Central Massachusetts Communities of Care Logic Model

Goal: To enhance the system of care in central Massachusetts to decrease & prevent youth with SED from becoming involved with the courts and to reduce the seriousness and duration of juvenile justice involvement.
Context

• Youth w/Severe Emotional Disturbance (SED) are more represented in the juvenile justice system than in the general population.

• Youth with SED lack needed services and supports that could help them and their families avoid court involvement.

• Families live in rural areas lacking public transportation and access to services.

Challenge

• Need for developing and expanding Evidence Based Practices (EBP) and therapeutic services available to youth & families and increasing access to & range of alternative services & supports.

• Need to enhance engagement and decrease isolation of families of youth with SED at risk for juvenile justice involvement.

• Need to develop linkages between families, State youth serving agencies, provider agencies, and the juvenile justice system.

• Need for identifying most effective practices for preventing youth with SED from court involvement and/or reducing seriousness & duration of involvement.

• Need to reduce the disproportionate risk for youth of color.

• Need to enhance capacity, coordination & sustainability of family organizations concerned about the well-being of the target population.
Stakeholders/Partners
• Youth with SED involved with or at risk of involvement in courts and their families.
• State Agencies: EOHHS, DSS, DYS, DMH, DMR, DPH, DOE
• Court System
• Family & Youth Organizations
• Community Organizations (MOC, YMCA, Boys & Girls Clubs)
• Schools
• CMCC
• Community Child Provider Agencies
• Pediatric Health Providers
• Religious Organizations
• Law Enforcement

Target Population
Youth ages 10-18 years with SED involved with or at risk of involvement in the courts, and their families.

Criteria for inclusion in National Evaluation
Serious Emotional Disturbance
A. DSM diagnosis or symptoms consistent with a DSM diagnosis and a history of medication for emotional or behavioral needs for more than 6 months.

AND
B. At least TWO of the following:
   • IEP/504 plan which identifies social/emotional/behavioral needs
   • History of out of home placement
   • Parent reported functional impairment at home
   • Parent reported functional impairment in the community

Juvenile Justice Risk
At least ONE of the following:
   • Consideration of CHINS application
   • History of CHINS application
   • History of CHINS commitment
   • History of police involvement
   • School Adjustment problems in any of the following areas
     a. Truancy
     b. Drop out
     c. Suspension
     d. Habitual school offenses
     e. Academic Failure (2 marking periods or more)
   • History of DYS detention on bail
   • Sibling or parent with criminal involvement.
   • Current Substance Abuse in the immediate family.

Age
10-18
Values/Assumptions/Theory of Change

Better outcomes are achieved when:

- Families are empowered to effectively navigate service systems on their child’s behalf
- There is a family-professional partnership model of service delivery
- There is access to both formal services and informal supports that are culturally competent
- Services incorporate the President’s New Freedom Commission principles of family-driven, youth-guided, culturally competent, individualized, strength-based, coordinated, and outcome-based care
- There is cross-agency communication and collaboration
- There is access to Evidence-Based Practices for needs for which typical interventions are not effective
Objectives

1. Identify youth with Serious Emotional Disturbance (SED) involved in or at risk for involvement in juvenile justice system

2. Decrease/prevent juvenile justice involvement for this group

3. Provide multiple points of entry and access to a range of therapeutic and alternative services and supports for these youth and their families & evaluate their effectiveness

4. Increase Youth and Family hopefulness and competence to access & utilize needed supports and services

5. Increase Family, State Agency, & Provider coordination & collaboration

6. Increase access to Evidence-Based Practices and evaluate their effectiveness with youth with SED at risk of juvenile justice involvement

7. Enhance and coordinate family organizations concerned with the needs of the target population

8. Increase cultural competence within Provider Agencies

9. Demonstrate effectiveness of redirecting dollars spent on out of home placement to community based alternatives for target population
CMCC Strategies

Supportive/Mentoring Wing
- Information & Referral
- Parent Support Groups
- Parent/Family Development Activities
- Youth Support Groups
- Youth Development Activities

Care Facilitation Wing
- Assessment
- Vision Planning
- Care Facilitation
- Coordination of Services
- Skill development for navigating service system

Must meet criteria:

Open to All Families

Referral Sources:
- Families
- Family Organizations
- Community-Based Organizations
- Schools
- Courts
- Police
- Pediatric Health Providers
- State Agencies
- Provider Agencies

CMCC Family Centers

Satellite Activities
Center Activities conducted throughout region through space sharing with community agencies

Family Organization Guidance & Support

CMCC Training & Learning Collaborative
- Cultural competence Training
- State Agency Cross Training
- Parent to Parent Training
- Strength Based Family-Driven Practice
- Wraparound Process

Import/support Evidence Based Practices in Provider Agencies
- Trauma Focused CBT
- MET/CBT
- PBIS
- Other Family Therapy (TBD)

Crisis Options

Evaluation

CMCC Family Centers
Crisis Options

• Access to Emergency Foster Care (DYS)
• Access to Structured Group Home Beds (KEY)
• Working collaboratively with Crisis Intervention Teams in North & South County Regions.
• Referral to CFFC for intensive wraparound after stabilization
## CMCC Outcomes

### System Outcomes
(as measured by aggregate system level data)

- Reduction of CHINS cases referred to DSS
- Reduction in DYS detention adjudications
- Reduction in rate of CHINS applications and adjudicated petitions
- Reduction in recidivism of DSS referrals & DYS adjudications
- Reduction of disproportionate court involvement of youth of color
- Increased awareness of and referral to Family Centers by Police, schools, etc.
- Increased collaboration among schools, state & local agencies & families
- Increased coordination between community agencies & residential & inpatient services
- Decrease length of stay in DSS residential placements
- Increased youth and family voice & participation of youth and family in state child serving agencies
- Increase systems recognition of the importance of family organizations
- Increased number, range and intensity of services and supports
- Increased access to culturally competent services
- Decrease in dollars spent on out of home placement
- Reduction in cost of court & probation departments

### Youth and Family Outcomes
(as measured by individual youth & family level data)

- Increased youth functioning and emotional/behavioral adjustment in school, at home & in the community
- Reduction of out of school suspensions, truancy, out of district placement
- Reduction or prevention of arrests of youth
- Reduction or prevention of court involvement of youth
- Reduction in youth reentering courts after court discharge
- Reduction in juvenile justice involvement of siblings of youth w/SED
- Decreased time spent in out of home placements (DYS detention, DSS residential care, etc.)
- Increased sense of hopefulness in family & youth
- Increased positive family interaction, family environment and family competence in managing youth’s behavior
- Reduced family stress and increase in parents seeking help from the Family Centers in earlier stages of difficulty
- Youth’s successful transition to adulthood (successful completion of high school, work engagement, stable housing)
Process Data:
- e.g., • # & types of trainings, family & community services and supports offered by CMCC & Family Centers
- Quality/fidelity of services
- #'s & demographics of families served
- Cultural competence
- Satisfaction

National Evaluation:
CMCC is one of 25 sites across the Nation that will submit its data as part of a National Study

Local Evaluation:
Impact of different CMCC components on families/youth
Impact of CMCC on existing system.
Cost-effectiveness of CMCC model

Youth/Family Change Data: e.g.,
- Youth functioning and adjustment
- Youth transition
- Family functioning and stress
- Services & supports received
- Satisfaction with services

State Data/ Gateway/Cost Analysis (Robin Clark/Kathy Betts/Sharon Wright):
Cost and service utilization data across systems (e.g., DSS, DYS, DMH, DMR, etc.)

Systems Change Data:
e.g.,
- Rates of DSS CHINS referrals, DYS detentions, etc.
- Levels of cooperation/collaboration among agencies
  - Array of available services and supports
  - Cultural competence
  - Satisfaction

Quality Improvement:
What works best and for whom? How satisfied are stakeholders?

Process Data:
e.g.,
- # & types of trainings, family & community services and supports offered by CMCC & Family Centers
- Quality/fidelity of services
- #'s & demographics of families served
- Cultural competence
- Satisfaction

Evaluation Team including research, clinical, and family representation