

**Rural Children's Mental Health Consortium
(RCMHC)
Annual Progress Report for
Ten-Year Strategic Plan**

Logic Model Goals

Goal 1: Determine and promote awareness of the specific challenges families of children with mental health and behavioral disorders face in Nevada's Rural Region.

1. Establish and maintain connection through community outreach.
2. Advocate for specific mental health services on three levels: community, county, and state coalitions
3. Promote improvement of mental health services by assisting communities in advocacy within internal state agencies.
4. Identify stakeholders who are in a position to facilitate changes in each community.

Activities and Strategies	Progress
Continue dialogue with community stakeholders and meet with Nevada Coalition leaders, visit regions, and attend community meetings and forums to establish communication as a means of advocacy and awareness.	<ul style="list-style-type: none">- During the 2011 period, Nevada PEP, Statewide Family Network continued to conduct family training in Nevada's Rural Region.- A RCMHC member developed the System of Care (SOC) training that and a contractor of another member agency has been distributed on a limited basis. Plans to continue to partner with rural community members.- Nevada PEP has conducted monthly support group meetings in rural Nevada.
Develop a contact list of Rural Region stakeholders.	Inputs through June 30, 2011 available; no further entries since July 1, 2011 due lack of administrative support.
Placement of the RCMHC brochure in both English and Spanish in Rural Region.	Nevada PEP, Statewide Family Network will continue to monitor and respond to inquiries generated from RCMHC Brochure, both in English and Spanish.
Partner with the training office for Rural Mental Health Clinics to conduct a training-needs survey with staff providing services to children and youth.	This is a recent activity and strategy.
Meet/communicate with each Rural Mental Health Clinic to develop or enhance existing resource lists for children in their respective communities.	Proposed; minimal progress. SOC under budget and time restraint that are impacting progress.
Provide training in play therapy to at least one therapist in each Rural Clinic.	Recorded play therapy training that will be duplicated and made available to Rural Clinic Therapists and other licensed

	personnel and mental health students. This training will include PowerPoint and video. Plan to explore obtaining continuing education units for various disciplines. Minimal progress; continue.
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Goal 2: Promote the mutual sharing of regional resources to improve mental health services for families of children with mental illness and behavioral disorders in Nevada's Rural Region.

1. Encourage Memorandums of Understanding (MOU) or informal agreements.
2. Promote flexibility and access to needed services within catchment areas, inter-state, inter-county, and inter-coalition boundaries.
3. Support the establishment of an annual Nevada Rural Region mental health summit to include stakeholder, families, youth, and all interested parties.
4. Develop ongoing ties with individuals in the community who can assist with logistics for on-site visits and meetings.
5. Utilize PSAs, local newspapers, and community settings to post Consortium meeting agendas.

Activities and Strategies	Progress
Develop RCMHC website.	Proposed; no progress; budgetary constraints.
Engage Nevada Tribal stakeholders; facilitate development of a consortium and participate on statewide level of policy and funding.	RCMHC chairman member, along with two of our stakeholders supported and volunteered at the Native American Youth Leadership Event, August 2011 at the University of Nevada, Reno.
During the 2012 Native American Youth Leadership Event, at the University of Nevada, Reno, the RCMHC will conduct focus group to discuss specific challenges children and families face with mental health and behavioral disorders.	Proposed.

Goal 3: Promote and support the use of technology to enhance mental health services for families of children with mental health and behavioral disorders in Nevada's Rural Region.

1. Promote telemedicine including telephone and video conferencing.
2. Create website for contacts, information, electronic record, and links.

Activities and Strategies	Progress
Explore interacting with tech-friendly parents to developmentally screen and support children and their families. Information could be parent-driven and	- Nevada PEP has provided webinars on such topics as parent advocacy, families are important, and understanding ADHD.

accessed much like an automated teller machine. This delivery system could be through cell phones.	<ul style="list-style-type: none"> - The University Center for Autism and Neurodevelopment (UCAN) team members have completed a pilot neurodevelopmental assessment. - Tri-County Alliance has participated in video conferencing for counseling services through community centers, schools, and Dr. Larry Ashley of Las Vegas. - Mental health clinics have continued to utilize teletherapies in Nevada's Rural Region.
Model team meeting and multidisciplinary planning and collaboration opportunities.	<ul style="list-style-type: none"> - RCMHC team members have continued to participate in model team meetings as part of their daily practice. - Child and family team conference meetings have utilized phone conferencing.
Pursue collaboration with other entities that are on a similar pathway to determine how the Consortium can be helpful.	<ul style="list-style-type: none"> - RCMHC has engaged with Nevada Children's Behavior Health Consortium and the State of Nevada Mental Health Commission. - NvLEND - Sierra Research Group - Maple Star - Nevada Statewide Partnership

Goal 4: Investigate potential delivery of mental health services to families of children age 0-3 with possible mental health and behavioral disorders in Nevada's Rural Region.

1. Work with Systems of Care partners to explore potential funding sources.
2. Encourage Systems partners to coordinate with other early childhood providers and community stakeholders.
3. Collaborate with Systems partners to identify possible funding sources.

Activities and Strategies	Progress
Explore the DIR®/ Floortime™ Approach in organizing and providing multidisciplinary services. Establish plan for rollout of model and training opportunities. Establish transdisciplinary group of stakeholders with emphasis on the University of Reno (UNR) Departments of Speech Language Pathology and Audiology, Education, the School of Medicine, NV University Center for Excellence in Education and Disabilities (NV-UCED), UNR University Center for Autism and Neurodevelopment (UCAN), and Nevada Early Intervention Services (NEIS).	<ul style="list-style-type: none"> - RCMHC member earned certificate in in the DIR®/Floortime™ model. Team member has been a discipline coordinator for the UNR Leadership in Education and Neurodevelopmental Disabilities (NvLEND) Grant. - RCMHC member plans to further explore child and adolescent psychopathology. Continue. - Nevada Leadership and Education in Neurodevelopmental Disabilities (NvLEND) was funded in a multi-million dollar grant to provide leadership, training, and education to groups of long-term graduate-level

	<p>trainees. The goal of the program is to improve the health of infants, children, and adolescents with autism and other disabilities, emphasizing an interdisciplinary and family-centered approach.</p> <ul style="list-style-type: none"> - An NvLEND leadership progress is in the developmental stages to create a foster parent training program and certificate. There will be a special emphasis on infant and toddlers. - The last project is the Learn the Signs, Act Early Project, which is a partnership with the Center for Disease Control (CDC) that has four key objectives: 1) Educate parents about key developmental milestones; 2) Increase healthcare and childcare provider awareness of the importance of early intervention in the diagnosis and treatment of developmental disorders such as autism; 3) Increase parent-provider dialogue on the topic of child development and developmental disorders; and 4) Increase early action on childhood developmental disorders, specifically, seek to increase screenings and early intervention among children with potential developmental disorders.
Explore development of a Behavioral Health Network to support children in need that are eligible or receiving NEIS. Explore partnerships with non-profits to support infant mental health services. Further utilize the DC: 0-3 for identified target groups.	Proposed; minimal progress.
Explore training needs for delivery services for the birth to three populations in collaboration with NEIS.	Proposed; minimal progress.

Goal 5: Encourage mental health services to the families of children and adolescents in Juvenile Justice detention facilities in Nevada's Rural Region.

1. Support the development of interagency agreements; provide needed mental health assessment and treatment for the provision of mental health services to families of children and adolescents in the Juvenile Justice system.
2. Encourage the investigation of ways to initiate mental health services to the families of children and families in the Juvenile Justice system that are underinsured or are not eligible for Medicaid.

Activities and Strategies	Progress
Facilitate communication between Rural Mental Health /Clinics and local probation agencies in the Rural Region.	Ongoing.
Support the need that all children and adolescents in detention will receive mental screening and intervention services if indicated.	Ongoing; advocating for maintenance of at least current level.
Promote the need for transition plans for adolescents to promote safe, healthy and functional outcomes into adulthood.	Plan to formally engage interested stakeholders in participating in this project. Continue.
Encourage screening for preventative and early identification of mental health and behavioral disorders.	This is a recent activity and strategy.
Support utilization of the teen screen.	This is a recent activity and strategy.
Utilize positive behavioral supports of Nevada. Develop individual support plans and utilize response to intervention systems within the school system.	This is a recent activity and strategy.
Explore outreach to late-grade-school- and early-middle-school-aged children (5 th and 6 th graders) for identification of at-risk behaviors and resilience capacities.	This is a recent activity and strategy.

Goal 6: Explore the potential for mental health service provisions in public schools in Nevada's Rural Region.

1. Encourage smooth reintegration of students coming out of Residential Treatment Center (RTC) placements and/or acute psychiatric facility reentering the school systems through Memorandums of Understanding for continuing care plans, discharge summaries, and investigate potential barriers.
2. Promote ongoing discussions amongst family, youth, service providers, and stakeholders about information sharing related to children and adolescents from mental health placements; explore the use of a universal release of information.
3. Explore and promote applications of school-based mental health services for children and families in the Rural Region.

Activities and Strategies	Progress
Help determine efficacy of school-based mental health services through defining focused question and conducting an evidence-based literature review and summarized in a position paper.	Proposed to update with current literature and best-practice recommendations. Minimal progress; continue.
Investigate the potential for Carson City to develop pilot site for School-Based Health Center, to include mental health services	Carson City group has formed to explore and develop School-Based Health Center. A building and site has been secured for

	the SBHC. RCMHC is also participating in an exploratory group of school-based health in Washoe County.
Explore the use of the Teen Screen to identify youth with mental and substance abuse issues and suicidal tendencies.	<ul style="list-style-type: none">- Teen Screen Program implemented to all 7th grade student in Lyon County School District during March 2012.- Implementation slated for Carson City School District 7th and 9th grade students Fall 2012.
Appoint a workgroup to explore, plan and discuss strategies for developing mental health services in School Based Health Centers in the rural areas.	Workgroup has been formed and meets on a monthly basis. Progress includes visit to SBHC in Henderson NV (3-28-12). Workgroup members attended state of Nevada Summit on SBHCs (12-9-12).

