



August
2020



System of Care Across Tennessee

LETTER FROM THE DIRECTOR: KERI VIRGO



Greetings everyone!

In my last letter, I asked that each of you increase your outreach to the children, youth, young adults, and families that you serve. I am happy to share just how proud we have been to witness your efforts and have you be a part of the System of Care Across Tennessee team.

When we began to shelter in place in March, we had no idea that we would still be in various stages of quarantine come August. Now, with questions looming around potential returns to school and workplace, I want you to know that we will be here to continue to support you.

In this newsletter, we will be looking back at what quarantine has looked like for SOCAT teams, who never paused in their services or commitment. May brought Children's Mental Health Awareness Month (CMHAM) and July brought Minority Mental Health Awareness Month, both of which came as timely reminders to prioritize mental health. The Office of Children, Young Adults, and Families at the Department of Mental Health and Substance Abuse Services celebrated CMHAM with an all-day Web-A-Palooza. Topics included positive parenting in a pandemic, understanding secondary trauma responses, navigating grief and loss during COVID-19, as well as specific ways to continue supporting children, youth, young adults, and families.

In Middle Tennessee, Mental Health Co-Op had a weeklong celebration with a theme of "Bringing Children's Mental Health into Focus." Staff were sent resources, tools, and activities to use with families both virtually and in person. These include fun activities to help children and youth build coping skills around thought patterns and emotions.

Cheryl Johnson from Mental Health Co-Op sums it up best. "Covid-19 ushered in a different approach this year than we have historically done with Children's Mental Health Awareness Week, but we celebrated anyway!" With all the stressors right now, it's so important to keep celebrating what we can.

From our SOCAT family to yours be safe, be well, and stay connected!

Keri



On the East side of the state, the Helen Ross McNabb team made goodie bags for their clients with candy, hand sanitizer, green mental health awareness bracelets, and more.



(From left to right) Shellie Hall, Cara Parker, Celina Ogle, Ashley Crabtree, and Katie Daugherty



The Frontier SOCAT site had families draw self-portraits and participate in a virtual marathon.



System of Care Across Tennessee

TN Department of Mental Health and
Substance Abuse
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Mental Health

Laritha Fentress
SOCAT Divisional Coordinator,
Middle TN

Mission

To put in place policies, organizational structures, and funding mechanisms that support the implementation and expansion of a children's mental health system in Tennessee (TN) grounded on System of Care values and principles.

Core Values

Family-Driven | Youth Guided Services

Community Based

Culturally and Linguistically Competent

Our Vision

To ensure Tennessee families have access to community-based services for children, youth, and young adults with mental, emotional, and behavioral health needs that is coordinated across systems, individualized to a family's unique needs, strengths, and culture, and where the families are the primary decision makers in the care of their children.

System of Care Across Tennessee Services

The System of Care Across Tennessee (SOCAT) offers high-fidelity wraparound to 87 counties across the state. Our team has enrolled over 200 children, youth, young adults, and their families in services!

Each SOCAT site employs a Care Coordinator and Family Support Specialist (FSS) to work with families who have young children, youth, or young adults with mental health concerns. SOCAT utilizes System of Care values and principles while empowering Tennessee families to work together with child-serving agencies as a partner to guide their care.

The goals of SOCAT include:

- Decreasing the utilization of inpatient care
- Reducing the number of out-of-home placements
- Improving community function, including school attendance and performance
- Including and sustaining positive mental health, including increases in behavioral and emotional strengths in children, youth, and young adults

Follow the map on the next page for a look at our [guiding principles](#).

The SOCAT initiative serves children, youth, young adults, and their families, ages 0-21, who are experiencing emotional or behavioral concerns that affect their daily life (i.e. having trouble in school, with their family, with peers or adults, with law enforcement, or children's services). Additionally, SOCAT focuses on young people who are having difficulty or are at-risk of being kicked out of school or have been or are currently at-risk of psychiatric hospitalization, residential placement, or placement in DCS (Department of Children's Services) custody.

Our providers are:

- Frontier Health
- Helen Ross McNabb Center
- Mental Health Cooperative, Inc.
- Pathways Behavioral Health Services
- Professional Care Services of West TN, Inc.
- TN Voices
- Volunteer Behavioral Health Care System

To learn more about eligibility and the referral process, visit [this link](#) or contact SOCAT Training and Technical Assistance Coordinator, Benita Hayes, at [615-445-9094](tel:615-445-9094) or SOC.TAcenter@tn.gov.

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PRINCIPLE 1

Ensure availability of an access to a broad, flexible array of effective, evidence informed, community-based Services and supports for children and their families that address their physical emotional and educational needs including traditional and nontraditional services as well as informal and natural supports

PRINCIPLE 4

Ensure cross-system collaboration, with linkages between child Agencies and programs across administrative and funding boundaries and mechanisms for system – level management, coordination, and integrated care management



PRINCIPLE 5

Provide care management or similar mechanisms to Ensure that multiple services are delivered in a coordinated and therapeutic Manner, and that children and their families can move through the system of services in accordance with their changing needs



PRINCIPLE 2

Provide individualized services in accordance with the unique potential and needs of each child and family, guided by strengths-based, wraparound services cleaning process and an individualized service plan developed in true partnership with the child and family



PRINCIPLE 3

Deliver services and supports within the least restrictive, most normative environments that are clinically appropriate



PRINCIPLE 6

Provide developmentally appropriate services and supports to facilitate the transition of youth to adulthood and to the adult-service system as needed



PRINCIPLE 9

Incorporate or link with mental health promotion, prevention, and early identification to improve Long – term outcomes, including mechanisms to identify problems at an earlier stage and mental health promotion and prevention activities directed at all children and adolescents



PRINCIPLE 8

Provide developmentally appropriate mental health services and supports that promote optimal social and emotional outcomes for young children and their families in their homes and community settings



PRINCIPLE 7

Provide developmentally appropriate services and supports To facilitate the transition of youth to adult hood and to the adult – service system as needed



PRINCIPLE 10

Incorporate continuous accountability mechanisms to track, monitor, and manage the achievement of system of care goals; Fidelity to the system of care philosophy; and quality, effectiveness, and outcomes at the system level, practice level, and child and family level



PRINCIPLE 11

Protect the rights of children, Youth, and families and promote effective advocacy efforts



PRINCIPLE 12

Provide services and supports without regard to race, religion, national origin, gender, gender expression, sexual orientation, physical disability, Socio economic status, geography, language, immigration status, or other characteristics; services should be sensitive and responsive to these differences



CMHA WITH TN VOICES



Willie M. Voss II, M.S.
Director of Contract - TN Voices

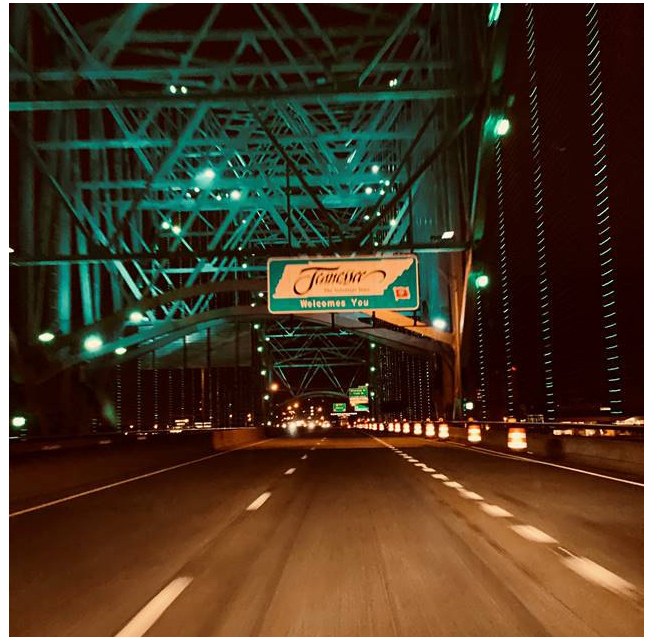
In recognition of Children’s Mental Health Awareness Week, TN Voices teams collaborated with city and county government officials to promote the importance of children’s mental health through a series of events across the state. In Middle Tennessee, the Korean Veterans Bridge was lit green, as well as the Big River Crossing and Hernando de Soto Bridge in West Tennessee. The color green is representative of mental health awareness, and we were honored to have these historic landmarks play a key role in our annual “Go Green” campaign, as well as support from staff in promoting Children’s Mental Health awareness on various social media platforms.

As a partner on the TDMHSAS’ System of Care Across TN Grant (SOCAT), TN Voices’ SOCAT Family Support Specialists hosted a Mental Health Awareness Panel Event on May 21, 2020. The panelists included Certified Family Support Specialists Amy Blackwell, Jennifer Aitken, and Carey Farley, with Laritha Fentress, Tennessee Commission on Children and Youth SOCAT Divisional Coordinator, as the Moderator. Families, community members, and health providers joined the SOCAT team via Zoom to hear about why each panelist became a Family Support Specialist, balancing work and their children’s mental health during this uncertain time of COVID-19, and self care. The history of the Family Support Specialist role in Tennessee, how to access the training offered by TN Voices, and how to become certified through TDMHSAS was also discussed.

Each year, TN Voices works with City and County Mayors across the state to receive proclamations to honor the National Children’s Mental Health Awareness Day, May 7th, 2020. We have received an overwhelming amount of signed proclamations, approximately 20 to date.



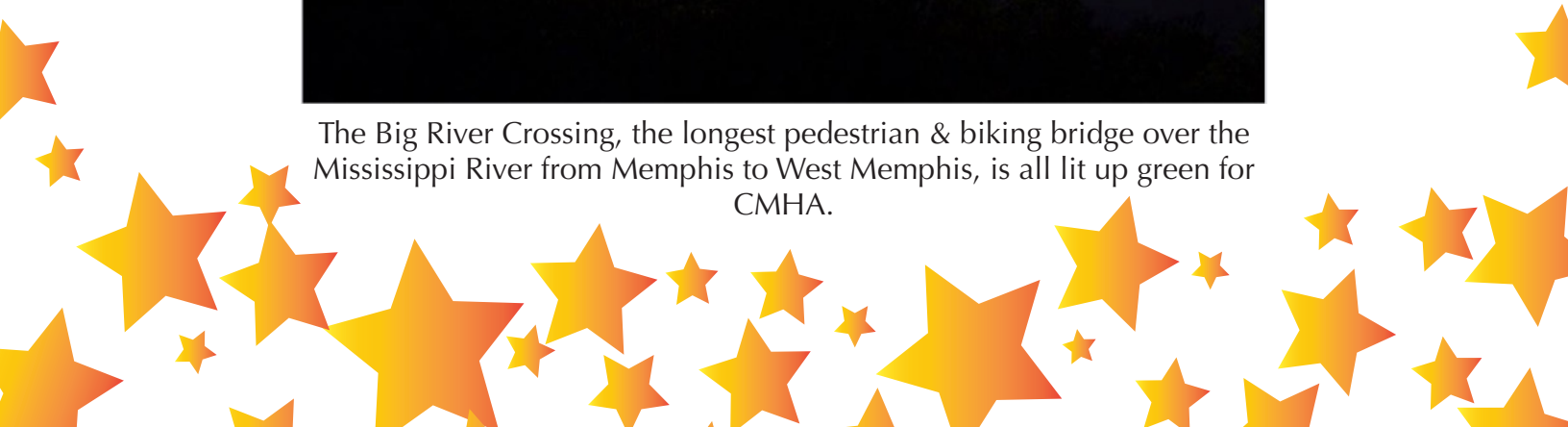
The Korean War Veterans Memorial Bridge, which connects downtown Nashville to East Nashville, is lit up green for Children's Mental Health Awareness Week.



The Hernando de Soto Bridge, which carries Interstate 40 across the Mississippi River between West Memphis, Arkansas and Memphis, Tennessee, illuminates the color green for CMHA.



The Big River Crossing, the longest pedestrian & biking bridge over the Mississippi River from Memphis to West Memphis, is all lit up green for CMHA.





STATE OF TENNESSEE
PROCLAMATION

BY THE GOVERNOR

WHEREAS, good mental health is a key component in a child's healthy development and Children's Mental Health Week provides the opportunity to focus on this important matter, while celebrating the accomplishments of children and families affected by mental health concerns; and

WHEREAS, addressing the complex mental health needs of children, youth, young adults, and families today is fundamental to the future of Tennessee; and

WHEREAS, according to the United States Department of Health and Human Services, one in five children is diagnosed with a mental health condition; and

WHEREAS, research has shown that early identification and appropriate treatment of mental health disorders among children and adolescents provide them with better opportunities to lead full and productive lives; and

WHEREAS, it is important that children and adolescents, along with their families and communities, learn about the warning signs of mental health disorders and identify where to obtain necessary assistance and treatment; and

WHEREAS, the need for comprehensive, coordinated mental health services for children, youth, young adults, and families places upon our community a critical responsibility; and

NOW, THEREFORE, I, Bill Lee, Governor of the State of Tennessee, do hereby proclaim May 3-9, 2020 as

*Children's Mental Health
Awareness Week*

in Tennessee and encourage all citizens to join me in this worthy observance.



IN WITNESS WHEREOF, I have hereunto set my hand and caused the official seal of the State of Tennessee to be affixed at Nashville on this ninth day of March, 2020.

Bill Lee

Governor

Ju Kyatt

Secretary of State

In 2020, we were honored that Governor Bill Lee signed a state proclamation in support of observing National Children's Mental Health Awareness Week.

NAMI MINORITY MENTAL HEALTH AWARENESS MONTH

“ ‘Once my loved ones accepted the diagnosis, healing began for the entire family, but it took too long. It took years. Can't we, as a nation, begin to speed up that process? We need a national campaign to destigmatize mental illness, especially one targeted toward African Americans...It's not shameful to have a mental illness. Get treatment. Recovery is possible.’

–Bebe Moore Campbell, 2005

Bebe Moore Campbell National Minority Mental Health Awareness Month

In May of 2008, the US House of Representatives announce July as Bebe Moore Campbell National Minority Mental Health Awareness Month.

The resolution was sponsored by Rep. Albert Wynn [D-MD] and cosponsored by a large bipartisan group to achieve two goals:

Improve access to mental health treatment and services and promote public awareness of mental illness. Name a month as the Bebe Moore Campbell National Minority Mental Health Awareness Month to enhance public awareness of mental illness and mental illness among minorities.

About Bebe Moore Campbell

Bebe Moore Campbell was an author, advocate, co-founder of NAMI Urban Los Angeles and national spokesperson, who passed away in November 2006.

She received NAMI's 2003 Outstanding Media Award for Literature. Campbell advocated for mental health education and support among individuals of diverse communities.

In 2005, inspired by Campbell's charge to end stigma and provide mental health information, longtime friend Linda Wharton-Boyd suggested dedicating a month to the effort.

The duo got to work, outlining the concept of National Minority Mental Health Awareness Month and what it would entail. With the support of the D.C. Department of Mental Health and then-mayor Anthony Williams, they held a news conference in Southeast D.C., where they encouraged residents to get mental health checkups.

Support continued to build as Campbell and Wharton-Boyd held book signings, spoke in churches and created a National Minority Mental Health Taskforce of friends and allies. However, the effort came to a halt when Campbell became too ill to continue.

When Campbell lost her battle to cancer, Wharton-Boyd, friends, family and allied advocates reignited their cause, inspired by the passion of the life of an extraordinary woman.

The group researched and obtained the support of Representatives Albert Wynn [D-MD] and Diane Watson [D-CA], who co-signed legislation to create an official minority mental health awareness month.”

Thank you to the National Alliance on Mental Illness (NAMI) for sharing this article. (<https://bit.ly/3fkcDk8>)

NMMHAM - THE TENNESSEE WAY



This is an exciting time to continue highlighting the work that is being done across Tennessee regarding mental health, and specifically, the mental health of minorities. While we highlight Children's Mental Health Awareness each year in May, we are also honored to highlight Minority Mental Health Awareness Month in July. This national awareness month places a great focus on an all-so-true statement that "mental health doesn't discriminate." As humans, we are all either directly or indirectly affected by mental health concerns. It is im-

portant that we continue to bring awareness on the importance of barriers that many encounter in seeking and accessing treatment.

TN Voices, the Tennessee chapter of the National Federation for Families, has committed to building and improving upon one of the key principles of the System of Care philosophy, which is to be culturally and linguistically competent by recognizing the barriers that exist among minorities and people of color in gaining access to the best quality of care. Several SOCAT team members participate on the TN Voices Cultural Diversity and Inclusion Committee to assist in providing input on how TN Voices can continuously be solution-focused and best serve the children, youth, young adults, and families they work with.

Tennessee is a state with fantastic leadership that also recognizes the importance of this work. Mayor Lee Harris of Shelby County and Mayor Jim Strickland of Memphis released proclamations that declared July as National Minority Mental Health Awareness month in the state of Tennessee in their respective counties.

During hard times like these, while we continue to practice safe social distancing, it is important to remember that we must use the platforms we have. We must continue advocating for those who do not have a voice or feel heard while on their journey to improve their mental health.

DATA BITES

Data bites shine a light on the progress SOCAT families make! SOCAT teams work hard to gather information from families, conducting interviews and assessments from each family at regular time points. Researchers at Centerstone's Research Institute use that information to measure change. For each data bite, we compare how the average family responded to the same question before and after their period of services. Each data bite corresponds to an individual question, and breaking down the results by question has revealed improvements across many outcomes: child behavior, caregiver strain, family functioning, and more. Data bites are a quick, visual way to share families' successes and point out where some of the biggest changes are being made. Watch for a new one posted every week on SOCAT's internal site (Basecamp) and social media.

Did you know?

Caregivers report **feeling less embarrassed about their child's emotional or behavioral challenges** after receiving SOCAT services.

On average, this area of difficulty decreased by **30%**.

SOCAT teams make a difference!

Source: Baseline and follow-up responses to Caregiver Strain Questionnaire: "How embarrassed did you feel about your child's emotional or behavioral challenges?"; n = 50; updated 6/1/20

Did you know?

Youth & young adults report **fewer problems getting along with their siblings** after receiving SOCAT services.

On average, this area of difficulty decreased by **24%**.

SOCAT teams make a difference!

Source: Baseline and discharge responses to Columbia Impairment Scale: "How much of a problem or difficulty do you have getting along with your sister(s) and/or brother(s)?"; n = 47; updated 4/2/20

Did you know?

Caregivers report **less disruption of family routines due to a child's emotional or behavioral challenges** after receiving SOCAT services.

On average, this area of difficulty decreased by **29%**.

SOCAT teams make a difference!

Source: Baseline and discharge responses to Caregiver Strain Questionnaire: "How much of a challenge was disruption of family routines due to your child's emotional or behavioral challenges?"; n = 66; updated 4/2/20

Did you know?

Caregivers report **feeling less worried about their child's future** after receiving SOCAT services.

On average, this area of difficulty decreased by **19%**.

SOCAT teams make a difference!

Source: Baseline and discharge responses to Caregiver Strain Questionnaire: "How worried did you feel about your child's future?"; n = 66; updated 4/2/20

Did you know?

Caregivers report **their child having less difficulty with behavior at school or their job** after receiving SOCAT services.

On average, this area of difficulty decreased by **35%**.

SOCAT teams make a difference!

Source: Baseline and discharge responses to Columbia Impairment Scale: "How much of a problem or difficulty would you say [she/he] has with [her/his] behavior at school (or at [her/his] job?"; n = 81; updated 4/2/20

Did you know?

Youth & young adults **report feeling less difficult with feeling unhappy or sad** after receiving SOCAT services.

On average, this area of difficulty decreased by **48%**.

SOCAT teams make a difference!

Source: Baseline and discharge responses to Columbia Impairment Scale: "How much of a problem or difficulty do you think you have with feeling unhappy or sad?"; n=55; updated 4/2/20

Did you know?

Youth and young adults report an improvement in **getting along with family members** after receiving SOCAT services. On average, 74% of youth or young adults reported a positive change in this area.

SOCAT teams make a difference!

Source: Baseline and discharge responses to NOMs: "I get [my child gets] along with family members."; n = 27; updated 5/1/20

Did you know?

Caregivers report an improvement in their child **getting along with family members** after receiving SOCAT services.

On average, this increased by 34%.

SOCAT teams make a difference!

Source: Baseline and discharge responses to NOMs: "I get [my child gets] along with family members."; n = 23; updated 5/1/20

Did you know?

Youth & young adults report less difficulty with **getting involved in activities like sports or hobbies** after receiving SOCAT services. On average, this area of difficulty decreased by 31%.

SOCAT teams make a difference!

Source: Baseline and discharge responses to "How much of a problem or difficulty would you say you have getting involved in activities like sports or hobbies?"; n = 58; updated 6/19/20

Did you know?

Youth & young adults report **less difficulty getting along with peers** after receiving SOCAT services.

On average, this area of difficulty decreased by 40%.

SOCAT teams make a difference!

Source: Baseline and discharge responses to Columbia Impairment Scale: "How much of a problem or difficulty do you have getting along with other kids your age?"; n = 58; updated 6/19/20

RESOURCES

National Suicide Prevention Update: 988 To Be Designated As Suicide Prevention Helpline

In July 2020, an exciting step was taken for the suicide prevention movement with the designation of '988' as a three-digit national suicide prevention hotline. The Federal Communications Commission (FCC) has put rules into effect that will require all calls to 988 be immediately directed to the current National Suicide Prevention Hotline. Please note that the transition to the new number will take a few years to implement, and the 988 number is not yet active. The FCC has put a deadline in place of July 16, 2022 for a complete changeover, and the current number will continue to work even after the transition. According to the suicidepreventionlifeline.org, the lifeline was launched on New Year's Day in 2005 by the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) and Vibrant Emotional Health. That will make 2022 the 17th year of operation.

Our hope is that society will become as familiar with 988 as they are with 911. It may feel like 17 years is a long time to achieve progress like this, but consider this. According to the National Emergency Number Association (NENA), 911 has only been around since 1968. The idea originally came from a desire to have a single number for reporting fires, then the concept was expanded to include all emergency situations. It actually took several decades for the number to even become successfully implemented and accessible to the entire United States. Today, whether it's a car accident or a house fire, people know to call 911 for help.

Systems change can be a slow process, and it's important to celebrate the milestones along the way. As the FC News press release put it, "establishing the easy-to-remember 988 as the '911' for suicide prevention and mental health services will make it easier for Americans in crisis to access the help they need and decrease the stigma surrounding suicide and mental health issues." That news is definitely worth celebrating.

Please see the next page for our most commonly shared national and local helplines.

RESOURCES

National

National Suicide Prevention Lifeline: 1-800-273-TALK (8255)

- For speakers of Spanish/Espanol : 1-888-628-9454
- For Deaf and Hard of Hearing: 1-800-799-4889
- For chatting online, visit <https://suicidepreventionlifeline.org/chat/>

Veterans Crisis Line: 1-800-273-8255

- For texting, text 838255
- For chatting online, visit <https://www.veteranscrisisline.net/get-help/chat>

Disaster Distress Helpline: 1-800-985-5990

- For texting, text TalkWithUs to 66746

Statewide

Tennessee Statewide Crisis Line: 855-CRISIS-1 (855-274-7471)

- The Tennessee Crisis Line is available 24/7 for anyone experiencing a mental health crisis.
- You may also text TN to 741741 to connect to the Crisis Text Line and a trained counselor.

Tennessee Redline: Call or text 1-800-889-9789

- The Tennessee Redline serves as a 24/7 referral service for addiction treatment.

Tennessee Department of Mental Health and Substance Abuse Services Helpline: 800-560-5767

- If you having trouble getting mental health or substance abuse services, calling the helpline offers you and your family access to an advocate who will listen to your concerns and provide information about available resources in your area.
- Their email is oca.tdmhsas@tn.gov
- Hours are Monday-Friday, 8 a.m. to 4:30 p.m. CST



Department of
**Mental Health &
Substance Abuse Services**



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