## EXPEDITING ACCESS TO MENTAL HEALTH SERVICES FOR DCF-INVOLVED INFANTS, TODDLERS AND FAMILIES.

With a goal to help DCF improve the lives of children in their care, MSPCC was awarded a grant from The Boston Foundation to develop a pilot program to improve access to high-quality, timely mental health assessments, and treatment for infants and young children entering the DCF system. The goals of this pilot are to improve placement stability, school readiness and success, and emotional and mental health outcomes, and to reduce the number of times that children are returned to care.

MSPCC has partnered with DCF, the Massachusetts Association for Infant Mental Health, Massachusetts Head Start Association, the Home for Little Wanderers, and Massachusetts Alliance for Families, to develop a system for prioritizing delivery of evidence-based, trauma-focused screening, assessment, and interventions to infants and toddlers who are involved with DCF.

To achieve this goal, the team has been working to develop a model that will be piloted in the greater Boston area, working with children in DCF care through the Park Street office. MSPCC's mental health consultation staff will engage the caregiver and administer assessments and initiate appropriate care, including services for biological parents and foster parents, as appropriate, and gather data to inform the evaluation of the model. DCF staff has already begun screening the current caseload for potential participants, and MSPCC/Eliot will be delivering DCF staff training on March 20. MSPCC/Eliot clinicians are prepared to begin both group services and one-on-one support services with caregivers under the pilot model during the first week of April.

At the end of the pilot, we hope and expect to see trends indicating the efficacy of the approach to inform future service delivery.



## BACKGROUND

As of December 2017, there were more than 47,000 children involved with Massachusetts Department of Children and Families (DCF). These children, approximately 20% under the age of 3, have experienced abuse or neglect and, most often, lived in challenging family circumstances with parents struggling with addiction and mental health issues.



While the program is in development and pilot phases, MSPCC and its partners continue to advocate with state agencies, policy makers, providers and their constituencies to educate them about the goals and impacts of the pilot. Through education and engagement we seek to build support for sustaining the model in the Boston area, and for the advancement of strategies for statewide adoption.

