



Providing a comprehensive system of early childhood development services,
on a countywide basis, to all children prenatal to age five.

First 5 Plumas County

Infant/Early Development Mental Health Program

Mid-Year Evaluation Brief

2016-2017

Mental Health Services

With funding provided by the Plumas County Mental Health Services Department, First 5 Plumas County contracts with Plumas Rural Services to provide ongoing and expanded mental health supports to parents of/and children ages 0-5.

Plumas Rural Services

Infant/Early Development Mental Health Program

The Plumas Rural Services Infant/Early Development Mental Health Program interfaces with the Plumas County Mental Health Department, the Child Abuse Treatment program, and other Community Based Organizations by working in partnership to provide and coordinate services and provide referrals as necessary. The program functions as an augmentation of the core clinical services of the County by providing direct mental health services, outreach and engagement, and support and linkage to other community based services.

The overarching goal of the program is to provide the earliest intervention possible with environmentally at-risk children and their families.

Target Populations include:

- children age 0-5
- parents of children age 0-5
- families/caregivers of children age 0-5
- Native American Families
- children age 0-5 with special needs
- children age 0-5 in the foster system

How Mental Health Services Support Strong Families

Parents today are faced with the challenges of raising children in an increasingly complicated world. Sometimes these complications can be too much for a family to manage, leading to less than optimal family functioning.

By providing mental health services in an integrated fashion, families benefit by developing coping mechanisms, resiliency, and strong family bonds. Protective factors are built around the family unit, leading to less stress, and a reduction in the likelihood of abuse or neglect.

Program Highlights



57 children were provided mental health services.



29 parents were provided mental health services.



439 mental health services were provided.



6 referrals to community service providers were made.

Expected Outcomes

Mental Health Services are intended to achieve the following outcomes:

- ✓ **Children live in safe and stable environments with access to resources.**
- ✓ **Children have the skills and supports necessary to develop healthy relationships, manage their emotions, and explore their environment.**
- ✓ **Parents provide nurturing and positive emotional support to their children.**
- ✓ **Systems are ready for children and families.**

Client Characteristics

Who was Served?

Program participants included children and their family members.

Between July 1 and December 31, 2016, the program has served a total of:

57 children

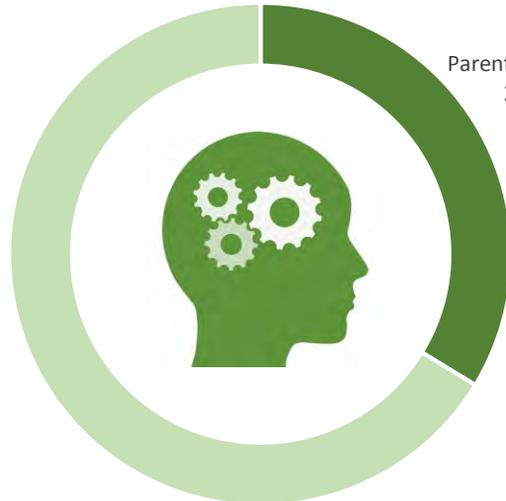
40 children ages 0-5
17 children greater than 5

29 parents and caregivers

As indicated in the chart to the right, the majority of individuals served were children ages 0 through 5.

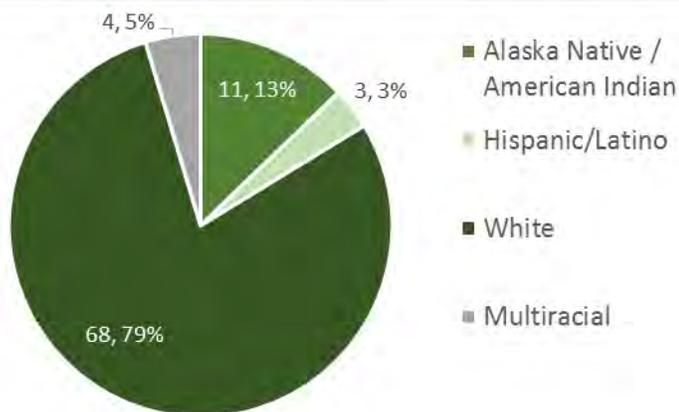
Children,
57, 66%

Parents/Caregivers,
29, 34%



What was the Race/Ethnicity of those Served?

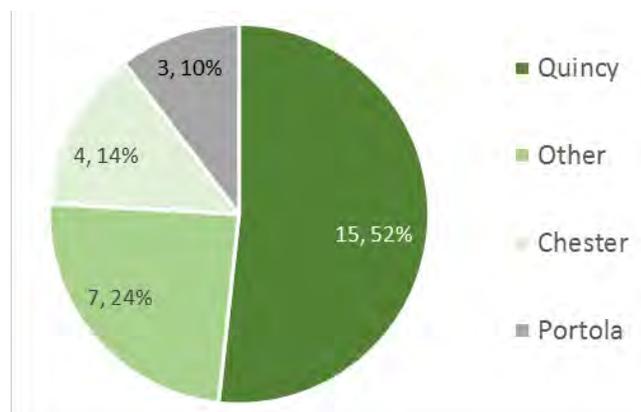
N=86



Children and adults receiving behavioral health services were mostly White, representing 79% of all those served. This is followed by Alaska Native/American Indians (13%).

What Communities do They Live In?

N=29

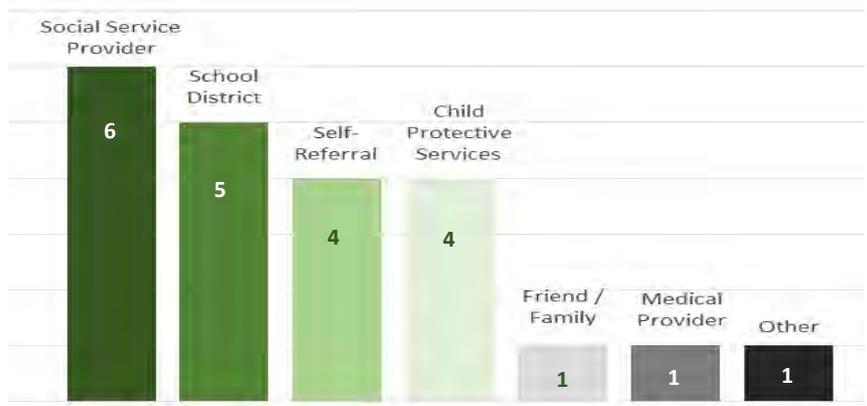


Families receiving behavioral health services were primarily from Quincy (50%), followed by Chester (14%) and Portola (10%). Almost a fourth (24%) of all families were from other communities.

Who Referred Families to the Program?

N=22

It is important to understand how families come to access services through the program. This information helps the program understand outreach efforts that are working and additional areas where outreach is necessary to reach the target population. As indicated in the chart to the right, the majority of families have been referred by a social service provider or the school district.

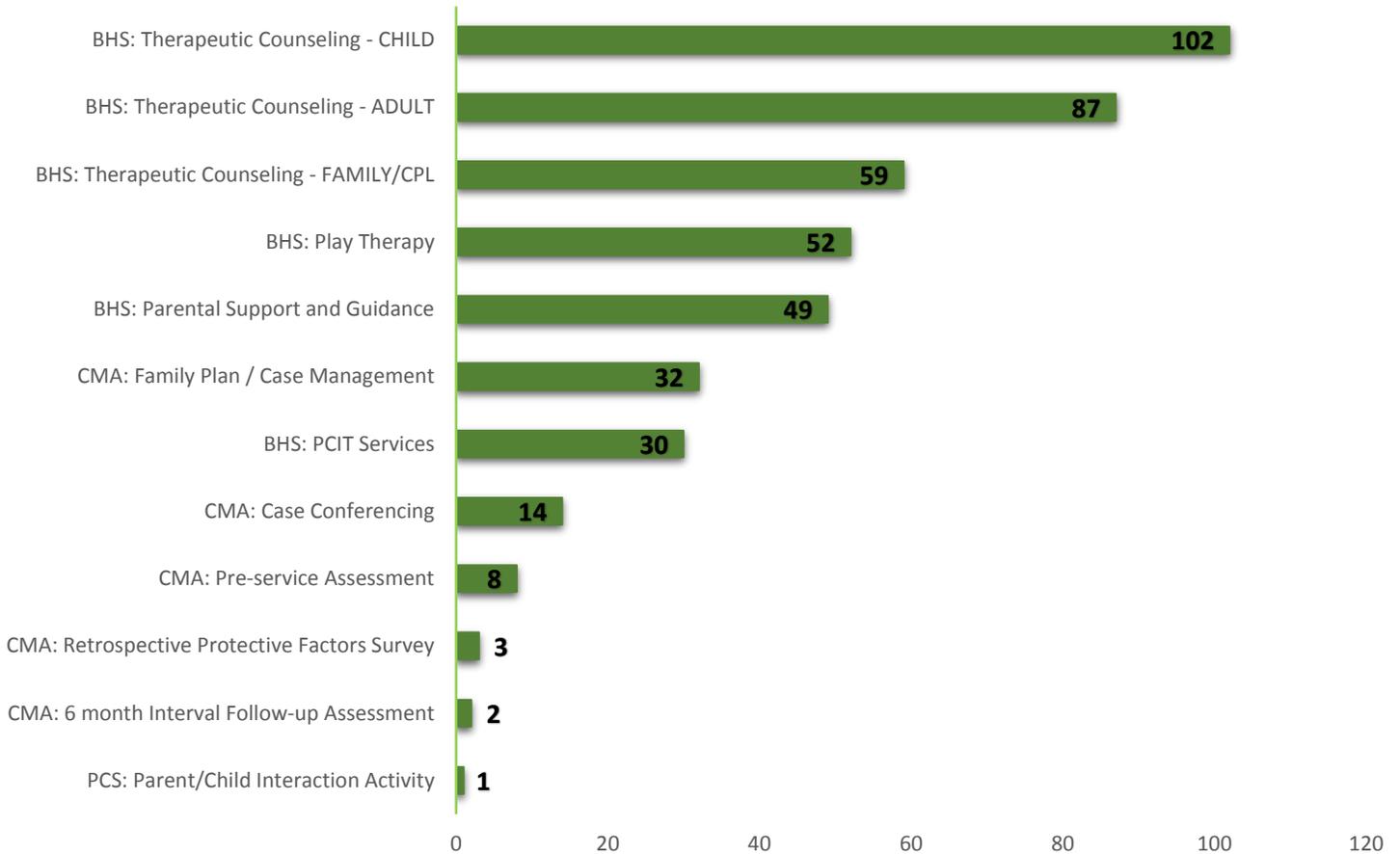


Services Provided

Mental Health Services

Between July 1 and December 31, 2016, a total of **439** mental health services were provided.

Mental Health Specialists record the primary subject matter of each service provided. As demonstrated in the following table, the majority of services provided by the program therapeutic counseling for children, adults, and family/couples.



Referrals to Community Resources

N=6

Mental Health Specialists make referrals to community programs based on the needs of the families they serve.

Between July 1 and December 31, 2016, the program provided:

6 referrals to families.

Referrals were provided to either Early Childhood Development Specialist or Respite Care – PRS.

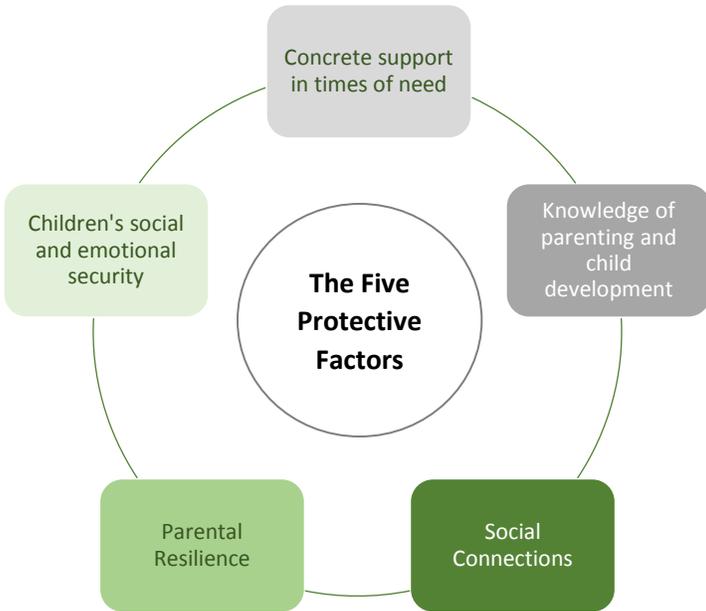


Outcomes Achievement

Children live in Safe and Stable Environments

Strengthening Families™ Protective Factors Framework*

N=3

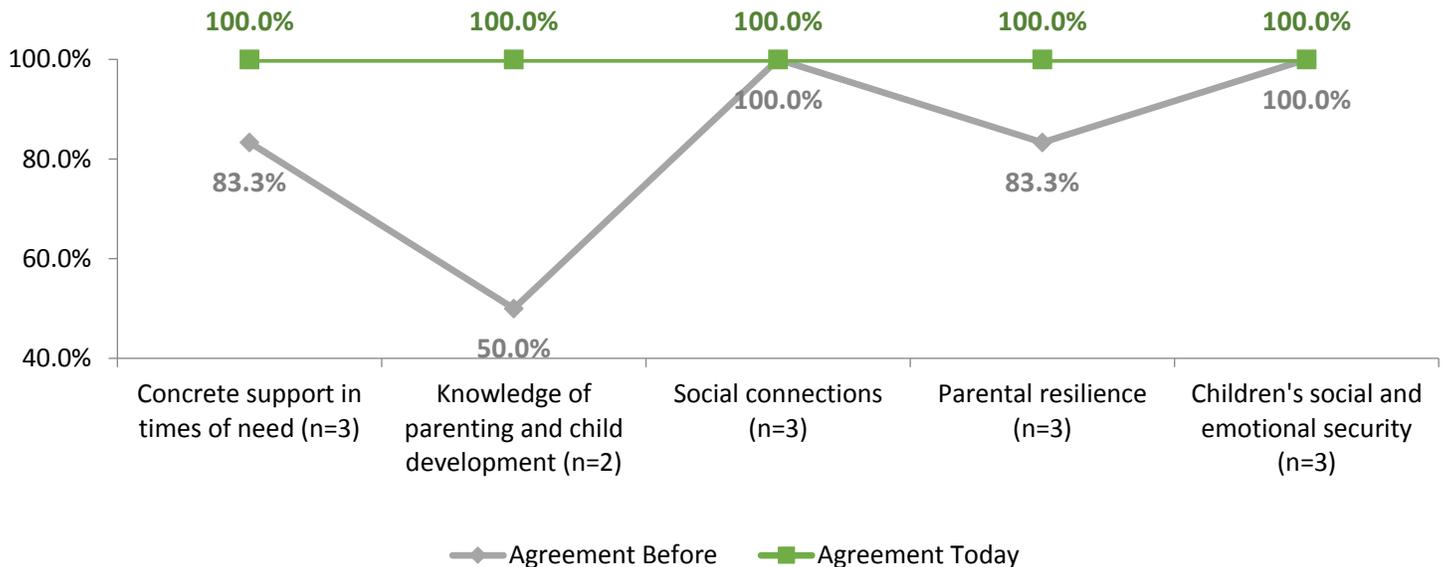


The Strengthening Families Protective Factors framework is a research-based approach to promoting family functioning, school readiness, resilience, and social connections. The Infant/Early Development Mental Health Program provides services within this framework, and as such utilizes a survey tool to identify outcomes achievement.

The Protective Factors survey measured family outcomes through a retrospective survey. The following results identify adult family participant perceptions of change. The retrospective survey questions allow parents to rate themselves before and after receiving services.

This survey is used to track the intended outcome that **Children live in safe and stable environments with access to resources.**

Protective Factors: Agreement



As indicated in the chart above, there was an increase in the Protective Factors for concrete support in times of need, knowledge of parenting and child development, and parental resilience after families received mental health services. All five categories had 100% agreement rate after accessing support.

*When interpreting this data, it is important to note that the Protective Factors Survey was only collected from three (n=3) clients. No conclusions can be drawn from this data given the small sample size.

Outcomes Achievement

Systems are Ready for Children and Families

Many parents and caregivers with young children have difficulty accessing existing forms of assistance, much less being able to learn about and utilize new services. Because of this, the Infant/Early Development Mental Health Program promotes integrated service delivery, linkages and coordination amongst programs, and efforts to engage and incorporate participant feedback in program planning to ensure that **systems are ready for children and families**. It does this by ensuring that providers are trained, services are integrated and that client feedback is collected and considered in program planning.

Trainings

Type of Trainings Provided	Number of Trainings / Participants
Trauma Informed Teaching	3/68
Parent Workshop: Understanding How Our Trauma Affects Our Parenting	1/15
Children, Trauma and Attachment	1/5

Integrated Service Delivery

- ✓ The program provided joint service delivery to a total of **29** families.
- ✓ The program participated in **22** multidisciplinary meetings with other First 5 Service Providers.
- ✓ The program participated in **10** case management meetings with Child Protective Services.
- ✓ The program participated in **5** Mental Health Collaborative meetings.

Client Satisfaction*

N=3

Successful programs work closely with parents and families to provide services that meet the unique needs of each family by integrating participant feedback into program planning. To solicit participant feedback, the program collects client satisfaction information at the end of the Protective Factors survey. Results are as follows:

100% of parents agreed that received the assistance they needed.

100% of parents agreed that their overall satisfaction with services was very good.

67% of parents agreed that their ideas and opinions are welcomed and included in the program.

67% of parents agreed that the program has helped them improve their parenting skills.

100% of parents agreed that the program has helped them reduce the stress in their life.

**These results represent the impressions of three (3) clients. Given the small sample size, general conclusions about overall client satisfaction cannot be determined.*

Evaluation Considerations

The Plumas Rural Services Infant/Early Development Mental Health Program is continuing to make a positive impact on families being served. This is evidenced by the number of people served, the services provided and the decreased risk experienced by families participating in the program.

In its second full year of implementation, the program continues to grow in its ability to serve the community and streamline how it manages its operations. Some accomplishments to note include:

- **Increased service delivery:** Compared to the same time period last year, the program has provided almost double the amount of services. This is likely due to the addition of a case manager who has been integral to providing case management and data management support to the Mental Health Specialists.
- **Improved data management efforts:** The program took on inputting data into a data management system this year, offering them the opportunity to track client services and outcomes in a streamlined way. They continually look for ways to collect information in a manner that tell the “whole story” about the impact that their program has on the families it serves.