NWF Health Network Policy & Procedure

Series: 300: Medical and Behavioral Health Care

Policy Name: Coordination of Behavioral Health Services for Children in Care

Policy Number: 304

Origination Date: 03/09/2009 Revised: Board Meeting of 09/07/2023

Regulation: CFOP 170-18

Policy

It is the policy of NWF Health Network (NWFHN) to integrate services for children in out-of-home care with timely screening and assessment for mental health and substance abuse or co-occurring mental health and substance abuse and developmental disability needs; and, to provide these children with timely, effective treatment services and supports at levels appropriate to address the severity of their condition.

Procedure

- A. The dependency case plan will include these required components::
 - Mental health and/or co-occurring mental health, substance abuse and/or developmental disability needs identified through a Comprehensive Behavioral Health Assessment (CBHA) or other mental health, substance abuse or developmental disabilities assessments must be considered when developing the family's dependency case plan.
 - The dependency case plan will include a description of the mental health and any co-occurring substance abuse and developmental disability service needs being addressed and a description of the services to be provided.
 - 3. As the child's or youth's treatment needs change, the dependency case plan must be amended with the Court's approval.
 - Needs and stated goals for independent living skills and future personal or adulthood plans will be identified in the dependency case plan, and needed supports and services will be provided accordingly.
- B. NWFHN will ensure that behavioral health service components are developed in collaboration with (or reviewed and approved by) licensed mental health professionals. Treatment plans will be informed by the dependency case plan as well as the Family Functioning Assessment and the Safety Plan.
- C. The behavioral health service section of the case plan will be reviewed at a minimum of every ninety (90) days by the Dependency Case Manager (DCM), Behavioral health providers contracted with NWFHN will also be encouraged to update the DCM of pertinent behavioral health changes that may inform the case plan.

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- D. The Dependency Case Manager (DCM) should assist the behavioral health provider in developing the treatment plan and should request a copy of the treatment plan from the provider.
- E. NWFHN will provide both Case Management Organizations and Behavioral Health Providers with a universal referral form as well as a Progress Reporting Form to facilitate clearer expectations and promote common language.
- F. Monthly Integration Workgroup meetings will be held in Circuits 1, 2 and 14 to ensure that behavioral health professionals and child welfare professionals have an opportunity to improve communication and problem-solve areas of concern. These meetings will focus on a treatment model for child welfare involved families, information sharing, common threads, training needs, identifying champions for child welfare/behavioral health integration at each participating agency and transition planning in advance of youth leaving out-of-home care that includes identification of providers and source of payment for treatment.
- G. Children who are also served by the Department of Juvenile Justice (DJJ), Children's Medical Services (CMS) Medical Foster Care and/or the Agency for Persons with Disabilities (APD), child specific planning and service delivery will be coordinated between the agency(ies) and NWFHN.