## Systems of Care: Where are we now?

As we look at the Systems of Care (SOC) Initiative in Pennsylvania we must consider some essential steps to be taken in our planning endeavors. One of those essential steps involves a critical evaluation of the current local system of care. This includes looking at daily practices across systems as they relate to the core SOC Values and Principles. This tool is intended to provide a framework for discussion and organization of local system strengths and needs as well as a means of defining both common and unique training and technical assistance needs. Additionally, this tool and the process that will accompany its implementation will be used as a means of gathering valuable information across county systems that can then be compiled and provided to state officials with regards to policy and/or regulatory issues.

#### Core Systems of Care Values and Principles

- Family Focused and Driven: All system functions are accountable to families, and all services are organized and delivered in ways that enable, encourage and assist families in meeting their goals provided. Families directly participate in planning and implementation of services and supports at all levels.
- **Child and Youth Centered:** The system is concerned with the whole child, and services and supports address strengths and needs in all life domains.
- **Strengths Based:** Individual, family, and community strengths are continually assessed, appreciated, utilized, and celebrated. All services build on identified strengths.
- **Community Based:** Systems of Care actively cultivate community support and development of resources for youth and families. Services and supports are accessible and provided in the home community of the youth and family and all out-of-community services are linked directly back to the community.
- Youth, Family, and Community Safety: Services are organized and delivered to ensure the safety and well being of the youth, family and community.
- Individualized Plans of Care: Services and supports are delivered through a single, comprehensive, individualized plan of care that addresses all life domains. Plans of Care are tailored to match and respond to each youth and family's unique culture, strengths, priorities, and needs.
- **Cross System:** All relevant child-serving systems are involved in a single plan of care that best meets the needs of individual children and families and best utilizes their strengths.
- **Culturally Competent:** Services and supports reflect the unique values, beliefs, traditions, preferences, and practices of the youth and family.
- **Outcomes-Accountable:** Clear and measurable outcomes are points of accountability for the organization, management, and delivery of care to children, youth and families, at the system, program, and individual care management levels.
- **Cost Effective/Cost Responsible:** The System is responsible for organizing, managing, and delivering cost effective services and supports that blend formal and informal resources to bet meet the needs of children, youth and families.

#### Please come prepared to discuss and share:

For each of the formal service systems (ei: OCY, MH/MR, D&A, JPO etc):

- What is your system flow from Access to Exit?
- What are your responsibilities/actions to and for the child and/or family from the time they first access your agency to the time when they no longer need your services/support/assistance?
- What are the mandates that govern specific responsibilities and/or actions throughout the flow of your system?

#### <u>Systems of Care:</u> <u>A Tool for Evaluating Stages of Care against Core Systems of Care</u> <u>Values and Principles</u>

#### Strengths in Current Practice:

- What do we DO now that already embodies SOC values and principles at Access, Strengths/Needs Assessment, Ongoing Care and Exit?
- What do we DO that is common among the various systems, community and family?
- What questions do we currently ask ourselves that indicate we are committed to SOC values and principles in our daily practice?
- How have we addressed *crisis management*? Do our current practices address crisis management in a manner consistent with SOC values and principles? Are we being proactive?
- What current practices ensure implementation of SOC values and principles (CQI/Monitoring practices)?

#### Needs/Barriers in Current Practice:

- What do we DO now that does *not* reflect a commitment to SOC values and principles at Access, Strengths/Needs Assessment, Ongoing Care and Exit?
- What do we DO that is not common among the various systems, community and family and that may represent a duplication of effort and unnecessary strain for the youth and family?
- What questions *should* we be asking ourselves in order to demonstrate a commitment to SOC values and principles in our daily practice?
- How can we maintain our commitment to SOC principles in times of crisis?
- What kind of quality assurance practices would be useful to enhance the implementation of SOC?

## System Access/Intake

SOC Values/Principles	Practice Strength	Practice Need/Barrier
Family Engagement/ Family Focused and Driven		
Child and Youth Centered		
Strengths Based		
Community Based		
Youth, Family and Community Safety/Crisis Management		
Individualized Plans of Care/ One Plan – One Family		
Cross Systems		
Culturally Competent		
Outcomes Accountable		
Cost Effective/Cost Responsible		

## **Strengths/ Needs Assessment**

SOC Values/Principles	Practice Strength	Practice Need/Barrier
Family Engagement/ Family Focused and Driven		
Child and Youth Centered		
Strengths Based		
Community Based		
Youth, Family and Community Safety/Crisis Management		
Individualized Plans of Care/ One Plan – One Family		
Cross Systems		
Culturally Competent		
Outcomes Accountable		
Cost Effective/Cost Responsible		

## Service Planning

SOC Values/Principles	Practice Strength	Practice Need/Barrier
Family Engagement/ Family Focused and Driven		
Child and Youth Centered		
Strengths Based		
Community Based		
Youth, Family and Community Safety/Crisis Management		
Individualized Plans of Care/ One Plan – One Family		
Cross Systems		
Culturally Competent		
Outcomes Accountable		
Cost Effective/Cost Responsible		

#### **Service Delivery**

SOC Values/Principles	Practice Strength	Practice Need/Barrier
Family Engagement/ Family Focused and		
Driven		
Child and Youth Centered		
Strengths Based		
Community Based		
Youth, Family and Community		
Safety/Crisis Management		
Survey, erisis Munugement		
Individualized Plans of Care/ One Plan –		
One Family		
-		
Cross Systems		
Culturally Competent		
Outcomes Accountable		
Cost Effective/Cost Perpensible		
Cost Effective/Cost Responsible		

## Service Monitoring and Evaluation

SOC Values/Principles	Practice Strength	Practice Need/Barrier
Family Engagement/ Family Focused and		
Driven		
Child and Youth Centered		
Strengths Based		
Commenciates Decord		
Community Based		
Youth, Family and Community		
Safety/Crisis Management		
Individualized Plans of Care/ One Plan –		
One Family		
Cross Systems		
Culturally Competent		
Ostasuna Assautalla		
Outcomes Accountable		
Cost Effective/Cost Responsible		
Cost Encenve/Cost Responsible		

#### **Exit/Discharge**

SOC Values/Principles	Practice Strength	Practice Need/Barrier
Family Engagement/ Family Focused and		
Driven		
Child and Youth Centered		
Strengths Based		
Community Based		
Community Dubod		
Youth, Family and Community		
Safety/Crisis Management		
Individualized Plans of Care/ One Plan –		
One Family		
Cross Systems		
Closs Systems		
Culturally Competent		
Outcomes Accountable		
Cost Effective/Cost Responsible		
Cost Effective/Cost Responsible		

#### PRIORITIZING IMPROVEMENTS AND ALTERNATIVES

What are the least complicated needs listed above and can any of them be addressed with local and immediate solutions?

What are the most *critical* needs in local *process* that will need to be addressed in order to achieve or Vision and Mission regarding Systems of Care for our County?

Which of the identified needs could be addressed through Training and Technical Assistance?

Need

Desired/Needed TTA

Audience

Are there any State or Federal *process* barriers that are contrary to Systems of Care Values and Principles?

# What are the most significant *policy strengths* for Systems of Care?

	Entity	Mandate/Policy	Identified Strength
<u>LOCAL</u>			
<u>STATE</u>			
<u>FEDERAL</u>			
What are the	e most significant <i>p</i>	oolicy barriers for System	s of Care?
	<u>Entity</u>	Mandate/Policy	Proposed Solution
<u>LOCAL</u>			
<u>STATE</u>			

FEDERAL

In spite of identified barriers, concerns and necessary changes have you committed to the practice and principle of "one plan/one family"?

How will you measure your commitment? How will you know that you have made or are making a real commitment to "one plan/one family" in your own county system and practice?

Who will have the responsibility for and authority/oversight over care management?