Guide to Connecticut Community KidCare

What is Connecticut Community KidCare?

Connecticut Community KidCare ("KidCare") is a statewide effort to reform the way children's behavioral health services are *coordinated, financed and delivered* to children and their families. KidCare will eventually offer a wide range of services and supports designed to help children with behavioral challenges experience success in their home, school and community environments.

KidCare is based on the principles that:

1) children with behavioral health needs should receive services in their community whenever possible,
2) parents and families are an integral part of the planning and decision making process.
3) services need to be provided in a linguistically and culturally competent fashion.

KidCare is focused on improving the quality and availability of community-based services and supports for children and their families. The initiative began in October 2000. The types of behavioral health services available and the way in which the services are delivered and funded will continue to evolve, however the most dramatic changes will be evident beginning in October 2003.

KidCare refers to a set of clinical and non-traditional services that address children's mental health needs. Local Community Collaboratives, or Systems of Care (as they were previously called), form the backbone of the new service system. The Collaboratives consist of a variety of mental health and social service agencies plus parents and community providers who comprise the network that helps individual children and families develop comprehensive treatment plans.

In addition to services, KidCare refers to a philosophy that places parents and caregivers at the center of treatment planning activities, and that relies heavily on collaboration between various service systems. Schools provide vital services and supports to children with behavioral health problems and need to be connected to community-based treatment planning.

What is a Local System of Care, or Community Collaborative?

A local System of Care, or Community Collaborative, is a group of children's behavioral health and community service providers, parents and advocates who meet on a regular basis to improve the way behavioral health services are delivered in your local community. A close working relationship between school personnel and the local Community Collaborative greatly enhances efficiency and clarity of the referral process. Each Collaborative operates in a slightly different fashion, but all remain committed to helping children with serious emotional disorders succeed in their homes and/or communities.

What Types of Services are Available?

Services are currently available in varying degrees. Not every community has access to all services at this time. It is anticipated that the full array of services will evolve over the next two years.

KidCare services will include:

- Inpatient Services
- Outpatient Services
- Home-Based Services
- Emergency Mobile Psychiatric Services
- Partial Hospitalization
- Crisis Stabilization Beds

The most needy of children with complex behavioral health needs may qualify for an enhanced set of services that will include:

- Care Coordination
- Extended Day Treatment
- Comprehensive Global Assessment
- Intensive Home-Based Services
- Respite Services
- Behavioral Management Services
- Behavioral Consultation
- Individualized Support Services
- Residential Treatment Services

Descriptions of these services and their current availability can be found by clicking on the KidCare icon at the DCF website (www.state.ct.us/dcf) and viewing the Resource Directory.

Who is Eligible for KidCare Services?

The following groups of children and families are eligible to receive KidCare Services:

- Children and families insured under the Husky A and Husky B programs
- All children committed to DCF, including Juvenile Justice children
- Children and families who meet criteria for the DCF Voluntary Services Program

Those children who exhibit complex behavioral health needs will qualify for an enhanced menu of KidCare behavioral health services. The kinds of services offered under the KidCare model will depend upon the needs of the children and families involved. The most extensive and intensive services, including individualized care coordination services and involvement with the local Community Collaboratives, will necessarily be reserved for those children with the greatest need.

Children deemed eligible under HUSKY A and B those children committed to DCF will receive behavioral health services at no cost to the family as KidCare is designed to replace existing publicly funded services offered through Medicaid and DCF supported programs. Families with private insurance whose child qualifies for Voluntary Services on the basis of severity of behavioral health need, will be required to utilize private insurance for services covered under their existing policy. For some Voluntary clients, family co-payment may be collected to defray some of the costs of these publicly funded programs.

Who are Children with Complex Behavioral Health Needs?

Children with complex behavioral health needs are those children who exhibit behavior that meets the criteria for a psychiatric disorder as outlined by DSM-IV (the Diagnostic and Statistical Manual of the American Psychiatric Association); who exhibit behavior that substantially interferes with or limits their performance of developmentally appropriate activities at home, in school, or in the community; and who need specialized coordinated services. Most youth who fall into this category are involved in two or more service systems (community mental health system, juvenile justice, special education, etc.) and many have received treatment in psychiatric inpatient settings or residential treatment settings. Please note that children who exhibit complex behavioral health needs may or may not meet the special education definition of SED (serious emotional disturbance) under IDEA.

What are Emergency Mobile Psychiatric Services?

All children in Connecticut have emergency mobile psychiatric services available to them through a statewide network of 11 mobile teams that provide consultation to school staff around student related

behavioral health issues. When necessary, and with parental notification and permission, teams of trained professionals can assist school personnel in assessing a child's immediate mental health status during a crisis situation (e.g., child presents with suicidal ideation, serious psychiatric symptoms, or severe anxiety related to trauma). The emergency mobile psychiatric teams can help school personnel in developing and coordinating appropriate plans for crisis intervention. This valuable resource is reserved for children experiencing serious and acute mental health needs. Triage and referral to appropriate follow-up care will depend on the wishes of the family, the resources available to them, and the needs of the child.

What is a Child Specific Team?

A Child Specific Team consists of the family, friends, community service providers, school staff and/or others who, at the invitation of the family, collaborate in offering a variety of solutions, services and supports to help the child and family function at their best. A Child Specific Team meeting is a meeting convened at the request of the family to assist the family in forming a service plan to meet the needs of the child in an appropriate and timely manner. The parent, with the assistance of a care coordinator, identifies the members of the Child Specific Team.

How is a Child Specific Team Different from a PPT?

The main goal of a Child Specific Team meeting is to bring caring people together to respond to the unique and challenging needs the family has in supporting and raising a child with serious behavioral or emotional needs. It is **not** a team meeting to determine eligibility for special education services. Determination of eligibility and recommendation for special education services can only be done by a PPT and is a school initiated and managed process.

What is the Role of the Care Coordinator?

A care coordinator is a specially trained service broker who works in partnership with families to identify and advocate for services appropriate to the child's needs. This individual serves as a support to families and is responsible for insuring that an individual service plan is developed and implemented. Care Coordinators are affiliated with specific Community Collaboratives, and are employed by various non-profit service agencies.

Can Community Providers or Parents Refer Directly for Services?

Yes. Community Providers with the appropriate release of information can make referrals to the local Community Collaboratives or the regional DCF Systems Coordinator. Parents can self-refer.

How do Community Providers Refer?

In making a referral, community providers should determine whether the parent or caregiver is receptive to receiving services. If so, parents may contact the Community Collaborative care coordinator, or the community provider may assist them in making this contact.

What Additional Information is Available for Community Providers or Parents?

- **For information about Husky A & B, call 1-877-CT-HUSKY or go to www.huskyhealth.com.**
- **Contact information for Emergency Mobile Psychiatric Services and Family Advocacy Organizations is provided in the Regional Resource Directory.**
- **Information on KidCare training opportunities is available on the DCF website www.state.ct.us/dcf under KidCare Institute.**

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