



LA FAMILIA SANA

THE HEALTHY FAMILY

MISSION STATEMENT

In partnership with youth, families, and system of care collaborators, La Familia Sana/The Healthy Family, of the Monterey County Behavioral Health Division will build on the strengths of its mental health services for children by improving interagency partnerships to provide seamless services, increasing the use of evidence-based practices, improving cultural competence, and including family members in all service levels.

LOCAL INFRASTRUCTURE DEVELOPMENT

Governance and Management Values:

The implementation of La Familia Sana is carried out with emphasis on system of care values, including:

- Honoring family and youth partnerships
- Striving for cultural competence at all system of care levels
- Collaborating with interagency partners to provide seamless services for children focusing on the individual needs of every child and family

PROJECT GOALS

La Familia Sana Project Goals are as Follows:

- Improve collaboration and wraparound procedures with interagency partners to provide seamless services for children
- Increase Parent and Youth Involvement in all system of care service levels
- Improve Cultural Competence within our system of care to better serve Latino families
- Select and implement Best Practices Models for children's mental health services
- Develop Smooth Transitions to Adulthood Procedures for youth served



System of Care Strategy

La Familia Sana/The Healthy Family will build on the strengths of its mental health system of care services for children by:

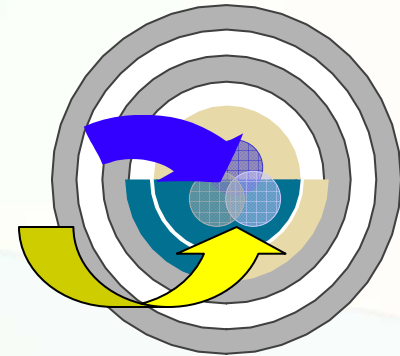
- Improving collaborations with interagency partners through system of care governance council representation, increased wraparound services, and shared vision
- Increasing capacity for serving Latino families by the hiring of bilingual clinicians and selecting evidence-based practices that are effective with Latino clients
- Integrating family members at all levels of services through council and staff representation
- Increasing the use of evidenced-based practices for identified sub-groups including: Children age 0-5, adolescents involved with juvenile justice, and transition age youth



TARGET POPULATION

TARGET POPULATION CRITERIA INCLUDES:

- Children/youth under age 22
- DSM IV diagnosis with the exception of substance abuse or developmental disability unless they co-occur with another diagnosable disorder.
- Child/youth must have impairment in at least two functioning domains: Self-care, school, family, or community
- Duration of disability is at least 6 months or likely to continue beyond one year without treatment or the youth must be at risk of or in out of home placement.
- Child/youth displays one of the following: psychotic symptoms, risk of suicide, or risk of violence due to mental disorder
- Child/youth is involved with two or more public agencies



YEAR ONE, PLANNING GOALS

- Establish oversight and Governing Council
- Hire 3-4 case managers for:
Transition age youth: 18-22 years old
Children falling through the cracks
Children in crisis seeking Emergency Room services
- Select evidence based practices
- Involve parents & community in culturally competent ways
- Create ten new positions such as Project Director, Family Advocate, Youth Advocate, Accounting and Data Integration staff positions.

Year 1: Progress to Date

PROJECT PARTNERSHIPS

MARCH, 2004:

La Familia Sana and the Department of Social Services, Child Welfare Redesign co-established the Governance Council.

The Governance Council consists of interagency partners, community members and consumers.

The Governance Council will

- 1) Provide oversight of the implementation of La Familia Sana/The Healthy Family (System of Care), and
- 2) Provide recommendations to DSS Child Welfare's redesign efforts.

Both departments are developing strategic implementation plans to improve the outcomes for children and families and require similar oversight committees.

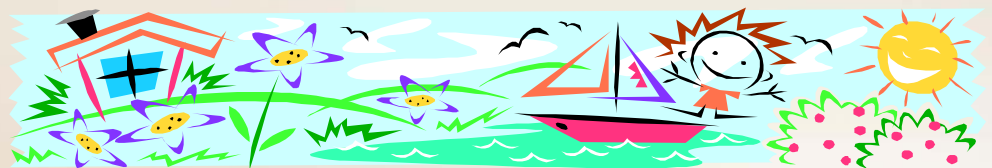
Year 1: Progress to Date

FAMILY INVOLVEMENT

MARCH, 2004:

For family involvement, a contractual agreement has been established with the United Advocates Children in California (UACC) to provide oversight services in the development of La Familia Sana's Family Partnership.

The Transition Age Task Force is established and meeting on a bi-monthly basis.



Year 1: Progress to Date

Selection of Evidence-Based Practices

For Evidence-Based Practices, three practices and one intervention model have been identified by project staff for further research:

- The Parent Child Interaction Therapy (PCIT)
- The Functional Family Therapy (FFT)
- The Incredible Years

The PCIT (Parent Child Interaction Therapy) is currently being researched as a potential “culturally-relevant treatment that has been developed through research protocol, is supported by the results of controlled treatment studies, and has guidelines and procedures for its implementation.”

- Evidence-Based Child and Adolescent Psychosocial Interventions
For evidence-based psychosocial interventions, the work of University of Hawaii was identified as a model to study for child and adolescent psychosocial interventions.

YEARS 2-6

IMPLEMENTATION GOALS

- Implement selected evidence-based practices
- Enroll 800 additional children in Mental Health Services
- Collaborate with other system members
- Increase family and parent participation in Mental Health Treatment
- Create federal, state, and other funding streams to sustain project after the grant ends
- Evaluate program effectiveness

La Familia Sana/The Healthy Family Program Design & Evaluation Logic Model

Needs/Resources:

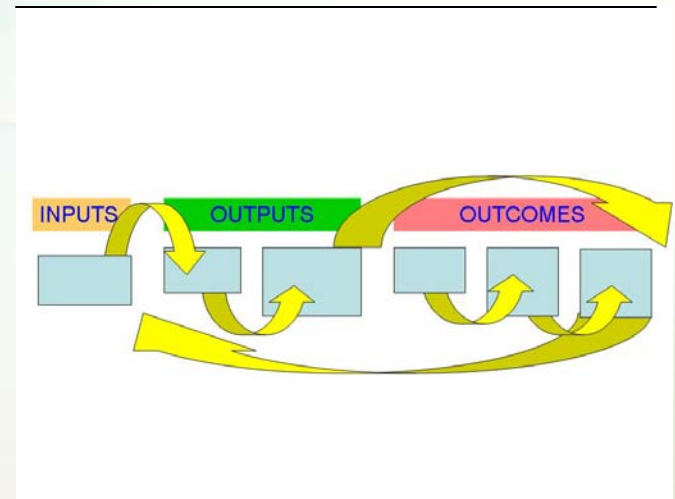
The Mission/Vision

→ **Strategies / Context:**
Theory of Change

→ **Goals / Objectives:**
Year 1, Planning; Years 2-6, Implementation

→ **Implementation plan:**
Program Procedures and Activities

→ **Evaluation:**
Progress Measures & Outcomes



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INPUTS

Time, Money,
Partnerships and
Research

OUTPUTS

In partnership with
system of care
collaborators and families
we provide seamless,
culturally relevant, and
comprehensive mental
health services for
children and their families

OUTCOMES

Children and Families
receive culturally
relevant mental health
services and families
are full partners in the
development and
implementation of
those services.

WHAT WE INVEST

WHAT WE DO

WHAT RESULTS

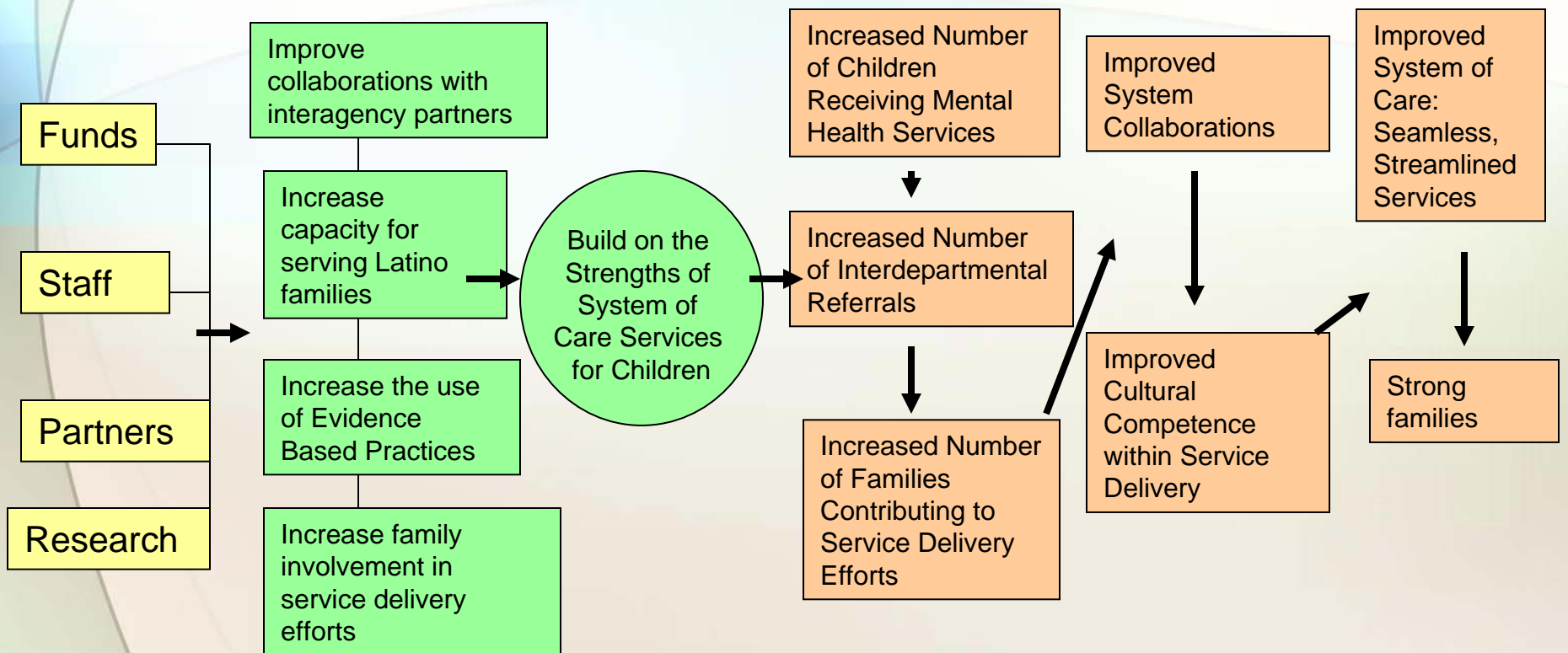
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INPUTS

OUTPUTS

OUTCOMES



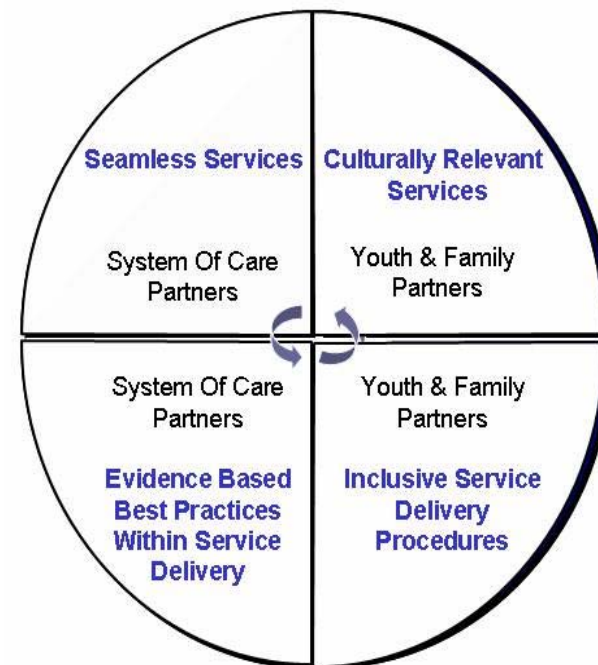
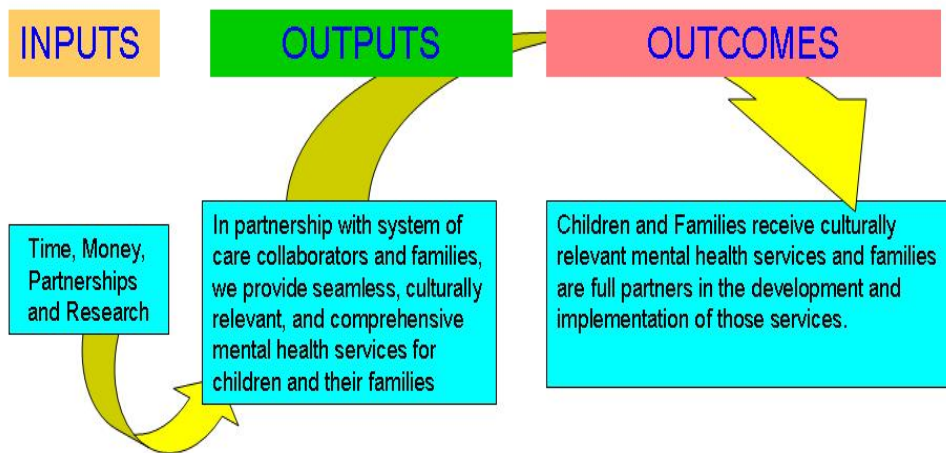
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Context/Strategies

Outcomes



Theory of Change: Children and Families are better served when interagency partners collaborate in the delivery of culturally relevant services and families are full partners in the development and implementation of those services.

Behavioral Health Division Children's Services (Projects and Grants)

Improved System of Care: Streamlined and Seamless Service Delivery:

Behavioral Health Children's Services		Streamlining of Evaluation Activities			Streamlining of Outcome Measures	
Project Name	Assessment	Overlap w/ Objectives to LFS Yes/No	If Yes, List	If No, List	Expected Outcomes	Notes
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Work in Progress:

Which Children Services Grant/Project Evaluation Requirements overlap or are complementary to La Familia Sana Project, for streamlining Children's Services Evaluation Research efforts?

Worksheets Completion in Progress

Behavioral Health Children's Services		Streamlining of Evaluation Activities			Streamlining of Outcome Measures	
Project Name	Mission	Overlap w/ Objectives to LFS Yes/No	If Yes, List	If No, List	Expected Outcomes	Notes (Page 1 of __)

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For more information about La Familia Sana/The Healthy Family, contact:

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