

# VIRGINIA'S SYSTEM OF CARE

A presentation for the  
State Executive Council for the Comprehensive Services Act

*April 2013*

# Systems of Care

Systems of Care philosophy and core principles are the foundation of the Comprehensive Services Act.

*The mission of the CSA is to create a collaborative system of services and funding that is child-centered, family-focused and community-based when addressing the strengths and needs of troubled and at-risk youth and their families in the Commonwealth.*



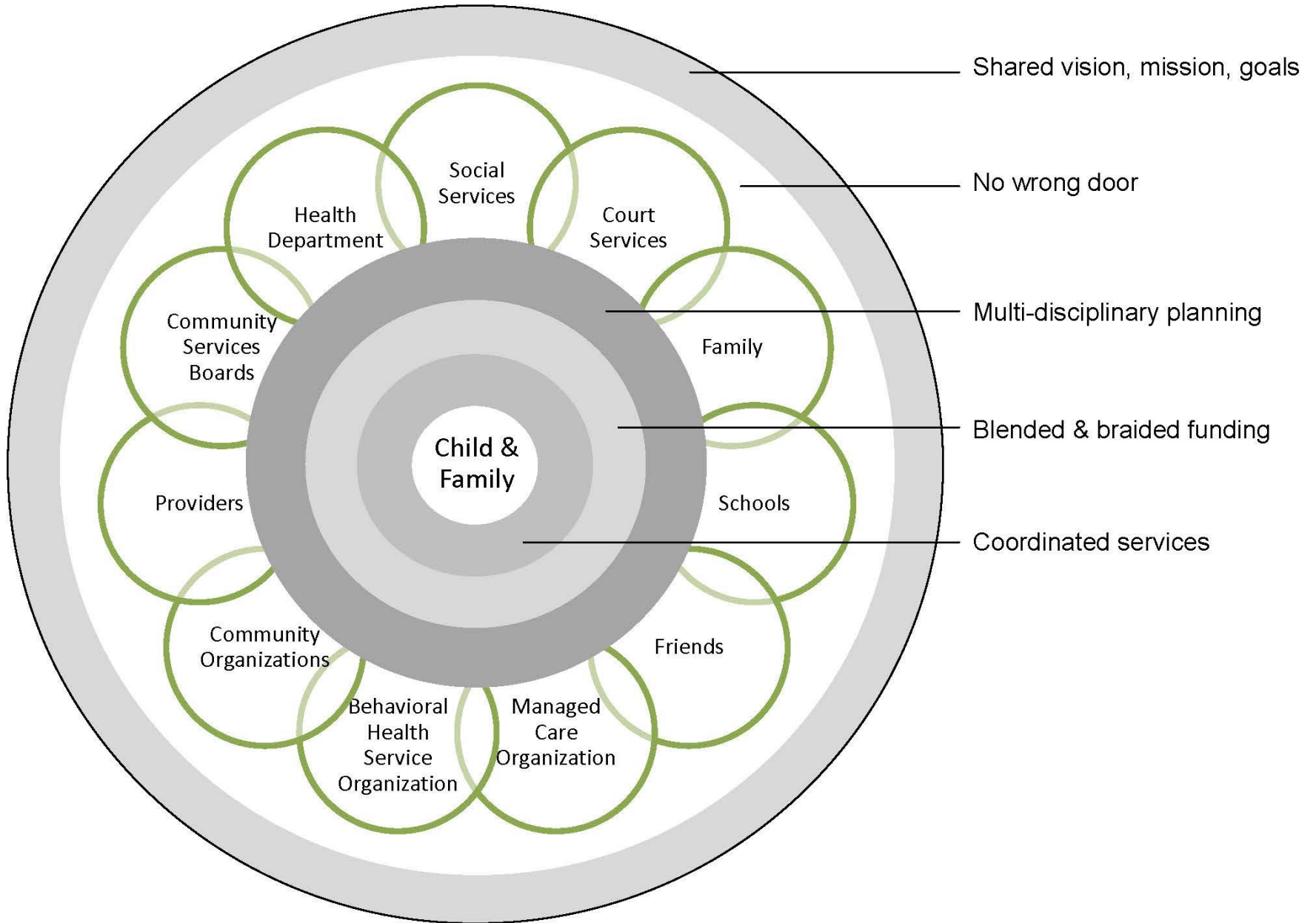
Office of  
Comprehensive  
Services

Empowering communities to serve youth

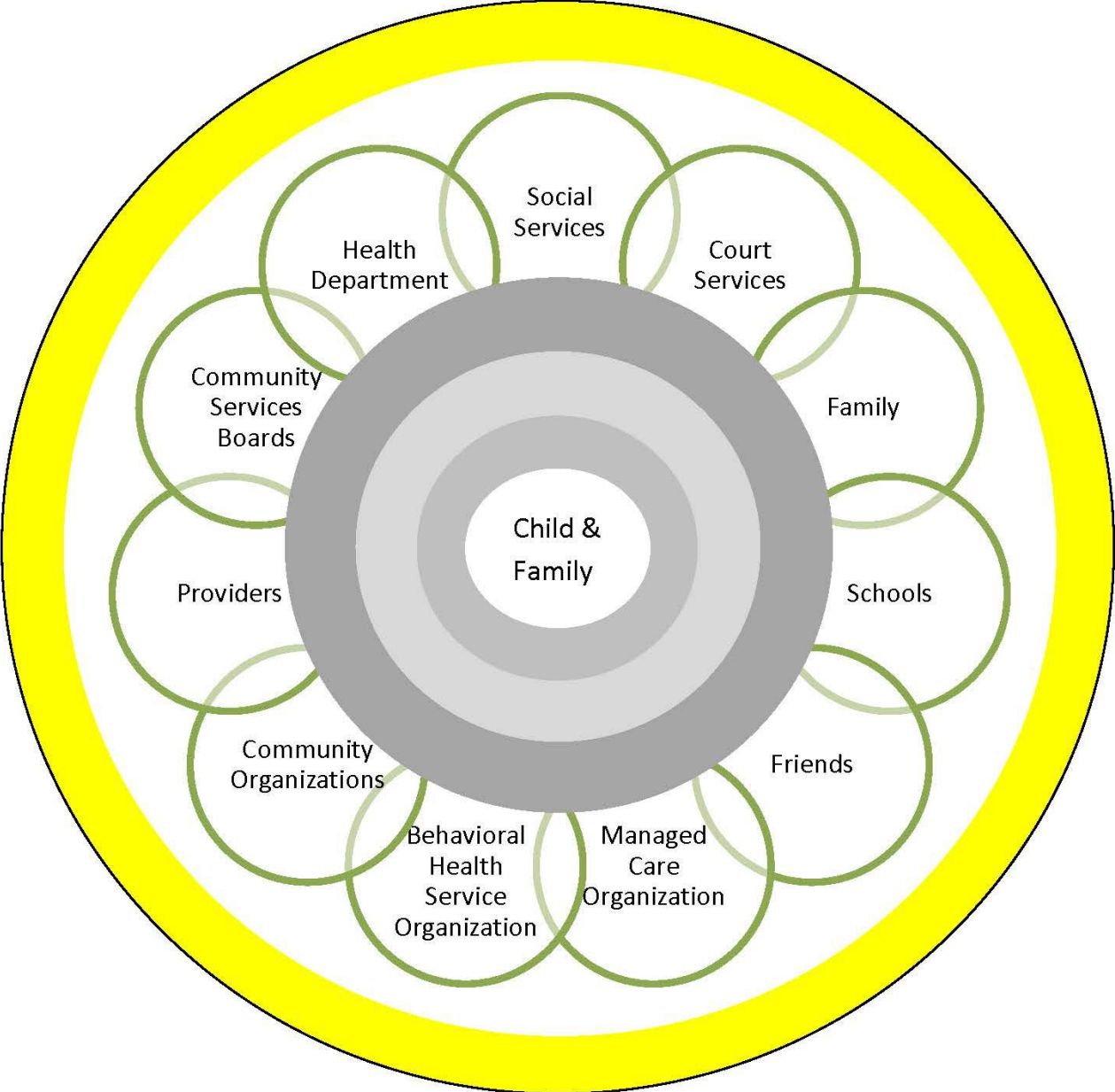
# Systems of Care

There is a growing body of evidence showing that the philosophy and values embodied in a system of care approach are producing remarkable outcomes for youth and families while at the same time reducing the need for more costly and restrictive placements.

# Virginia's Comprehensive System of Care



# Shared Vision, Mission, Goals



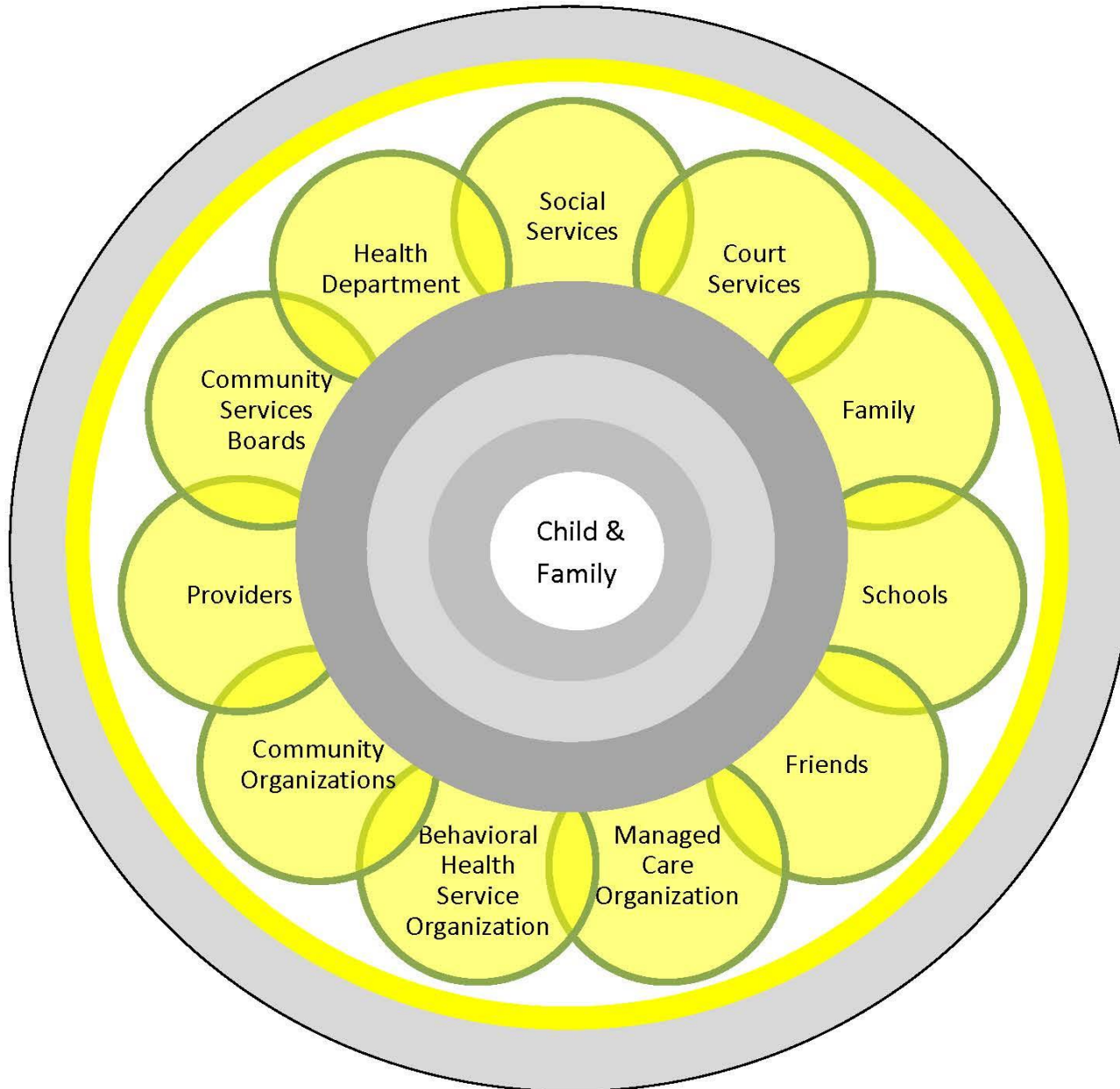
# Shared Vision, Mission & Goals

There is a shared belief across the Commonwealth that all children who are at-risk deserve access to a coordinated array of critical services which will produce the best possible outcomes for them and their families.

# Shared Vision, Mission & Goals

PAST ACTIVITIES	PRESENT/FUTURE ACTIVITIES
<ul style="list-style-type: none"> <li>• Enactment of the CSA (1993) established the mission for serving the Commonwealth's youth</li> </ul>	<ul style="list-style-type: none"> <li>• DMAS - private Managed Care Organization managing children's health care (2013)</li> </ul>
<ul style="list-style-type: none"> <li>• Children's Services Systems Transformation (2009) and adopted "Practice Model"</li> </ul>	<ul style="list-style-type: none"> <li>• DBHDS - SAMHSA Implementation Grant for expanding systems of care (2012-2016)</li> </ul>
<ul style="list-style-type: none"> <li>• DBHDS - SAMHSA Planning Grant for expanding systems of care (2011)</li> </ul>	<ul style="list-style-type: none"> <li>• Implementation of State Executive Council "2011 Strategic Plan"</li> </ul>
<ul style="list-style-type: none"> <li>• Systems of care training</li> </ul>	<ul style="list-style-type: none"> <li>• DMAS – private Behavioral Health Service Organization to manage behavioral health services.</li> </ul>
	<ul style="list-style-type: none"> <li>• Systems of care training</li> </ul>
	<ul style="list-style-type: none"> <li>• Application to participate in "Three Branch Institute"</li> </ul>

# No Wrong Door





# No Wrong Door

At-risk youth and families have access to funding and services regardless of how they come to the attention of those responsible for serving them.

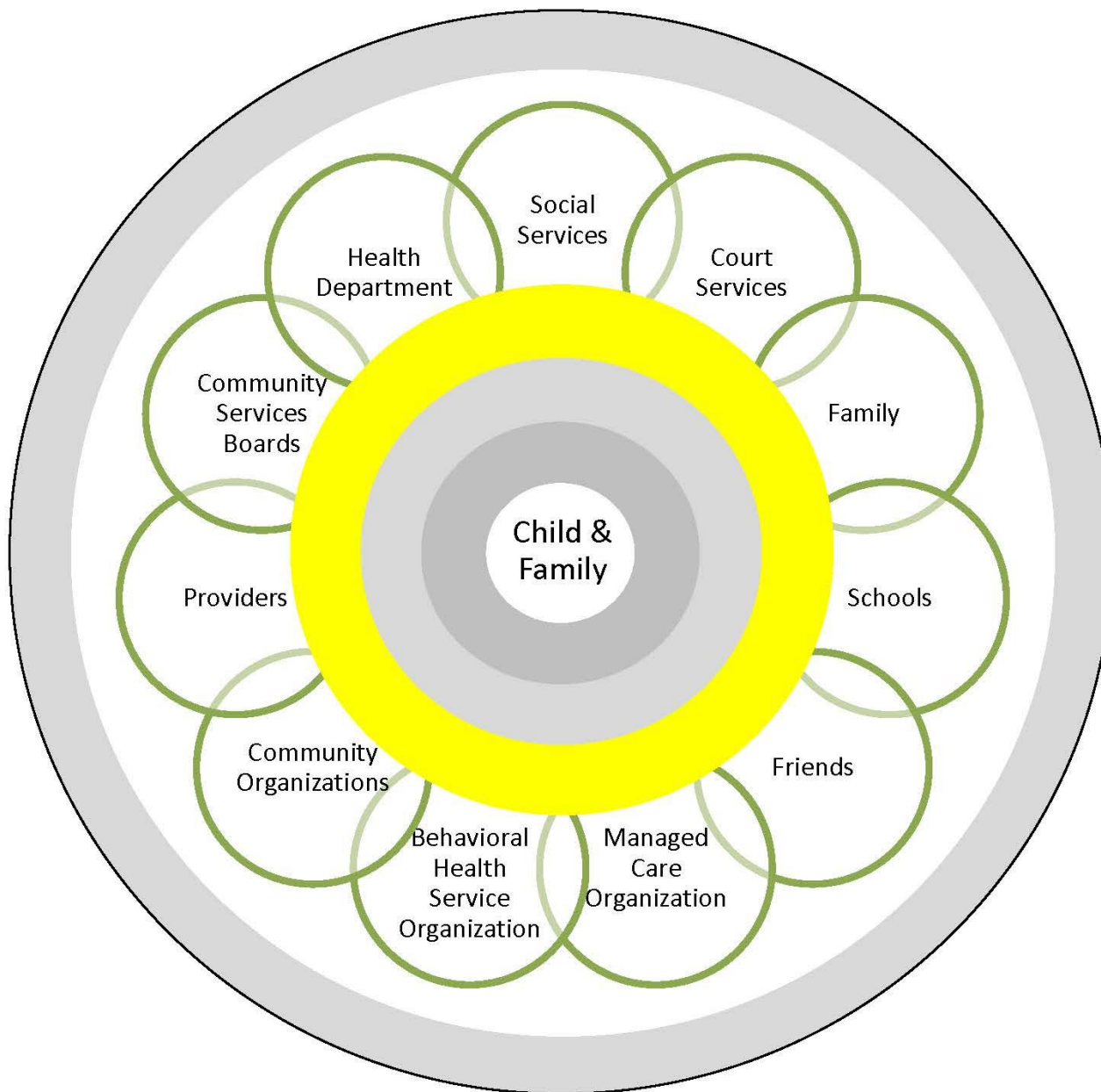
# No Wrong Door

## ◎ Virginia's Challenges

- Embedding systemic awareness and referral to multi-disciplinary planning
- Disparate local policies and practices governing access to funding and services



# Multi-disciplinary Planning



# Multi-disciplinary Planning

There is collaboration and cooperation in the planning for youth and families to address diverse and complex needs without limitations that might otherwise be imposed by operating within the parameters of individual agencies.



# Multi-disciplinary Planning

## ◎ Virginia's Strengths

- ◎ Mandated multi-agency teams to access state Pool Funds
- ◎ Mandatory uniform assessment that examines needs across all domains
- ◎ Required individual family services plans

# Multi-disciplinary Planning

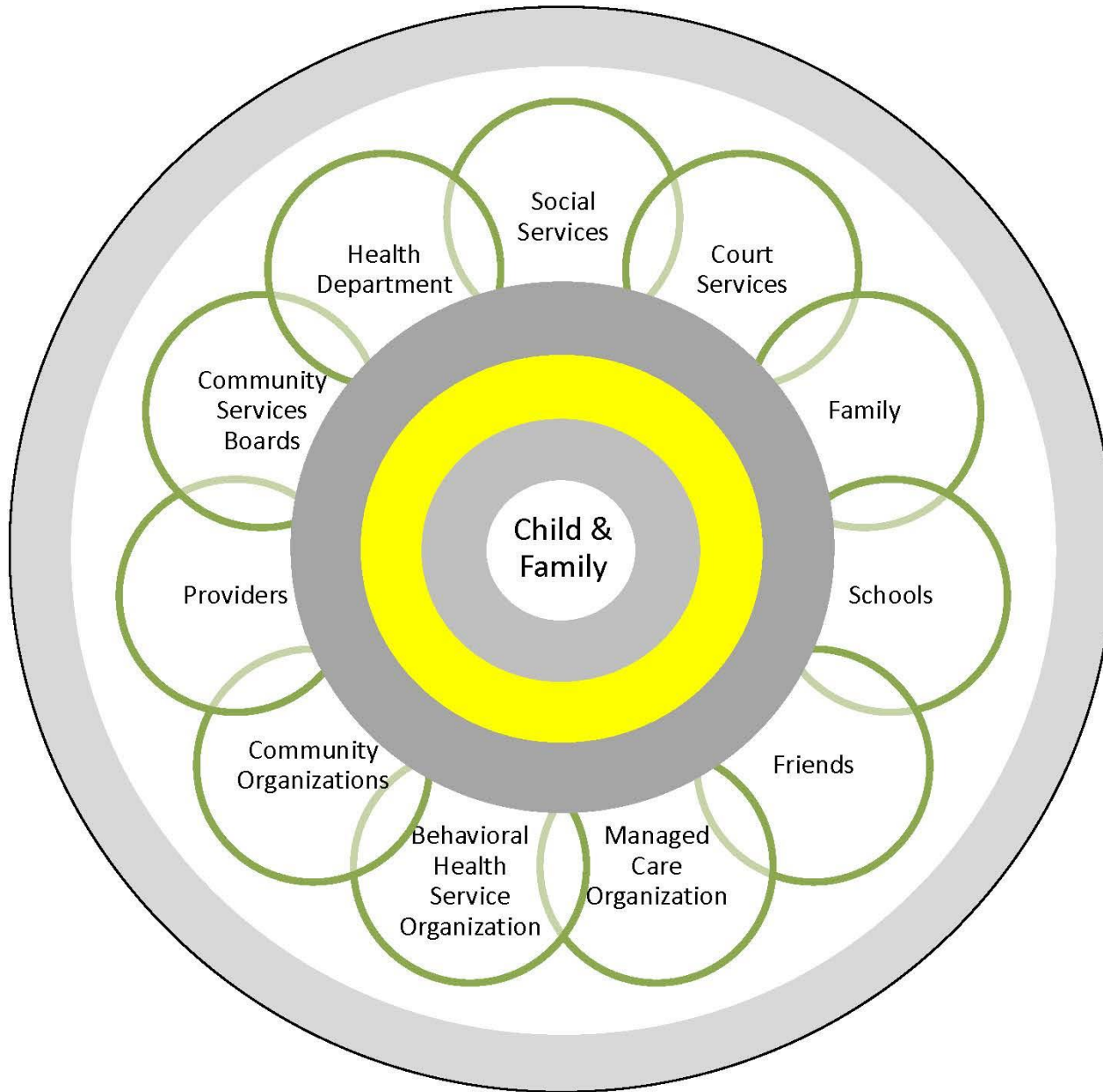
- ◎ Virginia's Challenges
  - ◎ Duplicative or poorly coordinated teams across agencies and stakeholder groups
  - ◎ Service planning driven by the unique strengths and needs of each child and family
  - ◎ Data driven decision-making

# Multi-disciplinary Planning

- ◎ Virginia's Challenges

- ◎ Knowledge and application of core philosophies and evidenced-informed practices, e.g., trauma-informed care, cultural and linguistic competence, family engagement/family voice and choice

# Blended & Braided Funding





# Blended and Braided Funding

Financial structure encourages effective and efficient use of all available resources and maximization of federal funding streams. Access to available funding resources is available in one place and through one mechanism.

# Blended and Braided Funding

## ◎ Virginia's Strengths

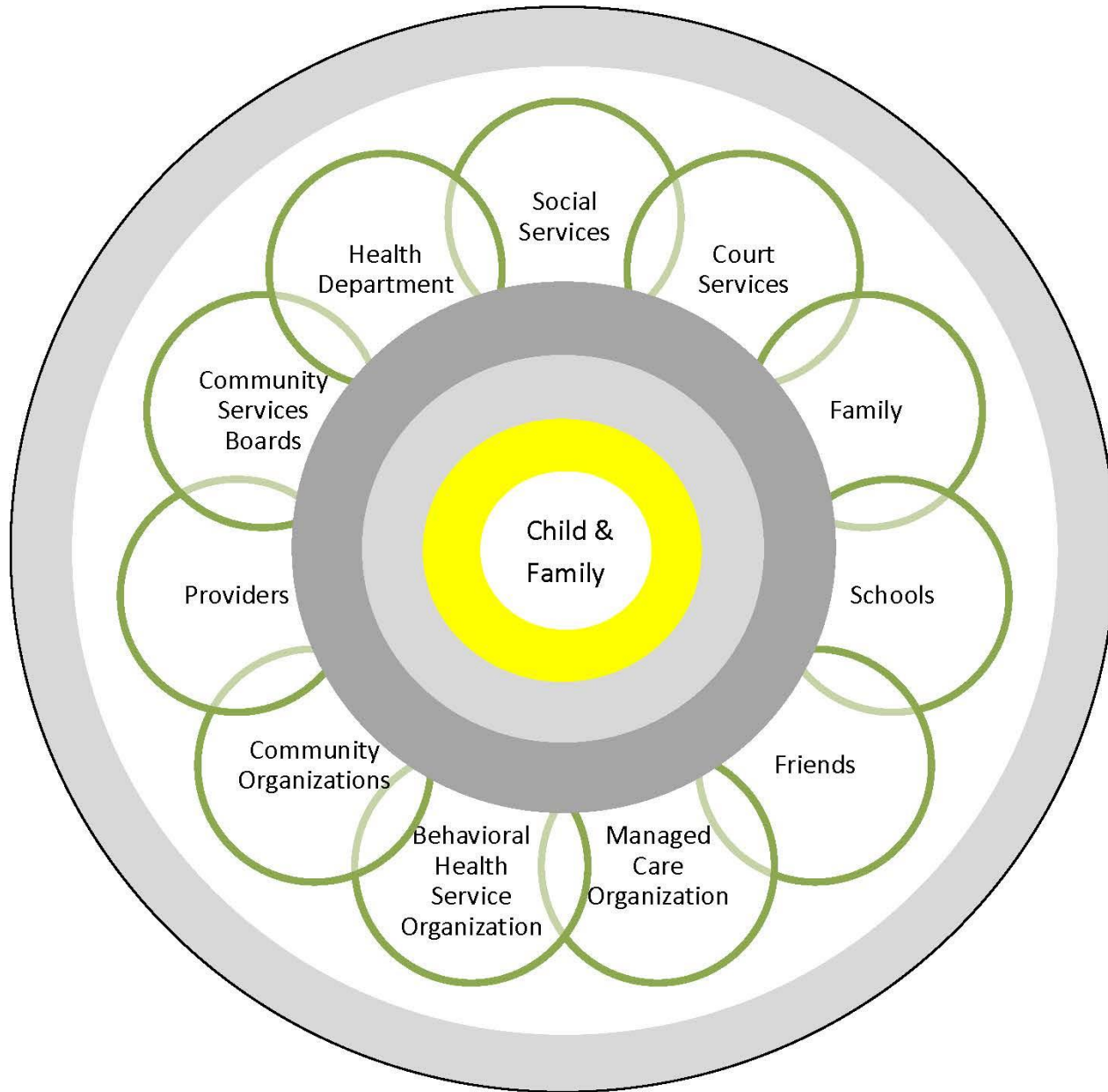
- Enactment of the CSA blended eight fund streams to create the state's Pool Funds
- SEC Strategic Plan includes the goal to align policies across core fund streams

# Blended and Braided Funding

## ◎ Virginia's Challenges

- Some children, youth, and families fall through the cracks of individual fund stream eligibility requirements
- Non-pooled funds continue to be viewed in silos

# Coordinated Services



# Coordinated Services

Effective individualized care planning and management processes address the unique strengths and needs of children and families holistically, value and respect family and youth input, deliver care in the family setting, and care for families in the context of their communities.

# Coordinated Services

- ◎ Evidence informed practices
  - Standardized practice models
  - Data driven/outcomes based care
  
- ◎ Care coordination
  - Basic case management
  - Managed care
  - Targeted case management
  - Intensive Care Coordination

# Coordinated Services

## ◎ Virginia's strengths

- Mandatory uniform assessment
- Partnership with private providers
- Required utilization review and utilization management

# Coordinated Services

## ◎ Virginia's challenges

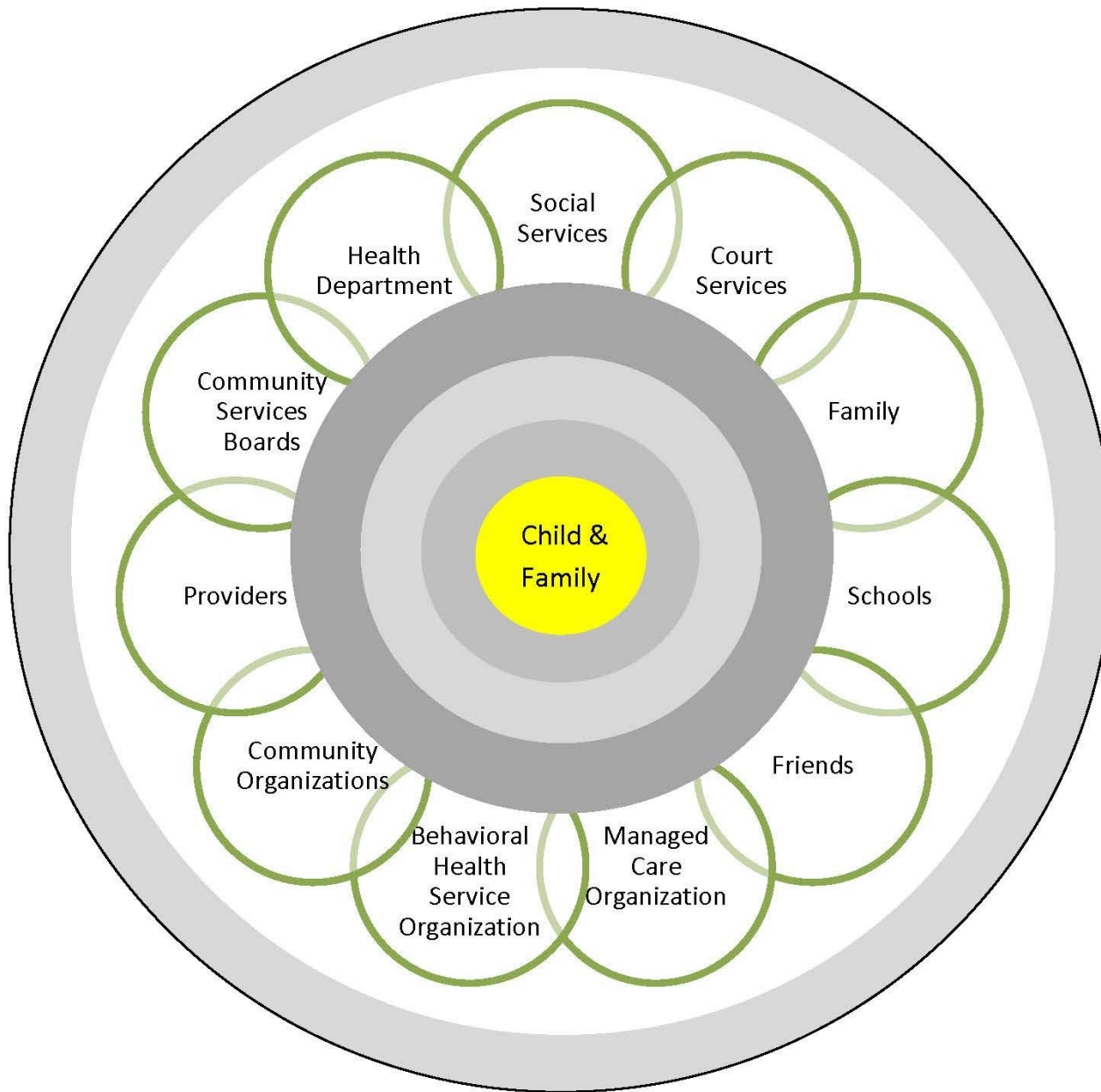
- Disparate implementation across the Commonwealth
- Availability of services and/or service providers



# Coordinated Services

<b>PAST ACTIVITIES</b>	<b>PRESENT/FUTURE ACTIVITIES</b>
<ul style="list-style-type: none"><li>• Intensive Care Coordination established</li></ul>	<ul style="list-style-type: none"><li>• Education/training: High Fidelity Wraparound for Intensive Care Coordinators and supervisors</li></ul>
<ul style="list-style-type: none"><li>• Annual “CSA Service Gaps Survey”</li></ul>	<ul style="list-style-type: none"><li>• Improved management by data (data integration and analysis)</li></ul>
<ul style="list-style-type: none"><li>• DBHDS analysis and recommendations regarding availability of children’s behavioral health services</li></ul>	<ul style="list-style-type: none"><li>• Education/training on evidenced-informed practices</li></ul>
	<ul style="list-style-type: none"><li>• Standardize service names and definitions; identify standard practice models</li></ul>

# Child Centered – Family Focused



# Family Focused

- ◎ Family is partner in planning
- ◎ Family voice is respected
  - Goals represent family desires
  - Family is empowered to achieve success

# Child Centered

- ◎ Child's strengths and needs drive planning
- ◎ Child's voice is heard and respected
- ◎ Child is empowered to be successful

# Virginia's Comprehensive System of Care

