

**CENTER OF EXCELLENCE FOR  
CHILDREN'S BEHAVIORAL HEALTH**  
integrating research, policy, and practice



# **FY2018-20 SYSTEM OF CARE STATE PLAN WRAP-UP REPORT**

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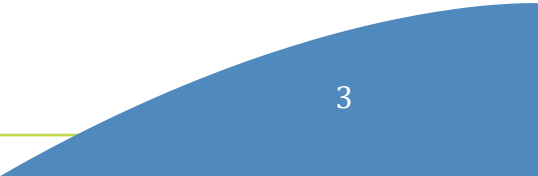
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## INTRODUCTION

Reaching a destination efficiently and effectively requires prudence, commitment, and planning, along with the will to implement that plan. These qualities were demonstrated by Georgia's Interagency Directors Team (IDT) when they resolved to create and carry out a comprehensive three-year Children's Behavioral Health System of Care strategic plan for fiscal years (FYs) 2018-20.

In 2011, Georgia's Department of Behavioral Health and Developmental Disabilities (DBHDD) created the IDT, which was composed of director-level members from all child-serving agencies in Georgia, as well as partner organizations. The IDT is the state's multiagency System of Care leadership collaborative, whose mission it is to manage, design, facilitate, and implement the System of Care in Georgia. Giving their time, energy, and talent the IDT, under the direction of the Behavioral Health Coordinating Council (BHCC), and with the support of the Center of Excellence for Children's Behavioral Health and the National Training and Technical Assistance Center for Children's Behavioral Health, developed the 2017 Georgia System of Care State Plan.

The FY2018-20 strategic plan was grounded around five critical focus areas: access, coordination, workforce development, funding and financing, and evaluation. Its vision and mission illustrated the renewed commitment to improving mental and behavioral health services for Georgia's children on behalf of child-serving agencies, legislators, and community organizations representing youth, family, and providers.

As the three-year period covered by this strategic plan has closed, it is incumbent upon us to look back and assess our progress. This final report on the IDT System of Care State Plan for FY2018-20 will highlight under each of the five focus areas the goals that were reached and the progress that has been made. This information will help to shape our plans for years ahead as we continue to look for ways to best address the behavioral health needs of children, youth, and their families throughout the state of Georgia.

## EXECUTIVE SUMMARY

In 2017, Georgia was at a critical juncture with its System of Care and in meeting the behavioral health needs of its children, young adults, and families. In order to address the needs, IDT developed a strategic plan that would bring about measurable improvement in cross-agency behavioral health coordination and provide greater awareness and access to services for children, adolescents, and emerging adults (4-26 years) with severe emotional disturbance.

The IDT's vision, mission, guiding principles, and strategic goal were developed during initial strategic planning meetings in FY2013 and were meant to steer all aspects of the group's work.

### Vision

Georgia's youth and families access services, programs, and supports lead independent, enriched, and productive lives in their communities of choice.

### Mission

The IDT's mission is to be a multiagency leadership collaborative that uniquely designs, manages, facilitates, and implements an integrated approach to a child and adolescent system of care that informs policy and practice and shares resources and funding.

### The IDT's Guiding Principles:

- Be youth-guided and family-driven
- Be home- and community-based
- Foster the least-restrictive environments
- Be culturally and linguistically competent
- Promote evidence-based practices
- Ensure equitable participation among partners
- Commit to a system driven by data that uses measurable outcomes for system design
- Commit to a continuous quality improvement (CQI) process with developmental stages
- Respect the unique cultures and priorities of each agency

### Strategic Goal

Children grow up to be healthy adults who live in the community, are employed, and choose and guide their care in the least restrictive environments possible.

Among the accomplishments of the past three years, the IDT has:

- Successfully developed a school-based mental health survey administered to over 700 school counselors and 227 principals throughout the state. Results indicated that about one-third of

schools in Georgia were implementing some form of school-based mental health initiatives, including social emotional learning and mental health in-service trainings, individual therapy, and crisis services and behavioral health assessments.

- Created and disseminated a behavioral health services navigation guide for families and young adults, and the [\*Little Green Book\*](#), a pocket behavioral health glossary, to improve System of Care communication and coordination. Over 26,250 copies of the [\*Behavioral Health Guide for Young Adults\*](#) and the [\*Behavioral Health Guide for Families\*](#), along with 10,500 copies of the *Little Green Book* were distributed statewide.
- Designed a three-hour trauma-informed care clinical seminar to better prepare the emerging behavioral health workforce. Over 300 master of social work (MSW) students at five pilot university sites were trained during the first year of implementation.
- Created national and state policy briefs on telehealth and telemedicine, [\*Use of Telemedicine for Behavioral Health Services: An Overview of the National Landscape\*](#) and [\*Telehealth and Behavioral Health in Georgia: A Quick Guide for Georgia Practitioners\*](#).
- Designed a new brochure and manual for [\*Local Interagency Planning Teams\*](#) (LIPTs), created collaboratively by DBHDD Children, Young Adults, and Families regional specialists, LIPTs, and family service organizations across the state.
- Created a System of Care [webpage](#) linking Georgia providers to recommended [evidenced-based practice \(EBP\) clearinghouses](#).
- Added Intensive Customized Care Coordination (IC3) services to the Medicaid State Plan and created benchmarks to track IC3 utilization and deliver ongoing provider training on the IC3 Model.

The FY2018-20 strategic plan has served the state well. The goals and objectives that were accomplished laid a strong foundation for behavioral health priorities and will guide the IDT's work going into the next plan and beyond.

Much work lies ahead. Important work. How much of that can be completed and how well the work is completed will be greatly affected by the level of funding that is available. As always, the IDT will seek to work together with the community to ensure that every child and young adult has access to the behavioral health services they need.

## WHAT THE SYSTEM OF CARE ACCOMPLISHED

### GOAL 1: ACCESS

To provide access to a family-driven, youth-guided, culturally competent, and trauma-informed comprehensive System of Care to meet the needs of children, youth, and young adults with severe emotional disturbance (SED), substance use disorders, and co-occurring disorders.

*The IDT improved families' ability to navigate the current system.*

The IDT, in partnership with the Center of Excellence for Children's Behavioral Health (COE), produced various resources to improve knowledge and guidance for service clients throughout the state. This collaboration resulted in numerous resources including briefs on telehealth, navigation guides, and a glossary of important system terms. Over 20,000 copies of these various resources were disseminated throughout the state, and these resources have been downloaded a total of 1,974 times since summer 2019.

*The IDT evaluated school-based mental health programs among Georgia's public schools.*

A 15-member school-based mental health (SBMH) workgroup collaborated to address strategy 1.2, "Increase behavioral health services available in schools." In year one, the workgroup established a baseline measure of schools that self-identify as having access to all three tiers of SBMH services through the creation and dissemination of a survey to school counselors statewide. The survey, administered by the Georgia Department of Education, reported data on the 2017-18 school year. Among all Georgia schools, 32.6% (n = 727) responded to the survey. Out of this sample, 17.7% (n = 129) reported access to services in all three tiers of the SBMH framework.

In year 3, the workgroup assessed the change in access to all three tiers of SBMH services by disseminating the same survey to school principals statewide. The survey, administered by COE, reported data on the 2018-19 school year. Among Georgia schools, 10% (n = 227) responded to the survey. Out of the 65 schools represented in both the year 1 and year 3 surveys, 75.4% (n = 49) increased in their access to SBMH services, with 47.7% (n = 31) increasing to all three tiers of SBMH services, and 11% (n = 7) maintaining access to all three tiers of SBMH services.

*The IDT increased utilization of the Intensive Customized Care Coordination (IC3) services.*

Over the years, the IDT strategized to increase utilization of high-fidelity wraparound/IC3 services for youth with SED. To this end, IC3 services were added to the Medicaid state plan in October 2018 to increase access to this service for youth and families. There was training facilitated for providers using the IC3 service model. Through the IDT's work, baseline data was also used to establish a benchmark for utilization of the services and ongoing quality assurance.

### GOAL 2: COORDINATION

To facilitate effective communication, coordination, education, and training within the larger System of Care and among local, regional, and state child-serving systems.

*The IDT created two key positions to provide leadership support and direction to System of Care activities.*

The leadership infrastructure was further strengthened by the employment of a System of Care director, who is incorporating concepts of systems thinking, strategic development, and executive

leadership to facilitate the implementation of the System of Care statewide. In addition, a System of Care program manager was hired to oversee and provide support to LIPTs to implement the System of Care at the local level. These positions have already borne fruit in the form of increased communication and engagement with DBHDD regional specialists and LIPT chairs. Additionally, a new strategic plan for FY2020-22 has been created.

*The IDT expanded knowledge and information about the System of Care in Georgia.*

The System of Care pocket guide, or *Little Green Book*, was created for stakeholders, partners, and family members. The guide is a glossary of behavioral health terms and common diagnoses in addition to contact information for child-serving agencies. In its first printing, 10,616 pocket guides were printed and disseminated to child-serving and family service organizations across the state. In addition, a three-part System of Care webinar series was developed, discussing (1) what is the System of Care, (2) the System of Care in Georgia, and (3) the System of Care State Plan. The training series was created to provide an overview of the System of Care and share the different ways stakeholders can participate at the various levels. The series was presented via webinar to ensure further reach to communities where in-person training may be more limited. The webinar meetings were presented live to partners and recorded and posted for later viewing on the System of Care webpage.

*The IDT increased information sharing across agencies.*

A brochure was developed, in English and in Spanish, for the LIPTs and shared throughout the state. The brochure outlined the purpose of LIPTs, as well as meeting processes and participation for families, partners, and stakeholders. Meeting documents were updated, reformatted, and made available for web-based use and easier access for those needing to make referrals. Supportive trainings were hosted with child-serving agencies and families throughout implementation of the state plan. Trainings included Results Based Facilitation, Cultural and Linguistic Competence, Youth Mental Health First Aid, and Trauma-informed Care.

*The IDT developed opportunities for new agency partnerships and collaborations.*

Through the work of the IDT, the Division of Family and Children Services (DFCS) staff worked with the System of Care program manager to provide System of Care and LIPT training to DFCS staff across the state both in person and online. The Minimum Data Set Survey implementation was facilitated through IDT work with the Centers for Disease Control and Prevention and Voices for Georgia's Children; however, many partners contributed to this collaborative work. The group developed and administered a survey to behavioral health providers to assess the availability of evidence-based and best practices and treatments for ADHD youth.

### **GOAL 3: WORKFORCE DEVELOPMENT**

To develop, maintain, and support a culturally competent, trauma-informed workforce to meet the needs of children, youth, and young adults and their families.

*The IDT developed a multiyear initiative to better equip emerging behavioral health professionals.*

Trauma-Informed Universities (TIU) is a multiyear initiative targeting higher-education programs to embed a trauma-focused seminar into their field training to better equip emerging behavioral health professionals to recognize and prevent triggers for clients who have experienced traumatic life events. The TIU training was piloted in partnership with five university MSW programs (University of Georgia, Kennesaw State University, Georgia State University, Clark Atlanta University, and Albany State University). To assess the efficacy of the program, a pre- and post-test was administered to 573 respondents. Of the 206 matched survey results, there was a 13% increase in trauma-informed care knowledge across several domains for individuals who completed the training.



*The IDT commissioned the creation of an evidence-based practice clearinghouse.*

As a part of the state plan improvement strategies, the IDT chose to create an EBP for children's behavioral health. EBPs are those that have empirical research supporting their efficacy. The workgroup reviewed existing clearinghouse resources in Georgia and elsewhere, making determinations on the EBP criteria for inclusion or exclusion to the registry. Upon completion, over 1,000 EBPs, along with evidence-based educational information, were made publicly available on the System of Care webpage. The clearinghouse is a critical tool for identifying, selecting, and implementing evidence-based behavioral health practices that will improve behavioral health outcomes for children, youth, and their families.

## **GOAL 4: FUNDING AND FINANCE**

To utilize financing strategies to support and sustain a comprehensive, community-based, family-driven, youth-guided, culturally competent, and trauma-informed System of Care anchored in cross-agency commitment to effective and efficient spending.

*The IDT produced a System of Care financing report.*

The IDT developed an annual System of Care financing report to reflect all expenditures for children's behavioral health services from the state agencies. The report included recommendations for the Children's Commission on Mental Health, which resulted in \$22 million of newly appropriated funding for children's mental health services in the state. The report may be used to guide future discussions of braiding or blending funding.

*The IDT pursued system-level grant opportunities for funding.*

The IDT worked collaboratively to secure funding through federal grant opportunities. Several financial awards were received, and the IDT served as an advising body for the children's health-related grant projects. These projects included Project LAUNCH (Linking Action for Unmet Needs in Children's Health), Project AWARE (Advancing Wellness and Resilience in Education), and — through System of Care Expansion funds — the AIME (Awareness, Integrate, Mobilize, Educate) grant.

## **GOAL 5: EVALUATION**

To utilize a framework of measuring and monitoring data on key System of Care outcomes to demonstrate and communicate the value of a System of Care approach for improving children's behavioral health and support ongoing quality and improvement.

*The IDT provided tools to LIPTs to self-evaluate their System of Care outcomes.*

A major component of the System of Care evaluation was the development and testing of a data-collection tool for LIPTs. Goals and tasks in this area were focused on coordination across the local and state systems to create a stronger understanding of the how LIPTs are operating and what strengths and barriers exist to their successful collaboration with other child-serving entities and families. An Evaluation Advisory Group was formed to guide this work, which included LIPT chairpersons, DBHDD regional specialists, and COE staff. The Evaluation Advisory Group was instrumental in sharing what data existed within the LIPT context, describing LIPT processes, reviewing early drafts of the LIPT data-collection tool, and field testing the instrument during both pilots. The COE Evaluation Team additionally developed a training to support the second phase of the LIPT pilot, which was delivered to

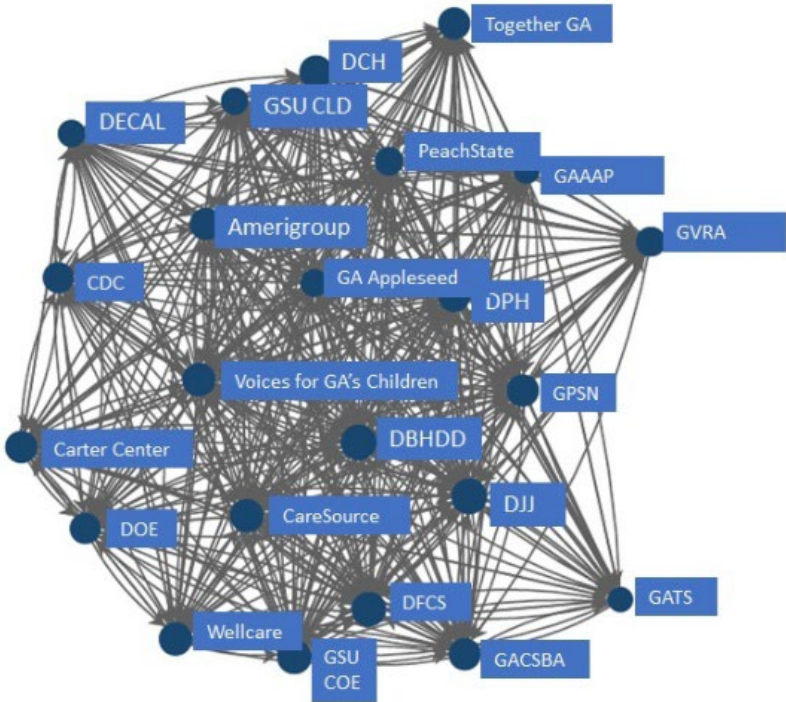
LIPT chairs in DBHDD Regions 4 and 5 via the AIME Grant. COE staff interviewed several LIPT chairs and co-chairs for additional feedback on their process and data needs, including how LIPTs are responding to the COVID-19 crisis.

*The IDT fostered collaboration and sustained important partnerships.*

The System of Care Evaluation Team also conducted a survey of IDT membership using the Wilder Collaboration Factors Inventory, a validated scale for use with multiagency collaboratives that assesses engagement, communication, leadership, purpose and vision, and adaptability. IDT showed growth in multiple areas from 2018 through 2019, including the establishment of informal relationships and communication links, an appropriate pace of development, and identification of sufficient funds, staff, materials, and time for the group collaboration.

In Year 3, a social network analysis component was added to gauge how connected the IDT membership is to each other and the quality of relationships. IDT’s social network is represented by the graphic below. Overall, the results showed a highly connected network. There is opportunity to ensure that all IDT members are connected to each other, since there are some missing links in relationships across member representatives.

## IDT’s Social Network in 2018



## WHAT'S NEXT?

The FY2018-20 strategic plan achieved much for the System of Care in Georgia. It set the stage for the state behavioral health system to take even more significant steps forward. The keys to any strategic plan lie in sustaining the gains that have been made and in continuing to build on the past. Providing continued support for the delivery of high-quality behavioral health services across the continuum of care and the inclusion of family and youth with lived experience will be essential to ensure that the gains of the past three years make a difference well into the future.

With the advent of the COVID-19 pandemic in the final year of the plan, some work in the various focus areas shifted to that necessary to support the children, young adults, and their families through this difficult period. IDT member agencies and organizations were able to support families and each other as everyone jointly navigated the pandemic. Work on strategies that were partially completed will continue as they align with the work of the next strategic plan. Examples of these strategies include supporting the continuity of care through Medicaid eligibility, the development of LIPT collaboratives, and recruiting behavioral health practitioners in shortage areas.

Finally, thanks for the hard work to all who were involved in the process. Committed state agencies, community partners, children, youth, and their families all play a role in supporting the System of Care's essential functions. We invite everyone in our state to join us in this effort, and we thank you for your ongoing support.

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