

Child/Adolescent/Family

Program Description

Team Wellness Center Children's Program offers research and evidence-based behavioral health outpatient services for children with age appropriate and personalized treatment that is culturally and linguistically appropriate. The goal of our qualified staff is to deliver psychiatric, therapeutic, case management and nursing services with a family-focused and youth-centered approach to managing adolescent mental health issues. In addition, case management services also provide school support, parenting strategies, behavioral treatment plans and foster care support for child, parent and family. TWC Children's Program encourages integrated healthcare relationships with Primary Care to impact the child's ability to thrive, be happy, healthy and successful at home, school and within the community. Parents are provided with supportive service needs through available community resources (such as food, housing, medical care, employment, transportation, education assistance and mental health/trauma treatment), with the understanding that these services promote healing the child's mental illness (trauma history) and/or substance abuse (including the impact of FASD) while restoring family dynamics.

Program Philosophy

Team Wellness Center is dedicated to enhancing the well-being of individuals by providing an array of comprehensive behavioral and physical services in an environment that promotes quality of life, continuous improvement, and social awareness. TWC Child/Adolescent and Family's Behavioral Health Program brings an array of services to children, adolescents and their families, to increase the likelihood of continuous participation in programming and continuity of care.

Program Goals

- Provide comprehensive assessments that are appropriate for the age, education, culture, and development that include:
 - Developmental history, such as developmental age factors, motor development, and functioning
 - Medical or physical health history
 - Cultural/Ethnicity
 - Treatment History
 - Speech functioning
 - Hearing functioning
 - Visual functioning
 - Immunization record
 - Learning ability
 - Intellectual functioning
 - Family relationships
 - Environmental surroundings
 - Prenatal exposure to alcohol, tobacco, or other substances (FASD-NDD)
 - History of use of alcohol, tobacco, or other substances
 - Parental/guardian custodial status
 - When applicable, the parent/guardian's ability/willingness to participate in services
 - When applicable, the parent/guardian's strengths
 - When applicable, the parent/guardian's preferences
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- Assist members with controlling symptoms of mental illness with, individual/group/family therapy, pharmacotherapy and supportive services to reduce negative behaviors, emotional disturbances and school-life management.
- Provide members with strategies and coping skills to become stable and reduce the impact of severe mental illness and co-occurring disorders in childhood.
- Develop resources for each child, parent and family to strengthen the support system available to them, within their community.
- Empower the member to successfully manage situational stressors, family relationships, inter-personal relationships, life-span indicators, psychiatric illness, substance abuse and other addictive behaviors.

Specific Services Offered

Children and adolescents struggling with mental health, substance abuse, and developmental disability symptoms; based on the needs of the person served, are provided evidence-based interventions from case management, clinical therapy and psychiatry to address issues with:

- Anger and/or Rage Episodes
- Lack of Focus
- Defiance
- Trouble Sleeping
- Significant Changes in Mood
- Bullying
- Depression / Anxiety
- Low Self Esteem
- Response to Trauma (past/present)
- Member/Family advocacy
- Sexual Abuse / Assault
- Issues at School / Truancy
- Grief, Loss, and Abandonment
- Developmental Disabilities
- Fetal Alcohol Syndrome (FASD-NDD)
- Community living skills
- Social skills
- Social support
- Vocational skills
- Suicidal Threats or Attempts
- Substance Use

Parents and legal guardian(s) are afforded supportive services to assist the family with obtaining basic needs and other social determinant factors. All of these services are provided at TWC Children's' Program Behavioral Health clinic, home or community. Providing some services in the home or community decreases decomposition of child's mental status and provides continuity of care in the child's person setting.

Population Served

TWC Child/Adolescent and Family Center serves children and adolescents ages 5-17 with mental health conditions which result in school discipline, legal issues and family dysfunction.

Eligibility/Admissions Criteria

Admissions to TWC Child/Adolescent and Family's Behavioral Health Program is based on administering PHQ9, EPSDT and Biopsychosocial to children with histories of crisis episodes, emotional distress, anger-management issues, depression and grief symptoms. The assessment results determine level(s) of care for admission to TWC Children's' Behavioral Health services.

Modalities of Treatment

Our treatment modalities are based on Evidence-Based Practices and research in the arena of Mental Health

The most commonly utilized treatment modalities are:

- Cognitive Behavior Therapy
- Brief Solution Focused Therapy
- Group Therapy
- Family Therapy
- Crisis Intervention/Stabilization
- Stages of Change/Motivational Interviewing
- Behavior Modification
- Relapse Prevention
- DBT
- Peer Support Specialists/Recovery Coaches

Comprehensive Care Management

- I. Communicating with other primary and specialty care providers: TWC asks all members to complete/provide authorization/ROI to communicate with other providers. The care coordinators are responsible for ensuring that all communication between providers occurs and is documented. Types of information shared will include physical health assessments, medication updates and change, lab results, hospitalization status, and data related to current HEDIS measures. This information will be shared for both members who have a TWC PCP and members who do not.
- II. Integrated IPOS: Following a psycho-social assessment, case management assessment, health assessment (and H&P if receiving primary care at TWC), and psychiatric evaluation, the care coordinator will assist members with constructing an IPOS, which outlines interdisciplinary member needs and goals. Interdisciplinary interventions will be included, which will assist member in meeting their goals.
- III. Composition of Health Home Team:
 - a. Member
 - b. Therapist (LMSW, LLMSW, LLPC, or LPC)
 - c. 2 care coordinators (LLBSW or LBSW) – 1 will be assigned as “primary”
 - d. Peer Support Staff
 - e. RN
 - f. Psychiatric Provider (psychiatrist or NP)
 - g. Primary Care Provider (optional)

Referral Source

Children and adolescents are referred by parent(s), legal guardian(s), PCP or school officials when child/youth is experiencing crisis episodes and emotional distress impacting their ability to function.

Setting

Most TWC Children's' Behavioral Health services are provided in an animated office setting that is relevant and comfortable with fun and colorful walls, toys, puzzles, art supplies, aquarium and books for children to peruse while waiting for behavioral health services. The child-member may sit in non-standard chairs, sofas, or on mats. Some case management services may be performed in the home, school or community.

Staffing

Only a credentialed, qualified Child Mental Health Professional will provide treatment to children/families. Staff will be employed based on the following minimum criteria:

- Case Managers: Bachelor's Degree in Human Services related field (Licensure must be obtained LLBSW, LBSW, SST)
- Clinical Therapist: Licensed or Limited Licensed Master's Degree in Social Work, LLP, LLPC, MFT
- Nurse: Associate's Degree in Nursing (RN)
- Psychiatrist: MD, DO, or FNP and licensed to provide psychiatric services in the state of Michigan
- Peer Support: Certified Youth Peer Support Specialists

Primary Care Provider: MD, DO, PA, or FNP licensed to practice in the state of Michigan

Documentation

The following documents are general in nature and are in no way inclusive of all documents which may be located/required in an individual's Medical Record:

- Intake Paperwork
- Psychiatric Evaluation, Psychosocial Assessment, Nursing, and Case Management Assessments
- History and Physical
- IPOS
- Individual Progress Notes from each discipline
- Authorization to Release/Request Information
- Crisis Plan
- Medication consent
- Notice of Hearing

Hours of Operation/Frequency

TWC Children's' Behavioral Health program is open from 9am - 5pm, Monday - Friday, by appointment. Various supportive services and resources can be provided to children and families as reported needs of child, parent and/or family.

Location

Team East
TWC Children's' Behavioral Health Program
3646 Mt. Elliott
Detroit, Michigan
(888) 813-8326

[Transition/Discharge Criteria](#)

Quarterly and Annual determination is made by care coordinator and therapist based on child/youth meeting and targeted objective goals in the IPOS. Other specific services may also be offered to supplement current transition into other existing children's' programs.

Discharge criteria is based on request from parent or legal guardian, agency or legal courts, completion of Annual IPOS goals and objectives and/or transition into other programs and resources.

[Payer/Funding Source](#)

Funding is provided by Detroit Wayne Mental Health Authority (DWMHA), Michigan Department of Health and Human Services (MDHHS), and private insurances.

[Fees](#)

Fee For Service