

WAYNE COUNTY SYSTEM OF CARE SYSTEMS IN ACTION FOR CHILDREN, YOUTH AND FAMILIES



REPORT TO THE COMMUNITY 2013-2014 VC Improving quality. Improving quality.

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Dear Stakeholders,

It has been another amazing year for our Children's System of Care and the credit must be given to you, our generous stakeholders. Without you, systems collaboration would not occur and transforming our system would be impossible. Your willingness to partner with others, to be open to new ideas and projects, to give support whenever needed, and for all the time and effort each and every one of you give is remarkable. I sincerely want to thank you for all you have done.

As a team, we continue to improve the services we currently provide, expand our service array, and enhance the skills of our workforce. This year has also been very exciting as we are in the beginning stages of ensuring that our system of care is culturally and linguistically competent. This area of focus will impact services for all of our children and families in Wayne County, and undeniably change our system for the better.

It should also be noted that even though it was an amazing year, it did not go without its challenges. As our system transforms, we tend to lose a few good soldiers i.e. children's advocates, who move on to other opportunities sometimes within our system, sometimes not, but always leaving a fingerprint on the work we do.

System transformation work can be very difficult and it will continue to be a journey that my team and I are willing to take with you, our stakeholders, by our side in order to continue to improve the quality of services provided to our children, youth and families.

Thank you for accompanying me on last year's journey, and I look forward to traveling this years journey with you by my side.

Crystal Palmer Director, Children's Initiatives



PHILOSPHY

he work accomplished by Connections is grounded in the system of care framework and principles, a spectrum of effective, community-based services and supports for children and youth with serious emotional disturbance and their families, that is organized into a coordinated network of cross system collaboration, 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.





SYSTEMS OF CARE ARE:

FAMILY DRIVEN AND YOUTH GUIDED

The strengths and needs of the family determine the supports and services a family receives.

COMMUNITY BASED

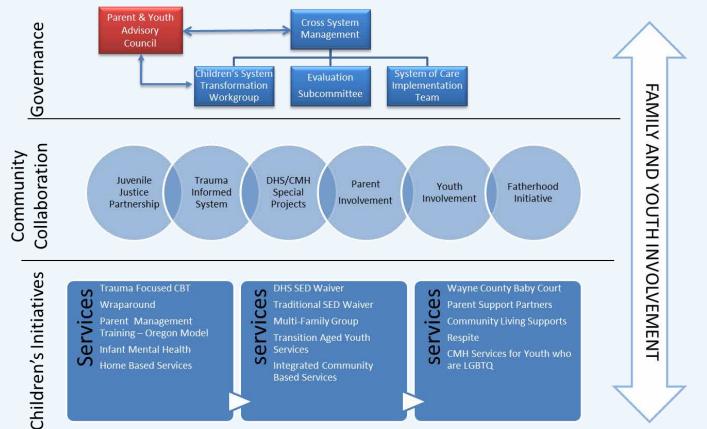
The locus of services as well as system management, rests within a supportive, adaptive infrastructure of structures, processes, and relationships with the community.

CULTURALY AND LINGUISTICALLY COMPETENT

Agencies, programs, and services reflect the cultural, racial, ethnic, and linguistic differences of the population they serve to facilitate access to and utilization of appropriate services and supports and to eliminate disparities.







Family Driven - Youth Guided - Community Based - Cultural and Linguistic Competence







SYSTEM PARTNERS

- Detroit Wayne Mental Health Authority
- 3rd Judicial Circuit Court of Michigan
- Detroit Department of Health and Wellness Promotion
- Institute for Population Health
- Michigan Department of Human Services—Wayne County
- Southeast Michigan Community Alliance
- Wayne County Department of Child and Family Services
- Wayne County Public Health Department
- Wayne Regional Educational Education Service Agency

SERVICE PROVIDERS

- American Indian Health and Family Services
- Arab Community Center for Economic and Social Services
- Arab American and Chaldean Council
- Black Family Development, Inc.
- Bridgeway Services
- CareLink Network
- Center for Youth and Families
- Clinic for Child Study at the 3rd Circuit Court

- Community Care Services
- Community Living Services
- ConsumerLink Network
- Development Centers, Inc.
- Gateway Community Health
- Gateway Detroit East Community Mental Health
- GrowthWorks Inc.
- Hegira Programs Inc.
- Juvenile Assessment Center
- Lincoln Behavioral Services

- New Center Community Services
- Northeast Guidance Center
- Pioneer Behavioral Health
- Ruth Ellis Center
- Southwest Counseling Solutions
- Starfish Family Services
- StarrVista
- Synergy Partners LLC
- The Children's Center
- The Guidance Center



COMMUNITY PARTNERS

- Black Caucus Foundation
- Catholic Social Services
- Child's Hope
- Children's Hospital of Michigan
- Educational Achievement Authority
- Family Alliance for Change
- Great Start Collaborative—Wayne
- Michigan Alliance for Families
- Neighborhood Service Organization
- Save Our Children Coalition
- Virtual Center of Excellence (VCE)
- Wayne Children's Healthcare Access Program
- Youth United

UNIVERSITY PARTNERS

- Eastern Michigan University
- Michigan State University
- University of Michigan
- Wayne State University
- Western Michigan University
- Western Michigan University



Safe Schools and Healthy Students

SAMSHA awarded the state of Michigan \$8.1 million dollars over the course of four years to promote safe schools and healthy students. As participants in this award, DWMHA will support community partners working with students, families and teachers to assist students in achieving school success in Detroit.

Mental Health Innovation Grant-Extended

 \$102,000 was awarded to build capacity for youth in juvenile justice, particularly home based services for 15 youth. Last fiscal 10 youth were enrolled and received services. This grant has been extended in fiscal year 2014-2015 to provide services for the remaining 5 youth.

System of Care State Block Grant

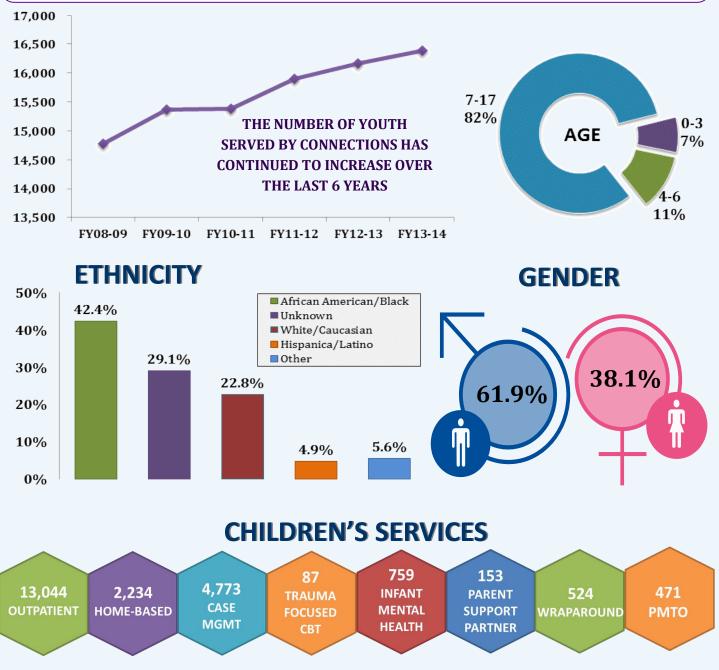
 For the 8th year in a row, Connections has received a \$1.04 million block grant to expand the system of care. Funds are used for specialty positions and programs designed to focus on systems change, special projects, and evaluation.

Detroit Public and Community Schools

◆ Detroit public schools designated 21 schools as Community Schools (CS). CS are designed to be the hub of the community connecting school, student, family and community. DWMHA is a member of the CS Leadership Council which exists to create vision, policy and resource alignment for CS.

YOUTH SERVED*

Connections served **16,380** children and families from 10/1/2013 to 9/30/2014



* These numbers are based on claims data collected from MH-WIN Oct. 2014 which may have up to a 90 day lag. Demographic data reflects unduplicated cases. Services received are not unduplicated as youth may receive multiple services at once or over the course of the fiscal year.

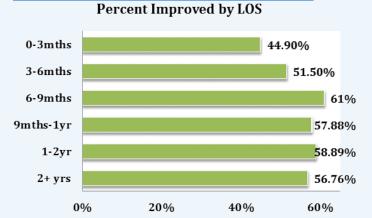
OUTCOMES

n order to determine care needs and changes in functioning, all school aged children diagnosed with SED are assessed by the Preschool and Early Childhood Functional Assessment Scale (PECFAS), for children 4-6, and the Child and Adolescent Functional Assessment Scale (CAFAS) for children 7-17. Both tools assess functioning across critical life subscales and yield both a total score and subscale scores. CAFAS/PECFAS have several outcome indicators including a reduction in score greater than 20 points, reduction in the number of severe/moderate impairments,

Using CAFAS to Determine Eligibility

- A total score of 50 out of a possible 240 (using the eight subscale scores)
- Two 20s on any of the first eight subscales .

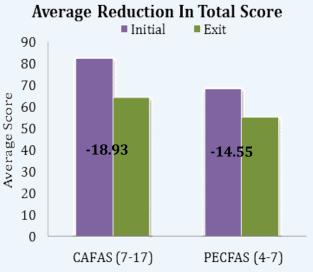
•One 30 on any subscale, except for substance abuse.



The percent of children aged 7-17 improving, increases with length of stay (LOS) until 9 months.

and reduction of score in certain subscales. "Improvement on Any Indicator" designates functional improvement in at least one of the three indicators.

THE AVERAGE REDUCTION IN SCORE IS GREATER FOR CHILDREN AGED 7-17. HOWEVER, AN EXIT PECFAS MAY NOT MEAN A CHILD IS LEAVING SERVICES, BUT THAT THEY HAVE AGED INTO THE CAFAS ASSESSMENT



AVERAGE CHANGE IN CAFAS SUBSCALES AT EXIT

Children aged 7-17 show an improvement across all 8 subscales on average, except for substance abuse. Self-harm shows the least amount of change, however average initial scores on this scale are very low.



YOUTH GUIDED

outh United (YU) is a youth-led initiative whose purpose is to promote youth voice and youth partnership in Connections SOC using positive youth development values and philosophy. Youth United employs youth across three regions and helps to drive

projects and activities focused on leadership, stigma and advocacy. Youth Advocates create opportunities for youth to provide input on the development and implementation of new and former services provided to children and youth.



Major Accomplishments

- \Rightarrow Youth United Crisis Card
- \Rightarrow Kids-TALK Poetry Slam
- ⇒ Rock Your Difference Leadership Training
- ⇒ Stigma Busting Workshops
- \Rightarrow Youth Focus Groups
- \Rightarrow Family Fun Day



STIGMA BUSTING

YU stigma busting workshops allow youth to express their feelings about stigma through art and group discussion.

What's Next?

"Your Story Matters"

An opportunity for Youth to share their stories through different forms of art. Youth are able to submit their stories via written expression, video, or a piece of artwork to Youth United via *wcyouthunited@gmail.com.* These pieces will then be shared on our social media outlets as well as showcased at our events throughout the year. The project will conclude with an event featuring all art pieces and youth who would like to showcase their talent and share their stories.

Email: wcyouthunited@gmail.com & Websites: vceonline.org/youthinvlovement and dwmha.org/youthunited Tumbler: liveyouthunited.tumbler.com & Twitter: @wc_youthunited & YouTube: SOCConnectionWayneCounty

The Youth Advisory Council (YAC)

WHAT IS YAC?



The Youth Advisory Council, supported by CONNECTIONS (Wayne County System of Care), creates a framework for youth involvement, partnership and decision making. This is an opportunity for youth (ages 14-25) from diverse backgrounds and communities to impact policies and services that affect youth and families. Youth will gain knowledge of community supports and resources while enhancing their personal leadership skills. The Youth Advisory

Council will consist of youth that have received services through child welfare, juvenile justice, public mental health and/or special education.

YAC is different from Youth United in that it is a council that represents two bodies of people. One is our executive board. This board consist of adult supports who express a strong passion to help youth, as well as youth who have been chosen as YAC executive leaders. These individuals will listen to the youth and act as liaisons between System of Care Leadership and the Youth Advisory Full Board. The YAC executive leaders also help determine what the Full Board needs and wants assistance with by scheduling youth led trainings, overseeing YAC project ideas, and providing feedback and support. The YAC Full Board will share their voices on different policies and issues that affect youth in the system. These youth will be trained on a variety of topics that will help to develop their role on YAC, provide recommendations to Systems of Care Leadership, and work with YU in implementing projects.







amily Alliance for Change (FAFC) is a parent driven, peer-to-peer organization with the objectives of supporting, educating and empowering parents with special needs children to meet their family's goals. FAFC supports families by providing Parents Support Partners and Parent Partners, training opportunities, support groups, and connections to resources. FAFC staff mentor parents to serve as leaders on the parent advisory council which functions to advise and inform the work of the system of care and advocate for legislative policy changes that benefit children and families.

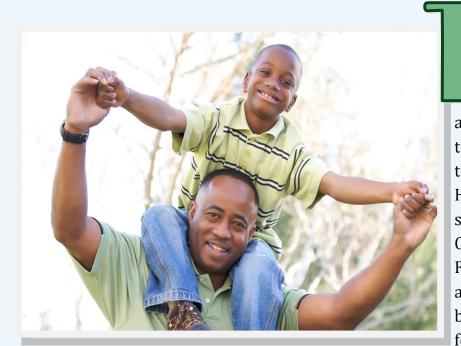
Family Alliance for Change A Division of Development Centers



EVENTS

- Close to 400 children participated in a Christmas event
- Over 150 children
 participated in an Easter
 event
- 15 families were supported by a Thanksgiving giveaway
- Over 1,000 free lunches have been provided through the free lunch program
- Parent training with the Detroit Police Department: Domestic Violence Day
- Legislative Event where parents met with Senator Virgil Smith

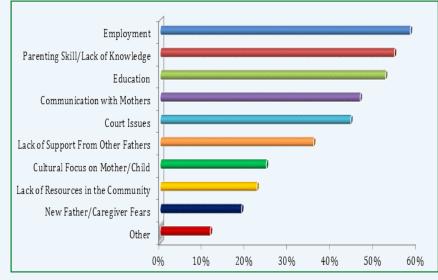
www.develctrs.org/programs-services/family-alliance-for-change/



he Wayne County Fatherhood Initiative has remained a focal point of Connections Wayne County Systems of Care, despite a recent vacancy which led to the temporary barrier of engaging father's and community partners. with the continued However. support and collaboration of Connections the Wayne County Fatherhood Initiative has installed a new Steward in order to further build and move the Initiative forward which includes maintain-

ing previously established partnerships and endeavoring to secure new collaboration opportunities to help assist fathers and their families achieve positive outcomes. One of the goals of the Initiative is to allow father's to be the author of their story and to provide them with continued encouragement to be teachers, leaders and role models for those who look up to them.

MAJOR ISSUES FACING FATHERS IN WAYNE COUNTY



EVENTS

- Fatherhood 101
- Authentic Fatherhood
- The Character of Fatherhood
- Second Annual Fatherhood
 Forum
- The Father Daughter
 Dynamic
- Preparing Our Children to be Better Adults

ITEGRATED CAF

SCREENING KIDS IN PRIMARY CARE PLUS

SKIPP is a demonstration project of Pediatric Integrated Health Care in Wayne County. The initial grant was developed by MDCH and funded by the Flinn Foundation, awarded to DWMHA by MDCH and sub-contracted to Starfish Family Services through the Systems of Care initiatives related to Pediatric Integrated Health Care taking place at the time. The project ended on April 19, 2014 and was refunded by MDCH for one Behavioral Health Consultant to provide services in two (2) of the original four (4) locations from June, 2014 to September 30, 2015.



CHILDREN SCREENED AND ASSESSED BY SKIPP



REFFERED TO CMH SERVICES





THE MICHIGAN ACTION LEARNING NETWORK (ALN)

The ALN was created by 5 communities in Michigan awarded previous or current SOC funding with the intention of creating an action plan around integrated health care for children. The ALN goal is to improve care along three dimensions:

- 1. Quality and satisfaction
- 2. Improved health of populations
- 3. Reduced cost of care



CHILDREN HAVE BEEN 73 DIAGNOSED WITH BOTH **ASTHMA AND SED**

The ALN network developed and piloted the use of a Community Action and Analytics Guide. The Guide is intended to help primary and behavioral health professionals identify specific high risk populations in their community and then take specific data driven actions to optimize integration efforts. Here in Wayne County asthma has been identified as the most frequently occurring chronic condition in children. Connections is partnering with The Children's Center to focus our efforts, utilizing The Guide, on children diagnosed with both SED and asthma.

SPECIAL POPULATIONS

Cornerstone Replication Project

he Cornerstone model continues to focus on addressing the needs of youth who are diagnosed with Serious Emotional Disturbance (SED) and who are in the process of transitioning into adulthood and independence. Youth work with an assigned clinician, and peer as well as with the entire Cornerstone team to make gains in five domains of their lives: education, housing stability, employment, mental well-being, and social skills.

In FY12-13, Ruth Ellis Center implemented the model under the title "Intersections" to meet the needs of youth who identify as LGBTQ2S. One additional agency, Development Centers Inc., began the model replication process with support from Cornerstone experts at Southwest Counseling Solutions (SWCS). In FY13-14, five (5) additional agencies, Lincoln Behavioral Services, The Guidance Center, The Children's Center, Northeast Guidance Center and New Center, expressed interest in implementing Cornerstone, and were trained on the TIP model.



The Number of Youth involved in Cornerstone during FY13-14 increased by 94% from the previous fiscal year

DCI 29

Ruth Ellis 84

Youth who identify as LGBTQ2S

Over the past several years, Connections has worked with Ruth Ellis Center to provide services to this vulnerable population. This year Ruth Ellis Center continued to increase the number of youth receiving CMH services. A new component to Intersections was added "Trauma Informed Employment Coaching" with the help of 20 LGBTQ2S youth of color. Ruth Ellis Center also received three (3) grants in FY13-14: An Arcus grant for youth leadership and advocacy, a federal SOP grant to increase outreach and connect youth to mental health services, and an Andrus family grant to conduct family acceptance trainings. **620** youth were served by Ruth Ellis Center last fiscal year.

TWO SPIRITED

The addition of "2S" to LGBTQ provides recognition for American Indian/Alaskan Native Lesbian, Gay, Bisexual, Transgender (LGBT) individuals. The name refers to having both female and male spirits within one person, or a different balance of masculine and feminine characteristics typically seen in gender conforming men and women.

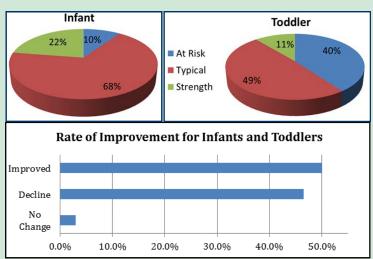
IMPROVING QUALITY OF SERVICES

Infant Mental Health (IMH)

The **nine (9)** agencies providing IMH gained access to the Electronic-Devereux Early Childhood Assessment (E-DECA) system at the end of January. The "Total Protective Factors (TPF)" score measures factors in the infant known to contribute to resiliency. The TPF score is a composite of three (3) protective factors: Initiative, Self-control and Attachment. Children scoring: below 40 are considered to be "at risk," between 41-59 are considered average, and 60+ have above average strengths.



CHILDREN AGE 0-47 MONTHS RECEIVED IMH SERVICES

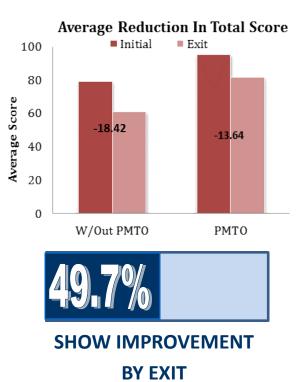






PMTO

Parent Management Training Oregon Model (PMTO) is an evidenced-based structured intervention to assist parents and caregivers with managing the behavior of their children. Wayne County continues to participate in State wide training for PMTO and currently **has 12** trained PMTO therapists.





Wraparound is a process used to support families by bringing a group of people together as a team for planning and delivering supportive services that build on family strengths in order to meet identified needs with the goal of keeping families together safely.

Model Fidelity

Wraparound is, by nature, a highly individualized service tailored to individual families and their needs, making model fidelity challenging to verify and improve. Connections has

developed a coaching and training process to observe, rate, and support facilitators as a means to improve Wraparound services and ensure model fidelity. Starting next fiscal year, the Children's Initiatives Coordinator will observe a random selection of 20 facilitators per quarter. In lieu of lengthy coaching sessions, results of the competency surveys will be distributed directly to providers.

MDCH Enrollment Process

This past year, MDCH implemented an Enrollment Process for all agencies seeking to provide Wraparound. With that mandate from MDCH all eleven (11) agencies within Wayne County completed the application and participated in the Enrollment Process. We anxiously await approval from MDCH and wish to acknowledge all eleven agencies for their hard work and dedication to this process.

Medicaid B3 Subcommittee

A subcommittee was created between CareLink, Gateway, DWMHA and various Community Mental Health (CMH) agencies in an effort to create awareness and increase service utilization of the Medicaid B3 services. Community Living Supports (CLS) and Respite were both greatly under -utilized by CMH. The subcommittee met to:

- Revise the current method of accessing these services
- Renew and strengthen CLS/Respite provider relationships
 Revise and create forms to ensure a seamless referral process
- Create a satisfaction survey for recipients of services.

With these efforts in place, we are hopeful to see a 60% increase in referrals for both CLS and Respite in the new fiscal year.



Children who receive Wraparound services have entered with a significantly higher CAFAS score than children who do not. By Exit, their scores are still higher than those who did not qualify for Wraparound services. Additionally, youth receiving Wraparound stay in services 1.5 time longer than youth who do not, on average.



SHOW IMPROVEMENT BY EXIT

CROSS-SYSTEM CHILDREN AND YOUTH

Juvenile Justice

All youth entering the Juvenile Justice (JJ) system are screened and assessed for SED by the Juvenile Assessment Center (JAC). **760** adjudicated youth were referred to CMH services in FY13-14. This is an increase in the number of youth referred last year, and an increase in the overall percentage of JJ youth referred to CMH.

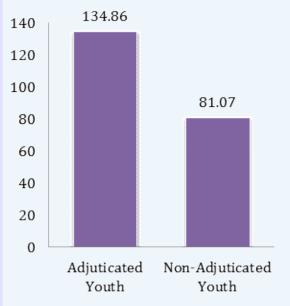


OF ALL YOUTH SERVED AT THE JAC HAVE BEEN REFFERRED TO CMH SERVICES

INTREGRATED COMMUNITY BASED SERVICE INITIATIVE (ICBS)

ICBS is a collaborative partnership between Community Mental Health and the Juvenile Assessment Center to ensure that Juvenile Justice clients receive all services available to them, conducive to meeting their developmental needs.

713 youth have been diagnosed with SED and **30** youth with IDD



Initial CAFAS Scores



CURRENTLY ENROLLED IN CMH SERVICES



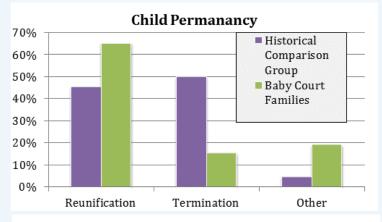




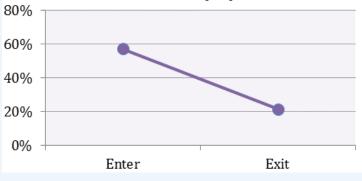
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Baby Court

Wayne County Baby Court began in 2005 with the goal of helping the court meet the developmental and emotional needs of infants in foster care. In 2009, funding provided by the Center for Disease Control and Prevention allowed for training from the Miami-Dade County Court team, the innovators of the Baby Court model. In 2012, funding from the Flinn foundation provided the opportunity for expansion and evaluation of the project. То date, Wayne County Baby Court has served 23 parents and their 32 infants. Families involved in Baby Court see higher rates of reunification and lower rates of termination of rights. Additionally, infants show a **reduction** in developmental delays upon exiting Baby Court.









SED-Waiver

Department of Human Services (DHS) and DWMHA work together on this initiative to provide Wraparound services to foster care and adoptive children. It was noted that enrollment in the SED waiver was low compared to previous years. In September 2014, DWMHA, in partnership with Carelink and DHS, all three local DHS district offices were trained on the SED waiver project totaling over 75 DHS staff and private agencies. We are confident these numbers will increase as eligible children/youth are identified for the SED waiver and begin to utilize the program and supportive services.



TRAUMA INFORMED

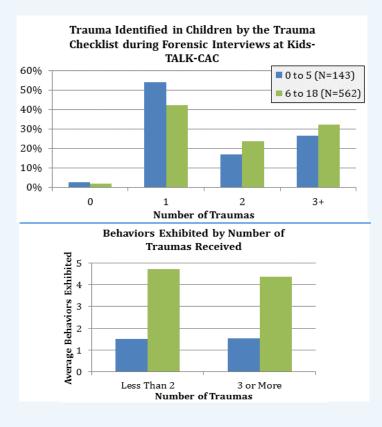


onnections has been working with the Children's Trauma Assessment Center (CTAC) to increase awareness of the impact of trauma across system partners. Currently all agencies serving youth in Wayne County use the brief Trauma checklist at intake. The checklists assess the number of traumas and the number of trauma reactions/behaviors of the children served.

Kids-TALK CAC

Kids-TALK Children's Advocacy Center is a community based program run out of The Guidance Center. Kids-TALK CAC serves youth who are suspected victims of sexual abuse, physical abuse, neglect, or other forms of psychological trauma. Kids-TALK CAC has began using the trauma checklist as part of their forensic interview in

April 2014. Youth identified as having trauma, through these screenings, will be encouraged to enroll in mental health services.



Accomplishments

- Trauma training with the Great Start Collaborative
- Presentation to Physical Education Teachers at Professional Development Day
- Trauma presentation at Wayne RESA
- "Secondary Trauma and the Importance of Trauma" Training
- Trauma 101 Training
- Trauma and Brain Development Presentation
- Violence 2 Victory Town Hall



EXPANSION GRANT

When We Work Together, Then We Are Wise "Pii Maamwinokiyaang, Miidash Nibwaakaayaang"



n July 2013, DWMHA, in partnership with American Indian Health and Family Services (AIHFS) and The Guidance Center (TGC), was awarded a Systems of Care (SOC) Expansion Grant from the Substance Abuse and Mental Health Services Administration (SAMHSA).

This is a unique partnership supporting systems-level change for all underserved children and youth in the larger Wayne County SOC. Systems-level change focus

areas include: Cross-systems workforce development, strengthening Cultural and Linguistic Competency, and increasing Youth and Family voice throughout all aspects Connections Wayne County Systems of Care.

Year One Accomplishments

- Implementation of a culturally supportive Wraparound Pilot at AIHFS
- Creation of a county-wide SOC Parent/Youth Advisory Council
- Participation in training and technical assistance
 - Georgetown Training Institutes
 - Consultations with national Wraparound consultants Pat Miles and Holly Echo-Hawk
- Restructured work plan
- Redesigned Connections logo

Goals for year two

- Expanding culturally-based Wraparound at AIHFS
- Conducting a multi-tiered Cultural and Linguistic assessment for Connections agencies
- Conducting a Cultural and Linguistic Competency Training
- Coordinating workforce development activities through the Practice Standards Task Force
- Increasing Youth and Family involvement

WORKFORCE DEVELOPMENT

ayne County has the largest children's mental health workforce in the state of Michigan. In partnership with the Virtual Center for Excellence, Connections helps train thousands of children's mental health professionals to ensure consistent quality of care.



Qualified Children's Mental Health Professionals

Children Focused Trainings Held Through the Virtual Center For Excellence

Topic	Number of Trainings	Average Attendance
Early Childhood	11	50
Grand Rounds	11	200
Juvenile Justice	9	70
Practice-Specific	5	30
Co-Occurring	2	60
Trauma	7	14
Fatherhood	6	40
System of Care	2	44





All CAFAS/PECFAS administrators in Wayne County must undergo a stereotyped training provided through the VCE. DWMHA has **14** CAFAS and **7** PECFAS trainers. Consistent training provided in the same location by the same groups of trainers supports rater reliability.

CAFAS

360 participants 13 trainings Average Passing rate 91.25%

PECFAS

216 participants 7 trainings Average Passing rate 99.71%



2013-2014



