
The Development of the Indiana Decision Support Model for the 0-5 CANS

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Objectives

- Improve Understanding of Mental Health Issues in Young Children
 - Develop an Understanding of Implications for Service Delivery Needs
 - Develop Strategies for Training and Ongoing Support
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Early Childhood Mental Health Concepts

Relationship, behavioral and emotional health problems can be identified and diagnosed.

(Zero to Three, 2005)

Treatment is cost effective, with savings of \$12 on the dollar spent reported (Tolan & Dodge, 2005; Rolnick & Grunewald, 2003)

Early Childhood Mental Health Concepts

Infants and young children experience behavioral health problems that are similar to those of older children and adults.

Prevalence rates range from 7-14%.

(Carter, Briggs-Gowan & Davies, 2004 as cited in the Indiana Division of Mental Health and Addiction Transformation Work Group, 2010)

Early Childhood Mental Health Concepts

The most common and overwhelming effect of mental health challenges in infants, toddlers and preschoolers is slowed, regressed or stalemated development (Bertchman, Wilson, Brownlie, Walters, & Lancee, 1996; Irwin, Carter, & Briggs-Gowan, 2002).

Need for Urgency....

“If young children are not provided appropriate help, emotional difficulties that emerge early in life can become more serious disorders over time.”

(National Scientific Council on the Developing Child, 2008)

Relationship-Based Context of MH Challenges

- Strengths and Needs Emerge within Context of an Environment of Relationships with Parents, Relatives, Teachers and Peers
 - Environment of Relationships plays Critical Role in Shaping Social, Emotional and Cognitive Development in Early Years
 - Interventions Must Occur Within the Context of Relationships
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Concept of Risk in Early Childhood

The Early Childhood Community of Practice Diagnosis and Eligibility Workgroup has presented to SAMHSA the Concept of “Imminent Risk” in Considering the Need to Intervene and Provide Support



Identified Risk Factors Related To Caregiver Functioning

- The infant/young child of a caregiver who is unable to meet his or her basic needs
 - The infant/young child of a caregiver who is at or below the poverty level
 - The infant/young child of a caregiver who is socially isolated/has limited supports or child of a family in the military
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Identified Risk Factors Related to Caregiver Functioning

- The infant/child of a caregiver who has been the victim of domestic violence
- The infant/child of a caregiver with mental illness, maternal depression or substance abuse issues

(Early Childhood Community of Practice Diagnosis and Eligibility Workgroup, 2009)

Risk Factors Related to Infant/Child

- Infant/Child who has witnessed violence
- Infant/Child who has been the victim of abuse or neglect
- Infant/Child who has been exposed to substances prenatally
- Infant/Child who has suffered from a single traumatic event or series of events but does not yet meet criteria for PTSD
- Infant/Child who has been separated from parents

Unique Presentation of Needs

- Modifications for Duration Criteria
 - Fewer Number of Criteria
 - Impact to Functioning
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Decision Support Model

- Built upon Concept of Service Intensity
 - Considers Range of Services Related to Needs of Individual, Caregivers and Family
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Patterns of Ratings

- Appreciates importance of Caregiver Needs
- Integrates the relevance of Risk from a broad based perspective
- Understands the rapid pace of development and the possibility for frequent and drastic change

Service Delivery Needs of Young Children

- Natural Environment
 - Services Delivered in Presence of Caregivers
 - Services Include Consultation with Caregivers and Other Caring Adults
 - Frequency of Visits Supports Developmental Capacities
 - Needs of Caregiver are Met to Better Support Child
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Range of Appropriate Services

- Developmental Guidance
 - Linkage to Concrete Resources
 - Support to Caregivers
 - Counseling
 - Therapy
 - Skill Development
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Determining Levels of Care

- **Entry Level Mental Health Services**

At this level services are offered within the Natural environment for 0-3 year olds and preferably for 3-5 year olds at the frequency of one time weekly. Services may include therapy, supporting caregivers and developmental guidance.

- **Moderate Intensity Mental Health Services**

At this level service needs include same services with the frequency up to 3 times weekly.

Intensive Mental Health Services/Wraparound

- This level includes the same types of services that are likely to include a wider range than at lower levels.
 - Frequency is 3 or more times per week.
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Entry Level Mental Health Services

Any rating of 2 or higher in the following areas:

(Criterion 1)

Attachment

Regulatory

Failure to Thrive

Depression

Anxiety

Impulsive/Hyperactivity

Oppositional

Adjust. To Trauma

Moderate Intensity Mental Health Services

Any rating of 2 or higher in areas of: Attachment, Regulatory, FTT, Depression, Anxiety, Impulsive/Hyperactivity, Oppositional, Aggression, Adjustment to Trauma

One “2” in Family, Physical, Mental Health, Substance Use, Supervision, Involvement, Knowledge, Empathy, Organization, Social Resources, Residential Stability, and Safety

(Criterion 2)

Intensive MH/Wraparound

Criterion 1 and 2 and either 3 or 4

Criterion 1 (MH Needs)

Criterion 2 (Functioning) Preschool/Daycare,
Social Functioning, Developmental, Motor,
Communication, Medical, Physical

Criterion 3 (Caregiver Needs)

Criterion 4 One “2” in Risk Factors

Process for Adoption of Decision Support Model

- Utilize research to guide patterns of ratings and service intensity justifications
 - Run data against algorithm
 - Meet with clinicians to process findings
 - Begin utilizing new model
 - Process findings and outcomes
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Training and Support Needs

- Common understanding of items
 - Case examples and vignettes at item level
 - Frequent practice and review
 - Supervisory review process built into service delivery
 - Center-based audits and training groups
 - True use of Super-User Status to promote usability and principles
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Want to learn more?

Institute. American Academy of Child and Adolescent Psychiatry (1997). Practice parameters for the psychiatric assessment of infants and toddlers. *J Am Acad Child Adolesc Psychiatry* 36 (10 Suppl).

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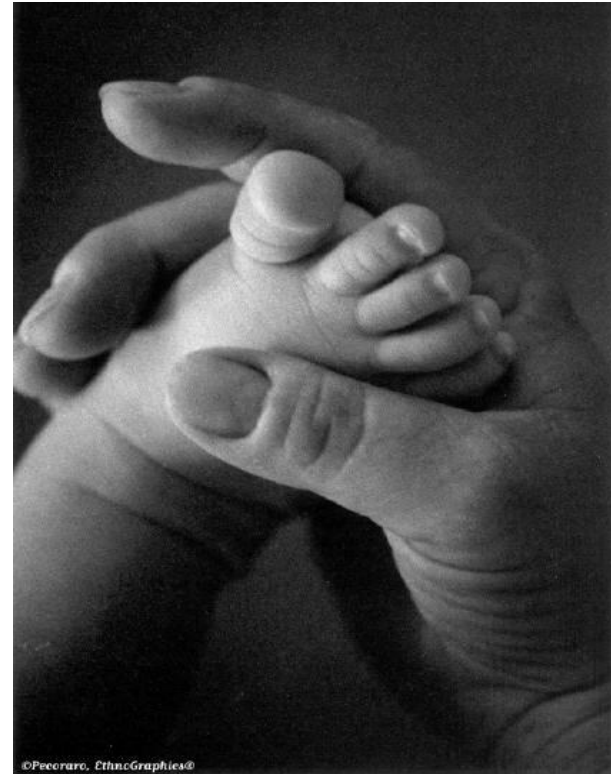
Cornett, S.M. (In press). Home-based services for high-risk youth: Assessment, wraparound planning and interventions. New York: Civic Research .

Question and Answer



How to Help

- Speak for the babies..



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