Implementing Effective Systems of Care: What Have We Learned from the National Evaluation?

March 6, 2007

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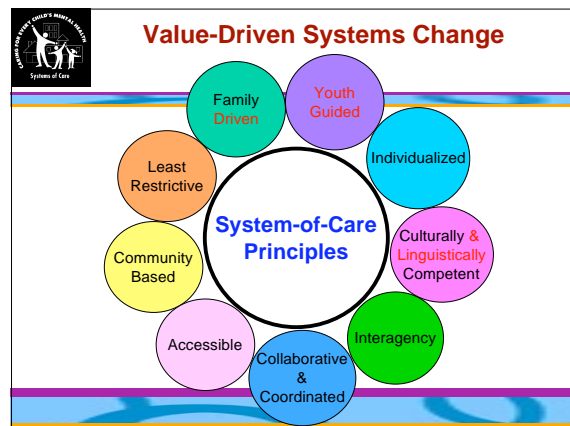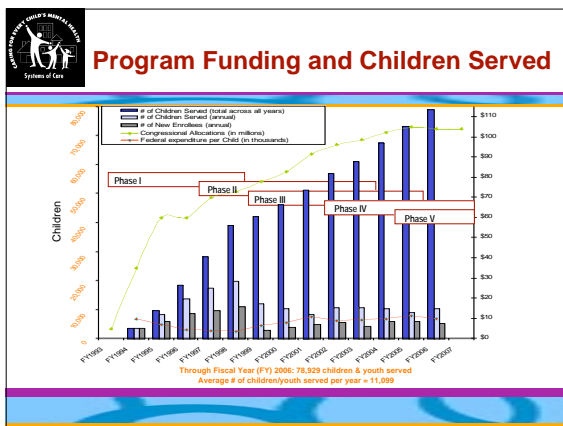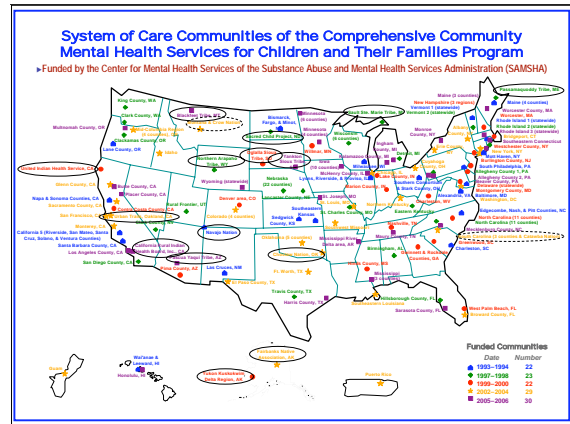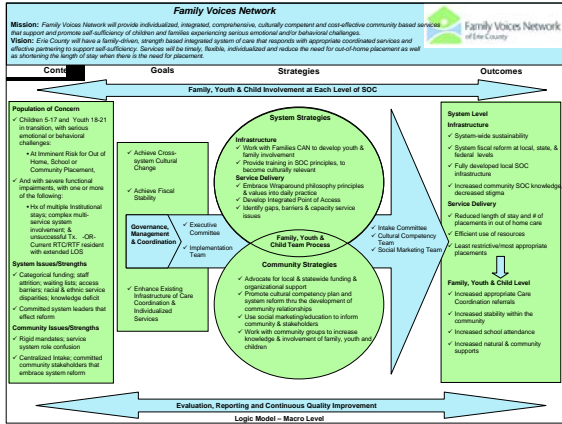System of Care Communities of the Comprehensive Community Mental Health Services for Children and Their Families Program
Funded by the Center for Mental Health Services of the Substance Abuse and Mental Health Services Administration (SAMSHA)

Program Funding and Children Served

Through Fiscal Year (FY) 2006: 78,929 children & youth served
Average # of children/youth served per year = 11,099

Value-Driven Systems Change

System-of-Care Principles

Family Driven · Youth Guided · Individualized · Culturally & Linguistically Competent · Interagency · Collaborative & Coordinated · Accessible · Community Based · Least Restrictive

Context
Relational Worldview
Organizational Level

Physical
Economic
Political
Social
Mandate
Org. Spirit
Values
Purpose
Vision
Mission

Environment · Infrastructure · Mission · Resources

Policies/Procedures
Mgmt. Structure
Personnel Mgmt.
Fiscal Mgmt.
Service Design
Strategic Plans
Human Beings
Leadership
"Champions"
Information
Funding
Coalitions

Collaboration to Change Systems
Coordination, Communication, Conflict, Constituencies, Costs

Agencies
MH, CW, JJ, Ed, PH, etc.
State, County, City, Sovereign Nations

Governing Body
Families
Youth

Service Providers
Clinicians
Intake Staff
Case Managers
Care Coordinators
Family Support

MIS Managers

Project Directors
Administrators
Support Staff

Social Marketers

Program Partners
TA Providers
Consultants

Evaluators

Other Stakeholders

Slide 1: Family Voices Network (Logic Model)

Family Voices Network

Mission: *Family Voices Network will provide individualized, integrated, comprehensive, culturally competent and cost-effective community-based services that support and promote self-sufficiency of children and families experiencing serious emotional and/or behavioral challenges.*
Vision: *Erie County will have a family-driven, strength based integrated system of care that responds with appropriate coordinated services and effective partnering to support self-sufficiency. Services will be timely, flexible, individualized and reduce the need for out-of-home placement as well as shortening the length of stay when there is the need for placement.*

Family Voices Network of Erie County

| Context | Goals | Strategies | Outcomes |

Family, Youth & Child Involvement at Each Level of SOC

Population of Concern
- Children 5-17 and Youth 18-21 in transition, with serious emotional or behavioral challenges:
  - At Imminent Risk for Out of Home, School or Community Placement,
- And with severe functional impairments, with one or more of the following:
  - Hx of multiple institutional stays; complex multi-service system involvement; & unsuccessful Tx. -OR- Current RTC/RTF resident with extended LOS

System Issues/Strengths
- Categorical funding; staff attrition; waiting lists; access barriers; racial & ethnic service disparities; knowledge deficit
- Committed system leaders that effect reform

Community Issues/Strengths
- Rigid mandates; service system role confusion
- Centralized Intake; committed community stakeholders that embrace system reform

Goals:
- ✓ Achieve Cross-system Cultural Change
- ✓ Achieve Fiscal Stability

Governance, Management & Coordination
- ✓ Executive Committee
- ✓ Implementation Team

- ✓ Enhance Existing Infrastructure of Care Coordination & Individualized Services

System Strategies

Infrastructure
- ✓ Work with Families CAN to develop youth & family involvement
- ✓ Provide training in SOC principles, to become culturally relevant

Service Delivery
- ✓ Embrace Wraparound philosophy principles & values into daily practice
- ✓ Develop Integrated Point of Access
- ✓ Identify gaps, barriers & capacity service issues

Family, Youth & Child Team Process

Community Strategies
- ✓ Advocate for local & statewide funding & organizational support
- ✓ Promote cultural competency plan and system reform thru the development of community relationships
- ✓ Use social marketing/education to inform community & stakeholders
- ✓ Work with community groups to increase knowledge & involvement of family, youth and children

- Intake Committee
- Cultural Competency Team
- Social Marketing Team

System Level

Infrastructure
- ✓ System-wide sustainability
- ✓ System fiscal reform at local, state, & federal levels
- ✓ Fully developed local SOC infrastructure
- ✓ Increased community SOC knowledge, decreased stigma

Service Delivery
- ✓ Reduced length of stay and # of placements in out of home care
- ✓ Efficient use of resources
- ✓ Least restrictive/most appropriate placements

Family, Youth & Child Level
- ✓ Increased appropriate Care Coordination referrals
- ✓ Increased stability within the community
- ✓ Increased school attendance
- ✓ Increased natural & community supports

Evaluation, Reporting and Continuous Quality Improvement

Logic Model – Macro Level

Slide 2: The National Evaluation Asks:

- ▸ **Who is the program reaching** in funded systems of care?
- ▸ What are the **characteristics of children** served in the diverse funded programs?
- ▸ How are systems of care **implemented locally, and what developmental changes** have occurred over the years of program funding?
- ▸ What **kinds of services** are received? What are families' **service experiences**?
- ▸ How much does it **cost** to serve children and families in systems of care?
- ▸ What are the **outcomes** for children and families?
- ▸ What factors influence **sustainability**?
- ▸ And . . . answers questions on **special topical areas** of interest to systems of care *(e.g., cultural competence, family involvement, evidence-based treatment, provider practices, primary care provider knowledge of mental health)*

Slide 3: National Evaluation Studies

Core Study Components	Other Studies
Cross-Sectional Descriptive Study	*Comparison Studies in 5 pairs of sites, Service Experience Substudy of caregivers and providers*
Child and Family Outcome Study	*Treatment Effectiveness Studies in 6 sites with 3 different treatments, Practice-based Evidence Study*
Service Experience Study	*Provider Surveys on system of care attitudes and practices, evidence-based treatment, cultural competence, primary care and mental health*
Services and Costs Study	*Cultural Competence Studies*
System-of-Care Assessment (Youth & Youth Coordinator Assessment added)	*Partner Ethnographies, Family Driven Study, Conflict Resolution Study, etc.*
Sustainability Study	*Researcher Secondary Data Analyses*

Slide 4: Implementing and Sustaining Systems
Three Approaches to Understanding

System of Care Assessment	Sustainability Survey*	Secondary Analyses**
Infrastructure Domain (Governance, Management and Operations, Service Array, Quality Monitoring)	*Service Availability*	*Planning and Implementation Processes*
	Implementation of Principles	*Governance*
Service Delivery Domain (Entry into Services, Service Planning, Service Provisions, Case Monitoring)	*Goal Achievement*	*Management*
	Factors Impacting Sustainability	*Service System Processes and Characteristics*
Application and Development of Principles in Each Domain	*General & Financing Strategies Used and Usefulness* *Analyses by Stroul and Macro staff	*Service Delivery Characteristics and Components* **Paulson & Fixsen, USF

Slide 5: What Do We Know?
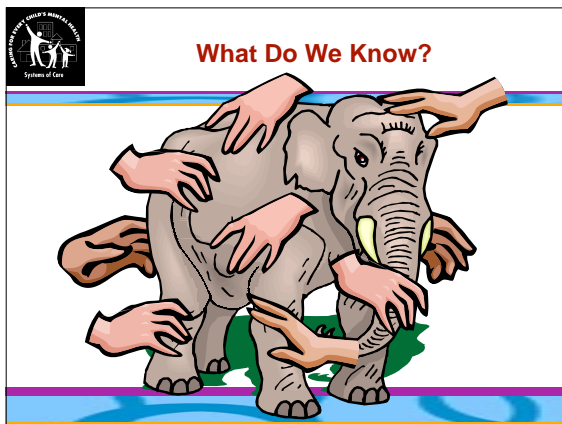
Slide 6: Creating Implementing, and Sustaining Effective Systems

- ▸ **Federally-funded systems of care are engaged with/embedded in systems of various types (e.g., agency, social, State, fiscal, community values, personal beliefs) that are hard to change.**

- ▸ **Funded programs have greater difficulty in creating, implementing, and sustaining systems of care if they have not laid the groundwork in advance of Federal funding.**

- ▸ **Implementing complex programs is extremely difficult and time-consuming.*** *(SOC project directors will agree)*

*Pressman & Wildavsky, 1973

Creating, Implementing, and Sustaining Effective Systems

- System change occurs across years of funding, but is affected by funding parameters
  - *Years of funding*: Change is slow, 6 years is a start
  - *Match requirement*: Difficulty meeting match may reduce scope and progress in later years
    - Programs generally downsize as Federal funding phases out
      - e.g., loss of family organizations, flex funds, family support services, partnerships, etc.
- System change varies
  - Among communities
  - Across values and principles
  - Within service delivery and infrastructure domains

Creating Effective Systems

- Sites need to interpret what this means

- Local characteristics affect systems
  - Stakeholders, population served, geographic locations, governmental jurisdictions, goals for improvement, strategies applied

- Stakeholders need buy-in on shared vision

- Clear structures and processes for establishing the shared vision help (logic models, governance, agreements)

Implementing Effective Systems
Factors Affecting Implementation

- Knowing what the goals are
- Clear strategies to reach goals
- Feedback system to know progress
- Communication and social marketing
- Full ownership by decision-makers for policy and system reform
- Real power of collaborating partners
- Families fully integrated as drivers of change

Implementing Effective Systems
Factors Affecting Implementation

- Struggle between the need to meet grant requirements to deliver services and developing and improving systems
- Mental health emphasis may create obstacles to partnership and shared resources
- Staff experience and turnover
- Interagency conflict management

Implementing Effective Systems

- Governance structure that is simple, inclusive, and has clear and fixed point of accountability for system development and operations

- Infrastructure to disseminate and infuse values and principles for the long term.

- Being embedded in a larger system that is already engaged in change and has developed financial strategies may help
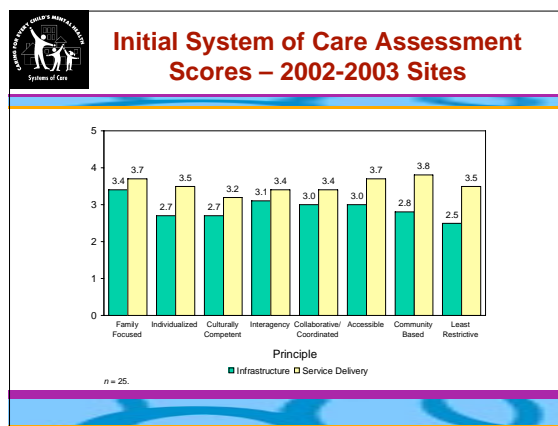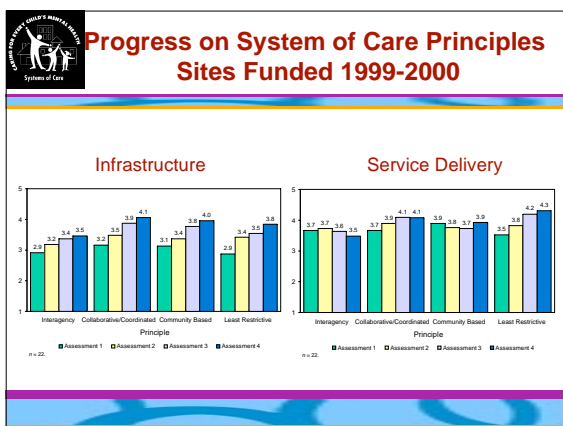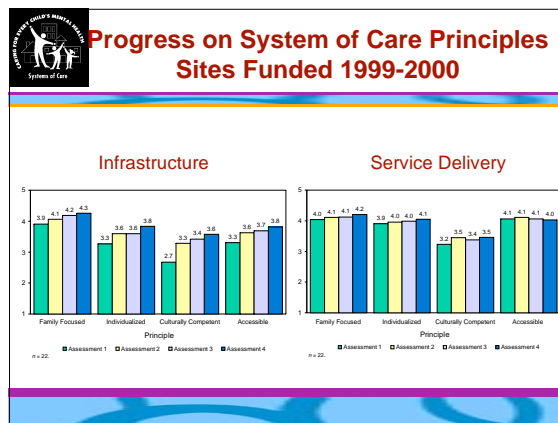 - If the State is on board, implementation may be easier

Creating *Effective* Systems
What do we mean by an effective system?

- Funded program is able to change larger child-serving systems forever?
- Values, principles, philosophy of systems of care pervasive and long-lasting?
- System change improves availability of mental health and support services for children, youth and families?
- Program/changed system reaches and improves outcomes for the children, youth and families for which is was designed?
- Overall costs of addressing mental health needs and social consequences across systems reduced?

Implementing Effective Systems

- System of Care programs have higher ratings on system of care principles at the service delivery level as they begin services, than at the infrastructure level.

- System of Care programs show improvement in their application of system of care principles at the infrastructure level over years of funding in aggregate. They vary by site.

- In aggregate, little change occurs at the service delivery level; change varies across principles by site.

- Lowest scores at outset are received for cultural competence, interagency, and least restrictive principles.

- Sites in newer cycles of funding generally start at the same place as their predecessors.

Progress on System of Care Principles Sites Funded 1999-2000

Progress on System of Care Principles Sites Funded 1999-2000

Initial System of Care Assessment Scores – 2002-2003 Sites

Creating, Implementing, and Sustaining Systems
Some Outcomes for Children, Youth, & Families

- Programs make increasing but slow improvements in achieving increased positive child outcomes over program years

- Children and youth as a whole make improvements in symptoms, functioning, strengths, caregiver strain are greatest in first 6 months in services, with continued improvement to slower increasing improvement seen at subsequent assessments

  - Differences in progress exist for subgroups of children (e.g, by age, diagnosis, race, etc.)

- Reductions in caregiver strain generally parallel improvements in children's problems

Implementing Effective Systems
How Do We Enhance Effective Change?
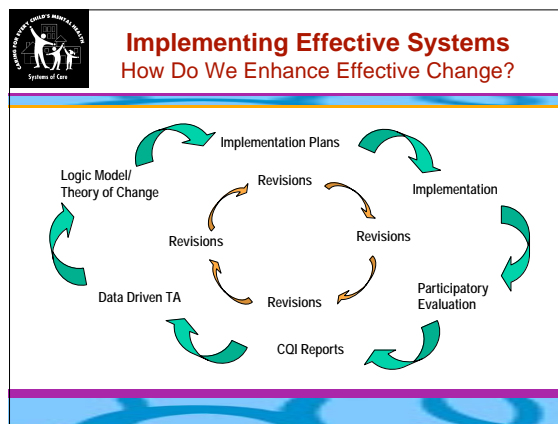
Sustaining Systems of Care
Strategies Considered Successful

- Cultivating strong interagency relationships
- Involving stakeholders
- Increasing the ability to obtain Medicaid reimbursement; obtaining new or increased state funds
- Creating an ongoing focal point for managing the system of care
- Establishing/enlisting strong family organization to advocate for services
- Using evaluation results to document service effectiveness

Strategy emphasized is generally the one considered successful by the community.

Conditions that may Impact
Use of Strategies for Sustainability

- Utility of strategy in local environment.
- Recognizing how a strategy can benefit the system of care.
- Planning for resilience to external factors beyond control of system of care (changes in leadership, State infrastructure, State resources, managed care, etc.).
- Knowing how to maximize access to existing resources such as Medicaid.
- Existing relationships.
- Availability of evaluation or other data.

Implications for Sustainability Planning

- Attend to infrastructure elements in sustainability planning (e.g., focal point for system management, evaluation, maintaining family organization)
- Maximize factors that enhance sustainability (e.g., nurture state partnerships)
- Develop an understanding early of which services (respite, home-based, family support, mentoring, flexible funds) might be the most difficult to sustain
- Increase emphasis on developing and maintaining principles at the system level (family involvement and interagency coordination) as well as service level
- Use multiple sustainability strategies (e.g., create a viable focal point, forge interagency partnerships, include key stakeholders, create a strong family organization, infuse SOC into larger system, partner with state to make needed policy/regulatory changes)

What's Next?
At the National or Program Level – a few examples

- Continue to do what is occurring in the session – work to better understand systems change models.
- Synthesize information around specific topics as accessible resource materials for program implementers and policy makers.
- Improve learning models that bring together experts and learners.
- Develop performance measurement models and benchmarks for local use.
- Develop a better understanding of program characteristics that are not well understood.