EXECUTIVE SUMMARY

Policymakers and mental health professionals in North Carolina and across the nation are increasingly concerned about identifying children with mental illness and transforming the systems through which children receive mental health services. Along with efforts to increase the availability of services for all people with mental illness, there has been a particular emphasis on improving the quality of children’s mental health services.

This Family Impact Seminar briefing report discusses strategies for providing high quality and cost-effective children’s mental health services. A “family impact perspective” on policymaking informs this report. Just as policymakers routinely consider the environmental or economic impact of policies and programs, Family Impact Seminars help policymakers examine impact on families by providing objective, solution-oriented research to state policymakers.

This briefing report provides information and analysis of promising strategies for improving children’s mental health services. The first three chapters conclude with considerations for policymakers based on lessons learned from research and practice.

This report consists of four chapters:

The first chapter provides an overview of North Carolina’s mental health system with a focus on children’s mental health. It offers national and state data on children’s mental illness; describes mental health reform in North Carolina; discusses the need for and receipt of mental health services; and provides data on service costs. It then discusses the Great Smoky Mountains Study on mental illness among children and adolescents in western North Carolina, including important findings on the effectiveness of children’s mental health services.

The second chapter focuses on System of Care (SOC), the leading approach to improving the quality of mental health care for children. It describes how a data- and value-based system of care can support ongoing improvement in the quality and cost-effectiveness of children’s mental health services. It defines SOC and describes its development and the critical factors for successful implementation. It also considers the use of this approach, in conjunction with best practices, to ensure coordinated child- and family-focused services.

The third chapter addresses the Ohio Mental Health Consumer Outcomes Initiative, which led to a statewide system of consumer outcomes for adults and youth in the Ohio mental health system. The initiative began in 1996 and continues to evolve. It describes the initiative’s genesis, development, and its current status. In addition to the state perspective, the chapter also describes how a local provider uses outcomes to improve treatment planning, management, and outcomes for children with mental illness.

The fourth chapter shares interviews conducted by the Center for Child and Family Policy with five Local Management Entity (LME) leaders. These interviews highlight promising practices and reflections on the new structure of mental health services in NC, providing valuable lessons learned.

The briefing report concludes with additional materials for policymakers including definitions of mental health target populations, a current map of LMEs and the counties they serve, LME contact information, a glossary, a list of terms and acronyms, and additional resources.