


Starting Early Starting Smart


Sustaining Program Services and Principles

J. Fred Springer *EMT Associates, Inc.*
Craig Love, Gail Wisdom, Victoria Castleman *Westat, Inc.*
Michele Basen *SAMHSA/CSAP*
Systems of Care/ Tampa, Florida
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Objectives

- Document the degree to which SESS programs have sustained their services and principles
- Document the strategies, program characteristics and contextual circumstances that contributed to or limited sustainability
- Inform guidelines for sustainability in service integration programs




Support & Motivation

- Substance Abuse & Mental Health Services Administration
 - Michele Basen
- Casey Family Programs / Marguerite Casey Foundation
 - Peter Pecora
- Research to Practice Guide




The SESS Program

- Integrated behavioral health services – *Demonstration Programs*
 - Serving children 0-5 & families in high need
 - Natural service homes
 - Common service package
 - Early childhood mental health
 - Caregiver mental health
 - Substance abuse prevention/ treatment
 - Parenting/ family strengthening



Service Principles

- Family-centered (inclusive of whole family units, responsive to needs of families, actively involve families, strengths-based orientation)
- Relationship-oriented (emphasize face-to-face contact, trust-building interaction, social activities that build a program community, inclusive and collaborative decision making, feedback mechanisms, open participation and communications)
- Culturally appropriate (service providers aware and sensitive to cultural diversity, culturally specific service content, appropriate language and ambiance)
- Fully integrated (actual delivery of full range of services, facilitated and seamless delivery, facilitated accessibility)



SESS Evaluation

- Rigorous multi-site, quasi-experimental, longitudinal evaluation of original twelve sites (EMT Associates)
- Documented positive impacts on service access and use, caregiver behavioral health, family strengthening & child social-emotional & cognitive development
- Results at <http://www.health.org/promos/sess/>

What is Sustainability?

- Following Scheirer (2005) we looked for:
 - Degree of continuance of service package
 - Degree of continuance of underlying principles and values
 - Continuance/ replacement of funding

Method

- Opportunity sample: 8 of 18 programs originally funded in SESS, SESS-extended, and SESS-prototype funding cycles
- Email-prompted telephone interview with key informants
- Secondary coding of grantee final reports

Findings: Level of Program Sustainability

- All eight study programs substantially continued core principles (in the host agency)
- Four programs partially sustained the service package
- Three programs fully sustained

Strategies for Sustainability: Finding One

- ***Preparing for sustainability must start early – even before the decision to seek demonstration funding or to adopt an innovative practice.***

Starting Early: Specific Guides

- Select innovations that fit well with host agency mission & operating procedures
- Active involvement in system level coalitions helps
- Augment dedicated (grant) funds with additional funding streams (preferably established)

Strategies for Sustainability: Finding Two

- ***Strong implementation and organizational support are important contributors to sustained services and principles.***

Implementation & Support: Specific Guides

- Strong & stable leadership
- Clearly define and support the staff roles that are important to successfully implement the principles of innovation
- Support development of strong staff relations (e.g., cross-agency workgroups)
- Start discussion of sustaining post-grant collaboration early

Strategies for Sustainability: Finding Three

- **Continuation or replacement funds require strategic integration of multiple sources**

Sources of Continued Funding

Sustained	Federal	State	Local	Private
Fully (Primary Care)	Medicaid -> important services (15-20% FQHC) 1-2%	various limits (20%)	Child Welfare -> federal \$ through county (20-5%), Pulmonary (1-2%)	Investment (1-5%) Social contracts
Fully (Primary Care)	Medicaid -> authorized patient review (2-3%)	Office of Crime Victims Advocacy (2-3%)	Child Welfare -> federal \$ through county (4-5%) General Health (2-3%) Drug Abuse/General Children -> federal \$ allocated by local law enforcement (1-2%)	Donations, e.g., Children's Miracle Network (14%)
Fully (Primary Care)	-	-	Healthy Start -> state \$ allocated through local on -> allison (20%), County community services \$, allocated by Alliance for Human Services (10%)	-
Partially (Early Child Care & Education)	State Schools -> Family Child Care (7-8%)	Days of Early Childhood (3-4%) Childcare / Days of Instruction Health (2-3%)	-	-

Additional sources are possible

Continuation or Replacement Funds: Specific Guides

- Plan for sustained funds early, and develop search and advocacy strategies
- Carefully assess the degree to which new funds may be incompatible with the core service innovations to be sustained
- support strong performance monitoring, including outcome effectiveness and cost analysis

Continuation or Replacement Funds: System Constraints

- If demonstrations of effective innovative services are to be fiscally sustained with stability and fidelity, *policy makers and funders must modify the funding environment to allow more flexible, continuous and performance-driven funding decisions.*

Take Home Thought

- Myopic definition of sustainability as the pursuit of replacement funding can, and often does, result in the sustenance of organization as opposed to innovation. The solution to this conundrum lies in the policies of the funding system.