Mississippi Transitional Outreach Project (MTOP)

- In 2009, The Mississippi Department of Mental Health, Division of Children and Youth Services received its 3rd System of Care grant, Mississippi Transitional Outreach Project (MTOP) through funding from Substance Abuse and Mental Health Services Administration (SAMHSA). The project's goals include:
  - Expanding community capacity to serve at-risk transition aged youth and young adults
  - Build on the implementation, evaluation, and sustainability of a system of care for these youth and young adults; and
  - Promoting services that are youth guided and family driven.

NFusion – Service Delivery

- MTOP contracts the service delivery component of the Cooperative agreement to Community Mental Health Centers. These providers implement local service delivery and referrals at sites called NFusion - “fusing the system of care principles into the community.”
- The NFusion concept is an innovative approach creating a single point of entry for services and referrals for individuals between the ages of 14 – 21 with a current diagnosis of a Serious Emotional Disturbance, in need of services or received services from 2 or more child serving agencies and resides in NFusion’s catchment area.

We All Share Common Goals

- Children and youth to be in safe and stable homes in their communities with their families.
- Want to meet the youth and families where they are as they work through their challenges
- Understand the prevalence of trauma in those receiving services from our agencies
- Understand the impact of trauma on a child’s behavior, development, relationships, and survival strategies
- Incorporate that understanding into how services are provided to our youth and families.

NFusion 4 – Alcorn, Tippah, Prentiss Counties
NFusion 7 – Oktibbeha & Winston Counties
NFusion 10 – Lauderdale County
NFusion XPand - Newton County (2013)
NFusion XPand - Neshoba County (2014)
Considering the research on youth overlapping systems, it is critical that we coordinate our training efforts to meet the needs of our youth and provide trauma informed approaches with our partners.

Key Terms

- **Trauma**: Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual's functioning and physical, social, emotional, or spiritual well-being.

- **Trauma Informed Care**: an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma. A program, organization, or system that is trauma-informed:
  - Realizes the widespread impact of trauma and understands potential paths for recovery;
  - Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
  - Responds by fully integrating knowledge about trauma into policies, procedures, and practices; and
  - Seeks to actively resist re-traumatization.

Adverse Childhood Experiences (ACE)

- One of the largest investigations ever conducted to assess associations between childhood maltreatment and later-life health and well-being.
- Some of nation’s worst health and social problems can arise as a consequence of adverse childhood experiences

SAMHSA’s Six Key Principles of a Trauma-Informed Approach

- Safety
- Trustworthiness and Transparency
- Peer support
- Collaboration and mutuality
- Empowerment, voice and choice
- Cultural, Historical, and Gender Issues

Mississippi Learning Sessions

- Over 2,600 participants were trained and connected to the MS System of Care
- Over 20 learning sessions were held, comprising a mix of small workgroups (e.g., 11 participants) and large workshops (e.g., 348 participants)
- Included keynote and breakout sessions at state conferences (e.g., System of Care, Corrections, Child Welfare, Juvenile Justice, Addiction, Drug Court, Education)

Mississippi Learning Sessions

- In our 1st 12 - 16 months of providing learning sessions, the same 4 learning objectives were used – “Becoming Trauma Informed 101”
- Personal Story of Recovery – Family member or young adult from one of our NFusion sites, Peer Support Specialist or viewing of the “Healing Neen” video
- No charge for Learning Sessions and Continuing Education Hours Offered free to participants
1. Identify four strategies to reduce the likelihood of re-traumatization

2. Ability to discuss a minimum of two ways trauma affects people developmentally, psychologically and physiologically

3. Ability to describe trauma-informed care and identify principles/behaviors of those with trauma histories

4. Ability to identify treatment strategies and approaches consistent with trauma-informed care

“Healing Neen” Video

- Neen’s story illustrates the consequences of untreated trauma and the effect it has on individuals and society at-large, including mental health problems, addiction, homelessness and incarceration, ACE study and prevalence of trauma discussed in video.

- Order: www.healingneen.com

- Facilitator’s Discussion Guide: Cheryl Sharp – cheryls@thenationalcouncil.org

Comments from Participants

- “I learned how important screening is to help clients deal with traumatic issues.”
- “Making sure we all look at the whole person, no one should stigmatize mental health...find the trauma to understand behavior better.”
- “Learning how to identify triggers and how to treat.”
- “Becoming trauma informed, at some level, is needed in all services. Also, it is an ongoing learning experience to become more & more trauma informed.”

Lesson Learned

When providing In-Services and Staff Development at Agencies, be sure to have the Executive Director or someone in a decision making role involved in the training.

Did You Know?

The National Center for Trauma Informed Care offer Technical Assistance on Trauma Informed Implementation?

Trauma and the Brain

- Trauma, Senses and Recovery
- Emotional Brain
- Brain Plasticity
- Neurobiological Response System
- Survival vs. Learning Brain
The Culture of Trauma

- Multigenerational/Intergenerational/ Historical trauma
- Racism, prejudice, discrimination, and health disparities in ethnic minority communities.
- Prevalence of Trauma and social consequences among minority youth
- School to Prison Pipeline data
- Community Violence

The Cycle of Violence and Trauma

- Acute Stress/PTSD
- Set Weapons
- Self-Medicate
- Adverse Childhood Experiences
- Retaliation or No Injury
- Youth shot, stabbed, or Assaulted

Lesson Learned

When discussing Community Violence as it relates to trauma, be prepared to have the “real” conversation about race and culture

Evidence Based Practices

Did You Know?

In direct response to the needs from Hurricane Katrina, Mississippi was the 1st State to have a Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) state level Learning Collaborative coming out of National Child Traumatic Stress Network (NCTSN)
Learning Collaboratives and Federal Grants

- TRY - Trauma Recovery for Youth (Catholic Charities) funded by NCTSN (2003-2011)
- Hurricane Katrina Related Garrett Lee Smith Memorial Grant (2006-2009)
- TIDES - Trauma Informed Disaster and Evidence-Based Services (GCMHC) funded by NCTSN from 2008-2012
- CommUNITY Cares – MS 2nd System of Care Grant, 2006 – 2012
- MTOP – MS 3rd System of Care Grant, 2009-2015

Lesson Learned

Earlier Collaboratives were not successful because of the lack of buy-in from upper management - “unclear” or “misunderstanding” of the amount of time and dedication needed from participants to successfully complete Collaboratives.

MYPAC and Wraparound

- Mississippi Youth Programs Around the Clock (MYPAC) – Medicaid Demonstration Waiver (CMS)
- Contracted with The University of Maryland, School of Social Work in 2010 for Wraparound Implementation
- Transitioning contractual services for sustainability to the Center of Excellence at the University of Southern Mississippi. Currently, MS has 10 individuals in the certified coaching process and of that 10, there are 6 who are also working towards being a nationally certified trainer.

MYPAC and Wraparound

- All Wraparound trainings in MS were open to all Children and Youth Providers’ frontline staff, family advocacy groups and other key stakeholders.
- Since 2010, over 1100 participants trained
  - Introduction to Wraparound
  - Engagement in the Wraparound Process
  - Intermediate Wraparound Training
  - Supervisor or Advanced training

Lesson Learned

Despite the number of the Wraparound Training, many providers were not providing wraparound services due to low reimbursement rates and challenges on how to move forward internally to make “shift”
Department of Mental Health, NFusion X site and East MS State Hospital/Bradley Sanders Adolescent Complex (Psychiatric Hospital)

- Consisted of Webinars, Consultation Conference Calls and Face-to-Face meetings

6 Domains and Performance Standards:
- Early screening and comprehensive Assessment of Trauma
- Consumer Driven Care and Services
- Trauma Informed, Educated and Responsive Workforce
- Trauma Informed, Evidence-Based and Emerging Practices
- Create Safe and Secure Environment
- Engage in Community Outreach and Partnership Building

**Highlights of Learning Community Participation**

- Implemented the North Shore – Long Island Jewish History Checklist in May 2013.
- Staff Education and Training
- Revisiting policies for Alternative to Restraints and Seclusions, PRN Medications, and Staff Incidents involving patients
- 4 staff members enrolled in TF-CBT Learning Collaboratives
- Blueprint for other psychiatric hospitals

**Lessons Learned during participation in Learning Community**

- Traditionally, State Hospitals services are not consumer driven. Our state system is now shifting to a Recovery and Resiliency-Oriented system of care. Peer Support and Trauma are vital components.
- State Hospitals have a long history of working in silos with limited community involvement

**Peer Support Specialist Services and Trauma Informed Care**

- 9 CPSS Trainings since 2010
- 155 individuals and/or family members participated in Certified Peer Support Specialist trainings
- Trauma Informed Care included in Certified Peer Support Specialist trainings but also in continuing educations requirements
- “Trauma-Informed Recovery - A process of hope and Empowerment”

**Did You Know?**

Your state/agency can request Technical Assistance through the National Technical Assistance Center for Peer Support Specialist Training and Whole Health Action Management (WHAM) trainings?

**Mental Health First Aid (MHFA)**

- In May 2013, using some of the funds from the Deepwater Horizon oil spill, the MS Department of Mental Health sponsored Mental Health First Aid Train-the-Trainers for 50 participants
- From May 2013 – May 2014, there have been 107 MHFA trainings with over 1700 participants trained in MHFA
MS Department of Mental Health Operational Standards, effective 11/1/2013

• Intake Assessment forms revised to include section on Trauma. This is in addition to completing a Trauma Screening for all new Intake Assessments

“Learn from our Lessons Learned”

“Trauma: The Silent Storm that Impacts us ALL”

Contact Us

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