



Introduction

The Pennsylvania System of Care (SOC) Partnership is governed by youth leaders, family leaders, and state administrators from the child serving systems who serve as equal partners on the State Leadership and Management Team (SLMT). The SLMT is interested in hearing from counties, youth, and families about ways to enhance SOC involvement throughout Pennsylvania. We are asking for your participation because your voice is important. One way of gathering input is through the County Assessment Survey. All survey responses will be kept strictly confidential and results will be shared with state and local leadership teams but not published.

Pennsylvania has a rich history of collaboration among child-serving systems, youth, families, and communities. Your participation in this survey will help all of us capture a broader view of local communities who are interested in improving their child-serving systems in collaboration with the PA SOC Partnership. Thank you in advance for your willingness to complete the survey.

System of Care Defined

A System of Care approach provides an organizational framework and philosophy that results in a spectrum of effective, community-based services and supports for youth with complex behavioral health challenges, multi-system involvement, and their families. These services and supports are organized into a coordinated network, build meaningful partnerships with families and youth, and address their cultural and linguistic needs in order to help them function better at home, in school, in the community, and throughout life. - Beth Stroul

The County Assessment will gather input on these Pennsylvania SOC Standards:

- Equal partnership on leadership teams
- Youth driven
- Family driven
- Integration of child-serving systems
- Valuing natural and community supports
- Assuring cultural and linguistic competence
- Youth & Family Services and Supports Planning Process
- Evaluation and continuous quality improvement

Sincerely,
State Leadership & Management Team

James Palmiero, System Tri-Chair
Karan Steele, Family Tri-Chair
Ashley Bishop, Youth Tri-Chair





County Assessment

April 2016

***Required** - Please complete which county you are from. The data cannot be processed without it. Also, forms that have 50% or more of the questions left blank will not be included in the data analysis.

*County _____

Date: / /

Choose the one that best describes you:

<input type="radio"/> Youth	<input type="radio"/> Managed Care Organization (Behavioral Health MCO, Physical Health MCO)
<input type="radio"/> Family	<input type="radio"/> Community (YMCA, United Way, Big Brothers/Big Sisters, Spiritual/Religious, etc.)
<input type="radio"/> Elected/Appointed (Judge, County Commissioner, County Council Member, Human Services Administrator, Court Administrator, etc.)	<input type="radio"/> System (Mental Health, Child Welfare, Juvenile Justice, Education, Drug and Alcohol, Physical/General Health, Intellectual and Developmental Disabilities, Other)
<input type="radio"/> Provider Organization (Public/private, purchased/contracted services, e.g. Director, Manager, Direct Service Staff, etc.)	<input type="radio"/> Other (please specify): _____

Each question has the following answer choices:

Not at all – If you believe this never or almost never happens in your county, please mark “Not at all”.

Rarely – If you believe this happens only about 25% (a quarter) of the time in your county, please mark “Rarely”.

Sometimes – If you believe this happens about 50% (half) of the time in your county, please mark “Sometimes”.

Often – If you believe this happens about 75% (three-quarters) of the time in your county, please mark “Often”.

Always – If you believe this happens all or almost all of the time in your county, please mark “Always”.

Unsure - If you don't know if something happens in your county, it is OK to mark “Unsure”. This answer will not be counted in the overall county scores.

Not Applicable – If the question does not apply to your county, it is OK to mark “Not Applicable”. This answer will not be counted in the overall county scores.

Please try to answer all of the questions and make your best choice based on your experience.



I. Implementation of the PA System of Care Standards

A. County Leadership Team

Intent of Section A: To describe the make-up and function of a leadership team/group in a county. Leaders from the child-serving systems/agencies may include youth and families as members (who have/had services from the child-serving systems) to support equal decision-making. All members understand, commit, and participate, using information to develop policy about implementing an effective System within a county.

There is a Leadership Team in my county. Yes No Unsure

If "Yes", it is called: _____ (Please fill in the blank)

If "No" or "Unsure" to this question then **SKIP** to Section B, Question 1 (B1).

I am a member of the Leadership Team in my county. Yes No Unsure

	Not at all	Rarely	Sometimes	Often	Always	Unsure	Not Applicable
1. The Leadership Team includes youth and family members.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. I am a member of this Leadership Team committed to the PA SOC standards and know my roles and responsibilities.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. My Leadership Team includes leaders from the child-serving systems (mental health, child welfare, juvenile justice, drug and alcohol, education, physical health, and/or intellectual and developmental disabilities).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. My Leadership Team meets regularly at times convenient for all members.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Members use data and information to make decisions about changes in policy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Leadership team decisions resulted in changes in policy.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

B. Youth-Driven

Intent of Section B: Youth have a decision-making role in their own care and in the policies and procedures that impact the future outcomes of youth in child-serving systems

	Not at all	Rarely	Sometimes	Often	Always	Unsure	Not Applicable
1. In my county, there are opportunities for youth voice in each child-serving system.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Youth in my county are given the information needed to be decision-makers about their own care and well-being.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. My county has incentives in place for youth participation. (Examples: stipends, assistance with transportation, travel reimbursement, childcare, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Youth in my county have access to a youth organization that supports youth involvement.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



I. Implementation of the PA System of Care Standards (cont.)

C. Family-Driven

Intent of Section C: Families have a decision-making role in their family's care and in the child-serving systems.

	Not at all	Rarely	Sometimes	Often	Always	Unsure	Not Applicable
1. There is a family organization/group in my county.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Peer support is available for families in my county.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Families are invited to trainings held by system partners or providers in my county.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Family members have a primary role in the decisions which influence their child and family regardless of services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Family members are involved in county and/or state committees or boards.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Community and natural supports are included in service plans (such as: Individualized Education Plan (IEP), Individualized Service Plan (ISP), Family Service Plan (FSP), etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

D. Integration of Child-Serving Systems

Intent of Section D: A more coordinated and cooperative approach among the child-serving systems with youth and family being the driving force. These efforts include the mandates and requirements of each system with a sharper focus on coordination of effort, resources, goals, and outcomes on an individual and systems level.

	Not at all	Rarely	Sometimes	Often	Always	Unsure	Not Applicable
1. Overall the mission, vision, and outcomes of each of the child-serving systems are shared among the child-serving systems, as well as with youth and families as part of its community planning and work.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. My county coordinates trainings that are developed and presented jointly with youth and families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. A unified plan of care is developed to address youth and family needs/goals regardless of how they enter the child-serving system.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Data about the child-serving systems are shared with youth, family, community, and system partners.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Solutions to barriers are included in service planning for youth and families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



I. Implementation of the PA System of Care Standards (cont.)

E. Natural and Community Supports

Intent of Section E: The county assures agencies and providers actively promote connections to natural and community supports for/by youth and families across the county. This includes identifying, developing, sharing, and promoting resources in a way that is culturally competent and meaningful.

	Not at all	Rarely	Sometimes	Often	Always	Unsure	Not Applicable
1. My county has a broad resource list of community supports and activities for youth and families which is readily available and shared.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. My county identifies and promotes natural supports and community resources that help meet the broader community/cultural needs.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Youth and family plans include natural and community supports in a useful/meaningful way that effects positive change.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. My county values the growth of natural supports and community resources that have been identified as positive and effective supports by youth and families.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

F. Cultural and Linguistic Competence

Intent of Section F: The county strives to ensure services sought, obtained, and provided are culturally balanced, attainable, and available for all youth and families served. The promotion of Cultural and Linguistic Competence (CLC) is critical for meeting the individualized needs of children and families through cultural awareness, sensitivity, and acceptance of cultural and linguistic differences.

	Not at all	Rarely	Sometimes	Often	Always	Unsure	Not Applicable
1. Leaders in my county understand county demographics and diversity (culture, age, income, education, race, ethnicity, religion, primary language, sexual orientation, gender identity, and disability status).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. My county ensures the availability of culturally relevant trainings for youth, family, system partners, and community partners.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. My county partners with culture brokers (e.g. traditional healers, places of worship, ethnic media outlets, alternative medicine practitioners, cultural organizations, local businesses, social organizations, etc.).	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. In my county, translation and interpretation services are available for those with limited English proficiency seeking services in the county.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Culturally and linguistically diverse families are represented in the decision-making processes at all levels of services.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



I. Implementation of the PA System of Care Standards (cont.)

G. Youth & Family Services and Supports Planning Process

Intent of Section G: The child-serving systems within a county have a planning process in place for youth and families. The planning process will allow youth and families to drive the development of a plan that is meaningful and effective for them. It will include their strengths, natural and community supports, and services as needed. Examples of planning process models include but are not limited to: Child and Adolescent Service and Support Program (CASSP), Family Group Decision-Making (FGDM), High Fidelity Wraparound (HFW), Case Management, Rehabilitation for Empowerment, Natural Supports, Education, and Work (RENEW), and other identified processes. The processes can include a range of youth and family supports including volunteers, advocates, and Certified Peer Specialists.

	Not at all	Rarely	Sometimes	Often	Always	Unsure	Not Applicable
1. My county has a planning process model (see above) that can be utilized by any youth or family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. There is an identified step by step dedicated referral process.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Youth and families can self-refer.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The Planning Process includes youth and/or family peer supports as identified and needed by the youth & family.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

H. Evaluation and Continuous Quality Improvement (CQI)

Intent of Section H: The county takes an active role in gathering and reviewing data for the purposes of informed decision-making. Data is used to determine the strengths and challenges of county systems, services, and supports, and identifies areas for improvement. Additionally, data is collected and analyzed to help identify and eliminate any cultural, linguistic, racial, or ethnic disparities.

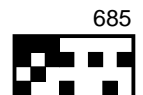
	Not at all	Rarely	Sometimes	Often	Always	Unsure	Not Applicable
1. My county regularly reviews and uses data to make decisions.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Data is used to help county services and supports improve their practices.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. My county reviews data to identify and eliminate any barriers (cultural/linguistic/racial/ethnic) to receiving services and supports.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. The child-serving systems in my county work together to reduce barriers related to data sharing.	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>



Feedback

Please leave any comments or questions regarding this survey or the PA System of Care Partnership.

If you would like additional information about the PA System of Care Partnership, visit our website: www.pasocpartnership.org or leave a note in the space below.



Definitions:

CASSP - Child and Adolescent Service System Program

Child serving systems/agencies/partners - May include but are not limited to: mental health, behavioral health, drug and alcohol, children and youth, juvenile justice, intellectual and developmental disabilities, early intervention, physical health, education, etc.

Community Supports - Community organizations, churches, social groups, memberships, and social clubs in which youth and families participate.

County Leadership Team (CLT) - While it might vary from county to county, membership includes representation from *System Partners* (Drug & Alcohol, Mental Health, Behavioral Health, Children and Youth, Juvenile Justice, Intellectual and Developmental Disabilities, Education, etc.) and *Youth and Family Partners*. It has the core belief that youth and family voice are an integral part of its membership in transforming the way individual child-serving systems integrate their efforts to help youth and families be successful in their homes, schools, and communities. The team should be composed of 50% system partners and a minimum of 25% youth and 25% families. All members understand, commit, and participate, using information to develop policy about implementing an effective System of Care through the PA System of Care Partnership Eight Standards. The functions of the CLT may include but are not limited to: assessment of county needs, identification of priorities, and development of outcomes, goals, and action steps to meet goals. The CLT engages in a method of review (continuous quality improvement) to assess progress and data sharing to use when making decisions for budgeting, expenditures, progress assessment, etc.

Cultural and Linguistic Competence (CLC) - One of the core values of systems of care

Cultural Broker - A person who bridges, links, or mediates between groups or persons of differing cultural backgrounds for the purpose of reducing conflict or producing change. It is someone who acts as a liaison, or more simply, a go-between, to advocate for another person or cultural community. Cultural Brokers include but are not limited to: social workers, interpreters, health educators, community organization board members, program support personnel, healers, spiritualists, etc.

Cultural Brokering - Bridging, linking or mediating between groups or persons of different cultural backgrounds to effect change.

Cultural Competence - The integration of knowledge, information, and data about individuals and groups of people into clinical standards, skills, service approaches and supports, policies, measures, and benchmarks that align with the individual's or group's culture and increases the quality, appropriateness, and acceptability of health care and outcomes.

Disparities - Differences in treatment or access to treatment that are due to a person's cultural, linguistic, racial, or ethnic background. The sources of disparities include differences in geography, lack of access to adequate health coverage, communication difficulties between consumer and provider, cultural barriers, provider stereotyping, and lack of access to providers.

Family - Parent or family member who has/had a child or youth involved in the child-serving systems and may be a member of the County Leadership Team or a county leadership group

Family organization - Informal or formal support that may be led by family members who have an interest or lived experience

FSP - Family Service Plan

High Fidelity Wraparound (HFW) - Team-based planning process with youth and family support partners. The HFW model is an evidence-informed process based on a specific framework that includes 10 principles, 4 phases, and the HFW Theory of Change.

IEP - Individualized Education Plan

ISP - Individualized Service Plan

Leadership team/group - Examples of groups include, but are not limited to: a County Leadership Team (CLT), Communities That Care, County Children's Roundtable, Community Collaborative Boards, etc. While it may vary from county to county, membership includes representation from *System Partners* (Drug & Alcohol, Mental Health, Behavioral Health, Children and Youth, Juvenile Justice, Intellectual and Developmental Disabilities, Education, etc.) and *Youth and Family Partners*. The functions of the group may include but are not limited to: assessment of county needs, identification of priorities, and development of outcomes, goals, and action steps to meet goals. The group engages in a method of review (continual quality improvement) to assess progress and data sharing to use when making decisions for budgeting, expenditures, progress assessment, etc.

Linguistic Competence - The capacity of an organization and its personnel to communicate effectively, and convey information in a manner that is easily understood by diverse audiences including persons of limited English proficiency, those who have low literacy skills or are not literate, and individuals with disabilities.



Definitions: (cont.)

MCO - Managed Care Organization

Natural Supports - Personal associations and relationships typically developed in the community that enhance the quality and security of life for people, including, but not limited to: family relationships; friendships reflecting the diversity of the neighborhood and the community; association with fellow students or employees in regular classrooms and work places; and associations developed through participation in clubs, organizations, and other civic activities.

PA System of Care (SOC) Partnership - The name that Pennsylvania has given to its System of Care effort that has been funded by the Substance Abuse and Mental Health Services Administration (SAMHSA).

PA System of Care (SOC) Standards - A set of eight standards that the state of Pennsylvania has adopted to implement its System of Care:

1. Equal partnership on leadership teams
2. Youth driven
3. Family driven
4. Integration of child-serving systems
5. Valuing natural and community supports
6. Assuring cultural and linguistic competence
7. Youth and Family Services and Supports Planning Process
8. Evaluation and continuous quality improvement

available on www.pasocpartnership.org

Planning Process - A team-based planning approach for youth with complex behavioral health needs and multisystem involvement and their families. This can include High Fidelity Wraparound (HFW), Family Group Decision Making (FGDM), Child and Adolescent Service System Program (CASSP), Case Management, RENEW, and others.

Population of Focus - 8-18 year olds and their families who have complex behavioral health challenges along with involvement in the juvenile justice and /or child welfare systems and are in or at risk of out-of-home placement.

RENEW - Rehabilitation for Empowerment, Natural Supports, Education and Work (RENEW). RENEW is a structured school-to-career transition planning and individualized wraparound process for youth with emotional and behavioral challenges.

Shared data - Systems data shared with youth, family, community partners, and system partners in a way that is understandable, educates, and meaningfully informs everyone.

Systems data - Data or information that is collected by the child-serving systems.

System of Care (SOC) - A philosophy made up of a set of values and principles that provides an organizing framework for systems reform in partnership with youth and families.

Systems partner - An employee of a child-serving system (child welfare, juvenile justice, education, drug/alcohol, mental health, behavioral health, intellectual and developmental disabilities, etc.)

Training - Information and skill-building to help make informed decisions regarding but not limited to: Individualized Education Plans (IEPs), Individualized Service Plans (ISPs), child-serving systems, etc.

Youth - May include ages up to 27 and may have lived experience in managing their own complex behavioral health issues and also has direct experience with one or more child-serving systems. Youth may have direct experience in an out of home placement (such as foster care, RTF, hospitalization, kinship care, independent living, detention) which adds a valuable perspective. Youth may or may not be involved in a county leadership team or a leadership group in the county.

Youth/Family Peer support - This is an individual who uses their lived experience and their formal training to support youth and families who are involved with the child-serving systems.

Youth/Family Informal support - Informal community-based support for youth or families from resource persons identified by the youth/family. Such individuals are involved on a voluntary basis and may include friends, neighbors, extended family, community leaders, and others.

