• The goal of this program is to increase the number of families who develop the skills necessary to maintain a safe, nurturing, and stable family environment. This in turn will reduce the number of youth with behavioral health needs who require out-of-home care.
The Systems of Care Collaborative (SOCC) was formed in 2008. Their mission is: “Transforming systems in partnership to reach the family’s goals-One Family, One Team, One Plan”. SOCC works to coordinate family-driven, community-based, and culturally competent behavioral health services for children, youth, and their families. Members meet monthly to discuss service improvements and increase communication between partnering agencies.

The SOCC was able to implement a two year pilot program (IFSP) offering intensive support and services to families who have significant behavioral health needs, through the financial support of the John T. Vucurevich Foundation. I, as the IFSP Coordinator have the responsibility to lead the Intensive Family Support Team (IFST). I started my job on January 27, 2014

I will, with the support of our Intensive Family Support Team, (IFST) be:

- Assessing each SOCC partner’s capacity of services required by families
- Leading the development of a plan to integrate services provided for families per their self-identified needs and goals
- Developing a plan to facilitate ongoing IFST collaboration and work with families to assess progress and address challenges

The SOCC team, as well as myself, visited Larimer County, Colorado to gain an understanding of their program. This program has significantly improved the level of services to families in crisis and decreased the number of children placed in residential treatment. We will use many of their concepts to model our program.

The IFST Pilot will establish that partnering with families successfully affects family system changes and reduces residential placements.
PROGRAM OUTCOMES

• Child is successfully maintained in the family
• The family is satisfied with the progress of the family as a whole and the child themselves

• Improvements in Functional Status Domains
  • Mental Health
  • Juvenile Justice
  • School Functioning
  • Alcohol and Drug Use
  • Social Support

• Child Assessments
  • Educational success-school attendance and performance improves
  • Behavioral and emotional strengths
  • Improved clinical and functional outcomes-impulse control
PROGRAM OUTCOMES

• Family Assessments
  • More stable living situations
  • Improved attendance at work for caregivers
  • Decreased contacts with law enforcement
  • Family stress reduced
  • Improved social interactions, functional domains, and parenting skills

• Family Demographic Data
  • Other family members achieving success
  • Financial situation improved
WHO ARE MEMBERS OF THE SYSTEMS OF CARE COLLABORATION

- Rapid City Area School District
- Black Hills Children’s Home
- Youth & Family Services
- Lutheran Social Services
- Catholic Social Services
- Lifeways
- Pathways

- Behavior Management Systems
- Department of Social Services Child Protection
- Wellspring
- Division of Community Correction
- Court Services
WHAT SOCC PROVIDES TO THE INTENSIVE FAMILY SUPPORT PROGRAM

• They will work with individual families to divert youth with behavioral health needs from residential placement
• They will coordinate family-driven, community-based, and culturally competent behavioral health services for children, youth, and their families
• Attend monthly meetings with the family to discuss service improvements and increase communication between partnering agencies
EACH FAMILY WILL MEET WITH THE INTENSIVE FAMILY SUPPORT TEAM

• Members of the Team
  • Families (with self-identified needs and goals)
  • SOCC partnering providers
  • IFSP Coordinator (work with families and agencies to assess progress and address challenges)
  • Family Advocate (the initial contact once a family is referred and offers ongoing support)
  • Coaches (to provide basic life skills training, mentoring, and education for families when needed)
“ONE FAMILY, ONE TEAM, ONE PLAN”

• The Intensive Family Support Team addresses family’s needs by utilizing an integrated system of community providers and resources to reduce the need for out-of-home child placement.

• With out-of-home placements significantly reduced, state/county resources for residential treatment will be available to be utilized for the youth and families with the severest need.
OUT-OF-HOME PLACEMENT COST WISE AND STATISTICS

- SD DSS CPS had 167 youth/month average in psychiatric treatment facilities in FY2012, costing $6,842.74/child/month.
- During January-March 2013, Rapid City office reported 51 youth in Psychiatric Residential Treatment, Group Care, and Intensive Residential Treatment (IRT).
- Department of Corrections’ Juvenile Division reported 354.1 youth/day average with $27,496,331. FY13 budget for out-of-home placements ($77,651/child).
- During January-March 2013, 27 children were in residential care in Pennington County

<table>
<thead>
<tr>
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<th>Average Length of Stay</th>
<th>Cost Per Day</th>
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<tbody>
<tr>
<td>Intensive Residential Treatment</td>
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<td>$305</td>
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<tr>
<td>Residential Treatment</td>
<td>13 months</td>
<td>$201</td>
</tr>
<tr>
<td>Group Care</td>
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LOOKING TO THE FUTURE FOR THE PROGRAM

• We plan to identify and serve
  • 6-10 families in year 1 (2014-2015)
  • 15-20 families in year 2 (2015-2016)

• The vision of SOCC is that other community agencies will choose to join the SOCC, and will understand the “One Family, One Team, One Plan” philosophy and focus on how they can be part of a successful family plan

• We hope to create a culture of “non-judgment” of families seeking assistance. The “norm” will be for families in need to seek the services and support they think would help them. Mental health services will be considered as important as seeking care for any other health issues.
PROGRAM GOAL

• The goal of this program is to increase the number of families who develop the skills necessary to maintain a safe, nurturing, and stable family environment. This in turn will reduce the number of youth with behavioral health needs who require out-of-home care.