

# Child and Youth Subcommittee: Access and Entry Workgroup Update

**June 3, 2024**

**Members:** Andrew Weatherhill, Julie Smythe, Larry Rein, Maria Bledsoe, Shari Thomas, Susan Barbini, Susan Eby, Sylvia Quintana

# Our Purpose

The purpose of this workgroup is to develop recommendations for improving access to behavioral healthcare services for children and families.

# Our Work

Identify points of entry

Identify barriers or challenges to entry

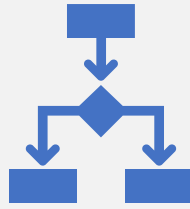
Increase access to resources and information

Explore prevention/early intervention

# Status Check-In: Where Do We Stand?



What is working in Florida, where is there additional work to do?



What are best practices, what are other states doing in this space?



What are challenges and barriers we can address and innovate around?

# Key Touchpoints for Entry

- **Schools**
- **PCP/Pediatricians/FQHC/DOH**
- **Information and referral services**
- Early Childhood programs + VPK
- After school care
- Home visiting programs
- Faith communities
- Law enforcement/Child Welfare
- Healthcare facilities
- CW/CPI/Probation
- MRT/Providers/CBO's



# Foundational Needs for Effective Front Door

- **Access** through all doors
- **Inclusivity:** cultural differences and awareness; urban vs. rural
- **Education and Training:** for families, communities, providers, systems ensure touchpoints have process, information, and relational knowledge to securely connect children and families to available resources
- **Navigation:** systemic methods to support meaningful connection
- **Stigma:** continued efforts to address
- **Move upstream:** further investment in prevention, early childhood, and dyadic approach
- **Build access and capacity** to ensure culturally accepted practices and family choice
- **Solve** for front door, then build capacity

# Our Next Steps

Navigation  
Models

Prevention

Stigma

Infant Mental  
Health and  
Early Childhood

Behavioral  
Health Parity:  
“Well Checks”

Collaborative  
Care Codes

# Digging Deeper



Build and sustain information and knowledge pipelines across and between touchpoints



Navigator Model (BBHC Pilot): Navigation to/from touchpoints to resources and services



Address knowledge silos between SDOH and mental health



Early intervention and home-visiting prevention models



Continue to address stigma related to behavioral health with consideration to highly impacted groups



How do touchpoints support and ensure secure connection to services?



Thank You