



## The Building Bridges Initiative

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“The National Building Bridges Initiative has done groundbreaking work to create a framework that enhances partnerships among residential and community based providers, youth and families to improve lives.

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Gary M. Blau, Ph.D.

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# The National Building Bridges Initiative (BBI)

## Introduction and overview

**T**he [Building Bridges Initiative](#) (BBI) was launched in 2006. Its' goal is to strengthen partnerships among families, youth, community and residential providers, youth and family advocates/partners (hereafter referred to as advocates), systems of care stakeholders, and policymakers to improve outcomes for youth and families who receive residential interventions. BBI focuses on aligning practice with research to achieve sustained positive outcomes for children and youth (hereafter referred to as youth), and families, post-residential discharge. BBI identifies and promotes best practices and policies, and provides a framework for states, counties, cities, systems of care communities, residential and community organizations, and advocates to use when implementing these policies and practices.

Massachusetts decided in 2009 to use the BBI framework as the expected approach for all child welfare and mental health licensed and/or contracted residential programs throughout the State. Many other state, county and city licensing/regulatory authorities, and systems of care communities, across the country have also embraced BBI. Each are at different stages of supporting residential providers and their community

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counterparts in their respective geographical areas to operationalize BBI principles into practice. State, county and city licensing/regulatory authorities across the country are also revising and improving regulations, along with fiscal, policy and contracting documents to support improved long-term outcomes for youth and families post-residential discharge.

At the first BBI national Summit in 2006, the [BBI Joint Resolution](#) was developed, with the voices of families, youth and advocates taking the lead. This BBI document articulates the principles of effective practices in residential programs and their community counterparts. As of February 2018, the BBI Joint Resolution has been endorsed by over 130 national organizations and residential and community agencies. BBI's five core principles outlined in the Joint Resolution, which guide the work of BBI, are listed below:

1. Family-driven & youth-guided care
2. Cultural and linguistic competence
3. Clinical excellence & quality standards
4. Accessibility & community involvement
5. Transition planning & services (between settings & from youth to adulthood).

For each of these core principles, BBI emphasizes partnerships, collaboration, integration, coordination, and use of promising, best, evidence-informed and evidence-based practices. Research has documented that the principles and practices of BBI are consistent with those found in the literature

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to support sustained positive outcomes for youth and families post-residential discharge (Blau, Caldwell & Lieberman, 2014). As an example, Walters & Petr (2008) found that shorter lengths of stay, increased family involvement, and stability and support in the community post-discharge are essential for positive outcomes for youth and families served in residential programs.

Although the initial Building Bridges Summit in 2006 focused primarily on residential treatment programs and their community counterparts, the principles and practices of BBI are also relevant for all types of residential and out-of-home programs. For instance, foster care and treatment foster care programs, group homes and residential programs licensed by mental health, child welfare, juvenile justice and education, and hospitals serving youth and their families across the country have found that fully partnering with their community counterparts in operationalizing BBI principles into practice leads to improved outcomes for youth and families post discharge.

The Building Bridges Initiative was initiated by the Substance Abuse and Mental Health Administration (SAMHSA); since that time, BBI has developed strong and strategic partnerships with many national organizations, as well as residential and community organizations, with commitment to the same values and desired outcomes as BBI. The Building Bridges Initiative became a non-profit organization in 2016. BBI has a Board of Directors which handles business issues and a national

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Steering Committee, comprised of national partners, who provide guidance to all BBI activities.

National organizations that have served as partners to BBI include:

- The Annie E. Casey Foundation
- Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services
- Magellan Healthcare, Inc.
- The Institute for Innovation and Implementation, University of Maryland Baltimore
- Family-Run Executive Director Leadership Association (FREDLA)
- National Federation of Families for Children's Mental Health
- Youth M.O.V.E. National, Inc.
- Child Welfare League of America
- Alliance for Strong Families and Healthy Communities
- National Association of Children's Behavioral Health
- Association of Children's Residential Programs
- National Council for Community Behavioral Health
- Wraparound Evaluation and Research Team, University of Washington School of Medicine, Department of Psychiatry and Behavioral Sciences

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Since inception, there have been multiple BBI workgroups (e.g., outcomes, youth/family partnerships, cultural and linguistic competence, and fiscal and policy) that developed documents and engaged in other activities (i.e., developing web-based BBI training programs) to support the field. Additional groups are formed on an as-needed basis to address specific issues (e.g., [Implementing Effective Short-Term Residential Interventions: A Building Bridges Initiative Guide](#); [BBI: Best Practices for Residential Interventions for Youth and their Families: A Resource Guide for Judges and Legal Partners with Involvement in the Children's Dependency Court System](#)).

Families and youth who are current or past consumers of residential interventions, and/or family/youth advocates with lived experience, are integral members of the development of all BBI documents and projects, including training events. The different BBI workgroups work to ensure family and youth voice and feedback are fully integrated into all BBI activities.

BBI also focuses considerable effort on the importance of data and research to guide practice. For example, there is an increasing evidence-base about the importance of practices that operationalize family-driven and youth-guided care (Huefner, Pick, Smith, Stevens, & Mason, 2015; Dalton, 2014; Casey Family Program, 2016; Blau, Caldwell, & Lieberman, 2014). Residential programs that have operationalized BBI principles into practices and track long-term outcomes post-discharge (i.e., one to five years) have documented the importance of all five of BBI's principles (Dalton, 2014; Blau, Caldwell, & Lieberman, 2014; Levison-Johnson & Kohomban,

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2014; Martone, 2017). BBI supported research conducted by Chapin Hall at the University of Chicago (Document in preparation: Building Bridges Initiative Brief: The Feasibility of Post-Residential Discharge Measurement) to evaluate the feasibility of residential programs collecting 6-month post-discharge outcome data. Data and information obtained from the feasibility study provide evidence for the viability of a brief, telephone-administered post-discharge survey with caregivers. This study also lays the groundwork for a larger post-discharge outcomes study that includes linkage to administrative data, baseline data on youth and family functioning, and assessment of the services received in the context of residential interventions.

The Building Bridges Initiative has also worked to identify successful practices used by oversight agencies and residential and community programs across the country that operationalize BBI principles of family-driven and youth-guided care, and cultural and linguistic competence. Please refer to the following sections of this *Resource Guide: Embracing Family-Driven Care, Successfully Working with Family Partners*, and *Giving People a Voice, Choice and Role* for overviews of these principles, as well as for multiple examples of how these principles have been and can be operationalized into practice in all types of out-of-home care and community programs. These documents can inform practice improvement on both the oversight agency and program levels.

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BBI has supported the creation and dissemination of documents to support the field in areas such as: Family-Driven Care; Youth-Guided Care; and Cultural and Linguistic Competence. There are also documents developed to support state, city and county Oversight Agencies in their work to improve sustained positive outcomes post-residential discharge for youth and families. Below are highlights of these documents. Please also refer to the BBI website ([www.buildingbridges4youth.org](http://www.buildingbridges4youth.org)) for numerous additional documents that can support all residential stakeholders, including families and youth, in improving practices. Many documents are available in Spanish; and new documents and/or updates about BBI are added throughout each year.

## Family-driven care

1. [BBI: Engage Us: A Guide Written by Families for Residential Providers](#)
2. [Successfully Engaging Families Formed by Adoption: Strategies for Residential Leaders](#)
3. [BBI: Supporting Siblings When a Brother/Sister is Receiving Residential Interventions](#)
4. [BBI: Finding and Engaging Families for Youth Receiving Residential Interventions: Key Issues, Tips, and Strategies for Residential Leaders](#)



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5. [BBI: A Tip Sheet for Families Considering a Residential Program](#) (Brief)—*also available in Spanish: [Consejos Para Familias que Están Considerando un Programa Residencial](#)*
  6. [BBI: A Tip Sheet for Families Considering a Residential Program](#) (Expanded)—*also available in Spanish: [Consejos Para Familias que Están Considerando un Programa Residencial](#)*

The Family and Youth Tip Sheets were developed by families and youth to provide families and youth considering residential care, or already served in a residential program, with information about best practice expectations in a residential program. The short versions of the Tip Sheets can be given to families or youth by a family or youth advocate or staff, with the advocate or staff taking the time to explain the different parts of the Tip Sheet to them. The longer versions are good to review with small groups of families or youth, with an advocate or staff supporting a fuller discussion of the areas listed.

## Youth-guided care

1. [BBI: Promoting Youth Engagement: What Providers Should Know About Best Practices and Promising Strategies](#)
2. [BBI: Promoting Youth Engagement in Residential Setting: Suggestions for Youth with Lived Experience](#)

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3. [BBI Tip Sheet: Your Life Your Future - Inside Info on the Residential Programs from Youth Who Have Been There](#) (Brief)- *also available in Spanish* - [Tu Vida – Tu Futuro Información Acerca de Programas Residenciales Desde Adentro por Jóvenes que Han Estado Ahí](#)
  4. [BBI Tip Sheet: Your Life Your Future - Inside Info on the Residential Programs from Youth Who Have Been There](#) (Expanded) -*also available in Spanish* - [Tu Vida – Tu Futuro Información acerca de programas residenciales desde adentro por jóvenes que han estado ahí](#)
  5. [BBI: Youth Advisory Council Tip Sheet: Developing and Sustaining a Youth Advisory Council](#)
  6. [BBI Handbook: Peer Youth Advocates in Residential Programs](#), and [Appendices](#)

The Peer Youth Advocate Handbook provides organizations with information and details about hiring, training, supervising and supporting new youth advocates or supporting existing positions. The Appendices provide helpful documents (e.g., job descriptions; training programs; contact information of those who have valuable experience using Peer Youth Advocates successfully).

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## Cultural and linguistic competence

1. [Cultural and Linguistic Competence \(CLC\)](#)

### [Guidelines for Residential Programs](#)

The BBI CLC Guidelines for Residential Programs provides guidance to support residential programs in improving their focus on cultural and linguistic competence. The Guide is extensive; and it is recommended that organizational leaders assign a group of staff, advocates, families and youth to review small sections of the guide to assess how their organization is addressing CLC topic areas. The assessment of strengths and needs can become part of a larger quality improvement process.

2. [BBI Self-Assessment Checklist for Staff of Residential Programs Providing Behavioral Health Services and Supports to Children, Youth, and their Families](#)

3. [BBI CLC Issue Brief](#)

## Oversight Agencies

These documents can assist oversight agencies (e.g., licensing, contracts, and fiscal management) update and align regulations, language and practices.

1. [BBI: Building Consensus on Residential Measures for Outcome and Performance Measures](#)

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2. [BBI: Evaluating and Improving Outcomes for Youth who have Received Residential Services](#)
  3. [BBI Fiscal Strategies](#)
  4. [The Building Bridges Initiative & Child Welfare: A Collaborative Path to Achieve Permanency](#)

It is recommended that stakeholders of residential programs and their community counterparts endorse the [BBI Joint Resolution](#). Benefits to endorsing the Joint Resolution include:

- Publicly identifying one's commitment to operationalizing BBI principles into practice;
- Receiving periodic updates from BBI and SAMHSA's Child, Adolescent & Family Branch Chief;
- Receiving advance copies of new resources to support best practices;
- Participating on national work & task groups;
- Priority invitations to future BBI training events, summits and forums; and
- Enhancing one's knowledge base toward improving outcomes in residential and community programs.

Endorsing the BBI Joint Resolution is easy: simply have the organization leader email Dr. Gary Blau, Chief, SAMHSA's Child, Adolescent and Family Branch ([Gary.Blau@samhsa.hhs.gov](mailto:Gary.Blau@samhsa.hhs.gov)) or Beth Caldwell, BBI Director ([bethanncaldwell@gmail.com](mailto:bethanncaldwell@gmail.com)), or Sherri Hammack, BBI Coordinator ([svhammack@sbcglobal.net](mailto:svhammack@sbcglobal.net)). Agency/association

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endorsements must be sent by the CEO or equivalent, or Board President, and must include the full name and address of the organization endorsing as well as the names and email addresses of those who should be put on the BBI list-serve.

Irrespective of decisions about endorsing the BBI Joint Resolution, anyone can still access BBI information by regularly checking the BBI website ([www.buildingbridges4youth.org](http://www.buildingbridges4youth.org)).

## Implementing BBI principles and practices

As shared above, please refer to the sections of this *Resource Guide on Leadership, Embracing Family-Driven Care, Successfully Working with Family Partners, Giving People Voice, Choice and Role* for information regarding operationalizing the BBI Principles of family-driven and youth-guided care.

Every entity (e.g., state, county, city, systems of care community or residential or community organization) must decide, based on the individual strengths, needs and challenges of their entity, on a plan for how they can improve practice and outcomes for youth and families served by residential programs and their community counterparts. Many entities have started their plan by endorsing the BBI Joint Resolution, and learning more about BBI, family-driven and youth-guided care, and cultural and linguistic competence. All stakeholders can take these first steps by reviewing the

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many different documents and articles on the [BBI website](http://www.buildingbridges4youth.org) ([www.buildingbridges4youth.org](http://www.buildingbridges4youth.org)), as well as listening to the BBI webinars and participating in the nine [BBI web-based training programs](#)—which offer CEUs—listed on the BBI website. The web-based training programs include the following topic areas:

- BBI: Best Practices in the Use of Psychiatric Medications for Youth during Residential Interventions (1.5 CEUs)
- BBI: Cultural & Linguistic Competence (Part 1): Why Does It Matter? (2 CEUs)
- BBI: Cultural & Linguistic Competence (Part 2): Implementation Strategies (2 CEUs)
- BBI: Cultural & Linguistic Competence (Part 3): On a One-to-One Level (1.5 CEUs)
- BBI: First steps for Leaders in Residential Transformation (2 CEUs)
- BBI: Including Family Partners on Your Team (2 CEUs)
- BBI: Pre-hiring, Hiring, Supporting, and Supervising Youth Peer Advocates in Residential Programs (2 CEUs)
- BBI: Successful Strategies for Tracking Long-term Outcomes (1 CEU)
- BBI: Youth-Guided Care for Residential Interventions (2.5 CEUs)

After committing to BBI best practice principles, stakeholders should then decide whether they are able to take initial small steps in their respective organizations (i.e., a residential program can improve the focus on engaging families through staff training and supervision), or if the organization is ready for

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larger steps (e.g., reviewing all policies and program practices against the BBI principles; developing a multi-year strategic plan that includes action steps to obtain data to track long-term outcomes post-residential discharge and to use these data to inform practice).

Many entities find it valuable to conduct a formal or informal assessment of their strengths, needs and challenges and then develop either a simple or comprehensive initial strategic or action plan. [The BBI Self-Assessment Tool](#) (SAT) (available in both English and [Spanish](#)) is an excellent assessment process for residential programs and their community counterparts within specific communities to assess needed components of a strategic plan or action plan. The SAT can be used for small steps or large steps. For instance, Casa Pacifica, a residential program in CA, took a small first step, having only residential leadership and clinical staff complete the SAT. They learned enough about areas needing improvement through this small first step to guide improvements in youth-guided and family-driven care for over a year. They expanded the SAT to staff, families, youth and community partners in the following years.

NFI North is a large multi-service organization in New Hampshire. Their Residential Treatment Center participated in the New Hampshire Permanency Project, using the BBI framework as the foundation. The main objective established by leadership of the residential program was: *"To examine openly and honestly our current implementation of family-driven and youth-guided practices."* This commitment to be open to transforming one's program, based on research reflecting the

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importance of fully engaging and supporting family and youth voice and choice, is an excellent first step to realizing success.

Sometimes entities already know specific areas they would like to improve, or their licensing/regulatory agency directs them to address certain areas (e.g., permanency; family-driven or youth-guided care; tracking long-term outcomes; cultural and linguistic competence). To date, every BBI initiative has been individualized to the unique strengths, needs and challenges of the entity implementing the initiative (e.g., small steps or large steps; first steps of action plan focused on both family-driven and youth-guided care or just family-driven care) and the unique needs of each youth and family served. Below are examples of how transformation has occurred at the state and agency levels.

## Brief summary of a state transformation

**Massachusetts:** After several years of preparation, solicitation of feedback and recommendations, and dedicated effort to redesign residential services for youth and families in the Commonwealth of Massachusetts, the Departments of Mental Health and Children & Family Services re-procured all residential services together in 2013. This major undertaking used the BBI principles, practices, and values as a platform for transformation. These BBI elements were embedded into all program descriptions, standards, and service requirements. This large-scale procurement represents more



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than \$240M worth of annual purchased service and is referred to as “Caring Together.” All Caring Together contracted providers must operationalize the BBI principles, practices and values in their respective services to youth and families served by the Commonwealth. Because of Caring Together, Massachusetts residential and community programs have realized increased use of best practices that align with the research on achieving sustained positive outcomes for youth and families post-residential discharge. Exemplary examples include increased use of peer mentors, family partners and family service leaders, and Occupational Therapists, as well as the expansion of in-home residential services.

## Brief Summary of a Residential Program Transformation

Leaders of any entity (e.g., state; county; program) embarking on an improvement initiative towards better outcomes for youth and families who receive residential interventions, will benefit from increasing their knowledge about BBI principles and practices. For example, Seneca Family of Agencies, in partnership with the state of California and other residential and community program leaders, have evolved and expanded their approach to residential intervention based on research and data.

In 1985, Seneca started a group home service to deliver ‘unconditional care’ to youth and families. Over time, they realized that youth improved in care, but the improvement was

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short-lived and did not transfer to the youth's homes and communities post discharge. Families were not always prepared for their youth's return and often were still experiencing the same stressors that contributed to their child's out of home placement. Seneca recognized that for youth and families to succeed, service had to be rooted in the homes and communities of the youth and families. To accomplish this, they expanded their scope of services to include foster care and an array of community-based services, including services within schools. Seneca's 32 years of experience and expertise in providing residential service has dramatically changed through the years and has moved from the 'residential program is the treatment' to residential interventions that focus on both the family and the youth **in the community**.

As part of the reform efforts in California and Seneca, a specialized permanency-focused residential service was developed that includes enhanced rate supports, along with meaningful engagement of youth, family, friends and community supports to address each youth and family's unique needs. Initial outcomes show very promising permanency outcomes with 0% recidivism for 21 youth enrolled and discharged between January 2017 and January 2018. These preliminary findings support the business and practice shift from managing youths' behaviors within a residential milieu to pragmatically collaborating with youth and families to support successfully living together in the community. This is the true goal of residential interventions (Lyons, 2015; BBI, 2017). Transformation to implement similar practices can be done in

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small steps and in sweeping reform initiatives. What is important is for leaders to embrace and operationalize BBI principles into practice, and use these principles and practices as a foundation for an organizational culture change and/or improvement process.

The Building Bridges Initiative has been driven by stakeholders throughout the country who are committed to best practices and positive outcomes for families and youth served by residential and community interventions. Nearly all work done in developing BBI documents has been because of stakeholders dedicating their valuable time, energy, passion and resources. BBI has provided families, youth, professionals, policymakers, advocates and other stakeholders working in states, counties, cities and residential and community programs with a successful framework to support positive outcomes. And, while there is still much work to be done to develop, implement and evaluate best practices, youth and families across the country served by residential and community programs are experiencing improved outcomes when this work is done well. All stakeholders, whether a family member, youth, advocate, provider or agency staff or policy maker, are welcome to endorse the BBI Joint Resolution, use the different BBI documents to support program and policy improvement efforts, and become an active part of systems transformation in their programs and communities.

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## Contact Information

The Building Bridges Initiative is able to develop contracts with state, county and city oversight agencies, and residential and community programs, to support the development and implementation of practices that are consistent with the research on achieving sustained positive outcomes post-residential discharge for youth and families. For oversight agencies that have already made a commitment to improve residential practices, BBI is sometimes able to offer free technical assistance. Please contact the BBI Director, Beth Caldwell ([bethanncaldwell@gmail.com](mailto:bethanncaldwell@gmail.com)), or the BBI Coordinator, Sherri Hammack ([svhammack@sbcglobal.net](mailto:svhammack@sbcglobal.net)) if you would like to explore developing a contract and/or a specific technical assistance opportunity with BBI.

Contact information for leaders from different states, a county, residential and community programs, and a family and a youth advocate, who are at different stages of transforming residential interventions using BBI principles and practices, can be found below. The Building Bridges Initiative does not have the capacity to verify the accuracy of each leader's reporting of their improvement activities and/or their outcome data. It is possible that greater strides in improvement have been made or that challenges have been experienced in individual states or programs since reporting their improvements and/or their data to BBI; what was reported in 2018 may no longer reflect current program practices or outcomes.

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## Additional resources

Ideas within this chapter were influenced by the resources below.

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The following documents were developed by the Building Bridges Initiative (BBI) and were discussed in this chapter. For additional information on BBI or for more BBI resources, please visit: <http://www.buildingbridges4youth.org/>.

***Family-driven care:***

1. [BBI: Engage Us: A Guide Written by Families for Residential Providers](#)
2. [Successfully Engaging Families Formed by Adoption: Strategies for Residential Leaders](#)
3. [BBI: Supporting Siblings When a Brother/Sister is Receiving Residential Interventions](#)
4. [BBI: Finding and Engaging Families for Youth Receiving Residential Interventions: Key Issues, Tips, and Strategies for Residential Leaders](#)
5. [BBI: A Tip Sheet for Families Considering a Residential Program](#) (Brief)—also available in Spanish: [Consejos Para Familias que Están Considerando un Programa Residencial](#)

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6. [BBI: A Tip Sheet for Families Considering a Residential Program](#) (Expanded)—*also available in Spanish: [Consejos Para Familias que Están Considerando un Programa Residencial](#)*

***Youth-guided care:***

1. [BBI: Promoting Youth Engagement: What Providers Should Know About Best Practices and Promising Strategies](#)
2. [BBI: Promoting Youth Engagement in Residential Setting: Suggestions for Youth with Lived Experience](#)
3. [BBI Tip Sheet: Your Life Your Future - Inside Info on the Residential Programs from Youth Who Have Been There](#) (Brief)—*also available in Spanish: [Tu Vida – Tu Futuro Información Acerca de Programas Residenciales Desde Adentro por Jóvenes que Han Estado Ahí](#)*
4. [BBI Tip Sheet: Your Life Your Future - Inside Info on the Residential Programs from Youth Who Have Been There](#) (Expanded)—*also available in Spanish: [Tu Vida – Tu Futuro Información acerca de programas residenciales desde adentro por jóvenes que han estado ahí](#)*
5. [BBI: Youth Advisory Council Tip Sheet: Developing and Sustaining a Youth Advisory Council](#)
6. [BBI Handbook: Peer Youth Advocates in Residential Programs](#), and [Appendices](#)

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***Cultural and linguistic competence:***

1. [Cultural and Linguistic Competence \(CLC\) Guidelines for Residential Programs](#)
2. [BBI Self-Assessment Checklist for Staff of Residential Programs Providing Behavioral health Services and Supports to Children, Youth, and their Families](#)
3. [BBI CLC Issue Brief](#)

***Oversight agencies:***

1. [BBI: Building Consensus on Residential Measures for Outcome and Performance Measures](#)
2. [BBI: Evaluating and Improving Outcomes for Youth who have Received Residential Services](#)
3. [BBI Fiscal Strategies](#)
4. [The Building Bridges Initiative & Child Welfare: A Collaborative Path to Achieve Permanency](#)

***Other resources:***

1. [Implementing Effective Short-Term Residential Interventions: A Building Bridges Initiative Guide](#)
2. [BBI Best Practices for Residential Interventions for Youth and their Families: A Resource Guide for Judges and Legal Partners with Involvement in the Children's Dependency Court System](#)
3. [The BBI Self-Assessment Tool](#) (SAT) (available in both English and [Spanish](#))
4. [Chapin Hall at the University of Chicago](#)
5. [BBI web-based training programs](#)

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