobile services are available from 6am-10pm Monday-Friday and 1pm-10pm on weekends and major holidays. There is never a cost to families for utilizing Mobile Crisis services.

Wait list? Given the nature of Mobile Crisis, there is never a wait list. Once mobile services are requested, a clinician will arrive on site within 45 minutes of being connected to the caller. Assessments can take place anywhere in the community.

Where do you see gaps in our service system? Mobile Crisis often has difficulties securing clinical services for Spanish speaking youth and their families, particularly in regards to in-home services. In addition, there are limited resources available to families with private insurance (especially Tricare) who have a child on the Autism Spectrum. We have been unable to identify an ABA services for families with Tricare in the NE region. Also, securing in-home services for families with private insurance is often not feasible for families. Long wait lists for in-home services have proven to be difficult for families.

September 20th, 2018

Name of Program: Creative Arts for Developing Minds, Inc.

Program Explanation: Non-profit organization that provides combined music, art and movement experiences for children ages 2 – 12 who are currently in the foster care system or have been recently adopted. The program lasts 8 weeks and may be repeated.

Target population of program: Foster children and children who have been recently adopted between the ages of 2 and 12.

Referral process: None. Contact Creative Arts for Developing Minds, Inc.

Wait list? Not at this time.

Where do you see gaps in our service system? Alternative programs that treat trauma as something that happened not as something that is wrong.

September 20th, 2018

Name of Program: Community Network Program (CNP)

Program Explanation: CNP is an early intervention program that provides assessment and care planning for children and youth in the early stages of mental, physical, or educational difficulties negatively impacting their functioning in the home, school, or community. CNP utilizes the wrap around process, beginning with a strengths discovery that includes the youth and family, with the care plans being totally family driven. CNP is typically involved for 3-4 months. CNP clinicians can provide interventions and if further supports or services are needed at the end of CNP involvement, linkages to the appropriate community supports or services are made.

Target population of program: Non-DCF involved children and youth beginning to exhibit and increase in behaviors negatively impacting their functioning. Age range is 0-18.

Referral process: Anyone can refer to CNP with referrals going directly to the clinician in your respective county.

Wait list? 3 clinicians cover all of DCF region 3 and each clinician is strategic in marketing services to ensure any waitlist are manageable.

Where do you see gaps in our service system? Length of service is often identified as an issue, particularly for an intervention program. Families that have trust issues have expressed by the time they feel fully engaged with CNP it is time to close. Transportation has also been identified as an issue, particularly for families that have multiple children and are only able to have the child with an appointment with them.

September 20th, 2018

Name of Program:

Justice Resource Institute - Connecticut

- Susan Wayne Center of Excellence
- River Run Academy
- Connecticut Group Homes (Pomfret, Putnam, Oakdale, Thompson)
- Northeast Behavioral Health Connecticut Community Based Services
- Demarco Ropes Course

Program Explanation:

JRI Connecticut is committed to opening doors to opportunity for youth and families who face the complex challenges associated with trauma, mental illness, and cognitive impairment. Within an environment that preserves dignity, respects diversity, demands accountability, and strives for excellence, we partner with our youth, families, state agencies, and the community to build capacity for resilience, independence, and perseverance.

Target population of program:

You or your child is struggling with symptoms of complex trauma and/or mental illness.

You or your child is struggling in your current academic setting.

Your child/youth is in need of community-based behavioral health services.

You or your child needs additional academic and emotional support.

Referral process:

All referrals come through CT BHP except those referrals for our in-home community based services. Those referrals come directly from DCF.

Wait list?

Our Susan Wayne Center of Excellence has a four month wait list presently. All of the other programs have openings at this time.

Where do you see gaps in our service system?

I believe that services begin too late.

September 20th, 2018

Name of Program: A-CRA (Adolescent Community Reinforcement Approach) – Substance Use provided by Community Health Resources

Program Explanation: A-CRA is an evidenced based model that helps adolescents and their families develop skills in a wide range of areas including but not limited to communication, refusal, problem-solving, and relapse prevention to help increase pro-social activities and decrease overall substance use through harm reduction. It is a 6 month program, 3 months outpatient and 3 months community based where the therapist and the client engage those skills learned in the office out in the community as defined together as a team. There is also a caregiver component, they attend sessions and work on developing the skills necessary to use while participating in family sessions. A-CRA is a service that is considered specialized so families can stay with their current external outpatient providers for mental health and medications. We do bill insurance and all insurances are accepted.

Target population of program: Adolescents between the ages of 12 – 18 (enrolled in school and living at home) who have used any form of substances that has impacted any aspect of their life, adolescents who are stepping down from other programs who need outpatient level of care for continued support in staying or achieving sobriety.

Referral process: Contact Mansfield/Norwich Region 3 clinician: Jen Gardner at 860.771.4939, jgardner@chrhealth.org, use the attached referral form, or contacting CHR's assessment center at 1.877.834.9571

September 20th, 2018

Name of Program: Domestic Violence Program

Program Explanation:
Free and confidential services including:
24 hour hotline
Shelter
Individual Counseling
Support group
Outreach and Education
Court Advocacy
Safety Planning

Target population of program: Victims of domestic violence (men, women, and children)

Referral process: Call hotline and speak to an advocate 860-456-9476 or 860-774-8648 Wait list? no

Where do you see gaps in our service system?

September 20th, 2018

Name of Program:	
Grandparents Raising	Grandchildren

Program Explanation: This group offers peer support and parenting strategies to grandparents. The goal is to offer a supportive environment to help these grand-families to share their experiences, learn new parenting skills, and share concerns, information, and resources.

Target population of program: Grandparents raising grandchildren

Referral process: open enrollment

Wait list? No

September 20th, 2018

Name of Program: Reunification and Therapeutic Family Time-RTFT

Program Explanation: RTFT offers three service types: Reunification Readiness Assessment (RRA), Reunification and Therapeutic Family Time (TFT)

The RRA is a thirty day assessment which includes a weekly TFT visit that provides feedback and recommendations regarding the family's readiness for reunification. TFT utilizes a visit coaching model with families where the child benefits as much as possible from the contact with the parent to maintain or reestablish healthy and safe relationships.

Reunification prepares the family for reunification, the actual reunification of children with their parents and post reunification services with the goal of being successful and maintaining family reunification.

Target population of programs: Families with children from birth to seventeen years of age who were removed from their home due to child protective concerns and are ready to begin the Reunification process or reestablish relationships that are healthy for children and their families utilizing the visit coaching model of TFT.

Referral process: DCF social workers make the referral to the DCF gatekeeper who maintains contact with the RTFT coordinator

Wait list? DCF maintains the waitlist.

Where do you see gaps in our service system?

September 20th, 2018

Name of Program: Youth Service Bureau

Program Explanation:

YSB's provide a network of resources and opportunities for children, youth, and their families. A wide range of services and programs are offered with the goal of helping youth to develop positively and to function as responsible members of their communities.

Target population of program:

Youth in our ten town region. This includes: Brooklyn, Canterbury, Eastford, Killingly, Plainfield, Pomfret, Putnam, Sterling, Thompson, and Woodstock.

Referral process: open enrollment

Name of Program:
Access and Visitation
Program Explanation: The goal of this program is to help parents who do not live with their children achieve meaningful, healthy, and productive interactions with their children.
Target population of program: Parents who have an active case in family matters before the CT Superior Court.
Referral process: CT Family Relations Division of Superior Court
Wait list? No

Name of Program: Juvenile Review Board
Program Explanation: A Juvenile Review Board (JRB) is a community-based diversion process for youth that may otherwise be referred to the Juvenile Court for minor violations of the law.
Target population of program: youth up to age 17
Referral process: Referrals are accepted from police, schools, and parents.
Wait list? no

Name of Program: Sibling Support Group
Program Explanation:
Sibling Support Group is a social, recreation group for children with siblings with special needs. Attendees can interact and form friendships with peers with similar families.
Target population of program: Children ages 5-17
Referral process: open enrollment
Wait list? No.
Where do you see gaps in our service system?

September 20th, 2018

Name of Program: United Services, Inc. Child Guidance Clinic
Program Explanation: The Child Guidance Clinic provides individual, group and family therapy to children who have a mental health condition and/or trauma exposure. USI CGC is trained in 4 evidence based models (TFCBT, MATCH, CFTSI, CBITS/BounceBack).
Target population of program: Children up to the age of 18
Referral process: guardian can call (860) 774-2020(Dayville) (860) 456-2261 (Willimantic) to schedule intake appointment
Wait list? All children are offered and intake within 2 weeks from initial

call.

Where do you see gaps in our service system? Children needing higher level of care or specialized treatment, specifically inhome support as well as children needing medication management in the Northeast corner of CT

RAC Provider Program Presentation Outline September 20th, 2018

Name of Program:

Parenting Support Services

Program Explanation:

There are three tracks:

- Standard Triple P is for parents/caregivers of children 3-12 years of age.
- Standard Triple P for Teens is for parents/caregivers of children 13-17 years of age.
- Circle of Security is for parents/caregivers of children birth to 3 years of age. Circle of Security can also be used for specific cases for children of any age.

All three tracks deliver an in-home program that helps parents become independent resourceful problem solvers and learn how to create positive, nurturing, and safe home environments that promote their children's emotional, behavioral and cognitive strengths.

Parents receive a thorough assessment of parent-child interaction and are taught parenting skills that can be used to target a broad range of behaviors. The parent chooses the target behavior to be addresses. In the Teen program, the teen is also actively engaged in learning coping skills and problem solving skills while improving the parent / teen relationship.

Services are provided by trained and accredited Parent Educators in all three tracks. Case management is also provided to the family. Services are free of charge and are available in English and Spanish.

Triple P

Triple P® (Positive Parenting Program) is one of the most effective evidence-based parenting programs in the world, backed up by more that 30 years of ongoing research. Triple P gives parents simple and practical strategies to help them confidently manage their children's behavior, prevent problems from developing, and build strong, healthy relationships.

- Ensuring a safe environment
- Using assertive (rather than coercive) discipline techniques.
- Creating a positive learning environment
- · Taking care of oneself as a parent
- Having realistic expectations

Circle of Security

The Circle of Security® Parenting™ program is based on decades of research about how secure parent-child relationships can be supported and strengthened.

Using the COS-P model developed by the Circle of Security originators, our trained Facilitators work with parents and care-givers to help them to:

- Understand their child's emotional world by learning to read emotional needs
- Support their child's ability to successfully manage emotions
- Enhance the development of their child's self esteem
- Honor the innate wisdom and desire for their child to be secure

Target population of program:

A Parent, Guardian or Identified Caregiver of the child (ren)

Wait list?

None...Per our contract, DCF referred families are given first priority when assigning cases to the Parent Educators.

Where do you see gaps in our service system?

Lack of transportation is an ongoing issue for families in the northeast area.

Name of Program: STEP (School to Employment Program)
Program Explanation: Provides vocational training to identified high school students.
Target population of program: High school students
Referral process: Students are identified through the PPT process.
Wait list? No
Where do you see gaps in our service system?

Provider Program Overview

Date sent to RAC:

Name of Program: Children in Placement - Guardian ad Litem program

Program Explanation:

Over the past 40 years, Children in Placement (CIP) is the only agency of its kind serving abused/neglected youth throughout Connecticut. CIP is authorized to recruit, specially train, and supervise volunteers to serve foster children and abused/neglected children in their own local communities, as a child's GAL (Guardian ad Litem) in child protection cases held at both Juvenile Superior and Probate Courts across Connecticut. CIP provides a vehicle for our most vulnerable children and youth to have a strong advocate on their behalf, in what can otherwise be a traumatic and wearisome court process. Our GAL volunteers serve abused and neglected children from all over Connecticut, investigating recommendations for their best interests, and driving court-ordered solutions that address their entire well-being: physical, mental, emotional, and educational. CIP GALs have been proven to expedite children's transition into a safe, permanent home.

Target population of program: Children in cases of alleged or substantiated abuse or neglect

Referral process: Children's attorney, AAG, or Judge

Wait list? We take all cases appointed to us.

Where do you see gaps in our service system?

We are actively working on programs to support the resources for older youth in the system.