Why Child Centered, Family Focused, Community Based....
Hampton Virginia's Approach to Serving Youth and Families

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Hampton Virginia Positive Outcomes
2012 - 2013

- No children placed in residential treatment since April 2007.
- No children placed in group homes since September 2008.
- An 85% reduction in foster care placements since 2002.
- 85% of CSA services are community based interventions. Hampton saved over $600,000 by utilizing community based services in FY 2013.
- All foster care young adults received a high school diploma or GED and/or enrolled in a higher learning program.
- 88% of children reviewed by the Hampton-Newport News Community Services Board (2008) had physical/verbal aggression issues; property destruction; and poor impulse control. All of these youth were supported in their family's homes.

It's the Law in Virginia

Comprehensive Services Act (CSA) of 1992 intended to create a collaborative system of services and funding that is:
• Child Centered
• Family Focused, and
• Community Based
when addressing the strengths and needs of troubled and at risk youth and their families.
Virginia had:

- a significant lack of interagency planning
- an over reliance on inpatient hospitals and residential treatment centers
- disagreements between state and local governments regarding programming and funding for children’s services

A 1990 study by the Virginia Department of Budget and Planning determined that 5,000 children in residential care included many children and adolescents with significant and multiple issues:

- ♦ 89% with emotional or behavioral disorders
- ♦ 77% with school suspensions or expulsions
- ♦ 68% with adjudicated delinquency
- ♦ 58% aggressive or assaulting behaviors
- ♦ 49% alcohol or drug abuse
- ♦ 45% runaways from home or treatment
- ♦ 43% emotionally abused or neglected
- ♦ 28% suicidal or self-injurious
- ♦ 25% physically or sexually abused

Virginia also realized:

- ♦ as 4 different state agency involvement
  of Social Services, Dept. of Juvenile Justice & Dept. of Mental Health
- ♦ there were more then 14,000 cases identified in each of the state agencies that represented no more than 5,000 children
- ♦ 16 different federal and state programs funded the same types of treatment with each funding stream having a different local match
- ♦ residential care was often utilized even when less restrictive community based services would have been sufficient
- ♦ state costs were increasing at an average of 20% each year
In response to the study in 1991, the Governor created the Council on Community Services for Youth and Families, a public-private consortium charged with:

- developing a new service-delivery model and new funding mechanisms
- developing training programs for state and local government staff
- tracking caseloads and expenditures and evaluating the proposed system (Ledford 2001).

Following public hearings being held across the state in the summer of 1991, the Comprehensive Services Act was passed by the 1992 General Assembly.

The Virginia General Assembly set goals for CSA which included:

- Preserve and strengthen families
- Provide services in the least restrictive setting
- Identify children in need of services and intervene early
- Create new services for unmet needs of children and families
- Grant local flexibility and require local accountability
- Encourage public and private partnerships in services delivery
- Increase interagency collaboration and family involvement
Comprehensive Services Act
Block Grant to Localities for Services to
At-Risk Families & Children

Services Act (CSA) was modeled after the National Systems of Care (SOC) philosophy.

A system of care:
- incorporates a broad array of services and supports that is organized into a coordinated network
- integrates care planning and management across multiple levels
- is culturally and linguistically competent and
- builds meaningful partnerships with families and youth at service delivery and policy levels.
Hampton Virginia’s Approach

Snap Shot of 1994

Strengths
• Culture of collaboration
• Acceptance of new CSA philosophy as best for kids and families
• Importance of utilization review
• Willingness to take advantage of new flexibility
• Understanding the value of one FAP Team

Challenges
• Rising costs a concern of the City Manager’s office (crisis)
• Failing kids a concern of staff and the Judges
• Coordinator with a single agency perspective
• Professional experts trump CSA philosophy
• CPMT struggles with service creation issues

Community Based Services in 1994
Youth were in Residential Treatment
Correspondence Between Hampton City Manager and Hampton CPMT in October 1994

City Manager States:

“CPMT needs to develop local options for providing quality services to our youth but at a more reasonable cost.”

The Hampton Service Delivery System

The purpose of budgeting for CSA locally is not to cap spending but rather to require that the money is spent differently.

Hampton Systems of Care 1993 - 2007

“We have each come from a single-agency somewhat specialized approach to providing services for children and families. CSA challenges us to create a new approach, to reinvent the way services are provided.”

DSS Director
October 31, 1994
CPMT Responds with a Vision of the New System

The Traditional Single Agency Approach

- The Traditional Single Agency Approach reviews and accepts community based options at the step before making a residential placement.
- The Traditional Single Agency Approach encourages parents to accept residential placements because community based options are not readily available.
- The Traditional Single Agency Approach continues residential placements beyond the point of significant treatment benefit.
- The Traditional Single Agency Approach states that residential placements are driven by statutory and judicial considerations which are external to CSA teams.

The Collaborative Team Approach

- The New Collaborative Team Approach establishes early discharge dates and rigorously pursues step-down plans.
- The New Collaborative Team Approach creates community based options for specific children that do not now exist.
- The New Collaborative Team Approach offers parents creative community based options for their children and commit to their development.
- The New Collaborative Team Approach states that residential placements are driven by the degree to which we take responsibility for creating alternatives.

The Traditional Government Structure
The “new” Hampton Systems of Care
Government Structure

The Community System
Shared Responsibility for Systems of Care

Youth, Education and Families
Prevention

Comprehensive Services
Individualized Systems of Care

Court Best Practices
Community System Development

“Moving from Knowing to Doing”

- One child at a time
- One FAPT team
- Focus on critical outcome data
- Thorough assessments
- Recognizing families as the experts
- Partnerships with public and private providers
- Leadership
- Child-centered, family-focused, community-based service delivery
- Creative and common sense ideas
- Unconditional Commitment
- The Judge
- Relationship building
- Courage
- Willingness to spend CSA $$ differently
- Taking Action
- Hedgehog Concept + Core Value + Beliefs
THE HEDGEHOG CONCEPT

WHAT YOU ARE DEEPLY PASSIONATE ABOUT

Families

WHAT YOU CAN BE THE BEST IN THE WORLD AT

Strengthening Families

WHAT DRIVES YOUR ECONOMIC ENGINE

Community-Based Services Creation

Hampton Virginia Systems of Care Core Values and Beliefs

- Keeping children and families together is the best possible use of resources.
- Hampton partners with all who can support children and families' successful outcomes.
- Families are the experts about their families.
- At stakeholder groups are accountable for positive outcomes for children and their families at home, school and in the community.
- Child centered, family focused and community based service delivery is the law in Virginia and must be implemented through new practice models.
- Do whatever it takes to support the success of children and families.
- Trying hard is not good enough.

Community Based Services in 2013

This Community Service System was created one child at a time.
A community can not "recreate" Larimer County, Colorado, Hampton, Virginia or any other innovative area.

Communities must create their own Systems of Care based on their strengths and needs driven by outcomes.

So Where Do You Start?
Questions a Community Might Ask

- Where are our children and young adults?
- How are we spending our money?
- Can our community based service providers support children and families with complex needs in our community?
- Where are our creative Systems of Care champions?
- Are our schools ready?

Questions a Community Might Ask

- What do our judges need?
- What model should we use?
- How do we manage liability?
- What outcomes can we, should we, will we measure?
- What is our vision, mission, values and beliefs?

For Hampton
It Was....
One Child at a Time!!!

Questions and Comments