



Foundations for Success

*Improving early childhood mental health
to support successful families and communities in Ramsey County*

Overview of mental health services for young children in Ramsey County May 2006

Foundations for Success is a five-year initiative designed to develop and implement a county-wide system for early childhood mental health services in Ramsey County. Funded by the John S. and James L. Knight Foundation and coordinated by the Community Action Partnership of Ramsey and Washington Counties, the initiative promotes culturally competent and family friendly services. Services are developed and implemented by a collaboration of more than 100 community agencies, representing local foundations, government, parents, school districts, health, mental health, early childhood professionals, and the University of Minnesota.

In the fall of 2005, Wilder Research invited 42 representatives from mental health agencies in Ramsey County to complete an online inventory of available services for children and their families. Due to a low initial response rate to the online survey, Wilder Research staff made follow-up calls to agencies early in 2006. In total, 28 respondents completed the survey, for an overall response rate of 67 percent.

This report summarizes the mental health services currently available to children in Ramsey County as reported by these 28 agencies. As such, the data do not represent all early childhood mental health providers in the county. In addition to this brief report, Wilder Research will also use the data to create a directory of mental health services available to children aged birth to five years. The directory will be distributed to service providers, school and child care staff, primary care physicians, and others to guide them in making referrals for services.

Services provided by Ramsey County providers

- The most common services available for children in Ramsey County are outpatient services (n=18), mental health referrals (n=17), family/community support (n=16), and parenting support (n=16). Some agencies offer case management, psychiatric consultation, day treatment, domestic violence services, crisis services, and therapeutic classrooms. None of the agencies offer inpatient services to children.
- The ages of children served varied considerably among agencies, ranging from birth to 18 years.
- In terms of program capacity, mental health referral providers (n=10) served an average of 146 youth, while family/community support providers (n=11) served an average of 116 youth. The remaining agencies served between 35 and 99 youth each.
- Agencies were most likely to offer culturally-specific services in the areas of mental health referrals (n=14), outpatient services (n=10), and family/community support services (n=10). Fewer agencies offered culturally-specific parenting support, in-home counseling, case management, psychiatric consultation, crisis services, and domestic violence services. No agency provided culturally-specific therapeutic classrooms, day treatment services, or inpatient services. Eleven agencies do not provide any culturally-specific services.

Profile of clinical staff at Ramsey County mental health agencies

- About half of the agencies (52%) have between one and five clinical staff (FTEs) who work with children. Approximately one-third (37%) have between six and 20 FTEs, and 11 percent report 21 FTEs or more.
- About half of the agencies (48%) employ clinical staff fluent in languages other than English. The most common other languages are Spanish (n=10) and Hmong (n=6). One or two agencies employed staff fluent in American Sign Language, Bulgarian, Chinese, French, Japanese, Liberian, and Tibetan.
- Sixty-four percent of the agencies (n=18) reported that “all” of their staff have specific training to provide mental health services to children, while 32 percent (n=9) said “some” have this training. Only one agency reported that “none” of their staff have this training.
- In contrast, only one third of the agencies (32%) said that “all” of their staff have specific training to provide mental health services to children aged birth to 5 years, while half (50%) said “some.” Eighteen percent said “none” of their staff have received this specific training.
- Specific training to provide mental health services to children was most often obtained through professional experience (83%), workshops, trainings, and in-services (74%), and degree programs (65%). Less common sources included coursework (44%), independent studies (22%), and certificate programs, expert consultations, internships, and professional supervision in work settings (4% each).

Waiting lists

- Approximately one-third of the agencies (36%) generally have a waiting list for children.
- Of those agencies, most (70%) had waiting lists that averaged fewer than 15 days.
- On average, spent 25 days on waiting lists. However, this average is inflated by one agency that reported a waiting list period of 120 days.

Funding sources and free services

- Most agencies accept the following types of insurance: Straight MA (86%), UCARE (82%), Blue Cross/Blue Shield (79%), Medica (75%), HealthPartners (68%), and MHP (57%). Other types of insurance accepted by some agencies include Preferred One, BHP, TriCare, CIGNA, CorpHealth, EAPs, Magellan, and Medicare.
- Almost half of the agencies (46%) provide free services to the community. The most common services provided free of charge are parenting support (58%), mental health referrals (42%), family/community support (42%), and case management (25%). A wide range of other free services were provided occasionally.
- One respondent reported that service costs are negotiated on a case-by-case basis, and are occasionally provided pro-bono.

Geographic restrictions of agencies

- More than half of the service providers (57%) have geographic restrictions in terms of whom they serve. Most agencies focused on serving Saint Paul, Ramsey County, and/or East Metro residents.

For more information

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MAY 2006