

# 6 Mental Health Support

The mental healthcare system is complex and can be confusing to understand and navigate. If you think that your child may have a mental health issue, you will need to become familiar with some new types of mental healthcare providers, programs, and services. In order to get the best care for your child, it will be helpful to understand who you will be working with, what they do, and how they can work together.

The purpose of this section is to help you understand how to navigate the mental healthcare system in Rhode Island in order to get the best available care for your child. This section describes some of the key people and organizations that may be a part of your child's treatment, while also helping you figure out whom you should contact when you have concerns about your child.

# You and Your Support Team

**The best advocate for your child is YOU—a parent knows his or her child better than anyone else and knows what he or she needs to succeed.**

As a parent, you are in charge of your child's care. Your child is dependent on you for everything that he or she needs. Being your child's number one advocate is the most important job you have and can truly make a difference in how successful your child will be. Dealing with a mental health issue is difficult, and the more support that a child has, the more likely he or she will be successful at managing it.

## BEING AN ADVOCATE

Parenting a child with a mental health issue can be incredibly challenging at times. Depending on the issue, your child may need regular psychotherapy, medication, and an incredible amount of support from family and friends. Parenting a child with a mental health issue means you are in charge of finding the appropriate services for your child, coordinating them, and monitoring their effectiveness. This guide can help you find your way through the mental healthcare system and offer tips and suggestions on where to start and who to contact, but it is up to you to make sure your child gets what he or she needs out of the system. Finding good care for your child and watching him or her succeed can be very rewarding. You and your child both deserve that feeling!

### TIP

Talk with other parents to discuss strategies, common problems, and what kinds of solutions have worked. Many parents have received the best advice from other parents.



## **BUILDING YOUR CHILD'S SUPPORT TEAM**

Building a support team is a great way to offer your child the support and encouragement that he or she needs. A support team is a network of people that care about your child and can include family members, family friends, teachers, your child's pediatrician, your child's mental health specialists, and other members of the community. A support team can also help you—as a parent and an advocate. Here are a few suggestions to begin building yours:

- Decide how much information you are willing to share with others about your child's mental health issue. If your child is old enough to participate in this decision, ask for his or her opinion. Explaining aspects of your child's mental health issue may require sharing personal information about your child and your family. You, your child, and your family need to decide how comfortable you are talking about these details with specific people.
- Make a list of people who you think should be a part of your team. What would make each person a good advocate for your child? Do they have skills or access to resources that would be useful? Do they have time and interest in being a part of your team? Talk to them about what role would be the best fit for them.
- When you build your team, talk to each person about respecting the confidentiality and privacy of your child. You may be comfortable sharing some details of your child's mental health issue with them, but you may not want them to share those details with other people.
- Create open lines of communication with people on your team. Even if you have decided to limit the amount of information you share, try to talk regularly to your team about the things you have decided to share. Communication about the needs of your child, yourself, and your team will help you get the most out of your team without causing harm or undue stress to anyone.
- Share the responsibilities of supporting and advocating for your child. Each team member brings his or her individual expertise to the table, as well as his or her unique relationship with your child. Different perspectives can be very helpful.



**It is important to protect your child's privacy about his or her mental health. Yet, at the same time you need to share important information with teachers, family members, and members of your support team. Stigma is created by secrecy, so be as open and as matter of fact as possible. When sharing information with schools, it is often helpful to have your child's pediatrician or mental health specialist write a letter to provide specific information as needed.**

## Talking to your employer

Discussing the medical needs of your child with your employer can help to open lines of communication about what your expectations are in terms of flexibility.

- How much should you disclose about your child's mental health issue? Ask yourself how comfortable you are with your manager and how much you trust him or her.
- Find out if your company has an employee assistance or employee health office. The employee health nurse can provide confidential advice to employees about health issues.
  - Ask if employees are covered under the federal Family Medical Leave Act (FMLA). Under FMLA, certain employers must grant eligible employees a limited amount of unpaid leave for such issues as taking care of an immediate family member with a serious health condition. If you are covered, then a representative from human resources should discuss rights and options under FMLA with you. By law, companies have to explain FMLA.



## TIP

Don't forget--you need to keep yourself as healthy and as happy as possible to help your child. This means getting enough sleep, exercising, and having some fun. Find ways to give yourself a break, even if it's a five-minute period of meditation or lighting a candle and taking a bath. Also, remember to make time for your relationship with your significant other.

## ADVOCACY ORGANIZATIONS

Advocacy organizations

teach parents and families how to advocate for the education, health, and socio-economic well-being of their children and families. For more information on any of these organizations, turn to **ADDITIONAL RESOURCES (p165)**.

- **ADVOCATES IN ACTION:** This statewide self-advocacy group offers leadership training and self-advocacy materials.
- **OFFICE OF THE CHILD ADVOCATE:** This is a legal office that advocates for particular children whose legal, civil and special rights in the Department of Children, Youth, and Families system and/or Family Court proceedings are not being met.
- **OFFICE OF THE MENTAL HEALTH ADVOCATE:** This independent statewide advocacy agency provides legal, investigative, and advocacy services to patients in psychiatric hospitals, residents of mental health group homes, clients of mental health centers, patients in forensic units, and persons receiving substance abuse treatment.
- **PARENT SUPPORT NETWORK OF RHODE ISLAND (PSN):** PSN is an organization that provides one-on-one technical assistance around education, mental health, the child welfare system, juvenile justice, and substance abuse. In addition, the organization runs a hotline, support groups, and training classes.
- **RHODE ISLAND DISABILITY LAW CENTER:** This center provides free legal assistance for individuals and families of children with disabilities. Services include individual representation to protect rights or secure benefits and services, self-help information, educational programs, and administrative and legal advocacy.
- **RHODE ISLAND PARENT INFORMATION NETWORK (RIPIN):** RIPIN works with families to inform, educate, support, and empower them. RIPIN offers eleven programs and services to Rhode Island families with children, including families of children with special needs. RIPIN also has a call-in resource center.

## *Parents' bill of rights*

- I HAVE THE RIGHT...** to take care of myself. This is not an act of selfishness. It will give me the capability of taking better care of my child.
- I HAVE THE RIGHT...** to seek help from others. I recognize the limits of my own endurance and strength.
- I HAVE THE RIGHT...** to maintain facets of my own life that do not include my child, just as I would if he or she were healthy. I know that I do everything that I reasonably can for my child, and I have the right to do some things just for myself.
- I HAVE THE RIGHT...** to get angry, be depressed, and express other difficult feelings occasionally.
- I HAVE THE RIGHT...** to reject any attempts by my child, conscious or unconscious, to manipulate me through guilt or depression.
- I HAVE THE RIGHT...** to receive consideration, affection, forgiveness, and acceptance from my child for what I do, for as long as I offer these qualities in return.
- I HAVE THE RIGHT...** to take pride in what I am accomplishing and to applaud the courage it has sometimes taken me to meet the needs of my child.
- I HAVE THE RIGHT...** to protect my individuality and my right to make a life for myself that will sustain me in the time when my child no longer needs my full-time help.
- I HAVE THE RIGHT...** to expect and demand that as new strides are made in finding resources to aid children with mental health issues in our country, similar strides will be made towards aiding and supporting caregivers.



# Mental Health Specialists

Mental health specialists can provide the mental healthcare for your child. They are trained specifically in diagnosing and treating mental health issues and can provide care on an ongoing basis.

## TYPES OF PROFESSIONALS

There are several types of mental health specialists. They receive different levels of training and provide various services based on their training and professional focus.

- **ADVANCED PRACTICE REGISTERED NURSE (APRN):** APRNs are licensed registered nurses and have a master's or doctoral degree in nursing. Some APRNs specialize in psychiatry or mental health and can offer evaluations and psychotherapy for mental health issues. Some APRNs can prescribe medications and others cannot. There are a variety of types of APRNs, including Clinical Nurse Specialists (CNSs) and Psychiatric Nurse Practitioners (PNPs). While some APRNs may go by these more specific titles, others only use APRN as a title.
- **CHILD AND ADOLESCENT PSYCHIATRIST:** Psychiatrists are medical doctors (MD or DO) with specialized training in diagnosing, treating, and preventing mental illnesses. They receive certification through medical school and residency training. Psychiatrists can evaluate a person for a mental illness, provide different types of treatments (including psychotherapy), and prescribe medications. Child and adolescent psychiatrists receive additional training to focus on evaluating and treating children. If you are looking for a child and adolescent psychiatrist, make sure they are "board eligible" or "board certified" as a child and adolescent psychiatrist.
- **DEVELOPMENTAL BEHAVIORAL PEDIATRICIAN:** A developmental behavioral pediatrician is a pediatrician who has additional training in all aspects of child development. They can evaluate your child's motor, social, behavioral, language, and intellectual development, as well as his or her physical health. They can help build children's coping skills and help children adjust to different stages of development.
- **LICENSED MENTAL HEALTH COUNSELOR (LMHC):** LMHCs are individuals who provide counseling. Many are social workers or psychotherapists with a master's degree. They offer counseling

## TIP

Check your provider's credentials carefully and see if they are appropriately licensed and certified in your state. When selecting a psychiatrist, always ask if he or she is "board eligible" or "board certified" in child and adolescent psychiatry. Also ask if his or her training included working with children and if he or she has experience working with your child's particular mental health issue.

for a variety of mental health issues, and some focus on particular issues, such as anxiety, sexual or physical abuse, or depression.

- **NEUROLOGIST:** Neurologists are medical doctors (MD or DO) who specialize in the diagnosis and treatment of disorders of the nervous system (brain, spinal cord, and nerves throughout the body).
- **NEUROPSYCHOLOGIST:** Neuropsychologists are psychologists who have additional training in neuropsychology. They focus on evaluating and treating weaknesses of brain functioning.
- **PSYCHOLOGIST:** Psychologists are trained in psychology, which is the scientific study of the mind and human behavior. Psychologists have a doctoral degree: a PsyD, PhD, or EdD. The type of degree they have depends on the type of doctoral program they completed and the amount of time they focused on clinical practice (treating patients) versus research. They can also be certified by professional organizations. They can evaluate a child for a mental illness and provide psychotherapy and trainings. Psychologists cannot prescribe medications.
- **PSYCHOTHERAPIST:** Psychotherapists (also called therapists) provide psychotherapy. They usually have a master's or doctoral degree and become certified to practice psychotherapy by taking an exam. Psychotherapists include APRNs, LMHCs, psychiatrists, psychologists, and social workers. Psychotherapists can evaluate and treat mental health issues by working with individuals, families, or groups. They sometimes focus on specific issues such as depression, anxiety, eating disorders, grief, or family conflicts. Psychotherapists cannot prescribe medications.
- **SOCIAL WORKER:** Social workers provide treatment for mental health issues and social problems. Most have a master's degree (MSW). Licensed Independent Clinical Social Workers (LICSWs) and Licensed Clinical Social Workers (LCSWs) are social workers who receive a license from the state to provide mental health counseling or psychotherapy. While LICSWs can provide services independently, LCSWs provide services under the supervision of a LICSW. Both provide psychotherapy to individuals, families, or groups. Some social workers provide services within hospitals, the community, or the school system.

## Working with other health professionals

In addition to mental health specialists, there are many other health professionals who may work with your child. Children with mental illnesses often have other medical problems that require or could benefit from treatment from the following health professionals:

### GASTROENTEROLOGIST

A gastroenterologist is a medical doctor (MD or DO) who specializes in disorders of the digestive system, such as feeding disorders.

### NUTRITIONIST OR DIETICIAN

Nutritionists and dietitians plan food and nutrition programs and can advise parents and children on the best foods to eat for optimal nutrition, well-being, and disease prevention. They have varying levels of education, from bachelor's degrees to doctoral level degrees (PhD). Certified Nutrition Specialists (CNS) and Registered Dietitians (RD) have been certified nationally and have met certain educational, experience, and examination requirements.

### OCCUPATIONAL THERAPIST

An occupational therapist helps people improve their ability to perform day-to-day tasks in their daily living and working environments. Their treatment techniques promote health, prevent injury or disability, and sustain or restore the highest possible level of independence. An Occupational Therapist Registered (OTR) is a therapist who has graduated from an accredited educational program and passed a national certification examination. Some states have additional requirements for therapists who work in schools or early intervention programs.

### PHYSICAL THERAPIST

Physical therapists provide services to help restore function, improve mobility, relieve pain, and prevent or limit permanent physical disabilities. Physical therapists must graduate from an accredited physical therapist educational program with a master's or doctoral degree and pass a licensure exam before they can practice.

## TIP

It is possible that more than one mental health specialist will be involved in your child's treatment. When more than one provider is involved in your child's care, make sure all providers are aware of your child's different diagnoses, medications, and treatments.

Social workers sometimes work through government agencies, such as the Department of Children, Youth, and Families (DCYF). Social workers cannot prescribe medications.

- **SPEECH-LANGUAGE PATHOLOGIST:** Speech-language pathologists are also known as speech therapists. They are educated in the study of human communication, its development, and its disorders. They hold at least a master's degree and state certification/licensure in the field, as well as a certificate of clinical competency from the American Speech-Hearing-Association. They can evaluate your child's speech and language development and treat any communication problems he or she may have. They can also evaluate your child's educational setting to ensure that your child can develop language skills. Speech assistants, who have typically earned a 2-year associate's or 4-year bachelor's degree in the speech language pathology, may assist speech-language pathologists.

For more information about school mental health specialists, turn to page 119 in **MENTAL HEALTH SUPPORT**.

## EVALUATIONS

Mental health specialists usually use a specific set of tools to evaluate mental health issues. For more information about the different types of evaluations that mental health specialists can perform, turn to **MENTAL HEALTH EVALUATIONS (p39)**.

## SERVICES OFFERED

Mental health specialists can provide treatment for mental health issues. They may also work with or refer a child to other types of mental health specialists if the child needs a specific type of expertise or treatment. For more information about the different types of mental health treatments, turn to **MENTAL HEALTH TREATMENT (p147)**.

## HOW MENTAL HEALTH SPECIALISTS WORK WITHIN THE MENTAL HEALTHCARE SYSTEM

Mental health specialists will work with your child's pediatrician or other medical doctors if his or her physical health is affected by a mental health issue. They also sometimes provide services directly through hospitals, health centers, community programs, or schools. They can refer your child to other services and resources within the system. If your child receives care from more than one mental health specialist, they may work with each other in order to understand and coordinate different aspects of your child's treatment.

## LIMITATIONS

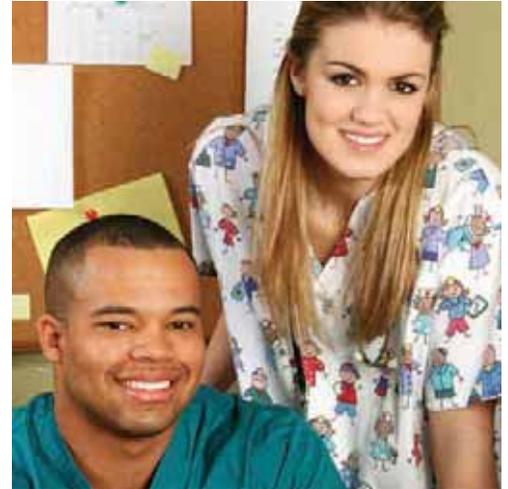
Sometimes mental health specialists focus on a specific age group, type of mental health issue, or treatment method. Find out what your child's provider's focus and methods are and talk with him or her to make sure the services they provide will meet your child's unique needs.

Mental health specialists sometimes have a limit on the number of patients they can treat at a given time. If you are referred to a mental health specialist, make sure he or she is accepting new patients at that time.

## RESOURCES

To get a referral for a mental health specialist, you can:

- Call your insurance company to see who is covered by your insurance.
- Talk to your child's pediatrician to see whom he or she recommends.
- Check out the Rhode Island Psychological Association website ([www.ripsych.org](http://www.ripsych.org)) to search for a psychologist or the American Academy of Child and Adolescent Psychiatry website ([www.aacap.org](http://www.aacap.org)) to search for a child and adolescent psychiatrist.
- Call Bradley Hospital's Early Childhood Clinical Research Center at 401-793-8731 for infant mental health referrals.
- Visit [www.RINetworkOfCare.com](http://www.RINetworkOfCare.com). For more information on this website, turn to page 198 in **ADDITIONAL RESOURCES**.
- Get a recommendation from your child's school, childcare provider, or other parents or friends.



## Confidentiality

Mental healthcare providers are required by law to keep your child's mental health confidential. However, there are some exceptions to this rule. If your child is under age 18, the provider can share some aspects of his or her treatment with you. However, the provider is unlikely to share all aspects of the treatment. Some providers prefer not to share any information about the treatment.

As a parent, you do have the right to look at your child's medical record at any time. However, keep in mind that the confidentiality clause between provider and patient is there for a reason and is often an essential part of your child's treatment (knowing that they have a safe place to talk about issues that will not be heard outside of that room).

Providers can also break confidentiality if they are concerned about risk of injury to the child or another person. In these cases, providers will notify the parents. If the parent does not respond to the situation, the provider has the right to send the child to a hospital or notify law enforcement. Providers are also required by law to report suspected cases of abuse or neglect to Department of Children, Youth, and Families (DCYF).

## *Assertiveness is... Assertiveness is not*

### **ASSERTIVENESS IS:**

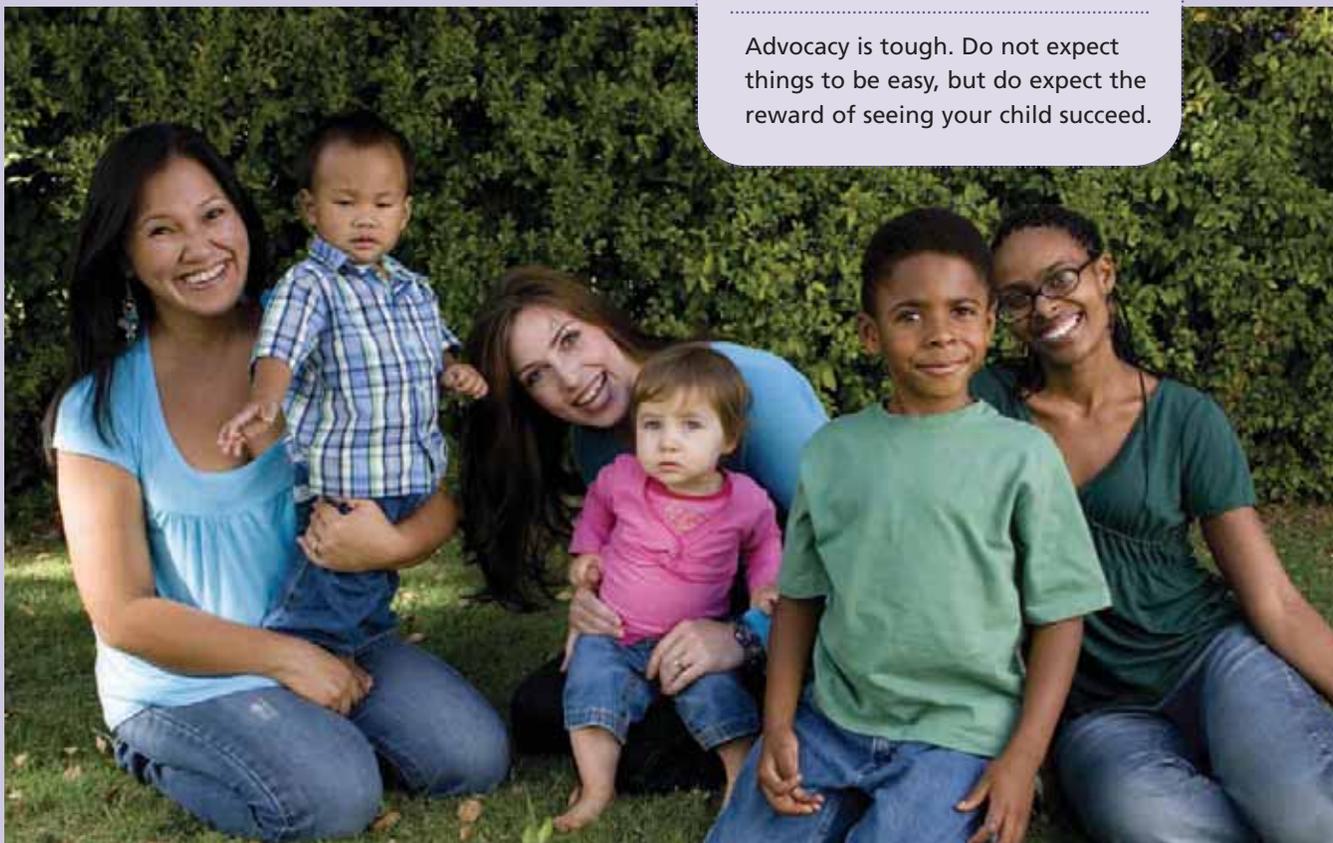
1. Stating your needs clearly and directly.
2. Stating your ideas without feeling guilty or upset.
3. Sticking up for what you believe your child needs—even though professionals may not agree.
4. Knowing your rights and how to assert them.
5. Noting what your child needs and all facts pertaining to his or her case.
6. Treating professionals like partners.
7. Effective communication.
8. Sharing your feelings of self-confidence when you communicate with others.
9. Advocating effectively on your own behalf.
10. Self-reliance and independence.
11. Sticking with it until you get all the services your child needs.
12. Studying a problem and pinpointing areas of responsibility
13. Advocating to get necessary legislation passed and getting it put into practice.
14. Organizing for change.
15. Having a positive attitude at all times.

### **ASSERTIVENESS IS NOT:**

1. Beating around the bush instead of stating your needs.
2. Feeling too guilty or afraid to express your needs.
3. Agreeing with professionals—no matter how you feel—because “professionals know what’s best.”
4. Not knowing about your rights.
5. Leaving everything to others because “they know how to do these things.”
6. Apologizing when asking for what is rightfully yours.
7. Ineffective communication.
8. Begging for what is legitimately yours by law.
9. Handing over your right to advocate on behalf of your own child to others.
10. Solely depending and counting on others.
11. Giving up when you run into “red tape.”
12. Reacting before you get all the facts.
13. Letting the politicians “take care of laws and all that political stuff.”
14. Acting “only” on your own behalf.
15. Giving in to defeat.

### **TIP**

Advocacy is tough. Do not expect things to be easy, but do expect the reward of seeing your child succeed.



# Mental Health Hospitals and Community Mental Health Centers

Mental health hospitals and community mental health centers focus on providing mental healthcare. They can provide crisis, evaluation, referral, and treatment services.

## TYPES OF PROFESSIONALS

Mental health hospitals and community mental health centers have a variety of different types of mental health specialists on staff to provide mental health services. For more information on mental health specialists, turn to page 106 in **MENTAL HEALTH SUPPORT**.

## EVALUATIONS

In a crisis situation, staff at mental health hospitals and community mental health centers will first provide emergency medical care. Once the child is physically safe and stable, mental health specialists will use tools to evaluate your child for a variety of mental health issues. For more information about the different types of evaluations, turn to **MENTAL HEALTH EVALUATIONS (p39)**.

## SERVICES OFFERED

Mental health hospitals and community mental health centers can provide a variety of different levels of services to children with mental health issues. Both mental health hospitals and community mental health centers offer emergency and crisis services.

Community mental health centers and mental health hospitals also offer outpatient services. Community mental health centers tend to focus more on office-based outpatient services with some centers offering more intensive outpatient programs. Some mental health hospitals offer office-based outpatient services and some offer more intensive outpatient programs. In addition, mental health hospitals offer inpatient services, and some offer residential services as well. Through these different levels of services, mental health hospitals and community mental health centers offer a

Although this section specifically describes mental health hospitals, certain larger medical hospitals have substantial mental health centers or departments. The information provided in this section on mental health hospitals can apply to those hospitals as well.

range of mental health treatments. For more information about the different levels of services and the different types of treatments, turn to **MENTAL HEALTH TREATMENT (p147)**.

Mental health hospitals and community mental health centers can also offer support programs, such as day care and support groups, and specific programs for particular mental illnesses.

### **HOW MENTAL HEALTH HOSPITALS AND COMMUNITY MENTAL HEALTH CENTERS WORK WITHIN THE MENTAL HEALTHCARE SYSTEM**

Mental health hospitals and community mental health centers are an important part of the mental healthcare system. They are primary providers of mental health evaluations, diagnoses, treatment, and referrals, especially in crisis situations. They may also work with your child's pediatrician, the school system, or community organizations, as necessary, to coordinate your child's care.

### **LIMITATIONS**

Mental health hospitals have a variety of mental health specialists on staff. However, they sometimes do not have enough space to

## *Medical hospitals and health centers*

Medical hospitals and health centers provide general and emergency medical care. In certain circumstances, medical hospitals and health centers may also play a role in your child's mental healthcare:

**CRISIS SITUATIONS:** A hospital or health center can be the main point of entry into the mental healthcare system in a crisis situation. For example, a case of self-injurious behaviors or extreme emotional or behavioral crisis, a parent may bring his or her child into the medical hospital to get emergency medical care or to provide a stable and safe environment. They may then do an initial evaluation by asking basic questions and noting signs and symptoms before referring the child to a mental health specialist.

**OUTPATIENT SERVICES:** Certain medical hospitals, particularly those with large mental health departments, can provide mental health outpatient services, including evaluations, referrals, and treatments. Certain medical health centers may also provide outpatient services, such as counseling and psychotherapy.

**CONSULTATION SERVICES:** In cases where a child is hospitalized for a medical condition and may have a co-existing mental health issue, a psychiatrist or psychologist on the hospital staff will evaluate the child's mental health.



provide immediate inpatient services. Community mental health centers have mental health specialists on staff, but they may not have the expertise in children's mental health and psychologists and psychiatrists may be in short supply. Community mental health centers may also be overcrowded, with long waiting lists for services.

To address these limitations, call your insurance company and ask for a care manager. A care manager will help you find the help you need in a timely manner. For more information on health insurance care managers, turn to page 144 in **MENTAL HEALTH SUPPORT**.

## RESOURCES

There are two mental health hospitals in Rhode Island:

- **BRADLEY HOSPITAL:** Bradley Hospital is a not-for-profit hospital that serves children and adolescents who have behavioral, developmental, emotional, and psychological problems.
- **BUTLER HOSPITAL:** Butler Hospital is a private, nonprofit psychiatric and substance abuse hospital for adults, adolescents, children, and seniors.

There are also several large medical hospitals that provide specialized mental health services to children:

- **HASBRO CHILDREN'S HOSPITAL:** Hasbro has professionals who specialize in child and adolescent psychiatry and is building a pediatric psychiatric emergency room. Hasbro also runs the Children's Neurodevelopment Center and offers the Frequent Flyers Program, Siblink Program, and Pediatric Partial Hospital Program.
- **MEMORIAL HOSPITAL OF RHODE ISLAND:** Memorial Hospital offers child and adolescent psychiatry and psychology services, primary care for children with special needs, and speech-language therapy. Memorial Hospital also runs the Neurodevelopmental Center.
- **WOMEN & INFANTS HOSPITAL OF RHODE ISLAND:** Women & Infants provides comprehensive care for newborns, including inpatient services, follow-up programs, and hearing assessment programs. Women & Infants Hospital runs the Infant Behavior, Cry, and Sleep Clinic and the Warm Line.

For more information on these hospitals and their programs, as well as a listing of community mental health centers, turn to **ADDITIONAL RESOURCES (p165)**.

## Coordinating your child's care

Treating a mental illness may require visiting different mental health specialists in order to get the best care. Keeping your child's medical information organized is important because it creates a paper trail and helps your child receive care that is coordinated and comprehensive. There are several items that you should bring to every appointment for your child. It may be helpful to keep these materials in a binder or a folder.

### THESE ITEMS INCLUDE:

- Copies of any prior evaluations. Never give providers the original copy of an evaluation, but let them make a copy for their records.
- List of current or past medications that have been prescribed for your child. The list should include the dates the medication was prescribed, dosages, how your child responded to the medication, and any reasons a specific medication was stopped.
- Copies of school records. These can include report cards or notes from teachers that represent your child's strengths or problem areas. It could also include any notes or reports from school that document your child's in-school behaviors (for example, how they interact with teachers or other students).
- Copies or explanations of prior treatments and a list of providers your child has seen.
- Any written or illustrated work your child has done that may show the struggle he or she is having.

## RESOURCES

Raising Children with Special Health Care Needs Complete Care Notebook  
[www.health.ri.gov/family/disability/SpecialNeedsBinder.pdf](http://www.health.ri.gov/family/disability/SpecialNeedsBinder.pdf)

## Maternal depression

Parenting during the early years of your child's life is a time of many demands and unique stresses. Even in the best of circumstances, it can be a challenging time for parents.

Adjustments usually need to be made in sleep schedules, employment, and roles. Even for experienced parents, there is the adventure of understanding the particular child's unique style, needs, vulnerabilities, and strengths. Maternal depression during this time can change an already challenging adventure into a potentially overwhelming one.

Depression can cause distress, can impair parenting, and can impact a mother's relationship with her baby and other family members.

There are 3 forms of maternal depression: baby blues, postpartum psychosis, and postpartum depression. Each one varies greatly in severity, duration, and impairment.

**BABY BLUES** is the least severe and most common type of maternal depression. Symptoms usually include episodes of crying, mood swings, and worry. Symptoms usually start within the first few days following childbirth, and may last for a few hours up to several days. Although distressing, the symptoms do not cause significant parenting problems.

**POSTPARTUM PSYCHOSIS** is a rare, yet very severe, mental illness. Symptoms include depression, along with hallucinations or delusions. These symptoms cause major problems with a new mother's ability to function. This illness usually requires that the mother be hospitalized.

**POSTPARTUM DEPRESSION** is the third type of maternal depression.

Typical signs and symptoms of postpartum depression include:

- Loss of pleasure or interest in usual activities
- Sleep and appetite changes
- Cognitive disturbances
- Loss of energy
- Recurrent thoughts of death

These symptoms co-occur for at least a two-week period of time. The symptoms cause significant distress and can impair a mother's ability to parent. These symptoms are the same as those of "regular" depression that can occur at anytime during a person's life. Depression is called postpartum depression if the symptoms begin within the first 3 months following childbirth.

Postpartum depression does not just affect the mother. It can be harmful to the baby and the entire family. Postpartum depression has been associated with problems with infant development, poor parent-child interactions, and unhealthy family functioning.



Women at-risk for postpartum depression can be identified early (even during pregnancy) by evaluating whether they have a history of depression. Past history of depression can increase a woman's risk for postpartum depression. Once identified, steps can begin immediately to prevent problems for the mother, child, and the family. Moms-to-be can get services to build parenting skills, enhance parent-child relationship quality, and reduce depressive symptoms.

If a mother develops postpartum depression, treatment can help reduce symptoms. Treatment strategies also focus on strengthening family relationships by highlighting the role of fathers and other important caregivers, promoting positive parenting, establishing healthy family routines, and empowering parental self-efficacy.

### RESOURCES

Depression After Delivery  
[www.depressionafterdelivery.com](http://www.depressionafterdelivery.com)

*Down Came the Rain:  
My Journey through  
Postpartum Depression* (1995)  
By Brooke Shields

Postpartum Support  
International  
800-944-4PPD (4773)  
[www.postpartum.net](http://www.postpartum.net)

# Early Childhood Services

Finding care for your child in early childhood is a bit different than if your child is enrolled in a public elementary school. Many parents are unaware of the services available to them and their young children and where to turn to get their children the help they need. Parents can get services for their young children from the pediatrician, school system, childcare provider, or a variety of state and community programs.

Your child's pediatrician monitors your child's development and health and can offer mental health evaluations and referrals to mental health specialists and programs. For more information, turn to **TALKING TO YOUR CHILD'S PEDIATRICIAN (p33)**.

The school system offers mental health evaluations and special education services for children, age 3 or over even if they are not yet enrolled in school. For more information on the school system, turn to page 118 in **MENTAL HEALTH SUPPORT**.

In addition to your child's pediatrician and the school system, childcare providers and various state and community programs can offer early childhood services for your child.

## TYPES OF PROFESSIONALS

In addition to pediatricians and school professionals, there are a variety of different types of professionals who can work with young children in childcare and state and community program settings.

- **CHILDCARE PROVIDERS:** Depending on the type of childcare you have, your childcare provider could be a parent like yourself or another type of professional. Childcare providers who provide care for more than 3 children in a home or center must be licensed by The Rhode Island Department of Children, Youth, and Families (DCYF).
- **STATE AND COMMUNITY PROGRAMS:** At state and community programs, the professionals will vary depending on the type of program. In particular, Early Intervention staff may include medical doctors, psychologists, psychiatrists, speech-language pathologists, physical therapists, occupational therapists, social workers, or advanced practice registered nurses, depending on the site. For more information on mental health specialists, turn to page 106 in **MENTAL HEALTH SUPPORT**.

**Under the Individuals with Disabilities Education Act (IDEA), the same rights are guaranteed to children, ages 3 to 5, as children who attend public schools. If your child is not enrolled in school because they are under age 5, the school system is still responsible for getting your child the services he or she needs.**

## TIP

Childcare providers can also be valuable partners in your child's mental healthcare. If you feel comfortable, let your childcare provider know your child's mental health issues and treatment plan. They may be able to support your efforts through their childcare program.

## EVALUATIONS

In addition to the evaluations available through your child's pediatrician and possibly the school system, there are many opportunities for your child to receive mental health and development evaluations:

- **CHILDCARE PROVIDERS:** Whether your child attends a childcare program in a family childcare home or a center-based program, many childcare providers informally evaluate your child's development. In addition, some childcare providers conduct developmental screenings for children. The childcare program will screen the child while in their care and give you results.
- **STATE AND COMMUNITY PROGRAMS:** Evaluations are offered through a variety of state agency and community-based programs. For more information on these programs, see the resources listed below.

For more information about the different types of evaluations that mental health specialists can perform, turn to **MENTAL HEALTH EVALUATIONS (p39)**.

## SERVICES OFFERED

The options for early childhood services vary depending on the child's age.

Children, birth to age 3, may be eligible to receive services through Early Intervention (EI). EI is a statewide, family-centered program that promotes the growth and development of infants and toddlers

### *Accessing Early Intervention*

Parents may call any Early Intervention (EI) site if they have concerns about their newborn, infant, or toddler. When a child is referred to EI, eligibility is determined through an EI evaluation. The purpose of the evaluation process includes not only eligibility determination, but also information gathering for planning purposes and answering family questions regarding their child's development.

A child may be eligible for EI if he or she is under age 3 and is experiencing delays in development, has certain diagnosed condition or conditions, or has circumstances that may result in significant delays in development.

After a child is determined eligible for EI, the family works with a team of professionals to design a plan called the Individualized Family Services Plan. This plan outlines the child's strengths and needs and is developed based on the result of the evaluation and the concerns of the family.

Families serve as key members of the team in the plan development to ensure that it is realistic and workable for both their child and family. The plan, once completed, will identify supports and services necessary for the child and family to meet desired goals. For a listing of EI sites, turn to page 174 in **ADDITIONAL RESOURCES**.

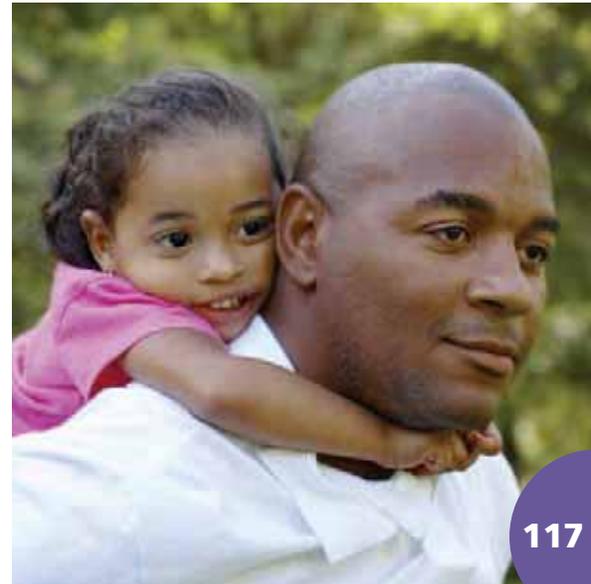
with developmental challenges. EI helps eligible children and families get the supports and services necessary to meet their goals. EI serves any eligible child regardless of ability to pay. For more information on EI, turn to page 174 in **ADDITIONAL RESOURCES**.

Children, ages 3 to 5, who have special needs, may be eligible to receive special education services through the school system, even if they are not yet enrolled in public school. Ask your local school department to help you get a referral for an evaluation for special education services. If an evaluation is conducted and your child is eligible for special education services, the school system will work with you to determine which services and/or supports will be offered, as well as how and where to provide them. Services may be provided in a child's home, childcare program, or local public school. For more information on the school system, turn to page 118 in **MENTAL HEALTH SUPPORT**.

## RESOURCES

In addition, the following state agency and community programs can provide you with information and services that you need to help care for your child. For more information on any of these programs, turn to **ADDITIONAL RESOURCES (p165)**.

- **CEDARR FAMILY CENTERS:** CEDARR stands for Comprehensive Evaluation, Diagnosis, Referral and Re-Evaluation. These centers offer families information on specific diagnoses and treatment options and can help make appropriate referrals
- **CHILD CARE SUPPORT NETWORK (CCSN):** CCSN provides health and mental health consultation to child care centers and family childcare homes throughout the state.
- **CHILD OUTREACH:** All children, ages 3 to 5, are eligible for a free Child Outreach Screening. This brief screening evaluates a child's abilities in specific areas.
- **EARLY HEAD START.** The purpose of Early Head Start and Head Start is to promote a child's readiness to learn in school. These programs provide comprehensive developmental services for low-income children, pregnant women, and their families.
- **FAMILY OUTREACH PROGRAM (FOP):** FOP assists families with young children by providing screenings and at-home visits with health professionals during days, evenings, or weekends.
- **WATCH ME GROW RHODE ISLAND:** This program works with pediatricians and childcare providers to get them to conduct developmental screenings and refer parents to services when needed.



# The School System

**Parents of children under age 3 should contact Early Intervention to seek help for their children. If your child is over age 3, even if he or she is not in school, you should contact your local school department.**

The school system is an important part of the mental healthcare system. The school system can be the main point of entry into the mental healthcare system for parents. It can be the first place that someone may notice signs and symptoms of a mental health issue in a child. It can be the place where a child receives an evaluation. It can also be a parent's source for information and referral to resources and treatment outside the school setting.

The main role of a school system is to provide your child with an education. Sometimes mental health issues can affect a child's behavior, ability to learn, and interactions with peers and adults in school. If your child has a mental health issue that is affecting his or her learning, then the school system aims to understand your child's needs and works to ensure that the school environment supports your child's learning.

School professionals may be involved in many of the steps in helping a child with a mental health issue:

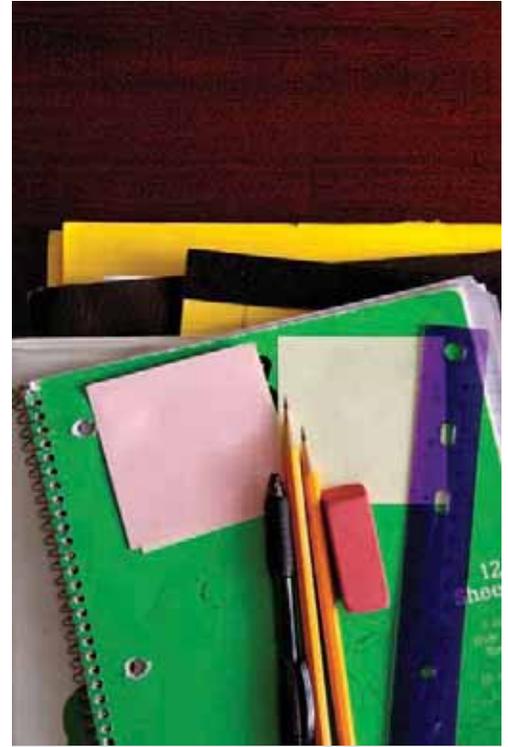
- **RECOGNITION:** School professionals may be involved in the initial recognition of any signs and symptoms of a mental health issue. Your child spends a lot of time at school, so sometimes a teacher or administrator may be the first person to recognize an issue.
- **EVALUATION:** School professionals may also be involved in the initial evaluation of your child's mental health. These evaluations are focused on your child's learning and educational needs. However, mental health issues may surface in these evaluations.
- **REFERRAL:** School professionals may be able to refer you to mental health specialists or programs outside the school system.
- **SUPPORT:** School professionals may also be able to provide on-going support and follow-up through individual meetings with your child, support groups, or school-based activities.

## TIP

Don't forget about the teacher! Remember to include your child's teacher when getting help for your child. Your child's teacher has the most direct interaction with your child of any school professional and can offer valuable insight into your child's behaviors. Your child's teacher can also connect you with other school professionals who may be able to help.

## TYPES OF PROFESSIONALS

School professionals include administrators, general education teachers, special education teachers, teachers' assistants, and school nurse teachers. Mental health specialists who work specifically for the school system include school psychologists, school counselors, or school social workers. These school mental health specialists offer various levels of support and treatment. Sometimes they will meet with a child or parent to discuss and work out emotional or behavioral issues. If they suspect that a child has a mental health issue, they generally refer him or her to a mental health specialist outside the school. They may follow up with the child in school to monitor and support his or her ongoing mental health as it relates to his or her school success.



## *School mental health specialists*

**SCHOOL SOCIAL WORKERS** are mental health specialists with a master's degree in social work. They are clinically trained, meaning they have spent a good part of their education and training working with clients. They hold a license from the Rhode Island Department of Health as either a Licensed Clinical Social Worker (LCSW) or Licensed Independent Clinical Social Worker (LICSW). They also hold a certification from the Rhode Island Department of Education. School social workers conduct evaluations and facilitate services for all students, their families, and school staff, related to a student's social, emotional, and mental health needs. School social workers are the direct link among home, school, and community services.

**SCHOOL PSYCHOLOGISTS** are educators who have post-Masters degree training in psychology, learning theory, and education. They hold a certification from the Rhode Island Department of Education and may also be certified by the National School Psychology Certification Board. School psychologists participate in the evaluation of student's eligibility for special education services, including evaluating academic skills and learning. They also evaluate learning environments, design and evaluate programs for academic and behavior management, and use evidence-based research to develop and recommend effective interventions.

**SCHOOL COUNSELORS** (formerly guidance counselors) are educators who have a Master's degree (or the substantial equivalent) in school counseling. They hold a certification from the Rhode Island Department of Education. They possess the qualifications and skills to address academic, career development, and personal needs of students. School counselors offer academic guidance and support services, including:

- organizational, study, and test-taking skills; and
- career awareness, exploration, and planning services.

School counselors work collaboratively with other school staff to help all students be successful academically, vocationally, and personally.

For more information on mental health specialists outside the school system, turn to page 106 in **MENTAL HEALTH SUPPORT**.

**Functional Behavioral Assessment is a problem-solving process for promoting positive behavior. The process looks beyond the behavior itself and tries to find specific social, emotional, environmental, or cognitive factors that contribute to the behavior. A plan is developed to address the specific problem behaviors and develop more positive, productive behaviors.**

## **EVALUATIONS**

School mental health specialists use methods similar to other mental health specialists to better understand your child's abilities and needs, to determine possible mental health issues, and to make referrals as necessary. In the schools, evaluations are used specifically to determine if a child has a disability and is in need of special education services. Schools may have their own staff conduct evaluations or, in other cases, schools may have outside consultants conduct evaluations. The following is a list of evaluations that may be performed and the type of professional responsible for performing the evaluation.

- Social Assessments and Family History: School Social Worker
- Medical Evaluation: Pediatrician
- Developmental Evaluation (children, ages 3 to 5):  
Developmental Behavioral Pediatrician
- Psychological Evaluation (also called a Cognitive Evaluation):  
School Psychologist
- Speech-Language Evaluation (also called Language and Communication Evaluation): Speech-Language Pathologist
- Educational Evaluation: Diagnostic Prescription Teacher, Special Education Teacher, or School Psychologist
- Sensory or Fine Motor Evaluation: Occupational Therapist
- Physical Development or Gross Motor Evaluation: Physical Therapist
- Adapted Physical Educational Evaluation: School Adapted Physical Education Teacher
- Functional Behavioral Assessment: School Evaluation Team or other team, including the parents, teachers, and other school professionals listed above, as needed

For more information, turn to **MENTAL HEALTH EVALUATIONS (p39)**.

### **TIP**

Think about getting an independent evaluation outside the school. These are usually more in-depth and may offer more insight into your child's health. This independent evaluation can also provide supporting documentation if a parent disagrees with the school's evaluation results or services. Check with your health insurance company first, however. Each plan has their own criteria for what costs the plan will cover for evaluations outside the school. Also, let the school know that you are having your child independently evaluated. Schools need to take the results into account, but do not necessarily have to follow the evaluation's recommendations.

## SERVICES OFFERED

The school system uses a variety of techniques to promote mental health in the classroom, as well as respond to the needs of a child with a mental health issue.

- **POSITIVE BEHAVIORAL INTERVENTIONS AND SUPPORT (PBIS):** PBIS is a model for creating effective school-wide practices that provide students with positive supports. These supports encourage positive relationships, social development, and productive behavior. For more information, visit [www.pbis.org](http://www.pbis.org).
- **RESPONSE TO INTERVENTION (RTI):** RTI is the practice of providing research-based interventions to children who are having difficulty learning in regular classrooms. Children are closely observed and their responses are charted to see if those interventions help the child meet learning expectations. When an intervention does not work, the intervention is adjusted or changed. The child's progress is then again carefully observed and charted. In cases where a child does not make progress, an evaluation may be used to see if the child has a learning disorder. The information gathered during the RTI process offers a new approach to evaluating learning disorders. Rather than considering a child's test scores, the evaluation team carefully considers the RTI information and what this information shows about the child's learning abilities and needs. For more information, visit [www.interventioncentral.com](http://www.interventioncentral.com) or [www.ritap.org/rti](http://www.ritap.org/rti).
- **SPECIAL EDUCATION SERVICES:** The school system is responsible for providing special education for children, ages 3 to 21, with disabilities who require special services under IDEA (Individuals with Disabilities Education Act). Special education services are education services designed to meet the child's unique learning needs in the least restrictive environment. A child's Individualized Education Plan (IEP) describes special education and related services necessary for the child to access and make progress in the general education curriculum. The amount and type of special education services a child receives depends upon the unique needs of the child and is an IEP team decision. There are a variety of different levels of special education services. For more information, visit [www.ride.ri.gov](http://www.ride.ri.gov).

## TIP

To ensure good continuity in care, ask the school to identify one school professional who will serve as the contact person for your child's mental healthcare providers outside the school.

Special education regulations in Rhode Island are currently being revised. For more information, visit [www.ride.ri.gov](http://www.ride.ri.gov)

# Accessing special education

Accessing special education services involves multiple steps. Use the outline below to navigate your way through the process.

## STEP 1: REFERRAL

A parent, healthcare provider, teacher, or other professional can make a referral for special education services for a child who may have a disability. The referral is made to a designated person or office in the school district. Although this varies from district to district, the referral is often made to the Director of Special Education or the building principal at the elementary level, or the Director of Guidance at the secondary level. (Contact the Special Education Office in your local school district to determine the designated person or office.) Once received, the referral must be forwarded to an evaluation team within 10 days.

## STEP 2: EVALUATION

Your child's evaluation team could include:

- You, the parents
- General education teachers
- Special education teachers
- A representative of the local school district
- Individuals who can determine teaching needs based on evaluation results
- Other individuals who have knowledge or expertise regarding your child

The school system has ten school days upon the receipt of the referral to hold a meeting of the evaluation team. The evaluation team meets to review the referral with you and determine if your child needs to be evaluated. The purpose of evaluation is to get more information about the child's educational needs. If needed, the team decides which evaluations should be done.

If the evaluation team decides that evaluations are not needed, the team must notify the parents in writing of its decision and the reasons for it within 10 school days. If the parent does not agree, then he or she may request mediation or a due process hearing to resolve the issue (p134). The evaluation team should also consider a referral for a 504 plan.

If the evaluation team decides that evaluations are needed, parents will be asked to sign a Consent to Evaluate form. This form gives the school system permission to evaluate the child in the areas agreed upon. The school system has 60 calendar days, including weekends and holidays, to evaluate the child, complete written reports, and meet with the parents. Upon completion of the evaluations, the evaluation team will reconvene with the family to discuss the child's evaluation results and determine if the child is eligible to receive special education services.

## TIP

Ask for information about the parent advisory committee in your local school district. The parent advisory committee is a group of parents who meet with the school department, typically with the Special Education Director, on a regular basis. The parents on the committee give their advice, input, and feedback on issues related to special education services. There is also a parent advisory committee on the state level.

Students not eligible for special education services may be provided for under Section 504 of the Rehabilitation Act of 1973. Section 504 of the Rehabilitation Act of 1973 is a broad civil rights statute that prohibits discrimination against individuals based solely upon their disability. School systems who receive federal funds are required to have a process to identify students with disabilities as defined under Section 504 and to develop 504 plans which provide reasonable accommodations for the student to access education programs or activities. For more information, contact your local school department and ask for the 504 plan coordinator.

### STEP 3: INDIVIDUALIZED EDUCATION PLAN (IEP)

Once your child is determined eligible for special education services, an IEP is developed. The IEP is a legal document. It serves as a written agreement between the school district and the parents about how to meet each of the child's needs that result from the child's disability.

The IEP is developed by an IEP team. All school professionals who are or will be involved in educating your child should be a part of the IEP team. Your child's IEP team must include:

- You, the parents
- General education teachers
- Special education teachers
- A representative of the local school district
- Individuals who can determine teaching needs based on the evaluation results
- Other individuals who have knowledge or expertise regarding your child (for example, your child's mental healthcare providers or other providers, such as a physical or occupational therapist or home-based therapy agency representative)

In addition, parents have the right to invite other individuals who they feel should be part of the IEP team.

An initial meeting is held to develop an IEP for your child (and annually after that). The date and time of the IEP meeting should be convenient for both the parents and school professionals. A notification of the meeting should be sent to everyone who is invited to the meeting. The opening of the meeting should include introductions of all participants so that everyone has a clear understanding of who the participants are and what their role is in the development of the child's program.

During the meeting, participants should:

- Create a list of the child's strengths, abilities, and interests.
- Identify the needs of the child.
- Review the specific skills the child is demonstrating in identified areas of need, based on information from current evaluations and direct and indirect observations.
- Discuss how the strengths, needs, and skills of the child relate to the general curriculum.
- Discuss how the child is currently participating in the educational program and activities (present level of functioning).
- Discuss the development skills that would follow the present level of functioning.
- Set reasonable long-term goals for skills that could be learned during a one-year time frame. If needed, write short-term objectives, as well. Short-term objectives are created when a child has impairments that significantly affect his or her ability to function day to day.
- Figure out what kinds of supplementary services and modifications the student needs to meet goals and objectives. Focus on the amount of time that the child will need from different providers to make progress.

### STEP 4: LOCATION OF SERVICES

During an initial IEP meeting, participants discuss where special education and other related services will take place. The Individuals with Disabilities Education Act (IDEA) presumes that a child will be educated in the regular education classroom in the school that the child would attend if not disabled, with the appropriate supplementary aids, services, program modifications, and supports to school staff. Before a child can be placed outside of the regular education classroom, the full range of supplementary aids and services that would facilitate the child's placement in the regular education classroom must be considered.

If the IEP team decides that a particular child cannot be educated satisfactorily in the regular education classroom, even with appropriate supplementary aids and services, that child could then be placed in a setting other than the regular education classroom. For more information on specialty schools, turn to page 195 in **ADDITIONAL RESOURCES**.

In all cases, decisions must be individually determined on the basis of each child's abilities and needs, and not solely on factors such as:

- Category of disability
- Significance of disability
- Availability of special education and other related services
- Configuration of the service delivery system
- Availability of space
- Administrative convenience

Rather, each student's IEP forms the basis for the decisions.

## HOW THE SCHOOL SYSTEM WORKS WITHIN THE MENTAL HEALTHCARE SYSTEM

The school system can work with your child's pediatrician, your child's mental health specialists, and your family to address your child's educational needs. School psychologists, school social workers, and school counselors may follow up with a child's mental health specialists to ensure that the child receives the right care and support at school. School nurses work with mental healthcare providers outside the school to follow through with a child's medication plan within the school environment.

## LIMITATIONS

Although school professionals continue to strive to better understand mental health issues, some may not have a high level of knowledge about mental health issues. Schools sometimes lack the resources to fully accommodate children with mental health

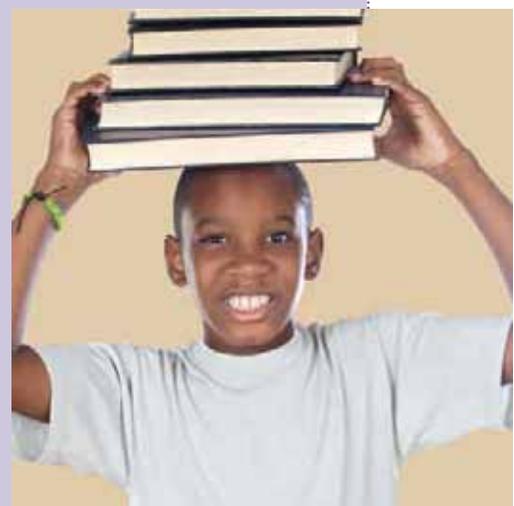
### *Procedural Safeguards*

Procedural Safeguards are parents' rights specified by state and federal law. The local school district must ensure that parents fully understand their rights in the special education system. These are often referred to as "due process" rights. Parents are entitled to a written copy of their Procedural Safeguards:

- At the very first step of the special education services referral process
- Whenever they request an evaluation
- At least once a year while their child has an IEP
- Any time that they request them
- In the event that they find it necessary to file a complaint

Procedural Safeguards must be provided in language understandable to parents. Parents are entitled to an explanation of the Procedural Safeguards, as well as any needed clarification in parents' native language.

Procedural Safeguards include ways to resolve disagreements during the referral, evaluation, or IEP team processes. At any time that parents find that they disagree with school professionals, they are encouraged to ask the school to explain their rights. For more information on parents' rights, contact an advocacy organization (p104).



issues who have special needs. Teachers and administrators also may interpret signs and symptoms of mental health issues as behavioral problems.

Families may contact school mental health specialists for assistance in advocating for the needs of their child within the school. School mental health specialists work with the family to identify additional resources both within the school and in the community so that a child's emotional, social, and academic needs are met.

## RESOURCES

For more information, contact your child's school. You can also call the Rhode Island Department of Education (RIDE) Call Center at 401-222-8999. Parents and professionals can call from 10am–1pm and get answers to questions about special education services. Advocacy organizations, such as RIPIN and PSN, can also walk you through school system services and how to access them. For a listing of advocacy organizations, turn to page 104 in **MENTAL HEALTH SUPPORT**.

**Behavioral problems may be a sign of an underlying mental health issue. If your child is constantly getting in trouble at school (for example, repeated detentions or suspensions), talk to your child's pediatrician and get a referral for a mental health specialist.**

## TIP

Put any requests for school evaluations or meetings in writing. If you choose to hand deliver the written request to the school, make sure the person who receives the request signs it with his or her name, title, and the date. Have them make you a copy of the request with that information on it. You can also send a written request in the mail. At the post office, ask for Certified Signature Request service. You will get notified when the school gets the letter. Either way, you will have a record that a request was made.



# Preparing for an Individualized Education Plan (IEP) meeting

Your child's IEP is an important component of his or her care. Parents may feel that they have little to contribute in an IEP meeting and may see themselves as "amateurs" and school staff as "professionals." But parents can and should play a vital role in writing their child's educational program. Parents ARE part of the team and parent feedback, comments, and concerns are important.

## HERE ARE SOME TIPS TO HELP YOU PREPARE FOR AND MAKE A POSITIVE CONTRIBUTION TO YOUR CHILD'S IEP MEETING:

Keep a file, binder, or notebook on your child's educational history. Items to include:

- Names, addresses, and phone numbers of persons you contact regarding your child, dates of visits and phone calls, and subjects discussed
- Copies of letters you write and receive regarding your child
- Copies of IEPs and other school records
- Copies of tests and evaluations done by the school and by outside mental health specialists

Review your child's current or last IEP and see whether goals are being met.

Gather any school or healthcare records that you are missing and that you need to prepare for the meeting. Examine the records to make sure that there are no inaccuracies.

Arrange a visit to your child's classroom and observe your child in the school setting.

Obtain a copy of your child's education rights and your rights as a parent and study them. Copies of your rights can be obtained from your child's school or an advocacy organization. You can also obtain materials on your rights from consumer and parent groups such as the Association for Retarded Citizens, Untied Cerebral Palsy, the National Society for Autistic Children and other groups. Regulations governing special education can be obtained from the Rhode Island Department of Education (RIDE) (p133).

Talk to another parent who is knowledgeable about special education and parental rights.

Attend an educational workshop at an advocacy organization to learn advocacy skills.

Write down your ideas before the IEP meeting:

- Make a list of things you observe about your child at home: activities, interests, likes and dislikes, responsibilities, and interactions with brothers and sisters. Write down any concerns you have about the way your child acts at home that can be worked on at school.
- Make a list of things you would like to see in your child's IEP. Include skills you would like to see your child learn and behaviors you would like to see improve.
- Make a list of questions you want to ask school professionals about your child's educational program.



## TIP

For more information on writing IEPs, log onto the Rhode Island Technical Assistance Project website at [www.ritap.org](http://www.ritap.org) and click on the Rhode Island IEP Network. Look at their IEP guide. It takes you through an IEP, section by section.

Ask your child how he or she feels about his or her educational program. What would he or she like to learn next year? What kind of help does your child think he or she needs? Your child may be interested in something specific or have some good ideas.

Bring someone to the IEP meeting who will offer you moral support and make you feel more comfortable and confident. This person can take notes and discuss the meeting with you.

Arrive promptly. By being on time, you will demonstrate that you consider this meeting important.

You are also a professional. Dress appropriately, speak clearly, and maintain eye contact with everyone.

Stick with the issue at hand—your child's education. Do not let other issues sidetrack you. Remember you are discussing an IEP to meet your child's unique needs.

Treat everyone with respect and consideration and encourage others to do the same.

If you don't understand the language, don't be afraid to ask for an explanation.

Be flexible enough to accept minor revisions, but firm enough about the issues that you consider major. Encourage discussion of these topics.

You've known your child for a long time. If you have discovered hints that help your child learn, share them! Share your discoveries about how your child learns best.

Rather than signing the IEP at the first meeting, bring a copy home and review it. An IEP is a legally binding document, and you should treat it as such. Ask for copies of the evaluations to take home as well so you can make sure that the IEP addresses all that it needs to. Ask for a contact person's name and number. If you have any questions, call him or her, set up follow-up meetings, and get the answers to your questions. Once you feel comfortable with the IEP and any needed changes have been made, sign it, copy it, and return it to the school.

If the IEP is not working, ask for a meeting to review the IEP. You can do this at any time.

If your family moves and your child needs to change schools, make sure you give the new school and teacher a copy of your child's IEP. Some schools may take a while to send a copy of your child's records to the new school.



**The Individuals with Disabilities Education Act (IDEA 2004, PL 108-446), formerly known as PL 94-142 requires that all students with disabilities, ages 3 to 21, who are in need of special education and related services, be provided with free, appropriate public education designed to meet their unique needs.**

# State Agencies

The programs and services offered by state agencies are constantly changing and shifting. For the most up-to-date information of agencies' services and programs, visit their websites. You can also contact an advocacy organizations (p104) to get more information of the programs and services that may be available to you.

The State of Rhode Island provides services and support to families and children with mental health needs through its different state agencies: Department of Children, Youth, and Families (DCYF), Department of Education (RIDE), Department of Health (HEALTH), Department of Human Services (DHS), and Department of Mental Health, Retardation, and Hospitals (MHRH).

## TYPES OF PROFESSIONALS

The types of professionals who work at state agencies vary from agency to agency. They may include program administrators, service professionals, health and education professionals, case workers, etc.—all depending on the person's specific role within the agency.

### DCYF

#### DIVISIONS

Child Welfare  
Children's Behavioral Health and Education  
Juvenile Corrections  
Licensing

#### PROGRAMS AND SERVICES

Care Management Teams  
Child and Adolescent Services Systems program  
Children's Intensive Services  
Comprehensive Emergency Services  
Education Services  
Higher Education Grant  
Kid's Link Rhode Island  
Life Skills Program  
Outreach and Tracking  
Positive Educational Partnership  
Project Early Start  
Project Hope  
Residential Counseling Centers  
Residential Treatment  
Teen Grant  
Youth Diversionary Program

### RIDE

#### OFFICES

Special Populations

#### PROGRAMS AND SERVICES

Mediation and Due Process Services and Oversight of:

- Individualized Education Plans
- Education and Psychological Testing
- Placement in Specialty Schools
- Transition Planning

## EVALUATIONS

State agencies offer evaluations through the various programs and services that they fund on the community level.

## SERVICES OFFERED

State agencies implement and oversee legislative mandates and federal or state regulations. In addition, these agencies fund different programs and services at the state or local level.

## HOW STATE AGENCIES WORK WITHIN THE MENTAL HEALTHCARE SYSTEM

Depending on the agency and program, state agencies can work directly with pediatricians, mental health specialists, the school system, and community organizations.

## LIMITATIONS

State agencies are large and difficult to navigate. The best way to access their services is to start with the local community programs.

The information in the chart below and on the following pages explains state agency divisions, offices, services, and programs that relate to children's mental health. For a more comprehensive list of all the divisions, offices, services, or programs of the different agencies, visit their websites, which are listed at the end of each description.

### HEALTH

#### OFFICES

Special Healthcare Needs  
Family, Youth, and School Success

#### PROGRAMS AND SERVICES

Child Care Support Network  
Disability and Health Program  
Family Outreach Program  
HEALTH Information Line  
Hearing Assessment Program  
Lead Detection Program  
Parent Consultants  
ParentLink Rhode Island  
Pediatric Practice Enhancement Project  
School Based Health Centers  
Thrive  
Watch Me Grow Rhode Island  
WIC

### DHS

#### CENTERS

Child and Family Health

#### PROGRAMS AND SERVICES

CEDARR

- Home-based Therapeutic Services
- Kids Connect
- Personal Assistance Services and Support Program
- Respite for Children

Early Intervention  
Family Resource Counselors Program  
Rhode Island Medical Assistance (Medicaid)

- Fee-for-Service Medicaid
- Katie Beckett
- RiteCare
- RiteShare

Childcare Program  
Family Independence Program  
Food Stamps  
Head Start and Early Head Start

### MHRH

#### OFFICES

Developmental Disabilities

#### PROGRAMS AND SERVICES

Community Integration Programs and Services  
Community Support Program  
Emergency, Crisis Intervention, and Crisis Stabilization Services  
General Outpatient Programs and Services  
Mobile Treatment Program  
Residential Programs and Services

## Rhode Island Department of Children, Youth, And Families (DCYF)

### PROGRAMS AND SERVICES

DCYF is the state agency responsible for promoting and protecting the health, well-being, and development of children and their families. The four major divisions provided by DCYF related to children's mental health are:

- Child Welfare
- Children's Behavioral Health and Education
- Juvenile Corrections
- Licensing (for childcare, foster care, and adoption)

DCYF is known to be the state agency that is involved with child welfare and child custody issues. However, DCYF also has different programs and services that seek to promote the well-being of children (to prevent them from ever having to be placed outside the home). These programs include family-based programs, children and youth programs, and adolescent programs.

**CARE MANAGEMENT TEAMS:** Made up of DCYF staff, family members, and community partners, these teams review and evaluate children for community-based and home-based services, as well as higher levels of care and treatment (for example, residential treatment), as needed.

**CHILD AND ADOLESCENT SERVICES SYSTEMS PROGRAM (CASSP):** CASSP provides family service coordination to children who have serious emotional disorders. CASSP services are provided through local coordinating councils (LCCs), regionally located throughout the state. For more information on CASSP, turn to page 171 in **ADDITIONAL RESOURCES**.

**CHILDREN'S INTENSIVE SERVICES (CIS):** CIS is an intensive, community-based program for children, ages 2 to 18, with severe emotional problems. CIS is geared toward preventing hospital or residential placements of children. CIS is accessed through the community mental health centers. For a listing of community mental health centers, turn to page 173 in **ADDITIONAL RESOURCES**.

**COMPREHENSIVE EMERGENCY SERVICES (CES):** CES is a short-term, home-based intervention program for families in crisis. CES provides case management, counseling, and educational services. CES is designed to prevent out-of-home placement, to resolve family conflict, and improve family relations.

**EDUCATION SERVICES:** Children in the care of DCYF who are eligible for special education services, or are suspected of requiring such services, may be eligible for the appointment of an educational surrogate parent.

The way in which DCYF programs and services are being managed and delivered in the community is currently changing. For the most up-to-date information, visit [www.dcyf.ri.gov](http://www.dcyf.ri.gov).

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## DCYF continued

**HIGHER EDUCATION GRANT:** This program provides money to children in the custody of DCYF to attend Rhode Island College, the University of Rhode Island or the Community College of Rhode Island.

**KID'S LINK RHODE ISLAND:** This is a 24-hour hotline (866-429-3979) for children in emotional crisis and suffering from mental health issues. It connects parents and caregivers to all the children's services in the state and helps parents determine the best place to go for treatment. For more information, turn to page 203 in **ADDITIONAL RESOURCES**.

**LIFE SKILLS PROGRAM:** Life Skills Programs provide an individual skill assessments and group instruction in fourteen skill areas to children, age 16 or over, who reside in foster and group care.

**OUTREACH AND TRACKING:** Outreach and Tracking Programs provide community-based outreach services to children, ages 9 to 21. Services include recreational activities, individual, group, and family counseling, and linkages to educational, vocational, and rehabilitative services.

**POSITIVE EDUCATIONAL PARTNERSHIP (PEP):** PEP offers care, support, and service coordination for children, birth to age 11, who experience emotional, behavioral, or mental health challenges, and who attend participating schools and early childhood settings.

**PROJECT EARLY START:** Project Early Start is a comprehensive early intervention program for economically disadvantaged families with children, birth to age 3, who are at risk for developmental, health, and social problems. The goal of the home-based and center-based activities is to enhance parenting skills.

**PROJECT HOPE:** This voluntary program provides service coordination and transition services for children with mental health issues returning to the community from the Rhode Island Training School (RITS). Children receive intense community-based services that may include family service coordination, mentoring, job and life skills development, case management, crisis intervention, therapeutic recreational activities, and educational advocacy.

**RESIDENTIAL COUNSELING CENTERS (RCC):** RCCs provide services in graduated levels of care for children who are leaving a hospital after inpatient care. Services are provided in a community-based setting, offering short-term placement, providing acute and intensive treatment, and attempting to avoid additional hospitalizations.

## DCYF continued

**RESIDENTIAL TREATMENT:** Residential Treatment services are for seriously behaviorally disturbed children. Residential Treatment provides around the clock treatment and care with individually-tailored programs, group and family psychotherapy, special education, and recreational therapy. For more information on residential programs, turn to page 190 in **ADDITIONAL RESOURCES**.

**TEEN GRANT:** Teen Grant Program provides grants in amounts up to \$400 per year for children, age 14 or over, who reside in foster care. Grants can be used for items related to the transition to independence, including workshops, supplies and tools for vocational training programs, art supplies, sports equipment or fees, musical instruments and lessons, and other extracurricular activities.

**YOUTH DIVERSIONARY PROGRAM (YDP):** YDP is a statewide program that helps divert pre-delinquent and first time offenders from the juvenile justice system. YDP accepts referrals from the Family Court, police departments, schools, and community agencies. YDP provides family mediation services, counseling, advocacy, and recreational activities.

DCYF also runs the Rhode Island Training School (RITS). Children who are residents of RITS receive clinical, education, residential, and transition services.

For more information  
on all DCYF's programs  
and services, visit  
[www.dcyf.ri.gov](http://www.dcyf.ri.gov).



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## Rhode Island Department of Education (RIDE)

### PROGRAMS AND SERVICES

The primary mission of RIDE is to oversee public education programs in Rhode Island for children, ages 3 to 21. This mission includes providing appropriate services to advance the education of children with special needs.

RIDE's Office of Special Populations monitors a number of services that are administered by individual school districts. After a child is evaluated at his or her school, an Individualized Education Plan (IEP) may be developed. This plan may include education and psychological testing (p39), placement in specialty schools (p195), and transition planning (p143). For more information on this process, contact your child's school or turn to page 118 in **MENTAL HEALTH SUPPORT**.

RIDE regularly monitors a school district's compliance with state and federal regulations related to the education of children with disabilities. RIDE offers mediation and due process hearings in cases of disagreement. An impartial due process hearing is a formal way to resolve a dispute between you and the school system about your child's education. For example, through mediation or due process, RIDE can assist families in disputes with school districts over decisions or recommendations for special education services for their child. Parents can access these services through the Core Assessment Team. Call the Office of Special Populations at 401-222-3505.

**For more information about special education services, call the Call Center from 10am to 1pm at 401-222-8999. For more information on all RIDE's programs and services, visit [www.ride.ri.gov](http://www.ride.ri.gov).**

## Rhode Island Department of Health (HEALTH)

### PROGRAMS AND SERVICES

The primary mission of HEALTH is to prevent disease and to protect and promote the health and safety of the people of Rhode Island. HEALTH includes the following Offices that relate to children's mental health and services:

- Office of Special Healthcare Needs
- Office of Family, Youth, and School Success

The following is a description of services and programs available through the HEALTH.

**CHILD CARE SUPPORT NETWORK (CCSN):** CCSN provides health and mental health consultation to childcare centers and family childcare homes throughout the state. For more information on CCSN, turn to page 172 in **ADDITIONAL RESOURCES**.

**DISABILITY AND HEALTH PROGRAM:** This program promotes health and wellness for people with disabilities; conducts disability surveillance; monitors effective transition of healthcare from adolescence to adulthood; supports community programs that prevent secondary conditions resulting from disabilities and chronic health issues; provides professional development for practitioners working with people with disabilities; and provides practitioners with greater access to assistive technology.

**FAMILY OUTREACH PROGRAM (FOP):** FOP assists families with young children by providing screenings and at-home visits with health professionals during the day, evenings, or weekends. For more information on FOP, turn to page 176 in **ADDITIONAL RESOURCES**.

**HEALTH INFORMATION LINE:** This hotline (800-942-7434) provides answers to health-related questions or to questions about all HEALTH programs. The hotline is available to answer questions in English or Spanish. For more information on the HEALTH Information Line, turn to page 203 in **ADDITIONAL RESOURCES**.

**HEARING ASSESSMENT PROGRAM:** This program provides hearing assessments for all newborns and makes referrals when appropriate.

**LEAD DETECTION PROGRAM:** This program raises awareness about the impact of childhood lead poisoning and provides information on lead screening, lead-poisoning treatment, and lead removal from homes.

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## HEALTH continued

**PARENT CONSULTANTS:** This program provides families with the opportunity to consult with parents who have a child with special healthcare needs and have had experiences with navigating the system, advocacy, and addressing issues in the school. Parent Consultants link families with necessary community resources, assist families in accessing specialty services, and identify systems barriers to coordinated care.

**PARENTLINK RHODE ISLAND:** ParentLinkRI.org is an on-line directory of Rhode Island organizations and information that can help support parents of teens and pre-teens. For more information on ParentLink, turn to page 198 in **ADDITIONAL RESOURCES**.

**PEDIATRIC PRACTICE ENHANCEMENT PROJECT (PPEP):** This program places parent consultants within pediatric primary and specialty care practices in an effort to provide a medical home to families of children with special healthcare needs. For more information on PPEP, turn to page 187 in **ADDITIONAL RESOURCES**.

**SCHOOL BASED HEALTH CENTERS (SBHCs):** SBHCs offer a range of physical, behavioral, and oral health services to students in schools. There are 8 SBHCs in urban communities in Rhode Island.

**THRIVE:** Thrive is Rhode Island's Coordinated School Health Program. Thrive is designed to prevent serious health problems and to improve educational outcomes. Thrive helps communities and schools work together to more effectively address health issues.

**WATCH ME GROW RHODE ISLAND:** This program provides materials, training, and on-site technical assistance to pediatric primary care providers and childcare centers to increase rates of developmental screening and facilitate children's early access to developmental intervention services. For more information on Watch Me Grow Rhode Island, turn to page 197 in **ADDITIONAL RESOURCES**.

**WIC:** The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides nutritious food to supplement diets, information on healthy eating, and referrals to healthcare. WIC provides these services to income-eligible women who are pregnant, breastfeeding, or within 6 months of delivery, infants, and children, under age 5, who are at nutritional risk.

**For more information on all HEALTH's programs and services, call the HEALTH Information Line at 800-942-7434 or visit [www.health.ri.gov](http://www.health.ri.gov).**

## Rhode Island Department of Human Services (DHS)

### PROGRAMS AND SERVICES

DHS provides quality services to Rhode Islanders in need, including children, adults, families, people with disabilities, seniors, and veterans. DHS offers a broad range of programs, services, and benefits to help promote family and individual self-sufficiency and economic independence.

The Center for Child and Family Health oversees the CEDARR Services (DHS) initiative. CEDARR stands for Comprehensive Evaluation, Diagnosis, Referral and Re-Evaluation. These centers offer families information on specific diagnoses and treatment options and can help make appropriate referrals. Through CEDARR, families can access the following services and programs. For more information about CEDARR, turn to page 170 in **ADDITIONAL RESOURCES**.

**HOME-BASED THERAPEUTIC SERVICES (HBTS):** HBTS provides therapeutic services for children living at home who have Medicaid and have been diagnosed with moderate to severe physical, developmental, behavioral or emotional conditions. Services are provided in the child's home or in the community. For more information about HBTS, turn to page 179 in **ADDITIONAL RESOURCES**.

**KIDS CONNECT:** This program (formerly Therapeutic Child and Youth Care) allows children to receive therapeutic services and supports in child and youth care settings. Community agencies apply to be a certified site in order to provide services. For more information about Kids Connect, turn to page 181 in **ADDITIONAL RESOURCES**.

#### **PERSONAL ASSISTANCE SERVICES AND SUPPORT (PASS)**

**PROGRAM:** PASS is a consumer directed program that facilitates independent community living and participation in a natural and least restrictive environment. For more information about PASS, turn to page 189 in **ADDITIONAL RESOURCES**.

**RESPITE FOR CHILDREN:** Respite is for children with Medicaid who need a certain level of care. Respite is provided on a short-term basis to children unable to care for themselves. Respite gives the primary caregiver or caregivers a rest from caring for the child. Respite is designed to prevent or delay the need for institutional care.

Outside of CEDARR, DHS administers the following services and programs, as well:

**EARLY INTERVENTION (EI):** This program promotes the growth and development of children, birth to age 3, who have certain diagnosed conditions, are experiencing developmental delays, or have circumstances that are likely to result in significant developmental problems. For more information about EI, turn to page 174 in **ADDITIONAL RESOURCES**.

## DHS continued

**FAMILY RESOURCE COUNSELORS (FRC) PROGRAM:** FRCs educate families about which types of assistance they may be eligible for and can help them apply for programs. FRCs serve families statewide at no cost to the child or family. For more information about the FRC Program, turn to page 176 in **ADDITIONAL RESOURCES**.

DHS also administers the Rhode Island Medical Assistance Program, also known as Medicaid. Medicaid programs include Fee-for-Service Medicaid, Katie Beckett, RItCare, and RItShare. For more information on Medicaid and these programs, turn to **PAYING FOR MENTAL HEALTHCARE (p159)**.

Additionally, DHS provides services to support low-income families:

**CHILDCARE ASSISTANCE:** This program provides childcare assistance for working families who meet federal poverty guidelines. Subsidies are provided for the cost of care of children under age 17. Subsidies are given in the form of partial or full payments to the childcare provider of the family's choice (accredited family childcare homes, licensed childcare centers, and before and after school programs).

**FAMILY INDEPENDENCE PROGRAM (FIP):** FIP provides temporary cash assistance for families who qualify based on income, other resources, and family size. FIP helps adults assess family needs, develop a plan to find or prepare for employment, and access other available resources.

**FOOD STAMPS PROGRAM:** This program provides assistance to individuals who may be working but who are struggling financially to cover expenses.

**HEAD START AND EARLY HEAD START:** The purpose of Head Start is to promote a child's readiness to learn in school. These programs provide comprehensive developmental services for low-income children, pregnant women, and their families. For more information about Head Start of Early Head Start, turn to page 179 in **ADDITIONAL RESOURCES**.

For more information on all DHS's programs and services, visit [www.dhs.ri.gov](http://www.dhs.ri.gov).

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## Rhode Island Department of Mental Health, Retardation, and Hospitals (MHRH)

### PROGRAMS AND SERVICES

The primary mission of MHRH is to fund, plan, design, develop, administer, and coordinate a system of services for adults with specific disabilities. MHRH is responsible for providing mental health services for children once they turn 18.

Through its Developmental Disabilities Office, MHRH offers the following programs and services:

**COMMUNITY INTEGRATION PROGRAMS AND SERVICES:** These services help people with behavioral health needs improve their personal, social, and vocational competency to live successfully in the community. Services include vocational rehabilitation, psychosocial rehabilitation, supported employment, supported education, and other community based rehabilitation services.

**COMMUNITY SUPPORT PROGRAM:** This program provides case management services and supportive assistance to individuals in order to attain the goals of their behavioral health treatment plan, as well as access to medical, social, educational and other services essential to meeting basic human needs.

**EMERGENCY, CRISIS INTERVENTION, AND CRISIS STABILIZATION SERVICES:** These services are immediate and short-term behavioral healthcare interventions to individuals experiencing an emergency or crisis situation. These services continue until a crisis is stabilized or the individual is safely transferred or referred for appropriate stabilization or ongoing treatment.

**GENERAL OUTPATIENT PROGRAMS AND SERVICES:** These programs provide an array of comprehensive and coordinated services, including mental health evaluations, individual, group, and family counseling, medication management, and education services. Services vary in intensity based on the needs of the individual.

**MOBILE TREATMENT PROGRAM:** This program provides more intensive case management supportive treatment for individuals who do not seek out or refuse office-based services and for those high-risk clients at an intensive level of need. It provides a comprehensive range of rehabilitation and support interventions to persons with severe and persistent mental illness to enable them to live autonomous, safe and healthy lives in their natural community environments.

**RESIDENTIAL PROGRAMS AND SERVICES:** These programs operate 24 hours a day, 7 days per week providing services and supervision to designated populations. Services promote recovery and empowerment and enable individuals to improve or restore overall functioning.

For more information on all MHRH's programs and services, visit [www.mhrh.ri.gov](http://www.mhrh.ri.gov).



# Community & Non-Profit Organizations



There are a number of community and non-profit organizations that are available to provide mental healthcare or support for your child and for you as a parent. They include:

- **ADVOCACY ORGANIZATIONS:** The role of advocacy organizations is to provide parents with the resources, skills, tools, and other supports necessary to advocate for their child. Some advocacy organizations focus only on mental health issues, while others focus more broadly on health and developmental issues that can affect a wide range of children.
- **FOUNDATIONS:** The role of foundations is to provide support and access to resources for people who are affected by the main cause of the foundation. For example, some foundations focus on providing support for a specific diagnosis, such as Attention Deficit Hyperactivity Disorder (ADHD) or Autism Spectrum Disorder (ASD). In general, foundations are national organizations that have state or regional chapters. The Rhode Island chapters of foundations will have the best knowledge about resources and support specific to the state.
- **SUPPORT GROUPS:** The role of support groups is to provide parents and children with access to others who are in a similar situation and access to professionals who can offer additional support.

## TYPES OF PROFESSIONALS

These organizations may include a variety of professionals, such as mental health specialists, experts in mental health topics, advocacy experts, or legal professionals (lawyers or paralegals). Many of these professionals are your peers—they also have children with mental health issues.

## EVALUATIONS

Depending on the organization, certain community and non-profit organizations offer mental health evaluations. However, even if they do not offer it themselves, these organizations are usually well equipped to refer you to a wide range of mental health specialists who do provide evaluations.

## SERVICES OFFERED

Support groups are available to provide you with resources and emotional support as a parent of a child with a mental health issue. Advocacy organizations and foundations may help to promote education, awareness, and legal rights for specific mental health issues. They often provide resources for understanding mental health issues, locating mental health specialists, and understanding insurance policies. Some community organizations run intensive outpatient programs, specialty schools, or residential programs. For more information on these types of treatment programs, turn to **MENTAL HEALTH TREATMENT (p147)**.

## HOW COMMUNITY AND NON-PROFIT ORGANIZATIONS WORK WITHIN THE MENTAL HEALTHCARE SYSTEM

Community and non-profit organizations that focus on mental health stay up to date on mental health topics and issues by working closely with mental health specialists and experts. They work directly and indirectly with other organizations and professionals to maintain educational resources on mental health issues and contact information for mental health specialists.

To see how some of these organizations fit within the state system, turn to page 128 in **MENTAL HEALTH SUPPORT**.

## LIMITATIONS

Some of the programs and organizations can be difficult to locate or learn about. You may not always hear about them through pediatricians or mental health specialists. The organizations also do not always have enough funding for the types of programs or staff that are needed.

## RESOURCES

The following list is just a selection of the large number of community and non-profit organizations available to assist you. For more information on any of these programs, turn to **ADDITIONAL RESOURCES (p165)**.

- **FAMILY SERVICE AGENCIES:** These are non-profit agencies that provide counseling and social services to clients.

## TIP

Get help—don't go it alone! Parent counseling, individual psychotherapy, group psychotherapy, parent classes, and support groups are excellent sources of information and emotional support.



- **HOMESTEAD GROUP:** Homestead Group is a not-for-profit human service agency providing supports and services for people with developmental disabilities.
- **MEETING STREET:** Meeting Street helps children with special healthcare needs and their families meet the developmental challenges in their lives.
- **NATIONAL ALLIANCE ON MENTAL ILLNESS (NAMI), RHODE ISLAND CHAPTER:** NAMI is a national mental health organization, with chapters in every state, dedicated to the eradication of mental illnesses and to improving the lives of persons living with serious mental illness and their families.
- **OCEAN STATE CENTER FOR INDEPENDENT LIVING (OSCIL):** OSCIL is a community-based resource center that helps connect individuals with disabilities to services and supports in the community.
- **PAUL V. SHERLOCK CENTER ON DISABILITIES:** The Sherlock Center advances policy and practice for and with individuals with developmental and other disabilities, their families, and communities.
- **RHODE ISLAND DEVELOPMENTAL DISABILITIES COUNCIL (RIDDC):** RIDDC promotes creative ways for men, women, and children with disabilities to live more independent, fulfilling lives.
- **RHODE ISLAND TECHNICAL ASSISTANCE PROJECT (RITAP):** RITAP is a statewide resource center for technical assistance and support, professional development and training, and policy analysis and interpretation.
- **TECHACCESS OF RHODE ISLAND:** TechACCESS is a private, non-profit resource center that serves individuals with disabilities who are interested in assistive technology.

For a listing of advocacy organizations, turn to page 104 in **MENTAL HEALTH SUPPORT**.

# Transitioning to adulthood

The word “transition” means to make a change or a move from one place to another. A big transition for children happens when they are ready to leave school and enter adulthood. This transition may include attending a college, university or training program, entering the workforce, living independently, or all the above.

As a parent, it is important to plan early for this transition. This includes working together with your child to set goals and plan for:

- Healthcare needs, including mental healthcare needs
- Education beyond high school
- Work
- Moving out of home
- Participating in the community

## RESOURCES

Office of Rehabilitation Services at the Rhode Island Department of Human Services  
401-421-7005  
[www.ors.ri.gov](http://www.ors.ri.gov)

Office of Special Healthcare Needs at the Rhode Island Department of Health  
800-942-7434,  
[www.health.ri.gov/family/disability](http://www.health.ri.gov/family/disability)

Office of Special Populations at the Rhode Island Department of Education  
401-222-8999  
[www.ride.ri.gov/Special\\_Populations](http://www.ride.ri.gov/Special_Populations)

### BEGIN TRANSITION PLANNING

You should begin to plan for your child’s future by age 14. During this time it is important to work closely with your child and your child’s pediatrician, mental health specialists, and school professionals. Talk to them about your child’s options after high school. They will help you and your child create a plan that will help prepare him or her to meet long-term goals. Your child should be included in the process to the extent he or she is able.

### PLANNING FOR YOUR CHILD’S HEALTHCARE NEEDS

Planning for your child’s healthcare needs as he or she transitions to adulthood usually includes moving his or her care from a pediatrician to an adult primary care provider. Making this change can help make sure that your child continues to receive the care your child needs as he or she gets older. To get this process started:

- Talk to your child’s pediatrician. Your child’s pediatrician can refer you to an adult primary care provider and adult mental health specialists who are knowledgeable about your child’s mental health issue.
- Set up times for you and your child to meet his or her new providers and specialists. This will give everyone a chance to get to know one another before a mental healthcare issue arises.

When helping your child plan for his or her healthcare needs as an adult, it is important to think about options for proper health insurance. Depending on his or her coverage, eligibility may need to be re-evaluated at age 18.

### PLANNING FOR YOUR CHILD’S EDUCATION AFTER HIGH SCHOOL

There are many options for education after high school that your child may be interested in. Colleges, universities, and training programs may be among those your child explores. To help your child find the program that is right for him or her:

- Meet with your child’s school counselor. He or she can help you and your teen identify educational programs that may be of interest.
- Once he or she finds a program of interest, speak with someone in the program’s Office of Disability Services to find out what disability support services the program offers. Encourage your child to choose a program that provides the level of support that will best meet his or her needs. Remember to ask each program what proof of disability they require in order for your child to qualify for services.

### PLANNING FOR YOUR CHILD’S WORK

Children with mental health issues can choose from many different jobs and careers. They can choose to work with or without support. The challenge is to help your child find a job where his or her skills and interests match the needs of the employer.

**Regional Transition Centers provide assistance to students who are preparing to transition to adulthood. For more information on these centers, turn to page 190 in [ADDITIONAL RESOURCES.](#)**



## *Managing care for children with special healthcare needs*

Neighborhood Health Plan of Rhode Island offers a specialized care management program for children with special healthcare needs. Some of the benefits include:

- A care manager assigned to your family
- A comprehensive needs assessment completed within days of enrollment
- An integrated care plan including medical, behavioral health, social, and dental care services
- Assistance in understanding and adhering to provider's treatment plans
- Facilitated access to all needed healthcare services and providers
- Communication and collaboration with other healthcare providers (for example, physical therapists, occupational therapists, speech-language pathologists) and care coordinating organizations (for example, CEDARR)
- Referrals to non-healthcare related services, such as transportation services and interpreters

# Health Insurance Care Managers

Often parents only think of their child's health insurance provider as the organization to call about paying for mental healthcare. Although that is the primary role of health insurance providers, these companies also offer care management services.

Health insurance care managers can also be valuable partners in your child's treatment. In addition to explaining your insurance benefits, health insurance care managers can offer assistance with finding mental health specialists for your child, coordinating care among different healthcare providers, and offering referrals for community services. These services are voluntary. A family can self-refer or have a provider or other community agency working with the child make the referral with the permission of the parent.

## **TYPES OF PROFESSIONALS**

Health insurance care managers have expertise in health insurance issues. Many of them have mental health or medical expertise and may be social workers, licensed mental health counselors, or nurses.

## **EVALUATIONS**

Health insurance care managers can help you find a mental health specialist to evaluate your child's mental health. They will also check to see which mental health specialists and evaluations are covered by your insurance.

## **SERVICES OFFERED**

Some examples of support services that care managers can offer are:

- Help finding a mental health specialist
- Referrals to community services and family support networks
- Assistance with hospital discharge planning
- Assistance with residential treatment planning, if needed
- Communication and follow-up with pediatricians, mental health specialists, and community service providers
- Problem solving with providers to overcome barriers to accessing services

Some insurance providers have appointments reserved specifically for their members in the event of a crisis or emergency to prevent hospitalization.

## RESOURCES

The three primary insurers in Rhode Island offer care management services:

- **BLUE CROSS BLUE SHIELD OF RHODE ISLAND (BCBRI):**  
If your child's insurance provider is BCBSRI, then call BCBSRI Case Management Program at 401-459-2273 or 800-637-3718, ext. 2273 (TDD 877-232-8432 or 401-831-2202).
- **NEIGHBORHOOD HEALTH PLAN OF RHODE ISLAND (NHPRI):**  
If your child's insurance provider is NHPRI, Beacon Health Strategies is the behavioral health management company for NHPRI. For care management services, call 800-963-1001 x6681
- **UNITED HEALTH PLAN (UHP):** If your child's insurance provider is UHP, United Behavioral Health is the behavioral health management company for UHP. For care management services, call 800-888-2998.

## HOW HEALTH INSURANCE CARE MANAGERS WORK WITHIN THE MENTAL HEALTHCARE SYSTEM

Health insurance care managers can help you coordinate all the different aspects of your child's care. In particular, they can help you overcome any barriers you may come across in accessing certain services. For example, they can connect you with transportation resources if lack of transportation is getting in the way of you accessing treatment for your child.

## LIMITATIONS

Health insurance care managers are only available for those individuals who are covered by certain insurance plans. In addition, the health insurance plan that you have may limit the providers and services that are covered.

### TIP

Confirm in writing what was discussed in a phone call. This is a great way to follow-up on phone conversations.



