National Effort

• This Children’s Mental Health Initiative was first authorized in fiscal year 1992 by section 561-565 of the Public Health Service Act, as amended.

• This program has funded a total of 173 grantees across the country now, including our Pennsylvania System of Care Partnership.
DEFINING SYSTEM OF CARE…

A PARADIGM SHIFT
System of Care is, first and foremost, a set of values and principles that provides an organizing framework for systems reform in partnership with youth and families.

Adapted from Stroul, B. 2005. Georgetown University. Washington, D.C.
Characteristics of Systems of Care as Systems Reform Initiatives

FROM

- Fragmented service delivery ➔ Coordinated service delivery
- Categorical programs/funding ➔ Multidisciplinary Teams and Individualized services & supports
- Array of services only ➔ Crisis prevention planning
- Reactive to crises ➔ Least restrictive settings
- Focus on high use/restrictive ➔ Youth in families & communities
- Youth out-of-home ➔ Community-based responsibility
- Centralized authority ➔ Empowerment/active participation

Characteristics of Systems of Care as Systems Reform Initiatives

FROM
- Youth-only focus
- Needs/deficits assessments
- Families as problems
- Youth as problems
- Cultural blindness
- Highly professionalized
- Youth/family must fit services
- Input-focused accountability
- Funding tied to programs

TO
- Family as focus
- Strength-based assessments
- Families as partners
- Youth as partners
- Cultural/linguistic competence
- Coordinated with informal and natural supports
- Individualized approach
- Outcome/results-oriented
- Funding tied to populations

System Reform/Transformation Focuses On...

- **Policy Level** (e.g. financing; regulations; rates)
- **Management Level** (e.g. data; quality improvement; human resource development; system organization)
- **Frontline Practice Level** (e.g. assessment; care planning; care management; services/supports provision)
- **Community Level** (e.g. partnership with families, youth, natural helpers; community buy-in)

<table>
<thead>
<tr>
<th>Recipient of service plan information and service requirements</th>
<th>Participating in service planning</th>
<th>Service planning team leader</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unheard voice in program evaluation</td>
<td>Participating in evaluation</td>
<td>Partner in developing and conducting program evaluations</td>
</tr>
<tr>
<td>Recipient of services and supports</td>
<td>Partner in planning/developing services/supports</td>
<td>Service/supports providers</td>
</tr>
<tr>
<td>Uninvited to training activities</td>
<td>Participating in training</td>
<td>Partnering in developing training and being trainers</td>
</tr>
<tr>
<td>Angry and resistant to what may feel like coercion</td>
<td>Self-advocacy and peer support</td>
<td>System-level advocacy and expanded</td>
</tr>
</tbody>
</table>

The Pennsylvania System of Care Partnership will transform the way that the categorical systems work with youth and families that have complex needs and are involved in mental health plus child welfare, and/or juvenile justice.
Population of Focus

• Youth ages 8-18, who have serious mental health needs that are not exclusively on the Autism Spectrum, and their families
• These youth are also currently receiving services from the child welfare and/or juvenile justice systems
• And they are in or at risk of out-of-home placement
Pennsylvania’s Opportunity

Six years of funding (2009 – 2015)

- We will receive $9 million in federal funds
- We have agreed to provide approximately $9 million of matching or in-kind contributions
- Over 1,000 youth and families will be served during the course of this SAMHSA cooperative agreement.
Cooperative Agreement

With SAMHSA funds, the Commonwealth has agreed to provide:

– Effective leadership for change
– Family driven, Youth driven and culturally proficient work
– Collaboration and service integration
– Evaluation of outcomes and cost efficiencies
– Key Staffing
– Logic model and strategic plan
– Plan for sustainability
The Starting Commitment

• 15 counties will be chosen to participate over the next 5 years
• Each participating county will:
  – build a system that includes High Fidelity Wraparound, the practice model defined by the National Wraparound Initiative
  – serve at least 25 youth annually from the population of focus
High Fidelity Wraparound

A vital component of the System of Care Initiative
High Fidelity Wraparound
It’s NOT Wraparound as we in Pennsylvania know it

• It is not a service,
• It is not a program,
• It requires extensive training, coaching, supervision, and monitoring, and
• It relies on Natural Supports
• It involves unique staff positions including a coach, a facilitator, a youth support partner and a family support partner
• It is a vital component of the System of Care Partnership
High Fidelity Wraparound

• The plan is developed and implemented by a youth and family centered team, consisting of the youth, the family and the three to seven people who care and know the child and family best.

• The process is individualized based on the strengths and culture of the child and their family and is needs, rather than services, driven.

• Professional services are involved, but natural supports are 50% or more of the plan
Phases of Wraparound

- Engagement and team preparation
- Plan development
- Implementation
- Transition

Time
Youth and Family Training Institute

• Provides training and credentialing
• Provides coaching
• Conducts on-going evaluation using the Wraparound Fidelity Index
• Continues to provide support for counties implementing HFW
• Provides information and education
What Does the Research Say?

High Fidelity Wraparound within a System of Care can produce significantly better outcomes for children and families with significant needs than traditional approaches:

– Decreased restrictiveness of residential environments
– Improved behavior and mental health symptoms
– Improved school and early care outcomes
– Decreased family and child safety issues and risk factors
– Increased family engagement and satisfaction with services
– Increased family resources to support their own children
Pennsylvania System of Care
- the Structure
State Leadership Team

• 50% are youth and families who have personal experience to guide the team
• 50% are representatives and system partners from
  – Mental Health,
  – Child Welfare,
  – Juvenile Justice (JCJC and PCCD),
  – Governor’s Commission on Children and Families,
  – Drug and Alcohol
  – Education
The State Leadership Team includes:

- Shaheed Days  
  Youth
- Ellen DiDomenico  
  Executive Director, Governor’s Commission on Children and Families
- Alex Knapp  
  Youth
- Stan Mrozowski  
  Director, Bureau of Children’s Behavioral Health Services
- Laurie Mulvey  
  Family member
- Chris Nobles  
  Youth
- Valarie Oulds-Dunbar  
  Family member
- Michael Pennington  
  Director, Office of Juvenile Justice, Pennsylvania Commission on Crime and Delinquency
- Robin Rothermel  
  Director, Bureau of Drug and Alcohol Programs
- Tom Seben  
  Division Chief, Division of Monitoring and Improvement – West, Bureau of Special Education
- Keith Snyder  
  Deputy Director, Juvenile Court Judges Commission
- Karan Steele  
  Family member
- Ladona Strouse  
  Family member
- Cathy Utz  
  Acting Deputy Secretary, Office of Children, Youth and Families
There are Staff whose sole focus will be System of Care development at the State and in the Partner Counties.
Staffing Requirements

Project Director – Karen Mallah
Lead Evaluator – Antonio Fevola
Family Involvement/Cultural Competence Specialists – Marsha Banks and Crystal Karenchak
Youth Involvement/Cultural Competence Specialists – Crystal Davis and Brian Satterfield
Communications, Training and Technical Assistance - TBD
Additional evaluation staff - TBD
Key Partners

• **PA Families Inc** is Pennsylvania’s SAMHSA funded statewide family organization that hires and provides supervision to the Family Involvement/Cultural Competence Specialists.

• **The Youth and Family Training Institute** at UPMC is responsible for the implementation and monitoring of High Fidelity Wraparound, which will be the fundamental youth and family team process for all partner counties.
Partnership Vision

Every youth and family in Pennsylvania will be able to access and navigate a unified network of effective services and supports that are structured in adherence to System of Care values and principles.
Partnership Mission

The youth, family, and system leaders of Pennsylvania will work as equal and trusted partners in creating sustainable change which will empower youth, families, and all youth-serving systems to be responsible and accountable for outcomes that lead to the fulfillment of hopes and dreams.
Partnership Parameters

- Youth driven
- Family driven
- Equal partnership in governance
- Integrating child-serving systems in partnership with youth and families
- Maintaining an inventory of existing programs and services
- Acknowledging and valuing natural and community supports
Partnership Parameters

- Assuring cultural and linguistic competence
- Simplifying points of referral
- Diverting pre-adjudicated youth
- Establishing an inter-agency assessment process
- Sharing information appropriately
- Funding services and supports
- Gathering and reporting data
The Ultimate Vision

• We’ve begun with 5 Counties: Chester, Erie, Lehigh, Montgomery, and York
• We will choose 5 more counties in fall 2011 and five more in 2012
• Our goal is that these counties transform their systems, using this structured, youth driven and family driven approach to working with youth in complex, multi-system situations
• And that Pennsylvania will expand the structured approach to System of Care development to all Pennsylvania counties
• We are applying for a one year grant from SAMHSA that we will use to plan our System of Care expansion