

# **Shared Decision-Making, Community Needs, and Priority Populations: Finding the Key Bridges**

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[www.cffutures.org](http://www.cffutures.org)

# Collaboration quotes:

Interagency collaborative capacity has an objective and a subjective component: formal agreements, budgets, personnel, accountability, but also *expectations, legitimacy, and trust.*

Eugene Bardach, *Getting Agencies to Work Together*

**“We can’t do the policy thing until we do the relationships thing.”  
Perinatal social worker, Los Angeles**

# It takes two wings to fly the plane

- **Data-driven accountability for results that lead to shared outcomes—what measures of success are we aiming at?**
- **Relationships that build up the trust needed to work across agencies and systems and with the community**
  
- **Data matters**
- **Values also matter**
- **Both need to be in the planning process**



# Data-driven planning

- **What data do we have now?**
- **What data is missing—and what could we get [e.g. co-occurring diagnoses, SEI]?**
- **Which populations overlap: e.g. teen parents and their children; e.g. co-occurring diagnoses for parents in the child welfare system? E.g. 0-2 special education/Part C diagnoses in child welfare substantiated cases?**
- **What can providers and consumers tell us about needs that isn't in the data?**

## **Strategic planning is setting priorities: priorities can be defined in several ways:**

- **Building on strengths—what works**
- **Strengthening weaker programs—what doesn't work**
- **Dosage issues—doing it more intensively**
- **Sustainability issues—doing it at scale instead of yielding to “projectitis”**
- **Highest cost clients**
- **Clients who are growing in number**
- **Media spotlight**
- **Availability of leveraged funding**
- **Risk of losing funding based on non-compliance**
- **Where can we collaborate best—where are the bridges?**

# Where do we put the bridges?

- **Choosing the right bridges is the heart of collaborative work: where do we need better connections?**
- **Where are the key bridges?**
  - the most important handoffs
  - the basic elements where the systems need better connections?
- **The framework of ten elements of collaborative capacity provides a template for assessing where links are strongest and where they need work**





# The Ten Bridges



- Client screening and assessment
- Client engagement and retention
- Services to children
- Building community supports
- Values
- Budgets and program sustainability
- Information systems and outcomes
- Joint accountability and shared outcomes
- Training and staff development
- Links to related agencies

See *Navigating the Pathways* report and National Center website:  
[www.ncsacw.samhsa.gov](http://www.ncsacw.samhsa.gov))

# Options for Shared Decision-making

- A one-time planning process run by MH
- An ongoing planning and assessment process convened by MH but with co-equal participants from many other groups
- Taking the *existing* planning bodies seriously—and working MH issues through all of them in turn:
  - At least eight planning/advisory bodies already exist in most counties\*
- Not inviting them to a MH meeting—going to *theirs*



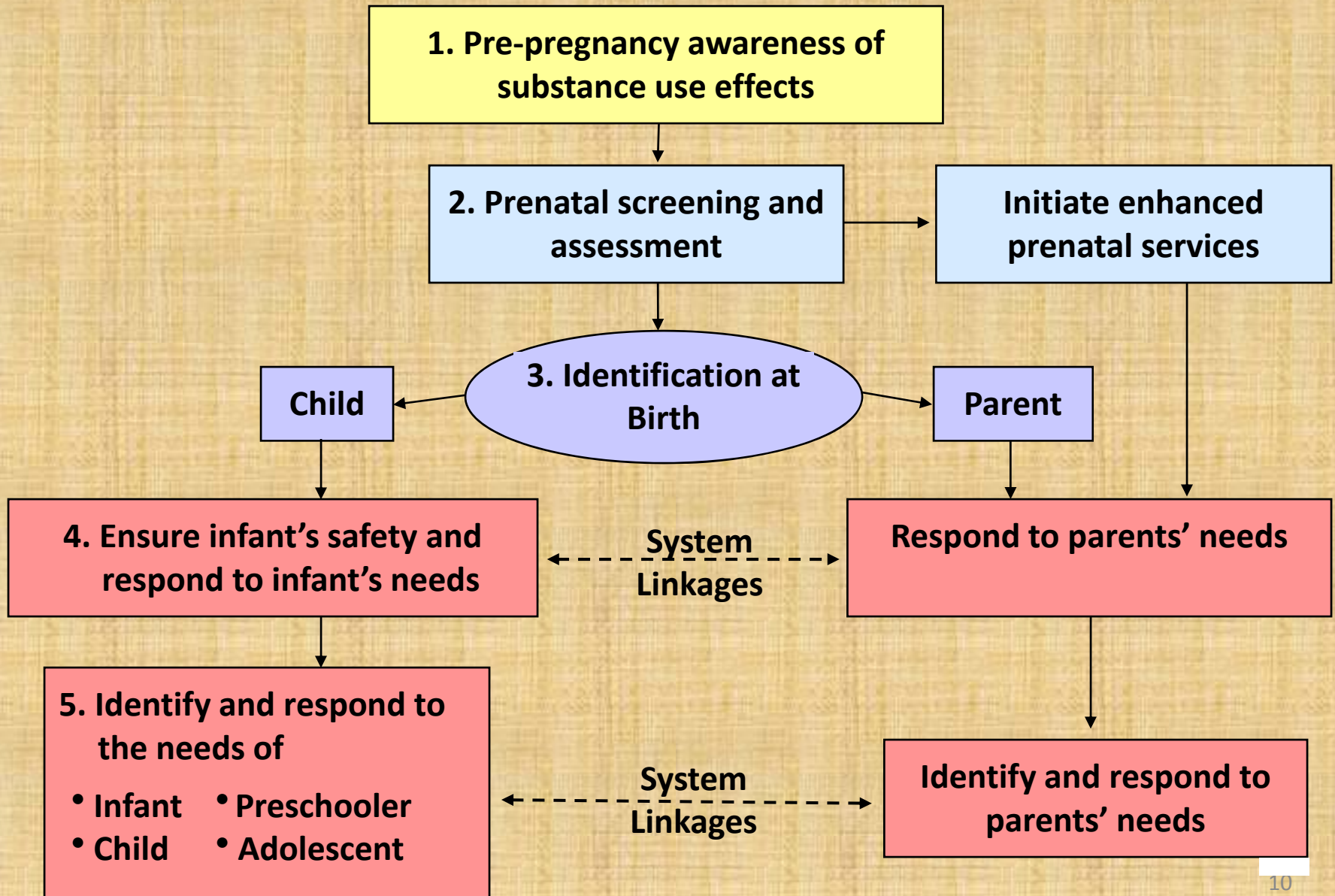
\*First Five, county children's collaborative (40), child care planning council, juvenile justice commission, AOD advisory council, child welfare redesign council, county office of education, perinatal advisory council



# **If planning is integrated, services can be as well**

- **Handoffs over time: categories are rigid and ignore handoffs issues: service integration must be done not in a place but in time,**
  - e.g. 5-level framework for 0-5 planning and delivery
- **“Demonstrate system partnerships, community collaboration, and integration” a transformational strategy**
- **Resist the recurrent bureaucratic disorder of “projectitis”: plan for systems change—not isolated projects**

# Policy and Practice Framework: Five Points of Intervention





If it doesn't get to *shared outcomes*—  
it is all just talk and meetings

*The clues:*

- What's on the partnership's dashboard—  
what gets checked regularly?
- MH outcomes only? Or other systems'  
measures of progress and success?

