

## **Wilton Youth Services - Mental Health Needs Assessment**

### **Wilton Social Services Commission Subcommittee Report September 2016**

#### **Executive Summary**

A committee was formed by the Wilton Social Services Commission to examine the degree to which Wilton Youth Services (WYS) is able to meet the current demands of Wilton youth with mental health needs and/or Wilton youth in crisis whose families do not have adequate resources. Early intervention, accurate problem identification or diagnosis, and good support and/or quality treatment are desired outcomes for children struggling with all kinds of problems, including mental illness.

This needs assessment is an effort to focus on the current mental health needs of Wilton children and WYS capacity to deliver services.

From September, 2015 to February, 2016, the committee reviewed various data including the 2006 department mental health assessment, the last five years of department data, survey data from public school support staff, and input from Wilton Youth Council leaders, private mental health practitioners, and local clergy.

To meet the needs of town youth effectively, WYS uses a three-pronged approach: clinical services, community program coordination and oversight, and community outreach. Ideally, the time of WYS staff should be divided roughly equally between these three areas in order to meet demands and expectations. However, our review found that the time devoted to clinical services has increased at the expense of community program coordination and outreach. The committee found that the number of counseling clients has remained relatively steady. However, the clinical time needed by many clients has changed from short-term intervention to longer-term and more complex involvement. The level of severity of some clients needs combined with financial needs, insurance with a high deductible, and availability barriers to outside counseling has resulted in WYS filling the gap.

In addition to the demands for clinical services leaving less time for community outreach and program coordination, our review also found increases in those very two components as well. The committee found increases in demands for parent and student groups; program development, vetting, and coordination; and community outreach and communication. These are critical components of WYS services because they reflect proactive and preventive approaches to mental

health issues. As such, these needs are “good” problems to have, but they represent increased demands on WYS staff.

Our review confirmed that the Town has an exceptional and dedicated youth services staff. However, the staff capacity is strained. There is currently a 27-hour per week coordinator (year-round) and a 15-hour per week counselor (no summers). Given the increased and evolving demands to provide effective youth/family clinical services, quality program offerings, and proactive outreach, the committee found there is not sufficient WYS staff capacity.

The committee believes that with a small additional investment of five hours of WYS staff time per week, WYS will have the infrastructure to better support its three-pronged approach and fully leverage the public and private partnership that oversees the volunteer work and group strategies.

### **The Process:**

During her presentation at the September 2015, Social Services Commission Meeting Colleen Fawcett, Wilton Youth Services Coordinator noted that, “Wilton Youth Services has noted barriers to finding Wilton youth and their families adequate mental health services. Because of this an increasing number of youth are being seen at Wilton Youth Services for longer treatment.”

A committee was formed comprised of Commission members, and WYS staff. The committee was charged with reviewing the current youth mental health needs that are being met and with what manpower and resources, identify the barriers that exist for youth to receive adequate mental health services, identify solutions that have been put in place following the 2006 Mental Health Needs assessment and determine future solutions based on the findings of the committee’s review.

### **The Committee**

The committee members included, Roseanne DeSimone, Pam Kelley, Deborah Low, Virginia Smith and staff included Colleen Fawcett (WYS-Coordinator) and Jihan Hage (WYS intern). Pam Kelley and Deborah Low co-chair the committee. Meetings were held monthly from September 29, 2015 to February 3, 2016. Roseanne DeSimone and Virginia Smith terms expired in December and therefore served on the committee until December.

### **State and Private Funding**

The economic landscape for governmental funding for social services is bleak. At the state level, the budget is in crisis with a projection for a \$1 billion deficit as of July 1, 2016. The Governor and legislature are engaged in intense discussion and debate as to how to address the crisis; serious budget cuts to existing state programs seem inevitable and there seems no possibility for funding increases to social programs.

A possible local impact of the state budget crisis to Wilton Youth Services is the vulnerability of the CT State Department of Education (CSDE) Youth Services Grant (\$14,000 annually for Wilton) and the CSDE Youth Services Enhancement Grant (\$6,250). These grants currently support youth services staff hours. Each year they are at risk of being cut, especially the Enhancement Grant (\$6,250).

In addition to the state budget crisis, opportunities for other grant funding have diminished over the years. For example, grant funding from United Way dried up in part due to the merger with United Way serving 11 towns rather than 2, and in part due to a shift in focusing on more immediate needs such as housing.

There are fewer opportunities for grants and those that may exist often are long shots for Wilton in part because Wilton is recognized as an economically advantaged community. Additionally there are more non-profit organizations and therefore more competition for funds. Many grants require significant staff time to complete. It becomes a judgment call about whether such grants are worth the investment of staff time given the small possibility of Wilton being awarded a grant and/or the sometimes very small amount of the actual grants.

It is more important than ever to assure that WYS runs efficiently and maintains its three-pronged model of providing clinical services, leading community outreach and awareness, and providing and coordinating quality community programs. This will best ensure a proactive, preventive approach to addressing the needs of youth. It will also best leverage the efforts of volunteer town organizations that focus on the needs of young people, which is essential in an era of diminished public funding.

### **Data Collection and Review**

The following data was collected and reviewed:

- 2006 Needs Assessment
- 2006 Needs Assessment accomplishments
- 2016 Survey of Clinicians
- WYS Coordinator job description

- WYS Clinical and referral data
- Online survey of school personnel
- Private Practice phone survey
- Clergy and Wilton Youth Council key stakeholders input

### **2006 Needs Assessment:**

In 2006 WYS and Vision 2020 (United Way funded group collaborative) assessed via interviews with private clinicians, school mental health professionals, clergy, and clinicians at agencies in Wilton, Norwalk, Westport, New Canaan, Easton, Ridgefield and Fairfield, “what obstacles and barriers in mental health exist for Wilton youth and their families.” Our committee reviewed the report and concurred with the report findings that “the needs for mental health services are only increasing and are desperately needed for Wiltonians. More services such as groups and parenting sessions as well as resources for individual, family and group counseling work needs to be put in place at a low cost for the consumer.”

Our committee determined that the 2006 Needs Assessment did not need to be recreated but we would determine what had changed in those nine years. The following specific needs were identified in the 2006 assessment and are grouped here by accomplished, and not accomplished. We have also included changes to the mental health environment since 2006.

### **2006 Needs Assessments Accomplishments**

Developed Pro-Bono providers

- Requires some coordination/follow-up to maintain
- Pro-bono providers now providing pro-bono services to their own clients, not always taking on a new pro-bono case
- Will not take complicated, multiple collateral contact/coordination cases

Positive Directions, through a grant, provided 3 free counseling sessions to children/teens/families referred by Youth Services/Social Services to get families started. Grant exhausted, not sustained.

United Way Mental Health Grants obtained (\$10,000/year) to pay for mental health treatment for youth. Funds followed youth to agency that could best serve their needs. Grant funds were exhausted, and there was a shift in granting when United Way merged, focus also shifted to more basic needs (food, fuel, shelter).

Wilton Youth Council's Parent Connection developed and thriving – providing much needed parent education, networking, support, and skills building.

Community-wide events, widely attended, coordinated and provided addressing de-stigmatizing mental health (No Kidding, Me 2, Anonymous People, Raising Resilient Children, Mental Health Fair/Speaker, Chris Herren).

SWRMHB (South West Regional Mental Health Board) conducted community conversations on mental health needs and provided report. One outcome was NAMI-CAN (National Alliance for Mental Illness – Child and Adolescent Network) support group started in Wilton, meets at Gilbert and Bennett Cultural Arts Center.

Crisis Resource Directory updated, and now available on-line and can be updated more frequently.

Intensive Outpatient up and running at Silver Hill Hospital and at the Hallbrook campus of St Vincent's Hospital in Westport

Dialectical Behavioral Therapy Skills (DBT) group up and running at Insight Counseling and Silver Hill

Intern working each year at WYS (schools too)

Psychologytoday.com is good list of private practice providers making it easier for people to find treatment

Some funds available through Social Services for psychiatric care of youth

**Identified as needed; not accomplished**

No local, conveniently located counseling center for Wilton youth / families

No increase in hours at WYS

No Teen Talk Counselor in Wilton

ICAPS (intensive family preservation services) not expanded

Still very few providers take Medicaid

Still lack of child/adolescent psychiatrists

Private practitioners dropping off insurance lists in favor of private pay, fewer providers accepting insurance

Group treatment for teens still limited or non-existent

Extensive support for families in crisis is still not readily available or conveniently accessed.

### **Changes to the Mental Health Environment since 2006**

Based on input from WYS, the following has changed in the mental health environment since the 2006 Needs Assessment:

- Awareness is increasing, as stigma is slowly decreasing, allowing more to seek treatment for their children.
- WYS is seeing a dramatic increase in anxiety related disorders, in addition to other problems steadily seen – depression, self-harm, illegal substance use and abuse, truancy, screen/gaming problems, school avoidance, and spectrum disorders.
- Fees for private clinician can be unaffordable for many, fewer private clinicians take insurance, some families have very high deductibles, there are limited local Husky providers, there are no longer non-profit counseling agencies located in Wilton and transportation to Norwalk becomes problematic or impossible for some parents due to work schedules.
- There are few clinicians who specialize in children, and there are very few psychiatrists who see children and adolescents, none provide sliding scale fees.

### **Survey of Clinicians**

As a result of input from the commission requesting updated data, the WYS staff conducted a phone survey of nine Wilton clinicians in March 2016. The 2006 Survey spoke with 11 clinicians. Utilizing the same survey questions the committee found the following updates:

- Fees were currently \$150-\$300 per hour, little change from 2006
- 7 of the 9 did not take insurance, all are willing to slide their fees but do so infrequently and only for existing clients
- One clinician took Husky Insurance (Medicaid)

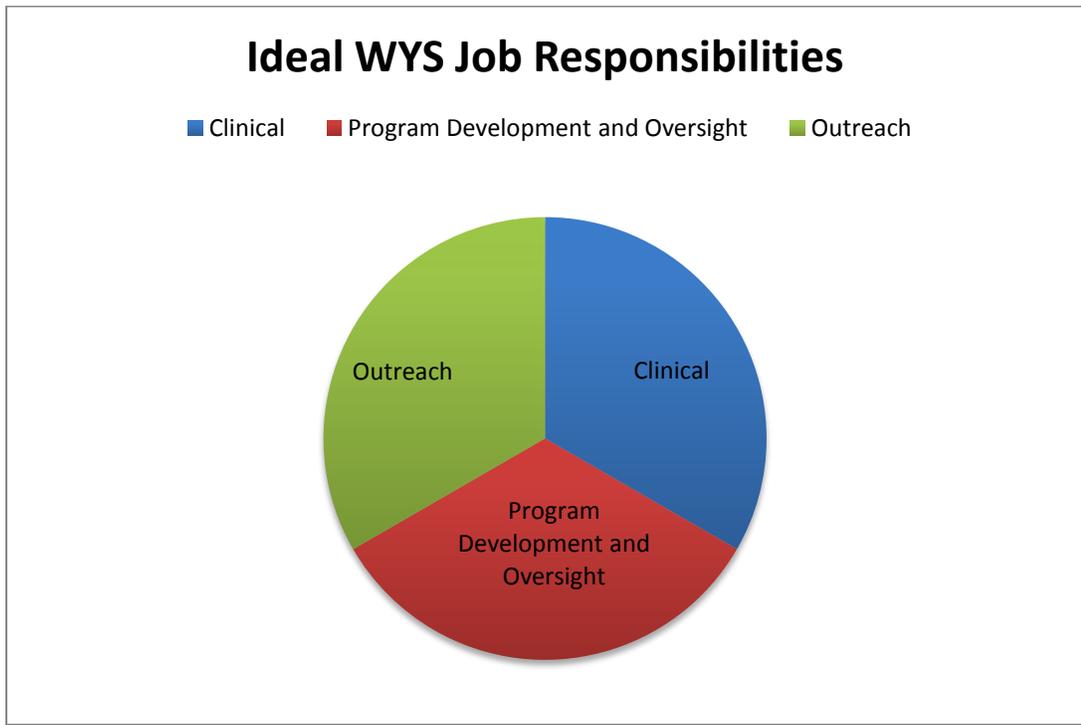
- Those clinicians who take insurance are booked and some of the clients have high deductibles
- Few provide services for children under 13
- Stigma still prevents people from seeking treatment
- There is a need for more adolescent groups.

### **WYS Job Description**

The committee reviewed the job description for the WYS coordinator and found it to be an accurate description of the current responsibilities but did need to be updated to eliminate the term “short term” counseling. The WYS coordinator job description is:

The WYS Coordinator is responsible for identifying and developing, as indicated, a network of human service programs to which Wilton youth can be referred that will support positive growth in the area of mental health. This position is also responsible for providing, on an as needed basis, crisis intervention, problem assessment, counseling, and maintaining contact with area providers in order to be knowledgeable about the service options available to Wilton youth and their parents.

Currently the job of the WYS Coordinator is a part time 27 hour per week position with the assistance of a part-time counselor working 15 hours a week and a part-time unpaid Bachelor-level intern. (As noted earlier, the part-time counselor hours are paid for with a \$14,000 Ct State Department of Education Youth Services Grant and a \$6,250 Youth Services Enhancement Grant.) Since 1994 the WYS coordinator position was budgeted for 24 hours a week and was increased to 27 hours a week in 2009. The ideal allocation of time for the WYS Coordinator is 33% clinical, 33% community prevention program development/oversight and 33% outreach.



Clinical work consists of providing counseling within WYS and providing referral and case management for clients who are not seen WYS.

The community program development/oversight includes staff support of Wilton Youth Council (WYC). Under the Wilton Youth Council organization are the Parent Connection programs that provide quarterly parenting talks and discussion on current issues. WYS advises Parent Connection on topics and speaker selection. In addition, WYS gathers information, compiles and edits the monthly WYC online newsletter. WYS assists the WYC grant writer to prepare and submit grants. WYS also fully manages WYC PeerConnection and CODES programs. The relationship between WYS and WYC is very important to our community and is a perfect example of public and private collaboration. The consistency and knowledge of our WYS staff keep the prevention information flow to parents and students coordinated, timely and accurate. WYC, a 501c3, raises approximately \$50,000 annually to fund the newsletter, Peer Connection, Parent Connection, Class Projects, Youth to Youth and CODES (Community, Outreach, Dedication, Education, Success). The coordination between WYC and

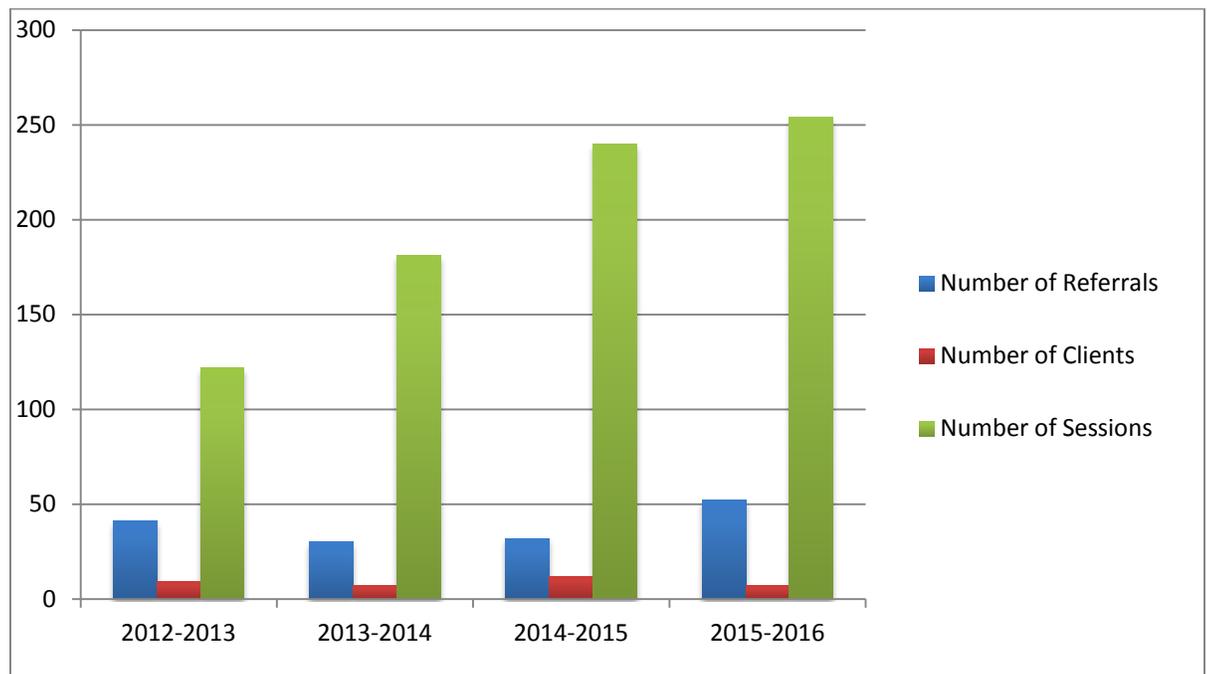
WYS is an excellent example of an effective and productive public and private partnership.

Outreach consists of phone, email and face-to-face visits with area mental health services providers, school professionals, clergy, and youth recreation and program providers. This education and coordination function helps community providers know about available resources for children and their families, facilitates cooperation among providers, identifies trends and needs, and avoids unnecessary duplication of efforts to meet needs.

There has been growth in all three work areas: outreach, clinical, and community prevention program development and oversight.

### Review of clinical and referral data

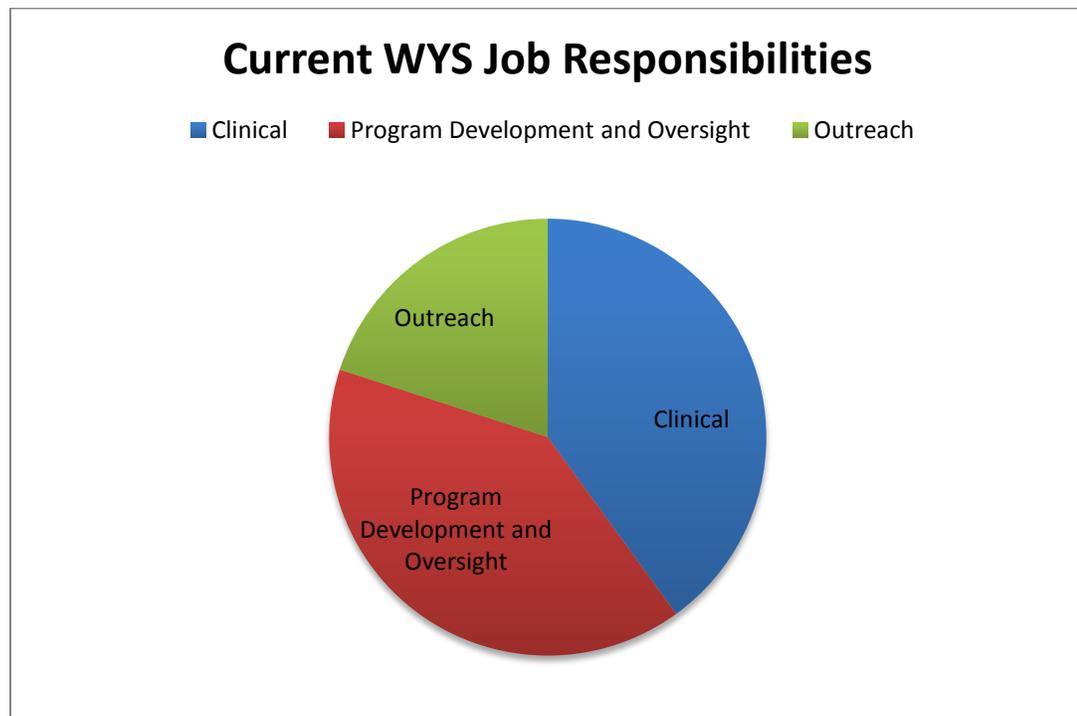
Colleen Fawcett and Jihan Hage collected the data for the last four years for WYS clinical work and referral services. One trend noticed by the committee was although the number of WYS counseled clients had not increased over four years, the number of sessions had increased from 122 to 240.



This is a 100% increase in the number of sessions provided to individuals and families. The increase is caused by the complexity of the cases and the inability to find appropriate and affordable counseling outside WYS.

The referrals are primarily received from schools, 36% (MB and WHS), and parents, 48%, and other, 16%. Referrals are counseled by WYS, referred out with case management or referred out without case management. The referrals take an average of 30 minutes to several hours over several days to process and match clients with appropriate providers.

As a result of the increase in the number of session provided per client, and the increased demands of the prevention programs the third component of outreach is compromised. For example, the essential functions of the WYS coordinator job position including community outreach to police, schools and agencies, chairing the community crisis team, planning Community Breakfasts and time to apply for and administer youth grants cannot be met. The current structure of the WYS coordinator is 40% clinical, 40 % community prevention program oversight and 20% outreach.



## **Survey of School Personnel.**

The committee designed an online survey for school personnel to assess the views of school counselors, social workers, psychologists and administration. Permission was obtained from Dr. Smith, superintendent of Wilton Schools, and an email link to the survey was sent to 30 individuals. There were 23 responses and a summary of the results are as follows:

- 54% had communicated via the phone or email with a representative from WYS a few times a year
- 41% had a face to face meeting with a representative from WYS over the last year

The majority of respondents were aware of the variety of services provided by WYS, some who were new to the district wanted to learn more.

Types of issues referred to WYS (copied from survey results):

- Issues involving families that need help with many different aspects (financial, organizational, referrals to appropriate agencies, etc.)
- Adolescents experiencing family crisis, depression, anxiety, anger management difficulties, substance abuse.
- Counseling support for students with emotional concerns.
- Parent, child or family issues
- Family problems, student needing outside counseling
- Families that need support and can't afford outside help or do not know how to get help for themselves.
- Counseling
- Short term counseling
- Counseling support (either for an individual student or their family)
- Financial need families in transition
- Students with anxiety, school refusal, financially disadvantaged families
- Family issues, students experiencing school related problems – attendance
- Substance abuse

Responses to what is not readily available (copied from survey results):

- Parenting programs to help parents with behavioral problems in children; therapists, etc. that take insurance!!!
- Quick access to mental health and addiction services particularly when someone has state insurance or cannot afford the out of pocket expense due to their insurance plan.
- More treatment facilities for students.
- More options for children that are experiencing difficulty attending school.
- Groups - both for girls and boys
- Referral names of outside clinicians
- Short term shelter/housing as an alternative to kids in crisis
- Outside Counseling services available to families
- Groups to support families going through divorce or provide parenting skills (maybe even groups run after school)
- Groups to address anxiety/stress
- Consultation with schools regarding programming available to students/families
- A cohesive and consistent after-school setting for kids on the spectrum.

Additional services that could be offered by WYS (copied from survey results):

- Continue to build on helping people access mental health and crisis intervention resources.
- Increase ways to inform the community of services available.
- Groups
- Perhaps some type of intermediary support/intervention for school avoidance/truancy.
- Parental support groups
- Perhaps partnering with the high school in order to provide one or two assemblies a year that inform students of mental health resources.

Additional Comments (copied from the survey results):

- Help parents initiate the treatment process and help engage adolescents resistant or refusing professional help.
- I think it is wonderful these services are available; I look forward to learning more about them.
- I think you have a tremendous number of resources available to the Wilton community
- Our social worker is only part-time.... counselors are stretched with 500 kids each...psychologists are busy with testing, attending PPTS, etc. We

REALLY need more support services - whether they come from inside the school or outside of the school to help support our students socially and emotionally. If we could partner with WYS to help fill in some of those gaps or even to help us advocate for mental health staff/programming in our schools we'd be much more proactively and appropriately serving our students and families.

- It would be beneficial if there were groups/education regarding stressors/ external pressures about academic performance, athletics; the need to be perfect...
- Need information about services

### **Mental Health Focus Group – Wilton Youth Council**

A Mental Health Needs Focus Group was conducted on March 1<sup>st</sup>, 2016 and consisted of seven past and present Wilton Youth Council Board Leadership members. The purpose of this focus group was to collect data for the Mental Health Needs Committee in regard to perceived mental health needs within the community as well as services offered through Wilton Youth Services, including Wilton Youth Services work with Wilton Youth Council.

The discussion about services in Wilton was opened with group members expressing the idea that more services are needed, whether in the school system or at Wilton Youth Services. They added that a closer partnership between the schools and Youth Services is needed so that families can be more aware of Wilton Youth Services and access services. Members shared consensus that there is a high work load for school social workers and spent time talking about suggestions that might be improved at the school level, such as:

- Identify kids in need early
- Increase budget for mental health services; use Special Needs budget to increase mental health staff
- Offer in-school Life skills/DBT skills classes
  - Advisory class is a good opportunity to incorporate this.
  - Health class is another opportunity to incorporate this.
- Make sure students have an adult within the school that they can turn to AND that those adults are trained in recognizing mental health issues
- Kids In Crisis Teen Talk Counselor for schools
- Look to other towns as role models in terms of their school curriculum, mental health first aid training, staff training in DBT skills, etc.

Since the main goal of the focus group was to look at WYS in addition to mental health needs within the community, Jihan Hage re-focused the group to discuss the specifics of understanding WYS and suggestions for WYS. The following was shared:

- Bring awareness to WYS through more outreach (many people do not know about what is offered at WYS; many think it's for those with financial need rather than available for anyone in Wilton)
- Encourage peer references (youth referring youth to WYS)
- Increase budget for WYS
- Provide DBT skills groups/trainings
- Address family issues with a focus on parent health and support (parent self-care – “care giving for the caregivers”)
- Improve WYS connection with the schools

The discussion ended with the consensus that Wilton Youth Services (WYS) and Wilton Youth Council (WYC) both need each other, there is a strong partnership, and that one would not exist without the other. WYS offers WYC historical and institutional knowledge and it is imperative to maintain that partnership to efficiently serve Wilton Youth and their families.

### **Wilton Clergy Survey**

Youth Services staff reached out by phone to an Interfaith Clergy leader who offered to send out a 4 question survey to local clergy leaders on behalf of the committee to understand what mental health needs they were seeing within their communities. We received three responses, all of which indicated a need for the following:

- Drug (including cigarette smoking) and alcohol prevention , screening and education
- Anxiety and Depression screening and management

### **Current Status**

There are several service areas that WYS addresses well. Clinicians are experienced – one with 20+ years clinical experience, the other with 5+ - both experienced in working with children and families. WYS has a deep knowledge of

services for children in the area which enables finding the best services for Wilton youth. Institutional knowledge is valuable to WYC's volunteer organization, as well as Social Services Department. Collaboration and Program Development with Wilton Youth Council is strong, although there is more to do because there are more programs WYC has developed with WYS over the past two decades.

Through review of the data, the committee also found needs identified but not yet fully met:

- Family counseling services
- Increased counseling time for individual students and their families
- Groups are needed to help kids build skills around healthily managing: anxiety, social skills, emotions, mood, stress, transitions, problem solving
- School mental health professionals and community-based clinicians need to be more aware of mental health resources available so that families can be connected to those services
- Specialized groups for common issues – anxiety, depression, divorce, grief, social skills, bereavement, eating disorders
- Parenting groups

**Solutions to date:**

In order to address a portion of the need for counseling, and based on the preliminary review of this report, WYS and WSS is seeking a clinician for youth who takes Husky Insurance and is willing to work in donated space either at Comstock or a Wilton center location within walking distance from Middlebrook and WHS. The best location is still being investigated. Thanks to the efforts of WSS and WYS, there was a potential provider willing to take Husky and see clients at a local church. The arrangement did not come to fruition due to liability concerns on the part of the clinician and the church. WYS and WSS will continue outreach to encourage other local mental health providers to accept Husky insurance.

As a back-up plan, if the Youth Services Enhancement Grant is lost (\$6,250) for 2016 Social Services is able to cover the loss through a shift in funds from another line item.

### **The Committee Findings:**

In summary, the committee was impressed by the WYS three-pronged organizational approach to youth services (clinical services, community prevention programming/oversight, and community outreach). In addition, the skills and dedication of the staff are evident. The responsiveness to youth and families in crisis is commendable as is the ongoing support for individuals and families with complex and multi-layered needs. In addition, the strong public and private partnership with the Wilton Youth Council and its multiple programs and projects for youth and parents is remarkable and invaluable to the community. The positive and open relationship with the Wilton Public Schools staff results in responsiveness to needs and coordination of services for students.

Based on review of the data collected, the committee's primary recommendation is to ensure that the three-pronged model for WYS continues and that the three components (clinical services, community prevention programming, and community outreach) are afforded equal staff time. This model best ensures a proactive, cohesive, and coordinated system to support the mental health needs of Wilton youth.

In the current bleak economic climate, the committee understands that funding will be even more limited for social programs. However, it is important to remember that WYS provides not only direct services to clients but also supports and coordinates a range of volunteer efforts in the community and a range of group services for youth.

In an era of limited budgets, the need to leverage volunteer efforts and services for youth groups (rather than individuals) is stronger than ever. The committee believes that with a small additional investment of five hours of WYS staff time per week, WYS will have the infrastructure to best support its three-pronged approach and fully leverage the efficiency of volunteer work and group strategies. Specifically, these additional five hours could provide:

- Increased community outreach with schools, youth program providers, pediatrician offices and mental health clinicians to remain current on available services for Wilton youth, and to coordinate with those groups to ensure adequate mental health services are available.
- Provide group Dialectical Behavioral Therapy (DBT) sessions to both Middle or High School students to help develop healthy coping mechanisms and prevent more significant mental health problems

- Greater oversight and development of the proactive prevention programs targeted to the needs of the community resulting in current, effective, evidence-based programming for youth.
- Outreach to emphasize proactive practitioner strategies and increase referral places for youth and family needs.
  - Convince more providers to accept at least some Husky insurance recipients, and/or join other insurance panels.
  - Encourage pediatrician offices to provide proactive mental health screening as part of regular exams.
  - Find more psychiatrists and therapists who will not only accept insurance but also work with younger aged children.
- Greater oversight and development of the GoZen anxiety management program to ensure all students interested are able to participate, and parents are given orientation to the concepts.
- Sufficient coordination of parent groups/education. Parent groups are currently doing well but need consistent attention to reflect current research and strategies and to adequately train and inform the willing, organized, and dedicated volunteers.
- Re-establish Community Breakfasts and Community Crisis Team to coordinate and strengthen the network of mental health organizations, providers, and volunteers.

The committee found that with a slight increase in the hours at WYS, the Wilton community would have a stronger infrastructure to proactively, effectively and efficiently address youth mental health needs.