

EXCEPTIONAL NEWS

The Center for Exceptional Families

May 2016



May is National Mental Health Awareness Month.

1 in 5 Stand with those who live with mental illness

Treatment can be effective and recovery is possible!

What is Wraparound?

Wraparound is a compassionate way to assist families who have complicated needs. Wraparound team consists of professionals, friends and family who use Wraparound principals to meet the needs of the families. Wrap is for families who are involved in multiple service agencies; such as, Juvenile Justice, Child Welfare, Schools, Mental Health Agencies, etc. The Wraparound goal is to keep the child at home, in community and schools. We have a certified facilitator who provides services for the 5 surrounding counties: Clark, Garland, Hot Springs, Montgomery and Pike. A referral is requested from the child's therapist after approval, the parent/guardian signs the form to get the Wrap process started. The first Wrap meeting is scheduled at this time and allows the team to brainstorm the child's strengths and weaknesses. We like to think as ourselves as a think tank as we think outside the box to help the family move forward.

Sense-Able Kidz Therapy Services, LLC

SPY CAMP

1008 HWY 25 B, Heber Springs, AR
(next to Sears)

Join our team of spies as we uncover the plot of the evil "Oringbay Clan"

Spies will work on improving **GRASP** and **HAND-WRITING** skills while they investigate & foil their plan.

- pencil grasp
- fine motor skills
- handwriting legibility

Wednesdays 3:30 to 4:30
June 15, June 22, June 29,
July 13, July 20 & July 27
\$20 / Day

→

(501) 365-3927



MAY EVENTS

5th - National
Children's
Mental
Health
Awareness
Day

9th/10th -
Step-By-Step
Parenting

24th - Parent
Support
Meeting



**Sensory
Saturday**

May 21st

9:30am

Angry Birds

Jonesboro Malco

How are Families Involved?

May 1, 2016

It is difficult to get all the parents involved due to lack of transportation, funds, and lack of interest. However, I am pleased to see many Wrap parents attend our monthly SOC (System of Care) meeting, family events and outings that we have. We provide reminder calls to the parents, receive donations that benefit them, and encourage their participation and voice.

Mental Health in Children

Children's mental health problems are real, common, and treatable. Although one in five children has a diagnosable mental health problem, nearly two-thirds of them get little to no help.

Untreated mental health problems can disrupt children's functioning at home, school and in the community. Without treatment, children with mental health issues are at increased risk of school failure, contact with the criminal justice system dependence on social services, and even suicide.

Parents and family members are usually the first to notice if a child has problems with emotions or behavior. Your observations, along with those of teachers and other caregivers, can help determine whether you need to seek help for your child.

The following signs may indicate the need for professional help:

- Decline in school performance
- Poor grades despite strong efforts
- Constant worry or anxiety
- Repeated refusal to go to school or to take part in normal activities
- Hyperactivity or fidgeting
- Persistent nightmares
- Persistent disobedience or aggression
- Frequent temper tantrums
- Depression, sadness or irritability

Early identification, diagnosis and treatment can help children reach their full potential. If you suspect a problem or have questions, talk with your child's pediatrician or contact a mental health professional.

An evaluation may include consultation with a child psychiatrist, psychological testing and medical tests to rule out any physical condition that could be causing the symptoms. Children also must be carefully evaluated to distinguish possible mental health conditions from learning disabilities or developmental delays.

If your child is diagnosed with a mental health problem, a comprehensive treatment plan should include psychotherapy and in some cases, may include medication. The plan should be developed with the family. Whenever possible, the child should be involved in treatment decisions.

Taken from Mental Health America website.

Arkansas Wraparound Eligibility Criteria

Child/youth must meet criteria in all of six (6) categories listed below:

1. A child/youth is under the age 18 or a youth between 18 and 21, who receives behavioral health services prior to the 18th birthday and who meets the requirements below:
 2. Functional Impairment or Symptoms
Functional Impairment in **two** of the following five capacities (compared with expected developmental level):
 - Functional self-care: Impairment in self-care is manifested by a person's consistent inability to take care of personal grooming, hygiene, clothes, and meeting of nutritional needs
 - Functioning in the community: Impairment in community function is manifested by a consistent lack of age-appropriate behavioral controls, decision-making, judgment and value systems which result in potential involvement or involvement in the juvenile justice system
 - Functioning in social relationships
 - Functioning in the family
 - Functioning at school/work
3. The child/youth must have one of the following:
 - Has demonstrated a danger to self or others within the last 6 months
 - Has engaged in serious or repeated acts of destruction to property within the last 6 months
 - The individual is self-destructive such as at risk for suicide, runaway, promiscuity; or at risk for causing serious injury to others
4. The child/adolescent has a psychiatric disorder that has been diagnosed by a licensed mental health professional. These disorders are excluded unless co-occurring with another psychiatric disorder:
 - a. Autism Spectrum Disorder
 - b. Substance Use Disorder
 - c. Intellectual Disability Disorder
5. The child/youth is currently involved with two or more child-serving divisions or agencies including mental health services.
6. The child/youth meets criteria for at least two of the following six:
 - Is currently at risk for out-of-home placement in a residential facility for severe behavioral or psychiatric issues
 - Is currently inpatient in an acute psychiatric hospital or has experienced 2 or more acute psychiatric hospitalizations within the last 12 months
 - Recent (within last six months) or pending discharge from a residential facility for severe behavioral or psychiatric issues
 - A history of one or more suicide attempts within the past 12 months
 - History of significant trauma
 - Behaviors have resulted in significant *involvement* with the Juvenile Court in last 12 months