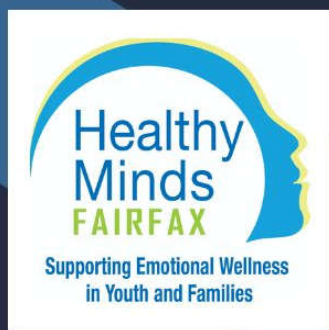


FAIRFAX-FALLS CHURCH COMMUNITY CHILDREN'S BEHAVIORAL HEALTH PLAN 2023-2027



**HEALTHY MINDS FAIRFAX
NOVEMBER 2022**

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Background And Approach

In 2001, the Fairfax-Falls Church Community Policy and Management Team (CPMT) launched a System of Care initiative (renamed "Healthy Minds Fairfax" in 2017) to enhance the community's ability to serve youth and families with the most complex mental health and substance use needs. In 2015, the Fairfax County Board of Supervisors approved an expansion of the initiative to a larger population, with the goal of increasing equitable access to quality behavioral health services for children, youth, and their families in the county.

As part of that expansion, a 30-member planning team was convened, comprising county human service staff, school staff, nonprofit representatives, family organizations, family members, and George Mason University faculty. The team was charged with developing a vision and mission for the initiative and establishing goals, strategies, action steps, and a timetable for implementation. They identified fifteen goals that made up the 2016-2020 Healthy Minds Fairfax Blueprint, the framework for the Fairfax-Falls Church System of Care for children, youth, and families.

In early 2022, Healthy Minds Fairfax began work on the 2023-2027 version of the Fairfax-Falls Church Children's Behavioral Health Plan. Like the previous Blueprint, it includes goals, strategies, and action steps to ensure that children, youth, and their families can access behavioral health services and supports. To develop the Plan, the county engaged in an intensive data- and information-gathering process to understand more about community members' experiences with behavioral health services, including what is working and what needs to be improved.


Findings from these data collection efforts informed identification of key issues and strategies to include in the new Plan, which will continue to provide the framework for implementation of the county’s efforts to ensure children, youth, and families have needed behavioral health services and supports.

The 2023-2027 Children’s Behavioral Health Plan

The Children’s Behavioral Health Plan (also known as “the Plan”) is divided into four key areas:


Prevention/Education, Access to Services, Navigation of Services, and System Level. Each key area has at least one goal with key objectives and action steps. These objectives and action steps will help achieve each goal. This Plan will help guide the development of children’s behavioral health services for the next five years.

Vision, Mission, and Values



The Vision of Children's Behavioral Services in Fairfax/Falls Church

To have a range of coordinated community-based behavioral health services and supports across the continuum of care for children, youth, and their families to ensure a healthy, equitable, and resilient community.



The Mission of Children's Behavioral Services in Fairfax/Falls Church

To ensure that all children, youth, and their families have equitable access to a continuum of quality, integrated and/or coordinated services, supports, and opportunities to allow them to thrive socially, emotionally, and behaviorally.

The Values of Children's Behavioral Health Services in Fairfax/Falls Church

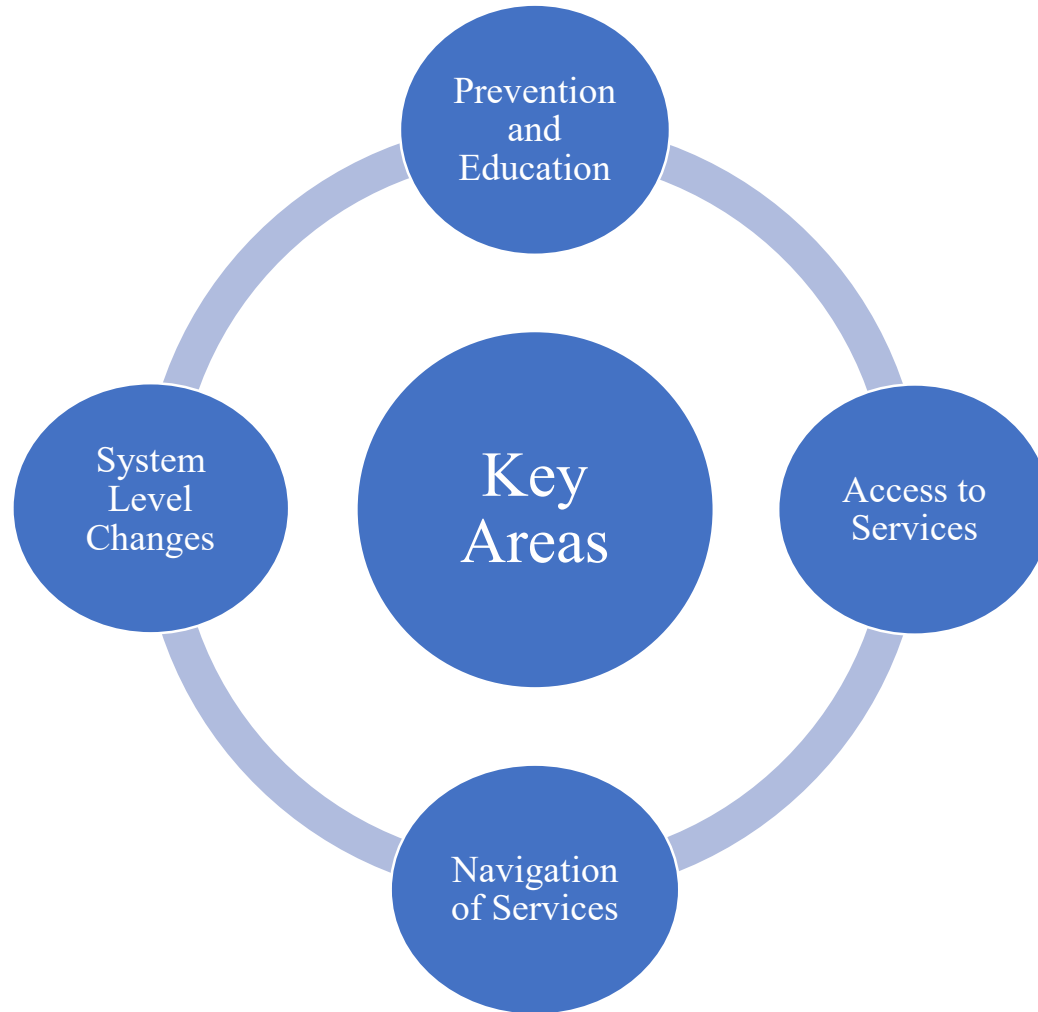
- All services will be family-driven, youth-guided, strength-based, and individualized.
- All children will have access to quality and affordable behavioral health services.
- All services will be culturally and linguistically competent and reflect the cultural, racial, ethnic, and linguistic characteristics of the populations we serve.
- All services will support the physical and psychological safety of the child.
- All services will be delivered in the community when possible.
- All services will be integrated between all public and private child serving agencies including the school system.
- All services will include family's natural support system (e.g., relatives, faith community, friends, etc.).
- All services will be guided by data at the program level.

The Equity Principles in Behavioral Health Services in Fairfax/Falls Church

The Children’s Behavioral Health Plan builds on Fairfax County's [One Fairfax policy](#). One Fairfax is a joint racial and social equity policy of the Fairfax County Board of Supervisors and School Board. It commits the county and schools to intentionally consider equity when making policies or delivering programs and services. The One Fairfax policy is a declaration that all residents deserve an equitable opportunity to succeed — regardless of their race, color, sex, nationality, sexual orientation, religion, disability, income or where they live.

The Children’s Behavioral Health Plan works to ensure that all children and youth have equal access to a range of high-quality behavioral health services. To accomplish this, the Plan works to reduce existing disparities in access to care and in behavioral health outcomes. Consistent with the One Fairfax policy, the Plan is informed by the theory of [Targeted Universalism](#), which acknowledges that targeted strategies may be needed to move different populations or communities towards a universal goal.

Key Areas, Goals, Objectives, and Action Steps



Key Areas and Goals

Key Area: Prevention and Education: To raise awareness of behavioral health, reduce the stigma that is associated with behavioral health, and to promote the development of protective factors.

Goal 1: Fostering connection and belonging among children and youth.

Goal 2: Equipping trusted adults to build social-emotional skills in the children and youth they work with.

Goal 3: Raising awareness of mental health and substance use.

Key Area: Access to Behavioral Health Services: To utilize a family-centered approach to connect children, youth, and their families to a complete range of behavioral health services that are equitable and affordable.

Goal: Expanding access to quality family-centered behavioral health services across the continuum of services.

Key Area: Navigation of Children's Behavioral Health Services: To reduce barriers and length of time to receive services by developing strategies to connect children, youth, and their families to appropriate levels of behavioral health services.

Goal: Developing an easier way for youth, their family members, and community members to navigate the children's behavioral health system.

Key Area: System Level Changes: To infuse equity and [trauma-focused](#) care throughout the behavioral health system for children, youth, and their families.

Goal 1: Ensuring that children's behavioral health services is seen through an equity lens.

Goal 2: Continuing to integrate [trauma-informed practice](#) into all public and private child serving agencies.

Key Area: Prevention and Education: To raise awareness of behavioral health, reduce the stigma that is associated with behavioral health, and to foster the development of [protective factors](#).

Goal 1: Fostering connection & belonging among children and youth.

Key Objective	Key Action
<p>1. Reduce social isolation & loneliness and increase social connectedness among children and youth.</p>	<p>1A. Implement strategies to increase inclusion and belonging among participants in youth programs and services.</p> <p>1B. Promote and support the development of trauma-informed spaces and culturally relevant strategies.</p> <p>1C. Address root causes, including difficulties communicating and interacting with others, stigma and discrimination, physical and mental health that limit mobility and social interaction, and traumatic life transitions.</p>
<p>2. Encourage adult family and community members to talk to youth about mental health and substance use.</p>	<p>2. Equip and empower adult family and community members to serve as trusted adults to youth. Specific attention should be given to language & culture to meet the needs of at-risk Hispanic youth.</p>
<p>3. Increase opportunities for children and youth to get involved in their communities and activities (interests, community contributions, sense of place and belonging).</p>	<p>3A. Increase equitable utilization of after-school and summer youth programming (academic enrichment, recreation, athletics, etc.).</p>

<p>4. Increase the sense of acceptance and safety for LGBTQ+ youth.</p>	<p>3B. Improve the availability and utilization of youth programming options in targeted communities (including communities with high levels of child poverty, limited English proficiency, at-risk populations, and transportation barriers). Specific attention should be given to language & culture to meet the needs of at-risk Hispanic youth.</p> <p>4. Identify and endorse a professional model for creating safe spaces for LGBTQ+ youth that can be broadly used across the youth behavioral health system.</p>
<p>Goal 2: Equipping trusted adults to build social-emotional skills in the children and youth they work with.</p>	
<p>Key Objective</p>	<p>Key Action</p>
<p>1. Train people who work with children and youth in out-of-school settings to develop social-emotional skills (e.g., refusal and problem-solving skills, emotional regulation) among their participants. Develop a train the trainer sessions to work on various skills with children (e.g., denial & problem-solving skills).</p>	<p>1A. Identify key learning objectives for an easily implementable strategies to incorporate social emotional learning into everyday programing and interactions.</p> <p>1B. Draft a curriculum and develop implementation strategies for a train the trainer module for trusted adults.</p>

<p>2. Ensure a consistent approach to Tier 1 Social Emotional Learning (SEL) across all FCPS schools.</p>	<p>2. Identify standard objectives and strategies to be implemented across all schools to promote social emotional learning.</p>
<p>Goal 3: Raising awareness of mental health and substance use.</p>	
<p>Key Objective</p>	<p>Key Action</p>
<p>1. Increase awareness and knowledge of issues relating to substance use to promote informed decision-making among children and youth.</p>	<p>1A. Identify and implement interventions that are timely and relevant to current trends in prevalence, morbidity, and mortality. This includes public health engagement, communications work, social media, peer to peer learning, and culturally and linguistically appropriate interventions.</p> <p>1B. Target specific programs and interventions to groups at elevated risk.</p> <p>1C. Develop and implement messaging campaigns (broad campaigns, but also components to be delivered in-person at schools, youth programs, etc.) that emphasize key facts families and youth need to know, to be delivered through a standardized process. Consider SAMHSA's "Talk. They Hear You" media campaign.</p>

<p>2. Increase awareness and knowledge of issues related to mental health to promote effective help-seeking behaviors and reduce stigma and increase acceptance.</p>	<p>2A. Identify and implement an awareness campaign to provide consistent messaging.</p> <p>2B. Promote and ensure access to gatekeeper trainings that promote awareness and encourage help-seeking behaviors tailored to specific populations.</p> <p>2C. Continue to implement and support youth led initiatives to raise awareness and address stigma.</p>
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Key Area: Access to Behavioral Health Services: To utilize a family-centered approach to connect children, youth, and their families to a complete range of behavioral health services that are equitable and affordable.

Goal: Expanding access to quality family-centered behavioral health services across the continuum of services.

Key Objectives	Key Action
1. Address the urgent needs of youth entering the behavioral health system.	1A. Work with public and private child serving agencies, family organizations, caregivers, and youth to explore innovative approaches to meet the current trend in children and youth behavioral health. 1B. Support the work of the Behavioral Health Workgroup, a regional consortium focused on workforce issues. Liaise with the County’s Social Isolation/Stigma Committee to explore mental health wellness programs for the workforce. 1C. Identify and recommend legislative priorities for submission to the appropriate agency legislative affairs committee, the Board of Supervisors, the Fairfax County School Board, or the Falls Church City School Board.

<p>4. Increase access and availability to behavioral health services for underserved populations.</p>	<p>4A. Review the recommendations in the Innovative Behavioral Health Strategies for Underserved Populations report (2018).</p> <p>4B. Review current programs, services, and interventions to determine what has increased access and can be scaled up.</p> <p>4C. Determine what additional services, interventions, and policies are needed to continue to expand access to services for underserved populations.</p>
<p>5. Strengthen the current Family Peer Support Partner Program.</p>	<p>5A. Work with current Family Peer Support Partners providers, stakeholders, and caregivers to promote and expand the services to families and the community.</p> <p>5B. Explore how Family Peer Support Partners can be utilized during times of mental health crises.</p>
<p>6. Expand the use of peer support models for children, youth, and their families.</p>	<p>6. Explore peer support models for children and youth and identify effective models to implement in Fairfax.</p>

<p>7. Explore the use of non-traditional services.</p> <p>8. Create innovative ways to pay for services to increase access and affordability.</p> <p>9. Continue to promote quality behavioral health services.</p>	<p>7. Work with community and family organizations to explore alternatives to traditional therapy such as support groups and use of mental health apps.</p> <p>8A. Ensure that all children and youth who are eligible are enrolled in health insurance.</p> <p>8B. Explore innovative ways to incentivize mental health providers to accept health insurance.</p> <p>8C. Promote, support, and incentivize providers to provide free counseling services, counseling services with a sliding scale, and other free or low-cost services.</p> <p>9. Continue to support the use of Evidence-Based treatment through provider trainings and supports and caregiver education.</p>
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Key Area: Navigation of Children’s Behavioral Health Services: To reduce barriers and time to service by developing strategies for service navigation to connect children, youth and their families to appropriate levels of behavioral health services.

Goal: Developing an easier way for youth, their family members, and community members to navigate the children’s behavioral health system.

Key Objectives	Key Action
1. Map out current behavioral health services including location of services.	1A. Identify behavioral health services that are available to children, youth, and their families including location of services. 1B. Work closely with youth, families, organizations that support families to help identify gaps in behavioral health services. 1C. Create strategies to fill gaps of services including any service deserts.

<p>4. Partner with youth and caregivers to develop implementation strategies for new navigation tools. This may include a communication plan, trainings, and social media promotion.</p>	<p>4. Create a platform for youth and caregivers to provide input on the new navigation tools along the way.</p>
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Key Area: System Level Changes: To infuse equity and trauma-focused care through the behavioral health system for children, youth, and their families.

Goal 1: Ensuring that children’s behavioral health services is seen through an equity lens.

Key Objective	Key Action
<p>1. Use data to drive decisions on children’s behavioral health care. This includes attaining data required to monitor the status of known vulnerable populations.</p> <p>2. Ensure that people from diverse cultural, ethnic, racial backgrounds and those from the LGBTQ+ community, are included as stakeholders in strategic planning and policy development on children’s behavioral health.</p>	<p>1A. Review all items in this plan to determine where we are missing supporting data.</p> <p>1B. Review all the organizations and programs that need to contribute data to get a complete understanding of “the system.” Explore using Memorandum of Understandings with public and private child serving agencies and Fairfax County Public Schools and Falls Church City Public Schools so data can be shared.</p> <p>1C. Attain data disaggregated by population and place in order to inform future equity conversations.</p> <p>2A. Identify and connect with key public, non-profit and private organizations representing diverse cultural, ethnic, and LGBTQ+ community, to bring expertise and input to the children’s behavioral health.</p> <p>2B. Ensure appropriate representation on policy, management, and advisory teams and committees.</p>

Goal 2: Continuing to integrate trauma-informed practice into all public and private child serving agencies.	
Key Objective	Key Action
1. Support a resilient workforce that is well equipped to respond to the needs of children, youth and their families who have experienced trauma.	<p>1A. Identify and address current workforce challenges in the behavioral health field that impact the wellbeing of its workers.</p> <p>1B. Offer self-care and resiliency trainings/sharing sessions and initiatives for behavioral health workers (e.g., increase awareness about secondary trauma and foster self-care).</p>
2. Promote trauma-informed policies, procedures, and practices within organizations.	2. Share and review trauma-informed approach in policies, procedures and/or practices among behavioral health organizations and foster implementation.
3. Continue to train non-clinical staff in trauma-informed practices.	3. Identify trainings and offer them to non-clinical staff that interact with behavioral health clients.

Appendix: Historical and Ongoing Work

The Children’s Behavioral Health Plan builds on previous and ongoing improvement efforts. These efforts include, but are not limited to, the following:

Key Area: Prevention and Education

- Creating a system for prevention-focused early childhood mental health consultation services to support children’s successful participation in early childhood education programs and eliminate expulsion and suspension practices ([Fairfax County Equitable School Readiness Strategic Plan](#)).
- Implementing awareness efforts to reduce stigma around behavioral health issues ([Community Health Improvement Plan](#)).

Key Area: Access to Behavioral Health Services

- Providing equitable access to affordable healthcare and healthy living opportunities; supporting all residents in attaining their full health potential ([Fairfax County Strategic Plan](#)).
- Ongoing efforts to eliminate gaps in opportunity, access, and achievement for Fairfax County Public School Students ([Equity and Cultural Responsiveness | Fairfax County Public Schools](#)).
- Increasing the use of health, mental health, and developmental screenings to identify opportunities for early intervention ([Fairfax County Equitable School Readiness Strategic Plan](#)).

- Increasing access to timely and appropriate services and supports to individuals and families ([CSB Strategic Plan](#)).
- Working to ensure that all students have access to mental health resources ([Fairfax County Student Human Rights Commission](#))
- Utilizing a national framework to adapt youth mental health strategies and shape school mental health services in Fairfax County Public Schools. FCPS uses a similar framework to ASPIRE ([ASPIRE](#)).

Key Area: Navigation of Children’s Behavioral Health Services

- Working to reduce the challenges in navigating the complex system of services ([Community Health Improvement Plan](#)).
- Continue to promote the ability of families, youth, and professionals to obtain services and navigate the behavioral health system ([Fairfax-Falls Church Children’s Behavioral Health System of Care Blueprint for 2016-2020](#)).

Key Area: System Level Changes

- Ongoing equity work at the Fairfax-Falls Church Community Service Board. The agency’s equity lead is currently conducting a GARE survey ([Local and Regional Government Alliance on Race & Equity](#)).
- Striving for racial and social equity in access to and delivery of behavioral health services ([Fairfax-Falls Church Children’s Behavioral Health System of Care Blueprint for 2016-2020](#)).