Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood: DC:0-5

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Diagnostic Classification of Mental Health and Developmental Disorders —— of Infancy and Early Childhood (DC:0-5™): New York State ——



Objectives

- What is Infant and Early Childhood Mental Health
- What is DC:0-5/ Why is it Important
- Why Diagnose Young Children
- NYS Efforts to Make DC:0-5 the recommended diagnostic tool for Children Birth to Age 5
- NYS's Training Efforts to Build Workforce Capacity
- NYS Infancy Leadership Summit

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What is Infant and Early Childhood Mental Health

The capacity of the child from birth to age five to:

- Experience, regulate, and express the full range of positive and negative emotions
- Form close and secure interpersonal relationships
- Explore the environment and learn

All within the context of family, community and culture

(Zero to Three Policy Center Fact Sheet, May 18, 2004)



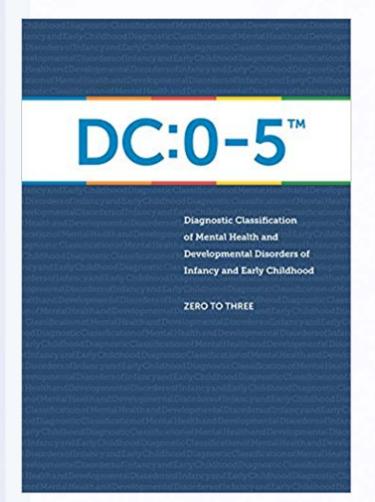
Prevalence Rates

Between 9.5 and 14 percent of US children ages 0-5 experience social-emotional problems that negatively affect their functioning, development, and school readiness (Brauner & Stephens, 2006)

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What is the Diagnosis and Classification System of Infancy and Early Childhood Mental Health: DC:0-5



DC:0-5 is a multi-axial system that considers a child's clinical disorder only after issues such as the child's health, development, psychosocial stressors, and culture as well as the nature of the child's relationship with important caregivers have been assessed.

Axis I: Clinical Disorders

Axis II: Relational Context

Axis III: Physical Health

Conditions and Considerations

Axis IV: Psychosocial Stressors

Axis V: Developmental

Competence

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Why DC:0-5 Was Developed

- DC:0-5 was developed since existing classification systems such as DSM V did not adequately reflect the unique developmental and relational experiences of infants and young children
- Existing Diagnostic systems did not capture mental health disorders that are typically first diagnosed in infancy and early childhood such as regulatory disorders and care-giver- child relationship disturbances
- Cross-walked with other diagnostic tools including DSM-5 and ICD-10



Incorporates Developmental Issues

- We know that the domains of development in young children are intertwined and that social emotional health sets the foundation.
- When social emotional health isn't strong, other aspects of development slide.
- DC:0-5 incorporates developmental issues that may affect symptom presentation in young children



Why Diagnose in Infancy and Early Childhood?

- Provides a common language to allow professionals across disciplines to communicate accurately about children's disorders
- Helps health professionals to ask better questions instead of using diagnostic tools that focus on symptoms or conditions of older children or adults, and leads to more accurate diagnoses
- When needed, can help guide the most appropriate treatment interventions at a time of maximum impact
- Provides a helpful guide to clinical formulation
- Supports reimbursement and treatment authorizations



The Balancing Act



Identify children
with clinically
impairing disorder
to increase chance
of access to
evidence-based
treatments

Avoid pathologizing children demonstrating normal variations of typical development

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Impairment for Every Disorder

Symptoms of the disorder, or caregiver accommodations in response to the symptoms, significantly impact the young infant's/young child's and/or family's functioning in one or more of the following ways:

- 1. Cause distress to the infant/young child;
- 2. Interfere with the infant's/young child's relationships;
- 3. Limit the infant's/young child's participation in developmentally expected activities or routines;
- 4. Limit the family's participation in everyday activities or routines;
- 5. Limit the infant's/young child's ability to learn and develop new skills, or interfere with developmental progress
- 6. Symptoms are persistent and are seen in multiple settings

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Office of Mental Health

New York State

- The NYS Office of Mental Health (OMH) has been actively collaborating with the NYS Department of Health (DOH) toward making the DC:0-5 the recommended diagnostic tool for children age birth to 5.
- Discussion about this has been a focus of the NYS Infancy Leadership Team
- Developing a crosswalk to ensure that all diagnoses are billable
- This is consistent with the growing movement across the country where many states are recommending or allowing the use of this diagnostic tool for children birth to age 5.

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NYS B5

DC:0-5 trainings are being offered under the Preschool Development Grant Birth through Five Initiative (NYS B5), the New York Center for Child Development (NYCCD) and the New York State Office of Mental Health (OMH) in collaboration with CTAC are offering statewide training



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Who We Are

New York Center for Child Development

 NYCCD has been a major provider of early childhood mental health services in New York with a long history of providing system-level expertise to inform policy and support the field of Early Childhood Mental Health through training and direct practice

CTAC; McSilver Institute on Poverty Policy and Research

Community and the Managed Care Technical Assistance Centers (CTAC/MCTAC)
provides training, consultation and technical assistance to all behavioral health
agencies in NYS.

TTAC

NYCCD, in partnership with the McSilver Institute of Poverty Policy and Research, was selected as the Citywide Early Childhood Mental Health Training and Technical Assistance Center (TTAC).

TTAC is tasked with building the capacity and competencies of early childhood mental health and early childhood professionals

 Go to our website to find out about upcoming trainings, archived webinars and other resources

www.ttacny.org



DC: 0-5 Webinar

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New York State Trainings DC:0-5

Location	Date
Albany	Nov 6 & 7
Albany	Dec 5 & 6
Buffalo	July 11 & 12
Buffalo	Nov 18 & 19
Ithaca	Sept 26 & 27
Long Island	July 25 & 26
Long Island	Dec 12 & 13
NYC	Sept 12 & 13
NYC	Oct 24 & 25
NYC	Nov 14 & 15
NYC	Nov 21 & 22
NYC	Dec 5 & 6
Plattsburgh	Oct 17 & 18
Poughkeepsie	Oct 7 & 8
Rochester	Sept 30 & Oct 1
Rochester	Dec 9 & 10
Syracuse	Oct 2 & 3
Syracuse	Oct 10 & 11
Westchester	Sept 26 & 27
Westchester	Nov 4 & 5
Westchester	Dec 9 & 10

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Training Structure

- All Trainings are conducted by licensed psychologists or psychiatrist
- Trainings are one and half days
- CEU credits are offered/ Will post in ASPIRE
- Each participant receives a copy of the DC:0-5 manual
- Participants are offered up to three learning collaborative calls following each training
- Participants include social workers, psychologists, early interventionists, teacher and special education professionals, pediatricians and others

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Infancy Summit: Zero to Three

- New York State was selected as one of 10 states to participate in a ZERO TO THREE Policy Center convening in Minneapolis
 - The purpose was to engage in a technical assistance project to help improve mental health assessment and treatment of infants and toddlers
 - The emphasis was on strategies to finance these services in New York State.
- The in-person meeting was followed up with monthly technical assistance phone calls
- Evelyn Blanck and Jacqueline Martello (OMH) will represent NYS at a Zero to Three policy summit and present on NYS's efforts around DC:0-5



NYS Team

The NYS team was chaired by **Donna Bradbury**, MA, LMHC, Associate Commissioner, Division of Integrated Community Services for Children and Families, NYS OMH,

- Kalin Scott, Director, Medicaid Redesign Team Project Management Office, NYS DOH, Office of Health Insurance Programs now replaced by Kim Jones
- Kate Breslin, MPH, MCRP, President & CEO Schuyler Center for Analysis and Advocacy;
- Sarah Fitzgibbons, LMHC, MT-BC, IMH-E®, (Mentor-Clinical), Clinical Director, The Society for the Protection and Care of Children (SPCC)
- Evelyn Blanck, LCSW, Associate Executive Director, NY Center for Child Development (NYCCD).

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Priority Focus Areas

Reinforce efforts to make DC:0-5 the recommended diagnostic tool for children birth to age 5

- Coordinate with the DOH Medicaid Office
- Develop a crosswalk with ICD-10
- Revise OMH Article 31 clinic 599 regulations

Explore opportunities to cross train the diverse IECMH workforce and align the workforce training across systems.



Next Steps

- OMH will host monthly phone calls with an expanded group including;
 - Early Intervention
 - Connie Donohue
 - Katherine Reksc
 - Council on Children and Families:
 - Renee Rider
- Facilitate a roundtable discussion at the Zero To Three IECMH-Financing Policy Project meeting in Fort Lauderdale on New York State's work