#### Ocean State Network for Children and Families (OSNCF)

### Rhode Island Care Management Network (RICMN)

# Agenda

- DCYF Budget
- The Impact on Children
- Case Study
- Evidence-Based Practices
- Recommendations for the Future of the System

#### **DCYF Budget**



Source = RI DCYF

#### **Residential Services Spending**



Source = RI DCYF

#### **Residential and Community Expenditures**



#### Decreases in Annual Costs Per Youth

\$14,000.00 \$13,505,76 \$13,500.00 \$13,062.08 \$13,000.00 \$12,500.00 \$12,000.00 \$11,823.29 \$11,363.67 \$11,500.00 \$11,000.00 \$10,500.00 \$10,000.00 2010 2011 2012 2013 \*First year of the System of Care

**Average Cost Per Youth** 

## Case Study



#### Foster Care: The Front Line

• In the struggle to protect vulnerable children like these siblings, foster care is really the front line.

•We need to develop a foster parent recruitment system made of up of public and private partners. With a coordinated effort to expand our pool of available foster parents, we would be able to respond to cases like these siblings' quickly and effectively. DCYF has received a Federal Diligent Recruitment grant, but they cannot tackle this issue alone.

#### Foster Care: The Front Line



Average Daily Reimbursement Rate for Rhode Island Foster Parents

## Case Study



### Sibling-Set Placements

• When we split up foster children from their brothers and sisters, we are taking away the only connection they still have to the people they love.

- National Center for Youth Law

• Efforts should be made to increase the number of sibling-set foster homes. This will lead to better overall outcomes and avoid unnecessary suffering.

• Increasing sibling-set placement capacity will reduce the number of cases that progress further into the System.

## Case Study



#### **Out-of-State Placements**

• The State of Rhode Island does not have specialized, evidence-based residential programs that focus on the challenges that some of our youth present.

• There is an opportunity for an out-of-state project team to develop prescriptive plans to safely bring individual youths back to Rhode Island and make recommendations for program development.

Just because the evidence-based program is in Rhode Island doesn't mean it will cost less.

- Evidence-based practitioner

#### **Budget Reductions to Residential and TFC Services**

There is a need for a system that sets and manages provider rates to match the service needs of RI children and families.

Across-the-board budget cuts to Residential Treatment and Therapeutic Foster Care Services

- July 2009
- July 2011
- February 2012.

### New Evidence-Based Services

- Parenting with Love and Limits (PLL)
- Strengthening Families
- Trauma Focused Cognitive Behavioral Therapy (TF-CBT)
- Alternatives for Families Cognitive Behavioral Therapy (AF-CBT)
- Common Sense Parenting
- Trauma Systems Treatment
- Groden Center LINKS (Family Preservation Program for children with ASD)
- Teen Assertive Community Treatment (TACT)
- Positive Parenting Program (PPP)
- Family Centered Treatment (FCT)

#### Positive Indicators and What We Have Learned

- 82% of children from families receiving community based services remain at home
- Decrease in length of stay for children in emergency shelters
- Children who are receiving Wraparound care have a greater permanency rate
- Successful grant writing efforts by DCYF bring in millions of federal dollars for diligent recruitment Adoption and Trauma Services.
- Based on discharge data, congregate care is not meeting the needs of many children who do not achieve permanency or transition to a less restrictive setting.

#### Recommendations

- Budget and Finance
- Data and IT
- Planning and Evaluation
- Practice and Workforce Development
- Inclusion and Collaboration

# **Budget and Finance Model**

Financing a comprehensive system of care for children, adolescents, and their families is one of the most complex aspects of system reform.

- Toward an Organized System of Care for Rhode Island's Children, Youth and Families January 2003

- Cost Reporting and Rate-Setting System
- Braided Funding
- Insurance and HealthSource RI
- Sustainable Funding Model
- Systematic Review and Revision

#### Statewide Data and IT Capacity Building

- Statewide Software and Infrastructure
- Research other states
- Data Sharing and Transparency
- Tools for shared analytical capacity
- Tools for the front-line workers and front-line service providers
- Real-time Data

#### Statewide Planning and Evaluation

• Review of utility and effectiveness of current consultants

Data collection capacity

• Analysis capacity

• Project management capacity to implement new strategies and services

#### Practice and Workforce Development

• Research capacity on best practices to match current resource needs in RI. (i.e. Muskie Institute at University of Maine, Orono, Child Welfare Institute at University of Illinois-Champaign)

- Increased opportunities for cross-training for DCYF employees and providers
- Increased opportunities for evidence-based practices training

#### Shared Vision

Stakeholders share a set of values and beliefs that guide the development of a true System of Care