

# Monroe County ACCESS Logic Model



Transformation to a family-driven, youth-guided, culturally competent system of care will occur by:

- Influencing systems' behaviors, attitudes and beliefs and effecting changes in policy at the systems level.
- Influencing organizations' behaviors, attitudes and beliefs and effecting changes in policy and practices at the organizational leadership (bridge) level.
- Influencing direct care staff behaviors, attitudes and beliefs and effecting changes in the way business is conducted at the practice level.
- Active involvement of family, youth, and community members in effecting these changes at all three levels.

Implementing these changes will lead to improved outcomes for children and families.



Achieving Culturally  
Competent and Effective  
Services and Supports

**ACCESS Vision:** All families and youth within Monroe County facing emotional and behavioral challenges attain their full potential and achieve success, as they define it, in an environment based on System of Care values and principles. Families and youth are active participants in the collaborative process of transforming the way the community responds to the needs of children and their families in Monroe County.

**System Level**

**Organizational Level**

**Practice Level**

**Levels of Focus**

**Population Context**

**Strengths/Resources**

**Strategies/Actions**

**Feedback/CQI**

**Outcomes**

**SYSTEM**

- State & local system level policy makers from child-serving sectors – mental health, child welfare, juvenile justice, education, developmental disabilities, chemical dependency, social services, health, youth services
- Leadership from philanthropic, funding, faith & other community entities
- Family, youth & community

**ORGANIZATIONAL**

- Provider agencies from child serving sectors
- Community based organizations, associations, institutions
- Family, youth & community

**PRACTICE**

- All children ages 0 to 21 with serious emotional disorders & their families; with focus on:
  - Children of African-American or Latino descent
  - Children 0 to 18 involved in multiple systems
  - Youth/emerging adults ages 14-18 transitioning out of children's services
- Direct care staff / volunteers
- Monroe County community members

- Strong community tradition of collaborative initiatives
- Infrastructure platform for systems integration & interagency collaboration – Coordinated Children's Services initiative, Youth & Family Partnership (YFP) Leadership Team
- Platform for infusing cultural competence – Monroe County Cultural Competence Initiative
- Platform for infusing family & youth voice & leadership for family & youth involvement – Better Days Ahead
- Network of family support organizations
- "Service rich" community; well-developed mental health & health & human services systems
- Single Point of Access process using Child & Family Team (CFT) process for high need youth with serious emotional disorders
- Monroe County Office of Mental Health/Coordinated Care Services financial, data, performance management & clinical expertise
- Experience with adult mental health transformation initiative – Western New York Care Coordination Program
- NYS OMH Initiatives – Achieving the Promise, Evidence-based Practices
- Community mobilization, community development & Asset Partnership Network initiatives

- Implement cross-systems governance structure guided by common values, incorporate families, youth & community
- Prepare/train families, youth, community members to participate in governance structure
- Implement administrative infrastructure to support Continuous Quality Improvement (CQI) & other processes
- Develop cultural competence across all child-serving systems
- Use community assessment to inform expansion of service array & modifications to services
- Implement transition strategies from child-serving systems
- Broad-based & targeted training in System of Care, Child & Family Team (CFT) process
- cultural competence, evidence-based practices; conduct on-going assessment of training needs
- Assessment of communities' characteristics to include language, norms, beliefs, assets & information & education needs
- Implement Child & Family Team process including cultural discovery
- Make family advocates & care coordinators available for those to choose to have one
- Utilize community cultural brokers to support effective engagement with diverse communities
- Prepare families & youth to be in a position to drive their own care
- Make flexible funding available to support individualized services plans
- Implement CQI process to monitor fidelity, identify barriers & make changes
- Incorporate focus on wellness & recovery
- Develop strategies to ensure cultural & linguistic competence, family driven & youth guided care

**Short Term**

- Increased levels of cultural & linguistic competence in systems, organizations, services & practice behaviors
- Increased family, youth, community influence on & involvement in policies/ procedures of systems, organizations, services & practice behaviors
- Improved & earlier access to organizations & community-based services & supports
- Extended array of appropriate services
- Increased use of natural community supports & non-traditional services/ supports
- Increased satisfaction of family/youth with services
- Improved child & family functioning & emotional states

**Long Term**

- Increased family-driven, youth guided, culturally & linguistically competent, & community directed systems, organizations and services
- System & organizational policies & infrastructure support the CFT process and institutionalize practice change
- Reduce disparities, increase and maintain access, availability and utilization of community-based & culturally relevant services and supports that include providers from the population of focus, especially for families of color
- Improved system integration & interagency collaboration guided by common values
- Transformation efforts are sustained
- Funding resources are used in the most flexible way possible
- Increased family & youth participation in determining/ driving their own care
- Maintain child & family functioning and emotional states & satisfaction with care
- Increased skill to maintain wellness

**Core Values/Guiding Principles**

## System Level

### Levels of Focus

### Population Context

### Strategies/Actions

### Feedback/CQI

### Outcomes

- System level policy makers from health & human services sectors
- Local community leaders
- Monroe County community members & residents; families & youth

- Local & state leadership from multiple systems: Mental Health, Child Welfare, Juvenile Justice, Education, Health, Developmental Disabilities, Youth Services, Chemical Dependency
- Local community leaders: Faith, philanthropic, civic, ethnic/racial communities, neighborhoods, insurers
- Monroe County community members/residents; families & youth

- Implement cross-systems governance structure guided by common values
- Incorporate family, youth & community representation into governance structure
- Develop recruitment & outreach strategies to continuously identify family, youth & community participants
- Provide training & support to adequately prepare families, youth & community members to participate in governance
- Establish mechanisms to use the governance structure to resolve barriers, including effecting policy & practice changes within systems
- Conduct assessment of communities' characteristics, norms, beliefs, strengths & assets & education & information needs
- Use assessment of communities to inform outreach, social marketing & service expansions
- Provide broad-based & targeted training in SOC, CFT, cultural competence, EBP's to all stakeholders; continually assess training needs
- Establish a cadre of community brokers to effectively link systems with communities
- Develop strategies to extend cultural competence initiative across all child-serving systems
- Develop a social marketing strategy that addresses stigma & reaches all aspects of the community
- Provide continuous feedback to governance structure through the CQI process
- Integrate a focus on recovery into the child-serving systems, adequately preparing youth for higher levels of independence as adults
- Develop mechanisms to allow for smooth & individualized transition of youth from the SOC to adult services or out of the formal service systems
- Involving all stakeholders in developing SOC financing strategies & plan for sustainability

#### Short Term

- Increased levels of cultural competence in systems
- Increased family, youth, community influence on policies & practices of systems

#### Long Term

- Increased family-driven, youth-guided & community-directed systems
- Reduce disparities, increase access, availability & utilization for specific ethnic communities
- Improved system integration & interagency collaboration guided by common values
- Improved transition of youth into adult services or out of care
- Transformation efforts are sustained; services, values & philosophy are sustained
- Funding resources are used in the most flexible way possible

## Organizational Level

### Levels of Focus

### Population Context

### Strategies/Actions

### Feedback/CQI

### Outcomes

- Provider agency policy makers & leadership from health & human services agencies
- Local community leaders
- Monroe County community members & residents; families & youth

- Local leadership of provider agencies from multiple systems
- Local leadership of community organizations: Faith, philanthropic, civic, ethnic/racial, neighborhoods, insurers
- Monroe County community members/residents; families & youth

- Establish Provider Group to bring together leadership from mental health provider agencies
- Include a "provider" seat on the TLC to represent the collective perspective of the Provider Group
- Involve organizational leadership & other staff in work groups & implementation teams
- Work with agencies to resolve barriers to implementing practice change
- Provide broad-based & targeted training in SOC, CFT, cultural competence, EBP's to all stakeholders; continually assess training needs
- Encourage agencies to incorporate family, youth & community representation into their governance structure
- Work with agencies to modify service options to support the CFT process
- Conduct outreach to minority & non-traditional organizations to expand the array of organizations offering services & supports to youth with SED
- Utilize flexible funding to support youth with SED in accessing activities & opportunities in natural community settings
- Establish single point of access process for entry into intensive community-based mental health services
- Work with agencies to implement evidence-based practices identified by the Research-to-Practice Council; ensure adequate training & support is available to implement & practice with fidelity
- Establish a cadre of community brokers to effectively link organizations with communities
- Continue cultural competence initiative with mental health agencies, including cultural competence assessment & technical assistance in developing plans to improve the level of competence
- Develop strategies to extend cultural competence initiative across all child-serving systems
- Develop a social marketing strategy that addresses stigma & reaches all aspects of the community
- Provide continuous feedback to organizations through the CQI process
- Work with providers to integrate a focus on recovery into the child-serving systems, adequately preparing youth for higher levels of independence as adults
- Develop mechanisms to allow for smooth & individualized transition of youth from child serving organizations to adult services or out of the formal service systems
- Involve all stakeholders developing SOC financing strategies & plan for sustainability

#### Short Term

- Provide earlier & improved access to community-based services & supports
- Expanded array of appropriate services
- Increased family & youth involvement at all levels in organizations

#### Long Term

- Earlier & improved access to appropriate community-based services & supports, especially for families of color
- Expanded array of services & supports that include providers from the population of focus
- Increased availability of culturally relevant services
- Organizational infrastructure compatible with the delivery of culturally & linguistically competent care
- Organizational policies support the CFT process & institutionalize/sustain practice changes

## Practice Level

### Levels of Focus

### Population Context

### Strategies/Actions

### Feedback/CQI

### Outcomes

- Children & families receiving or in need of system of care services
- Direct care staff from health, human service & community-based agencies
- Monroe County community members & residents

- All children & youth ages zero to 21 with a serious emotional disturbance (SED) & their families, with a focus on:
  - Children/youth of African-American or Latino descent
  - Children/youth ages zero to 18 involved in multiple systems
  - Youth & emerging adults ages 14-18 transitioning to adult services or out of services
- Direct care staff /volunteers from health, human service & community-based agencies
- Monroe County community members/residents

- Develop Care Coordination work group that includes service providers, families, youth & community members to advise & inform transition to CFT process
- Provide training/coaching in CFT process & operationalization of system of care values
- Provide education to families & youth on the CFT process, system of care values & how they can drive/guide their own care
- Provide education to community members on the CFT process, system of care values & how they can become involved
- Develop messaging to effectively reach diverse communities that promotes/highlights the benefits of CFT process & systems of care
- Implement Child & Family Team (CFT) process that includes cultural discovery & cultural assessment & incorporates focus on wellness/recovery
- Implement culturally relevant/appropriate assessment tools & service delivery models
- Make family advocates & care coordinators available for those who choose to have them
- Utilize community cultural brokers to support effective engagement with diverse communities
- Develop individualized service plans that use non-traditional supports & services
- Make flexible funding available to support individualized service plans
- Develop care review team & implement Continuous Quality Improvement (CQI) process to monitor fidelity, identify barriers & assure feedback results in necessary changes
- Use Councils & work groups to address barriers & challenges to implementing practice change
- Develop strategies to sustain practice change

### Short Term

- Increased culturally & linguistically competent services
- Increased use of natural, community & non-traditional services & supports
- Increased youth & family satisfaction with services
- Improved child & family functioning & emotional states
- Demonstrate effectiveness of CFT process

### Long Term

- Enhanced array of service offerings that more effectively respond to identified needs
- Increased family & youth participation in designing & driving their one care
- Improved engagement & retention in care for youth of color & their families
- Maintain child & family functioning & emotional states
- Improved transition of youth
- Increased skill to maintain wellness
- Increased responsiveness to culture of families
- Maintain satisfaction of families & youth with services
- Improved ability to enter, navigate & exit services & supports
- Develop evidence-base for CFT process