RSA 135:F – NH System of Care for Children’s Mental Health

Under the new law, the Department of Health and Human Services and the Department of Education are required to lead collaborative efforts to develop “a delivery system of behavioral health services across the lifespan of children, youth, and adults with behavioral health needs.”

A System of Care is defined as “an integrated and comprehensive delivery structure for the provision of publicly funded behavioral health services to NH children and youth.”


Section 135-F:9 System of Care Advisory Committee

- Promotes coordination across state agencies
- Identify cost-savings
- Create a more efficient and improved service array & service delivery system
- Assist and advise the Commissioners of NH-DOE & NH-DHHS on the System of Care principles & values & implementation of RSA135-F

To create, improve, and expand a system of care to support all children, youth, and their families.

All children, youth, and their families are supported to be mentally and emotionally well so they can thrive in their home, school, and community.

Family and Youth Driven – Family & youth are at the core of the work & take a leadership role at all levels including service delivery level, policy, planning, & systems.

Community Based – Services are provided at the community level with the youth and family in their home and community & include, system management, resting within a supportive, adaptive infrastructure of structures, processes, and relationships at the community level.

Culturally & Linguistically Competent – Agencies, programs, and services reflect the cultural, racial, ethnic, and linguistic differences of the populations they serve to facilitate access to and utilization of appropriate services & supports.

Trauma Informed – Treatment and support services are delivered in a manner that is Trauma-Informed using the 6 core principles of a trauma-informed approach: Safety, Trustworthiness and Transparency, Peer Support, Collaboration and Mutuality, and Empowerment, Voice and Choice, Cultural, Historical, and Gender Issues.
Principles

1. **All children** should have access to a comprehensive array of services that address their physical, emotional, social, and educational needs.

2. **All children** should receive services without regard to race, religion, national origin, sex, physical disability, or other characteristics, and services should be sensitive and responsive to cultural differences and special needs.

3. **All children** should receive services within the least restrictive, most normative environment that is clinically appropriate.

4. **All families** and surrogate families of children should be full participants in all aspects of the planning and delivery of services.

5. **All children** should receive services that are integrated, with linkages between child-serving agencies and programs and mechanisms for planning, developing, and coordinating services.

6. **All children** should be provided with case management or similar mechanisms to ensure that multiple services are delivered in a coordinated and therapeutic manner and that they can move through the system of services in accordance with their changing needs.

7. Early identification and intervention for **all children** should be promoted by the system of care in order to enhance the likelihood of positive outcomes.

8. **All children** should be ensured smooth transitions to the adult services system as they reach maturity.

9. The rights of **all children** should be protected, and effective advocacy efforts for all children should be promoted.

10. **All children** should receive services without regard to race, religion, national origin, sex, physical disability, or other characteristics, and services should be sensitive and responsive to cultural differences and special needs.