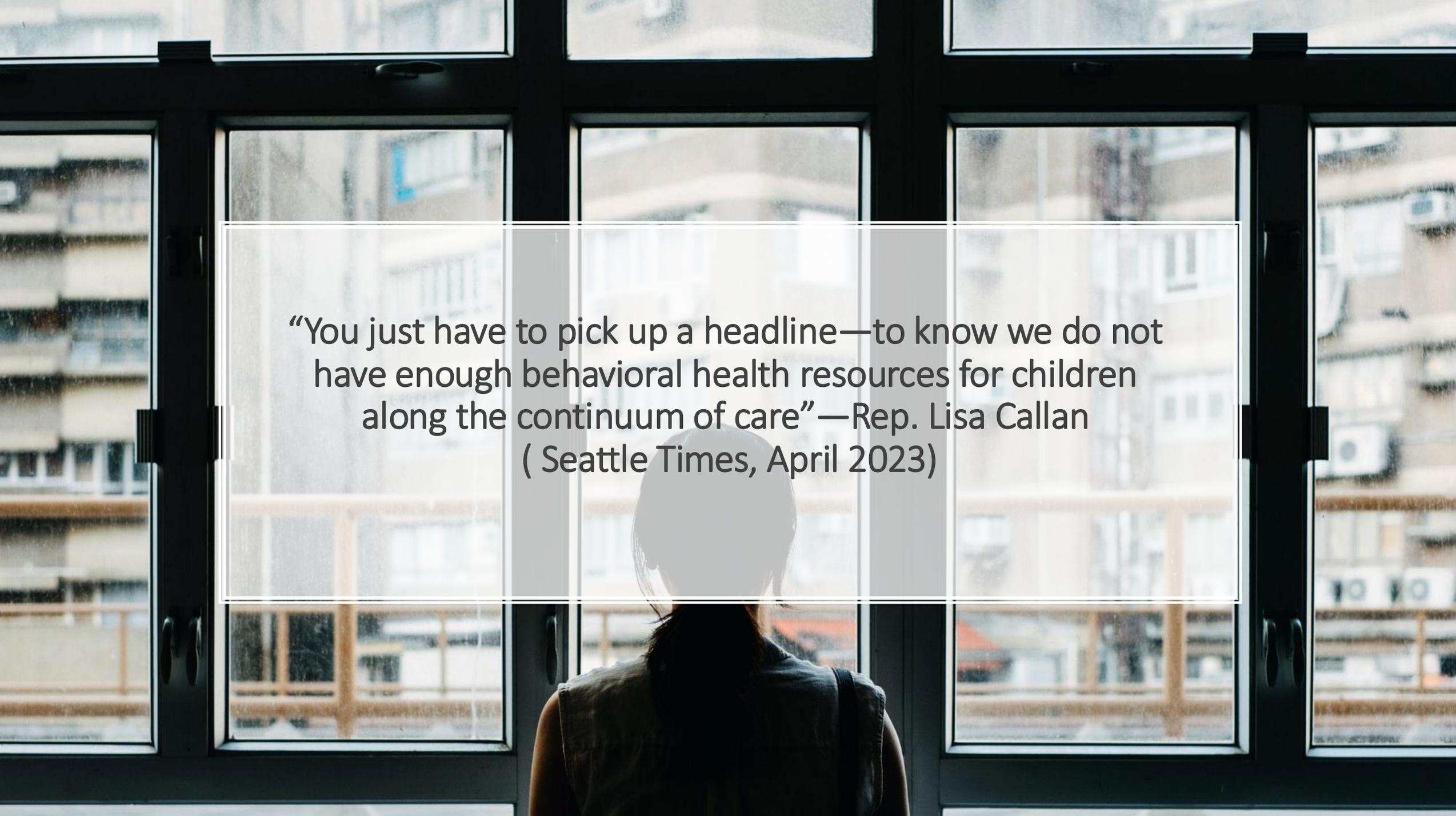


# Pediatric Behavioral Health Challenges and System Responses Overview

Kids' Mental Health Pierce County

A person is seen from behind, looking out a large window at a cityscape. The window is divided into several panes by dark frames. The person's silhouette is visible against the bright light coming from the window. The cityscape outside shows buildings and a balcony with a railing.

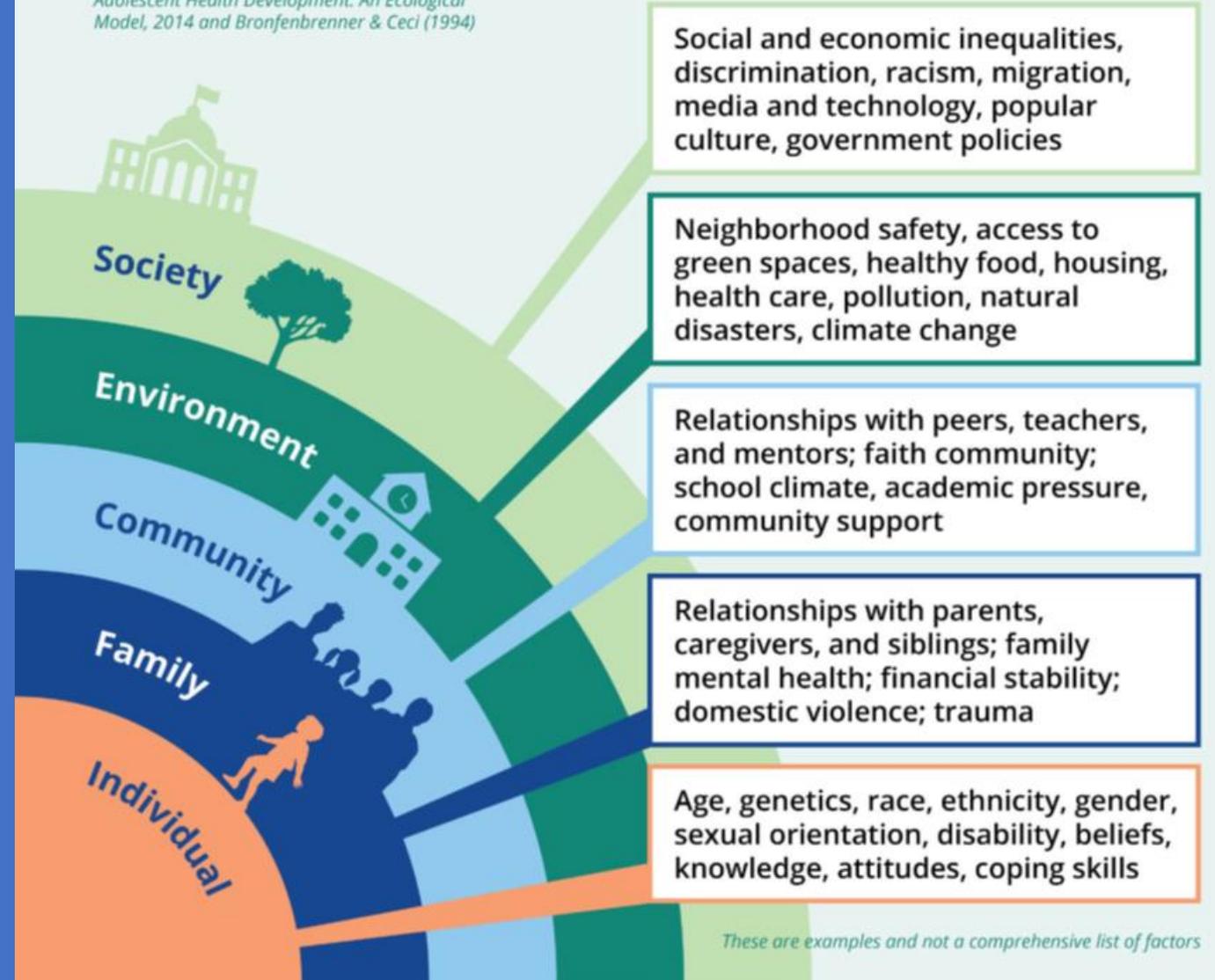
“You just have to pick up a headline—to know we do not have enough behavioral health resources for children along the continuum of care”—Rep. Lisa Callan ( Seattle Times, April 2023)

“Supporting the mental health of children and youth will require a whole-of-society effort to address longstanding challenges, strengthen the resilience of young people, support their families and communities, and mitigate the pandemic's mental health impacts.”

# FACTORS THAT CAN SHAPE THE MENTAL HEALTH OF YOUNG PEOPLE



Source: Adapted from WHO's Determinants of Adolescent Health Development: An Ecological Model, 2014 and Bronfenbrenner & Ceci (1994)



*These are examples and not a comprehensive list of factors*

# The state of children & youth behavioral health at a glance...

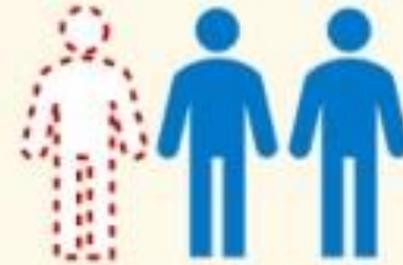
- A review of national behavioral health data by the Center for Disease Control and Prevention (CDC) suggested that as many as **1 in 5 children and youth may experience a mental health disorder every year** (Bitsko et al., 2024)
- Recent Community Health Needs Assessments conducted by MultiCare and the Tacoma-Pierce County Health Department have reported that greater than **one-fourth** of Pierce County middle schoolers self-report depressive symptoms.
- Nearly **60%** of Washington adolescents report experiencing **persistent** anxiety and/or depression, **15%** contemplating suicide (Washington State Healthy Youth Survey 2023)
- Children and youth of color, LGBTQIA+ children and youth, children living in rural areas, and children and youth with intellectual and/or developmental disabilities may be at **increased risk of mental health concerns due to systemic racism, sexism, homophobia, and other types of oppression and marginalization** (see the U.S. Surgeon General's 2021 Advisory on the Youth Mental Health Crisis)



# Access to behavioral health services for children and youth

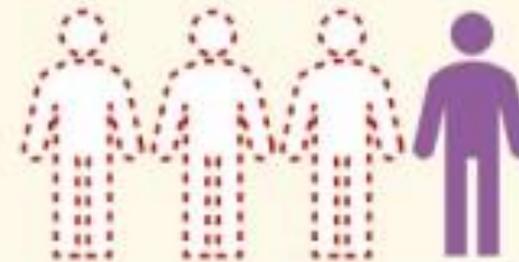
- Mental Health America ranked Washington 40th in the nation for youth mental health access indicating high prevalence of mental illness with low rates of access to care.
- Approximately 1 in 3 children and youth enrolled in Apple Health who needed mental health services did not receive them.
- In 2021, fewer than 1 percent of youth (11-18 years) enrolled in Apple Health received SUD services.
- Even after a visit to the emergency department for mental health needs, 35 percent of these children and youth did not receive follow up care within seven days and 23 percent did not receive care within 30 days.
- Source: [Access to behavioral health services for children and youth report \(December 1, 2022\)](#)

## Mental health treatment rate



33% of children and youth enrolled in Apple Health with an identified mental health need did **not** receive any mental health services.

## SUD treatment rate



76% of children and youth enrolled in Apple Health with an identified SUD need did **not** receive any SUD services.

# Developing a Coordinated Response

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- **Prevention** is truly the best treatment for mental health challenges
- Behavioral health crises come in many forms, and most do not fit neatly into a categorical service box.
- No single entity or system owns full responsibility for crises, and a single entity or system is not, on its own, sufficiently leveraged to address the multifactorial complexities necessary for a healthy system.
- Current practice engages multiple stakeholders at many levels of leadership and various service lines and results in unclear communication and difficulty establishing a clear clinical/decision-making team. This negatively impacts patient/family experience, length of stay and degrades the ability of the clinical staff to establish an effective team process.



Prevention	Early Intervention	Acute Intervention	Crisis Treatment	Recovery & Reintegration
School Based Mental Health Services	Outpatient Mental Health Treatment	Outpatient	Crisis Lines	Children's Long-Term Inpatient Treatment
Primary Care Physician (PCP)	Family Reconciliation Services (FRS)	Intensive Outpatient	Mobile Crisis Services	Case Management
Managed Care Organizations		Wraparound Services (WISe)	Inpatient Hospitalization	Managed Care Organizations
		Partial Hospitalization		
		Emergency Department		

# Behavioral Health Care Continuum



# Behavioral Health Crisis vs. Emergency

## Behavioral Health Crisis

- Expressing suicidal/homicidal ideations
- Panic attacks
- Escalating defiance/aggression (no weapon or active harm)
- Self-injury like scratching or cutting without suicidal intent
- Sudden changes in behavior, sleep, appetite, etc
- Refusal to attend school or activities
- Seeking help or disclosing distress

## Behavioral Health Emergency

- Active Suicide Attempt (Ex: taking pills, attempting to jump from something, putting something around neck)
- Physically assaulting others or self
- Running into traffic
- Making explicit threats with access to weapon
- Severe disorientation accompanied with dangerous behaviors
- Overdose
- Loss of consciousness

 The goal is to respond early—before a crisis becomes an emergency. 911/emergency department should be the last resort, not the first stop.

# Youth Crisis Services

Carelon Definition of Crisis: A behavioral health crisis is any situation in which a person's behavior puts them at risk of hurting themselves or others and/or prevents them from being able to care for themselves or function effectively in the community; AND/OR a crisis is a disruption or breakdown in a person's/family's normal or usual pattern of functioning. A crisis cannot be resolved by a person's customary problem-solving resources/skills therefore requiring intervention at another level.

Children and youth in crisis are served by a team of Child and Adolescent Mental Health Specialists through Catholic Community Services, Family Behavioral Health (FBH) 24 hours a day, 7 days a week. FBH offers a full array of services to assist families in resolving crises in their children. Services may range from a one-time crisis contact to referrals to community mental health providers or a more intensive service areas such WISE, FAST or other community providers.

To access Youth Crisis Services call:  
Toll Free: **1-800-576-7764**





# Behavioral Health Services in an Emergency Department

## Check-In, Triage & Medical Clearance

## Mental Health Evaluation

- Review behavioral health options for adolescents' form with parents/caregiver
- Review available medical and behavioral health history
- Obtain Psychosocial history both from the parent(s) and youth
- Contact collaterals as identified (counselors, teachers, etc)
- Complete Child and Adolescent Trauma Screen (CATS)
- Complete a comprehensive Mental Health Evaluation

## Discharge Planning

- Safety Planning
- Referral to Outpatient Behavioral Health Treatment
- Referral to Behavioral Health Navigator
- Referral to Youth-Mobile Crisis
- Referral to Acute Inpatient Behavioral Health Unit
- Care Coordination with Treatment Team and Payor

# Inpatient Hospitalization (Acute Stabilization)

- Psychiatric hospitalization can be recommended when there is medical necessity and there are no least restrictive options that can reduce the risk.
- Psychiatric hospitalization is acute care for psychiatric emergencies
- Goal: Focus on safety and stabilization so that teens can return to the community for treatment
- Most hospitalizations are 7-10 days
- Current Adolescent Treatment Facilities (August 2024):
  - Tacoma General Adolescent Behavioral Health Unit (Tacoma) **24**
  - Smokey Point Behavioral Hospital (Marysville) **14**
  - Inland Northwest (Spokane) **25**
  - Two Rivers (Yakima) **10**
  - Kitsap Youth Inpatient Unit (Kitsap) **8**
  - Seattle Children's Hospital (Seattle) **41**

\*Updated 10/2024- SCH not accepting referrals outside SCH ED



# Inpatient Hospitalization (Long-Term)

- Residential Treatment can be referred for youth with behavioral health conditions who meet medical necessity for treatment services.
- **NOT** generally referred from an Emergency Department or medical hospital setting.
- Encourage parents/caregivers to contact their insurance provider to determine what resources are available to their child/youth.
- **Children's Long-Term Inpatient Program (CLIP)**
  - CLIP is the most intensive inpatient psychiatric treatment available to WA State residents, ages 5-18 years of age. There are five programs and a total of 84 beds across Washington State. Youth ages 5-18 with a severe psychiatric disorder are eligible for services. For more information about to access CLIP visit: <http://clipadministration.org/>





# Important Considerations



Youth & Family Voice



Age



Insurance Type



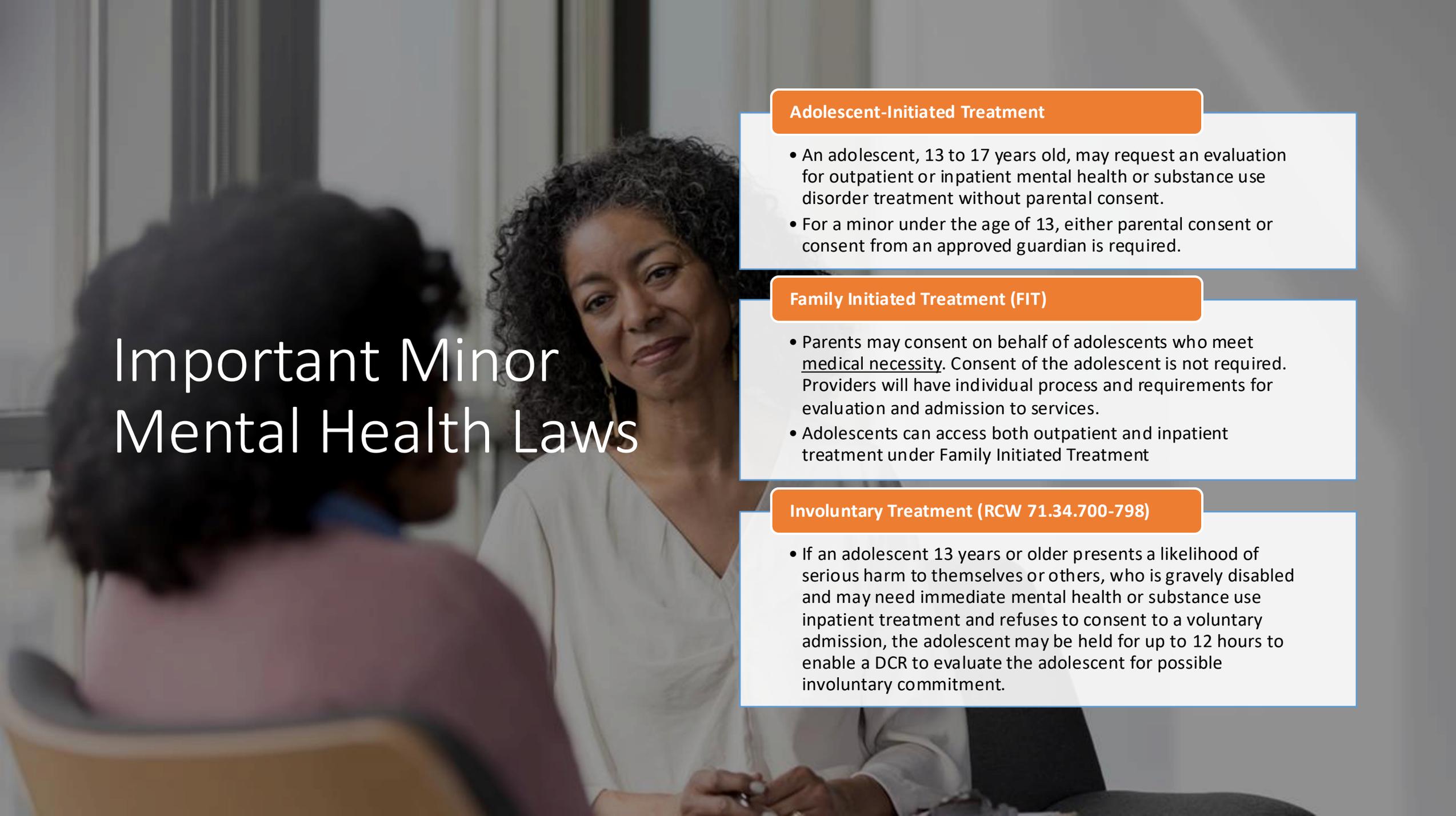
School District



What type of mental health provider do you need?



Accessibility



# Important Minor Mental Health Laws

## Adolescent-Initiated Treatment

- An adolescent, 13 to 17 years old, may request an evaluation for outpatient or inpatient mental health or substance use disorder treatment without parental consent.
- For a minor under the age of 13, either parental consent or consent from an approved guardian is required.

## Family Initiated Treatment (FIT)

- Parents may consent on behalf of adolescents who meet medical necessity. Consent of the adolescent is not required. Providers will have individual process and requirements for evaluation and admission to services.
- Adolescents can access both outpatient and inpatient treatment under Family Initiated Treatment

## Involuntary Treatment (RCW 71.34.700-798)

- If an adolescent 13 years or older presents a likelihood of serious harm to themselves or others, who is gravely disabled and may need immediate mental health or substance use inpatient treatment and refuses to consent to a voluntary admission, the adolescent may be held for up to 12 hours to enable a DCR to evaluate the adolescent for possible involuntary commitment.

# Information Sharing (RCW 70.02)

**Mental health providers are allowed to communicate some adolescents' (age 13-17) treatment information to parents, if the provider believes that sharing this information would benefit the treatment process.**

**Providers talk to adolescents about information they wish to disclose and address any concerns the adolescent has about their disclosure of information.**

## **Examples of information that can be shared:**

- Diagnosis and recommendations for treatment
- Treatment progress
- Recommended medications, their benefits and risk, side effects and dosage
- Crisis Prevention and Safety Planning
- Referrals for other services in the community
- Training and coaching for parents

**Note: If an adolescent is admitted for SUD evaluation and/or treatment, all protected health information (PHI) must be redacted, unless the adolescent provides written consent to the disclosure of the admission or SUD treatment information per federal law 42 CFR Part 2, or if law is changed.**

# Regional Resource Hub

Kids' Mental Health Pierce County (KMHPC) serves as Pierce County's hub for comprehensive pediatric behavioral health information.

Available Resources:

- Crisis Services
- Intellectual and Developmental Disabilities Resources
- Parent Support
- Inpatient and Outpatient Mental Health Services for Youth and Families
- Substance Use Disorder
- Black, Indigenous & People of Color Mental Health Resources
- Find A Provider
- Community Multi-Disciplinary Team (MDT)
- Insurance

## Kids' Mental Health Pierce County

We are linking arms to improve child and adolescent mental health in Pierce County.

LEARN MORE

JOIN US

### WEBINARS



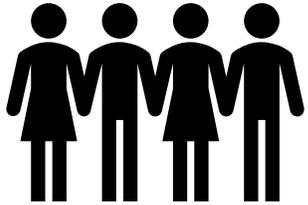
#### Pierce County Youth Behavioral Health System Overview

Pierce County Youth Behavioral Health System Overview May 24, 2023 03:00 PM May is Mental Health Awareness Month. For Mental Health Month this year, Mental Health America and Kids Mental Health Pierce County (KMHPC) are encouraging individuals to look around and look within.



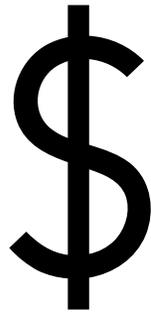
# Community Multi-Disciplinary Team Meeting

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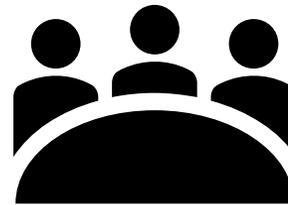
## Natural Supports

- Family
- Peer/Parent Support
- Mentors



## Payor

- Insurance Provider
- AS-BHO
- HealthCare Authority



## System Partners

- Juvenile Justice
- Child Welfare
- School
- Developmental Disabilities Administration (DDA)



## Providers

- Behavioral Health Providers
- Specialist
- Substance Use Providers
- Consultants

# Pierce County Human Services Funded Programs

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## Behavior Bridges

Behavior Bridges offers preventative crisis intervention services including school district consultation, professional development and caregiver training to support challenging behaviors. Behavior Bridges also provides social groups for children and adults in an inclusive environment which embraces neurodiversity at their center in South Hill, WA. Reduced or waived fees are available for some programs for county residents in partnership with Pierce County. Interested parties are welcome to contact [info@behaviorbridges.com](mailto:info@behaviorbridges.com) or call 253-262-3409 for more information

Useful websites supporting Individuals with disabilities in crisis include:

[www.behaviorbridges.com](http://www.behaviorbridges.com)

<https://hcpbs.org/>

<https://www.pbis.org/>

<https://qbs.com/safety-care-crisis-prevention-training/>



## Tacoma-Pierce County Health Department

Teen Mental Health First Aid (tMhfa) teaches teens in grades 10-12, or 15-18, how to identify, understand and respond to signs of mental health and substance use challenges among their friends and peers. Our goal is to provide mental health tools to youth and youth services organizations so youth can support one another during mental health challenges.

Child Wellness Project: Provide culturally relevant resource guides and toolkits to families of 9–13-year-olds, based on feedback from culturally and geographically diverse focus groups.

Contact: Courtney Chandler [cchandler@tpchd.org](mailto:cchandler@tpchd.org)

Pierce County Human Services Funded Programs

- **AAPI Mental Health Community Education & Mental Health Vouchers (Asia Pacific Cultural Center)**
- Outpatient & Community Based Services (Asian Counseling Treatment Services)
- **Preventing BH Crises for Autism and Developmental Disabilities (Behavior Bridges)**
- Outreach & Relationships (Catholic Community Services)
- **Lakewood Youth Wellness Project (Communities in Schools of Lakewood)**
- Integrated Behavioral Health Program Expansion (Community Health Care)
- Assisted Outpatient Treatment (Comprehensive Life Resources)
- **Behavioral Health Shelter Service (Comprehensive Life Resources)**
- **School Connect (Comprehensive Life Resources)**
- Jail Diversion Program (formerly known as Trueblood) (Greater Lakes Mental Healthcare)
- **Healing with the Herd (Horses Guiding Humans Foundation)**
- Culturally Attuned Counseling for Humanitarian Immigrants (Lutheran Community Services)
- **Mary Bridge Children's YES Pierce County (Mary Bridge Children's Hospital)**
- Expanded Therapeutic Court Services (Multicultural Child and Family Hope Center)
- **Co-Responder Program (consists of Trueblood responders) (Pierce County Sheriff)**
- Parent Resilience Program-Pierce County Expansion (Perinatal Support Washington)
- Wrap Around Mental Health Court (Pierce County Alliance)
- **Pierce County Therapeutic Case Management (Seneca FOA)**
- **Pierce County Wraparound with Intensive Services (WISE) (Seneca FOA)**
- **Building Mental Wellness through Resiliency Youth Program (Tacoma-Pierce County Health Department)**
- Opioid Task Force: Fentanyl Awareness Campaign (Tacoma-Pierce County Health Department)
- **Nurse Family Partnership (Tacoma-Pierce County Health Department)**
- **Teen Mental Health First Aid (Tacoma-Pierce County Health Department)**
- The Steven A. Cohen Military Family Clinic (Valley Cities Counseling and Consultation)
- **LGBTQ Youth Drop-In Center and Services (Youth Oasis)**



# Questions

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# Contact Information

[www.kidsmentalhealthpiercescounty.org](http://www.kidsmentalhealthpiercescounty.org)

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**Vanessa Adams, LICSW**

Program Coordinator, Kids Mental Health  
Pierce County

Email: [vanessa.adams@multicare.org](mailto:vanessa.adams@multicare.org)

