Addressing Unmet Needs of High Acuity Youth

Safe and Sound Updates, Perspectives, and Practical Applications from State and Local Leaders

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Panelists







Andrew (Andy) Crawford, LCSW Director, Bedford County Department of Social Services



Amanda Long

Director Youth Network,

Culpeper CSA



Em Parente, LCSW, PhD

Assistant Director Division of Family Services, Virginia Department of Social Services



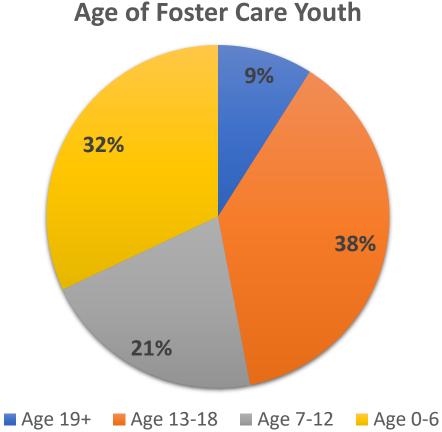
Kari Savage, MS

Director, Office of Child and Family Services, Virginia Department of Behavioral Health and Developmental Services

Virginia's Youth in Foster Care

Virginia DSS data, Sept 2024

There are **5,260** youth in foster care in Virginia (~50/50 male/female)



Mental Health and Foster Care

Higher rates of mental health issues

Studies indicate that up to 80% of children in foster care have significant mental health issues, compared to about 20% of the general youth population.

Trauma exposure

Abuse, neglect, exposure to violence \rightarrow PTSD, anxiety, depression

Access to mental health services

Barriers, inconsistent trauma-informed care and specialized services

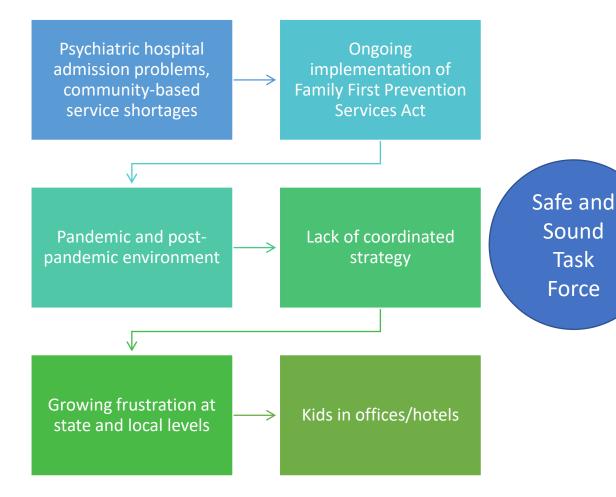
Stigma and misdiagnosis, overprescribing of psychotropic medications

Misinterpretation as behavioral; over-pathologizing, inappropriate disciplinary measures

Role of stability and support

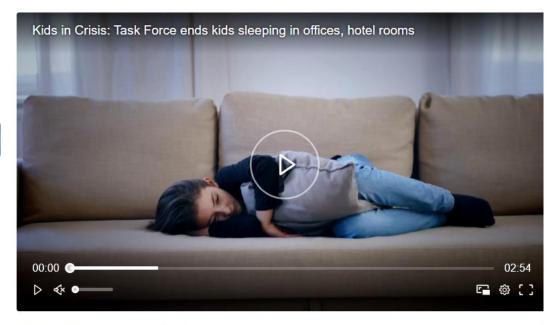
Crucial in improving mental health outcomes

Background



Finding foster children homes instead of sleeping on office couches, hotels

Foster Care: Kids in Crisis is a 10 News investigation looking into several aspects of the Virginia foster care system

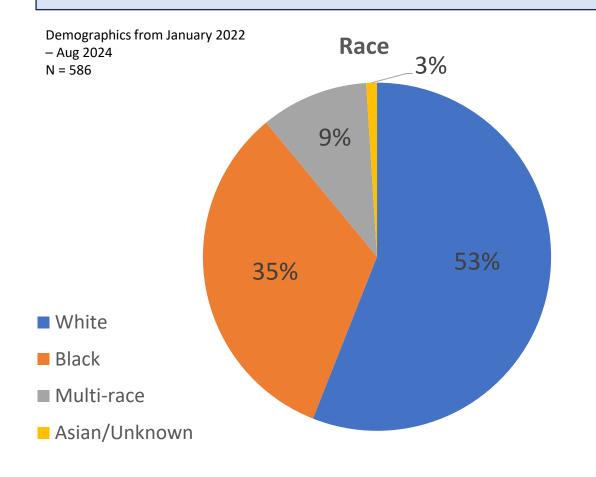


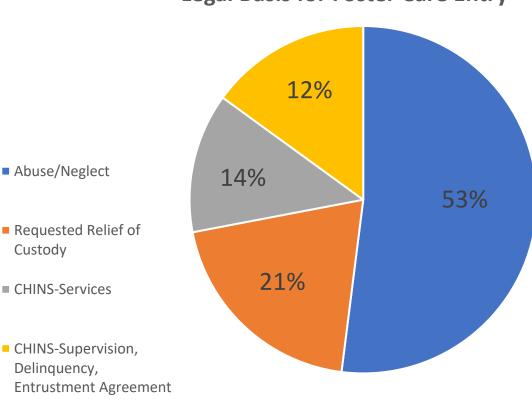
ROANOKE, Va. – Foster Care: Kids in Crisis is a continuing 10 News investigation looking into several aspects of the Virginia foster care system. You can see those stories **here**.

Safe and Sound Demographics

Unmet needs and causes for lack of appropriate level of care and displacement

- Aggressive behavior
- Low IQ (<70)/Developmental Disorder
- Juvenile justice involvement
- Prolonged inpatient hospitalization
- Recent emergency room visit for medical or behavioral health issue
- Barrier to step-down or return to previous placement
- Chronic medical condition
- Trauma, grief/loss
- Length of time in foster care

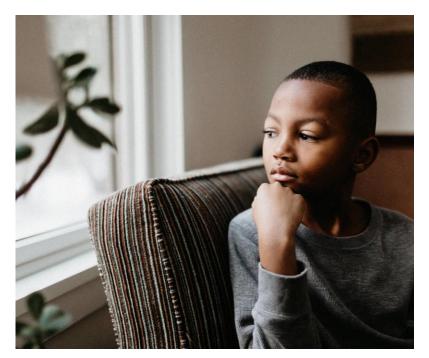




Legal Basis for Foster Care Entry

Who are high acuity youth?

Youth who are in the custody of local departments of social services and have multi-system involvement (i.e., child welfare, juvenile justice, mental health), and complex medical and/or behavioral health needs that typically exceed the resources, processes, and expertise of any one provider or system.













Root causes

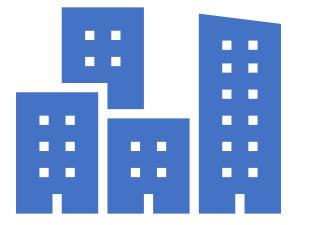
Lack of support for relatives and fictive kin who step up to care for children Lack of capacity to place children who enter care with relative foster parents

Gaps across the continuum of care esp for higher needs

System siloing

Workforce challenges – provider availability & expertise in certain domains

Fragmented systems & financing



Patterns & Trends

- ~75-82% of all localities report no disruptions
- About 10-12% of localities experience 1-2 disruptions per year
- About 5% had 4-10 per year
- A small number of localities (~5) experience a disproportionate number of disruptions including some children displaced multiple times
 - Up to 16 disruptions

Tracking Quarters 1-3 calendar year 2024

- Number of Youth Monitored Daily
 - Monthly average: 25 youth
- Total referrals: 211
 - New referrals: 126
- Total displacements: 113
 - Total number new referrals displaced: 50

Addressing Urgent Needs and Root Causes

- Core team
- Go Teams and Rapid Response
- VDSS pilots
- High acuity coordinators
- CCCA

- Right Help, Right Now: Comprehensive crisis services, children's mental health including needs of youth in foster care, substance use treatment, mental health literacy, workforce
- Parental Child Safety Placement Program
- Sponsored residential mental health/child
- Cross-Agency Collaboration local and state
- Best Practices- Kin First Now, Family Finding, Youth Mental Health
- Medicaid Foster Care Specialty Plan
- Psychiatric Residential Treatment Facility quality and services



What's next: Where do we go from here?

Lessons learned

Task Force sustainability

Focus on the long-term changes that are needed

