



REPORT TO THE COMMUNITY 2012 – 2013





Dear Stakeholders,

Fiscal year 2012-2013 was another exciting year for Connections—System of Care. Partnerships have continued to expand and strengthen. April brought the new Michigan Autism Benefit, which allows for Medicaid reimbursement for Applied Behavioral Analysis treatment for children with autism. The benefit is currently available for children 18 months-5 years and will help meet the growing demand for services in Wayne County.

In July, Connections, in collaboration with partners from American Indian Health and Family Services, was awarded a \$4 million 4-year SAMHSA System of Care expansion grant. The goal of the grant is to combine the systems of cares, increase access to mental health services for American Indian youth and improve the cultural competency within our system of care.

Our family and youth involvement efforts continue to surpass expectations. Family Alliance for Change is building a large network of community parents committed to improving child and family systems and advocating on behalf of children and families. Youth United is well known across the state for their leadership efforts and efforts to make services youth-friendly.

The successes of Connections would not be possible without the support from organizational leaders, administrators, staff members, parents, and youth committed to transforming the way we serve children and families in Wayne County. Thank you for all your hard work, and I look forward to another eventful year in 2014.

Sincerely,
Crystal Palmer
Director of System of Care
Detroit Wayne Mental Health Authority

**STAY UP TO DATE ON
CONNECTIONS ACTIVITIES**

<http://www.vceonline.org/soc>

or LIKE us on Facebook!



Connections follows the system of care framework and principles, a child and family focused philosophy based on cross-system collaboration, individualized and strength-based practices, culturally and linguistically competent community-based services, and youth and family participation at all levels of governance.

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 at the community

CULTURALLY AND LINGUISTICALLY COMPETENT

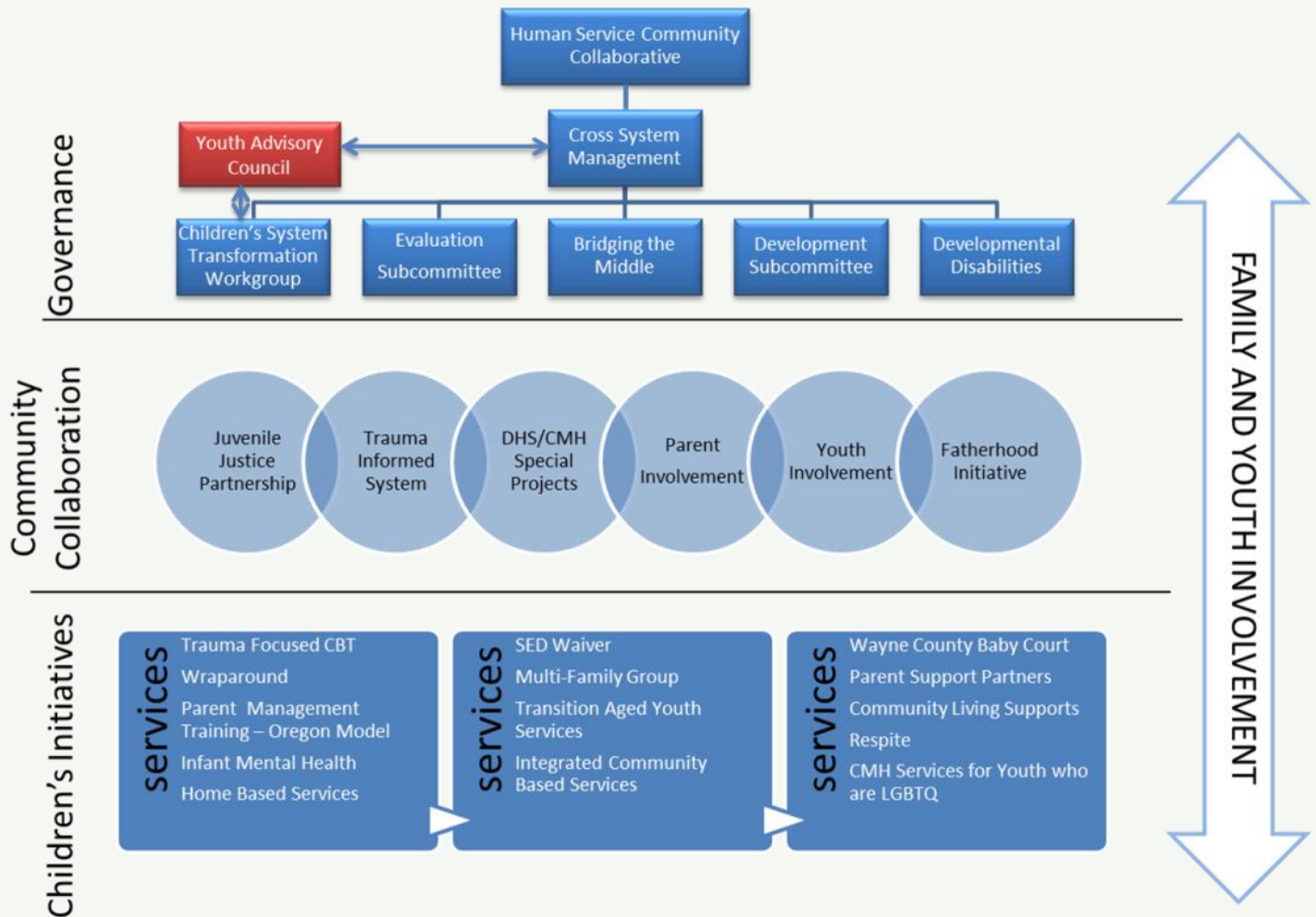
Agencies, programs, and services reflect the cultural, racial, ethnic, and linguistic differences of the populations they serve to facilitate access to and utilization of appropriate services and supports and to eliminate disparities



CONNECTIONS' GOALS

- 1) INCREASE ACCESS TO SERVICES**
- 2) INCREASE FAMILY/YOUTH VOICE**
- 3) INCREASE CROSS-SYSTEM COLLABORATION**
- 4) IMPROVE QUALITY OF SERVICES**
- 5) IMPROVE QUALITY OF WORKFORCE**
- 6) IMPROVE CHILD AND FAMILY FUNCTIONING**

SOC STRUCTURE



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



PARTNERSHIPS

Strong partnerships are essential to the success of a system of care. The Connections' collaborative works to bring together child and family serving systems with children, youth and families, in an effort to improve quality of service, facilitate access to services, and help children and youth be successful at home, in school, and in the community.

SYSTEM PARTNERS

- ◇ 3rd Judicial Circuit Court of Michigan
- ◇ Detroit Wayne Mental Health Authority
- ◇ 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

UNIVERSITY PARTNERS

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



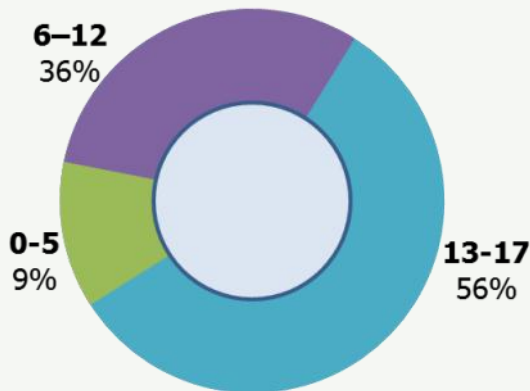
SERVICE PROVIDERS

- ◇ 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

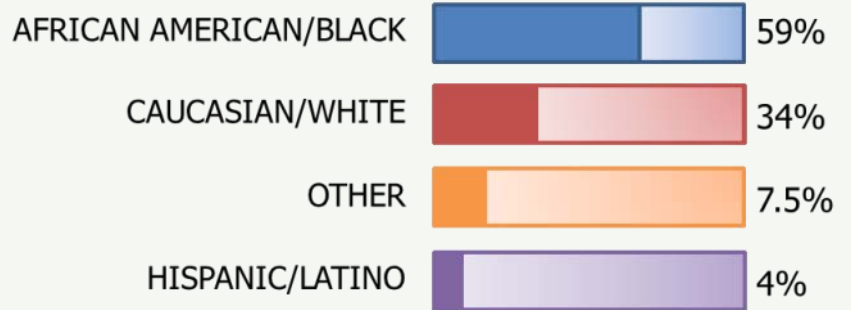
CHILDREN & FAMILIES

IN FY11-12, CONNECTIONS PROVIDED BEHAVIORAL HEALTH SERVICES TO **16,335*** CHILDREN

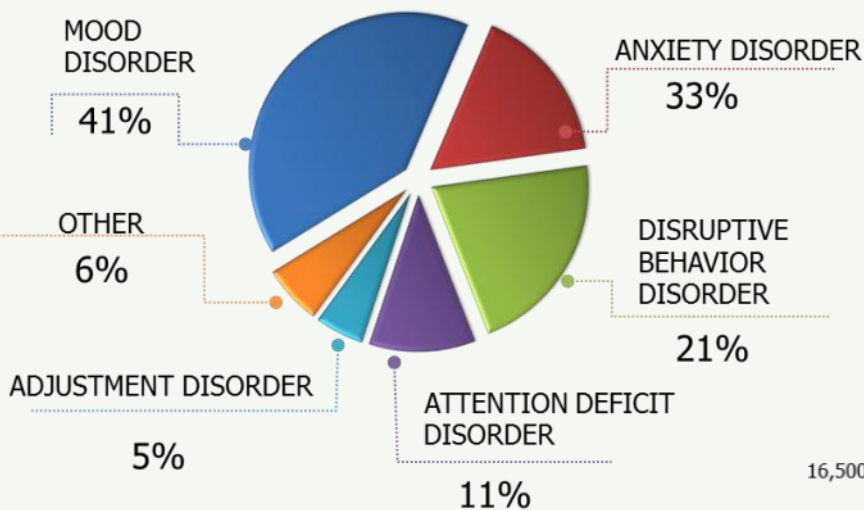
AGE



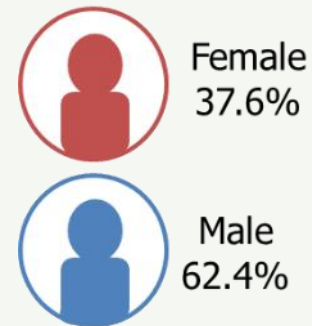
ETHNICITY



PRIMARY DIAGNOSIS



GENDER



CHILDREN SERVED BY FISCAL YEAR



*Number accurate as of Oct. 2013. Counts are unduplicated cases based off claims data, which may have a 90-day lag. This document will be updated to reflect those differences in Jan. 2014.

CHILDREN SERVED BY SERVICE*



Note: Children/youth can receive multiple services at once, or over the course of treatment.

CHILDREN'S SERVICES

Children's Initiatives is the comprehensive and integrated service array for children and youth with Serious Emotional Disturbance, and their families. These Initiatives comprise a variety of evidence based and evidence informed practices for children and youth within the system of care with multi-system involvement and complex needs; assuring access to quality care. Complete program descriptions and eligibility criteria are available in the Children's Service's Guidebook, available on the Connections' website at www.vceonline.org/soc.

Connections provides services to approximately **16%** of all Medicaid-eligible children and youth in Wayne County.



FAMILY INVOLVEMENT



A Division of Development Centers

Family 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. Parents also advise and inform the work of the system of care and advocate for legislative policy changes that benefit children and families.

COMMUNITY EVENTS

Family Alliance for Change is a strong fixture in the community. In addition to providing support services, Fafc hosts many events throughout the year to engage families. Hundreds of parents and children participated in Cultural Day, Santa Day, an Easter Egg Hunt, Earth Day, and other events throughout the year. Fafc also coordinates other efforts to support the community, such as blanket drives in the winter, health and wellness support, a free lunch program, and providing back to school uniforms, shoes, and school supplies to families in need.

20+ CONNECTIONS COMMITTEES WITH PARENTS
40+ NEW GRADUATES FROM SYSTEM OF CARE TRAINING
10 PARENT SUPPORT PARTNERS
173 FAMILIES UTILIZING PSPs



Family Alliance for Change staff at the "Language of Love" Cultural Dinner.



Children are more likely to succeed when fathers, male caregivers, or father-figures are actively involved in their lives. The Wayne County Fatherhood Initiative (WCFI) was created by community stakeholders to provide support and education to men who are fathers or in the role of a father. Through training, networking, and mentoring, The Fatherhood Initiative strives to spread the message to men and women on the essential fatherhood role and ensure that father figures are being engaged in all child-serving systems.

EVENTS IN FY12-13

MEET AND GREET

A "Meet and Greet" was held in May to share information about the WCFI to interested community members. 45 people attended the event, where speakers discussed the role of fathers in childhood development.

FORUM

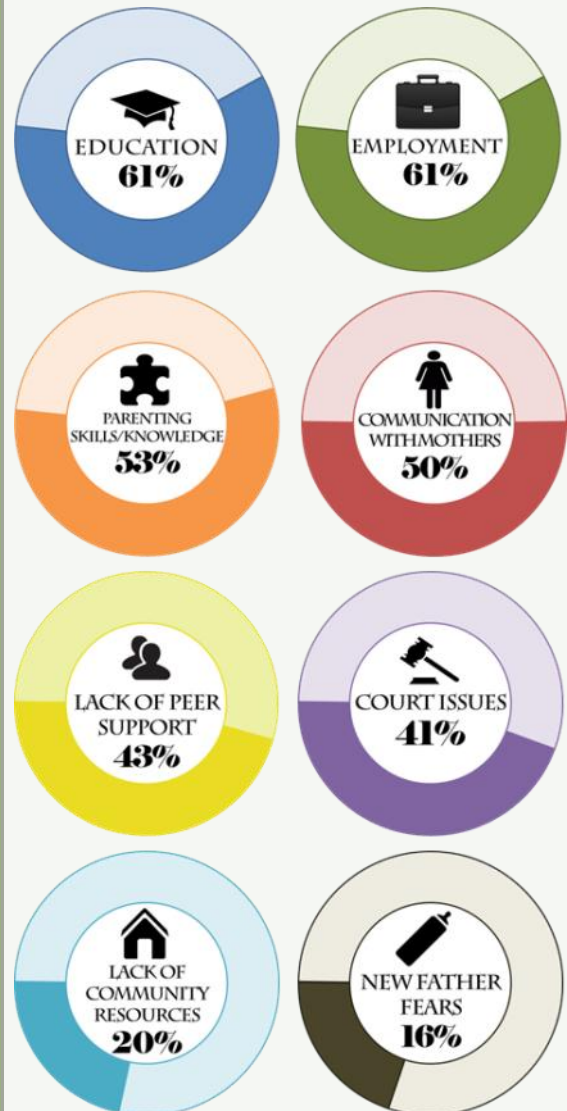
An all-day Fatherhood Forum was held in June, which featured keynote speakers and breakout topical sessions about the role of fathers in children's services. Attendees learned more about the Fatherhood Initiative and how they could be involved. 69 people attended this event.



COMING UP: FY13-14

WCFI has developed a monthly Fatherhood Training Series. For more information, and to register for events, create a profile on vceonline.org.

MAJOR ISSUES FACING FATHERS IN WAYNE COUNTY



Data collected directly from Wayne County fathers, male caregivers, mothers, female caregivers, and community members.

YOUTH INVOLVEMENT

Youth Involvement has been central to the development and expansion of Connections. All new policies, procedures, initiatives, and changes to existing programming are reviewed by youth.

Connections is fortunate to work with young leaders from Youth United to further this work. Youth United is a youth leadership initiative whose purpose is to promote youth voice and youth partnerships in Connections— System of Care using positive youth development values and philosophy. Youth United Youth Advocates are involved in a variety of projects and activities aimed at moving Connections toward a Youth-Driven System of Care.

MAJOR YOUTH UNITED EVENTS

DEVELOPMENTAL DISABILITIES DAY

In March, Youth United hosted a **Developmental Disabilities Awareness day event at The Children's Center**. The event offered developmentally appropriate games, resources, activities for the entire family.

MENTAL HEALTH AWARENESS DAY

For Children's Mental Health Awareness Day, in May, Youth United advocates took part in a picture campaign about youth involvement supports system change. A group also attended the Walk a Mile march in Lansing, where advocates marched around the capitol to promote **children's mental health awareness**.

FAMILY FUN DAY

Over 120 children, youth, and parents attended Family Fun Day held at Claude Allison Park in Redford. Families and youth groups gathered in the sun to learn about Connections

BACK TO SCHOOL RALLY

Youth United partnered with Family Alliance for Change to hold a Back to School Rally in September. Over 300 youth received backpacks full of notebooks, folders, pencils, and other school supplies.



As part of a team building activity, Youth Advocates each summarize their life story on a leaf, then combine to build a tree.

YOUTH ADVOCATES

In FY12-13, Youth United operated by embedding youth into agencies across the county. In their own words, Youth Advocates described their role in the system of care:

"To help and give back to the community"

"To mentor youth in Wayne County and provide them with any help that they need"

"To promote youth voice from the community into the agency"

"To increase awareness on issues youth face like mental health, foster care, juvenile justice, etc."

"Plan events, participate in important meetings, and get youth more involved in the community"

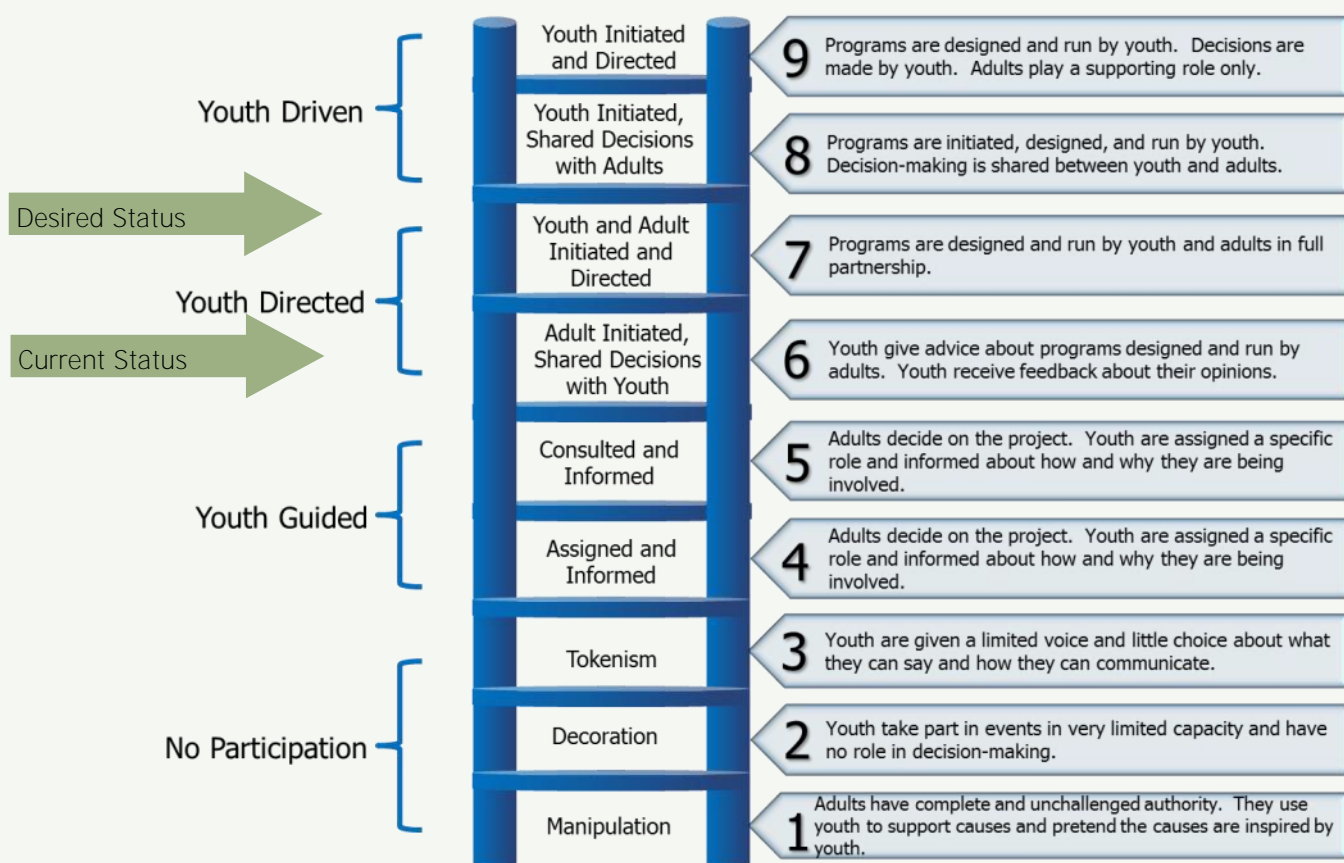
"Speak out for youth"

"Help in the community to give youth voice"



YOUTH ADVOCATES RATED THE CURRENT STATUS OF YOUTH INVOLVEMENT IN CONNECTIONS

Hart's Ladder of Youth Participation



MOVING FORWARD

At the end of FY2012-2013, Youth United reorganized into regional entities. Youth Advocates will be housed at three regional provider agencies, and each team will have an area of focus. The new structure will provide advocates with more peer support and project direction.



EXPANDING SERVICES

AUTISM BENEFIT

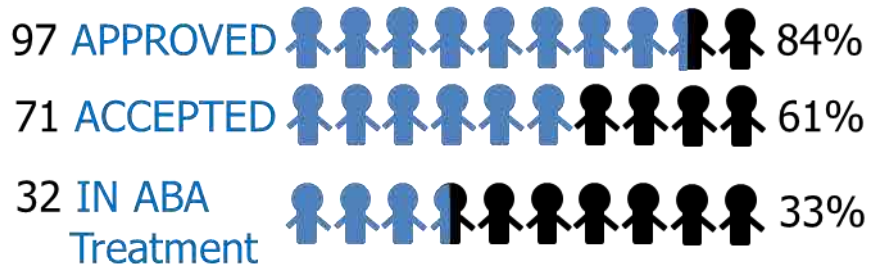
The Michigan Medicaid and MiChild Autism Benefit went into effect on April 1, 2013. This benefit provides children ages 18 months through 5 years old who have a medical diagnosis of Autism Spectrum Disorder (ASD) with Applied Behavior Analysis (ABA) services. ABA is a safe and effective treatment which has shown to help people with autism live independent and productive lives. Connections is working to expand the capacity to deliver ABA services by recruiting, training, and certifying staff to deliver this evidence based practice. During the past year, Connections has also helped to establish both county-wide and regional ASD task forces. The group is working with the Virtual Center of Excellence (VCE) to develop an online Autism Care Roadmap, which provides resources for families impacted by Autism or Autism Spectrum Disorders.



343 STAFF

**ATTENDED AUTISM 101
TRAINING ON ASD, MI
BENEFIT, AND M-CHAT**

116 CHILDREN APPLIED FOR BENEFIT



Enrollment numbers 4/1/13—10/17/13



RUTH ELLIS CENTER



Connections has worked with Ruth Ellis Center (REC) to provide services to youth who identify as LGBTQ. REC provides housing, a safe drop-in center, and mental health services to homeless, runaway, and at-risk youth. In FY12-13, REC secured a contract to provide adult services, allowing them serve the transition-age population of young adults that frequently visit the Center. REC also has been working with other provider agencies to create "satellite" sites across the county. Agencies would provide space for service delivery and support groups for youth that identify as LGBTQ. To date, four MOUs have been signed between REC and provider agencies. In FY12-13, Ruth Ellis Center provided services to 468 youth.



CORNERSTONE MODEL REPLICATION

Modeled after the Transition to Independence (TIP) model, the Cornerstone Project has provided services to transition-age youth at Southwest Counseling Solutions for several years with positive outcomes. In FY12-13, three additional agencies began the model replication process. With support from Cornerstone experts at Southwest Counseling Solutions (SWCS), staff has been trained on the model and several group interventions have begun. Ruth Ellis Center (REC) and Development Centers, Inc. (DCI) are currently implementing the model.

SERVED 2012-13



FUND DEVELOPMENT

RECEIVED IN FY12-13:

SAMHSA System of Care Expansion Grant:

- ◆ This four year, \$4 million federal grant will merge connections with the American Indian Health and Family **Services' system of care, providing training, and expand** services to American Indian/Alaskan Native youth and families in Wayne County.

Mental Health Innovation Grant

- ◆ A one year, \$102,000 grant from the state of Michigan will provide home-based mental health services for fifteen Juvenile Justice youth who are not Medicaid-eligible. Project partners include DWMHA, StarrVista, CareLink, Lincoln Behavioral Services, Development Centers, Inc., and the Juvenile Assessment Center.

System of Care State Block Grant

- ◆ For the 7th 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 designed to focus on systems change, special projects, and evaluation.

Juvenile Justice Academy

- ◆ The Bureau of Justice Assistance awarded Wayne County \$500,000 over two years to create a Juvenile Justice Training Academy to provide the JJ workforce with specialized training mental health and related topics in order for them to better assess and refer youth for mental health support services.

SERVICE EXPANSION WORKGROUPS

3-6 Task Force has been developing a service model for children age 3-6 and develop best practice standards for young children.

Co-Occurring Disorder Workgroup has focused on improving services to youth with co-occurring disorders by identifying screening and assessment tools and best practices to serve this population.

CROSS-SYSTEM PROJECTS

INTEGRATED CARE

CONCEPT PAPER

As the nation faces health policy changes, many communities are working to develop integrated physical and behavioral health care delivery models. In Wayne County, a Pediatric Integrated Health Care workgroup, comprised of Connections partners, developed a model of integrated care that is uniquely fashioned to fit the needs of children in Wayne County. Based on research about integrated health care models and best practices in collaborative service delivery for children and youth, the team developed a concept paper that describes a 4 quadrant service model reflective of developmental stages of childhood and adolescence. The document is available at www.vceonline.org/soc.

SCREENING KIDS IN PRIMARY CARE PLUS (SKIPP)

An initiative provided through Starfish Family Services, SKIPP provides behavioral health screening, assessments, and referrals to services through the use of Behavioral Health Consultants placed at pediatric practices throughout Wayne County. These professionals work closely with Primary Care physicians and serve as specialists for pediatric patients with behavioral health or developmental needs. At the end of F12-13, two primary care physicians were trained to screen children as well, increasing the number of children participating in the project. Overall, 1,438 children received screening and assessment by Behavioral Health Consultants and primary care physicians and 4 primary care providers. These children were then linked to services when appropriate.

SED WAIVER

The SED Waiver provides community-based Wraparound services to children and youth in foster care who are at risk of psychiatric hospitalization. The Department of Human Services works closely with Community Mental Health, strengthening the partnership between the two systems while connecting children to services. Since the waiver was authorized in 2010, 98 foster care children and their families have been a part of the project. In FY12-13, 35 new cases were added.

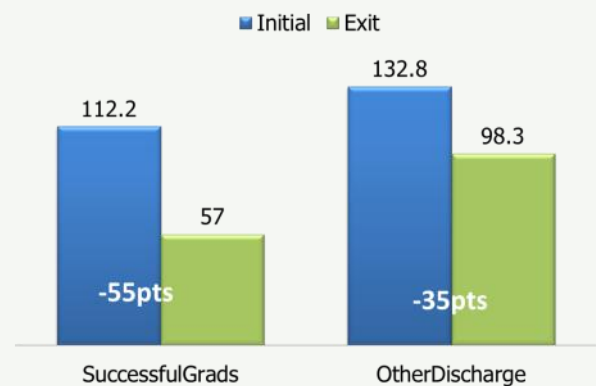
GRADUATION RATE



OUTCOMES

- ◆ For all closed cases to date, 71% improved in functioning
- ◆ Even “unsuccessful” discharges saw improvement

Reduction in CAFAS Score



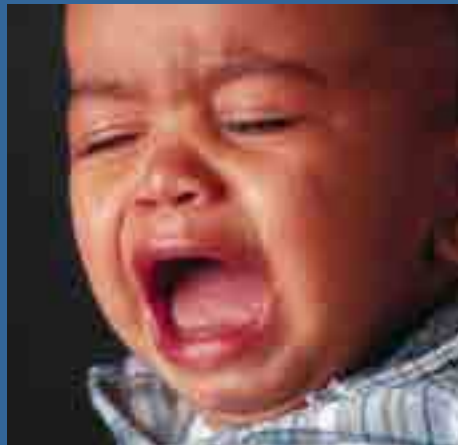
»Wraparound uses the Child and Adolescent Functional Assessment Scale (CAFAS) to measure functional improvement over the course of treatment for eight life domains. The maximum total score is 240, and a reduction in 20 points or more is considered a meaningful and reliable outcome.

INTEGRATED COMMUNITY BASED SERVICES (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.

Access Coordinators were hired by the Juvenile Assessment Center and embedded in each Care Management Organization where they were responsible for reviewing cases of youth diagnosed as SED, identifying systemic barriers, and securing mental health and other services. Identified **barriers, most related to care coordination, have been shared with children's mental health providers, and new policies, procedures, guidelines, and protocol will be developed to eliminate barriers across systems.** To date, [390 youth have been identified as SED and ensured access to appropriate services.](#)

In addition to youth identified through the ICBS project, the Juvenile Assessment Center identified and referred **650** youth with SED to community mental health services in FY12-13.



BABY COURT

Wayne County Baby Court is a specialty docket designed to meet the needs and improve the outcomes of infants and toddlers involved in the foster care system. The project, a collaborative between the 3rd Judicial Circuit Court, Detroit Wayne Mental Health Authority, and the Department of Human Services, utilizes infant mental health services to improve parenting abilities and the parent-child relationship to increase the likelihood for reunification or adoption. Since the program began, [27 families were placed on the Baby Court docket.](#) Preliminary results from a program evaluation conducted by Wayne State University Merrill Palmer Skillman Institute suggest the docket is resulting in reunification and positive outcomes for children and parents involved in the project. A Baby Court Implementation Manual was also developed this year, with versions for both supervisors and clinicians.

NEW INITIATIVES



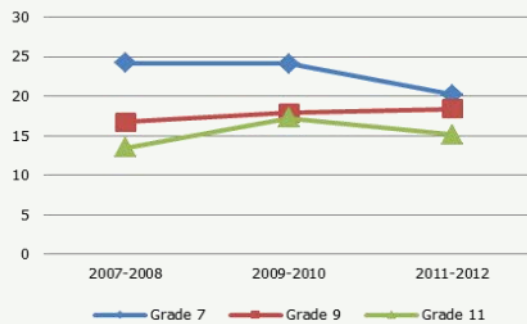
WAYNE COUNTY SUICIDE PREVENTION COALITION

Suicide is the leading cause of injury death in Michigan, and rates have increased in recent years. In 2013, concerned stakeholders reconvened the Wayne County Suicide Prevention Coalition to collaborate and develop cross-system countywide prevention efforts to eliminate suicide.

The coalition is working to develop a county-wide prevention plan. A specialized task group within the coalition focuses on Children, Adolescents, and Young adults. The group will work to educate community members about risk factors and prevention strategies and advocate for access to treatment services. Part of the community education piece will involve delivering the Safe-Talk suicide prevention curriculum in the community. Members of Youth United, who are trained in the Safe-Talk model, will help deliver the training.

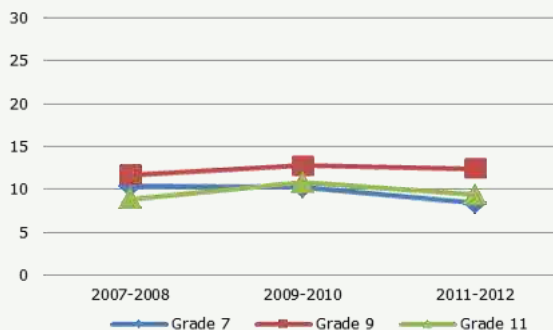
YOUTH SUICIDE IN WAYNE COUNTY

% OF WAYNE COUNTY STUDENTS WHO REPORT HAVING CONSIDERED SUICIDE IN THE LAST 12mo



*Data from the Michigan Profile for Healthy Youth (MiPHY), a health and risk-behavior survey developed and administered by the Michigan Department of Community Health and the Michigan Department of Education.

% OF WAYNE COUNTY STUDENTS WHO REEPORT HAVING ATTEMPTED SUICIDE IN THE LAST 12mo



WHEN WE WORK TOGETHER, THEN WE ARE WISE

“Pii Maamwinokiyaang, Miidash Nibwaakaayaang”

System of Care Expansion Project

In July, Detroit Wayne Mental Health Authority received a 4 year, \$4 million award in partnership with American Indian Health and Family Services (AIHFS) to expand the system of care. 14.5% of Michigan American Indian/Alaskan Natives live in Wayne County, yet the population is underrepresented in the service systems. As previous recipients of a Circle of Care grant, AIHFS had created a system of care for children and families. This new initiative will merge this system of care with Connections.

GOALS

To strengthen, expand and sustain the SOC values and principles and to develop sustainable sources of funding, to increase the number of agreements, and to offer culturally and linguistically relevant services to SED children (age birth to 21) in Wayne County, and specifically Native children, youth and families **who are “out of balance and challenged by spiritual unrest.”**

PROJECT ACTIVITIES

- Cultural Competency training
- Expansion of Wraparound Services
- Expansion of Parent Support Partner Services
- Expand Service Capacity of AIHFS
- SOC Outreach and Advocacy
- Evaluation



TRAUMA-INFORMED SOC

TRAUMA INFORMED TRAINING

Exposure to traumatic events in childhood impacts children's development, emotions, and behavior. Connections has been working closely with the Children's Traumatic Assessment Center (CTAC) at Western Michigan University to provide training and support to staff throughout Wayne County.

Key activities in FY12-13 include:

- ◆ Results from a [Trauma Informed System Change Survey](#), administered to both stakeholders and frontline staff, indicated a system-wide interest in becoming more trauma-informed with a need for collaboration, training, and policy development across systems.
- ◆ A [needs assessment identified stakeholders' interest in](#) opportunities available through the collaboration with CTAC. Stakeholders showed the greatest interest in training and use of the trauma screening tool, training on secondary traumatic stress, Trauma 101 training, and Resource Parent Training
- ◆ 37 Therapists attended an initial [Trauma-Focused Cognitive Behavioral Therapy Training](#)
- ◆ 35 Supervisors, Managers, and Directors from CMH agencies participated in the first cohort of the [Secondary Traumatic Stress Training](#) with Dr. James Henry from CTAC
- ◆ CTAC is working with partners at the Department of Human Services to [develop resident expert](#) trauma-informed care staff and supervisors
- ◆ 7 parents from Family Alliance for Change attended Trauma Informed [Parent Resource Trainings](#)



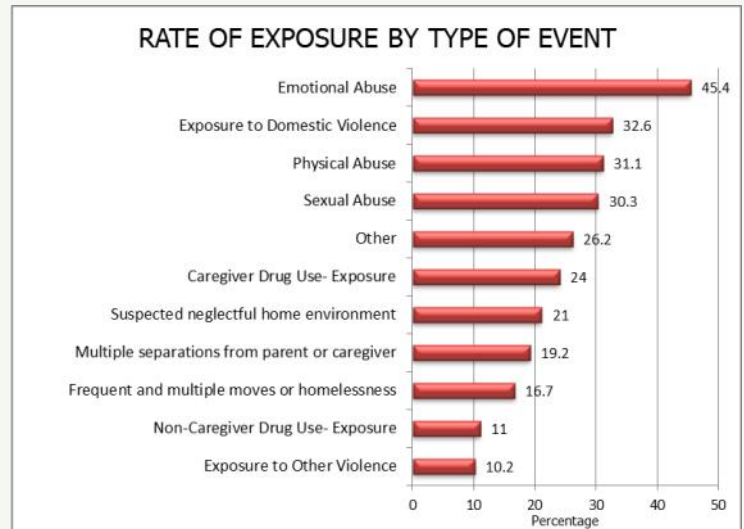
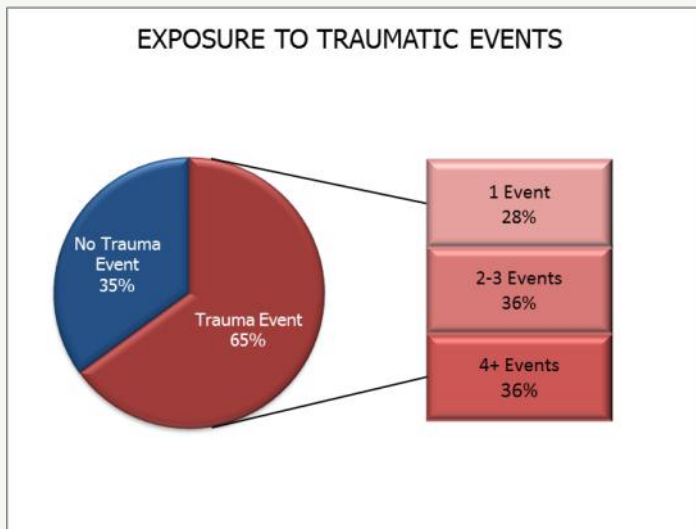
TRAUMA EXPOSURE PROJECT

Over the past several years, many agencies have begun using a Trauma Screening Instrument developed by the **Children’s Traumatic Assessment Center (CTAC) at Western Michigan**

University. The screener is completed at intake and consists of a short checklist of common potentially traumatic events and behaviors associated with experiencing trauma. Clinicians use the screener to refer to trauma-informed services, conduct more in-depth assessments, and inform treatment planning. By knowing how many children have been exposed to traumatic events, systems can address the issue early, utilize trauma assessments, and increase their capacity to deliver trauma-informed services. In this project, a sample of 2,694 children and youth from one community mental health agency was analyzed.

65% of children had experienced a traumatic event. Of those, 71.8% had multiple events.

JUVENILE JUSTICE YOUTH
 Among a similar sample of 765 Juvenile Justice youth, 75.5% had exposure to trauma. Among them, 60.1% had multiple events.



ADDITIONAL FINDINGS FROM CMH SAMPLE

- ◆ Length of stay was significantly higher for children with trauma exposure vs. those without (211 days vs. 198 days)
- ◆ CAFAS score was significantly higher for children with trauma exposure, specifically on some subscales: Behavior toward others, Moods and Emotions, Self Harm, Substance Abuse
- ◆ Girls had higher rate of exposure to traumatic events than boys
- ◆ Only 68% of children with a PTSD diagnosis had identified trauma exposure at intake
- ◆ Total CAFAS score, average CAFAS subscale score, age, and length of stay all increased as number of traumatic events increased



WORKFORCE DEVELOPMENT

Wayne County has the largest children's mental health workforce in the state of Michigan. In partnership with the Virtual Center of Excellence, Connections helps train thousands of children's mental health professionals, child welfare workers, juvenile justice specialists, as well as parents and other professionals.

WAYNE COUNTY HAS

1,350
QUALIFIED
CHILDRENS
MENTAL HEALTH
PROFESSIONALS

50+
CHILDREN-
SPECIFIC
TRAININGS
IN FY12-13

CHILDREN'S TRAINING* BY TOPIC

TOPIC	# TRAININGS	AVG ATTENDANCE
Autism/ASD	11	43
Early Childhood	6	70
Grand Rounds	11	297
Juvenile Justice	5	71
Practice-Specific	15	33
Trauma	5	193
System of Care	8	44

*Attendance numbers for trainings held through VCE only. Additional trainings are held on similar topics throughout the county.

FY12-13 CHILDREN'S TRAINING CALENDAR



STANDARDIZED CAFAS TRAINING

The Child and Adolescent Functional Assessment Scale (CAFAS) and the preschool version (PECFAS) are used universally for children with SED in Wayne County to measure functioning over the course of treatment. Clinicians must be trained and become certified to reliably use the assessments. Traditionally, providers were responsible for training and certifying their own staff. In an effort to standardize the training process, as well as providing training support to smaller agencies without the capacity to certify their own staff, a county-wide training series was developed. Previously certified trainers from multiple providers volunteer to conduct the trainings, which are now delivered through the VCE. A new

“booster” training was also developed for raters in need of biannual re-certification. The day-long booster training focuses on using the PECFAS/CAFAS to guide treatment planning and monitor progress towards goals.

FY 11-12 TRAINING

- 2 TRAIN THE TRAINER**
- 3 INITIAL CAFAS**
- 2 BOOSTER CAFAS**
- 2 PECFAS**

IMPROVING WRAPAROUND FIDELITY THROUGH OBSERVATION AND COACHING

A coaching process has been developed to help train facilitators and maintain fidelity to the Wraparound model. The Wraparound Coordinator, a former facilitator and expert on the Wraparound process, shadows and scores facilitators based on their knowledge, understanding, and implementation of the Wraparound model. The Coordinator then provides coaching and feedback to the facilitator and the facilitator’s supervisor.

The Wraparound model is implemented in four phases, each with components necessary to maintain fidelity. Scores indicated phases that need the most improvement– the Planning and Transition phases.

The coaching process will change in FY12-13 based on experiences and suggestions from facilitators. Coaching will be focused on the supervisors, with annual observations by the Coordinator. A monthly group will allow for facilitators to get together and share ideas, discuss common challenges, and gain peer support. The process will continue to evolve in an effort to enhance Wraparound fidelity in Wayne County.



IN FY12-13, CONNECTIONS HAD
32 WRAPAROUND FACILITATORS
AT
10 PROVIDER AGENCIES

OUTCOMES

MEASURING INDIVIDUAL OUTCOMES

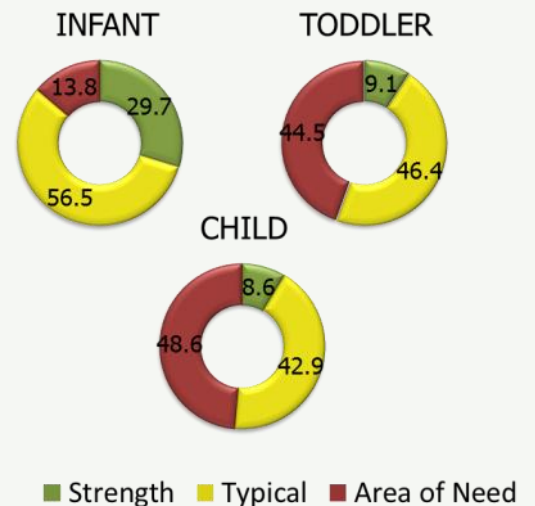
Measuring success in behavioral health programs is challenging, especially for children and youth. Wayne County uses three assessment tools to evaluate functioning and monitor progress throughout treatment.

For children 0-3, the Devereaux Early Childhood Assessment (DECA) is used to measure social and emotional functioning in domains depending on the child's age, including initiative, attachment, self-regulation, self-control, and behavioral problems. Scores from each domain are summed into a total score, and normed to "Area of Need", "Typical", or "Strength". Change in total score can indicate significant improvement.

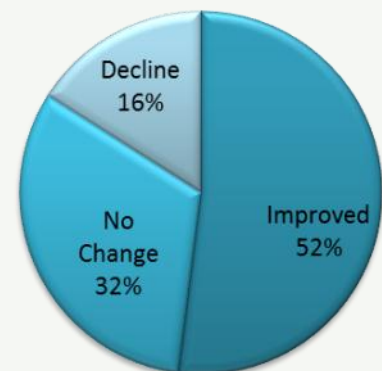
Older children are assessed by the Preschool and Early Childhood Functional Assessment Scale (PECFAS), for children 4-6, and the Child and Adolescent Functional Assessment Scale (CAFAS) for children 7-17. Both tools assesses functioning across critical life subscales and yield both a total score and subscale scores. CAFAS/PECFAS uses several outcome indicators including a reduction in score >20 points, reduction in the number of severe/moderate impairments, and reduction of score in certain subscales. "Improvement on Any Indicator" designates functional improvement in at least one of the three indicators.

INFANT MENTAL HEALTH

Children are entering infant mental health services with poor social and emotional functioning. Problems increase with age and are more common among older children. Among a sample of children receiving services for an average of 9 months, 52% saw improvement in a Total Protective Factors score. Only 16% of children declined in functioning.



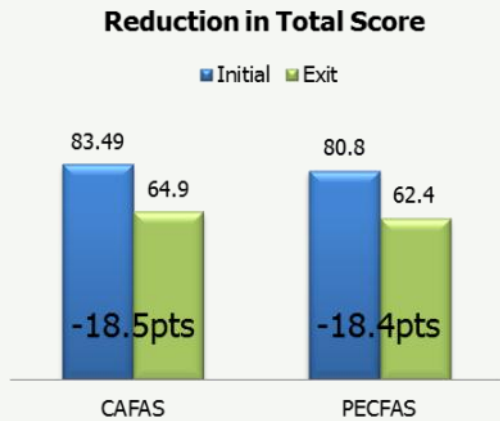
RATE OF IMPROVEMENT



SCHOOL AGED CHILDREN

Most children 4 and older are assessed using the PECFAS or CAFAS. At intake, older children had an average Total Score of 83.5 out of 240 possible points, and younger children had an average Total Score of 80.8 points out of a possible 210 points. At discharge from services, the average reduction in score was very similar, at 18.5 points for older children and 18.4 points for younger children. Children and youth have an average length of stay of 9 months (for age 4-7) and 6 months (for age 7-17). Rates of functional improvement increase with length of stay, but level off after 6 months. Additionally, rates of improvement for older children have remained consistent over the last fiscal years, with around 53% of children 7-17 experiencing functional improvement as measured by the CAFAS. (PECFAS data for previous years is not available for comparison).

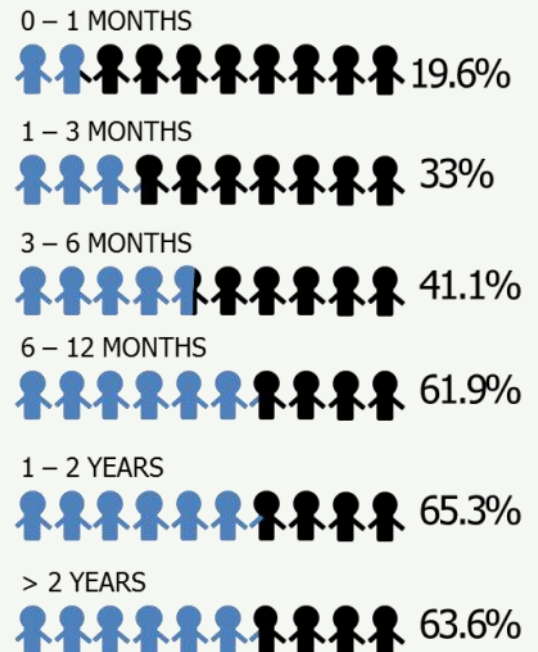
AVERAGE REDUCTION IN SCORE SIMILAR FOR 4-7 and 7-17 AGE GROUPS



BOYS AND GIRLS HAVE SIMILAR OUTCOMES



RATES OF FUNCTIONAL IMPROVEMENT INCREASE WITH LENGTH OF STAY



RATES OF FUNCTIONAL IMPROVEMENT HAVE REMAINED CONSISTANT OVER THE LAST THREE YEARS

