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Symposium

System of Care Implementation:
Findings from a National Survey

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Development of the System of Care Implementation Survey and County Selection and Respondent Identification and Recruitment Procedures

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Questionnaire Development

- Multistage Process

  – Comprehensive review of the literature to identify domains associated with the successful implementation of systems of care (14 factors identified)

  – Teams, including parents, with knowledge and expertise
    - drafted domain definitions
    - generated survey items

  – Survey items were edited for redundancy and structured in a common format for administration

  – A national panel of six "experts"
    - reviewed draft domain definitions and survey items
    - rated the importance of each item in assessing the domain
    - identified gaps that needed to be filled in

  – Domain definitions and survey items were modified based on experts' comments
    - some items were eliminated
    - a few items were added

  – 2 parent consultant reviewed draft for "readability" and "understandability"

  – The process resulted in the initial draft of the SOCIS.

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Piloting the SOCIS Survey and Data Collection Procedures

- The SOCIS was pilot tested in the Spring 2006 to assess the:
  – adequacy of the draft SOCIS protocol
  – feasibility of the proposed data collection procedures
  – amount of time that was required to obtain survey completed responses

- Seven counties were randomly selected based on population sizes

- About 50 respondents total from the four respondent groups (MH administrators/service providers, Special Education administrators/service providers, Family members/advocates, Other child serving personnel)

- A subsample of respondents participated in a cognitive interview process during which they discussed their reactions to and understanding of each survey item

- To identify respondents
  – emails were sent to the state directors of children's mental health services asking them for a contact within selected counties who could assist us in identifying potential respondents within each stakeholder group
  – FMHI staff contacted the county designees by phone to identify the potential respondents
  – Interviewers followed a script that
    - explained the purpose of the study
    - provided consent information
    - described for the county contacts the five stakeholder groups we sought

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Pilot Challenges

- Despite initial county contacts, connecting with them proved time consuming
  – five calls over an average time period of seven days were necessary to obtain a completed interview
  – to decrease the time needed to identify survey respondents, web searches were instituted

- Identifying the appropriate informants to complete the SOCIS
  – each state has a somewhat different organizational structure associated with the various children serving systems
    - e.g., smaller counties more likely regionally-based as opposed to county-based, larger counties multiple entities within the county

- Respondents found it difficult to restrict responses to the designated county

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Challenges *cont…*

- Multiple strategies were made available and piloted
  – telephone interviews
  – use of email attachments
  – faxes
  – mailing a hard copy with stamped return envelope

- Respondents identified several issues
  – survey was too long
  – experienced difficulty answering the questions in some sections of the survey
  – others wanted an on-line survey

- In response to these comments and suggestions
  – survey was shortened
  – added a "Don't Know" response option
  – respondents were given the opportunity to skip sections that they did not have sufficient information to answer
  – a web-based version of the survey was developed.

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Selection of National Sample of Counties

- Used probability sampling

- Used data on population size and percentage of individuals living in poverty on all 3,083 US counties (National Association of Counties, 2008)

- Counties were categorized into 14 strata (7 population sizes x 2 poverty levels)

- A disproportionate stratified probability sample of 225 counties randomly was selected from these strata

- Smaller counties were under represented to insure counties serving the majority of the nation's children were included

- The resulting sample included 225 counties from 46 states and the District of Columbia (Not sampled: Alaska, Montana, Nevada, and South Dakota).

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County Selection

- In each of the 225 counties we attempted to identify 3-15 key informants across the four key stakeholder groups:
  - Mental Health administrators/direct care service providers
  - Special Education administrators/direct care service providers
  - Family members/advocates
  - Personnel from other child serving agencies (e.g., child welfare, juvenile justice)

- Goal to obtain 1,959 completed SOCIS

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Recruitment of Respondents

- Experienced field staff
  - received a one-day intensive training program
  - assigned "caseloads" of counties within the same state to become familiar with the manner in which the states were organized
  - participated in weekly supervisory meetings

- Staff conducted web searches to identify key informants in each stakeholder group
  - contacted them using the telephone and/or email
  - those agreeing were given multiple options for completing the SOCIS - most selected the web-based option
  - sent weekly reminder emails
  - after five weeks their names was removed and efforts were made to recruit another individual from that stakeholder group

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So what did we learn?

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Symposium

Overview of the System of Care
Implementation Survey (SOCIS):
Instrument and Descriptive Results

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Overview of Presentation

- Describe final sample of counties and respondents

- Describe psychometrics of the SOCIS

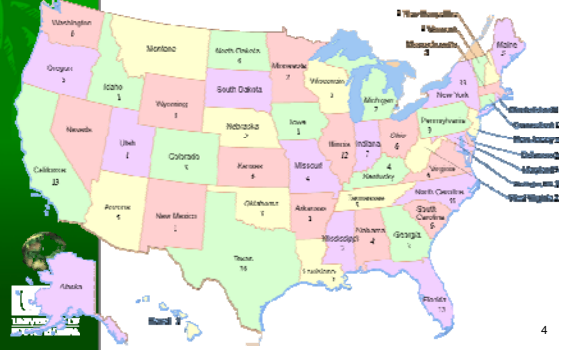- Provide overview and descriptive statistics of results

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Sample - Counties

- Successful in obtaining responses from 225 counties

- These counties were located in 46 states and DC.

- Not included: Alaska, Montana, Nevada, and South Dakota.
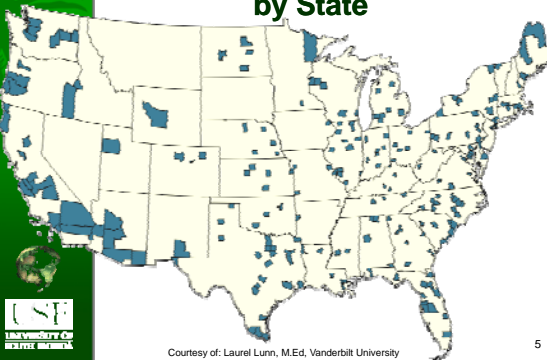
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Number of Counties by State (N=225)

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Distribution of Counties by State

Courtesy of: Laurel Lunn, M.Ed, Vanderbilt University

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Respondents

- Successful in obtaining 910 respondents

- Respondents reported knowing the mental health system well

"How knowledgeable are you about you local children mental health service system?"

Mean = 4.32, with 5 = very knowledgeable

1   2   3   4   5
No Knowledge   Very Knowledgeable

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Number of Respondents per State (N=910)

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Respondents

- Mental health administrators or direct care providers — 307 (34%)
- Special Education administrators or direct care providers — 243 (27%)
- Family members or advocates — 72 (8%)
- Other service-related personnel — 288 (31%)

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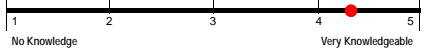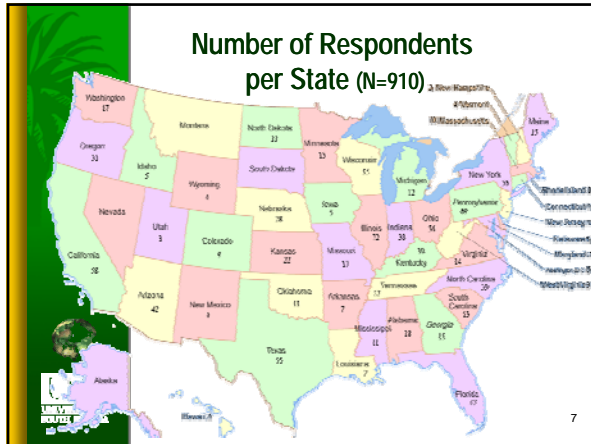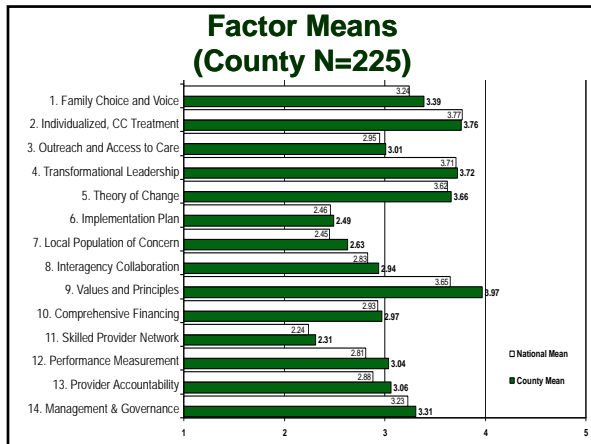### Number of respondents per county

- 56% of the counties (127) had less than 3 respondents
- 37% of the counties (84) had between 4 and 8 respondents
- 6% of the counties (14) had between 9 and 27 respondents

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SOCIS
System of Care Implementation Study

- 14 factors or subscales

  (1) Family Choice and Voice, (2) Individualized CC tx, (3) outreach and access to care, (4) transformational leadership, (5) theory of change, (6)implementation plan, (7) local population of concern, (8) interagency collaboration, (9) values and principles, (10) comprehensive financing plan, (11) skilled provider network, (12) performance measurement system, (13) provider accountability, and (14) management and governance

- 70 items (or 5 to 6 items per factor)

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How did the SOCIS questionnaire perform?

- Coefficient alphas reveal acceptable reliability of each of the 14 factors (ranged from .69 (skilled provider Network) to .94 (transformational leadership)
- 10 of the 14 factors had alphas at .80 or above
- Confirmatory Factor Analysis (CFA): all factors were measured reliably and were significantly correlated with each other as predicted by the model. The inter-correlations among factors formed a second order factor "general factor."

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What did we find?

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Factor Means (County N=225)

Factor	National Mean	County Mean
1. Family Choice and Voice	3.24	3.39
2. Individualized, CC Treatment	3.77	3.76
3. Outreach and Access to Care	2.95	3.01
4. Transformational Leadership	3.71	3.72
5. Theory of Change	3.62	3.66
6. Implementation Plan	2.46	2.49
7. Local Population of Concern	2.45	2.63
8. Interagency Collaboration	2.83	2.94
9. Values and Principles	3.65	3.97
10. Comprehensive Financing	2.93	2.97
11. Skilled Provider Network	2.24	2.31
12. Performance Measurement	2.81	3.04
13. Provider Accountability	2.88	3.06
14. Management & Governance	3.23	3.31

Factor means

- Highest
  - Values and principles
  - Individualized, culturally competent treatment
  - Transformational leadership
  - Theory of change
- Lowest
  - Skilled provider network
  - Implementation plan
  - Local target population of concern
  - Financing Plan

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Factor means

- 72% of counties have a factor mean above "3" on 6 or more factors on SOCIS.

- 45% of counties have a factor mean above "3" on 9 or more factors on the SOCIS.

Factors are on a five point scale with 5 being the highest

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% of counties above an average factor rating of:	"3" Moderate Extent	"4" Great Extent
Values and Principles	81%	59%
Individualized and CC Tx	95%	29%
Transformational Leadership	84%	37%
Theory of Change	86%	26%
Family Choice and Voice	77%	13%
Management and Gov	73%	11%
Performance Measurement System	51%	8%
Four Factors: Access, Interagency, Financing, & Accountability	~46%	~9%
Local Population of Concern	33%	12%
Implementation Plan	28%	9%
Skilled Provider Network	8%	0%

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Mean ratings per respondent

- Respondent from MH had the highest factor means.

- MH means higher than family members/advocates

- Respondents from the Education sector had the lowest ratings.

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"They're harmless when they're alone, but get a bunch of them together with a research grant and watch out."

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