

The Blue Ribbon Commission on the Delivery of Services to Children and Families

Criteria & Considerations

for assessing which programs should be in the Department of Children, Youth and Families, and which should be closely aligned and integrated

Introduction

The Blue Ribbon Commission on the Delivery of Services to Children and Families (BRC) has prioritized the importance of alignment and integration of State-run or funded services, programs, policies, practices and resources serving children, youth and families in order for the State to better achieve important outcomes related to child and family well-being.

As part of that work, the BRC tasked its staff team with compiling an inventory of State programs that serve children and families and making an initial assessment as to which programs and staff should:

1. Be included in the new agency;
2. Remain delivered by or housed in other agencies, but be closely aligned and integrated immediately because they address the most significant risk factors for the populations most in need; or
3. Remain delivered by or housed in other agencies, but be aligned and integrated in future years as the State fully transitions to a new service model that better supports child and family well-being through preventative, comprehensive, coordinated and outcome-based intervention strategies under the stewardship of this new department.

Criteria For Inclusion or Immediate Alignment/Integration

- ❖ Include those programs and services currently in DEL and CA.
- ❖ Include those programs and services that serve children and families who are furthest from opportunity and those at greatest risk for negative outcomes based on risk factors that research has shown lead to poorer outcomes.
 - Included programs will serve specific at-risk children and promote educational, developmental, safety or health outcomes.
 - Programs aimed at entire populations, such as managing immunizations and those comprising core elements of another agency, such as public education or healthcare for Medicaid-eligible families, will not be included.
- ❖ Include or align services that provide early intervention and support to strengthen families before crises occur and children become system-involved.
- ❖ Include or align services that will help children stay on an optimal developmental pathway, meeting key milestones in their early development through adulthood, with an emphasis on early brain development and kindergarten-readiness.
- ❖ Include or align services for those children and youth where intervention can help to minimize further or additional system-involvement or harm, particularly at critical transition points such as aging out or re-entry.

- ❖ Include those staff who manage quality assurance and program evaluation for services intended to meet these goals.
- ❖ Align, but do not include, programs and services that meet the above criteria, but should remain in a different agency because there is a strong policy, cost or administrative reason for the service to be integrated in a different manner (e.g., Behavioral Health services in HCA to capture Medicaid opportunities; Office for Youth Homelessness in Commerce to be integrated with other homeless prevention programs; TANF and WIC in ESA to serve large populations, using significant infrastructure integration).

Considerations

- ❖ Ensure that children and families of all races, ethnicities, and cultures have equitable developmental opportunities and outcomes.
- ❖ Ensure there is adherence to American Indian 7.01 Policy and Memoranda of Agreements with Tribal Governments.
- ❖ Clearly articulate the potential benefits and costs to inclusion or integration based on outcomes to be achieved.
- ❖ Consider whether inclusion negatively impacts linkages between other programs (e.g., core services of large agencies providing services to broad groups of the population; basic education in OSPI; preventative health services in DOH).
- ❖ Consider whether inclusion provides a benefit because there is a ‘shared client pool’ or a logical ‘cluster of services’.
- ❖ Maximize effective use of changes in technology and other tools that enhance the cost effectiveness of the new model of providing services through integrating, coordinating or aligning services in ways that don’t require them to be moved ‘under the same roof’ in order to achieve the intended outcomes.
- ❖ Consider the optimal size and span of control for the new agency to accomplish its vision and mission.
- ❖ Consider whether inclusion or alignment will provide the opportunity to enhance partnerships, alignment and coordination with providers delivering services on behalf of the State, at the community level and with tribes, local governments and research institutions.
- ❖ Consider whether inclusion or alignment can offer the opportunity to streamline eligibility and enrollment criteria, processes and access for those in the target population.
- ❖ Consider whether inclusion or alignment can help to provide real-time data about the child and family and make the appropriate portfolio of services available to appropriate providers of services or case managers at the time when it would be most beneficial.