Meeting the Needs of Kids through Behavioral Health Redesign & Family First Prevention Services Act

While this tool is not a comprehensive representation of all that is available to children in need, it can be used to start the discussion about the next steps in the implementation to identify unmet needs. It is important to note that there are additional services not listed here that children and their families might need. This chart highlights services potentially funded by these two initiatives. The chart below shows the estimated number of children needing services varies greatly by level of intensity and age group. Young children appear to have the greatest needs for intensive level services. However, more variety and more services are offered to older children. Another theme we saw was that services targeted to young children are intentionally to the parent/child dyad but many services for older children are not targeted to parents. Finding services that meet the needs of children, along with their caregivers should be given special consideration.

Universal Approaches/Health Promotion: This category captures services and programs available to every child and their families. Targeted Approaches: This category captures all at-risk families that face economic hardship and other stressors. Intensive Treatments: This category is for children and caregivers who have a diagnosed need.
## Early Childhood: Ages 0-5

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Best Practices</th>
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</thead>
</table>
| **Universal Approaches/Health Promotion** | ~ 615,000 total children in this age group<sup>1</sup>  
~ 193,000 families with children under age 6<sup>2</sup>  
~ 175,000 families with children ages 0-5 AND 6-17<sup>2</sup> | - Screening at Primary Care Provider; i.e.: Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) or Behavioral Health Risk Assessment for Pregnant Women  
- Parent's Anonymous and other support groups  
- Darkness to Light Programs, i.e., Stewards of Children  
- Safe Environment for Every Kid (SEEK) |
| **Targeted Approaches** | ~ 194,000 children under 6 with public insurance<sup>3</sup>  
~ About 60,000 children are in publicly-funded ECE programs<sup>4</sup> | - Home Visitation Programs (Parents as Teachers, Nurse-Family Partnership, Healthy Families, CHIP of Virginia)  
- Positive Parenting Program (PPP), preferably level 4 or complete system  
- Early Intervention  
- Early Childhood Mental Health Consultation  
- Parental Mental Health Consultation  
- Safe Environment for Every Kid (SEEK)  
- The Incredible Years |
| **Intensive Treatments** | ~ 12,000 children in CPS family assessment track ages 0-6<sup>5</sup>  
- Unknown Medicaid service population | - Parent-Child Interaction Therapy (PCIT)  
- Child Centered Play Therapy (CCPT)  
- Residential treatment for pregnant & parenting women with Substance Use Disorder (SUD), such as Seeking Safety  
- Trauma-Focused Integrated Play Therapy |

<sup>+</sup> Most, if not all, services and interventions in this age group are only available to children and families concurrently.

### Document Sources

<sup>1</sup> U.S. Census Bureau Table B09001 from American Fact Finder (2017 data, 5-year estimates)  
<sup>2</sup> U.S. Census Bureau Table B11003 from American Fact Finder (2017 data, 5-year estimates)  
<sup>3</sup> U.S. Census Bureau Table B27003 from American Fact Finder (2017 data, 5-year estimates)  
<sup>4</sup> Early Childhood Needs Assessment  
<sup>5</sup> Family First Prevention Services Act Implementation Workgroup presentation from VDSS
### School Age: Ages 6-13

<table>
<thead>
<tr>
<th>Universal Approaches/ Health Promotion Prevention</th>
<th>Target Population</th>
<th>Best Practices</th>
<th>Families</th>
<th>Target Population</th>
<th>Best Practices</th>
</tr>
</thead>
<tbody>
<tr>
<td>~ 883,000 children total¹</td>
<td>- Mental Health First Aid - School-wide abuse prevention/awareness programs - Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) - Hugs &amp; Kisses</td>
<td>~ 510,000 families with children ages 6-17²</td>
<td>~ 175,000 families with children ages 0-5 AND 6-17.²</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| Targeted Approaches | ~ 340,000 children/youth ages 6-18 with public insurance³ | - After school therapeutic treatment programs - Therapeutic Day Treatment (TDT) | *This population has not yet been determined; we need more data to determine the scope of the need in this population.* |

| Intensive Treatments | ~ 11,000 children in CPS family assessment track ages 7-14⁵ - Unknown Medicaid service population | - Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) - Functional Family Therapy (FFT) - High Fidelity Wraparound - Intensive Outpatient Program (IOP) - Partial Hospitalization - Crisis Stabilization - Crisis intervention - Intensive Community Treatment - Trauma-Focused Integrated Play Therapy (TF-IPT) - Child and Family Traumatic Stress Intervention (CFTSI) | *This population has not yet been determined; we need more data to determine the scope of the need in this population.* |

| | | | - Positive Parenting Program (Triple P) - The Incredible Years - Parental Mental Health Consultation |

| | | | - Substance Use Disorder Recovery, such as Families Facing the Future, Seeking Safety - Functional Family Therapy (FFT) - TF-CBT |
## High School & Transition Age: Ages 14-19

<table>
<thead>
<tr>
<th>Target Population</th>
<th>Best Practices</th>
<th>Target Population</th>
<th>Best Practices</th>
</tr>
</thead>
</table>
| **Universal Approaches/ Health Promotion Prevention** | ~ 530,000 youth\(^1\) | - EPSDT  
- Teen Mental Health First Aid | ~ 510,000 families with children ages 6-17\(^2\)  
~ 175,000 families with children ages 0-5 AND 6-17\(^2\) |  
| **Targeted Approaches** | ~ 340,000 children/youth ages 6-18 with public insurance\(^3\) | - After school therapeutic treatment programs | *This population has not yet been determined; we need more data to determine the scope of the need in this population.* | - Teen Positive Parenting Program (Teen Triple P)  
- Parental Mental Health Consultation |
| **Intensive Treatments** | ~ 3,000 children in CPS family assessment track ages 15+\(^5\)  
- Unknown Medicaid service population | - Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)  
- Functional Family Therapy (FFT)  
- Multisystemic Therapy (MST)  
- High Fidelity Wraparound  
- IOP  
- Partial Hospitalization  
- Crisis Stabilization  
- Crisis intervention  
- Motivational Interviewing (MI)  
- Intensive Community Treatment  
- Child and Family Traumatic Stress Intervention (CFTSI) | *This population has not yet been determined; we need more data to determine the scope of the need in this population.* | - Substance Use Disorder Recovery programs, such as Seeking Safety  
- Functional Family Therapy (FFT)  
- Multisystemic Therapy (MST)  
- TF-CBT |
Glossary of Programs

*An asterisk denotes that this program, intervention or service is currently rated as well-supported in the current iteration of the Title IV-E National Clearinghouse and therefore approved for funding through the Family First Prevention Services Act.

- **ACT Raising Safe Kids Program**: The ACT Raising Safe Kids Program, developed by the APA Violence Prevention Office, teaches positive parenting skills to parents and caregivers of children from birth to age 10. For more information, please visit their website.

- **Child Centered Play Therapy (CCPT)**: a developmentally responsive, play-based mental health intervention for young children ages 3 to 10 who are experiencing social, emotional, behavioral and relational disorders. For more information, please visit the program description page here.

- **Child and Family Traumatic Stress Intervention (CFTSI)**: a brief early intervention model for children and adolescents 7-18 that is implemented soon after exposure to a potentially traumatic event, or in the wake of disclosure of physical and sexual abuse. For more information, please visit the program description page here.

- **CHIP of Virginia**: Comprehensive Health Investment Project (CHIP) of Virginia is an evidence-informed home visiting program targeted toward at-risk families in the first five years of their child’s life. This voluntary program links these families with a registered nurse and a parent educator, who then provides prevention-oriented services. For more information, please visit their website.

- **Crisis Intervention**: Crisis Intervention provides immediate mental health care in the home or community and available 24 hours a day. Current crisis intervention activities include assessment, short-term counseling designed to stabilize the individual and care coordination. Please see CMHRS Medicaid manual for more information.

- **Crisis Stabilization**: Intensive short-term mental health care to nonhospitalized individuals experiencing an acute mental health crisis. Crisis stabilization is intended to avert hospitalization or rehospitalization; provide a high assurance of safety and security in the least restrictive environment; and mobilize the resources of the community support system, family members, and others for ongoing rehabilitation and recovery. Please see page 48 in the CMHRS Medicaid manual for more information.

- **Early Childhood Mental Health Consultation (ECMHC)**: ECMH aims to increase social and emotional development in young children (ages 0-5) and decrease challenging behaviors that frequently lead to children being expelled from their early learning program. Versions of this model are currently offered in Virginia through Head Start and the Virginia Infant & Toddler Specialist Network. For more information, read the national report on the effectiveness of ECMHC or explore ECMHC in Virginia.

- **Early Intervention**: The Infant & Toddler Connection of Virginia provides early intervention supports and services to infants and toddlers from birth through age two who are not developing as expected or who have a medical condition that can delay normal development. Early intervention supports and services focus on increasing the child's participation in family and community activities that are important to the family. For more information, please visit the DBHDS website.
• **Early and Periodic Screening, Diagnostic, and Treatment (EPSDT):** The EPSDT benefit provides comprehensive and preventive health care services for children under age 21 who are enrolled in Medicaid. Medically necessary services, which are required to correct or improve defects and physical or mental illnesses that are discovered during a screening examination, may be covered as a part of the EPSDT program even if they are not covered under the State’s Medical benefit plan. Learn more here.

• **Families Facing the Future:** A therapeutic treatment for parents receiving methadone treatment and their children ages 5-14. This intervention helps parents learn skills and involves all family members with the goal of reducing parental illicit drug use and Reducing risk factors for their children's future drug use while enhancing protective factors. For more information, please visit the program description page here.

• **Functional Family Therapy (FFT)**: This intervention is for adolescents ages 11-18 who exhibit dysfunctional, disruptive behavior. For more information, please visit their website.

• **High Fidelity Wraparound:** High Fidelity Wraparound is a team-based, collaborative planning process for developing and implementing individualized care plans for children with behavioral health challenges and their families. High Fidelity Wraparound is currently paid for by CSA dollars and Behavioral Health Redesign has proposed including HFW as a Medicaid covered service. To learn more, visit the CSA website and the Farley Center report.

• **Hugs & Kisses:** Hugs & Kisses is an interactive program offered in elementary schools across the state that teach children about sexual abuse prevention in an age-appropriate manner. It is currently being offered by a partnership of Families Forward, Virginia Repertory Theatre and the Department of Social Services (DSS). For more information, visit their info page.

• **Intensive Community Treatment:** ICT provides long-term needed treatment, rehabilitation, and support services to identified children and adults with severe mental illness. Please see page 46 in CMHRS Medicaid manual for more information.

• **Intensive Outpatient Programs (IOP):** This intervention is a structured outpatient program that allows for a heightened level of care for individuals experiencing mental illness while allowing them to continue to be integrated in work, school and family life. For more information, please view page 49 in the Farley Center report.

• **Mental Health First Aid:** Mental Health First Aid is a training program that teaches community members how to better identify and understand the signs of mental illness and substance use disorders. For more information, please visit their website.

• **Motivational Interviewing (MI):** This intervention is a program that is frequently used in conjunction with other methods that allows for greater client buy-in and increased behavioral change. While not currently qualified as an evidence-based program through the Title IV-E Clearinghouse, the California Clearinghouse recognizes it as a well-supported evidence-based program, leaving room for it to enter the national clearinghouse in the future. For more information, please visit the CA Clearinghouse program description page.

• **Multisystemic Therapy (MST)**: A well-supported intensive intervention for youth ages 12-17 that aims to reduce mental health crisis, criminal behavior and out-of-home placements. For more information, visit the program description page.
• **Nurse-Family Partnership (NFP)**: NFP is another well-supported evidence-based home visiting program currently recognized under the Title IV-E Clearinghouse. In this program, registered nurses are linked with low-income and other at-risk mothers that then help guide the families in practices that improve health and other outcomes for the infant. This program is offered to pregnant women through the infant’s second year of life. For more information, please visit the [program description page](#).

• **Nurturing Parenting Program**: These preventative programs are designed to replace abusive and neglectful parental behaviors with nurturing ones and have many specialized modules that are tailored towards primary, secondary or tertiary prevention. Training is offered through Families Forward Virginia. For more information, please visit the [website](#).

• **Parents as Teachers (PAT)**: PAT is an education program provided through home visiting that targets at-risk expecting parents and those with children under 6 years of age, with a focus on parent-child interaction, child development and family strengthening. For more information, please visit the [program description page](#).

• **Parent’s Anonymous**: designed to be both a prevention and treatment program that strengthens families with children ages 0-18 that are at risk of becoming (or already are) involved in the child welfare system, have behavioral health challenges, or face other family issues. For more information, please visit the [program description page here](#).

• **Partial Hospitalization**: These programs give access to intensive mental health treatments and services typically only available on an inpatient basis. This allows for communities to increase capacity for intensive services without increasing bed capacity. Currently, Partial Hospitalization is covered by Medicaid for adults, Redesign has purposed covering this service as children as well. For more information about Partial Hospitalization in Virginia, please view the [Farley Center report](#).

• **Parent Child Interaction Therapy (PCIT)**: PCIT is a well-support evidence-based intervention that helps parents and caregivers improve their relationship skills and better care for their children. This program targets children ages 2-7 and their families. For more information, please visit their [program description page](#).

• **Positive Parenting Program (Triple P)**: This system of education and support targets at-risk children ages 0-16 and their families. Through evidence-based preventive practices and support groups, children and their caregivers learn healthy and appropriate ways of coping with stress, among others. For more information, please visit their [program description page](#).

• **Safe Environment for Every Kid (SEEK)**: Utilizes primary care pediatricians to assess a child’s risk factor for maltreatment and make the necessary referrals to community resources to mitigate these risk factors. This program is rated for children ages 0-5. For more information, please visit their [program description page](#).

• **Seeking Safety**: a present-focused, coping skills therapy to help people attain safety from trauma and/or substance abuse. This program is rated for both adolescents and adults with prior trauma and/or substance use. For more information, please visit their [program description page](#).
• **Stewards of Children**: This evidence-based training imparts knowledge on trusted adults and members of the community that helps prevent child sexual abuse. This is currently offered through the Stop Child Abuse Now networks and is funded through their organizations. For more information, visit their website.

• **The Incredible Years**: a series of three separate, multifaceted, and developmentally based curricula for parents, teachers, and children. This series is designed to promote emotional and social competence; and to prevent, reduce, and treat behavior and emotional problems in young children ages 4-8. For more information, please visit their program description page.

• **Therapeutic Day Treatment (TDT)**: a treatment program that serves (i) children and adolescents from birth through age 17 and under certain circumstances up to 21 with serious emotional disturbances, substance use, or co-occurring disorders or (ii) children from birth through age seven who are at risk of serious emotional disturbance, in order to combine psychotherapeutic interventions with education and mental health or substance abuse treatment. Services include: evaluation; medication education and management; opportunities to learn and use daily living skills and to enhance social and interpersonal skills; and individual, group, and family counseling. For more information, please visit this memorandum from VDBHDS.

• **Teen Mental Health First Aid**: See Mental Health First Aid; a version of Mental Health First Aid that specifically targets teenagers as the primary audience.

• **Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)**: a treatment for children ages 3-18 who have experienced trauma and are currently exhibiting behavioral problems or show symptoms of PTSD. This treatment modality also allows for caregiver interaction, given that they did not perpetrate the trauma. For more information, please visit the program description page.

• **Trauma-Focused Integrated Play Therapy (TF-IPT)**: a program that utilizes a combination of directive and nondirective approaches in order to advance structured, goal-oriented therapy for abused children and their families. It attends to the developmental needs of young children ages 5-17, incorporates the scientific and practice literature, as well as evidence-based practices currently available, and promotes resolution of traumatic events by direct or indirect processing of traumatic incidents. For more information, please visit the program description page.