

CRB Training Module

Mental Health Services

Learning Objectives

After studying the information in this training module, you should be able to

- Identify mental health treatment options
- Identify the specialized services of mental health professionals
- Understand how a client can access mental health services
- Understand how the shortage of mental health professionals impacts clients
- Understand how an appropriate level of mental health care is determined

Introduction

Mental health is how a person thinks, feels, and behaves in reaction to life situations. Mental health problems range in severity from a disabling condition to minor disturbances in daily functioning. Accordingly, mental health treatment services range in intensity, duration, and restrictiveness.

During the 2005-06 fiscal year, CRB reviewed the cases of 2,055 children in state custody. Sixty-two percent (1,283) of those children were identified as having behavioral or emotional problems. However, almost three hundred of those children were not receiving treatment. It is important that CRB members understand the mental health services available for children whose cases are being reviewed.

Treatment Services

Various services are available for treatment of mental and behavioral health problems in children. Services range in intensity, duration, and restrictiveness in order to best address the problems being experienced.

Outpatient Therapy is the least restrictive type of treatment, usually involving one hour-long session per week in an office setting. Outpatient therapy can also take place in the client's home or in a school setting. The duration and frequency of treatment can be tailored to the client's needs. Sessions can be individual (one-on-one with the therapist) or can include family members. Group therapy sessions usually involve four or more unrelated clients who have experienced similar problems.

The type of intervention used in outpatient therapy is tailored to the client's needs. For young children, play therapy allows a child to communicate through play-based activities. Psychotherapy, sometimes called "talk therapy," is appropriate for clients who

are able to express emotions and explore problems through conversation with the therapist.

In addition to traditional outpatient therapy, specialized outpatient programs provide services to meet the needs of targeted populations. ***Multisystemic Therapy (MST)*** is a type of outpatient therapy that involves intensive therapy provided in an office or home setting. MST is typically used for juvenile offenders and their families. The goals of this specialized therapy are to improve parental discipline and decrease juvenile antisocial behavior. MST involves all aspects of the client's community, including family, friends, school, employment, and recreation. MST is typically long-term therapy, involving sixty or more hours of treatment. ***Functional Family Therapy (FFT)*** is another specialized outpatient therapy. FFT is family-based intervention provided in an office or home setting. This therapy is targeted at juvenile offenders and youth at risk for out-of-home placement. FFT is short-term, typically twelve hour-long sessions and is focused on the client and the client's family.

Case Management is a service that helps clients arrange an array of services to address mental health and other life problems. A case manager is a person who assists the client in accessing appropriate services. Typically, a case manager will work with the client to develop a service plan. This plan identifies the client's needs and establishes a plan for addressing these needs through community services. The plan can address a variety of problems, including mental health, medical, educational, and other life areas.

Respite Care is a service that provides a break to parents or caregivers of children with serious mental health problems. Trained personnel care for the child for a prearranged number of hours, allowing the parents/caregivers to take time off from caring for the child. The severity of the child's problems and the amount of strain experienced by the parents/caregivers determine the number of respite care hours per month.

Day Treatment is a therapeutic service provided for several hours a day. Day treatment is appropriate for children requiring more intense treatment than provided by outpatient therapy. Typically, day treatment includes counseling, skill building, recreational therapy, and parent training.

Treatment Foster Care is therapeutic around-the-clock care provided by specially trained foster parents in their home. While residing with the treatment foster family, the child receives therapy and psychiatric care, as well as attending school and participating in family life.

Residential Treatment Centers (RTC) provide around-the-clock treatment of children needing constant supervision and care due to serious mental/behavioral health problems. Children in this treatment setting live at the RTC in a group environment. Trained staff members provide intense structure and consistency. Treatment involves individual, family, and group therapy, as well as psychiatric care. Children in RTC attend school, receive medical care, and participate in structured daily living.

Inpatient hospitalization is the most intensive form of mental health care involving short-term treatment for children who present a danger to themselves or others. The child may be suicidal, homicidal, or experiencing other serious psychiatric problems. These services are provided by a psychiatric hospital or the psychiatric unit of a general hospital. Typically, children requiring inpatient hospitalization remain in this setting for a short duration, until they can be safely treated in a less restrictive environment.

Mental Health Professionals

A variety of mental health professionals work in the settings described above. Each professional specialty is licensed by the state and individual professionals must pass standards to be licensed.

Psychiatrists are medical doctors who specialize in the treatment of mental disorders. Psychiatrists prescribe medication for the treatment of mental disorders and may also provide psychotherapy. Psychotherapy is treatment involving identifying and resolving behavioral patterns or past experiences that are causing a patient distress.

Clinical Psychologists conduct diagnostic tests to assess a patient's cognitive, emotional, and psychosocial functioning. Clinical psychologists may also provide psychotherapy. In New Mexico and Louisiana, specially trained psychologists can prescribe psychotropic medications. Clinical psychologists have a doctoral degree.

Mental Health Social Workers are often referred to as Clinical Social Workers. They provide individual, family, or group psychotherapy to resolve mental health or substance abuse problems. Clinical Social Workers have a Master's degree and are licensed by the state. Social workers with a bachelor degree are also licensed by the state and typically practice in non-clinical settings providing social services and case management.

Mental Health Counselors provide similar services as clinical social workers, but have a Master's degree in Counseling and are only licensed at the Master's level. Both Mental Health Counselors and Social Workers are sometimes generically referred to as "therapists."

Accessing Treatment Services

When a child needs mental health treatment, there are several ways the caregiver can access services. The caregiver or social worker can contact the child's insurance provider and request a list of covered mental health providers. Alternatively, the caregiver can ask the child's pediatrician, social worker, or other service provider for a referral to a mental health provider. If the child has previously received mental health services, that provider can be contacted in order to resume treatment or request a referral to another treatment provider.

In some areas of New Mexico, accessing appropriate services can be difficult because of the shortage of mental health professionals. In fact, every New Mexico county except Los Alamos County is classified as a primary care, dental, or mental health professional shortage area by the federal government. The number of available psychiatrists is particularly concerning, as only 130 psychiatrists work in the state. Because of this shortage, New Mexico is one of only two states to allow psychologists with specialized training to prescribe psychotropic medications. The shortage of mental health professionals means residents of rural areas may have to travel to access treatment. Also, the wait time for an appointment with a mental health professional may be prolonged. Even in urban areas, patients may have to wait several months for an appointment with a psychiatrist.

Medicaid and Value Options

The bulk of mental health services accessed by children in foster care are funded through Medicaid. The parameters of what services Medicaid will cover are determined by federal and state regulations and managed in New Mexico by Value Options. Regulations require Medicaid only cover services deemed “medically necessary.” Outpatient therapy and community-based services, such as case management, typically meet medical necessity with minimal criteria. However, more restrictive services, such as day treatment, treatment foster care, residential treatment, and inpatient hospitalization require “prior authorization.” The treatment provider will assess each client and determine if they meet the criteria of medical necessity. If the criteria are not met, the client will not be eligible for the treatment service because they will likely be better served by a less restrictive treatment option.

Determining the Appropriate Level of Care

It can be difficult for a caregiver to assess which treatment service will meet the child’s needs. The best way to make this determination is to seek the advice of a trained professional. The child’s social worker can help determine if the child needs outpatient therapy or a more intensive form of treatment. If the social worker is uncertain, an outpatient agency can assist in ascertaining the child’s needs. An outpatient therapist can conduct an assessment and determine if outpatient therapy will meet the child’s needs. However, if the caregiver or social worker fears the child presents a danger to him/herself or others, a psychiatric hospital or psychiatric unit of a general hospital can help determine if the child needs emergency inpatient care.

Implications for CRB

The children whose cases are reviewed by CRB are likely to have problems that may benefit from mental health treatment. In 2005-06 fiscal year, over half of the children reviewed by CRB were identified as having behavioral or emotional problems. Seventy-nine percent of these children were receiving treatment, while the remaining twenty-one percent were without treatment services. It is important that CRB members understand the type of treatment each child is receiving in order to make a recommendation for

continuation or alteration of the treatment. For example, if a child is not making progress in outpatient therapy and is continuing to struggle with emotional or behavioral problems, CRB can recommend that more intensive treatment options be explored (such as a Day Treatment program).

It is equally important that CRB members advocate for the children who lack treatment and may benefit from accessing such services. Even if such services are not available in the county, recommendations for such services should still be made. CRB members should make recommendations about initiating treatment and might suggest the types of treatment options that should be explored. Additionally, CRB members should make recommendations regarding how services should be accessed (i.e. the child's social worker should provide a mental health referral, or the child's former therapist should be contacted by the social worker). Most CRB members, however, have not had the necessary training to recommend specific treatment regimens, and even those members with relevant training have not had experience with the specific children being reviewed. They must be careful, therefore, not to make inappropriate recommendations.

References: Personal communication with Steve Johnson, New Mexico Behavioral Health Collaborative; New Mexico Policy Commission. *2007 Quick Facts*. <http://hpc.state.nm.us/QuickFacts/quickfacts2007.pdf>; Substance Abuse and Mental Health Services Administration National Mental Health Information Center. *Mental Health Dictionary*. <http://mentalhealth.samhsa.gov/resources/dictionary.aspx>; U.S. Department of Labor, Bureau of Labor Statistics. *Occupational Outlook Handbook, 2006-07 Edition*. <http://stats.bls.gov/oco/home.htm>; U.S. Department of Labor, Bureau of Labor Statistics. *Occupational Employment Statistics*. <http://data.bls.gov/oes/search.jsp>; Value Options of New Mexico. *Provider Handbook*. www.valueoptions.com/newmexico/provider/handbook.htm

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