NH Perinatal Substance Exposure Collaborative Meeting Notes

7/31/2024 | 2:30-4:30

Connected Families NH Presentation	Alesha Lane, Julie Johnston and Meghan Herschel presented on the Connected Families NH program.			
	What is Wraparound?			
	 A highly structured, evidence-based program designed for families. Most referrals come from DCYF (Division for Children, Youth, and Families). Participation is optional for all families. 			
	4 Phases of the Program:			
	 Hello: Initial meeting with the family and peer support. Information gathering to form a support team. Help: Monthly team meetings to assess and provide support. Healing: Filling in service gaps for the family and finding necessary resources. Hope: Ideally, a two-month planning phase for the family's future. 			
	Outcomes (The "Why"):			
	 Identifies underlying family needs. Improves engagement with services. Prepares families for long-term success. 			
	How is Wraparound Different?			
	 It's a process, not a specific service. Each program may look different depending on the family's needs. 			

- The goal is to meet underlying needs to achieve better outcomes.
- It brings together various services in a coordinated way.

What Wraparound is Not:

 It is **not** case management, crisis intervention, or a specific set of services.

Who is Eligible?

- Children from birth to age 5.
- Children with emotional disturbances or mental health diagnoses (formal diagnosis is not always required).
- All families are eligible, including those not on Medicaid.
- Services are available prenatally, especially close to the due date.

Referral Process:

- Referrals can be submitted through the website or email.
- The **Bureau for Children's Behavioral Health** handles intake coordination.
- Nearly all referred families receive services, although official data is not yet available.

Additional Information:

- The program is funded by SAMHSA and will become Medicaid billable after the grant expires.
- Website: <u>Connected Families NH.</u>
- Contact:
 - Alesa Lane, Early Childhood Wraparound Supervisor: alane@co.cheshire.nh.us
 - General inquiries:
 - earlychildhoodbh@dhhs.nh.gov

NH Home Visiting Presentation

Kristi Hart & Virginia Jones presented on the NH Home Visiting Program.

What is Home Visiting?

- Focuses on supporting young children and their families.
- Helps parents set goals, solve problems, and receive necessary support.
- "Family" is broadly defined and can include single parents, caregivers, etc.

Home Visiting in New Hampshire:

- Uses an evidence-based model available nationwide.
- Covers families from prenatal stages through age 3.
- Families enrolled through DCYF can receive services up to age 5.
- Focuses on caregiver-child interaction.
- The program is voluntary and free.
- Insurance information is requested only to help uninsured families get connected to coverage.

Outcomes:

- Healthy Families America (HFA) has shown benefits such as improved maternal health and a reduction in child maltreatment.
- Programs are available in **every county** in the state.

Comprehensive Family Support Services (Home Visiting)

- Community-based, voluntary services for families with children from **birth to age 18**.
- Works with the Family Resource Center to provide resource navigation.
- Engaged **1,158 families** last year, and discharged **646 families**.

Contact Information:

- Kristi Hart: kristi.hart@dhhs.nh.gov
- Virginia Jones: virginia.jones@dhhs.nh.gov

Families are connected with the Family Resource Center, which helps

	direct them to the services they need. Families also have access to a nurse home visitor for health-related questions.	
DCYF Policy Discussion	 Last spring, hospitals began receiving varying advice on what should be reported to DCYF No changes have been made to state legislation, and there is n federal mandate for new reporting standards. Reports to DCYF are only necessary when neglect or abuse is identified, along with other risk factors within the family. The rules around reporting remain unclear, and unnecessary DCYF involvement can be disruptive. There is a concern that families who fear being reported may b overlooked for necessary services. Comments and questions were shared by participants around reporting inconsistencies and concerns and the unintended consequences including families not seeking care due to fears obeing reported to DCYF. Action Steps: Maintaining regular contact with DCYF leadership is crucial to address these concerns. Involving families in the reporting process is essential to improve transparency and trust. There is a need for participants and sponsors for ongoing efforts. 	
Participant Updates	 Perinatal Mood Disorders: Components of Care - September 16-18 in Manchester, NH Perinatal Mood Disorders: Components of Care, In-Person 2-Day Training, September 16 - 17, 2024 Advanced Perinatal Mental Health Psychotherapy Training, In-Person 1-Day Training, September 18, 2024 Ways to help the New Hampshire Chapter of Postpartum Support International: Donate to provide scholarships for training workforce caring for pregnant and parenting families. Share the flyer with colleagues and agencies in the perinatal space Attend as an individual or a clinical team! Scholarship 	

Application				
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