Rating Tool for Implementation of the System of Care Approach for Children, Youth, and Young Adults with Behavioral Health Challenges and Their Families

Community – State Version

REVISED 2015

Informed Consent

You are invited to complete a Rating Tool to assess children's behavioral health services entitled "Rating Tool for Implementation of the System of Care Approach: Community - State Version." The purpose is to assess progress in a community or region implementing the system of care approach for children, youth, and young adults with behavioral health challenges and their families. Results from the Rating Tool will provide guidance about areas needing attention and technical assistance to increase alignment with the system of care approach.

Participation in this assessment is entirely voluntary. You may choose not to participate at all or to leave the survey at any time. Regardless of your decision, there will be no effect on your relationships with local or state agencies or any other consequences.

The Rating Tool is designed to be completed by multiple respondents to obtain an integrated perspective on progress in implementing the system of care approach. You are being asked to take part because of your involvement and understanding of the services being provided in the community or region being assessed. Your individual responses will be completely confidential. All data will be reported in aggregate. The community or region will receive reports of the results of the survey that contain average responses for each question. No one will be able to link your name and your responses.

If you agree to participate, you will be asked to complete one electronic survey with questions related to several major implementation areas of the system of care approach. This online survey should take around 20 minutes to complete. You will not be required to answer any question. You may answer "don't know" to any question you choose not to answer.

If you agree to take part in this assessment, there will be no direct benefit to you. However, the assessment may help to set goals and priorities, identify opportunities for improvement, and celebrate successes in implementing the system of care approach in the community or region.

Below please indicate whether you agree or disagree to participate in the survey.

1. **Indicate whether or not you agree to participate in this survey.**
   I understand all of the information in this Informed Consent.
   I freely and voluntarily agree to participate in this survey.

   ◯ Yes
   ◯ No

   Please note that your full name, title/role, and agency will not be used in the report. The results will only be reported in aggregate by community/region.

Introduction

Purpose

The Rating Tool for Implementation of the System of Care Approach© is designed to **assess progress in a geographic area, typically a community or region, in implementing the system of care approach** for children, youth, and young adults with behavioral health challenges and their families. In addition to assessing the level of implementation of the system of care approach, the information gathered can inform the allocation of resources and technical assistance aimed at efforts to improve service delivery.

A system of care is: *A spectrum of effective, community-based services and supports for children and youth with or at risk for behavioral health or other challenges and their families, that is organized into a coordinated network, builds meaningful partnerships with families and youth, and addresses their cultural and linguistic needs, in order to help them to function better at home, in school, in the community, and throughout life.* Core values for systems of care specify that they are community based, family driven, youth guided, and culturally and linguistically competent. Guiding principles call for a broad array of home- and community-based services and supports, individualized care, evidence-informed services, and coordination across child-serving systems.

The tool is designed to provide a "snapshot" of implementation of the key elements of the system of care approach at a point in time. The tool offers a method for deriving an **estimate of the "level" of implementation** of the system of care approach. Ratings estimate system of care implementation at one of **five levels**:

1. No Implementation
2. Some Implementation
3. Moderate Implementation
4. Substantial Implementation
5. Extensive Implementation

How to Use the Tool

At the **community or regional level** the Rating Tool can be used as a measure of the level of system of care implementation. It can be used as an initial **baseline assessment** at a point in time when efforts are underway to develop or improve the system of care. The tool can be used subsequently at **regular intervals** to assess progress over time. Use of the tool can help a community or region to **determine areas needing attention** while implementing the system of care approach. The ratings on each element provide a method for identifying the need for investment or resources, training, and technical assistance.

The Rating Tool can also be used by **states, tribes, or territories** (hereafter referred to as jurisdictions) with multiple communities or regions to **assess progress throughout their jurisdictions** in implementing the system of care approach. These jurisdictions can use the tool to obtain a **baseline rating and subsequent ratings** of progress that are tied to their efforts to implement, sustain, and expand the approach across all communities, regions, or other types of subdivisions in accordance with the structure of their service systems. Communities or regions complete the tool, and the larger jurisdiction can then determine the **percent of its communities or regions that have achieved each of the five levels of implementation** of the system of care approach. Repeated use of the tool annually or at other intervals can provide a measure of progress throughout a state, tribe, or territory based on comparisons of the percent of communities or regions at each level of implementation over time. Further, the average ratings on each element across communities provide a method for identifying the need for **investment of resources and technical assistance** throughout jurisdictions.

We ask that you rate the level of implementation of the system of care approach for your area.

Areas of Assessment

The Rating Tool explores **5 major areas** of system of care implementation:

1. A plan for the system of care approach
2. Service delivery guided by system of care values and principles
3. Services and supports based on the system of care approach
4. System infrastructure based on the system of care approach
5. Commitment to the system of care philosophy and approach

Respondents

The Rating Tool is designed for completion by <u>**ten or more respondents per community or region**</u>.The number and types of respondents can be <u>**customized**</u> based on the key individuals in the community or region, with the requirement that they fulfill specific types of roles related to children with behavioral health challenges in their areas, and that they are sufficiently <u>**knowledgeable about the system of care**</u> to be able to make a reliable assessment. The scores of these respondents are averaged to determine the ratings for that area. Responses are <u>**confidential**</u>, and no individual respondent is identified.

Re-Accessing the Rating Tool

You may complete the Rating Tool in <u>**one sitting or over multiple sessions**</u>. Use the <u>**unique URL link**</u> emailed to you to re-access the assessment at the point where you stopped. To store responses on a page, please click "next." To go back to a previous page to change a response, please click "prev." You may change your responses at any point before you submit your assessment.

Click "next" below to begin completing the tool.

Respondent Information

2. **Indicate the name of your community or region.**

   Area Served:

3. **Indicate your primary role in relation to services for children, youth, and young adults with behavioral health challenges and their families. (Select the choice that best describes your role)**

   ○ Community-Level or Regional-Level Director or Manager of Services for Children with Behavioral Health Challenges

   ○ Lead Provider Agency Director or Manager of Services for Children with Behavioral Health Challenges

   ○ Clinician or Care Manager

   ○ Family Organization Director or Family Leader

   ○ Youth Organization Director or Youth Leader

   ○ Community-Level or Regional-Level Director or Manager of Services for Children with Behavioral Health Challenges in a Partner Child-Serving System (e.g., Child Welfare, Juvenile Justice, Education, Health, etc.)

   ○ Other (Please Specify):

I. Plan for the System of Care Approach

Assess the use of a strategic plan for implementing, sustaining, and expanding the system of care approach in the community or region.

4. **Indicate the extent to which the community or region has developed and used a strategic plan to guide the implementation, sustainability, and expansion of the system of care approach during the past 12 months.**

	No plan exists	Plan is under development	Plan exists but is not used	Plan exists but is rarely used to guide implementation	Formal written plan is used extensively to guide implementation	Don't know
Existence of a strategic plan for implementing, sustaining, and expanding the system of care approach	○	○	○	○	○	○

II. Service Delivery Guided by System of Care Values and Principles

The principles that comprise the system of care philosophy and several indicators for each principle are listed below. For each indicator, rate the extent to which it has been implemented in the community or region during the past 12 months.

5. Individualized, Wraparound Approach to Service Planning and Delivery

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Individualized child and family teams are used (including family, youth, providers, etc.) to develop and implement a customized service plan	○	○	○	○	○	○
Individualized assessments of child and family strengths and needs are used to plan services and supports	○	○	○	○	○	○
Individualized service plans are developed and implemented for each child and family that address multiple life domains	○	○	○	○	○	○
Services include informal and natural supports in addition to treatment	○	○	○	○	○	○
Flexible funds are available to meet child and family needs not financed by other sources	○	○	○	○	○	○

6. Family-Driven Approach

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Families have a primary decision making role in service planning and delivery	○	○	○	○	○	○
Family strengths are incorporated in service planning and delivery	○	○	○	○	○	○
Families have a choice of services and supports	○	○	○	○	○	○
Families have access to peer support	○	○	○	○	○	○
A family organization exists and supports family involvement at the system and service delivery levels	○	○	○	○	○	○

7. Youth-Guided Approach

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Youth are active partners in service planning and delivery	○	○	○	○	○	○
Youth strengths and interests are incorporated in service planning and delivery	○	○	○	○	○	○
Youth have a choice of services and supports	○	○	○	○	○	○
Youth have access to peer support	○	○	○	○	○	○
A youth organization exists and supports youth involvement at the system and service delivery levels	○	○	○	○	○	○

8. Coordinated Approach

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Intensive/targeted care coordination with a dedicated care coordinator is provided to high-need youth and families	○	○	○	○	○	○
Basic care coordination is provided for children and families at lower levels of service intensity	○	○	○	○	○	○
Care is coordinated across multiple child-serving agencies and systems	○	○	○	○	○	○
One overall plan of care is created across child-serving agencies and systems (there may be more detailed plans for individual systems as part of the overall plan)	○	○	○	○	○	○

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9. Culturally and Linguistically Competent Approach

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Culture-specific services and supports are provided	○	○	○	○	○	○
Services and supports are adapted to ensure access and effectiveness for culturally diverse populations	○	○	○	○	○	○
Providers represent the cultural and linguistic characteristics of the population served	○	○	○	○	○	○
Providers are trained in cultural and linguistic competence	○	○	○	○	○	○
Specific strategies are used to reduce racial and ethnic disparities in access to and outcomes of services	○	○	○	○	○	○

10. Evidence-Informed and Promising Practices and Practice-Based Evidence Approaches

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Evidence-informed practices are implemented within the array of services and supports to improve outcomes	○	○	○	○	○	○
Providers are trained in specific evidence-informed practices and/or evidence-informed practice components	○	○	○	○	○	○
Best practice guidelines, clinical protocols, and manuals are provided to practitioners	○	○	○	○	○	○
Fidelity to evidence-informed practices and outcomes is measured	○	○	○	○	○	○

11. Least Restrictive Approach

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Utilization of home- and community-based services is increased	○	○	○	○	○	○
The number of children who are served in settings more restrictive than necessary is reduced	○	○	○	○	○	○

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Utilization of inpatient hospitalization is decreased and it is primarily used for short-term, acute treatment and stabilization when necessary and appropriate	○	○	○	○	○	○
Utilization of residential treatment is decreased and it is primarily used for short-term lengths of stay to achieve specific treatment goals when necessary and appropriate	○	○	○	○	○	○

12. Service Array

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Broad array of home- and community-based services and supports is available	○	○	○	○	○	○
Array includes or is linked to services and activities to identify behavioral health problems at earlier stages and at earlier ages (e.g., screening in primary care, schools, child welfare, etc.)	○	○	○	○	○	○
Array includes developmentally appropriate services for young children and their families	○	○	○	○	○	○
Array includes developmentally appropriate services for youth and young adults in transition to adulthood	○	○	○	○	○	○

13. Data and Accountability

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Data are collected regularly on the quality and outcomes of services and supports and are used for continuous quality improvement	○	○	○	○	○	○
Electronic health records exist	○	○	○	○	○	○

III. Services and Supports Based on the System of Care Approach

For each of the following services, indicate the extent to which it has been available in the community or region during the past 12 months.

14. Home- and Community-Based Treatment and Support Services (Nonresidential)

	Not at all available	Somewhat available	Moderately available	Substantially available	Extensively available	Don't know
Screening for behavioral health needs (e.g., in early care, education, primary care, child welfare, and juvenile justice settings)	○	○	○	○	○	○
Assessment and evaluation	○	○	○	○	○	○
Individualized service planning (e.g., wraparound process)	○	○	○	○	○	○
Intensive care management	○	○	○	○	○	○
Service coordination for youth at lower levels of service intensity	○	○	○	○	○	○
Outpatient individual therapy	○	○	○	○	○	○
Outpatient group therapy	○	○	○	○	○	○
Outpatient family therapy	○	○	○	○	○	○
Medication treatment/management	○	○	○	○	○	○
Crisis response services, non-mobile (24 hours, 7 days)	○	○	○	○	○	○
Mobile crisis and stabilization services (24 hours, 7 days)	○	○	○	○	○	○
Intensive in-home services	○	○	○	○	○	○
School-based behavioral health services	○	○	○	○	○	○
Day treatment	○	○	○	○	○	○
Substance use treatment	○	○	○	○	○	○
Therapeutic behavioral aide services	○	○	○	○	○	○
Behavior management skills training	○	○	○	○	○	○
Tele-behavioral health services	○	○	○	○	○	○
Youth peer support	○	○	○	○	○	○
Family peer support	○	○	○	○	○	○
Youth and family education	○	○	○	○	○	○
Respite services	○	○	○	○	○	○

	Not at all available	Somewhat available	Moderately available	Substantially available	Extensively available	Don't know
Therapeutic mentoring	○	○	○	○	○	○
Mental health consultation	○	○	○	○	○	○
Supported education and employment	○	○	○	○	○	○
Supported independent living	○	○	○	○	○	○
Transportation	○	○	○	○	○	○

15. Out-of-Home Treatment Services for Short-Term Treatment Goals that are Linked to Home- and Community-Based Services and Supports

	Not at all available	Available but not used appropriately and not linked	Available, somewhat used appropriately and somewhat linked	Available, moderately used appropriately and moderately linked	Available, mostly used appropriately and mostly linked	Don't know
Therapeutic foster care	○	○	○	○	○	○
Therapeutic group home care	○	○	○	○	○	○
Crisis stabilization beds	○	○	○	○	○	○
Medical detoxification	○	○	○	○	○	○
Substance use residential treatment	○	○	○	○	○	○
Residential treatment	○	○	○	○	○	○
Inpatient hospitalization	○	○	○	○	○	○

IV. System Infrastructure Based on System of Care Approach

This section lists components that comprise the infrastructure for a system of care. For each component, indicate the extent to which the component has been implemented in the community or region during the past 12 months.

16. Infrastructure Components

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Point of accountability structure for system of care management and oversight	○	○	○	○	○	○
Financing for system of care infrastructure and services	○	○	○	○	○	○
Structure and/or process to manage care and costs for high-need populations (e.g., care management entities)	○	○	○	○	○	○
Structure and/or process for interagency partnerships and agreements	○	○	○	○	○	○

	Not at all implemented	Somewhat implemented	Moderately implemented	Substantially implemented	Extensively implemented	Don't know
Structure and/or process for partnerships with family organization and family leaders	○	○	○	○	○	○
Structure and/or process for partnerships with youth organization and youth leaders	○	○	○	○	○	○
Defined access/entry points to care	○	○	○	○	○	○
Extensive provider network to provide comprehensive array of services and supports	○	○	○	○	○	○
Structure and/or process for training, TA, and workforce development	○	○	○	○	○	○
Structure and/or process for measuring and monitoring quality, outcomes, and costs (including IT system) and for using data for continuous quality improvement	○	○	○	○	○	○
Structure and/or process for strategic communications/social marketing	○	○	○	○	○	○
Structure and/or process for strategic planning and identifying and resolving barriers	○	○	○	○	○	○

V. Commitment to the System of Care Philosophy and Approach

For each of the following groups, indicate your assessment of the extent to which there has been buy-in and commitment to the system of care philosophy and approach in the community or region during the past 12 months.

17. Child-Serving Systems

	Not at all committed	Somewhat committed	Moderately committed	Substantially committed	Extensively committed	Don't know
Mental health system	○	○	○	○	○	○
Child welfare system	○	○	○	○	○	○
Juvenile justice system	○	○	○	○	○	○
Education system	○	○	○	○	○	○
Health system	○	○	○	○	○	○
Substance use treatment system	○	○	○	○	○	○
Courts/judiciary system	○	○	○	○	○	○
Medicaid system	○	○	○	○	○	○

18. Policy and Decision Makers

	Not at all committed	Somewhat committed	Moderately committed	Substantially committed	Extensively committed	Don't know
High-level policy and decision makers at the local community or regional level	○	○	○	○	○	○

19. Providers

	Not at all committed	Somewhat committed	Moderately committed	Substantially committed	Extensively committed	Don't know
Provider agency administrators and mid-level managers	○	○	○	○	○	○
Direct service providers (clinicians and others)	○	○	○	○	○	○

20. Family and Youth Leaders

	Not at all committed	Somewhat committed	Moderately committed	Substantially committed	Extensively committed	Don't know
Family leaders	○	○	○	○	○	○
Youth leaders	○	○	○	○	○	○

21. Managed Care Organizations

	Not at all committed	Somewhat committed	Moderately committed	Substantially committed	Extensively committed	Don't know
Behavioral health managed care organizations	○	○	○	○	○	○
Managed care organizations managing both physical health and behavioral health	○	○	○	○	○	○

22. Overall Assessment

	Not at all	Somewhat	Moderately	Substantially	Extensively	Don't know
To what extent do you believe that the system of care approach is being implemented in your community or region?	○	○	○	○	○	○

Please click the "Done" button below to submit your responses.