Robert Friedman
Systems of Care: History of the Concept, General Implementation Issues, and Relationship to Individualized Care and Evidence-Based Practice
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Transforming Systems and Services for Children with Mental Health Challenges and their Families

Three Basic Questions
- How can we improve access to care for those in need?
- How can we improve quality and effectiveness of care?
- How can we improve the mental health status and well-being of all children?

Improving Quality and Effectiveness of Care
Major approach since the mid 1980s has been through the development and implementation of community-based systems of care based on a set of principles and values, and the best available research.

What is a “System of Care”?
A system of care is a comprehensive spectrum of mental health and other necessary services which are organized into a coordinated network to meet the multiple and changing needs of children and adolescents with severe emotional disturbances and their families.

What System Conditions Led to Development of Systems of Care?
- Inadequate range of services and supports
- Failure to individualize services
- Fragmentation of system when children and families had multi-system needs
- Children with special needs are in many systems
- Lack of clear values/principles for system
- Lack of clarity about population of concern
- Inadequate accountability
- Lack of adequate responsiveness to cultural differences

Role of System of Care
To provide access to effective services for a large and diverse population within a specified community.
Key Principles/Values of a System of Care

- Based on needs of child and family
- Promotes partnerships between families and professionals
- Involves collaboration between multiple agencies and service sectors
- Involves provision of individualized supports and services based on strengths and needs in multiple domains
- Promotes culturally responsive supports and services
- Includes system of ongoing evaluation and accountability

Applying Senge’s Learning Organization Model to Systems of Care

Learning organizations are:
“Organizations where people continually expand their capacity to create the results they truly desire, where new and expansive patterns of thinking are nurtured, where collective aspiration is set free, and where people are continually learning to see the whole together.”

Five Characteristics of Learning Organizations

- Team learning
- Building shared vision
- Personal mastery
- Mental models
- Systems thinking

Personal Transformation

Building systems that are transformative requires self-examinations and basic shifts in how we think and interact.

“We cannot solve our problems with the same level of thinking that created them.”

—Einstein

“Effective decision making and learning in a world of growing dynamic complexity requires us to become systems thinkers—to expand the boundaries of our mental models and develop tools to understand how the structure of complex systems creates their behavior.”

—Sterman
Within a system, “the real power lies in the way the parts come together and are interconnected to fulfill some purpose.”

—Pisek, 2002

The Quality Chasm’s 10 Rules to Guide the Redesign of Health Care

- Care based on continuous healing relationships.
- Customization based on patient needs and values.
- The patient as a source of control.
- Shared knowledge and the free flow of information.
- Evidence-based decision making.

Our Model of Implementation

- Why is it needed?
- From whence does it come?
- How can it be used?

Common Processes and Functions

Based on research and experience in:
- Child Mental Health
- Developmental Disabilities
- Adult Mental Health
- Substance Abuse
- Public Health
- Child Welfare
- Community Development
- Prevention
Coming Together

Key stakeholders coming together to express their commitment and develop a plan.

Defining and Understanding the Population of Concern

- What are their needs?
- What are their strengths?
- Where can they be found?
- What works to support them and their families?
- How are they currently being served by the system?

Population of Concern

“Research on children with emotional disorders has clearly demonstrated that they are a diverse group in terms of diagnostic characteristics, strengths and needs, level of functioning, family strengths and issues, co-occurring conditions, values and beliefs, and involvement with service systems. It is in response to this diversity that a strong focus on the development of individualized, culturally competent service plans has developed in the children’s mental health field.”

– Huang et al, 2005

Achieving Agreement on Values and Principles

- Provides key foundation for efforts to provide effective services and supports
- Not just a pretty statement but a strong statement that is used as an ongoing barometer of how the system is functioning
- Developed through a participatory process

Sample Values

- Person-centered/Child and Family Focused
- Individualized
- Culturally Competent
- Needs-Based and Strengths-Based
- Promotes Community Integration

Establishing a “Theory of Change”

Involves Three Parts:
1. Who are we intending to serve?
2. What are our goals for those we intend to serve?
3. How do we believe we can best achieve those goals?
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**How do we believe we can best achieve those goals?**
- Review of knowledge in field
- Use of consultants
- Input from key stakeholders
- Identification of strengths of community and system
- Referral back to values and principles
- New ways of thinking – new mental models, new frameworks!!!

**Development of a Plan of Implementation**
- What resources are needed and how will we get them?
- What program/system changes are required and how will we achieve them?
- What training/coaching/supervision is needed at all levels and how will we provide it?
- What support is needed and how will we obtain it?
- What feedback mechanisms are needed and how will we obtain it?

**Implementation**

It is one thing to say with the prophet Amos, “Let justice roll down the mighty waters,” and quite another to work out the irrigation system.

— William Sloane Coffin  
Social Activist and Clergyman

**Core Implementation Components**

- Staff Evaluation
- Program Evaluation
- Consultation & Coaching
- Intensive Case Management
- Data Management

**Development of a Performance Measurement System**
- Based on theory of change
- For purposes of continuous improvement
- To assist in data-based decision-making

**Having a vision is easy…**
Providing the training, coaching, supervision and feedback is a big challenge!
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**Performance Measurement and Evidence-Based Practice**

- **Two Complementary but Different Concepts**
  - **Performance measurement** focuses on how we are doing right now and right here for purposes of continually improving our system or program performance.
  - **Evidence-based practice** involves the use of interventions that have met a specific scientific criteria at some other time and in some other place with some other group of children and families.

- **Citywide Accountability Program**
  - **Four Parameters**
    - Data had to be collected regularly and reliably—preferably on a daily basis but at least once a week, at a set time.
    - Twenty to forty performance indicators that got at the core mission of the agency had to be established.
    - A regular meeting must be convened, with a minimum frequency of once a week, including a floor plan that demonstrated exactly which agency leaders were required to be present at each meeting.
    - Ten or more representative performance indicators that the agency wanted on its page of the city’s website must be submitted.—Gianis, 2002, pp. 88-89

**Performance Measurement and Evidence Based Practice**

- Data on system performance helps stakeholders to determine if they need to make changes. It should come before efforts to make change. If the need is identified, then stakeholders should exam alternative approaches to making change.

**Review**

- Who do we want to serve and what do we know about them?
- What are our values and principles about serving this group?
- What is our goal for this group and what is our theory of how we can best achieve that goal?
- What do we need to do to implement our theory of change?
- How will we gather information on how well we are doing and what we need to do to make improvements?

**Outreach Mechanisms and Clear Pathways Into Care**

- Are there clear pathways into care?
- Do families and other potential referral sources know about these pathways?
- Are these pathways user friendly and culturally competent?
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A Broad and Comprehensive Range of Effective Services and Supports
- Availability of individualized and culturally competent services and supports
- Availability of effective care coordination mechanisms
- Availability of family-friendly and participatory treatment planning processes
- Comprehensiveness of services, supports, and treatment plans

Skilled, Diverse, and Extensive Provider Network
Importance of having provider network that is large enough, skilled enough, and diverse enough to provide meaningful choice to families.

Accountability at the Provider Level
- What financing and evaluative mechanisms are in place to provide accountability at the provider level?
- What is the role of families in the accountability process?
- Does the process provide practical information that can assist families and treatment teams in making informed choices?

Mechanisms to Ensure Family Choice of Services and Providers
“In a consumer- and family-driven system, consumers choose their own programs and the providers that will help them most. Their needs and preferences drive the policy and financing decisions that affect them.”
—President's New Freedom Commission on Mental Health, p. 28

Choice
The right thing to do and an evidence-based process.

Collaboration and “Buy-In” from Key Stakeholders
- Within multiple service sectors
- At multiple levels
- Including families
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Why Collaboration?
- Children are in multiple service sectors.
- Children and families require services from multiple sectors.
- Fragmentation and lack of collaboration is confusing to families, and contributes to narrow rather than comprehensive treatment plans.
- Funders and other stakeholders appreciate and "reward" collaboration.
- Aren’t they all "our children?"

Financing Plan
- That provides adequate resources.
- That provides adequate flexibility so that comprehensive, individualized treatment plans can be developed and implemented.
- That provides incentives consistent with the values and goals, and theory of change.
- That leverages local and state money and provides maximum payoff.

Governance Mechanisms and Organizational Strategies
- That provide clear and consistent direction.
- That maintain the focus on the values, principles, goals, and theory of change.
- That use systematic data and stakeholder inputs to continuously strengthen the system.
- That makes decisions and manages resources in an efficient manner.

Transformational Leadership
- That appreciates the inter-relatedness of each of the processes and functions with a system.
- Recognizes the importance of community-specific contextual factors.
- Creates win-win situations for all of the key stakeholders.
- Keeps the focus on the bottom line.
- Thinks systemically and is open to new ideas.
- Is the essence of the system!!

Making it Happen

Integration of Systems of Care, Individualized Care, Data-Based Decision-Making, Evidence-Based Practice and Family Choice

A MAJOR CHALLENGE AND OPPORTUNITY!
Individualized Care
Consistent with President’s New Freedom Commission
- “In a transformed mental health system, a diagnosis of a serious mental illness or a serious emotional disturbance will set in motion a well-planned, coordinated array of services and treatments defined in a single plan of care” (p. 8)
- The individualized plan of care “will include treatments, supports, and other assistance to enable consumers to better integrate into their communities” (p. 8)
- “Creative programs will be developed to respond to the needs and preferences of consumers and families, as reflected in their individualized plan of care” (p. 8)

Relationship Between Data-Based Systems of Care and Evidence-Based Practices
Data on system performance helps guide system stakeholders to determine if they need to make changes. It should come before efforts to make change. If the need for change is identified, then stakeholders should examine alternative approaches to making change.

Evidence-Based Practices: What They Are Not and What They Should Be
- They should not be viewed as an alternative approach to systems of care and individualized care.
- They should be a complement and enhancement to systems of care and individualized care.

Evidence-Based Practices: What They Are Not and What They Should Be
- They should not be an alternative to child and family choice.
- They should provide important information to children and families, and to entire treatment planning teams, so that informed choices can be made.

Evidence-Based Practices: What They Are Not and What They Should Be
- They should not be the only choice, or always the best choice, for improving outcomes in a community system.
- They are one alternative approach to improving outcomes that should be considered by community stakeholders along with other alternatives.

Evidence-Based Practices: What They Are Not and What They Should Be
- They should not be an effort to establish one-size fits all interventions that can be applied to all populations under varying conditions.
- They should be an attempt to look contextually at interventions, taking into consideration such factors as characteristics of the population to be served, the community, and the system.
Evidence-Based Practices
What They Are Not and What They Should Be

- They should not be an attempt to stifle innovation and adaptation.
- They should encourage innovation and adaptation, and the careful study of field-based interventions that have not had the resources or opportunity for careful evaluation.

"The President’s New Freedom Commission on Mental Health emphasizes both the importance of individualized plans of care, and the application of evidence-based practice. This is very significant because long-term meaningful improvements in outcomes for children with serious mental health challenges and their families will depend on a coming together of these two important approaches."

– Friedman and Drews, 2005

Evidence-Based Practices
What They Are Not and What They Should Be

- They should not be an attempt to anoint particular interventions as “the answer” to particular needs.
- They should recognize that knowledge is not static, and that interventions must be studied and understood in a context.

"There were relatively few instances identified where there had been a systematic effort to integrate evidence-based practices with individualized care. In most cases, the policy emphasis in a local community was either on promoting the development of systems of care and individualized care, or on promoting the use of evidence-based practices. The good news is, however, that there were some very positive examples of such an integrated approach."

– Friedman and Drews, 2005

“Important first steps toward the development of effective, integrated approaches may be the development within systems of care of strong treatment planning processes, and performance measurement procedures.”

– Friedman and Drews, 2005

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Your Challenge

- To come together and work together.
- To stick together for the long haul.
- To confront the present situation.
- To create a vision for a more effective system.
- To develop a theory of change, implementation plan, performance measurement system to make it happen!
- It can happen in your community!