Practice to Policy Change:
A Case Study

Darrell Evora
Chief Operating Officer
EMQ Children & Family Services

Our philosophy

We believe that the most effective form of care for children, youth and their families is community-based, strength-based, needs-driven, and individualized for each client.

Our Mission

To work with children and families to transform their lives and to transform the systems that serve them.

"There is nothing more perilous to undertake, nor more uncertain of its outcome, than an attempt to create a new order of things."

-Machiavelli

Retrospective Snapshot

- 1992: EMQ Children & Family Services
  - Large non-profit provider of residential services and some mental health services.
- 130 residential beds which accounted for 72% of a $12 million annual revenue stream.
- Convergence of two factors
  - Dissatisfaction with residential treatment results.
  - Emergence of managed care.
- Pushed us to search for best practices which led us to Wraparound.

Current Snapshot

- Major program expansion.
- Now serve 20 California counties.
- 5,600 children and family members served annually.
- Over six-fold growth in annual budget.
**Reinvention**
- A passion for assuring positive outcomes fueled the decision to reinvent EMQ.
- Not just based on what we knew then.
- But taking into account what was to be discovered in the future as well.
- Commitment to become a continuous learning organization with a focus on Total Quality Management and continuous Quality Improvement.

**Building Initial External Sponsorship**
- County Executive and Social Services Director
  - Made case for change with highest sponsors in the county.
  - Made the agreement to start the program with money the county was already spending to serve youth.
  - This meant beginning the program with only the counties share of our usual revenue - ensuring them cost neutrality.

**Building Initial Constituency**
- Stakeholder support at all levels was critical
  - Juvenile Court, Dependency and Delinquency Judges
  - District Attorneys
  - Public Defenders
  - County Counsel
  - A few social workers joined in and began to refer youth to the program
  - Developed Champions of the change at the line level
  - Early successes helped build the support

**Building Internal Sponsorship for Wraparound**
- Generated support from the Board of Directors.
- Presented the case for change and vision for the future to staff.
- Created urgency by closing 100 beds (this meant operating with 60% of our revenue).
- Sought national level expertise.

**New Beginnings**

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Building Constituency

- Needed to bring county mental health more actively into the change process.
- Focus on partnership/problem-solving at all process levels.
  - Bring folks together (food)
  - Listen and celebrate
  - Focus on shared commitment

Funding Dilemma

- In closing 100 beds EMQ seriously impacted the agency budget.
- The agency became financially vulnerable and, for four years ran at a deficit.
- We proposed using the county portion of funding for Residential/Wrap as the match for federal Medicaid (Title XIX) money (certification of match).
- This helped alleviate the financial impact.
- California’s funding streams for out of home placement were a barrier to alternative care models.

The Four Year Legislative Journey:

Several legislative attempts

- Legislation introduced (Bates), died because it was viewed as threat.
- State budget committee.
- Budget committee, pulled on request of State Director of Social Services.
- Tried language in budget committee, again.
- Governor vetoed, “good idea but had his own proposal”.
- Governor’s alternative failed in assembly.

Have a backup plan……...

Change is Cyclical and Iterative

- Change occurs in one part of a system as it develops new practices which in turn challenge preexisting assumptions of other parts of the system.
- Further change occurs as the transforming parts of the system affect the way the system operates.
- This in turn cycles back and affects the individual components.

Year 4

Introduced AB 2297

- We needed a Republican to carry if a Republican governor was to sign (Jim Cunneen).
- Written as a demonstration project for EMQ in Santa Clara County.
- Got it through without a single “no” vote and governor signed it.

And just in time
The start up of the new program required a tremendous amount of resource as it meant building in new skill sets, establishing new practices, and forging new relationships with the county. The closing of the residential programs caused a schism in the organization that needed to be repaired.

Skills:
- Training was prioritized at all levels of the organization.

Accountability:
- A strategic initiative to turn EMQ into a data-driven organization was launched.

State Level Changes

Values:
- Components of the Wraparound and System of Care values have been adopted as the core values in the Mental Health vision as well as the redesign of the Department of Social Services.

Model:
- Funding streams were created to support the delivery of Wraparound to various populations of youth.

Skills:
- Training and technical assistance has been supported by California’s Social Services Department.

Accountability:
- Performance outcomes and a move toward best practice is across state level systems.

County Level Changes

Values:
- Santa Clara County public system partners have adopted many key Wraparound values: Strength-based, family driven, individualized, outcomes based decision making.

Model:
- Partners in the public child serving system reconfigured decision making processes for targeted populations (e.g. Membership placement committee and community team formed).

Skills:
- Leaders and staff gained new skills to support the success of the implementation of the values.

Accountability:
- Performance outcomes and a move toward best practice is the focus of both county Mental Health and the Department of Social Services.

Reciprocal Changes

Values:
- State level definition of values driving system have supported integration of service philosophy in all programs.

Model:
- EMQ has become more focused on defining and attempting to measuring fidelity to the Wraparound model.

Skills:
- Skill building has grown from program based technical assistance to strategic targeting of demands for new clinical skills.

Accountability:
- A comprehensive program evaluation process is being developed across all programs. Data is reviewed quarterly.

Internal Changes

- The closing of the residential programs caused a schism in the organization that needed to be repaired.
- The start up of the new program required a tremendous amount of resource as it meant building in new skill sets, establishing new practices, and forging new relationships with the county.

Statewide Systemic Impact

- The sunset of our pilot, demonstration legislation was removed.
- Wraparound was permanently established in statute. Further as established in the MHSA (passed 11/04) to receive funding each county must either provide Wraparound or explain why it can not be implemented.
Further Internal Impact

- While focusing on fidelity to the model, we’re always looking to improve outcomes.
- Integration of service philosophy across all programming.
- Developing new products incorporating Wraparound values and principles:
  - Matrix
  - Therapeutic Behavioral Services
  - Early Intervention and Prevention for ages 0-5
  - Family Finding
  - Residential Redesign

13 Years Later

We have accomplished much

- We have Wraparound services in three different stages of evolution in three counties.
- Wraparound now mandated statewide.
- We are demonstrating that the investment in continuous learning has yielded a positive return for our families and our systems.

For more information go to our website www.emq.org