Delaware
Children's
Department

System of Care:

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A Quick Reference Guide for Putting SOC in Action

Think of the Child First!

System of Care Tool Kit Table of Contents

SOC Checklist

Remember: SOC is child-centered and family-focused and the parent is the expert on their child, family and situation.

1) _____ Provide parent information (brochure and talking points)
2) _____ Ask strength-based questions
3) _____ Ask needs-based questions
4) _____ Identify formal supports
5) _____ Identify informal supports
6) _____ Identify formal services
7) _____ Identify informal services

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8) Team meeting:

        a) ___ Allow family to decide where the meeting will be held

        b) ___ Support family in organizing the meeting

        c) ___ Prepare family in advance for the team process

        d) ___ Gather information on concerns/worries of team members before the meeting

        e) ___ Have formal supports been included?

        f) ___ Have informal supports been included?

        g) ___ Have formal services been included?

        h) ___ Have informal services been included?

        i) ___ Does the plan meet the needs of the family?

        j) ___ Does the plan support the goals?

9) ____ Ensure the team plan follows federal, state and court mandates

10) ____ Ensure the team has been sensitive to cultural reality

11) ____ Ensure care is community-based when possible

12) ____ Ensure divisions are working together

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The following talking points will help you explain SOC to families and youth. Add your factual & anecdotal experiences for a more meaningful explanation of SOC.

- Working with different agencies and service providers can be confusing, overwhelming and stressful. In a system of care, agencies work together with you and your family as a team.

- You will be a member of a team that will work together to identify services and supports that will best meet the needs of your child and family.
  - Your child will be a member of the team (unless the child is very young).
  - Other family members may be included on the team as well.

- You are an expert regarding your child and family, including:
  - Strengths of individual family members and the family as whole,
  - Concerns regarding your child or family's situation,
  - What you would like to see change – your goals,
  - What your child and family need in order to reduce or eliminate your needs and concerns and meet your goals.

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- As a member of the SOC team you will be expected to:
  - Provide information regarding your child and family's strengths; your concerns, needs and goals; background information including what works and doesn't work for your child or family.
  - Answer questions honestly, give accurate information about child and family strengths and needs.
  - Request information and ask questions about anything you do not understand.
  - Work with the team to develop plans that meet your child and family's needs.
  - Attend team meetings.
  - Assist your case manager in identifying team members:
    - Including professionals from other agencies and service providers, as well as,
    - People you respect and trust who can support you – (extended family, friends, neighbors, religious leader or anyone who knows your child and is supportive of your family). It is helpful to include someone who knows about services in the community.
  - Follow through on the commitments you make, or seek help when you run into an obstacle.

- The team will work together to write a service plan for your child and family which includes:
  - Goals,
  - Services and supports provided as close to home as possible and
  - Services and supports that match your family's lifestyle and culture.

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- What you can expect:
  - You can expect to hear terms and words you may not know, ask for definitions and explanations.
  - Since system of care is child-centered and family-focused, your entire family may be asked to participate in the services you are offered.
  - There may be waiting lists for some services. Find out how to get help while on a waiting list.
  - Most programs and services have eligibility criteria.
  - We will help you advocate for the services and supports that will help your child and family achieve the goals you set. Keep in mind, not all services selected by you and the team will be available or approved, so we may need to consider other options.

- Case managers and other team members really do want to help your child and family, they want you to achieve your goals.

- And remember, you are your child's best advocate.

Adapted from the Substance Abuse and Mental Health Services Administration's *Family Guide to System of Care for Children With Mental Health Needs*, May 2005.

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Putting SOC Principles in Action

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Let's Get Together...

...to put SOC in Action!

<u>System of Care Principles</u>:

1. Practice is Individualized
2. Services are Appropriate in Type and Duration
3. Care is Child-Centered and Family-Focused
4. Care is Community-Based
5. Care is Culturally Competent
6. Care is Seamless, Within and Across Systems
7. Teams Develop and Manage Care

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Principle 1: Practice is Individualized

1. Create an individualized plan which includes unique identification of strengths, needs, goals and actions.

2. Identify parent, child and family strengths.

3. Use strengths as the foundation for planning – people are more likely to achieve success when they build on a strong base.

4. Identify needs and concerns.

5. Develop goals and actions (with the team) that build on individual and family strengths while addressing needs and concerns.

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Sample questions which can be asked of each family member to find out about strengths:

- What do you do when you spend time together?
- What is important to you? To your family?
- What rules does your family have? Expectations?
- What are some of your family's routines?
- What traditions are important in your family?
- What is a typical day (morning, evening, Saturday, etc) like in your house?
- When things are not going well, how do you deal with the situation?
- What gets you through the day? How do you get by?
- What does your child do that makes you feel proud?
- How do you react when your child makes you proud or does something well?
- What beliefs do you have that provide direction for your family?
- What things are important to you at home and with your family?
- How do you communicate with each other?
- How does your family solve problems?
- What do family members do for fun?
- What are your (your child's) talents?
- What do you enjoy doing?

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Sample questions that can be asked of each family member to find out about needs and concerns:
- What are your concerns regarding your family (child)?
- Why is this of concern to you?
- What happened (has been happening) to create your concern?
- What would you like to see accomplished/changed?
- What do you think your family (child) needs so this concern will disappear?
- How can you/the team meet your needs?
- How does your family determine and prioritize needs? (Together? One person?)
- Does your family agree on the needs and their importance?
- When a family member (especially the youth) has a specific need, are other family members in agreement with and supportive of that need?
  - If no, why isn't everyone in agreement? Is there a way to find common ground?
- Do you (the family) have resources (the things you need) to meet the need?
- Do you have the time and energy to address needs and concerns?
- Do you think this need is worth committing time and energy to addressing?
- What can you reasonably do?
- Do you think the team's suggestions/offered services will help your family to address this need?

Principle 2: Services are Appropriate in Type and Duration

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1. **Think about available services.**
   a. Informal services include:
      - Natural supports to the family, including faith-based leaders, coaches, extended family, a neighbor who helps or is close to the family
      - Naturally occurring events such as a Wednesday night basketball game or club
      - Think outside of the box, you may be surprised what informal services present themselves
   b. Formal services include:
      - Formalized agencies
      - Formalized individuals (i.e. psychologist)
      - Formalized activities (i.e. drug/alcohol classes regularly scheduled)

2. **Screen to identify informal and formal supports that are appropriate.**
   a. The family is a team member and has decision making capability.
   b. Identify the potential challenges to the client and family accessing services.
   c. Identify outcomes and goals to be accomplished.
   d. What service(s) will meet challenges, goals and outcomes?
   e. Couple formal and informal together.

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3. **Monitor for progress towards goals.**
   a. Check with team along the way. Is service(s) meeting challenge, goal or outcome?
   b. Does the plan need modification?
   c. How is success being measured?
   d. When goal has been reached—what's next?
   e. Services need to be for the right period of time.

4. **Remember:**

   a. Families, when asked, report that informal services get them through challenging times, not necessarily the formal services. These remain long after formal supports are gone.

   b. Research shows that the least restrictive approach leads to better outcomes and lower costs.

   c. In SOC the family is the expert on their situation. They have decision making capability around which type of service to use to meet the goal.

Principle 3: Care is Child-Centered and Family-Focused

1. **Stay Focused on the Child and Family.**
   a. Child-Centered means looking at the child holistically (their home, school, physical and mental health, legal situation, spirituality, vocation, etc.).
      - If needs are identified, the family is the first to identify how to meet the needs.
   b. Family-Focused emphasizes the importance of engaging families & caregivers in the planning and decision making process.

2. **Remember Parents & Caregivers are important.**
   a. They add knowledge about the youth and their family.
   b. Their buy-in and involvement increase the likelihood of successful outcomes.

3. **Foster the process by meeting these parent/caregiver needs, which are:**
   a. To be heard.
   b. To have access to decision making and planning process.
   c. To have ownership of the plan.

4. **Identify youth and family strengths to aid in plan development.**
   a. Identify strengths that can be reinforced.
   b. Identify professional resources (crisis and everyday).
   c. Identify informal supports.
   d. Determine how crises are handled and who the family turns to in times of crisis.

5. **Identify youth and family needs to aid in plan development.**
   a. Determine supports and resources that will work for the youth and family.
      - Use youth and family strengths to meet needs in the home and community.
      - Support the family in developing one plan to meet their stated goal.

6. **Remember, families know more about their situation than we do.**

7. **Take these key points into account when working with families:**
   a. State, Federal and Court mandates are non-negotiable, for example:
      - Safety (personal or public) and
      - Court ordered conditions (probation, sentencing, custody, etc).
   b. Work within mandates using a child centered, family focused approach.
   c. Allow youth and families to prioritize their needs.

- Individual family members may have concerns that are more important to them than those identified by the family.
- Focus on the family's plan, unless there is a safety issue.
- Ensure the family takes the lead in identifying needs and how to address them.

8. **Utilize these questions to identify family strengths:**
   a. What do you do when you spend time together?
   b. What rules does your family have?
   c. What traditions are important to your family?
   d. What is a typical day like in your house?
   e. When things are not going well, how do you deal with them?
   f. How do you react when your child makes you proud?
   g. What beliefs do you have that provide direction for your family?
   h. How do you communicate with each other?
   i. How does your family go about solving problems?

9. **Utilize these questions to identify needs and/or concerns:**
   a. What are your current needs? (family and individual)
   b. What are your concerns with your family?

    c.   What do you think will help the concern to disappear?
- Continue with this process to probe for additional needs and concerns.

10. Utilize these questions to identify informal family supports:
    a.   Are you involved with any community-based organizations or activities (faith-based, sports, clubs, dance, etc.)?
    b.   Who is the person you call first when you need help with something? (individual family members may have different answers)
    c.   Who do you (does your family) turn to in times of need?
    d.   Who attends family celebrations?
    e.   Are there programs or activities in your community in which you would like to get involved?
    f.   Are there programs you would be involved in if available in your community?

11. Utilize these questions to identify formal family support systems:
    a.   What services are you (your family) involved with at this time?
    b.   Do you think the service(s) are helpful?
    c.   Which one(s) are you most comfortable with?
    d.   Do you believe the services are working together for your (your child's) best interest?
    e.   Are there services you think would be of benefit that you are not involved with or are not sure exist?

Principle 4 : Care is Community-Based

1. **Community-Based Care means the child and their family are served in school and community settings when clinically and educationally appropriate.**
   a. Serve youth outside of institutions to the extent possible based on their needs and public safety needs.

2. **Families are involved as key stakeholders, whether they are helping tailor the individualized plan of care for their child or helping design, build or maintain our System of Care.**

3. **Families are involved in policy development, care coordination, evaluation, strategic planning, service provision, social marketing and individual and system advocacy.**

4. **Community-based services are important because they keep children in their homes, neighborhood schools and local communities.**
   - This has a positive impact on the well-being of the child and family.
   - Moving, in many cases, may cause stress for an already traumatized child.
   - The child is able to keep critical bonds with friends, family and school.
   - When services are community-based, the work done with the child and family is in the context of where they live.

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- The community (faith-based organizations, nonprofit agencies, neighbors and others) can offer additional positive and informal supports to the child and family – This relieves the burden for you as a case manager.

5. **Questions to ask about System of Care and community-based services:**
   a. Is a broad array of evidence-based and promising practices, informal services and supports available to meet the needs of children and families in the community?
   b. Are the services available to families in their primary language?
   c. Are services available at times and locations convenient to the family?
   d. Is in-home support offered to families?
   e. Is funding being accessed to meet the unique needs of each child and family?
   f. Are all child-serving systems for the community invited to the table and working together on behalf of children and families?
   g. Do child welfare caseworkers and other staff interact with children and families in culturally and linguistically competent ways?
   h. Are caseworkers and other staff culturally sensitive to the location and type of services made available to the child and family?
   i. Is the family routinely seen as one of the child's major resources?

Principle 5: Care is Culturally Competent

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1. **Definitions:**
   a. <u>Culture</u> is defined as the customary beliefs, social norms and material traits of a racial, religious or social group.
      - This encompasses the collective reality of a group of people that forms attitudes and beliefs.
   b. <u>Race</u> is defined as a family, tribe or people belonging to the same stock.
   c. <u>Ethnicity</u> is defined as people grouped together according to common racial, national, tribal, religious, linguistic or cultural origin or background and include:
      - Characteristics which are reinforced over time
      - Long-standing dynamics of thinking, feeling and behaving
      - Dynamics of cultures and ethnicity include beliefs, social norms and material traits

2. **Be culturally aware by:**
   a. Adopting a broader understanding of cultures.
   b. Interacting with individuals from different cultures.
   c. Examining the individual's personal experience.
   d. Being more self aware and understanding how culture shapes your life and attitudes.
   e. Evaluating how your cultural heritage, values and biases may impact families in your caseload.

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3. **Consider cultural differences:**
    a. Language
    b. Social class or socio-economic status
    c. Gender
    d. Sex roles
    e. Sexual orientation
    f. Ethnicity

4. **Understand that:**
    a. All relationships are cross cultural.
    b. Sharing race or ethnicity does not mean that individuals share the same experiences, beliefs or values.
    c. Stereotypes can cloud your ability to see the person as a unique individual.
    d. It is important to ask questions to learn about their experience and culture.
    e. Ethnic identity is an individual's sense of belonging to an ethnic group. One's identification with their ethnic group impacts their sense of self, forms core beliefs and social norms and impacts personality dimensions.

5. **When working with youth in families, it is imperative to:**
    a. Be aware and accepting of differences to foster positive change.
    b. Accept each youth and family as an individual.
    c. Be open to the beliefs of others; don't impose your own beliefs on others.
    d. Understand behavior is relative to its cultural context.
    e. Consider and respect cultural beliefs, traditions and norms during team meetings and service planning.
    f. Ask questions and build rapport to learn about the person, from the person.

Principle 6: Care Is Seamless, Within and Across Systems

1. Interface of services should be invisible to families.
    a. Families are not concerned with who provides or funds services if:
        • the service meets their needs
        • the service is delivered in a timely manner

2. Provide appropriate services based on the individual or family's needs as identified through principle #2.

3. Ensure open communication among all parties, services, department staff and community linkages.

4. Transitioning the youth or family to a new service requires you to:
    a. Ensure a seamless transition
    b. Continue the current service until the new service begins
    c. Hold a service transition meeting to develop new goals

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5. **Offering inter-divisional services requires you and the team to:**
   a. Determine roles and responsibility of each division/representative
   b. Set expectations for service delivery for each division
   c. Effectively collaborate to provide appropriate services
   d. Follow-up to ensure services are appropriate and meet the family's needs

6. **Dealing with external services (outside the department) requires you to:**
   a. Collaborate with service providers
   b. Allow the family to be the lead in arranging for the service (only provide assistance to the family if needed)
   c. Follow-up to ensure services are appropriate and meet the family's needs

Principle 7: Teams Develop and Manage Care

1. Support the family in developing the team.

2. Include informal supports as team members (at least one).
   a. An informal support person is someone the family would like to have at the team meeting to support them. (Extended family, friends, neighbors, church members, community center staff, mentors, etc.) Informal supports usually stick around long after we do, so they are critical.

3. Include formal supports (professionals) working with the child &/or family on the team (school staff, mental health, etc).

4. Support the family in organizing the team. This empowers the family and puts them in the lead to plan for their child and family.
   a. Ask the parent to invite team members to the meeting. Parents should call some of the members, especially the informal support team members.

5. **Allow the family to decide, or participate in the decision, regarding when the meetings will be held.**
   a. Avoid mandating families to appear at a meeting scheduled by professionals.

6. **Work with the family *before* the first meeting to ensure they feel comfortable with the team process and they are prepared.**
   a. Explain the team process and roles of team members (DSCYF worker, parent, others).
   b. Develop a collaborative partnership with the parent by focusing on the importance of parents contributing to child/family decisions.

7. **Gather information from *each* team member about strengths, concerns/worries and the team develops goals together.**
   a. What is everyone concerned about?
   b. What do you need so your concerns will go away?
   c. How can the need be translated into a goal?
   d. Always ask the parent if this goal can be obtained, given their family situation and resources.

References:

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- Dunst, Carl J. (1988). Enabling and Empowering Families: Principles and Guidelines for Practice.
- De La Cancela, V. (1993). An ethical indictment of counseling research and training. Journal of counseling and development: 15, 55-71.
- Lee, C.C. (1989). Who speaks for multicultural counseling. Journal of multicultural counseling: 17, 1-3.
- Leung, F.T.L (1995). Racial and ethnic variations in help seeking attitudes. Handbook of multicultural counseling, p 415-438.
- Margolis, R.L. (1986). Trainings counselors for work with special populations. Journal of counseling and development; 64, 642-644.
- North Carolina System of Care Institute III. (2000). Strength-based service planning. (Co-sponsored by The Children's Mental Health Program of the Jordan Institute for Families and the North Carolina Division of Mental Health, Developmental Disabilities and Substance Abuse Services). Raleigh, NC.
- Pederson, P.B. (1991). Multiculturalism as a generic approach to counseling. Journal of Counseling and Development, 70, p 6-12.
- Pires, Sheila A. (2002). Building a System of Care – A Primer.
- Rotheram, M.J. (1987). Introduction: definitions and perspectives in the study of children's ethnic socialization; Beverly Hills, CA; Sage
- Substance Abuse and Mental Health Services Administration. (May, 2005). Family Guide for Children with Mental Health Needs.

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