

Minnesota System of Care Expansion Grant

Winona County Progress Summary

In 2017, the Minnesota Department of Human Services (DHS) received a four-year System of Care Expansion Grant from the Substance Abuse and Mental Health Services Administration (SAMHSA) to strengthen the state's children's mental health system. DHS gave subawards to 13 communities (counties, regions, and one tribal nation) to pilot new services and adopt system of care principles. Winona received its subaward from DHS in December 2018. Drawing on insights from an evaluation site visit held with Winona County and its key partners; interviews with three project representatives from Hiawatha Valley Mental Health Center, the provider agency leading work through the grant; as well as administrative data provided by the agency, this summary describes the county's efforts through July 2020.

System of Care efforts in Winona County

Winona County applied for a System of Care (SoC) subaward to develop and implement intensive community-based mental health services (Wraparound or WrapMN), a long-standing gap in the community. Hiawatha Valley Mental Health, a community mental health center that serves Winona County and the surrounding region, is providing services through the grant and looking for ways to integrate system of care values through their delivery of services and broader efforts to improve the local mental health system.

Through their efforts, Winona County and Hiawatha Valley Mental Health Center hope to:

- Increase awareness of services and supports available to youth and families
- Offer and sustain WrapMN, an intensive community-based care coordination process
- Reduce the number and length of youth out-of-home placements

What is a system of care?

A system of care is defined as a spectrum of effective, community-based services and supports for children with mental health needs and their families that is culturally responsive, organized into a coordinated network, and builds meaningful partnerships with families and youth to help youth function better at home, in school, in the community, and throughout life.

Minnesota's System of Care for Children's Mental Health initiative is focused on creating better outcomes for youth and their families in Minnesota by bringing together the work of many partners across the state. The goal of the initiative is to create an accessible and collaborative network of mental health care, grounded in system of care principles, that enables families to connect to the right level of care at the right time and place, which lessens the need for more restrictive and costly interventions.

System of care leadership and governance

Winona County's efforts are led and supported by a small group of four county and provider agency staff who meet at least once a month to discuss service implementation, strategies for increasing awareness of the service, and implementing other required grant deliverables. The project representatives noted that it can be challenging to ensure there is ongoing communication between this planning team and across county agencies and community partners. Through the grant, the team would like to establish a Community Advisory Council that would include caregivers and broader representation by agencies and organizations who work with youth and families to shape the direction of efforts to expand services and support other work taking place through the grant.

Project reach, scope of influence

Implementation efforts in Winona County have focused primarily on building capacity and implementing wraparound services in ways that also demonstrate SoC values. While the leadership group has not focused on system-level policies, one project representative did note that the work they are doing to increase awareness of wraparound and other services available to youth and families can help all sectors be better able to meet the needs of families who live in the county. All representatives wanted to see family choice demonstrated through changes in practice among service providers and professionals in child-serving systems across the entire county.

Even if children don't maybe qualify for Wraparound, just the fact that some of our community members are able to identify that this child and this family need additional help has led to us helping them, even if it's not in a Wraparound way. We're able to say, here's some other services that could be offered to this child and the family that will help them. If Wraparound isn't the right fit right now, here are some things that would be. So at least the kiddos that are being identified as being in need are getting some kind of service.

Key activities and highlighted accomplishments

Integration of system of care values

Through the SoC grant, DHS has emphasized the importance of integrating system of care values into local efforts by providing training and technical assistance and requiring grantees to develop a local cultural and linguistic competence plan focused on three of the National CLAS Standards.¹ Representatives from the Local Partnership Committee described how they see these values being advanced through their work.

- **Family-driven and youth-guided.** The project representatives highlighted a number of ways that, through the WrapMN process, youth and caregivers are in the driver's seat and making the decisions about services and supports they want to access. At this point in the grant, there is not a broader group providing input to decisions about SoC implementation, and so caregivers and youth are not informing system-level planning.

¹ The National Culturally and Linguistically Appropriate Services in Health and Health Care (the National CLAS Standards) were developed by the United States Department of Health and Human Services Office of Minority Health.

One of the project stakeholders hoped that interviews conducted with caregivers and youth will be one way of hearing more about their experiences with services and ways that services can improve.

“Nothing about you without you” is one of the things we tell parents. We’re not going to meet unless you’re there. Same with kiddos. We’re not going to meet without you there – we want you to be part of this. We don’t want to make decisions without you or your input.

- **Culturally responsive.** The project representatives noted that they do have access to interpreter services through Project Fine. One person noted the importance of making sure the interpreters are familiar with the services and programs available in the community, because some of the jargon used or program acronyms may not translate well into other languages. One project representative noted that they are receiving training and information through the grant on ways to better identify and integrate cultural beliefs and values into any work providers are doing with the family. Winona County had not yet made steps to make changes in policies, practices, or broader governance to further support culturally responsive practices.

Cross-sector collaboration

Representatives from the provider agency noted that, through the grant, they are reimbursed by the county for their work, which is a different type of financial relationship than has been in place before. They also noted that they have been intentional about sharing information with the county about future hiring and sharing information about upcoming trainings so that county staff can also be invited to attend. The agency would like to have opportunities to be involved with screening teams or other processes that may lead to more referrals from other county child-serving systems. More frequent communication with the county and consistent information about how grant dollars can and should be allocated would help improve collaboration.

In addition, through the grant, the agency has developed a stronger relationship with DHS and the individuals and organizations that provide training and technical assistance through the grant. One project representative noted that it has been helpful for all agencies providing wraparound through the grant to meet as a cohort to share challenges and successful approaches, and to learn from one another.

Agency staff are also being intentional about reaching local stakeholders who are not formally engaged in SoC implementation efforts. For example, they have established a partnership with local school-linked mental health services through the Winona County Advisory Council and also have been active in sharing information about WrapMN with child protection and juvenile justice agency staff to expand awareness of WrapMN and increase referrals.

WrapMN implementation

Through the grant, DHS contracted with the National Wraparound Implementation Center (NWIC) to provide training and coaching to all SoC grantees to train supervisors and wraparound coordinators to implement a high-fidelity Wraparound model, referred to locally as WrapMN. Winona County contracted with Hiawatha Valley Mental Health to provide WrapMN services to families served through the grant.

Capacity and infrastructure

The WrapMN model that DHS is funding through the grant has a number of training and infrastructure requirements to build the capacity of the staff and agencies providing the service. Hiawatha Valley Mental Health has one WrapMN

supervisor who has been consistently involved since receiving introductory training on the model in October 2019. The agency's first WrapMN care coordinator was also trained at that time. Currently, with 1.5 FTE care coordinators in place, the agency has the capacity to serve between 12 and 16 families at a time. Another aspect of the model is ensuring each agency has the infrastructure, including new policies and practices, in place to support and maintain the service. Hiawatha Valley Mental Health recently moved from the "pre-implementation" set of agency-level capacity-building activities to focus on "implementation" objectives in summer 2020.

Youth and families served

Through the end of September 2020, 13 youth had been referred to and determined eligible to receive WrapMN services. A number of service types made referrals, including: a school-linked or outpatient therapist (N=7); county case manager (N=4); child protection (N=1); and the county's Parent Support and Outreach Program (N=1). Five youth (38%) were known to have had a mental health intervention in a residential setting prior to being referred to services. Two of these youth and three additional youth had been in foster care at some point prior to referral. Seven of the youth who began to receive WrapMN services have discharged. Of these, six families withdrew from services or no longer responded to calls and other communication from the WrapMN care coordinator, while one child moved out of the county. WrapMN is expected to be a 9 to 12 month process, and most families have not yet received services for that long.

All youth and families who receive services are asked to participate in an evaluation where they are interviewed about their experience. Subsequent reports will provide additional descriptive information about youth served and their feedback, as participation in the evaluation increases.

Stakeholder impressions of WrapMN

Project representatives were able to speak to some of the positive changes they've seen through WrapMN. For a number of youth and families, the process has been empowering and helpful in affirming that they are the decision-makers in the room, rather than professionals holding the power. In a few situations, the process has been used to bring foster parents and biological parents to work as a team for the child's benefit. One of the project representatives spoke to the importance of informal supports in the WrapMN process, both in being able to provide assistance, but also in helping the youth and family identify their own strengths. This representative had observed situations where informal supports asked to participate in the WrapMN meeting were unaware that the family needed support and, after hearing the family describe their needs, stepped up to help in new ways. However, another representative noted that some families are very hesitant to seek out support from people in the community.

It's really eye opening to see parents and kiddos actually being involved in their care. For some people, this is the first time they've been part of a provider meeting. That's really sad, yet it's wonderful when ... they have a child and family team meeting and have 10 supports around them Kiddos and parents realize, "Wow - I really do have a team of people who want me to succeed."

Project representatives also recognized the process has not worked for all families. There are some families who have discontinued services abruptly, perhaps because they were feeling overwhelmed or because they weren't seeing progress happen quickly enough. Some parents don't feel they have time to participate in meetings and therapy, or haven't felt comfortable talking about some topics while still building trust within the child and family team. One of the project representatives noted that, despite ongoing outreach, some professionals still think of WrapMN as standard case management and have not referred youth for services.

One of the agency staff described ways that they have tried to make the experience as positive as possible for youth and families. While it has been more difficult to engage younger youth virtually, the WrapMN care coordinators continue to be creative and integrate pictures or games that align with the child's interests.

Additional challenges

Staff and partners most closely involved with WrapMN implementation clearly described the challenges of piloting a new services model in the midst of the COVID-19 global pandemic. Changes in response to the pandemic have impacted how services are delivered, as well as employment and economic stability, social connections, and the educational experience of the youth and families Winona County hoped to reach through the grant. Transitioning to virtual meetings introduced a number of challenges, including family access to technology and provider comfort using virtual facilitation tools.

Within this broader context, Hiawatha Valley Mental Health staff also identified additional service- and system-level challenges that have impacted implementation:

- **Challenges connecting to available community resources.** Although Winona County does have a number of services and supports available, youth, families, and providers may not be aware of these options or have difficulty identifying whom to contact to access a resource. One project representative stated that Winona has started to establish a community hub that makes it easy for families to access a range of services through a single access point. This was seen as a promising approach, with more work needed to make it an accessible and effective option.
- **Concerns about the achievability of outcomes.** Through their local efforts, Winona County ultimately wants to be able to understand the experiences of youth and families and know whether WrapMN helps them reduce the number of youth referred for a residential mental health treatment intervention. Given the relatively small numbers of youth served to date, low participation in caregiver interviews, and length of time needed for successful completion of the WrapMN services, some project representatives were concerned that it may be difficult to evaluate WrapMN's effectiveness before the end of the grant period.
- **Workforce size and skills.** One of the project representatives noted that their ability to meet the needs of youth and families is impacted by the availability of skilled therapists. By not being able to connect youth and families to mental health services in a timely way, mental health systems can worsen and more challenging situations at home and in school can arise. One project representative noted that it can be challenging to involve all professionals in Child and Family Team meetings when therapists' schedules are heavily booked.
- **Unclear expectations of WrapMN and grant deliverables.** The training, supervision, and paperwork requirements of WrapMN were more than expected among the agency representatives and took some time to integrate into practice. The agency representatives noted that having greater clarity of roles and responsibilities between the agency and county in implementation efforts to more broadly advance SoC values in the community from the beginning of the grant also may have changed how the agency approached its work.
- **Uncertain financial mechanisms to sustain WrapMN.** Multiple project representatives shared concerns that the services would not be sustainable beyond the end of the grant period without some type of ongoing financial support or reimbursement mechanism available. One program representative noted that the intensity of the training and supervision would be hard to maintain, but some of what they have learned through WrapMN could be applied to other types of work with youth and families.

Moving forward

The agency representatives interviewed were optimistic about the potential for WrapMN to help them better meet the needs of youth and families. They saw an opportunity to better streamline services as staff from multiple sectors have opportunities to participate in WrapMN Child and Family Team meetings and make changes in how they interact with and support families. Finally, they hoped to reach more families and better understand whether WrapMN is helping reduce the number of youth who receive mental health treatment in residential settings.

I hope we're able to keep children and families together – or at least in the same community together – and with healthy relationships. I hope we can be sustainable past the formal grant cycle.

When asked to describe what success at the end of the grant looked like, the project representatives identified a number of changes they hope to see:

- Youth and families being referred in a timely way for WrapMN from all child-serving systems, including child protection
- Youth being served in the community, rather than in a residential setting
- Continuation and expansion of family-driven and youth-guided practices

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