

Successful Children and Youth Policy Team

March 30, 2022, Meeting Summary

Key decisions and actions are in **bold**.

SCYPT Members in Attendance:

Gloria Addo-Ayensu, Leslie Atkins, George Becerra, Michael Becketts, Michelle Boyd, Telaekah Brooks, Karla Bruce, Judith Dittman, Alicia Doe, Kelly Henderson, Frances Ivey, Rick Leichtweis, Chris Leonard, Nicole Lehman, Rodney Lusk, Dalia Palchik, Sloan Presidio, Deb Scott, Elaine Tholen, Lloyd Tucker, Douglas Tyson, Daryl Washington, Jenna White

Administrative Item – Update on Meeting Times

Jesse Ellis shared that about 20% of SCYPT members in a poll suggested that other meeting times might be better than Wednesday mornings for SCYPT meetings. Ellis will send members a new survey to see if there is consensus on a better time. No changes would take effect before next school year.

The poll also showed overwhelming support for an evening meeting or two each year with the explicit purpose of engaging the community. Staff will be putting together some options to present to the Executive Committee. Nothing would be scheduled prior to next school year.

The Executive Committee has decided that the SCYPT meeting on May 11 will be regular meeting, from 10 to 12:30. There will not be a full day retreat.

Discussion Item – School Readiness

Anne-Marie Twohie and Flor Philips, of the Fairfax County Office for Children, and FCPS's Maura Burke shared an update on school readiness efforts. They highlighted the role of Fairfax County in leading the Ready Region Capital Area initiative, which will support strategies to build Virginia's Unified Early Childhood System in the region. They also noted that they are working with George Mason University to develop a framework for family partnerships; the framework, being created by the Equitable School Readiness Strategic Plan Implementation Planning Team, should be completed by the end of the summer. Finally, they shared updated data showing that 30,024 (39 percent of all) children under the age of five in Fairfax County live in households with income below 350 percent of the Federal Poverty Level.

In response to questions, Twohie, Philips, and Burke explained that Ready Regions includes public and private providers and also includes capacity building for providers to serve children with special education needs or disabilities. They emphasized the importance of teacher compensation. Additional state funding will be needed to maintain current stipends for teachers participating in these initiatives; this Teacher Recognition Strategy has proven to be an effective retention strategy for educators in community-based early childhood programs. They also

emphasized the need for capital investments to support opportunities for increased service capacity; the Board of Supervisors is focused on this, with the implementation of creative strategies and planning for future bonds.

Discussion Item – Behavioral Health

Peter Steinberg of Healthy Minds Fairfax (HMF) shared a short overview of the accomplishments of the Children’s Behavioral Health Blueprint, initially endorsed by the SCYPT in 2016. HMF is leading the development of a new blueprint and Steinberg described the plan for collecting data and community and stakeholder input through surveys, focus groups, community listening sessions, and other strategies. A draft blueprint is expected to be developed by the end of the summer.

The SCYPT and meeting guests separated into breakout sessions to participate in a focus group on children’s behavioral health. [A summary of the breakout group responses is attached.](#) The feedback will be shared with Healthy Minds Fairfax to help guide the development of the new blueprint.

Key Issues Update

An update on the other SCYPT key issues (community schools, career readiness, and My Brother’s Keeper) was not provided during the meeting, but is [attached here](#).

Items Presented by SCYPT Members

George Becerra asked for an update on community schools and to have a discussion on the mission and purpose of SCYPT. He asked that time be spent at upcoming meetings to discuss and ensure stakeholders are kept informed.

Kelly Henderson shared that the Northern Virginia Family Network has produced a new fact sheet on social emotional learning and what families should know about it. It can be found at <https://sites.google.com/view/nvfn/nvfn-home/productsresources>.

Public Comment

None

Attachment: Behavioral Health Focus Group Response Summary

When you think about the different ways that children and their families in Fairfax County can seek help and support for a child's mental health, what is working well?

- Services are offered in all parts of the county.
- There are multiple ways people can access the system, including through schools and faith communities.
- The CSB provides mental health services in times of crisis.
- Language options are available for families who need them.
- A variety of fee structure and payment options exist.
- Trying to build capacity and infrastructure through the schools and the CSB professionals who are providing school-based resources and connections. This helps establish trust in the community.
- Family Resource meetings Children's Services Act services are happening on a large scale.
- The Second Story Teens in Crisis Program is effective.
- Healthy Minds Fairfax has created the Short Term Behavioral Health Program, provided evidence-based practices training to clinicians, and partnered with REACH and VMAP to support children's behavioral health through primary care.
- Telehealth has helped improve access.
- The suicide rate has been trending down.
- Trauma-informed practices have been widely adopted.
- FCPS provides high quality professionals in the schools.
- We have expanded peer support and engagement.
- We are gaining an increased understanding of the mental health needs of children.
- The County-FCPS partnership is strong.
- There is a lot of effective prevention and Tier 1 work in the schools and community.
- Community centers and parent liaisons help connect families with language and other barriers.
- Community schools provide a system of support by creating smoother pathways for people seeking support.
- All Minds Matter is a peer-to-peer program that creates spaces for youth to talk about mental health topics important to them. It is supported by FCPS social workers and CSB to triage any topics that NCS staff can't address.

When you think about the different ways that children and their families in Fairfax County can seek help and support for a child's mental health, what is not working well?

- System capacity and supply of providers is not enough to meet the demand for services for young children. There is a lack of psychiatrists and other clinicians.
- Cost is a barrier, even for families with insurance. Many providers don't take insurance, so there can be a large out of pocket cost.
- The system is complex and it's hard to access the right services even when you have knowledge of the system and resources (transportation, insurance, speak English, persistence).
- We need to improve the way we share information about different types/levels of service.
- Stigma and lack of understanding around behavioral health persists, so while schools are doing a job of normalizing SEL with students, their families may not be as well versed or accepting.

- We need to take a wholistic approach to strengthening the system. Raising awareness must be matched with reducing barriers and expanding capacity so when families receive a referral for services, barriers don't prevent them from actually receiving those services.
- We need to be more creative in using spaces creatively to accommodate those who need to come to convenient, safe and familiar spaces for treatment.
- We need to better identify communities who are isolated from health, including behavioral health, services. Reaching underserved communities is a big gap. Language and other elements of cultural competence are needed.
- We need more services during crisis, and more transitional services for youth coming out of hospitalization.
- Lack of capacity has resulted in too many children stuck in the emergency department. We need better ED diversion.
- Inability to use the CSB for children and youth who are not seriously mentally ill is a challenge.
- We should re-evaluate the use of master's level clinicians who are under supervision and registered as such with the state. We should be letting those folks see more kids.
- We need a more root cause-focused approach.
- Rather than continuing to add services to the existing structure, we should be questioning the sustainability of our model in the first place.
- We need to recruit and retain clinicians who are representative of the people they are serving.
- We need to build capacity for groups to bring innovative ideas to fruition.
- FCPS is taking on too much of the burden of addressing students' and families' needs.
- Short Term Behavioral Health Services are not yet available in all schools. And they are sometimes identified when more intensive services are needed.
- There is a gap in services for youth with developmental delays and autism.
- There is a lack of a system in place to ensure professional training in the areas where we are seeing an increased need for services.
- We need to get information to youth themselves (age-appropriate targeted outreach) in addition to parents.
- It's a disjointed system and people often don't know where to start to find resources.
- The state's bed crisis impacts the availability of inpatient beds in Fairfax County.
- There aren't enough residential and outpatient services.
- There is a lack of physicians that specialize in meeting the mental health needs of children that have mental health issues AND other disabilities.
- Prenatal Alcohol Exposure – prenatal disorders are not being met which leads to long term adult mental health challenges that stress the system.
- We need to address issues holistically; parental mental health issues are often affecting children.
- Some locations, such as along Richmond Highway, have a dearth of youth mental health providers.
- We need to better educate out of school time providers, coaches, etc., on resources and how to connect youth.
- We need to better educate parents on how to access help.
- The speed with which families are hoping to get help doesn't match the speed the system moves in. We need to connect with families at the right time for them.
- We need more youth and parent peer support.

Thinking about the County's behavioral health system as a whole, do you have a good sense of how the system is organized and how people can access it?

- NCS works in the prevention space - raising awareness among communities, building capacity among partners.
- There is a need to increase focus on behavioral health needs among young children (birth to 5 years old).
- In response to covid, there has been increased funding and opportunities to be creative, but we haven't had staff capacity to translate that into improving the system.
- Emergency services have been accessible for schools, but ongoing services are more of a challenge.
- Do lower-income families have access to primary care physicians? Are there ways to get medical providers at the urgent cares, minute clinics, etc. the training on mental/behavioral health that was provided to pediatricians?
- How do we bring services to the people? How do we use community centers to bring services to the people and make more accessible? How will this alleviate the transportation issues?
- Staff in many non-clinical agencies provide linkages and referral.
- There are numerous county and non-county resources that county workers are not aware of. Increasing awareness to some of the non-county resources may address some equity issues and lack of access to resources for underserved populations.
- Get public input on the design of the webpage. It's hard to navigate.
- There is a lot of collaboration, but the county is so big that communication and engagement can be difficult.

What would you like to see in the Blueprint?

- Outcome measurements must be defined in the next blueprint – not just numbers, but what have we accomplished and what have we done to improve.
- Addressing equity and disparities should not be stand-alone goals, but infused throughout the goals in the plan.
- Include prevention-related goals.

What would make the Blueprint most useful?

- The new blueprint needs to be shorter than the original.
- A communication plan should include periodic updates and clarify how the Blueprint intersects with other initiatives and organizations.
- Ensure it is written to be more readable and accessible. Ask the community how they would like to receive this information.
- Ensure families and underserved populations are represented in the planning.
- Use personal testimonies to help make it relevant.

SCYPT KEY ISSUE UPDATE

SCYPT Meeting Date	March 30, 2022
Key Issue	Notable Progress Since Last Update
Community Schools	<p>Staff presented at a School Board Work Session on February 22. School Board members were excited about community schools and the SCYPT-endorsed framework. They have asked for additional conversation about evaluation and implementation opportunities. A staff committee is working on an evaluation/reporting framework.</p> <p>Staff contact: Jesse Ellis, NCS, jesse.ellis@fairfaxcounty.gov</p>
My Brother's Keeper	<p>The Capital Youth Empowerment Program and Edu-Futuro are serving as co-leads on this effort. They are currently reviewing MBK materials and establishing a small steering committee. They will be identifying key priorities and reaching out – including to many SCYPT members and organizations – to be involved in refining the priorities and developing the set of recommendations.</p> <p>Staff contact: Jesse Ellis, NCS, jesse.ellis@fairfaxcounty.gov</p>
Career Readiness	<p>Staff from FCPS and the Department of Families Services are serving as co-leads on this effort. A small steering committee is working to develop a draft set of goals. They will be identifying reaching out – including to many SCYPT members and organizations – to be involved in refining the goals and developing the set of recommendations</p> <p>Staff contacts: Daniel Mekibib, DFS, daniel.mekibib@fairfaxcounty.gov; Jennifer Glaser, FCPS, JTGlaser@fcps.edu</p>