


STATE OF WISCONSIN
Department of Health and Family Services
Division of Children and Family Services
Division of Disability and Elder Services

DCFS Memo Series 2007- 07 /ACTION
DDES Memo Series 2007- 05 /ACTION
March 30, 2007

RE: Demonstration Funding Available to
Counties/Tribes for Mental Health/
AODA Screening in Child Welfare
Agencies

To: Listserv

For: Area Administrators / Human Services Area Coordinators
Bureau Directors
County Departments of Community Programs Directors
County Departments of Developmental Disabilities Services Directors
County Departments of Human Services Directors
County Departments of Social Services Directors
Licensing Chiefs / Section Chiefs
Tribal Chairpersons / Human Services Facilitators

From: William R. Fiss 
Interim Administrator
Division of Children and Family Services


Sinikka Santala
Administrator
Division of Disability and Elder Services

Introduction

The Division of Children and Family Services (DCFS) has partnered with the Bureau of Mental Health and Substance Abuse Services (BMHSAS) in developing a simple and effective mental health and substance abuse screening tool for children in the child welfare system. National studies show that many children entering the child welfare system have unrecognized and untreated mental health and substance abuse (MH or SA) issues. Improving recognition and treatment of mental health and substance abuse issues of children in the child welfare system is part of Wisconsin's Children and Family Services Plan (CFSP), a five-year plan for the state, county, and tribal partners to improve child safety, permanency, and well-being.

Counties and tribes are encouraged to submit applications to pilot the use of Wisconsin's Mental Health Screening Tool (MHST), adapted from the California Institute of Mental Health Screening Tool. This brief screening tool includes two versions: the first is designed to identify children up to 5 years old who are in most urgent need of a more thorough mental health screening or assessment while the second serves the same purpose for children 5 years and older. In cases where the MHST for ages 5 and over identifies possible abuse of alcohol and/or drugs by a child 12 years of age or older, the Global Appraisal of Individual Needs - Short Screener (GAIN-SS) will be used as a supplemental child self-report screening tool. A copy of Wisconsin's MHST and the GAIN-SS is attached. (See attachment A.)

Pilot opportunities will be offered to counties or tribes willing to implement the tool as part of the Child Protective Services Initial Assessment and Ongoing Services processes, collect data, and provide feedback on its application and efficacy. This feedback will assist the Department of Health and Family

Document Summary

This memo describes the process for tribal and county child welfare agencies to apply for funding to participate in a mental health and substance abuse screening pilot project for children and families involved in the child welfare system. Proposals and requests for funding are due to the Bureau of Mental Health and Substance Abuse Services by April 27, 2007. Announcement of successful candidates will be made by May 9, 2007.

Services in learning about the effectiveness of the screening tool and in determining how it might be implemented statewide.

Preference will be given to county or tribal child welfare agencies that describe coordinated efforts between child welfare and mental health or Indian Health agencies (which includes traditional tribal healing practices) that result in the provision of treatment services for children.

The DCFS and the BMHSAS will provide training on the use of the MHST and the GAIN-SS and support county or tribal staff in attending training events, participating in work groups, and building the multidisciplinary, collaborative infrastructure necessary to address mental health needs or substance abuse issues of children involved with the child welfare system.

The DHFS has \$38,000 available to provide funding to a small number of counties or tribes to pilot the MHST and develop local screening and assessment processes. This application process will also be used to rank and select additional counties or tribes to pilot the MHST as additional funding becomes available.

Please provide an application of no more than 5 pages (exclusive of the budget page):

Program Narrative

- 1. Agency Description/Statement of Need..... 15 points**
 - A. Describe the agency structure. How many staff will participate in this project? Include staff experiences with collaboration and/or wraparound processes.
 - B. Provide a description of the county's or tribe's experience with cross-system collaboration and how the wraparound process will be incorporated throughout this pilot. Discuss agency strengths, gaps, or barriers in providing coordinated services to children in the child welfare system.

- 2. Target Population.....10 points**

Describe the target population to be served (differentiate Child Protective Services from Delinquency cases). Indicate the number of children served by your child welfare system/agency in a year. Indicate the number of children in the last year who received a MH or SA screening, the number referred for MH or SA services (further assessment or evaluation), and the number of children receiving MH and/or SA treatment.

- 3. Proposed Implementation Approach 25 points**

Describe how the MHST will be implemented and identify agency needs to prepare staff to use the MHST. Discuss how the screening process will be integrated into the agency's child welfare practice and describe any organizational changes needed to assure successful implementation.

- 4. Collaboration..... 25 points**
 - A. Describe how the child welfare agency will engage in a collaborative process with mental health and substance abuse or Indian health providers. Describe strategies that will be used to: 1) provide information to mental health and substance abuse providers about the MHST process, 2) identify providers that will conduct a mental health or substance abuse assessment for children in the child welfare system, 3) develop and implement a referral process for a timely MH or SA assessment, and 4) assure for effective communication methods between child welfare workers and mental health/substance abuse or Indian health staff whether the child resides with their parents or in an out of home care setting.
 - B. If services are to be contracted, clearly explain the extent of services, how they will be provided, and the plan for monitoring their quality.

- 5. Evaluation Data 15 points**
 - A. Describe the data collection system the child welfare agency will use to track: 1) the total number of children screened during this project period, 2) the ages of children screened, 3) the outcome

of each MHST, 4) the number of children who received further assessment for MH or SA issues, and 5) the number of children identified by the mental health or Indian health provider as needing further treatment for MH or SA issues.

- B. Describe the process that will be used to evaluate how useful and effective the MHST process is for child welfare staff.

- C. Describe how the success of the project will be evaluated by using the data collected. What indicators or outcomes will be used by the child welfare agency to determine if use of the MHST resulted in: 1) better use of the child functioning element in the initial assessment or family assessment processes to understand safety and risk issues and the need for further MH or SA assessment, 2) better referrals and services for children with MH or SA issues, and 3) identifying gaps in the MH or SA service system.

6. Budget..... 10 points

- A. Indicate the amount of money needed in a detailed budget.
- B. Indicate the amount of money or resources the county or tribe will contribute as part of the budget.

Number of workers to be trained*	Potential funding
Up to 20	Up to \$7,500
21 and over	Up to \$10,000

*The number of workers to be trained includes all child welfare staff (workers and supervisors) who will be involved in screener training.

For questions regarding this opportunity please call Nancy Marz at 608-261-6746. Applications are due to Nancy Marz by 5pm April 27, 2007 and may be sent to the Bureau of Mental Health and Substance Abuse Services, PO Box 7851, Madison WI 53707-7851 or emailed as a word document to Marzna@dhfs.state.wi.us.

REGIONAL OFFICE CONTACT: Area Administrators

CENTRAL OFFICE CONTACTS:

Nancy Marz, Clinical Consultant
 Bureau of Mental Health and Substance Abuse Services
 1 W Wilson St., Rm. 433
 P.O. Box 7851
 Madison, WI 53707-7851
 Phone: (608) 261-6746
 Fax: (608) 261-7800
 E-mail: marzna@dhfs.state.wi.us

Kim Eithun, Child Protective Services Specialist
 Bureau of Programs and Policies
 1 West Wilson Street, Room 550
 P.O. Box 7851
 Madison, WI 53707-7851
 Phone: (608)261-7836
 Fax: (608) 264-6750
 E-mail: eithukc@dhfs.state.wi.us

MEMO WEB SITE: http://dhfs.wisconsin.gov/dcfs_info
http://dhfs.wisconsin.gov/dsl_info

Attachments: [Information Regarding the Mental Health Screening Tools Gain-Short Screener](#)