



# The Interagency Coordinating Council for Children and Mississippi's System of Care for Children

Families as Allies – 601-355-0915 [www.faams.org](http://www.faams.org)



# Families as Allies

*We are the only statewide organization run by and for families of children with behavioral health challenges in Mississippi. We support each other and work together to make things better for our children.*

Our **vision** is that all children will have the opportunity to reach their potential and succeed, and our **mission** is that families are partners in their children's care.

Our **core values** define us: **every** child and family, excellence, partnership and accountability.

Join us: [www.faams.org](http://www.faams.org), text 228-28 family19

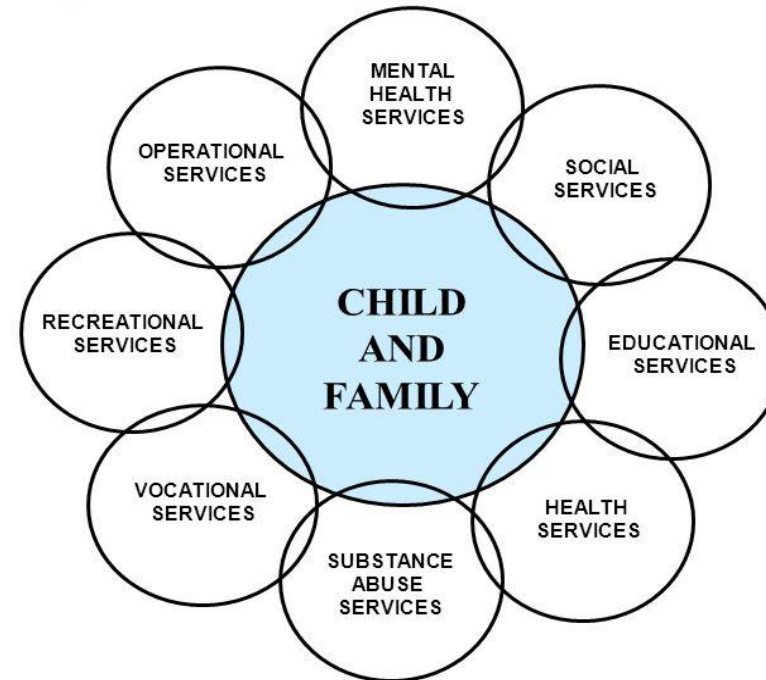
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# A Flavorful System of Care

## System of Care Model





# System of Care Framework

- Family driven and youth guided;
- Home and community based;
- Strengths based and individualized;
- Culturally and linguistically competent;
- Coordinated across systems and services;
- Connected to natural helping networks; and
- Data driven and outcome oriented

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Our mission is that families are partners in their children's care



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# What Does Family Driven Mean?

Family-driven means families have a **primary decision making role** in the care of their own children as well as the **policies and procedures governing care for all children** in their community, state, tribe, territory and nation. This includes:

- Choosing culturally and linguistically competent supports, services, and providers;
- Setting goals;
- Designing, implementing and evaluating programs;
- Monitoring outcomes; and
- Partnering in funding decisions.



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# What Does the Law Say about Mississippi's System of Care?

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[HOUSE BILL 1529 PASSED IN 2010](#)

# Purpose of the Law



The purpose of this chapter is to ***provide for the development, implementation and oversight of a coordinated interagency system of necessary services and care for children and youth, called the Mississippi Statewide System of Care, up to age twenty-one (21) with serious emotional/behavioral disorders including, but not limited to, conduct disorders, or mental illness who require services from a multiple services and multiple programs system, and who can be successfully diverted from inappropriate institutional placement.***



# How Should the System of Care Be Conducted?



The Mississippi State Wide System of Care is to be conducted in the **most fiscally responsible** (cost-efficient) manner possible, **based on an individualized plan of care which takes into account other available interagency programs**, including, but not limited to, Early Intervention Act of Infants and Toddlers, Section 41-87-1 et seq., Early Periodic Screening Diagnosis and Treatment, Section 43-13-117(5), waived program for home- and community-based services for developmentally disabled people, Section 43-13-117(29), and waived program for targeted case management services for children with special needs, 31 Section 43-13-117(31), those children identified through the 32 federal Individuals with Disabilities Education Act of 1997 as 33 having a serious emotional disorder (EMD), the Mississippi 34 Children's Health Insurance Program \* \* \* and waived programs 35 for children with serious emotional disturbances, Section 36 43-13-117(46), and is **tied to clinically and functionally 37 appropriate outcomes**.

# How Should the System of Care Be Conducted?



The Mississippi Statewide System of Care **shall be**:

(a) Child centered, family focused, **family driven** and youth guided;

(b) Community based;

(c) Culturally competent and responsive; and shall provide for:



(i) Service coordination or case management;

(ii) Prevention and early identification and intervention;

(iii) Smooth transitions among agencies and providers, and to the transition-age and adult service systems;

(iv) Human rights protection and advocacy;

(v) Nondiscrimination in access to services;

(vi) A comprehensive array of services composed of treatment and informal supports that are identified as best practices and/or evidence-based practices;

(vii) Individualized service planning that uses a strengths-based, wraparound process;

(viii) Services in the least restrictive environment;

(ix) Family participation in all aspects of planning, service delivery and evaluation; and

(x) Integrated services with coordinated planning across child-serving agencies in Mississippi

# What Services Should the System of Care Provide?

Comprehensive crisis and emergency response services

Intensive case management

Day treatment

Alcohol and drug abuse group services

Individual, group and family therapy

Respite services

Supported employment services for youth

Family education and support and family partners

Youth development and support and youth partners

Positive behavioral supports (PBIS) in schools

Transition-age supported and independent living services

Vocational/technical education services for youth



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# Who Oversees the System of Care?

“There is established the Interagency Coordinating Council for Children and Youth (hereinafter referred to as the "ICCCY")”





## Who is on the ICCCY?

(a) The State Superintendent of Public Education; (b) The Executive Director of the Mississippi Department of Mental Health; (c) The Executive Director of the State Department of Health; (d) The Executive Director of the Department of Human Services; (e) The Executive Director of the Division of Medicaid, Office of the Governor; (f) The Executive Director of the State Department of Rehabilitation Services; (g) The Executive Director of Mississippi Families as Allies for Children’s Mental Health, Inc.; (h) The Attorney General; (i) A family member of a child or youth in the population named in this chapter designated by Mississippi Families as Allies; (j) A youth or young adult in the population named in this chapter designated by Mississippi Families as Allies; (k) A local MAP team coordinator designated by the Department of Mental Health; (l) A child psychiatrist experienced in the public mental health system designated by the Mississippi Psychiatric Association; (m) An individual with expertise and experience in early childhood education designated jointly by the Department of Mental Health and Mississippi Families as Allies (n) A representative of an organization that advocates on behalf of disabled citizens in Mississippi designated by the Department of Mental Health; and (o) A faculty member or dean from a Mississippi university specializing in training professionals who work in the Mississippi Statewide System of Care designated by the Board of Trustees of State Institutions of Higher Learning.”

# What Are the Duties of the ICCCY?

**Designate necessary staff** of their departments to assist the ICCCY in performing its duties and responsibilities

**Meet and conduct business at least twice annually**

**Work to develop MAP teams statewide that will serve to become the single point of entry** for children and youth about to be placed in out-of-home care for reasons other than parental abuse/neglect.

**Support the implementation of the plans of the respective state agencies for comprehensive, community-based, multidisciplinary care, treatment and placement of these children**

**Facilitate monitoring of the performance of local MAP teams.**





Each ICCCY member shall enter into a binding memorandum of understanding to participate in the further development and oversight of the Mississippi Statewide System of Care for the children and youth described in this section. The agreement shall outline the system responsibilities in all operational areas, including ensuring representation on MAP teams, funding, data collection, referral of children to MAP teams and "A" teams, and training

Serve in an advisory capacity and to provide state level leadership and oversight to the development of the Mississippi Statewide System of Care

Insure the creation and availability of an annual pool of funds from each participating agency member of the ICCCY that includes the amount to be contributed by each agency and a process for utilization of those funds





## Who Helps the ICCCY

The Interagency System of Care Council (ISCC) is created to serve as the **state management team for the ICCCY**, with the responsibility of **collecting and analyzing data and funding strategies** necessary to improve the operation of the Mississippi Statewide System of Care, and to **make recommendations to the ICCCY and to the Legislature** concerning such strategies on, at a minimum, an annual basis. The **System of Care Council** also has the responsibility of **coordinating the local Multidisciplinary Assessment and Planning (MAP) teams and "A" teams** and **may apply for grants from public and private sources** necessary to carry out its responsibilities



## Who Else?

The local interagency coordinating care MAP team or "A" team will facilitate the development of the individualized System of Care programs for the population targeted in Section 43-14-1.

Each local MAP team and "A" team shall serve as the **single point of entry and re-entry to ensure that comprehensive diagnosis and assessment occur** and shall **coordinate needed services** through the local MAP team and "A" team members and local service providers for the children named in subsection



# ICCCY Last Met in 2012





# Variety of Possible Reasons

Money

Time

Lack of Staff

Lawsuits

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# Possible Initial Topics



Parent peer support across systems

Integration of education and mental health: Do all systems understand exceptional education and how to coordinate with Child Find?

Early Childhood

Implementing Wraparound with fidelity

Transition services

Continuum of Care – including medical homes and mental health telepsychiatry consultation



# Opportunities

Coordination with SECAC and other interagency groups

Increased focus on system of care in maternal child health and HRSA

Family centered practice philosophy in child welfare

Building toward a Children's Cabinet and other recommendations from 2015 report

Public Input – [Take the ICCCY survey](#)

# Initial Survey Feedback

Please review data and keep sharing survey – seems to be primarily mental health respondents

Appears to be significant interest in ICCCY and also some doubt

Developing a mission statement mentioned more than once

Creative suggestions for using electronic approaches and/or third party to stay mission focused

Strong emphasis on including families in all aspects of ICCCY decisions

The importance of transparency and public input repeatedly mentioned

Questions about adding members

Examples of groups that work well together – **MAP Teams mentioned repeatedly**, also DMH and CMHC , Governance Council for SOC, Grant-funded programs that support peer support for youth, parent peer support for guardians, and community support services for all served, **Not sure**, CHAMP, Behavioral Health in Infants and Preschoolers (BEHIP) at UMMC. Both collaborate across medical/behavioral areas, in communities with PCPs and/or CMHCs and agencies. MS Thrive. Wrap-around Services, **n/a**, SOC's, Families as Allies







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