Connecting and Integrating Child Serving Systems in California: Community Schools & Children's System of Care









Virtual Workshop Sponsor



Mental Health Services
Oversight & Accountability Commission

Welcome + Introductions

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Agenda

- Welcome & Engagement
- Understanding the Need for Integration
 - The needs and opportunities in a large ecosystem
 - Interagency Alignment: Vision, Structure and Function
- Connecting Two Major Opportunities
 - System of Care
 - Community Schools
 - Key Recommendations for Impact

California has a child and youth mental health and wellbeing crisis – exacerbated by the pandemic

Despite tireless efforts, our children and youth's behavioral health needs are not being met ...



Suicide is the 2nd leading cause of death among young people 10-24¹



Mental illness is the #1 reason that children <17 years old are hospitalized in California²



1 in 5 children in California live with a mental health diagnosis³



58% of adolescents with family incomes below poverty line report moderate to serious psychological stress⁴

... a situation dramatically worsened by COVID-19, especially for traditionally underserved communities



Rate of loss of caregiving adults in 2020 and 2021 for non-white children compared to their white peers⁵



Increase in suicidality among Black youth in California in 2020⁶

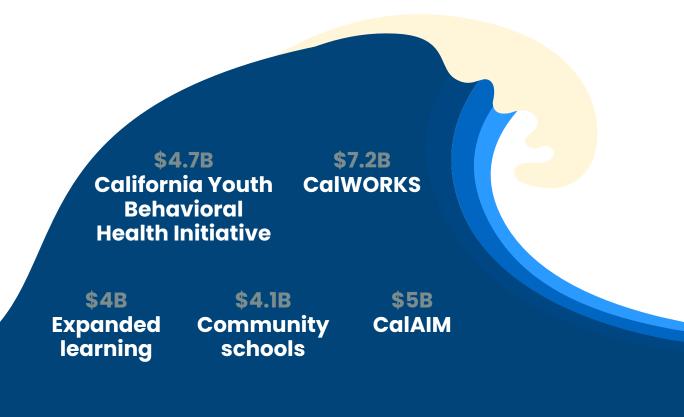


Increase in Emergency Department visits for suspected suicide among girls in 2021⁷



High school students experienced persistent feelings of sadness or hopelessness in 2021⁷

The wave of energy and resources represents an unprecedented opportunity for transformation, but also creates challenges to coordination of those resources



\$0.6B School meals \$0.1B
Juvenile
justice
realignment

\$1B
Educator
workforce
development

\$2.6B Bridge housing \$2.7B Universal Pre-K



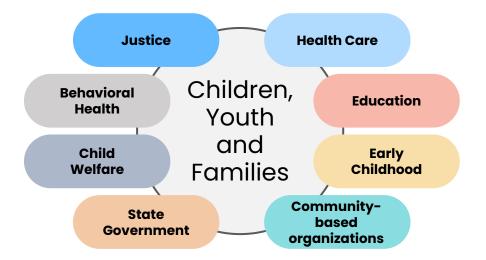
So what is the path forward?

- CA's history across all child serving sectors suggests that more money alone won't solve the problem
- Research suggests the conditions for change are not present, absent interagency stewardship of the resources
- The <u>Integrated Services Field Guide</u> and <u>Ecosystem</u> <u>Working Paper</u> aim to:
 - make the case for establishing interagency, school-based systems of care at the district/community, county and state levels
 - describe several key initiatives for LEAs and partners, their funding sources, and how they can be woven together
 - support LEAs and their partners with strategies for sustainable leadership and funding pathways

What does the ecosystem need to look like?

Organizational and Functional Integration

Young people, families and those who support them sharing responsibility for shared community-defined goals and outcomes



What is required

An Integrated Youth-and Family-Serving System



Centering children, youth and families in shared leadership and ecosystem design and implementation



Larger, culturally responsive and congruent workforce



Incentives for integrated financing and maximization of state and federal funding and resources



Training and coaching





Youth and Family service design at county, school district, and site levels requires leadership action in 3 core areas

Vision, mindset, and culture

Structure/Organization

Function, process, and outcomes

Clear shared vision by, for and with children and families

Communities and families **empowered as partners** to elevate their interests

Commitment to address root issues of structural inequity

Integrated approach to child wellbeing and alignment across the ecosystem

Capacity building, technical support, and research agenda for initiating and building local ecosystems of care

Larger, culturally responsive and congruent behavioral health workforce

Community-defined shared outcomes, accountability and continuous improvement

Data and info sharing processes and tools

Effective approaches to integrated funding to maximize impact

Coordinated care navigation and teaming for youth, students and families

Today's workshop will explore how these frameworks support mutual success in Community Schools and System of Care implementation

6 CORE CHILD-SERVING AGENCIES

The 6 core child-serving agencies deliver services through many different providers with some overlap

COUNTY
HEALTH &
MENTAL
HEALTH

REGIONAL CENTERS

MANAGED CARE PLANS COUNTY SOCIAL SERVICES

COURT & PROBATION

LOCAL EDUCATION AGENCIES

- County health employees
- Contracted communitybased orgs
- Contracted health providers
- LEA licensed staff

- Regional center employees
- Contracted communitybased orgs
- Contracted health providers

- Contracted communitybased providers
- Contracted health providers

- County social workers
- County family support providers
- Adoption agencies

- Superior court judges and staff
- Probation officers
- Contracted community-b ased orgs

- Certificated and classified LEA staff
- Contracted providers

6 CORE CHILD-SERVING AGENCIES

6 agencies/organizations are primarily responsible for serving the health, education, and welfare needs of children

	COUNTY HEALTH MENTAL HEALTH	REGIONAL CENTERS	MANAGED CARE PLANS	COUNTY SOCIAL SERVICES WELFARE	COURT & PROBATION	LOCAL EDUCATION AGENCIES
LEGALLY REQUIRED RESPONSIBILITIES	 Specialty mental health (in-patient/acute/ongoing) Substance use Medi-Cal managed or specialty care* 	 Assessment & diagnosis of disability Case management Early intervention for 0-3 Purchase of services 	 Primary physical health services Mild/moderate mental health services 	 Administration of CalWORKs, housing, food, & other financial assistance programs Child protection Foster & adoption services 	 Juvenile court Operation of juvenile halls Probation monitoring & services 	 TK-12 Education Educationally necessary health & mental health services Education services in juvenile halls
PRIMARY FUNDING SOURCES	 Alignment funding Medi-Cal reimbursement Prop. 63/Mental Health Services Act (MHSA) 	 Federal IDEA, Part C MHSA State General Fund City & County funding 	 Medi-Cal managed care: Medi-Cal Commercial managed care: employers or individuals 	 State General Fund Title V-B CBCAP CAPTA AB 153 Prop. 10 	 State General Fund Youth Offender Block Grant Juvenile Justice Crime Prevention Act State & Fed Law Enforce Grants County funding AB 2083 	 LCFF AB 602 (Special Ed) & IDEA LEA-BOP SMAA ESSA (T1, T2) Community Schools Grant ERMHS ELOP



How do you build a "whole child" integrated support system?

- The necessary components for an integrated system require:
 - Shared leadership/partnership and decision making
 - Shared goals and outcomes
 - Shared information, data and quality improvement processes
 - Shared financing

A Deep Dive on Two Interdependent Opportunities

Community Schools (CCSPP)



Children's System of Care (AB 2083)

Unless and until county agencies address long standing programmatic and relationship disconnections in key areas, no local school or district-level efforts like Community Schools will be fully effective.

Likewise, without local accessible, community-based programming for all young people, county level System of Care implementation is unlikely to result in desired youth/student level outcomes.

What is the Children and Youth System of Care?

AB 2083

What is the Children's System of Care (AB 2083)?

- Each of California's 58 counties and their regional center partners are mutually obligated to define, via an Interagency Leadership Team (ILT) and a Memorandum of Understanding, the essential building blocks of effective care delivery and coordination across large and complex systems.
- A children's System of Care is NOT an initiative. It is a structured relationship between organizations and agencies responsible for the wellness and health of youth and families within their shared jurisdiction.
- The MOU must address specific functional elements of collaboration, including cross system leadership, information management and data sharing, and maximizing all available funding (local, state and federal).
- System of Care implementation should include authentic partnership with families and students toward their success and well-coordinated community-based services.
- While AB 2083 identifies "foster youth" as the population of focus, all Systems of Care intentionally demand consideration about **all vulnerable or at-risk young people**.

What is a Children and Youth System of Care?

"A broad, flexible array of services and supports for a defined population...organized into a coordinated network, integrating care planning and management across multiple levels; is culturally and linguistically competent, builds meaningful partnerships with families and youth at service delivery, management, and policy levels, and has supportive policy and management infrastructure."

"Sharing of Responsibility, Risk and Reward"

Local System of Care Partners

Required Partners

- Child Welfare/Social Services
- County Mental Health/Behavioral Health Plans
- Regional Centers
- County Office of Education
- Juvenile Probation
- Tribes (through consultation)

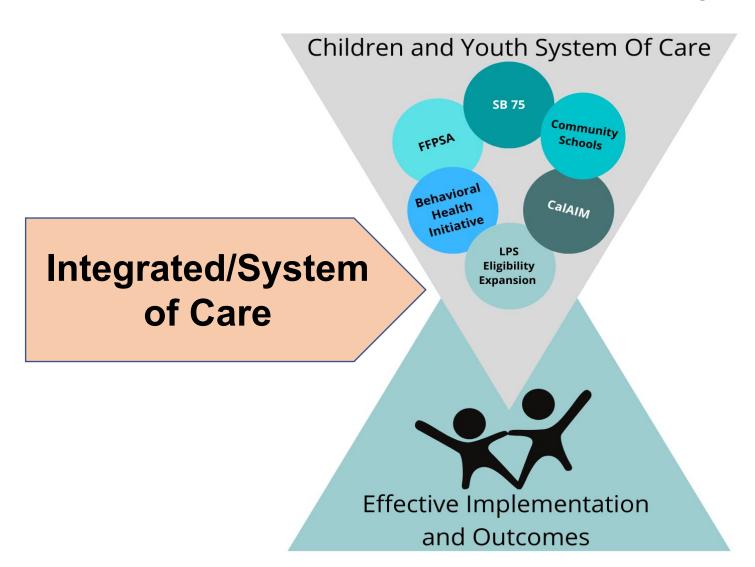
Collaborative Partners

- First 5
- Family Resource Centers
- Local Hospitals
- Community Based Organization/Providers
- County Dependency Court Judges
- County Public Health
- Managed Health Care Plans

Rooted in research on Collective Impact, each System of Care MOU must include:

- Regular and consistent Interagency Leadership and decision making
- Use of the Integrated Core Practice Model (ICPM) for Children Youth and Families
- Use of an Interagency Placement Committee (ideally expanded for schools and RC partners)
- Effective Assessment and Screening
- Effective teaming (in all its forms)
- Effective Coordination of Care (including how the county will meet its ESSA requirements)
- Sharing of information and data to support the care coordination.
- Sharing of financial resources, and revenue maximization
- Train and onboard workforce (Cross Training)
- Solve their inherent disputes

Program & Service Implementation via System of Care



Systems of Care (Integrated Services) are ...

- <u>Ideological</u>: A vision for partnering with peer organizations and a set of strategies and tactics to support that way of being. (Mission or Vision)
- <u>Practical</u>: Sharing of people, process, policy, money, facilities and infrastructure. (Structural/MOU)
- <u>Relational</u>: The behaviors leaders and staff use to actually "be" aligned and in sync. (ICPM)
- Note that this parallels the Vision, Structure, and Function Framework of CYBHI



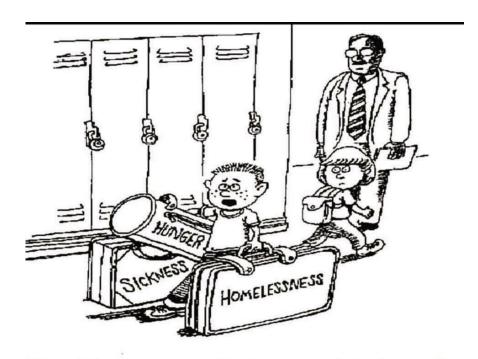
Successful Systems of Care...

- Decreased behavioral and emotional problems, suicide rate
- Reduced caregiver strain and improve family functioning
- Expand array of home- and community-based services, individualize services, and increase use of evidence-based practices
- Increase school attendance rates by nearly 10%;
 Decreased School dropout of 8.6% vs. 15%
- 42% Decrease inpatient Mental Health need
- Less likely to be arrested/average cost per child for juvenile arrests decreased by 38%

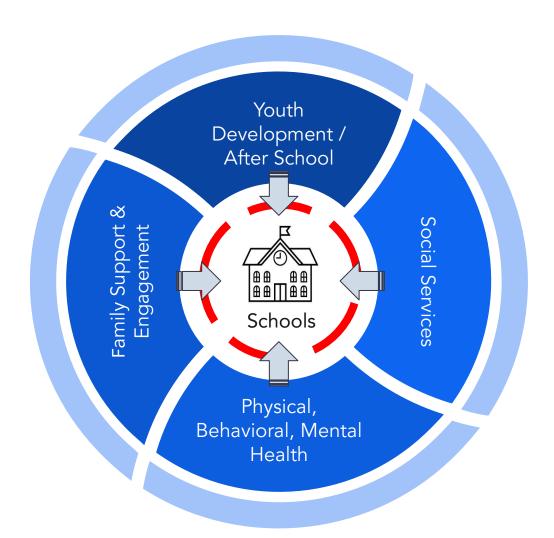
What are Community Schools?

... and the CA Community Schools Partnership Program (CCSPP)?

Community Schools 1.0



"Could someone help me with these?
I'm late for math class." scott



Community Schools 2.0 – A Shared Definition

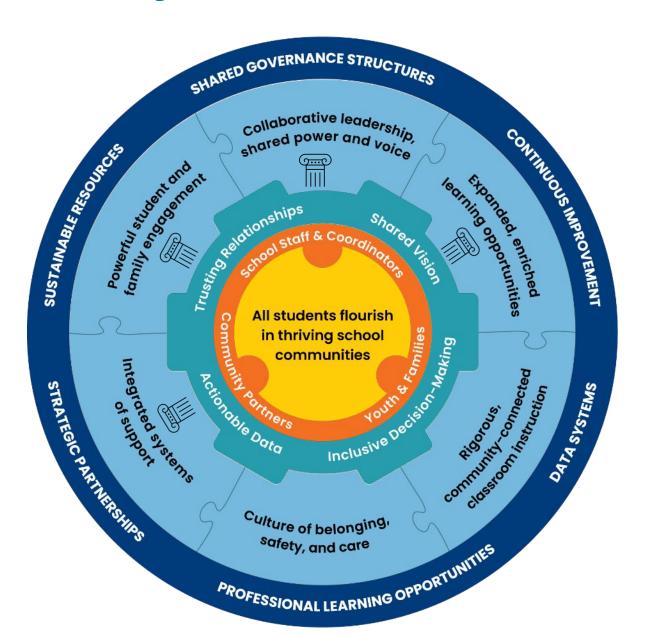
A community school strategy transforms a school into a place where educators, local community members, families, and students work together to strengthen conditions for learning and healthy development – for ALL students.

As partners, they organize in-and-out of school resources, supports, and opportunities so that young people thrive.

NOT just a collection of co-located or "wrap-around" programs & services

Community Schools Forward, 2023

Community School Essentials



LEGEND

- Why we do this work
- Who drives this work
- Enabling conditions
- Key practices
- Supportive infrastructure

Community Schools Trends over 20+ years

and now



and now		
Collective impact		
Whole school transformation		
Teaching & learning; the science of learning/development		
CBOs as partners		
Integrated services, opportunities, and supports		
Student-centered		
Long-term strategic commitment		
Developing systems of CS		
The way we do school		

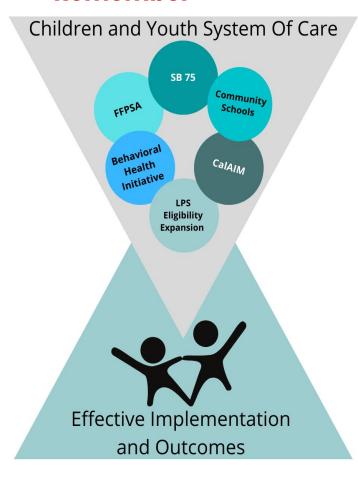
CA Community Schools Partnership Program (CCSPP)

- \$4.1B allocated through '30-31
 - Planning Grants: \$200k for up to a 2-year planning period; ⅓ match
 - Implementation Grants: 5 years; Up to \$500k annually for new community schools or expansion/continuation of existing community schools; ⅓ match
- Allocations (\$200 \$500k) to COEs to support grantees and facilitate coordination of support services.
- A central TA hub and 8 regional TA centers

And...

- Expanded Learning Opportunities (\$2.3B, one-time & ongoing)
- Universal Transitional Kindergarten (\$2.7B, one-time & ongoing)
- Educator Effectiveness Block Grant (\$52M)
- Continuing MTSS or MTSS expansion (\$50M)
- Mental Health Student Supports Act (MHSSA) & Child & Youth Behavioral Initiative (\$ 4.4B, one-time)
- Universal School Meals program (reimbursement increase by \$54M, then \$650M)
- LCAP (increased funding rate for concentration factors)
- Expand family empowerment centers (\$7M)

Remember





3 Key Intersections + 1 Key Role

Community Schools +

Children and Youth System of Care

... County Offices of Education

Potential for Role of COEs Coordination of Care Across the County

- Mandated partner on Systems of Care/ILT and CCSPP allocation = resources for critical roles of partnership facilitation, systems building and leadership.
- Hold responsibility for all children and youth in the county.
- Hold the school setting perspective where assessing need and intervening early is possible, including in early childhood.
- From an education perspective providing supports for healthy development can hold equal importance to 'treating' more challenging sets of needs.

Implementation Interdependence #1 Information and Data Sharing

- Release or Authorization for Disclosure form and process.
- Delays in care coordination which result from misaligned and poor interagency information sharing are a root cause of disengagement and failure of care.
- Local delivery systems require a high degree of timely student/youth level health and related information.
- By its nature, a community school continuum's partnership with Social Services, Public Health, Behavioral Health, and other system partners, demands that those county systems have a uniform and singular process for rights holders to authorize the sharing of all necessary information.

Implementation Interdependence #2 Care Coordination and Uniform Service Planning

- A large percentage of students who are served within a Community Schools effort are either in or at risk of entry to parallel service systems, administered at the county level. These are typically child welfare and children's mental health systems.
- When parents are required to attend multiple "team" meetings, fill out redundant treatment or service plans, and respond to identical or similar assessment processes for the same youth or student, it creates significant distress for all, and increases the likelihood of program disruption.
- Caregivers and parents are also themselves, often served or need services administered by county health and human service or social service departments.

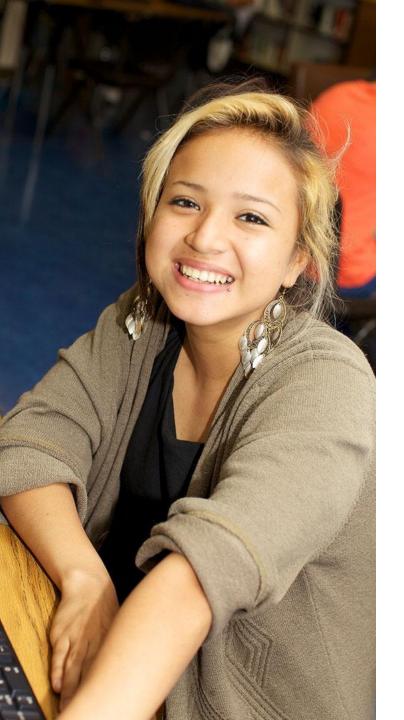
Implementation Interdependence #3 Financial and Resource Planning For Stability

- Community Schools grants, like many other state-supported efforts are time-limited and subject to cyclic trends or cessation.
- The spectrum of supports and services in a good Community School demand that county System of Care leaders and fiscal managers make long-term and stable entitlements available to local LEAs to sustain the Community School continuum.
- Access to stable resources via Medi-Cal, Mental Health Services Act, state foster care, public health prevention and First Five resources, among others, is best and necessarily brokered via the System of Care partnerships.
- LEAs cannot succeed without the larger county systems ensuring the requisite blending and braiding of dollars.

Holding the Collective Work (Recommendations for Next Steps)

- County Interagency Leadership Team (ILT) or the governing body of the System of Care should include clear and consistent connection to LEA grant seeking and implementation.
 - Invite the LEA to your ILT—What is needed and what are CS Goals?
- Use the 2083 System of Care partnership to engage the county's Mental Health/Behavioral Health Services
- Engage that same System of Care ILT to identify which other agencies and their contractors are available and interested in CS partnership and colocation.
- Use 2083 System of Care team to connect to county MH and Human Service/Social Service managers to evaluate and analyze existing continuum of school supports.





Stay Connected

- Breaking Barriers California
 - Register for the 2023 Breaking Barriers Integrated Care Symposium: www.breakingbarriersca.org/symposium
 - Contact us at info@breakingbarriersca.org
- Integrated Human Services
 - rknecht.integratedkids@gmail.com
- CSLX
 - Sign up for CSLX Office hours to ask questions about your community school strategy, talk through ideas, or troubleshoot issues: cslx.org/learn/officehours