

Subject: June 2018 Resources of the Month

Dear UCCCN members,

Here are your June 2018 resources of the month.

Announcements:

Primary Children's Hospital is starting a new Feeding & Swallowing program later this year. They want to talk with patient families to get feedback, insights, and perspectives to help build and design this important new program. Patient families and **health care staff** (clinic care coordinators, care managers, insurance care managers, etc.) are welcome to attend.

July 12th, 7 – 8 pm
Lone Peak Conference Room - Level 1
Eccles Primary Children's Outpatient Services Building
81 N. Mario Capecchi Dr.
Salt Lake City, UT 84113

Brainstorming:

Case #1 – from Marilyn Howe: mom with a 7 mo old baby, ASD/VSD heart surgery pending, has talked to Help Me Grow and Integrated Services; lives in Orem, also has a 3 year old. Wants to talk to a nurse about post-operation. No luck so far.

Pat Rowe, a former PICU nurse, offered to talk with her. Pat can also refer the mom to Lauren Bishanen (sp?), a discharge nurse at Primary Children's. Jan Bowker has had luck going directly: call the surgeon's office, say you want to talk to a nurse, they will call you back.

Case #2 - from Marilyn Howe: a young man turning 18 in Aug, has ODD, bipolar, autism. Mom as caretaker is new to the job. A mental health counselor is suggesting the youth be allowed to live on his own at 18, and to take him off mom's insurance. He can't qualify for Medicaid because he has an inheritance. Has applied for Voc Rehab. Needs mental health services. Are there residential facilities for mentally disabled? Suggestions for mom include counseling, to place inheritance in a trust, and to not drop son off her health insurance.

[Independent Living Services Category](#)

[Ability First Utah](#), Provo, an Independent Living Center, provides services to individuals with disabilities including advocacy, assistive technology equipment services, independent living skills training, youth program, community integration, nursing home/institution transition, recreational activities, Ticket to Work program. [MHP 10415](#)

[Residential Treatment Facilities, Children/Adolescent Services Category](#)

[Youth Care Treatment Center](#) a licensed residential treatment center for adolescents, offers Dialectical Behavior Therapy (DBT) to teach mindfulness, distress tolerance, emotion regulation, and interpersonal effectiveness to help control reactions to triggers. Effective for youth with autism. [MHP 20709](#)

[State Institutions for Individuals with Disabilities Services Category](#)

[Utah Division of Substance Abuse & Mental Health](#) resources for children, youth, and their families. Services include: School-based Behavioral Health, Family Resource Facilitation with Wraparound to Fidelity; Mobile Crisis Teams; Suicide prevention; Supported Employment/Individual Placement and Support (IPS). [MHP 12378](#)

[Family Support Centers/Outreach Services Category](#)

[Family Resource Facilitators, Utah Family Coalition](#), family wraparound facilitation of mental health services and supports. A partnership between Allies with Families (specifically Sheila Brown), New Frontiers for Families and NAMI Utah. [MHP 23830](#)

[National Resource Center for Supported Decision-Making](#) — promoting a process to support people with disabilities in making their own decisions. [MHP 29409](#)

[Parent/Family Education Service Category](#)

[Utah Family Voices \(UFV\)](#), for referral to set up a trust. Staffed by parents of children with special health care needs, providing emotional and peer support, assisting with navigation of credible information and referrals. [MHP 10171](#)

Case #3 from Alison Lewis, a 6 year old w/ autism, multiple diagnoses, trying to get him in the [Neurobehavior HOME Program](#), on a long waitlist. Police and DCFS are recently involved.

From Gina, consider DCFS as a partner who can help. DCFS social workers have been great. They also have family facilitators, and do not want to split up the family. Use resources at DCFS until can get into the Neurobehavior HOME Program. [MHP 12921](#)

Disclaimer: These resources come from our members as part of the meeting brainstorming session; please check with your providers to make sure they are appropriate for your patient/families.

You can find a custom list of these service providers that can be printed, emailed, and more, here: [June 2018 UCCCN Resources of the Month](#)

Presenter: Andrea Hood, MS, Prevention Program Manager, UDSAMH – Suicide Prevention
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Suicide warning signs

- Isolation, withdrawal
- Sense of peace, mood change
- Giving away belongings
- Talking about suicide, being worthless,
- Saying goodbye in their own way
- Sleep changes, more alcohol or drug use
- Reckless behavior

Ask questions! Open-ended, but also ask about suicide directly. “Sometimes people in your situation have thoughts about suicide” No judgement, you are not alone. “I’m glad you told me. Thank you for being honest. I might be able to help.” Training opportunities to do the asking, talking. Assist in Ogden soon.

Legality of disclosing PHI around suicide risk ... there is a legal obligation to disclose – health neglect. Lifeline or mental health clinician. (Release of information is needed if self-harm and suicide are NOT in the picture). Chuck: exceptions to the obligation if there is sexuality, two other issues. Andrea: collaborative care is always better than coercive care.

Safety plans – medication, guns. Make sure the household has Naloxone if there are opioids that are a concern. USARA can help get Naloxone for non-clinicians.

Resources (also see the handout):

- SafeUT app
- MY3 Safety planning app
- System of Care – case management between Utah systems like Juvenile Justice, DCFS, Medicaid
- SMR – crisis response, mobile crisis
- Family Resource Facilitators – wraparound support
- School-based programs

Your role as Care Coordinators/Managers: As many as 70% of suicide attempters never attend their first outpatient appointment or maintain treatment for more than a few sessions. Be sure to follow up:

1. Ask how they are doing
2. Check to see that steps were taken to make the environment safer

3. Ask if they are using their safety plan; ask what is working and what needs to be changed
4. Ask how the referral is going
5. Educate on the purpose, benefits, and nature of treatment
6. Assist them in getting childcare, transportation, etc. if those are barriers to treatment
7. Consider sending a caring text or card to say you are thinking about the person. It could be a life-saving intervention on its own.

[Utah Support Advocates for Recovery Awareness \(USARA\)](#) Supports individuals and their families in all stages of recovery from alcohol and other drug problems. Free Naloxone (Narcan) rescue kits for support group members. [MHP 22290](#)

Two handouts are attached: Suicide and Mental Health Referral Resources, and the [Brown Stanley-Patient-Safety-Plan-Template](#) (reproducible)

Other

Our next meeting will be July 15th at Shriners Hospital for Children - Salt Lake City to learn about a new car seat clinic and take a tour. No USU sites will be utilized for the July meeting; GoToMeeting is available for the pre-tour part of the meeting.

You can find the recording of our [June 2018 UCCCN meeting](#) on the [UCCCN YouTube Channel](#).

Have a wonderful weekend!

Mindy

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