

Kronkosky Charitable Foundation

Roundtable Discussion

Topic: Child Mental Health Issues

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Participants

Invited Representatives

Robbie Callis	Program Director	Child Protective Services
Geoff Gentry	Clinical Director	Southwest Mental Health Center
Cynthia Gonzalez	Professor, OLLU	Dept. of Ed. and Clinical Studies
Ron Hixson	Executive Director	La Familia Counseling Center
Dr. Lourdes Piza a	Chief Executive Officer	Rosa Verde Family Health Group
Dr. Jim Rogers	Executive Director	Child Guidance Center

Foundation Staff

Megan Kromer	Director of Program and Evaluation
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Overview

Southwest Mental Health Center

- Southwest Mental Health Center is a non-profit psychiatric hospital that serves children and adolescents.

- The center has an acute inpatient program, a residential program, and a partial hospitalization (day) program.
- The acute program has 32 beds. A child's average length of stay in the acute program is 7 days.
- The residential treatment program (R.T.P.) provides treatment for chronic or long-term patients and has 8 beds. A child's average length of stay in the RTP is 3-4 weeks.
- The partial hospitalization program serves 7-10 children. On average children in this program receive treatment for 6 hours each day. Children in this program attend an on site school that is part of the Northside Independent School District. This partial hospitalization program serves as a transition or buffer for children who are being reintegrated to their families.

Child Guidance Center

- The center was founded in 1956.
- The center has a patient load of approximately 2800 children. 1500 children are seen at the CGC and approximately 1000 children that are seen at offsite locations.
- The center collaborates with juvenile probation, 10 SAISD schools, Center School in the NEISD, Headstart, and Child Protective Services.
- The center is 1 of 21 agencies that see children for CPS.
- The center operates on a sliding-fee scale basis. The United Way is the base of funding for the center.

- The center's collaboration with the UTHSCSA medical school leverages psychiatric and other staff (fellows, interns, etc.) and allows staff to see a wide variety of patients. The severity of mental health issues treated varies from minor to those that are on the way to the hospital.
- The average number of sessions for clients is 9-10 sessions.

Department of Education and Clinical Studies, Our Lady of the Lake University

- OLLU offers a Psy. D. program as well as three Masters programs in the area of psychology. One of the programs trains licensed school counselors.
- The school counseling program strives to train individuals who can not only assess psychological problems but also provide prevention and consultation services.
- There are currently 26 students in the school counseling program. Most of the graduates stay and practice in the San Antonio area.

La Familia

- This nonprofit agency is comprised of 10 therapists that provide services in several counties. Cities served include Bandera, New Braunfels, and Boerne.
- Child Protective Services is the main referral source for the agency's clients.
- 90% of the services provided are conducted in home visits.
- Beginning next spring or summer, will offer a Training and Development Program for professionals. Will allow professionals to earn CE credits. Part of the program will focus on breaking down barriers to communication between parents and school administrators concerning special education.

Child Protective Services

- CPS is a sub-agency of the Texas Department of Protective and Regulatory services.
- CPS is the largest agency within TDPRS.
- CPS is a state and federally funded civil agency.
- Programs within CPS include:
 1. Family based safety services. This program is responsible for conducting home investigations when there are allegations of abuse/neglect.
 2. Conservatorship Program. This is the program that is responsible for children that have been removed from their family.
 3. Foster Care Program. Foster homes are licensed to provide housing for children with specific, identified needs. There are homes that provide for children with basic needs, medical needs, and emotional needs.
 4. Adoption Program.
 5. Permanent Managing Conservatorship Program. This program is responsible for children who will be kept long-term (until they age out of the system).
 6. Reunification Program. This program is designed to facilitate the reintegration of children to their families.
- CPS tracks the children that it removes. Recent trends show that kids that get removed are younger and more likely to have serious issues.
- CPS places children all over the state of Texas.
- The biggest problem that CPS has is finding long-term care.

Rosa Verde

- This organization operates 4 clinics in San Antonio s neighborhoods.
- It provides outpatient mental health services to approximately 75 children and adolescents. In addition to physicians, LMFT, LPC, and LMSW therapists are employed. The 16-18 therapists are trained to use resources and to do socio-economic assessments.
- The organization provides a lot of pro bono work. The agency works closely with families to arrange services. The agency provides bilingual services. Mexican Americans and African Americans make up the bulk of the patient population.
- Many families that receive services consist of a single mother with multiple children by multiple fathers.
- The agency emphasizes the needs for cultural understanding on the part of therapists. Specifically, the agency operates with an awareness of the Culture of Poverty .

Issues

Beds

- The San Antonio State Hospital has 40 beds available for adolescents.
- Laurel Ridge Hospital has 25 beds.
- Southwest Mental Health Center has 32 beds for acute care and 8 beds got long-term care.
- Methodist Hospital has approximately 20 beds.

Medicaid and Managed Care

- Managed care and Medicaid present challenges.
- Medicaid and many HMOs allow for the treatment of mental health issues only when they are deemed medically necessary . All too often, insurance companies ignore the psychosocial dimension of mental health issues.
- The support for mental health care outside of the medical model is nonexistent .
- Agencies are often required to justify the care that they provide to funders on a daily basis. This requirement results in a large volume of paperwork.
- Insurance companies may take 6 or more months to compensate agencies and professionals for services that have been provided.
- At times, it becomes an ethical dilemma to weigh the need to provide care against finding a funding source.
- Of those families with children, often children will have Medicaid, but the parents will not.
- Working parents may earn too much for programs such as CHIP, but do not earn enough to afford health coverage.
- Assessment levels by agencies and insurance companies sometimes result in a child being transferred from a given facility at the very moment that he or she is beginning to exhibit benefits of treatment.
- Continuity and consistency of treatment are vital in order for therapeutic gains to occur.

Child v. Family Issues

- There is a need to balance respite for family members with the need for family members to get informed in order to be able to effectively advocate for a child that is receiving treatment for a mental health issue.
- Children are often left without a support system when they are hospitalized. There is a need for more alternatives than just put them in the hospital .
- Even though the child is the identified patient that is receiving treatment for a mental health issue, the family is often so chaotic that it is difficult to effect a real change in the child s life.
- The cycle of violence and abuse results in increased numbers of children with mental health problems.
- There has been an increase of children with attachment disorders.
- It is important to assess the family s response to therapy.
- It is crucial that families of children with mental health problems get the appropriate special education service.
- The family may be pulled out (sometimes prematurely) of the counseling/therapy process due to the proliferation of better drugs to treat children with mental health issues.

Transportation

- Access to transportation influences whether or not families with children in need of mental health interventions will seek and continue services.
- Treatment facilities are spread over a large geographic area.

Ways to improve the distribution of services

- Children need a safe haven/protective envelope. Could public schools be the base of such support?
- Sometimes families see schools as enemies.
- The Rosa Verde is interested in creating an information center. The goal is to create a mall of services or a wrap-around service that functions to guide the family .
- Wrap-around studies may provide a model for a local program. The goal is to provide one-stop-shopping for families seeking information about children s mental health issues and/or treatment options.
- A high-quality, integrated database of resources would be helpful to coordinate the provision of services.

Alliances

- While collaboration is desirable it is accompanied by various challenges such as those related to competition for funds and differing populations and service criteria for each agency.
- In order to understand how to form alliances among agencies that treat mental health issues in children, it is necessary to understand what drives fragmentation of services.
- Creating a forum for leadership in the community could make local, state and federal legislators aware of the issues that are relevant to meeting the needs of children with mental health issues.

- Santa Rosa Children s Hospital is viewed as an organization that is a significant advocate for children in the community.
- The Bexar County Community Resource Coordination Group along with the Child Management Team may offer opportunities to facilitate or help initiate collaborative efforts.

The group discussed the need to have these types of groups and discussions on an ongoing basis since many of the participants seldom get this type of opportunity. It is helpful to know that others go through the same struggles and challenges and that there may be opportunities to collaborate, to experience mutual support and learn from each other.