



# **Caring Together**

***(to be renamed)***

2019 Stakeholder Engagement Sessions  
Orientation Meeting  
May 15, 2019

4/26/2019

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## Agenda

- Introductions
- Guiding Principles
- Workgroup Expectations and Goals
- Current Caring Together Services
- Preview of Areas for Feedback

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## Workgroup Participants

Participants	
Joel Aponte	Meredith Lagoy
Betty Bragdon	Matt McCall
Oonagh Brault	Lori Montello
Holly Calabrese-Grazette	Sam Poutas
Tina Champagne	Lynn Riley
Gretchen Emond	Kim Ritter
Joe Forth	Kerry Roberts
Renee Ghembaza	Steve Schank
Joel Goldstein	Andrea Salzman
Andrea Joyner	Marin Schreiber

Introduce yourself and tell us about your connection to CT Services.

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## DMH Family Collaboration Principles

- Mental health services are most effective when parents/caregivers, youth, and providers work collaboratively as partners in a youth's treatment.
- Youth need every opportunity to be involved with and stay connected to their parents/caregivers and family members.
- Parents/caregivers are essential sources of support for their children throughout their lives and need to be actively involved with their children and their services.
- Parents/caregivers also need timely and accurate information about their children's conditions and the range of available interventions and services.
- Policies, services and supports must be designed and evaluated collaboratively and be family-driven, youth-guided, strength-based, culturally and linguistically competent, individualized, informed by best practices and evidence, and consistent with the research on sustained positive outcomes.

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## DMH-DCF Collaboration

### Before CT

- Targeted, local efforts
- Some shared provider programs

### Caring Together Joint Procurement

- Jointly purchased
- Jointly staffed

### Separate but Coordinated Procurements

- Cross-attendance at stakeholder forums
- Coordinated planning re: service models, best practices
- Recalibrating the Collaboration
- DMH will re-emphasize clinical sophistication and securing access for DMH youth



## Stakeholder Workgroup

- DMH will use these meetings as a forum to present proposals and to solicit input from workgroup members.
- Stakeholders will provide feedback and advice on proposed changes to CT services. This is not a decision-making group.
- We do not plan to issue an RFI (Request for Information).
- Key progress and findings made by the workgroup will be posted to the DMH website and CommBuys.



## Expectations of Stakeholders

- **Workgroup members are expected to attend all workgroup meetings in person.**
  - DMH will not offer remote participation for these meetings.
  - If you are unable to attend a meeting, please notify Carol Murphy ([carol.murphy@state.ma.us](mailto:carol.murphy@state.ma.us)).
- **Meeting materials will be emailed prior to each workgroup session.**
  - If you must miss a meeting, please review the meeting materials prior to the next workgroup session.
  - Please do not take up group time to discuss items you may have missed at a previous meeting.
  - DMH is willing to discuss these items before or after the session.

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## Expectations of Stakeholders

- **Be prepared to cover a lot of material, while staying focused on specific meeting topics.**
- **Be courteous and respectful to all members of the workgroup.**
  - Workgroup membership is designed to elicit diverse views and experiences.
- **Ensure all stakeholders have an opportunity to share their input.**
- **Silence and put away your cell phone.**

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## Stakeholder Engagement: During CT

### Advisory Groups

- Caring Together Implementation Advisory Committee – started October 2013 and ended November 2018
- CT Family Advisory Council – started June 2015 and is still active

### Evaluation (2014 to 2018)

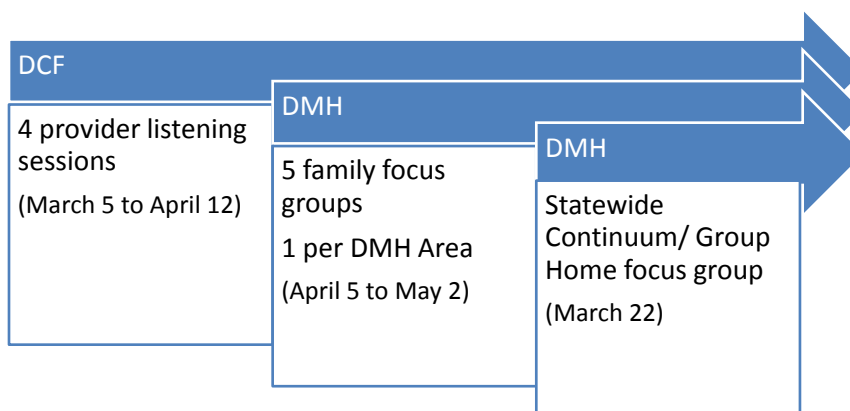
- Annual Caring Together evaluation surveys: DMH staff, DCF staff, providers, parents/caregivers, youth who received CT services.
- One-time surveys: CTCS staff, Family Partners, parents/caregivers who worked with a Family Partner.
- Interviews with DMH leadership.
- Focus groups with: CTCS teams, DMH staff, Family Partners, Providers, Parents/Caregivers, Youth who received CT services.

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## Stakeholder Engagement: Re-design



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## Meeting Schedule

#	Date	Time	Location
1	May 15, Wednesday	10:00-12:00	Framingham Public Library
2	May 29, Wednesday		Rodriquez Auditorium Hadley Building 167 Lyman Street Westboro, MA
3	June 11, Tuesday		
4	June 28, Friday		
5	July 12, Friday		
6	July 24, Wednesday		
7	August 6, Tuesday		
8	August 28, Wednesday		
9	September 13, Friday		
10	September 25, Wednesday		

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## Overview of Meeting Topics

Meeting	Topics
Meeting #2	Continuum
Meeting #3	Family-based Placement / Intensive Foster Care models
Meeting #4	Group Home
Meeting #5	Young Adult Programs
Meeting #6	Clinical Interventions
Meeting #7	Best practices, including Integrating Lived Experience
Meeting #8	Business models (not rates)
Meeting #9	Performance Measures
Meeting #10	Wrap Up

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## General Meeting Agenda

### Recap of prior meeting(s)

#### Topic of the day:

- Data
- Feedback we've received
- Research we've done
- Proposed design features
- Questions for discussion

#### Closing remarks

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## Areas for Feedback

### Focus Areas of Improvement

#### 1. Continuum

2. Group Home

3. Family-based Placement

4. Young Adult Programs

5. Clinical Interventions

6. Best Practices

7. Business Models

8. Performance Measures

- Staffing (e.g., OT, flexibility, emergency response)
- Partnership with placement models including but not limited to Group Homes

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## Areas for Feedback

### Focus Areas of Improvement

1. Continuum
2. Family-based Placement
3. Group Home
4. Young Adult Programs
5. Clinical Interventions
6. Best Practices
7. Business Models
8. Performance Measures

- Occasional need for placement in a non-group setting
- Separate from DCF's foster care system
- What would it take?

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## Areas for Feedback

### Focus Areas of Improvement

1. Continuum
2. Family-based Placement
3. Group Home
4. Young Adult Programs
5. Clinical Interventions
6. Best Practices
7. Business Models
8. Performance Measures

- Clinical specialization / capacity
- Short-term use
- Respite
- MAP/ Nursing

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## Areas for Feedback

### Focus Areas of Improvement

1. Continuum
2. Group Home
3. Family-based Placement
4. Young Adult Programs
5. Clinical Interventions
6. Best Practices
7. Business Models
8. Performance Measures

- Independent Living and Pre-IL
- TAY Group Home
- Stepping Out
- Best practice for supporting transitions to adulthood

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## Areas for Feedback

### Focus Areas of Improvement

1. Continuum
2. Group Home
3. Family-based Placement
4. Young Adult Programs
5. Clinical Interventions
6. Best Practices
7. Business Models
8. Performance Measures

- Enhancing clinical specialty and capacity
- Consider evidence-based programs and emerging innovations

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## Areas for Feedback

### Focus Areas of Improvement

1. Continuum
2. Group Home
3. Family-based Placement
4. Young Adult Programs
5. Clinical Interventions
6. **Best Practices**
7. Business Models
8. Performance Measures

- Integrating Lived Experience
- Family and Youth Advisory Councils
- Staff Development

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## Areas for Feedback

### Focus Areas of Improvement

1. Continuum
2. Group Home
3. Family-based Placement
4. Young Adult Programs
5. Clinical Interventions
6. Best Practices
7. **Business Models**
8. Performance Measures

- Coordinating procurements and awards with DCF
- Continuum / Group Home relationship
- Securing capacity
- Staff Retention
- Flex funds
- Rates will not be a topic of discussion

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## Areas for Feedback

### Focus Areas of Improvement

1. Client Need
2. Movement
3. Staffing Model
4. Care Coordination
5. Enrollment Criteria
6. Community Tenure
7. Fiscal
8. Performance Measures

- Collecting data without imposing burden
- Reasonable metrics of success

## Closing Remarks

- Debrief of Today's Meeting
- Outstanding Questions
- Next Meeting:
  - Date: May 29
  - Topic: Continuum