

Service Partnership for Children of High Conflict Families.

Development of Local Systems of Care



▶ **"Systems of Care is not a Program.**



**It is a philosophy of
how care should be delivered.**

Systems of Care is an approach to services that recognizes the importance of family, school and community,



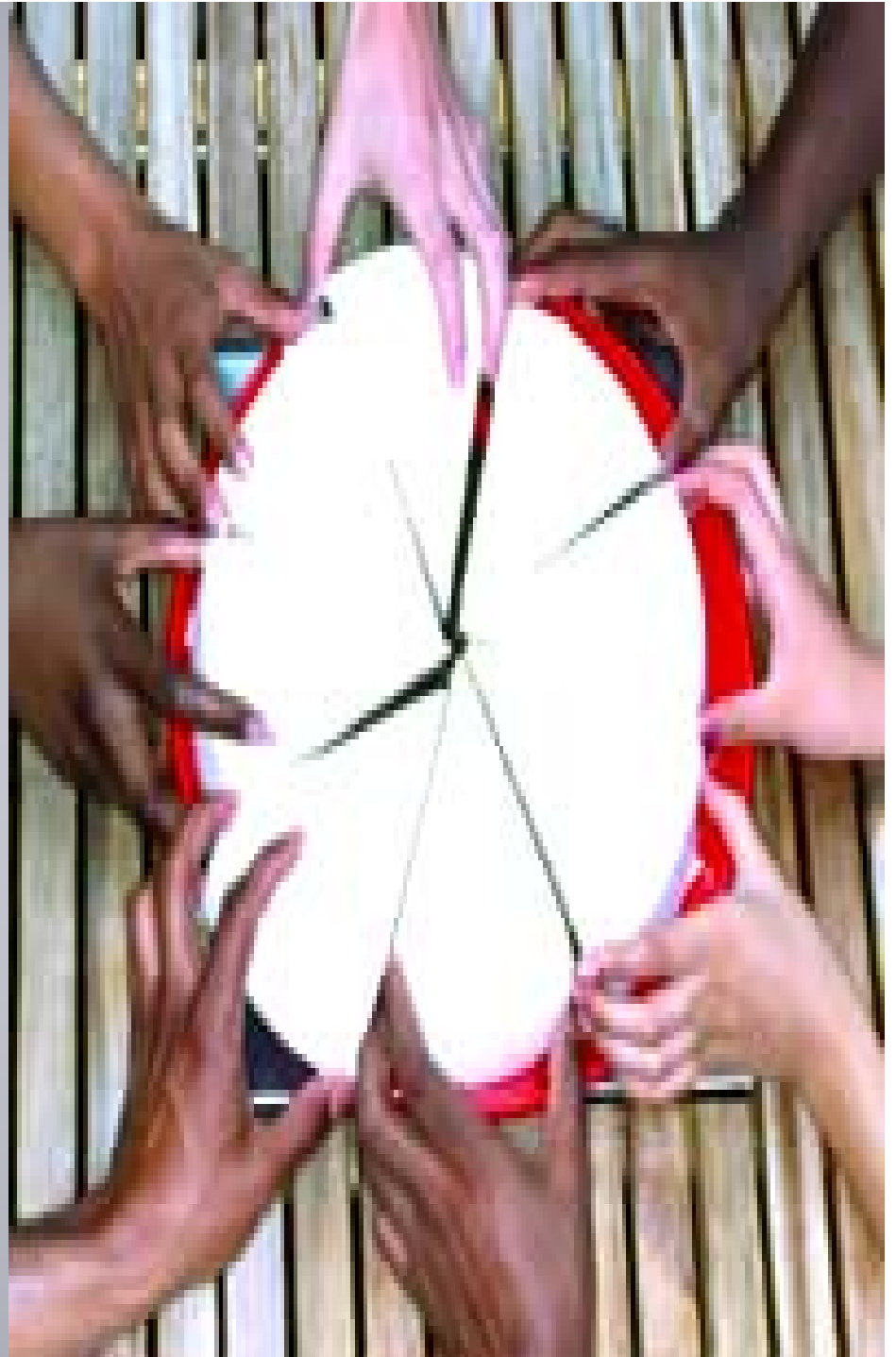
and seeks to promote the full potential of every child and youth by addressing their physical, emotional, intellectual, cultural and social needs." SAMHSA



► A System of Care is about Partnership —



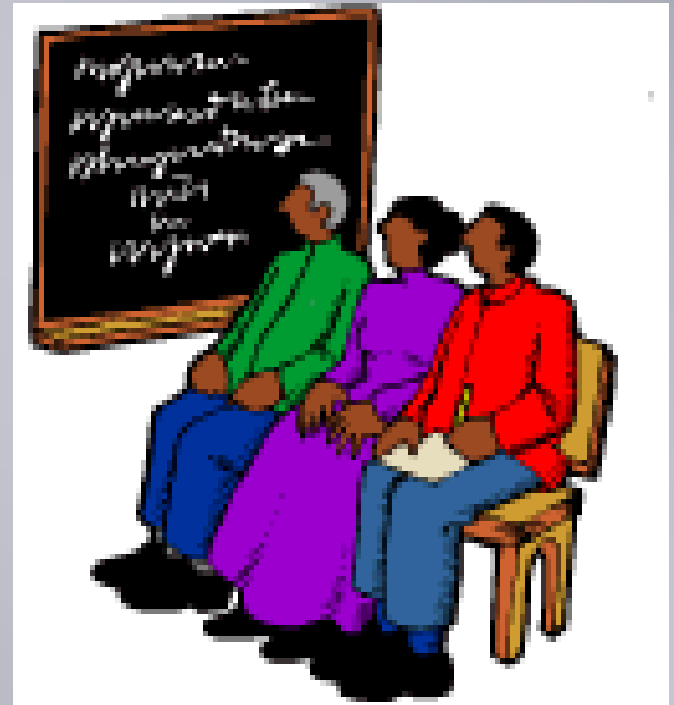
**a partnership
made up of
service
providers,
families,
teachers, and
others who
care for a
child.**



Together, the team develops an individualized service plan that builds on the unique strengths of each child and each family.



This customized plan is always implemented in a way that is consistent with the family's culture and language.



- ▶ Collaboration across agencies and courts at policy, management and service levels
- ▶ Partnership with families
- ▶ Cultural and linguistic competence

- ▶ Shared governance and liability across systems and with families
- ▶ Planning and Monitoring teams
- ▶ Cross-agency MIS

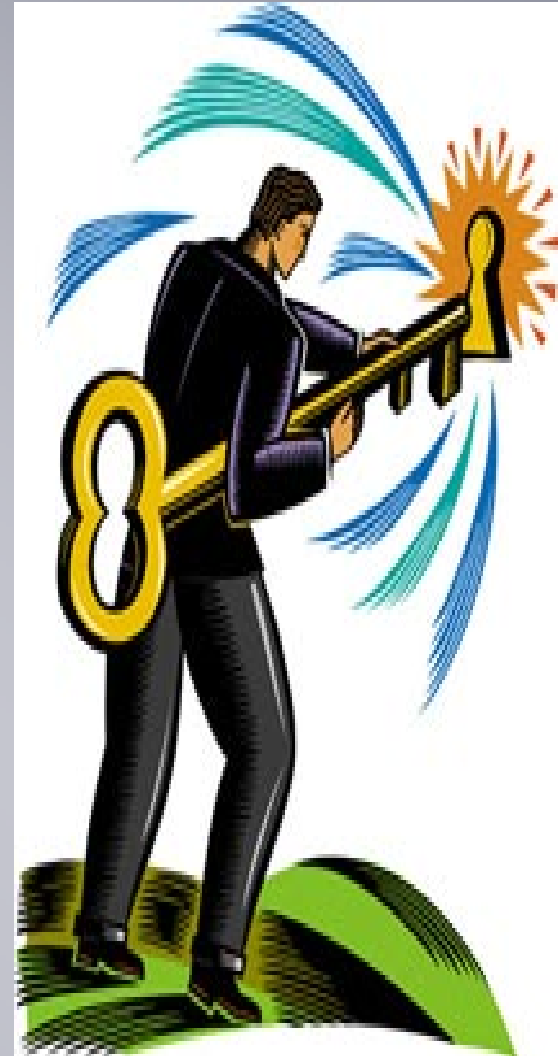
- ▶ Shared outcomes across systems, reflecting community values
- ▶ Organized pathway to services and supports
- ▶ Interagency/family services
- ▶ Blended, braided, or coordinated financing



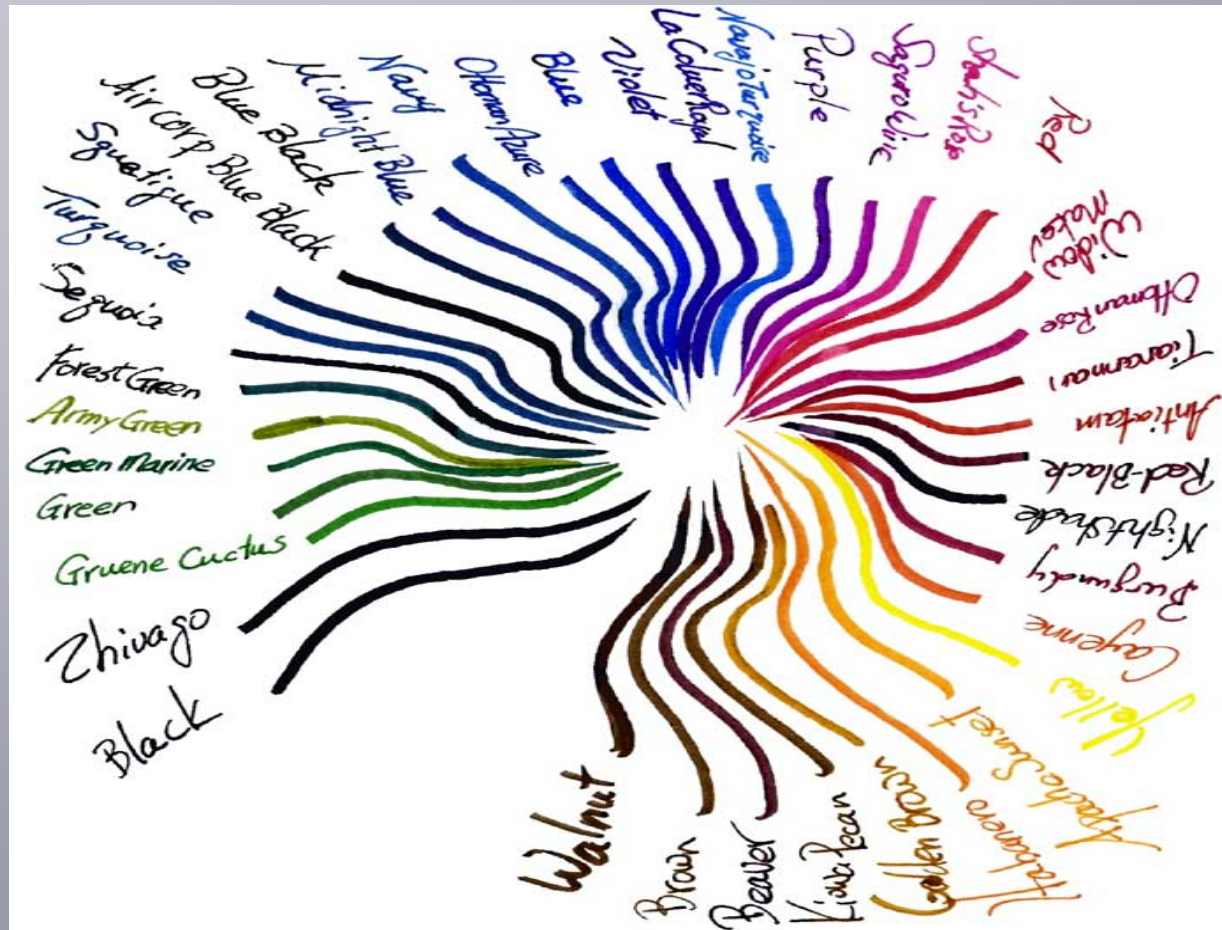
► Collaboration lends to creativity



**Collaboration is key
to effective work
with high risk
populations.**



Rainbow of services



Natural helpers are essential



Collaboration Guidelines

Seven Cs of Strategic Collaboration

- ▶ **CLARITY** of Purpose
- ▶ **CONNECTION** with Purpose and People
- ▶ **CONGRUENCY** of Mission, Strategy, and Value
- ▶ **CREATION** of Value
- ▶ **COMMUNICATION** Inside and Outside
- ▶ **CONTINUAL** Learning
- ▶ **COMMITMENT** to the Partnership

Core Values

- ▶ **Services should be child-centered, with the needs of the child and family dictating the types and mix of services provided;**
- ▶ **Services should be community based, with the focus of services as well as management and decision making responsibility resting at the community level;**
- ▶ **Services should be culturally competent, with agencies, programs, and services that are responsive to the cultural, racial and ethnic differences of the population they serve.**

Critical Systems Issues

- ▶ **Lack of Coordinated Care**
- ▶ **Lack of Community Based Alternatives**
- ▶ **Lack of Culturally Competent Services**
- ▶ **Lack of Family Involvement**

Responsibilities of the Service Partnership

- ▶ **Oversee Fidelity of Care Coordination/Wraparound Process**
- ▶ **Identification of Gaps in Services**
- ▶ **System and Service Advocacy**
- ▶ **Community Education**
- ▶ **Resource Development/Fund Raising**
- ▶ **Cultural Competency**

The Wraparound/Care Coordination Process...

- ▶ **Gives families access to advocacy, information and referral services.**
- ▶ **Partners with the parent and family to determine the child's strengths and needs.**
- ▶ **Creates a Child Specific/Wraparound Team with representation from family, friends, community supports, therapists, school personnel, etc. to develop an Individualized Service Plan.**

Child FIRST

Evaluation of a Wraparound Process for Children Exposed to Violence

Child Family interagency Resource, Support, and Training Program

(Child FIRST) specializes in serving young children and their families who are at risk for developmental delays or social/motional, behavioral difficulties. The program uses a relationship-based model influenced mainly by child-parent psychotherapy framework, placing primary emphasis on the attachment relationship of the young child.

Child FIRST

Evaluation of a Wraparound Process for Children Exposed to Violence

Child FIRST staff conducts a home or community based comprehensive assessment of all families referred which includes developmental and social/emotional screening, violence exposure screening, family priority and strengths functioning and needs.

Child FIRST implements a wraparound approach to develop and coordinate a family-driven plan of services and supports.

Child FIRST

Evaluation of a Wraparound Process for Children Exposed to Violence

- ▶ The sample consist of 82 children enrolled in Child FIRST program for a period of 26 months.
- ▶ Only children who were assessed at program intake and discharge were included in the sample and those parents who signed releases.

Child FIRST

Evaluation of a Wraparound Process for Children Exposed to Violence

- ▶ During the period 282 children were screened:
- ▶ 139 were not identified as violence exposed
- ▶ 143 were positive for family violence exposure
- ▶ 132 received services for family violence exposure

Child FIRST

Evaluation of a Wraparound Process for Children Exposed to Violence

- ▶ System level data about the types of services to which violence exposed children and their families were recommended and requested was gathered.
- ▶ The form list 186 different services categorized into one of 12 domains.

Child FIRST

Evaluation of a Wraparound Process for Children Exposed to Violence

- ▶ The mean number of services families were recommended across domains, ranged from 11 to 34 services. All families had at least one recommendation in all 12 domains.
- ▶ 84% of all services were received within 90 days.

Child FIRST

Evaluation of a Wraparound Process for Children Exposed to Violence

- ▶ Children experience fewer traumatic events both at the family violence level and non-family events
- ▶ Children experienced fewer intrusive and avoidance behaviors typically associated with trauma exposure. This indicates that the program impacted important post-traumatic behaviors likely experienced as a result of traumatic events.

Child FIRST

Evaluation of a Wraparound Process for Children Exposed to Violence

- ▶ Children who improved the most received more hours of services and were enrolled in the program for a longer period of time.
- ▶ Results showed Parents reported statistically significant decreases in all aspects of parenting stress assessed.

Community Collaborative Membership

Broad Community Representation is the goal of the Community Collaboratives. The composition of the group should be reflective of the families and children served.

- ▶ Families of children with high conflict and/or domestic violence
- ▶ Clergy
- ▶ Family Advocates
- ▶ Business
- ▶ Care Coordinators
- ▶ Mental Health Clinicians
- ▶ Juvenile Justice
- ▶ Funded Initiatives
- ▶ DCF Management
- ▶ Courts
- ▶ Schools
- ▶ Community Action Agencies
- ▶ Legal Representatives
- ▶ Recreational
- ▶ Police/Fire
- ▶ Foundations
- ▶ Criminal Justice
- ▶ Shelters / Housing
- ▶ DHS

WE NEED YOU!!!!

Why should you become a member of the service partnership?



- To improve mental health and social outcomes for children exposed to high conflict situations and/or domestic violence
- To improve the coordination of services for children and families
- To empower families as full partners and key decision makers in services
- To expand the capacity and variety of community-based services
- To improve the accountability of providers through effective data and reporting
- To provide care for children in the least restrictive environment
- To provide community based and culturally competent service plans and service delivery
- To provide comprehensive training for agencies and the community