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Systems of Care

Many children and youth in the child welfare system and those at risk of abuse and neglect have a variety of physical, mental, social, emotional, educational, and developmental needs. Child welfare professionals have worked with their counterparts in other agencies for years to piece together the services available for these children and youth and their families.

Systems of care is a service delivery approach that builds partnerships to create a broad, integrated process for meeting families' multiple needs. This approach is based on the principles of interagency collaboration;

individualized, strengths-based care practices; cultural competence; community-based services; accountability; and full participation of families and youth at all levels of the system. A centralized focus of systems of care is building the infrastructure needed to result in positive outcomes for children, youth, and families.

This bulletin is selected from information on the Systems of Care section of the Child Welfare Information Gateway website: www.childwelfare.gov/systemwide/service/soc/

In addition to the information found here, the Information Gateway website includes a Systems of Care Toolkit that addresses policies, infrastructure, services and supports, and evaluation: www.childwelfare.gov/systemwide/service/soc/build/soctoolkit.cfm

The website also includes a Systems of Care Resource Library: www.childwelfare.gov/systemwide/service/soc/library.cfm

History of Systems of Care

Since the 1975 passage of the Individuals with Disabilities Education Act (Public Law 94-142), which ensures that all children with disabilities have available to them a free and appropriate education in the least restrictive environment, there has been a growing movement to deliver services to children within their homes, schools, and communities. It has also become clear that no single child-serving agency, because of policy, programmatic, or financial

limitations, has the ability to provide all the services and supports needed by families with children who have disabilities and/or are vulnerable to abuse and neglect.

During the early 1980s, local educational authorities joined child welfare in supporting children with various disabilities, yet children with serious emotional disturbances often remained unserved, underserved, or inappropriately served. In 1984, the National Institute of Mental Health, U.S. Department of Health and Human Services, initiated the Child and Adolescent Service System Program to help States plan for and design systems of care to address the mental health needs of children who were experiencing a serious emotional disturbance.

The systems of care approach was originally created in response to concerns that:

- Children in need of mental health treatment were not getting the services they needed

- Services were often provided in restrictive out-of-home settings

- Few community-based services were available

- Service providers did not work together

- Families were not adequately involved in their child's care

- Cultural differences were rarely taken into account (Stroul, 1996)

Historically, systems of care have focused on improving access to and availability of services and on reducing service and funding fragmentation. In addition, systems of care have focused on improving the skills, knowledge, and attitudes of frontline service providers. Increasingly, systems of care

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are concerned about "treatment efficacy," ensuring effective therapeutic interactions between practitioners and children in care and their families (Pires, 2002) and system reform.

Systems of Care and Child Welfare

Although systems of care were originally developed to address the needs of children with serious emotional disturbances, the approach is now being applied to other populations whose needs require services from multiple agencies, including families in the child welfare system. This broader implementation will help more families benefit from the systems of care focus on improving access to and availability of services, reducing service and funding fragmentation, and improving the skills, knowledge, and attitudes of frontline service providers.

The Children's Bureau conducts the Child and Family Services Review (CFSR) process as a means to assess State child welfare agencies' performance on seven outcomes and seven systemic factors. Results from these reviews have documented the need for a more comprehensive strategy to support children, youth, and families in the areas of safety, permanency, and well-being. Systems of care shows promise as a means to improve performance in these areas, for example, by helping to prevent placement in out-of-home care, reduce the number of placements, and address the primary health, mental health, and educational needs of children and youth and their families.

Systems of care is now being used to address needs identified by States' CFSRs and improve outcomes for children and families involved with child welfare, including:

- Children, youth, and families at risk of child maltreatment

- Children and youth who have been substantiated for maltreatment but have not been removed from the home

- Children and youth in State custody

Systems of care has been used as a catalyst for changing the way child and family service agencies organize, fund, purchase, and provide services for children, youth, and families with multiple needs. This approach has been applied across the United States in various ways at the macro level (through public policy and system change) and at the micro level (in the way service providers directly interact with children and families in need of assistance). Systems of care is demonstrated through multiagency sharing of resources and responsibilities and full participation of professionals, families and youth, and community stakeholders as active partners in planning, funding, implementing, and evaluating services and system outcomes.

Systems of care enables cross-agency coordination of services for child welfare-involved children, youth, and families regardless of where or how they enter the system. Agencies work strategically, in partnership with families and other formal and informal supports, to address children's unique needs. To do so effectively, systems of care communities:

- Agree on common goals, values, and principles to guide their work

- Develop a shared infrastructure to coordinate efforts toward the common goals of safety, permanency, and well-being

- Within that infrastructure, work to ensure the availability of a high quality array of evidence-based and promising practices and supports designed to support families and protect children from maltreatment, while promoting their well-being and stability in a permanent home

It is important to note that systems of care is not a "program" or "model." Instead, it serves as a framework for guiding processes and activities designed to meet the needs of children and families. States and communities must have the flexibility to implement this service delivery approach in a way that evolves over time as needs and conditions change.

Guiding Principles of Systems of Care

In systems of care, State, county, and local agencies partner with families and communities to address the multiple needs of children and families involved in child welfare and other service systems. At the heart of systems of care is a shared set of guiding principles that include:

- Interagency collaboration

- Individualized strengths-based care

- Cultural competence

- Child, youth, and family involvement

- Community-based services

- Accountability

ILLUSTRATION OF A SYSTEMS OF CARE APPROACH

Monte is a 13-year-old boy in the child welfare system. His mother has a history of substance abuse and child neglect. Due to a shoplifting charge, Monte has recently become involved with the juvenile justice system as well.

Thanks to the systems of care approach in his community, local agencies and organizations partner with the family in a coordinated way to keep Monte in his home and help his family access services that address their strengths and needs:

- By arranging to meet Monte and his mother in their home at a time that does not conflict with the family's schedule, agency representatives are able to work in partnership with the family to ensure the goals of their individualized service plan can be met.

- By working with the school system, the care coordinator is able to arrange alternative busing for Monte during his stay in a temporary shelter, allowing him to continue at his current school.

- By working as a liaison with the juvenile justice and dependency court judges, a family advocate ensures Monte's family is able to adhere to multiple agency requirements and expectations.

- With support of flexible funding, Monte is able to attend music lessons, which he identified as an interest, while his mother participates in mandatory substance abuse counseling, reducing the need for childcare.

These principles are essential elements of any successful system of care. The implementation of these principles reflects the common goals of the agency, community, and family to ensure the safety, permanency, and well-being of children, youth, and families.

Interagency Collaboration

Interagency collaboration extends beyond child- and family-serving agencies to include public, private, nonprofit, community, and faith-based formal and informal service providers and supports. Examples include child welfare, juvenile justice, mental health, education, substance abuse, and health agencies and (if separate) the agency responsible for serving Native American families, as well as child advocacy and parent empowerment organizations, places of worship, local business associations, colleges and universities. In a system of care, these collaborative partners work together to address the complex needs of children and families in a spirit of community partnership. Interagency collaboration is reflected at both the governance and direct practice level.

Formal interagency governance teams can:

- Provide financial support to fill service gaps
- Develop interagency training agendas
- Develop funding strategies
- Make joint agency budget recommendations
- Create interagency management information systems
- Provide gatekeeping functions to reduce or end out-of-community placements

- Develop communication plans and program development strategies

Why is interagency collaboration important?

- Interagency collaboration creates a sense of community ownership for supporting children and families and addressing their needs and strengths.

- Children and families come to the child welfare system with multiple needs requiring the assistance of multiple agencies. Often, when multiple services are required, the effectiveness of any one service is related to the availability and effectiveness of the other services needed by the family.

- Interagency collaboration reduces duplication of services and allows for greater efficiency in the use of public resources.

- Collaboration creates a fuller understanding among community and agency partners of the policies and statutes that drive funding and practice issues, while maximizing funding and programmatic resources available to children and families.

- Interagency collaboration allows for the creation of data systems that can track children and families across agencies and provides for a unified voice to legislators on the unmet needs of children.

Questions to ask about systems of care and interagency collaboration:

- Are all child-serving agencies involved in the system of care?
- Is there broad representation of community stakeholders involved in the system of care?

- Are there interagency agreements, memoranda of understanding, or statutes that forge the interagency collaboration?

- Do families have a meaningful role in all interagency collaboration efforts?

- Are processes in place that allow for the State/county/city/tribal interagency teams to have a governance role within the system of care?

- Is each agency partner contributing funds to the system?

- Are all general fund dollars being maximized by matching them up with Federal funds where possible?

Individualized, Strengths-Based Care

Individualized, strengths-based care acknowledges each child and family's unique set of strengths and challenges. Formal and informal supports are used to create services and supports for each child and family (rather than families "fitting in" to preexisting service structures). Issues of culture, language, ethnicity, gender, age, religious background, and class are addressed in the individualized plan of care. The plan changes frequently based on ongoing individualized assessments of family strengths and needs.

Plans are created by teams comprising people who know the child and family, including neighbors; friends; family; and child welfare, mental health, education, substance abuse, and juvenile justice professionals. The team's major task is to create an individualized plan of care that is community- and strength-based, made up of formal and informal services and supports.

Why is individualized, strengths-based care important?

- Each child and family has unique attributes that must be addressed if services are going to be successful.

- Individualized care fully engages the family in designing and implementing a plan of care.

- Children and families receive services that match their unique strengths and needs.

Questions to ask about systems of care and individualized strengths-based care:

- Does the individualized care team always involve the family when designing a plan of care?

- Do plans of care take into consideration the child and family's cultural, linguistic, and religious/spiritual background?

- Do plans of care maximize all natural supports within the family and community?

- Are all funding streams being maximized within the system of care infrastructure?

- Does the system of care include a flexible fund to help create nontraditional services that are essential to the plan of care for individual children and families?

Cultural Competence

Culture and language express the world as children and families experience it. To best serve those in need of services and supports, providers must develop the capacity to understand the cultural filters that mediate the family's perspective of the agency and its plan of care. Likewise, agency professionals and service providers benefit from developing the capacity to assess the ability of individual

staff and the service system overall to function effectively in multicultural communities.

Cultural competence refers to:

- A defined set of values and principles, as well as behaviors, attitudes, policies, and structures, that enable systems to work effectively cross-culturally

- The capacity to value diversity, conduct self-assessment, manage the dynamics of difference, acquire and institutionalize cultural knowledge, and adapt to diversity and the cultural contexts of the communities served

- The incorporation of the above in all policymaking, administration, practice, and service delivery, and the systematic involvement of consumers, key stakeholders, and communities

Why is cultural competence important?

- An individual's or family's culture can affect the kinds of services needed, as well as the optimal place, time, and method of delivering services and supports.

- Addressing issues of culture, race, class, and ethnic background increases the likelihood of family engagement and a positive intervention.

- By working to understand the cultural needs of the families within systems of care, service providers convey the importance of respect, dignity, nondiscrimination, and self-determination to all participants.

- The issues of child abuse and neglect are common to many cultures and communities. Being willing and able to understand the unique needs of the families seeking or needing services will improve

both the families' willingness to participate and the system's capacity to provide effective services.

Questions to ask about systems of care and cultural competence:

- Is leadership committed to building cultural competence throughout the system of care?

- Are policies in place to support cultural competence throughout the system of care?

- Are the recommended services responsive to each child and family's culture?

- Is the family's cultural background taken into account in determining when, how, and where services will be offered?

- Are staff reflective of the community's racial and ethnic diversity?

- Is training regularly offered on the theory and practice of cultural competence to staff, family, and community partners?

- Are families involved in developing the system's cultural competence efforts?

- Do child welfare staff interact with children and families in culturally competent ways?

- Are staff culturally sensitive to the place and type of services made available to the child and family?

- Does the system of care reach out to the diverse racial, ethnic, and cultural groups in the community?

Family and Youth Involvement

Family and youth involvement within a system of care requires mutual respect and meaningful partnerships between families and

professionals. Families and youth are involved as key stakeholders, whether they are helping tailor one child's individualized plan of care or helping design, build, or maintain the system of care. Families and youth are involved in policy development, care coordination, evaluation, strategic planning, service provision, social marketing, and individual and system advocacy. Families and youth involved in systems of care activities may include caregivers, kin, extended family members, former service recipients, and others that families identify as important.

Why is family and youth involvement important?

- The goal of permanency for children—either by reunification with their biological parents or other permanency options—is best facilitated when the family and youth are involved in planning services and participate actively in them.

- Engaging family members and youth in the planning and provision of services emphasizes a respect for their capabilities and their role as part of the solution to their problems.

- Involving families and youth helps ensure sensitivity to cultural, service, and support needs.

- Child and Family Services Reviews have found that a significantly higher percentage of children have permanency and stability in their living situations in States that rated strongly in developing case plans jointly with parents and youth.

Questions to ask about systems of care and family and youth involvement:

- Are families and youth invited to all meetings that address systems of care issues?

- Are families and youth adequately represented and meaningfully involved on all systems of care committees?

- Are training and professional development opportunities available for family and youth partners?

- Are the families and youth involved in designing and building systems of care reflective of the community's cultural and ethnic composition?

- Are staff trained in how to engage, involve, and partner with families and youth?

- Are family members and alumni youth employed in the system of care?

- Are families and youth reimbursed for time spent supporting systems of care (e.g., wages, stipends or honoraria, transportation, childcare expenses)?

Community-Based Services

A system of care builds not only on the strengths of the child and family, but also on the strengths of their community. Providing community-based services means having high quality services accessible to families in the least restrictive setting possible. A community-based system of care requires systems to see the home, school, and neighborhood of the family from an asset-based perspective, and to identify the natural supports in these familiar surroundings as part of a strengths-based approach.

Why are community-based services important?

- Keeping children in their homes, neighborhood schools, and local communities has a positive effect on child and family well-being. Moving, in many cases, generates unnecessary stress for an already traumatized child.

- By remaining in the community, the child is able to retain critical bonds with friends, family, and school personnel.

- When services are community-based, the work done with the child and family is in the context of where the child lives.

- The community (faith-based organizations, nonprofit agencies, neighbors, and other institutions) can offer additional positive, informal supports to the child and family.

Questions to ask about systems of care and community-based services:

- Is a broad array of evidence-based and promising practices, informal services, and supports available to meet the needs of children and families in the community?

- Are services available to families in their primary language and at times and locations convenient to them?

- Is in-home support offered to families?

- Are flexible funds available to meet the unique needs of each child and family?

- Are all child- and family-serving agencies and community partners invited to the table and working together on behalf of children and families?

- Are caseworkers and staff from collaborating agencies trained in

maximizing informal supports for children and families?

- Do child welfare caseworkers and other staff interact with children and families in culturally competent ways?

- Are caseworkers and other staff culturally sensitive to the place and type of services made available to the child and family?

- Is the community where the family resides routinely seen as one of the child's major resources?

Accountability

Accountability refers to the continual assessment of practice, organizational, and financial outcomes to determine the effectiveness of systems of care in meeting the needs of children and families. Two essential components of an effective accountability strategy in a system of care are:

- The development of an interagency management information system that tracks important indicators of service and system performance

- A strong evaluation strategy

Why is accountability important?

- By focusing on the effects and outcomes of the services provided, such as child safety while in care, communities are provided a benchmark against which they can set realistic goals and measure continuous improvement.

- To ensure continuous improvement of systems of care, it is critical to incorporate process and outcome data into ongoing decision-making at all levels.

- In times of limited resources, decision-makers are most likely to allocate resources to initiatives that demonstrate effectiveness and an efficient use of funds.

- The safety and well-being of children, youth, and families is a responsibility shared by the entire community. As such, systems of care communities join together in holding one another accountable for ensuring positive outcomes, regardless of where the child and family seek help.

Questions to ask about systems of care and accountability:

- Do caseworkers use data to monitor their progress and inform decision-making?

- Is the management information system designed to capture relevant performance information from all interagency collaboration partners?

- Have families been involved in the design and implementation of the data system?

- Does the management information system track costs, quality of services, and outcomes for children and families?

- How does the management information system line up with the federally mandated Child and Family Services Review data?

- Does the system of care have a structured process for ongoing performance improvement, including dissemination of key findings to all stakeholders, regular review of performance data, and use of outcomes data in decision-making?

- Is an ongoing interagency data improvement committee a part of the systems of care infrastructure?

- Are data from the management information system used to improve services and supports?

- Are data generated from the management information system used to inform the public, legislators, and key policy administrators about the impact of the system of care on children and families served by the agency?

- Have cultural competency principles been included in the design of the management information system?

- Is the evaluation plan culturally appropriate for the community it serves?

Examples of Systems of Care

Children's Bureau Demonstration Initiative: *Improving Child Welfare Outcomes Through Systems of Care*

In 2003, the Children's Bureau released a request for proposals (RFP) to build home- and community-based systems of care to improve outcomes for children, youth, and families at risk of child maltreatment, children and youth who have been identified as victims of maltreatment but have not been removed from their home, or children and youth in State custody. The initiative is an outgrowth of the State Child and Family Services Reviews, which showed that serious deficiencies exist in most State child welfare agencies in terms of ensuring children's safety, finding them permanent homes, and promoting their well-being.

The *Improving Child Welfare Outcomes Through Systems of Care* demonstration initiative was created to answer one central question for the field: Does a system of care approach have merit in helping achieve positive outcomes for children and families involved with the child welfare system and its partner agencies? Grantees received up to $500,000 per year for 5 years to help the Children's Bureau answer that question.

Grants were awarded to 9 organizations in 13 localities to demonstrate systemic changes in the way States and Tribes provide services to children, youth, and families. In addition, the National Technical Assistance and Evaluation Center for Child Welfare Systems of Care Grantees was created to support the grantees through programmatic and evaluation technical assistance, research, and training.

Grantees in 2003 included:

- Family-to-Family System of Care (CA)

- Jefferson County Systems of Care (CO)

- Family-Centered Systems of Care (KS)

- Caring Communities Demonstration Project (NV)

- The CRADLE in Bedford-Stuyvesant (NY)

- Improving Child Welfare Outcomes Through Systems of Care (NC)

- Medicine Moon Initiative to Improve Tribal Child Welfare Outcomes (ND)

- Improving Permanency Outcomes Project (OR)

- Locally Organized Systems of Care in Pennsylvania (PA)

More information on each grantee can be found on the Children's Bureau Systems of Care Grantees page of the Information Gateway website: www.childwelfare.gov/systemwide/service/soc/communicate/initiative/grantees.cfm

Community Profiles

The following are examples of other communities nationwide that are using a system of care approach to assist children, youth, and families in receiving the support they need. Also included are projects implementing systems of care within multiple communities.

Comprehensive Community Mental Health Services Program for Children and Their Families (multiple sites)
Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, Division of Service and Systems Improvement, Child, Adolescent, and Family Branch
The goal of this program is to build innovative community treatment programs for children with serious emotional disturbances and their families. The Center provides a list of system of care grantee communities at: www.mentalhealth.samhsa.gov/cmhs/ChildrensCampaign/grantcomm.asp

Reclaiming Futures Program (multiple sites)
Robert Wood Johnson Foundation
Reclaiming Futures is a new approach to helping teenagers caught in the cycle of drugs, alcohol, and crime. A 5-year, $21 million initiative of the Robert Wood Johnson Foundation, Reclaiming Futures promotes new opportunities and standards of care in juvenile justice by bringing communities together to improve drug and alcohol treatment, expand and coordinate services, and find jobs and volunteer work

for young people in trouble with the law. More information on this project, including information on grantee sites, can be found at: www.reclaimingfutures.org/index.asp

Sacred Child Project (North Dakota and South Dakota)

The Sacred Child Project's service delivery area includes the Spirit Lake Nation; the Standing Rock Sioux Tribe; the Three Affiliated Tribes of Mandan, Hidatsa, and Arikara; the Turtle Mountain Band of Chippewa; and the Trenton Indian Service Area in North and South Dakota. The project uses the wraparound process to work with Native American youth ages 1 to 22 who have been diagnosed with serious emotional disturbances. The wraparound process incorporates culturally appropriate interventions and the natural support system of the community to provide intensive case management for enrolled children and their families. A notable feature of this system of care is the inclusion of traditional healing practices.
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Vermont

Vermont's system of care serves the entire State, or a population of about 613,000 (147,000 of whom are children under the age of 18). The system of care is sustained by ACT 264, State legislation that required interagency cooperation and served as one of the catalysts to encourage further collaborative efforts at both the State and local levels. Because of this legislation, three State departments are required to work with families to build an interagency system of care and to write and implement coordinated service plans for eligible youth. These requirements have provided incentives for

the State to blend funds across departmental lines to maximize State and Federal funding and better support community-based services. More information can be found at the State of Vermont Department of Health, Mental Health Services web page: http://healthvermont.gov/mh/programs/cafu/child-services.aspx

For More Information

National Technical Assistance and Evaluation Center for Systems of Care

www.childwelfare.gov/systemwide/service/soc/communicate/initiative/ntaec.cfm
Provides programmatic and evaluation technical assistance, research, and training to child welfare agencies involved in building systems of care. The Center conducts the national evaluation and provides technical assistance to recipients of cooperative agreements through the Children's Bureau's *Improving Child Welfare Outcomes Through Systems of Care* demonstration initiative.

Federation of Families for Children's Mental Health

www.ffcmh.org/
Serves families of children and youth with mental health needs. This advocacy organization represents children, youth, and families from diverse cultures and backgrounds.

Georgetown University Center for Child and Human Development

http://gucchd.georgetown.edu/index.html
Established to improve the quality of life for all children and youth, especially those with, or at risk for, special needs and their families. The center serves vulnerable children and

their families directly and influences local, State, national, and international programs and policy. Includes the National Center for Cultural Competence and National Technical Assistance Center for Children's Mental Health.

National Resource Center for Family-Centered Practice and Permanency Planning
www.hunter.cuny.edu/socwork/nrcfcpp/
Focuses on increasing the capacity and resources of State, tribal, and other publicly supported child welfare agencies to promote practices that support the safety, permanency, and well-being of children while meeting the needs of their families.

National Child Welfare Resource Center for Organizational Improvement
http://muskie.usm.maine.edu/helpkids/
Strengthens and supports State and tribal agencies committed to the welfare of children, youth, and families through training, technical assistance, and evaluation in the area of organizational improvement.

Research and Training Center for Children's Mental Health
Louis de la Parte Florida Mental Health Institute, University of South Florida
http://rtckids.fmhi.usf.edu/
Addresses the need for improved services and outcomes for children with serious emotional and behavioral disabilities and their families.

Research and Training Center on Family Support and Children's Mental Health
Portland State University
www.rtc.pdx.edu/
Dedicated to researching, evaluating, and promoting effective community-based, culturally competent, family-centered services for children and youth with multiple needs and their families.

The Technical Assistance Center for Systems of Care and Evidence Based Practices for Children and Families
www.choicesteam.org/page/program/alias/TACenter
Provides support to 30 grant sites across Indiana that received funding to build systems of care for youth with multiple needs. The center provides onsite consultation, assessment of community strengths and needs, customized community and regional training workshops, and coordination with State agencies to develop standards and outcome measures for systems of care.

Technical Assistance Partnership for Child and Family Mental Health
www.tapartnership.org/
Supports grant communities in their efforts to develop and implement local systems of care targeting children and youth with serious emotional disturbance and their families. Since its authorization in 1993, the Comprehensive Community Mental Health Services for Children and Their Families program has provided funding to more than 67 systems of care communities around the country.

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