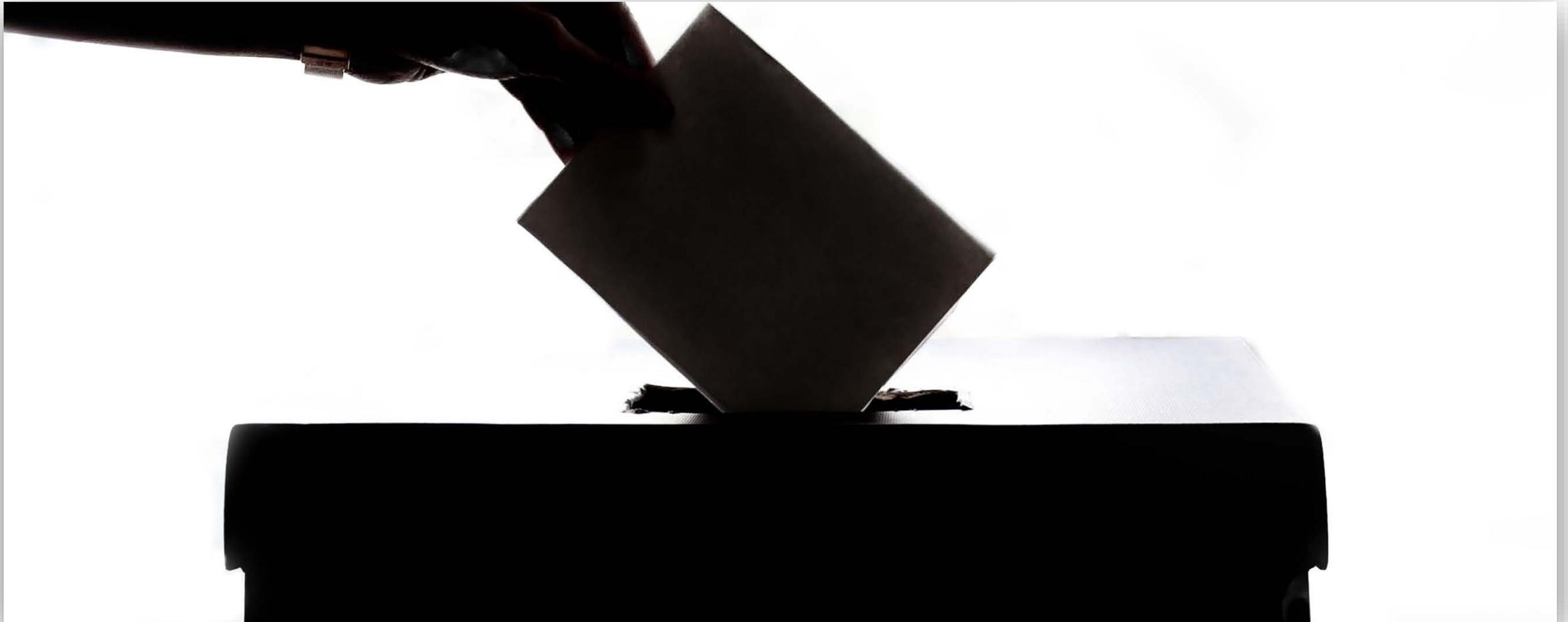


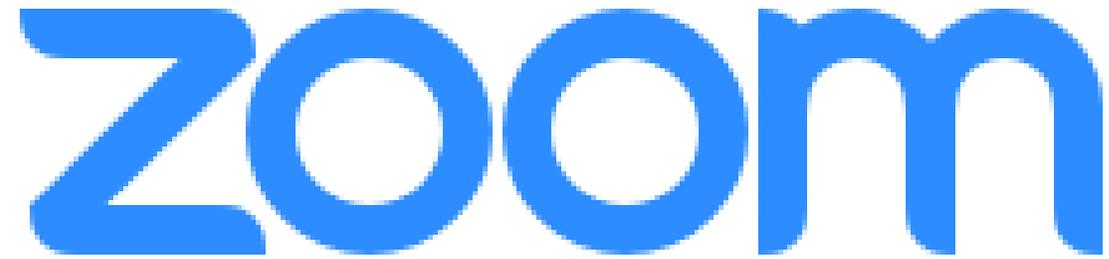
Children and Youth System of Care Technical Assistance Webinar

Formerly the Integrated Practice Technical Assistance Call/Webinar



Who do you represent?



The Zoom logo is displayed in a bold, blue, lowercase sans-serif font. It is positioned on the left side of the slide, with a vertical yellow bar to its left. The letters are thick and rounded, with a consistent blue color throughout.

The July SOC call will be held via Zoom, a registration link will be sent with the meeting announcement

Agenda

- Updates
- Overview of SOC Interagency Leadership (MOU Part One)
- Q&A

Goal: Provide information about the imperative and critical nature of the first element of the SOC MOU (AB 2083), including the core elements required and provide an example of how one California County is approaching implementation.



Have Questions

Q&A feature in this webinar

OR

SystemOfCare@dss.ca.gov



Mark Your Calendars!

July 1, 2020

10:00 am – 12:00 pm

Topic: Financial Resource Management (MOU Part Nine)

Children and Youth System of Care
Technical Assistance Webinar

Formerly the Integrated Practice Technical Assistance Call/Webinar



> Register at: <https://attendee.gotowebinar.com/register/7317001786503715586>

WHAT: Monthly webinar meeting during which elements of the Assembly Bill (AB) 2083/System of Care Memorandum Of Understanding will be highlighted, with technical and adaptive guidance and learning from the field. The webinars will build on the longstanding monthly Wraparound and Pathways to Well-Being webinars and will bring partners together to build a Children and Youth System of Care practice community. Attendees will receive guidance and information from state System of Care representatives and will be invited to share and discuss practices and ideas related to serving children and families via well-integrated systems.

WHEN: First Wednesday of each month from 10:00-11:30 a.m. (PST), unless otherwise noted.

UPCOMING DATES AND TOPICS

JUNE 10 - SOC Interagency Leadership (MOU Part One): Intended for:

- Core team members, department leadership and senior staff
- County Education

Interagency Leadership Team

AB 2083 Memorandum of Understanding



Children and Youth System of Care State
Technical Assistance

June 10, 2020

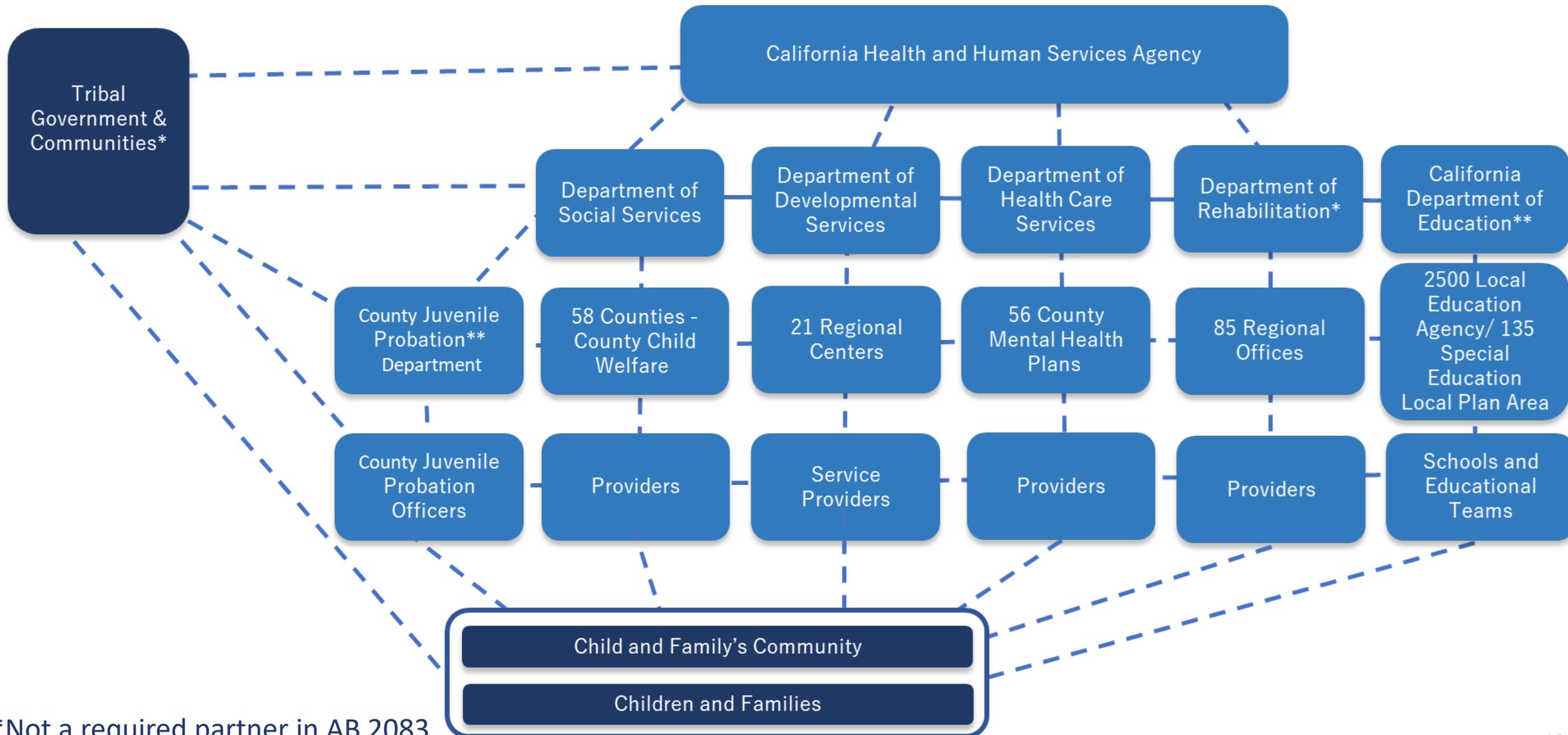
Takeaways

- Authentic shared leadership is valuable
- Maximize existing trauma-informed care efforts
- Share responsibility by leveraging current processes
- Effective integrated care delivery requires effective integrated leadership
- AB 2083 will provide the foundation for a sustainable Children and Youth System of Care

Children and Youth System of Care State Technical Assistance Team

- Christine Bagley, Department of Developmental Services
- Ashley Franklin, Department of Social Services
- Dianna Wagner, Department of Social Services
- Renzo Bernales, Department of Education
- Pawel Ryzinski, Department of Health Care Services

Children and Youth System of Care Partners



*Not a required partner in AB 2083

**Required partner by AB 2083, but not a department under Health and Human Services Agency

Integrated Leadership Supports

- Current and future emergency coordination
- Responding to budget challenges with revenue sharing and maximize available funding sources
- Continuum of Care, Juvenile Justice, CalAIM and other reforms
- Implementation of Adverse Childhood Experiences/Trauma Informed Care
- Multi-Tiered System of Supports in Schools
- Prevention Collaboratives/Public Private Partnership

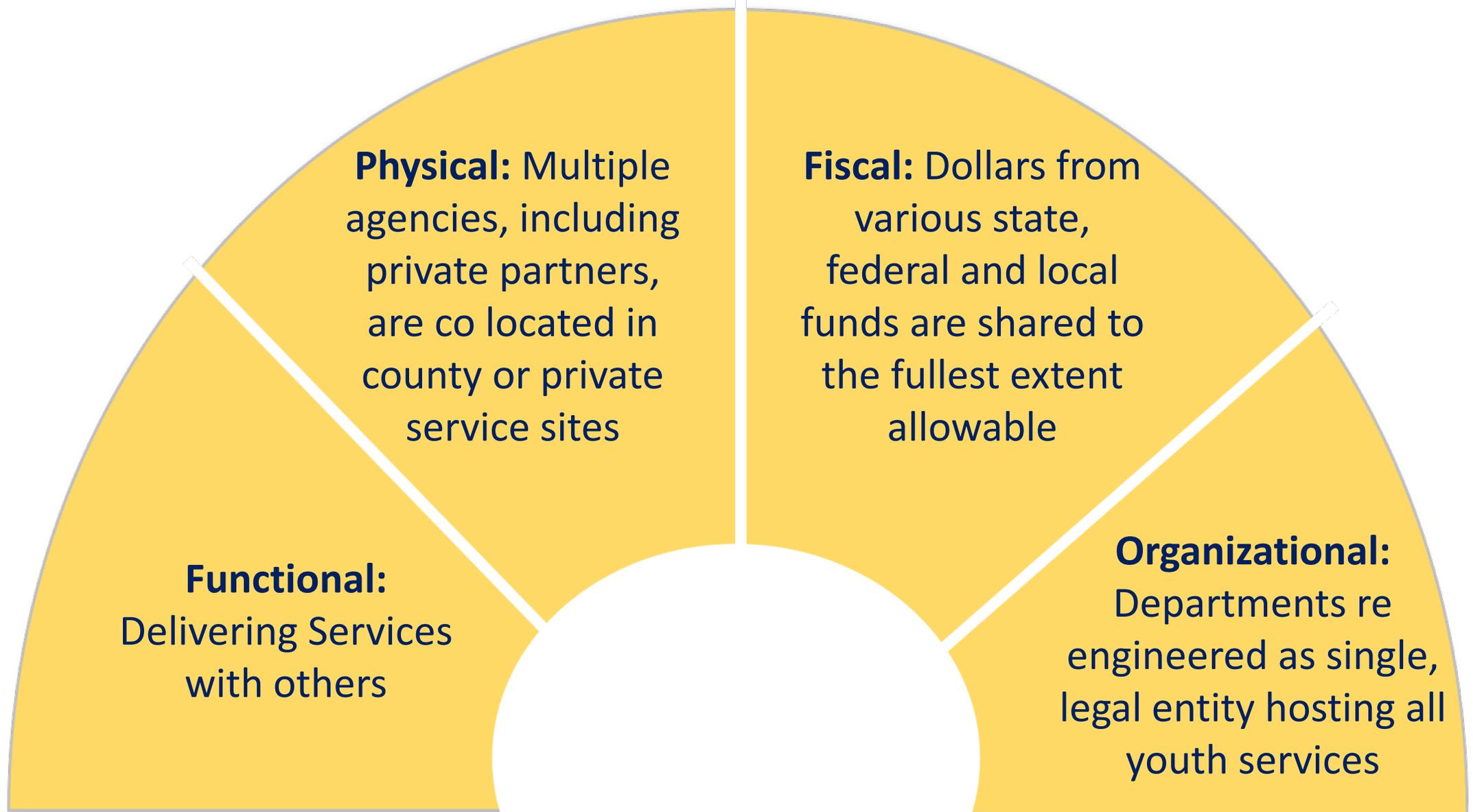
Need for a System of Care for Children and Youth

- Once the child/youth is in care, families nearly always need services from multiple systems (*Behavioral Health/Public Education/housing/developmental/etc.*).
- Supports care and services to youth/family in ways that are responsive to the youth/family and also avoid more costly and/or inappropriate adult sector services.

System of Care Outcomes

- School attendance increased (8.6% discontinuation vs. 15% discontinuation for youth not receiving services from a system of care)
- Decrease Mental Health inpatient services by 42%
- Less likely to visit an emergency room/average cost per child for ER visits decreased 57%
- Less likely to be arrested/average cost per child for juvenile arrests decreased by 38%
- Decreased behavioral and emotional problems, suicide rates, substance use, and corrections involvement

Pathways to Development of System of Care



The Continuum of Collaboration

Communication, Cooperation, Coordination, Coalition, Integration

High Level of Collaboration: System Focused

- Formal agreements
- Agencies sacrifice autonomy
- Shared goals & targets
- Joint responsibility for resources and funding
- Staff managed by partnership
- Focus on whole service
- Joint decision-making
- Clear mandate for collaboration
- Specific focus of activity outlined in MOU
- Affiliation to partnership
- Accountable to partnership

System of Care Required Partners

The Interagency Leadership Team (ILT) serves as the governing and coordinating body for the child and youth system of care.

The ILT membership consists of department heads, deputies or executive staff from programs and departments that interact with children:

- Chief Probation Officer
- Director of Mental Health Plan/Children's Service Coordinators
- Director of Social Services/Human Services Agency
- Superintendent of the County Office of Education or designee
- Regional Center Leadership or Designee

Tribal Partners

Important opportunities for engagement:

- State level
- County level

Additional Partnerships for System of Care

- Local Education Agencies (LEAs), and Special Education Local Plan Areas (SELPA)
- Managed Care Plans
- Other Social Services Departments
- Judges/Commissioners or Bench Officers (i.e. Juvenile Court representative)
- Youth, parents, and families
- Department of Public Health
- Foster Youth Coordinating Program Executive Advisory Council



Staff Supported and Impacted by the ILT

- Senior managers from children or youth serving partners
- Child and youth and parent partner leaders
- Quality Improvement Coordinators and managers
- County Health Office
- County Executive's Office
- Regional Center management teams and service coordinators
- Teachers and school personnel
- Children and Youth System of Care State Technical Assistance Team
- Others

Cross-Partner Collaboration for System of Care Success

Consider the role of LEAs, their corresponding School Attendance Review Boards, county offices of education, and SELPAs in the ILT and if these roles may facilitate connections to county and community services that would augment LEAs' instructional and support services systems.

Example: ILT and LEA's should consider developing routines that allow for regular communication around outcomes and opportunities toward teaching to the whole child.

ILT Leadership Responsibilities



Through the leadership of Department heads or Deputies, the ILT designs and approves...

- Shared policy
- Shared revenue/expense
- Data Sharing
- Alignment of training resources
- Alignment and sharing of personnel
- Co-created vision and mission
- Co-created communication plan

The MOU should articulate the ILT make-up including meeting frequency, and meeting norms to carry out its shared leadership work.

MOU Governance Framework



- ILT Governance procedures
 - Frequency of meetings
 - Meeting location
 - Group Decision-Making method
 - ILT minutes and follow through process
 - Appointment of designees or surrogates
- A process to revisit procedures as necessary to ensure that the MOU remains current
- A process to communicate and check-in with the Interagency Placement Committee and other advisory bodies on a regular basis

Guiding Questions

- Is there clear, consistent, alignment of values for the system partners who form the Child and Youth System of Care?
- Is there a system in place to periodically reaffirm and update the MOU, to ensure it remains current and takes into account personnel changes of partner agencies?
- Does the County Executive Office have awareness of and hold support for our efforts? If not, how do we build awareness for this work?
- Are the right individuals, including family and youth voices at the table?
- Do local partners have plans for how meetings and conversations will be hosted and facilitated?
- More guiding questions can be found [here](#).

Common Factors for an Effective Systems of Care

- Family voice and choice
- Natural supports
- Collaboration
- Teaming
- Community based
- Culturally competent
- Individualized
- Strength based
- Persistence
- Outcomes based

The ICPM ten Core Principles guide Interagency Leadership Teams and provide a shared language on which to build leadership behaviors for the local Children and Youth System of Care



System-Centered Trauma Informed Care

- Pursuit of effective Trauma Informed Care requires System Integration
- Accessing and/or navigating multiple service systems can be traumatizing for children, youth, parents and caregivers
- Silo-driven systems are not effective for professionals or economically efficient for agencies and departments

Trauma Informed Children and Youth System of Care Requires (1)

- Administrative Commitment to Change: Trauma and its impact are part of how staff members understand people and their problems. (Parallel and universal throughout the agency).
- Universal Screening: An awareness of trauma and its impact on the world view of consumers is known and destigmatized.

Trauma Informed Children and Youth System of Care Requires (2)

- Training and Education: Consistent and Clear; Modeled at every level; informed by awareness of effects of vicarious trauma.
- Hiring Practices: Recruitment focuses on bringing professionals who are aware, mature, relational in their approach.
- Review of Policy and Procedures: Each agency policy and guidance document is reviewed to identify how it might support TIC.

Likely Outcomes of a Trauma Informed System of Care



Increase in Positive Permanent Outcomes



Less job turn-over



Fewer personnel/HR investigations



Increased communication



Greater Job Satisfaction

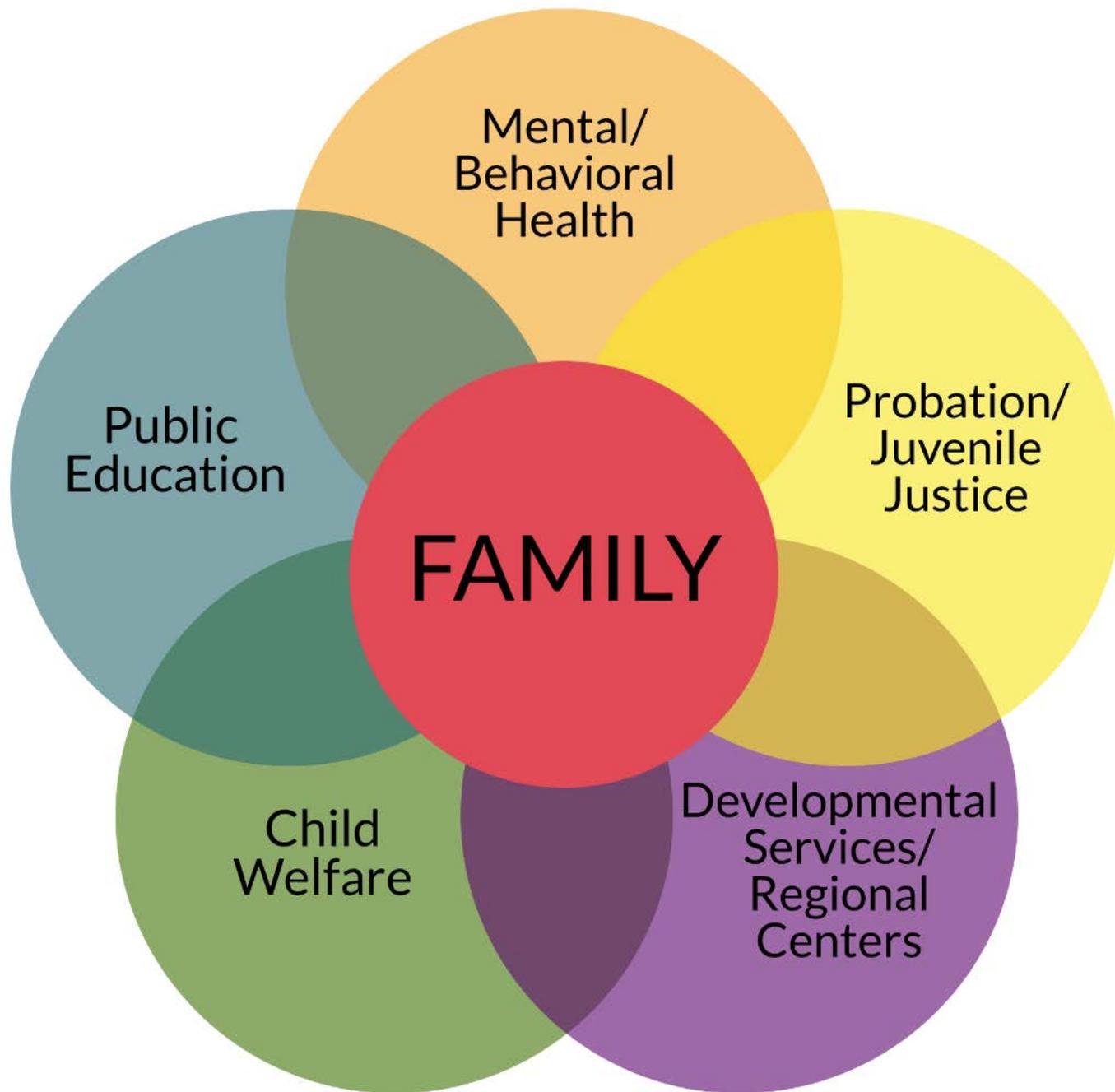


Can all be achieved through local AB 2083 MOU/System of Care

Recommendations for MOU Development

- Keep it simple and focused
- Build on existing MOUs/agreements and reduce redundancy
- Develop MOU content and guidance as a partnership, THEN refer document to your legal teams
- Practice empathy, power-sharing and understanding
- Persistence is powerful

Agency Coordination



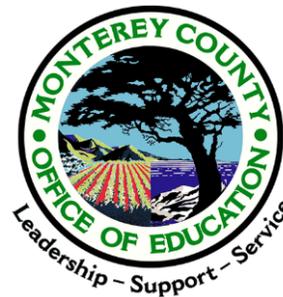
Monterey County Children and Family System of Care

AB 2083 Overview



MONTEREY COUNTY
BEHAVIORAL HEALTH
SALUD MENTAL

Avanzando Juntos Forward Together



Our Interagency Leadership Team

Today's Presenters

Marni R. Sandoval, Psy. D.

**Deputy Director of Behavioral Health
Child and Adolescent System of Care**

Laura Neal

**Deputy Director Children's Services
Department of Social Services**

Gregory Glazzard

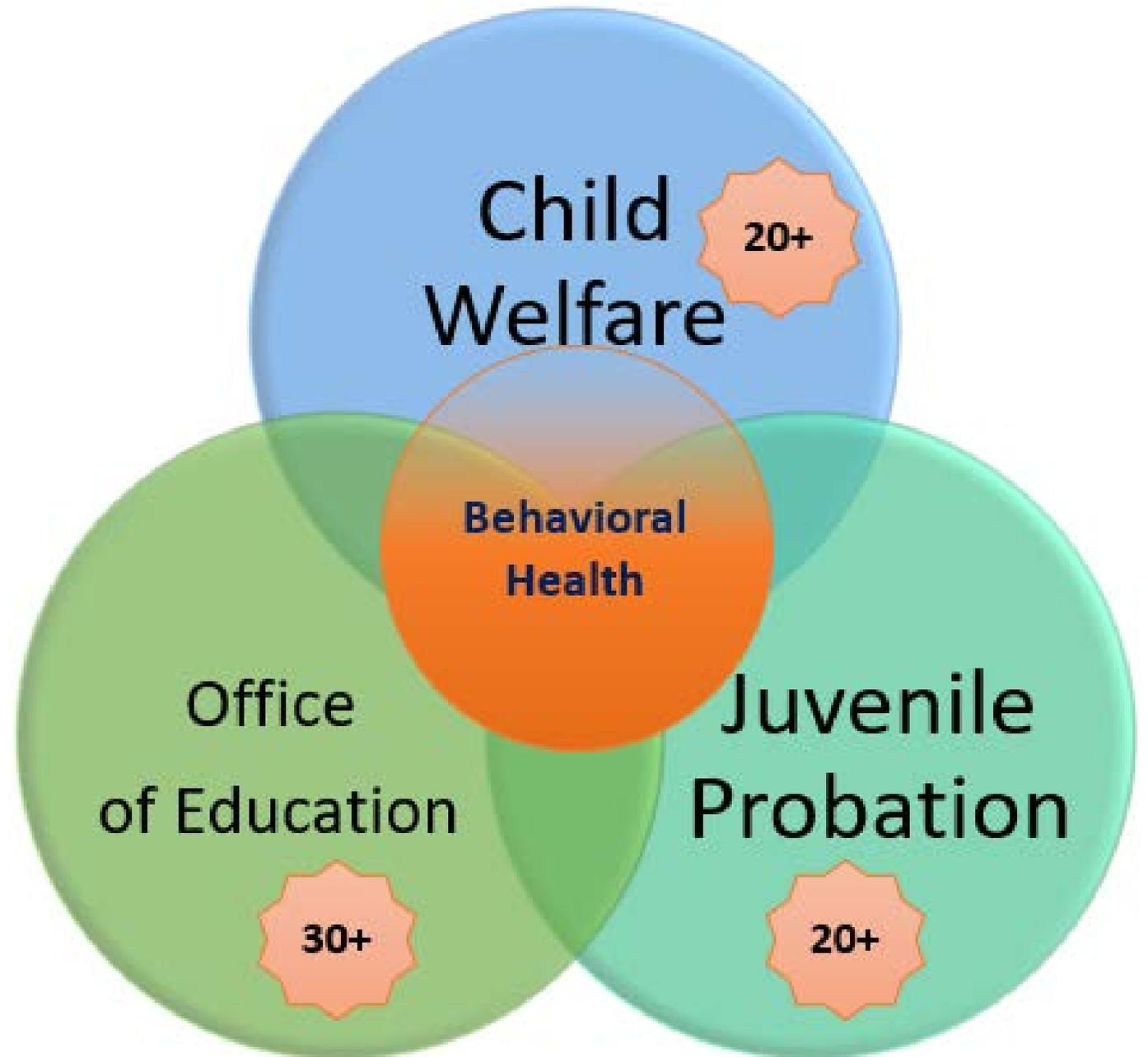
**Probation Division Manager-
Juvenile Probation**

Esther Rubio

**Monterey County Office of
Education
Program Coordinator, School
Climate**



Our Historic Interagency Relationships



Agency Mandates (1)

Behavioral Health

- Provide Mental Health & SUD Services for the Medi-Cal, Uninsured, Undocumented with Severe conditions.
- Partner with other Co Child serving agencies to promote a System of Care approach locally.

Child Welfare

- Provide safety, permanency and well-being for children and their families
- Investigate reports of child abuse and neglect
- Prevention, intervention, family preservation and permanency planning services

Juvenile Probation

- Community Safety
- Intervention/Prevention
- Court Recommendations
- Enforcement of Court Orders/Supervision
- Coordination of Services/Rehabilitation
- Victim Assistance

Office of Education

- Student Services
- Educational Services to Districts, including Professional Development for Educators
- District Finance/Business Oversight and Services

Agency Mandates (2)

Joint Agency Mandates

AB403 – Continuum of Care Reform (CCR)

Pathways to Wellbeing

Integrated Core Practice Model

CANS

AB 2083 – Children’s System of Care MOU

Interagency Collaborative Team

Leadership

**BH Deputy Director &
Program Manager**

**Child Welfare Director &
Program Managers**

**Juvenile Probation Division
Director & Program
Manager**

**Superintendent of Schools
& School Climate
Coordinator**

**Juvenile Court Presiding
Judge**

Skilled Analysts

Behavioral Health

Child Welfare

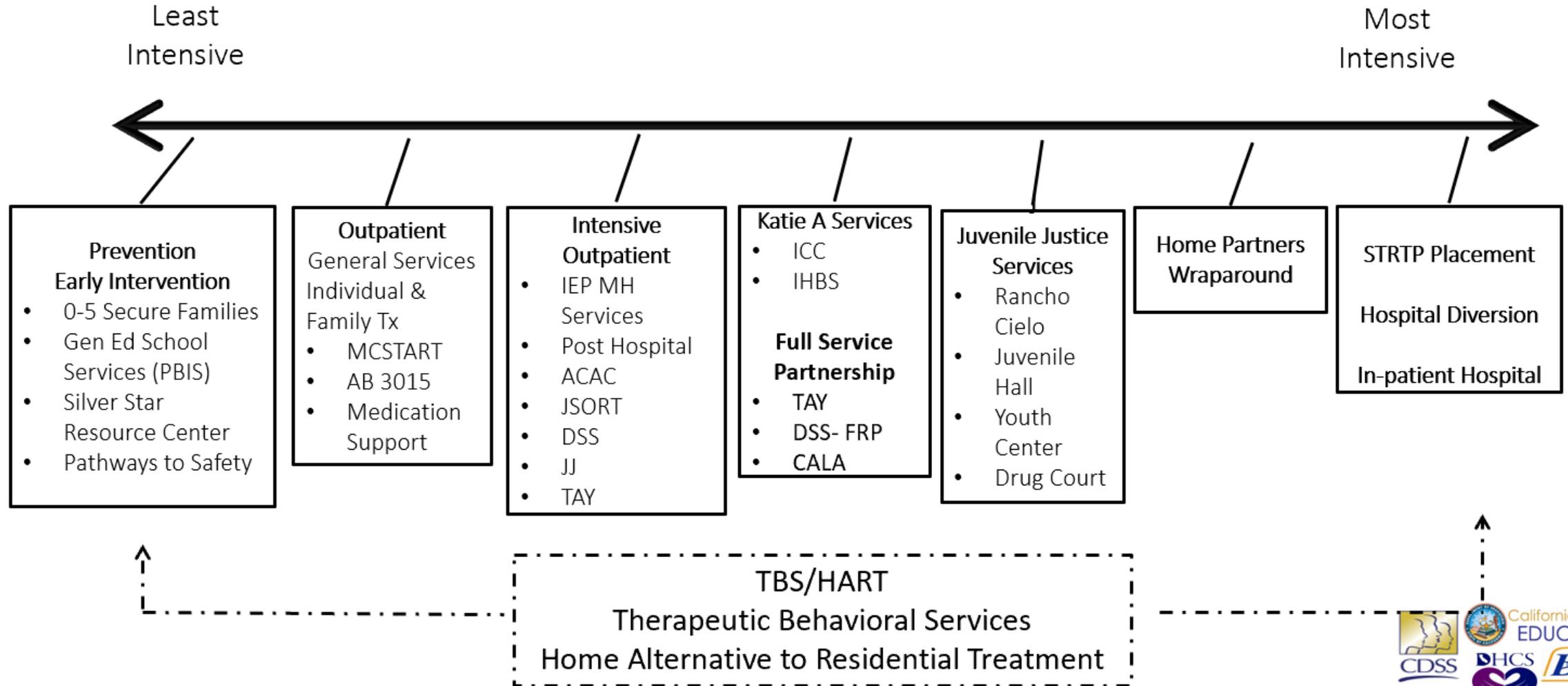
Juvenile Probation

Office of Education

**Collaborative &
Integrated Direct
Services and
Programs**

Continuum of Care

Referral to BH Children's Mental Health Division



Integrated Collaborative Team



AB 2083 Adaptations



ILT MOU Language – Principles (1)

- A. To promote and provide services, which are outcome-focused, family-centered, strength-based, culturally proficient, comprehensive, and integrated to the extent possible, and which encourages families to use their own resources to resolve problems.
- B. To identify, develop, and maintain service systems consistent with public/private, community-based, school-linked and family partnership, which can intervene early or prevent problems with at-risk children, youth and families.
- C. To provide services to children, youth and families in the least restrictive, least stigmatizing and community-based settings appropriate to meet their identified needs.

ILT MOU Language – Principles (2)

D. To identify, develop, and monitor coordinated policies, procedures, resources and implementation practices for the benefit of at-risk children, youth and families in Monterey County; and to hold System Partners and their staffs accountable in these efforts.

E. To adopt confidentiality standards consistent with and authorized by California Welfare and Institutions Code (WIC) Section 18986.46, 34 Code of Federal Regulations (C.F.R.) 99, WIC Section 108500.00, Local Rule (place holder) of Monterey County Superior Court and consistent with its integrated family-centered approach.

F. To promote and maintain quality services that are cost effective, evidence-based and appropriate through the use of shared service authorization/re-authorization and outcomes evaluation as allowed by law.

ILT MOU Language – Principles (3)

G. To provide on-going support and direction to each agency and its staff in providing services and resources for at-risk children and families consistent with the Vision, Mission and Principles.

H. To promote reinvestment of any fiscal savings into identified gaps in services or early intervention, prevention and Wraparound programs in order to avoid, if possible, placement of children into institutionalized settings.

I. To assure that the voices, experiences and wisdom of foster youth and their families and caregivers are incorporated into the collaborations and partnerships captured by this agreement.

ILT MOU Language – Principles (4)

J. To ensure the appropriate utilization of treatment and rehabilitation services for children, youth and families in conjunction with appropriate court sanctions while ensuring the safety of the community and public-at-large.

K. To promote coordinated data collection, data exchange, and filing of documents, including electronic filing between the courts, social services agencies, and other key partners and track data that permits them to measure their performance. The Interagency Leadership Team policy prioritizes information sharing between the courts and partners such that delays in service delivery are minimized.

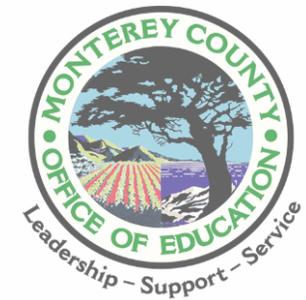


Reflections



MONTEREY COUNTY
BEHAVIORAL HEALTH
SALUD MENTAL

Avanzando Juntos Forward Together



Resources

- **System of Care**
- [CHHS Website](#)

- **System Profiles**
- [Child Welfare Services](#)
- [Specialty Mental Health Services](#)
- [Rehabilitation Services](#)
- [Regional Center – Early Start Services](#)
- [Regional Center – Lanterman Act Services](#)
- [California Department of Education – Special Education Services](#)
- [California Department of Education – Foster Youth Services](#)

- **Legislation – AB 2083**
- [Assembly Bill 2083](#)

- **MOU Guidance**
- [AB 2083 MOU Guidance Information Notice](#)
- [AB 2083 MOU Guidance](#)

- **Children and Youth Behavioral Health**
- [Integrating BH and Primary Care Services](#)
- [MH/SUD](#)
- [Return on Investment](#)
- [National Training and Technical Assistance Center](#)
- [Successful Implementation Factors \(USF\)](#)

Next Children and Youth State Technical System of Care Technical Assistance Webinar

MOU Part 9: Fiscal Resource Management

July 1, 2020, 10-11:30 am

- Who, what and how of fiscal and resource sharing
- Please invite MOU system partners involved fiscal resource management

Addendum A

- On this slide, there is a yellow half circle with sections like a pie showing a spectrum shape. There are four sections, each describing a different pathway:
 - Functional: Delivering services with others
 - Physical: Multiple agencies, including private partners, are co-located in county or private service sites
 - Fiscal: Dollars from various state, federal and local funds are shared to the fullest extent allowable
 - Organizational: Departments re-engineered as single, legal entity hosting all youth services