

**Streamlining and Strengthening
Services For Children, Youth, and
Families**

A Plan of Action for Tioga County

**Prepared For:
The Tioga County Executive Committee**

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I. INTRODUCTION

Like many counties across New York State and the nation, Tioga County is faced with the challenge of improving services for children and families in a changing and uncertain fiscal and policy environment. Budget surpluses created by the economic boom of the 1990's have evaporated as the nation entered a serious economic slowdown. On November 15, 2001, Governor Pataki announced the largest decline in New York State revenues since the 1960's and, possibly, since the Great Depression. In addition, new federal and state funds for health and human services are drying up as resources are shifted to meet the legitimate security and economic recovery needs created by the tragic events of September 11, 2001.

Local governments, however, are not given a reprieve. They must continue to provide quality services and meet an increasing demand for services. Tioga County has set the stage for meeting the dual goals of increased efficiency and improved effectiveness for its health and human services by taking some important initial steps over the last several years. In 1997, the County created a new position, the Commissioner of Health and Human Services, to consolidate planning, oversight, and direction for the Departments of Social Services, Mental Hygiene, and Public Health. The County then merged the fiscal operations of the three departments under the direction of a Deputy Commissioner of Fiscal Services. These initiatives resulted in better overall planning, greater flexibility in the use of resources, and administrative savings.

County leadership, however, recognized that improvements in direct services require a much broader and deeper reform effort - one that involves further integration of the organization, operation, and practice of mid-level and front line staff in every county department serving children and families. Appreciating the vital role that outside consultants can play in facilitating an interagency examination and change process, Tioga County selected Meridian Consulting Services, Inc. in the fall of 2000 to help the County obtain outside input, clarify issues, review organizational models, and craft new directions. An Executive Committee was then formed, consisting of the Commissioner of Health and Human Services, Deputy Commissioner for the Department of Social Services, and Directors of Mental Hygiene, Probation, and Public Health, to shape this major reform effort.

The charge of the Executive Committee was to design and oversee implementation of a new County organizational structure and strategies that will provide integrated services to children and families and improve outcomes at both client and system levels. Early on, the Committee developed a vision statement describing the system it would like to promote and a set of desired outcomes for this initiative. These statements are presented in the chart below:

Vision Statement

- All children and families will be able to access the services they need in a convenient and responsive manner.
- Services will be integrated in such a way so that children and families experience minimal duplication, delay, confusion, and maximum cooperation, coordination, and communication among providers.
- Children and families will be active participants in their service planning and delivery. They will be provided every reasonable opportunity to benefit from services and achieve their goals.

Desired Outcomes For System Reform

- **Improved Ability to Manage**
 - Improved ability to direct and oversee the system and its component parts, service delivery, and expenditures;
 - Have one system that serves children and their families;
 - Better utilization of resources;
 - Improved strategic decision-making ability; and
 - Clear assignment of roles and responsibilities.
- **More Responsive Service Delivery System**
 - Timely child and family focused response;
 - Services tailored to the unique needs of children and their families; and
 - Simplified processes to obtain services.
- **Better Outcomes and Greater Satisfaction**
 - Improved outcomes for children and families;
 - Increased client, provider, and public satisfaction; and
 - Satisfied staff who are supported in accomplishing their jobs.

With these vision statements and desired outcomes in mind, the Executive Committee engaged in an extensive examination process to identify improvement strategies. With the help of Meridian, the Committee obtained input from a wide variety of staff and community stakeholders, and conducted a review of other counties that had successfully reorganized and integrated children and family services. Based on this input and careful consideration by its members, the Executive Committee developed an exciting and ambitious agenda for improving the service delivery system of Tioga County's children, youth, and families.

The rest of this paper details this agenda in three Sections: Process, Recommendations, and Moving Forward.

II. THE PROCESS

Step 1: Obtaining Input

Over 120 individuals participated in the meetings and interviews conducted by Meridian Consulting Services to obtain feedback and suggestions for Tioga County's service systems for children, youth, and families. Participants included County staff from the Departments of Social Services, Probation, Mental Hygiene, and Public Health; consumers (both parents and youth); foster parents; school and provider representatives; the County attorneys and the Family Court Judge. Consumer meetings were held in Waverly, Richford, and Owego. Staff and community representatives were asked to express their opinions about Tioga's current delivery system for children and families and to propose needed changes. The Executive Committee carefully considered these public comments during their deliberations, and many suggestions were incorporated into the recommendations found in this report. Highlighted below are the major comments expressed by multiple stakeholders during the public comment period.

A. Strengths of the Current System

Overarching strengths that were identified by stakeholders included an openness to change, commitment and creativity among staff to respond to children and family needs in a timely fashion, and a high level of professionalism and skills. Top administrators were seen as working better together as a result of the consolidated Health and Human Services organizational structure. In addition, the movement toward outcomes and performance measures was seen as a positive direction and critical for demonstrating whether "our work is making a difference".

A considerable number of examples were cited of teamwork and cooperation among agencies. For example, the Youth Assessment Team was seen as a valuable interagency initiative and there was great interest expressed in making improvements that would enhance its effectiveness. New service delivery strategies emerging in the County, such as strength-based approaches and the family development and empowerment model, were seen as promising practices.

Many individual programs were praised by multiple sources as being particularly helpful and effective. These included: the Glove House programs; school-based mental health services; mental health intensive case managers; respite services; alcohol and substance abuse treatment and evaluation program for adolescents; Finger Lakes Parent Network; Early Intervention; Rural Health Network; Women, Infants and Children (WIC); and Family Resource Center.

B. Issues and Suggestions

1. Planning and Mobilizing for Children and Family Services

Participants expressed concerns over a lack of overall vision and consensus about desired outcomes for children, youth, and families. Planning and direction setting for children and family services were viewed as “top down” and system specific, with minimal interaction among the County advisory boards that relate to children and family services. Stakeholders recommended that the County initiate a new, collaborative planning process to increase community participation and investment in solving problems. This process could include defining a vision and outcomes for children, youth, and families; establishing priorities and realigning strategies to address these priorities; and selecting indicators to track progress over time.

2. Integrated Services for Children, Youth, and Families

Consumers and professionals alike pointed to the need for greater coordination and integration of service delivery. While leaders are seen as working better together, County departments are still separate and there is a pervasive notion that “these are my kids, my money, and my program.” Categorical approaches to service delivery and confidentiality issues were seen as major barriers to integration. Participants suggested developing a team approach to services and combining service plans for families involved in multiple services. Other integrated service delivery strategies were recommended, including: central point of intake; common assessment approach; automated information systems; and centralized appointment scheduling.

3. Access to Services

Obstacles to accessing services were a primary concern raised by consumers and other stakeholders. Consumers are inconvenienced by the multiple locations of County office buildings and frustrated with transportation that is unreliable and not always accessible. County services are primarily available during business hours, adding stress for working families. Suggestions included: placing Owego-based services under one roof; creating satellite services in outlying communities; coordinating a family’s appointments for the same day; expanding hours of operation; and improving public transportation.

4. Staff Knowledge and Skills

A major issue repeatedly expressed by stakeholders was the lack of understanding among County staff, schools, and provider agencies regarding the roles, responsibilities, services, and constraints of other systems. In addition, there is insufficient cross-systems training on local resources and best practices. In particular, the need for better training was underscored by consumers who cited examples of being treated rudely by professionals and instances where they felt their experience and concerns were not valued. Stakeholders recommended that the County work with schools and provider agencies to develop an ongoing training approach to address these key topics.

5. Continuum of Services and Supports

Consumers and professionals pointed out service gaps in all systems and at all points in the continuum, from early parent education to discharge planning for children returning from residential care. On the whole, Tioga County's system was seen as reactive and crisis-driven, with insufficient preventive and treatment services available to assist families before major problems develop. As in many counties in New York State, many children are being placed in care outside of their homes because of a lack of service options for children with high level needs. Moreover, when children are placed outside of their homes, there is not enough work with families to address parenting, substance abuse, or mental health issues. As a result, many youth return to unchanged family environments. Stakeholders recommended expanding the availability of primary prevention and parent education and support services, developing more strategies to promote youth development and assets, and increasing home and community-based alternatives to residential care.

6. Work Environment for County Staff

All stakeholder groups expressed concern about the high turnover of County staff, resulting in many inexperienced staff and high caseloads. In addition, County staff noted that there are inequities in status and negative attitudes among workers because of differential pay and education levels. Staff also expressed concerns about disparities in office policies among County departments. Recommendations included: improving recruitment and retention efforts; addressing work culture issues that affect job satisfaction; and creating more opportunities for staff from various County departments to develop relationships.

Step 2 – Reviewing Models

To generate ideas on potential service integration, several members of the Executive Committee met with leaders and reviewed materials from Oneida County, New York which had developed a wraparound approach for serving youth with complex needs, and El Paso County, Colorado which had co-located and integrated many of its social services for children and families. The Executive Committee then asked Meridian to provide information on national models that had conducted broader integration initiatives through the consolidation of children and family services into a single organizational entity. Meridian selected for this review five counties that are widely recognized in their states as trailblazers in organizational reform for children and family services: Albany County, New York; Dane County, Wisconsin; Fairfax County, Virginia; Montgomery County, Maryland; and Tioga County, Pennsylvania. Meridian conducted intensive telephone interviews with staff in Montgomery, Fairfax, and Dane Counties and, along with members of the Executive Committee, met with the leaders in Albany and Tioga Counties to discuss the progress and impact of their initiatives.

The models reviewed are summarized below.

Organizational Structures Summary of National Models

County	Organizational Entity	Involved County Services	When Initiated	Population and County makeup
Albany County, New York	Department of Children, Youth and Families	Child Welfare (Child Protective Services, Foster Care, Preventive Services, Adoption and Home Finding) Independent Living Centralized Intake for PINS Bright Beginnings Program Youth Violence Prevention Child Forensic Youth Development Delinquency Prevention Runaway and Homeless Youth Services Physically Handicapped Children's Program Early Intervention Pre-School Special Education	2001	306,000 Urban/Suburban
Dane County, Wisconsin	Division of Children, Youth and Family Services Established within a Department of Human Services	Child Welfare Child and Adolescent Mental Health Care Group Homes Residential Centers Alcohol and Substance Abuse Prevention Diversion Services for PINS and JDs	1989	400,000 Urban/Suburban/ Rural
Fairfax County, Virginia	Family Services Division Under the direction of a Deputy County Executive for Health and Human Services	<u>Family and Child Services</u> □ Child Welfare Child Mental Health Assessments Residential Services Foster Care Domestic Violence <u>Adult Services</u> Aging Disabilities Long Term Care Network for Seniors Adult Protective Homeless Services <u>Self Sufficiency</u> Welfare to Work General Relief Medicaid Food Stamps <u>Prevention</u> □ Healthy Families Community Intervention in High Risk Neighborhoods	1996	960,000 Urban/Suburban
Montgomery County, Maryland	Division of Children, Youth and Families Established within a Department of Health and Human Services	Child Welfare School Health Child and Adolescent Mental Health and Addiction Child Care Licensing and Subsidies Early Intervention	1996	800,000 Urban/Suburban

Tioga County, Pennsylvania	Division of Family Services Under the direction of a Human Services Administrator	Case Management for: Child Protective Services Foster Care Adoption Group Homes Mental Health Drug and Alcohol Abuse Mental Retardation Early Intervention Prevention Emergency Assistance Homemaker/Parenting Respite, Education and Anger Control Family Resource Center Parent Education and Prevention Services	1987	52,857 Rural
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All of the model counties have successfully consolidated services for children and families under one organizational structure, most within the framework of an umbrella county department of human services. All of the efforts have been accomplished over a multi-year period. Significantly, most of the model counties have used their organizational consolidation as a springboard for implementing other service delivery reforms, such as integrated case management and central point of intake. This comprehensive approach to streamlining services is consistent with the suggestions made during the public input process and helped shape the direction of the Executive Committee's recommendations.

Step 3 – Deliberations

Once feedback was obtained from community stakeholders and national models were reviewed, the Executive Committee held several lengthy and intensive sessions about new integration strategies that could be effective for Tioga County's children and family services. The result of these discussions are the following recommendations, presented in detail in the following section:

1. **Create a single Tioga County Department for Children, Youth, and Families to establish a central locus of responsibility and accountability for children and family services.**
2. **Streamline government operations and make it easier for the public to access and navigate the various service systems. This would be accomplished by:**
 - Establishing a central intake unit for children and family services.
 - Creating new "integrated" service coordinator positions that would subsume the responsibilities of system specific case managers.

- Developing a common assessment tool and protocol.
- Building an integrated data management system for children and family services.
- Instituting a multi-disciplinary assessment process and child and family team structure for high need youth and their families.

3. Strengthen the service system for children and families by improving the quality, availability, and range of services.

- Placing an emphasis on building a continuum of services to include more prevention and youth development programs.
- Establishing alternatives to residential placement.
- Making County services more accessible by incorporating more neighborhood-based options and mobile capacity.
- Enhancing the quality of services through better training and information sharing.

The Executive Committee unanimously approved these recommendations with one exception. The recommendation to create a single Department for Children, Youth, and Families was approved by four of the five Committee members. The Probation Director voted against the proposal because he believes that it is unnecessary to create a single department to implement the other important integration strategies. The other Committee members, however, felt a consolidated department would provide the clear leadership and solid organizational framework needed to advance Tioga County's system reform efforts.

III. RECOMMENDATIONS

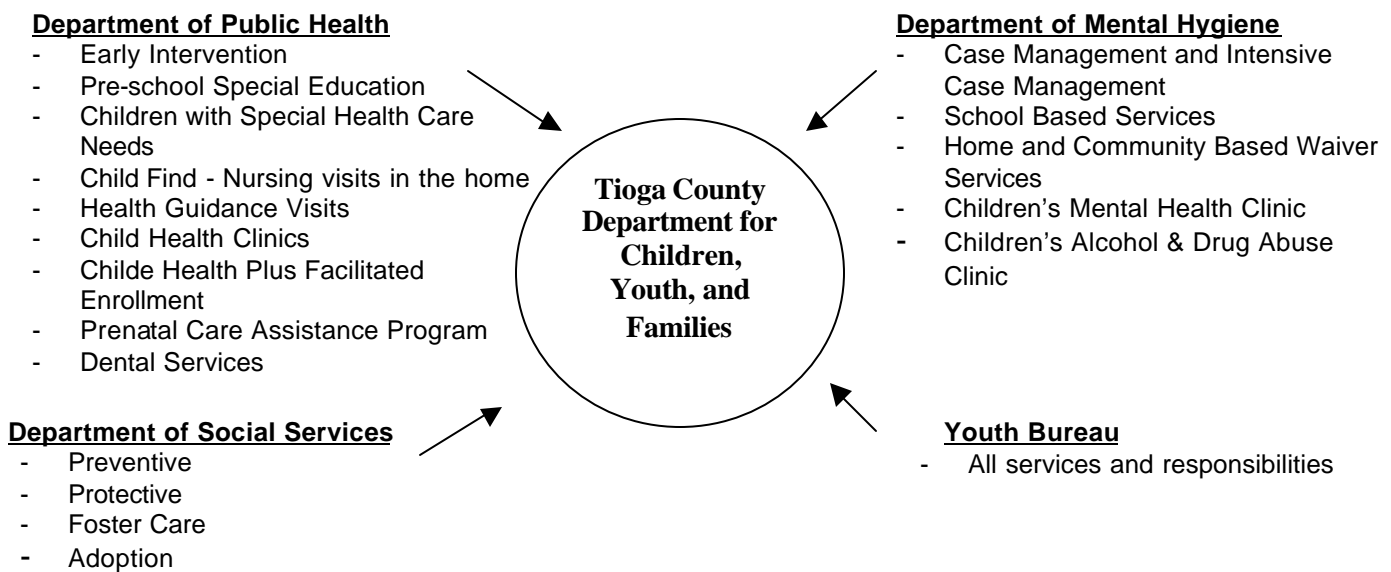
A. Create a single Department for Children, Youth, and Families.

The Executive Committee recommends that responsibility for a core set of child and family services be transferred from the Departments of Social Services, Mental Hygiene, Public Health, and the Youth Bureau to a new Tioga County Department for Children, Youth, and Families. Consolidating children and family services into a single Department would highlight the importance that the County places on families and establish a central locus of responsibility and accountability for these services. The new Department would set the framework for a more efficient and better coordinated approach to service delivery as it eliminates the fragmentation and turf issues inherent in administering services through multiple departments.

The new Department would also take responsibility for consolidated planning for children and family services. It would work with the voluntary sector, schools, parents, youth, and other community stakeholders to develop a broad based plan for children and family services across service systems. The plan would include a statement of desired outcomes for Tioga’s children and families and a clear delineation of the roles that government, the private sector, voluntary agencies, schools and families should play in achieving these outcomes. Based on this foundation, the Department would establish its overall mission and the core values that will guide the Department’s operations and front-line practice. To ensure that services provided are of the highest quality, the new Department would establish a quality assurance capability that will conduct independent program evaluation and collect and analyze public complaints to correct systemic problems.

The specific programs and responsibilities that would be transferred to the new department are identified in the chart below:

Services Transferred into the Tioga County Department for Children, Youth, and Families



Because of the clear interrelationship among all human services, the new Department would have to maintain strong linkages with certain services remaining with the Departments of Social Services, Mental Hygiene, Public Health, and those under the Department of Probation. Linkages would have to be established with:

Department of Mental Hygiene

Crisis/Outreach Services
Adult Continuing Day Treatment
Adult Clinic Services
Mentally Ill Chemical Abuser Services

Department of Public Health

Environmental Health
Immunization Registry and Oversight
Disease Control
Sexually Transmitted Disease Clinic
HIV Testing & Counseling
Health Education

Department of Social Services

Day Care
Child Support Enforcement
Energy Assistance
Food Stamps
Medical Assistance
Temporary Assistance
Tioga Co. Allied Services
Assessment Program

Office of Probation

PINS Court-related
JD Court-related
PINS Diversion
JD Diversion

The County should review the various advisory boards of the Departments of Public Health, Social Services, Mental Hygiene and the Youth Bureau to determine if they could be merged into a more inclusive and efficient body, possibly associated with the Department for Children, Youth, and Families. This new consolidated board could assist the Department in shaping directions and obtaining public input during its planning activities.

B. Streamline government and make it easier for the public to access and navigate the various service systems.

While creating a new organizational structure can improve overall coordination of services, true integration requires fundamental restructuring in the way services are delivered. The Executive Committee recommends a number of integration strategies aimed at reconfiguring services so that staff have a more comprehensive understanding of family issues and dynamics and family members have an easier time obtaining the services that they need.

1. Establish a central intake unit for children and family services.

Tioga County should create a central intake unit to facilitate entry into services and “one-stop shopping” for families needing multiple services. The unit would be composed of County staff cross-trained and knowledgeable about the eligibility and benefits of all services provided to children and families. To promote a holistic approach to services, intake staff would help identify the full complement of services needed by all family members. To

expedite the delivery of services, intake workers would have ready access to the schedules of front line workers so that appointments for clients can be made on the spot. Intake workers would use a common intake form to ensure that basic information is correctly collected and entered into the data management system (see 4, below), eliminating the need for family members to relate their background information over and over again to multiple intake workers from different service systems.

2. Create new “integrated” service coordinator positions that would subsume the responsibilities of system specific case managers.

Case management responsibilities from the various service systems should be consolidated and vested in “integrated” service coordinator positions to promote continuity of care and reduce confusion for families. The team of service coordinators would be developed from the existing pool of case managers in the Departments of Mental Hygiene, Social Services, and Public Health and would be cross-trained in all of the county’s operated and supported child and family services. Families involved in multiple service systems would have a single service coordinator rather than an array of specialized case managers knowledgeable about only their particular field. Continuity of care would be established as the same service coordinator would stay with the family throughout their involvement with different services and systems. Working in partnership with families, these service coordinators would, at a minimum, conduct comprehensive assessments, develop service plans, provide linkages and referral services, and carry out ongoing coordination to make sure plans are effectively being implemented.

3. Develop a common assessment tool and protocol.

To support an integrated and comprehensive approach to service delivery, Tioga County should develop a common assessment tool and protocol to be used by the new service coordinators during their work with families. The assessment tool would have a core set of questions that service coordinators would use to elicit information about family strengths, issues, and needs. Obtaining more comprehensive information at an early stage will lead to a quicker and clearer understanding of the family’s situation and more rapid development of service strategies.

4. Build an integrated data management system for children and family services.

Each County service system currently maintains multiple and self contained data systems, with little interface capacity. The Executive Committee recommends that an integrated data management system be established to maintain basic demographic and service utilization information on all families accessing services through the County. Through this system, frontline staff would have the capacity to view all services being received by the family, enabling better coordination of services. The data system would also produce reports to support the County’s overall management and planning functions.

One critical issue that must be addressed prior to creation of the data management system is confidentiality. It is essential that all staff making important decisions concerning the

health and safety of individuals have complete, accurate, and timely information. It is equally critical that the availability of personal information be limited to those who have a legitimate need for and right to this data. The County should determine who should have access to which information and build into the data management system the controls that reflect this policy.

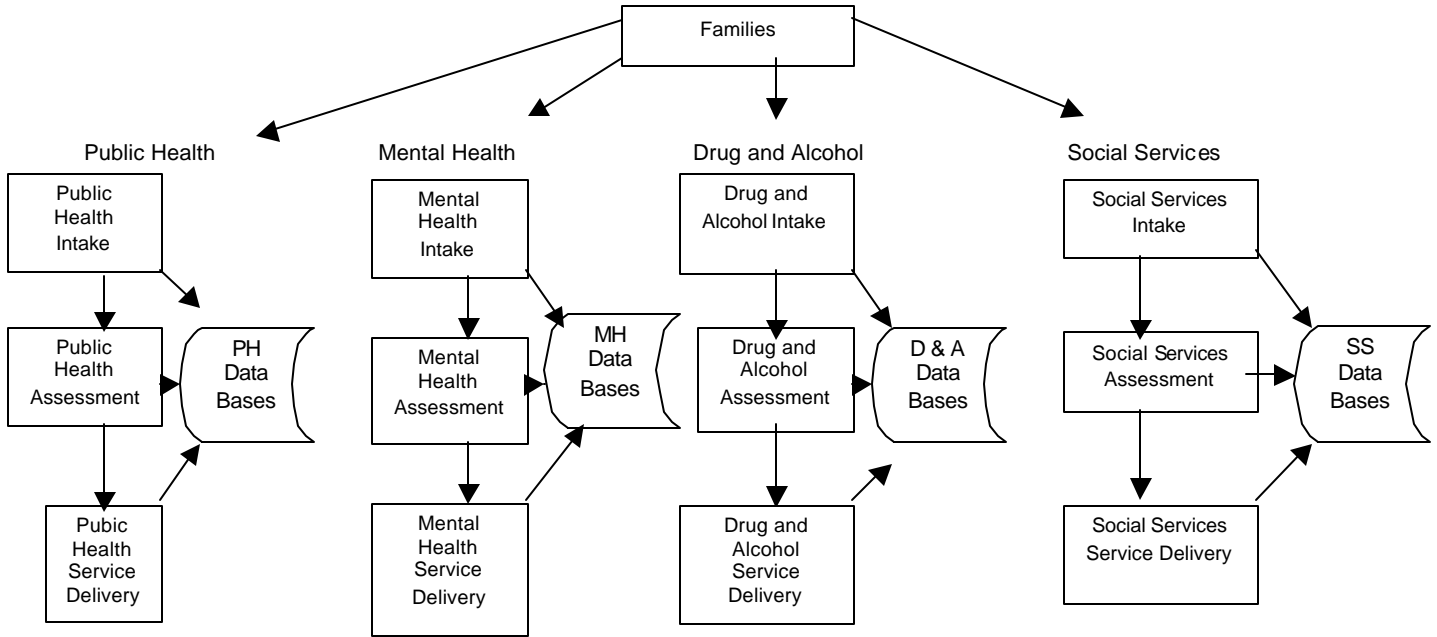
5. Institute a multi-disciplinary assessment process and child and family team structure for high need youth and their families.

The County should make a targeted effort to serve youth who are involved in or need services from multiple systems. These youth are among the most difficult and costly to serve and frequently end up in residential placement. The Executive Committee proposes that two processes be put in place to better serve this target population:

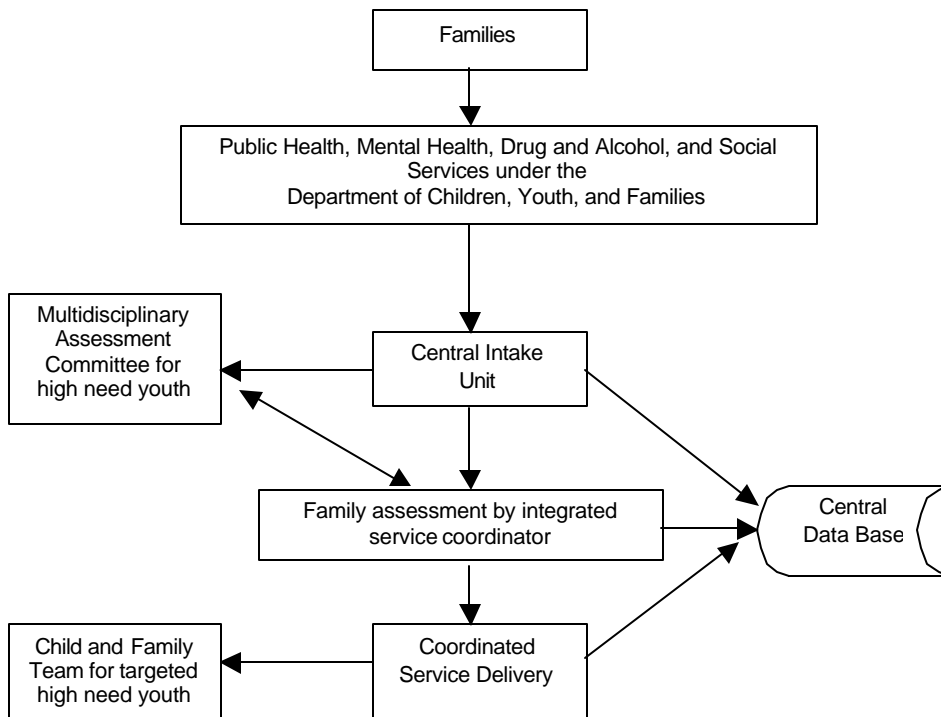
- **Multi-disciplinary assessment process** – A multi-disciplinary assessment committee should be established including mid-level supervisory staff from county departments, schools, provider agencies, and advocates. This committee would be a standing body to serve as a resource to service coordinators by helping them brainstorm creative service delivery responses and marshal resources to carry out these plans. The multi-disciplinary assessment committee would also establish criteria to determine which families would be offered a more focused and on-going child and family team. The committee would recommend system changes to County leadership as it discovers deficiencies and gaps in the service system.
- **Child and family team process** – Selected families would be offered the option of working with a child and family team, which would include the family, service coordinator, involved service providers, and any natural supports (e.g., clergy, relative, teacher, coach, or mentor) that the family feels will assist them in meeting their goals. The team would be tailored for each family and meet regularly to review progress and modify goals, coordinate interventions, and provide intensive support to the child and family. A priority of the team would be to maximize the use of natural supports and community resources that will remain after the formal system is no longer needed.

The charts below compare the current service delivery system with the more streamlined approach that would be in place once the recommended five integration strategies are implemented:

CURRENT SERVICE DELIVERY



INTEGRATED SERVICE DELIVERY



C. Strengthen the service system for children and families by improving the quality, availability, and range of services.

Better coordination of services is fruitless if the services that are being coordinated are inappropriate or inadequate. The Executive Committee, therefore, is proposing several recommendations aimed at ensuring that the right mix and quality of services are available throughout Tioga County.

1. Place an emphasis on building a continuum of services that includes more prevention and youth development programs.

Tioga County should focus its efforts on making “front-end” investments in families. Prevention and youth development services aimed at supporting parents and promoting the healthy development of children can reduce the need for higher cost treatment, rehabilitative services, and protective services, and out of home residential placement. The County has made a good start in its prevention efforts by supporting the development of the Family Resource Centers in Waverly and Owego. Tioga County should look to expand these centers to additional locations and establish new venues for the delivery of parent education classes, parent support groups, parent-child activities, and on-site child care while parents use other needed services. The County should also explore expansion of programs that research has shown promote positive youth development and well being, such as organized sports, clubs, and arts programs in both the school and community.

2. Establish alternatives to out of home placement.

During the community input process, court officials, department administrators, frontline workers, parents, and youth all expressed the need to provide alternatives to costly and disruptive out of home placement. Recognizing that there is a statewide gap in these services, the New York State Office of Children and Family Services and Division of Probation and Correctional Alternatives held a conference in June of 2001 showcasing four program models that have successfully served at risk adolescents in the community, including Multi-systemic Therapy, Functional Family Therapy, Multi-dimensional Treatment Foster Care, and the Youth Advocate Program. Tioga County should explore implementing one or more of these highly effective and efficient models. Consideration should also be given to wider use of respite, wraparound services, in-home services, independent living assistance, and employment programs. If a youth must be placed out of home, his or her family should receive the services needed during the youth’s placement to ensure that the return home is to a positive environment and occurs as early as possible.

3. Make County services more accessible by incorporating more neighborhood-based options and mobile capacity.

Owego is clearly the largest population center of Tioga County and the location of many provider agencies and the courts. As such, a large portion of the County workforce should be

situated in this area. The County's plan to co-locate workers in Owego who are involved in children and family services also makes sense to facilitate access for families and to facilitate cross training, cooperative planning, and service delivery. However, it is difficult for many of Tioga's families to travel to Owego and more services should be brought to other locations in the County. The County has already begun this process by setting up a neighborhood office in Waverly, which houses Mental Hygiene Services full time and other county services on a part time basis. The County should systematically continue in this direction by identifying locations with the highest need and establishing creative services methods in these areas. The central intake unit should also have a mobile capacity so that intake workers can occasionally be out-stationed to provide intake services, and information and referral in isolated areas. Taken together, these efforts would ensure that all Tioga residents receive the services they need regardless of where they reside.

4. Improve the quality of services through better training and information sharing.

Staff should be cross trained in the mission, requirements, protocols, regulations, and operations of each others service system so that they can work in a more coordinated fashion for children and families. This cross training is particularly critical for the integrated intake workers, service coordinators, and the staff on the proposed child and family teams and multi-disciplinary committee since they would be taking on new roles and responsibilities. The Executive Committee also recommends training all frontline staff in methods to engage and work in partnership with families in the design, delivery, and evaluation of programs. Informal information sharing sessions should be held for providers and parents to improve their understanding of the availability, benefits, and limitations of services. Through a combination of workshops, formal training, job shadowing, and informal information sessions, all involved stakeholders could have a better understanding and appreciation of the realities faced by a variety of workers and parents alike as they try together to improve the well-being of our County's children and youth.

IV. MOVING FORWARD

The recommendations in this report represent a bold new direction, involving major re-engineering in the way services are organized and delivered in Tioga County. The Executive Committee recognizes that it will take several years and a concerted effort by all stakeholders to implement these sweeping changes. Over the next several months, the Executive Committee will seek input from county legislators, providers, schools, parents, staff, and community representatives on the report's recommendations and the best strategies for their implementation. The Executive Committee strongly believes that, through this initiative, the County can be an innovator and leader in New York State in the delivery of children services. With the active participation of parents and all individuals involved and interested in strengthening families, Tioga County can build a system that is streamlined, well managed, and effective in improving outcomes for our children, youth, and families.