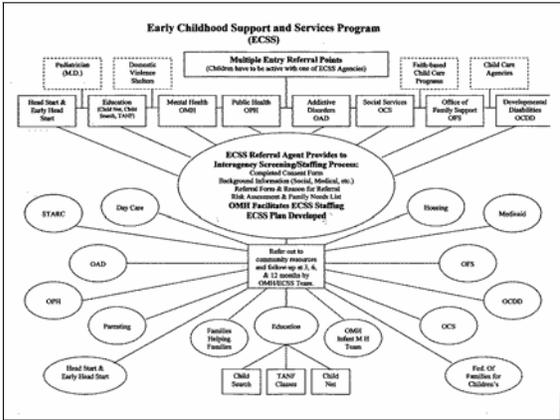


**The “Wendy’s Model” of  
The Louisiana Early Childhood Supports and  
Services (ECSS) Program**

**20th Annual Research Conference-  
A System of Care for Children's Mental Health  
Expanding the Research Base  
March 2007**

**Tom Washington, Ph.D.  
Louisiana Office of Mental Health**

**Renita Williams Thomas, R.N., B.S.N.  
Louisiana Office of Mental Health**



**Process of  
“Franchise Development”**

- Central Monitoring and Oversight
- Central Contract Management
- Policy & Procedure developed by Consultant
- Local Implementation Flexibility

- Steps in Establishing an ECSS Site**
- 1. Select Site:**
    - Advise Local MH Authority that an ECSS Program can be available
  - 2. Establish Implementation Work Group:**
    - Local Authority convenes small group who will take the lead in establishing the program (typically five to seven high level local individuals)
    - State ECSS personnel explain the program, distribute informational materials (e.g., program overview, policy manual, performance expectations) and answer questions
    - Implementation Work Group contacts potential partners (sister agencies, local organizations, political leaders and advocates) to build enthusiasm and schedule first ECSS Network Meeting;
  - 3. Network Formation Meeting #1:**
    - Usually facilitated
    - Provide basic information including overview of eligibility requirements
    - Identify local needs and solicit input on adapting the program locally
    - Build enthusiasm and commitment
    - Identify potential Network members
    - Schedule second Network Meeting
  - 4. Network Formation Meeting #2 (optional):**
    - Review Network #1 and answer questions
    - Discuss and rehearse mechanics of referral and service plan development process
    - Identify “core group” committed to frequent ongoing participation
    - Schedule first ECSS Staffing

EARLY CHILDHOOD SUPPORTS AND SERVICES	
NETWORK MEMBERS	
As of 12/31/06	
Acadiana Iberia / St. Martin	147
Delta East Carroll, West Carroll, Madison and Richland Parishes	61
DeSoto	55
East Baton Rouge	61
Lafayette	54
Orleans	36
Ouachita	34
St. Tammany	19
Terrebonne	70

EARLY CHILDHOOD SUPPORTS AND SERVICES					
	EY0203	EY0304	EY0405	EY0506	EY0607
					As of 12/31/06
Family Training	N/A	118	197	1,192	1,080
Pre K Training	N/A	77	527	1,290	1,202
Agency Training	N/A	333	838	986	891
Risk Assessments	1,717	2,403	3,116	3,063	2,016
Service Plans	543	535	679	943	521
IMH Referrals	333	395	498	663	417

### Lessons Learned

- If you ask for input, you must listen and consider what you get (Corollary: if you cannot or will not consider all input, don't ask for it).
- The program sites that run into problems are those that develop a "state agency" attitude and stop asking for guidance from their networks.
- The program managers that run into problems are those who make decisions that affect the network without consulting the network.
- If your customers value what you do, they will make sure that elected representatives know about you.
- If the State service delivery system understands how you are meeting their needs, they will work with you to figure out ways to keep you in business (although the process can be painfully slow).

### Customer Care and Local Initiative in Action

- Diaper Bank
- Gas Cards
- Translation
- Job prep
- Documentation
- Verification of coverage
- Registration packets

### Contact Information

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- Renita Williams Thomas, R.N., B.S.N.,  
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# EARLY CHILDHOOD SUPPORTS AND SERVICES

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**Tom Washington, Ph.D.<sup>1</sup>  
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Louisiana Office of Mental Health**

**In collaboration with**

**Allison Pinto, Ph.D., Department of Child and Family Studies  
Louis de la Parte Florida Mental Health Institute**

The Louisiana Early Childhood Supports and Services (ECSS) program is a multi-agency and multi-service system for needy young children and their families. ECSS is funded as TANF maintenance of effort by the Louisiana Department of Social Services and medical services funded by the Department of Health and Hospitals.

The program is built upon local networks of child and family serving agencies and organizations that serve as the referral source for all children, that participate in the development of the multi-agency service plan, that accept referrals from the network, and that guide the local priorities and processes of the program sites.

The program operates nine sites serving 13 of Louisiana’s 64 parishes. ECSS serves as the central referral point for young children and their families who would

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benefit from coordinated multi-agency intervention. Services provided by or through ECSS include risk assessment, service plan development and implementation, purchase of supports or services not otherwise available in the community, and specialized infant mental health assessment and intervention. ECSS also provides training in specialized infant mental health assessment and intervention for professionals serving in each of the communities.

Obtaining and utilizing buy-in and collaboration at levels ranging from the Office of the Governor to local family services organizations was the primary development strategy. Although there was no difficulty in getting state and local agreement to the offer of additional mental health services for families and children, creating a sense of local ownership and commitment was key to successful implementation. A concept, characterized as “The Wendy’s Model” by the first program director, guided implementation. The model is one in which the sponsoring agency, in this case the Office of Mental Health, brings into the community the basic infrastructure (funding, policies, personnel, training), but sustaining the program is dependent upon the success of the local manager in developing a program that the community supports, commits to and patronizes.

At each step of program implementation, local input was assured by tapping into interlocking personal and professional relationships to develop the local network. Ongoing local support has been assured by listening to and implementing local guidance and priorities.

The developers of the program considered the process to be one of “franchise development” involving:

- Central Monitoring and Oversight
- Central Contract Management
- Policy & Procedure developed by Consultant
- Local Implementation Flexibility

The long-term strategy for development is based upon creating a system of services that the local community cannot imagine being without and one that provides services that are recognized as necessary to the overall smooth operation of the State service delivery system.

Early Childhood Supports and Services (ECSS) is now in its fifth year. With on-going local and state-level support, the program has steadily grown and is currently piloting the next phase of its development which involves transferring operational responsibility from the state mental health authority to local mental health authorities ultimately leading to state-wide program access. Along the way, many lessons have been learned in negotiating initial funding, developing the program infrastructure (including policies and performance expectations), and facilitating the development of the local networks of child and family serving agencies and organizations.

Here are some of the lessons learned so far:

- If you ask for input, you must listen and consider what you get (Corollary: if you cannot or will not consider all input, don't ask for it).<sup>3</sup>
- The program sites that run into problems are those that develop a “state agency” attitude and stop asking for guidance from their networks.<sup>4</sup>

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<sup>3</sup> Considerable energy is invested in convincing local partners that they really do have a say in the processes and priorities and that this is not just another state mental health clinic; a single incident of “ask but don't listen” requires rebuilding that trust; if local input will not influence a decision, such as eligibility requirements dictated by the funding source, simply provide the information.

- The program managers that run into problems are those who make decisions that affect the network without consulting the network.<sup>5</sup>
- If your customers value what you do, they will make sure that elected representatives know about you.<sup>6</sup>
- If the State service delivery system understands how you are meeting their needs, they will work with you to figure out ways to keep you in business (although the process can be painfully slow).<sup>7</sup>

This model has the potential to serve as a guide for other states seeking to develop integrated early childhood services and supports within local communities, both through the State Early Childhood Comprehensive Systems grants and through other legislative and funding methods.

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<sup>4</sup> Unlike many other state services, the ECSS model offers broad latitude for local influence on both the scope and detail of program operation. If that model is abandoned, local belief that ECSS is a locally-driven program evaporates and the number of local stakeholders interested in using their influence or position to assist the program drops quickly.

<sup>5</sup> Operational decisions, such as how to manage waiting lists, that are made without consulting the partners who are affected (or whose referrals are affected) are seen as arbitrary and lead to withdrawal of support for the program.

<sup>6</sup> ECSS has needed to rely on its local support base to provide information and advocacy to elected officials in ways that Civil Service employees cannot. Local support and advocacy lead to the first major program expansion by advocating for an increased appropriation.

<sup>7</sup> State-level customers (such as funding sources and clinical training institutions) who recognize that ECSS reflects well on them (exceeding targets, non-problematic operations, good press, demonstration of the effectiveness of specific service delivery approaches and favorable public recognition) provided support during a fiscal crisis that threatened a 50% reduction in the program and are currently supporting legislative action that could lead to doubling the size of the program.

## Steps in Establishing an ECSS Site<sup>8</sup>

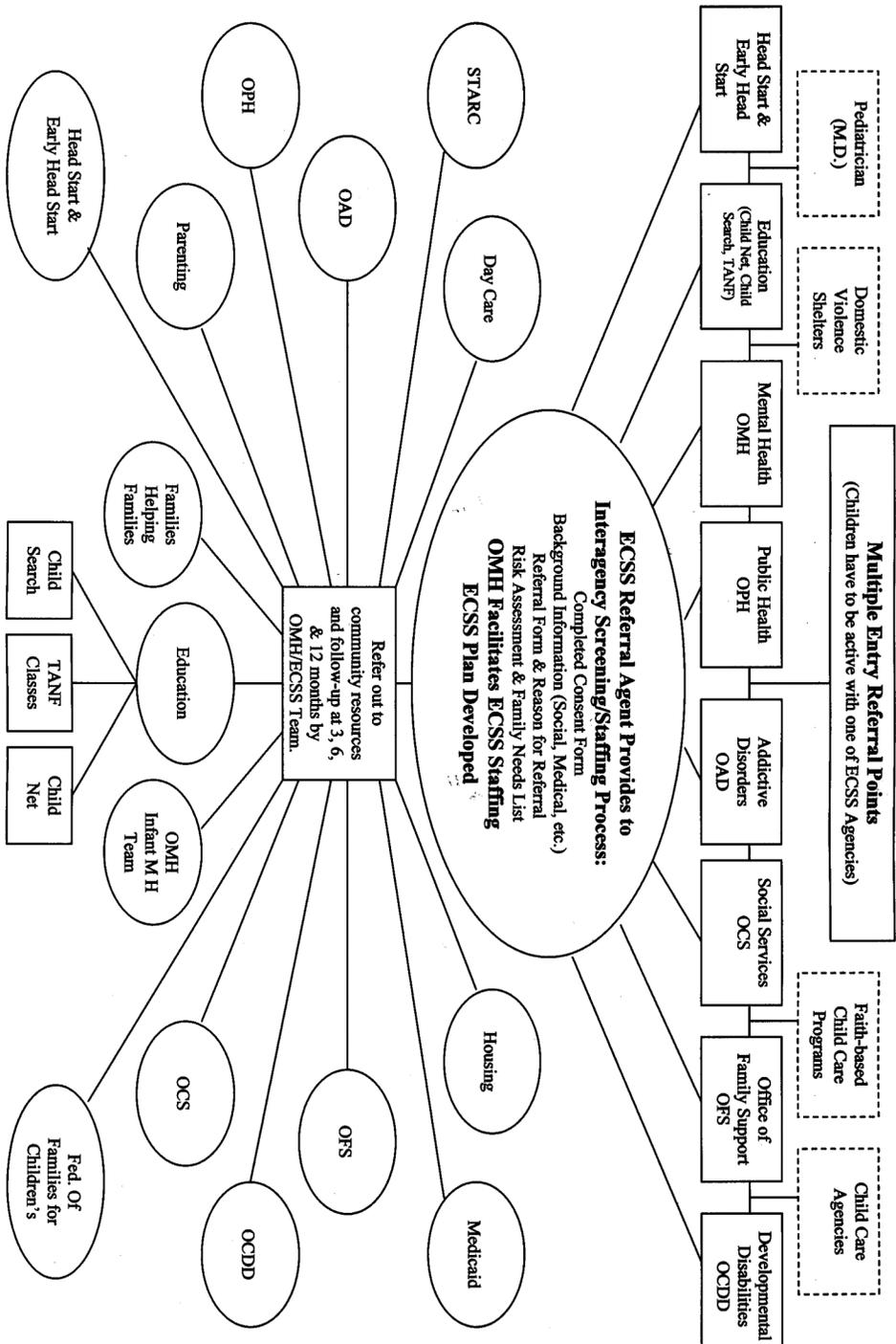
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<sup>8</sup> The process, from formation of Implementation Workgroup to first ECSS Staffing, has taken as little as six weeks and as long as three months (one site implementation was delayed for nine months due to inclement weather; the Network Formation Meeting was repeated)

# ECSS Multiple Entry Referral Points

## Early Childhood Support and Services Program (ECSS)



**Customer Care and Local Initiative in Action**  
**Renita Williams Thomas, R.N., B.S.N.**

Early Childhood Supports and Services (ECSS), provided through the Louisiana Office of Mental Health, is a multi-agency collaboration designed to provide services and supports to young children (ages birth thru five years) and their families who are at risk or who are demonstrating emotional and/or behavioral difficulties. Our primary focus is on improving collaboration among providers of infant mental health services.

In the Wendy's model of care each office has the same "blueprint" for operation but we encourage the local programs along with their Network Partners to develop a functional method of operation that is practical for their individual community.

The approach from the management perspective is to encourage flexibility in each service delivery area and region. It is our hope that the community network partners along with the local office utilize creative ways that best stretches both the state and local resources.

It is often after I think that I have seen and heard everything that I get yet another phone call with a new spin on a method for client service delivery.

For instance, in our more rural area, the local Wal-Mart sends them a steady supply of diapers to stock their diaper bank. This is helpful not only to our clients but to other members of the network collaborative who may have clients in need of such items. All sites operate at different capacities but with the similar goals for service delivery. They work collectively to meet the established TANF goals for each fiscal year.

Other examples of local autonomy include a collaborative effort between ECSS Delta and their network to provide transportation to clients in an effort to assist them in keeping appointments associated with their established Service Plan. Many of their family members do not have transportation but those who have transportation but do not have money for fuel.

Several faith based organizations have partnered to provide gas cards to many of our clients in need.

Another fascinating piece is the partnership with Families Helping Families. In addition to their contracted duties, a Hispanic employee has been given dedicated hours to provide translation services to our new and ever increasing Spanish population.

Network members in the devastated New Orleans area work with ECSS to fast track families into the local HeadStart programs and staff at the Louisiana Department of Labor assists this office greatly in informing them of job openings in the community and assisting them in with tips such as resume preparation, interview techniques, etc. and other information that may be needed for successful job preparation.

The Terrebonne network is a vast and tremendous one. Among the many network contributions, one that stands out at this location is that the Office of Family Supports assists by providing documents such as food stamp printout, FITAP assistance

verification, kinship care assistance etc. Many of our clients lack organization and simply can't (or don't) bring in the necessary forms/documentation. This is a very valuable service to those who are especially in immediate need.

Also, their local Medicaid representative provides verification of coverage for families seeking services. Finally, Terrebonne Parish HeadStart now includes our ECSS Risk Assessment Form as an integral part of their registration packet for every child participating in their program. Also, a HeadStart child receives additional disability points (according to their system) if a child is participating in ECSS but more specifically enrolled in the Infant Mental Health component.

Staff is encouraged to consult their local networks to determine what supplies and/or services will be afforded to clients. Each service plan is developed, critiqued and followed by utilizing our network partners as the "driving force."

This method gives sites and their network partners the freedom to work with the resources of their local community to meet the every changing and vast differential needs of the clients to which they provide services. This has been a hugely successful venture and the communities enjoy being able to take a more regional approach to meeting the needs of their citizens.