

Permanency in the Child Welfare System

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What is Mental Health America of Wisconsin (MHA)?

- 82 year old nonprofit organization
- Statewide presence
- Formerly Mental Health Association
- Affiliate of the nation's largest and oldest community-based network

What is Mental Health America of Wisconsin (MHA)?

MHA touches the lives of millions by:

- Advocating for changes in policy
- Educating the public and providing critical information
- Delivering urgently needed programs and services

MHA's Mission: *To improve the mental health of all individuals through advocacy, education and service.*

What is Strong Families Healthy Homes (SFHH)?

- provides support and advocacy services to families where the parent(s) have mental health concerns
- trauma-informed, strength-based, person-centered care
- empowers parents to take control over their mental health and meet their children's needs

SFHH Services include:

Intensive In-Home Services (formerly the Invisible Children's Program)

Short-Term, Reunification Services

Mental Health Home Visit

Specialized Parent Aid

Special Family Activity

Mental Health Consultation

Nurturing Parenting Class (for parents with a mental illness)

Wellness Recovery Class

Anger & Stress Management

Healthy Relationships/Domestic Violence

Quick Facts and Stats for SFHH

- **Permanence:** The average length of time from beginning SFHH services to achieving permanence is 9 months.
- 85% of families working with SFHH were reunified. 100% of families that were reunified while involved with SFHH between 2010-present, remained successfully reunified.
- **Hospitalizations:** Of 72% of SFHH clients that were hospitalized for psychiatric reasons prior to SFHH involvement, only 12% were re-hospitalized during SFHH involvement.

Quick Facts and Stats for SFHH

- **Satisfaction:** 100% of BMCW case managers that worked with SFHH agreed that they would refer another client to SFHH.

“The staff was wonderful and did a great job engaging my parent and helping her to understand her mental illness and develop a safety plan!” - Family Case Manager

- **Wellness:** 100% of clients that completed Wellness Recovery class were able to identify personal triggers that make their symptoms worse. 89% feel that their life is better than before attending SFHH programming.

*“It helped me understand my mental illness better and ways I can work on my anxiety.” -
SFHH Graduate*

Christye's Story



Melanie's Story



Reunification Barriers

- Too much time before psych evals are scheduled
- Psych evals aren't always accurate or beneficial
- Psych evals aren't reviewed OR they are treated as 100% factual
- Diagnosis aren't seen in the context of our parents' lives
- Mental health is cyclical and a psych evals is seen to be good for years
- Lack of mental health knowledge by the staff
- ASFA timeline puts a limit on parents with MH and SA issues
- Lack of understanding about how psychotropic meds work

Recommendations

- Training on mental health and co-occurring issues should be part of the new hire orientation and ongoing training for all staff
- Psych evals need to be scheduled quickly
- A mental health provider should be available to assist each case manager with:

Screening for mental health and other co-occurring issues

Reviewing a psych eval to ensure accuracy

Reviewing the diagnosis with the case manager

Consultation throughout the case

- Staff should understand psych evals and how to best use them
- Additional psychologists should be used as providers

Questions

