

# Are You Ready for Some RBS?

## Providers' Version

Lets say you have a 14 bed group home that is licensed to operate at RCL 12 and you would like to retool it as the foundation of an RBS resource. What will it take? How will you know if you are in a position to make this transformation? This readiness self-assessment guide is designed to help you sort some of these questions out.

The core concepts of RBS reform are straightforward. There are six main requirements:

1. A consistent method for *matching* children and families who have been referred to the system of care with the right blend of services and support, including RBS where appropriate.
2. For those children and families who would benefit from RBS, a *plan of care* that provides a clear sense of the purpose, nature and duration of the intervention and explains how it fits in with the other services and interventions that are a part of the child and family's life.
3. Specific *facility-based services* provided to a child while in an RBS placement that are designed to help reconnect the child with home, school and community as quickly as possible, including family finding and linkage for those children who have become highly disconnected from their family members.
4. Specific *community-based services* provided to the families of children in RBS placement that are designed to help the extended family reconnect emotionally and to help primary care givers acquire the skills, insights and resources necessary to effectively manage their child's ongoing special needs after the child leaves a residential placement.
5. Specific *post-placement services* provided to children, their primary caregivers and their extended families to help solidify and reinforce the strategies developed during the time the child was in placement and insure their effective transference to and implementation in the child's home, school and community.
6. A *management infrastructure* that insures the quality of care provided both in RBS facilities and in the community, provides sufficient and appropriate reimbursement to the organizations and individuals delivering RBS, accurately documents the progress made by individual children and families as well as the overall population being served, and supports continuous improvement in the effectiveness and efficiency of the system.

However, translating these principles into practice requires more depth and details. To make the shift readiness must be evaluated in five ways. Is your program ready philosophically, functionally, programmatically, and fiscally for the change? The following questions are offered to help you explore each of these areas more thoroughly:

## Philosophical Changes

Implementing RBS requires a shift from seeing residential treatment as an end in itself to viewing it as a step along the way to helping children and youth and their families achieve sustained positive life outcomes.

1. To what extent do direct care, supervisory and managing staff in the group home endorse the idea of combining short, intensive stays in residence for the purpose of stabilization and assessment with equally intensive work with families and the community to prepare for transition and to support ongoing stability of the placement?

*All endorse fully      Some endorse, some aren't sure      Many question      Many oppose*

2. To what extent do direct care, supervisory and managing staff endorse the concept that children and youth must form sustained and supportive connections with families or primary caregivers who will remain in of their lives following system involvement in order to achieve long-term positive life outcomes, and that it is the program's responsibility to help make this happen?

*All endorse fully      Some endorse, some aren't sure      Many question      Many oppose*

3. To what extent are direct care, supervisory and managing staff comfortable with working with children and youth and their families across multiple environments – especially with the idea of doing as much or more work in the community and family home as in the group home?

*All endorse fully      Some endorse, some aren't sure      Many question      Many oppose*

4. To what extent are direct care, supervisory and managing staff comfortable with having a far more fluid in-house population, with children or youth rapidly transitioning through the stabilization process, and perhaps returning on several occasions for short restabilizing visits?

*All endorse fully      Some endorse, some aren't sure      Many question      Many oppose*

5. To what extent are direct care, supervisory and managing staff comfortable with greatly increased family involvement, even when families may be difficult to engage or going through tough times themselves? This might mean having families far more present at the facility, putting more efforts into family finding, and using family-centered planning.

*All endorse fully      Some endorse, some aren't sure      Many question      Many oppose*

## Functional Changes

To operate as a RBS unit, dramatic changes are needed in a program's care management systems, its staffing patterns and staff roles, and in its linkages with public referral agencies.

1. To what extent are the case flow and care management systems in your program set up to receive and respond to referrals for immediate stabilization services, develop plans of care that span living environments, and incorporate multiple intervention strategies designed to address needs in these environments?

*Fully prepared*                      *Partially prepared*                      *Beginning to prepare*                      *Unprepared*

2. To what extent do your program's staff positions include individuals to provide all of the resources needed to deliver the full spectrum of RBS services, including: maintaining a welcoming and stabilizing residential milieu; rapidly conducting practical assessments of child strengths and needs; providing evidence-based clinical services well-matched with the needs and goals of the child or youth and his or her family in both the facility and the community; developing linkages with formal and informal community resources, including schools, to assist them in forming a reliable circle of social support for a child or youth and his or her family; coordinating the development and implementation of multi-environmental plans of care; and providing outreach, engagement and advocacy support to insure effective family involvement, comfort, and understanding?

*Fully prepared*                      *Partially prepared*                      *Beginning to prepare*                      *Unprepared*

3. To what extent does your program's staffing pattern address the challenge of delivering interventions in multiple environments so that full and flexible coverage will be available for services provided both in the facility and in the community?

*Fully prepared*                      *Partially prepared*                      *Beginning to prepare*                      *Unprepared*

4. To what extent does your program's staffing pattern address the challenge of continuity of care so that children or youth and their families are able to maintain a consistent and supportive relationship with primary care team regardless of whether an enrolled child or youth is at home, in a community alternative placement, or at home?

*Fully prepared*                      *Partially prepared*                      *Beginning to prepare*                      *Unprepared*

5. To what extent does your linkage with the county agency or agencies who will be making referrals include provisions for ongoing involvement of county case managers in ongoing plan development, authorizations for changes in placement, and regular communication with the courts when there is court involvement?

*Fully prepared*                      *Partially prepared*                      *Beginning to prepare*                      *Unprepared*

6. To what extent is your system for documenting, monitoring and evaluating individual and program activities, child and youth outcomes and contract compliance in place and capable of recording, measuring, analyzing and reporting the information needed for effective quality assurance and improvement?

*Fully prepared*

*Partially prepared*

*Beginning to prepare*

*Unprepared*

### **Programmatic Changes**

To be effective an RBS program will need a well-balanced and flexible array of service options and interventions that are anchored in a consistent and well-structured planning framework that focuses on combining a brief residential stay with extended assistance in achieving family and community reintegration.

1. To what extent is the program ready to shift from operating a long-term residential care program to providing a short-term resource that offers behavioral stabilization, emotional comfort and a foundation for ongoing planning and action?

- *Structural and staffing changes are in place*
- *Plans for these changes have been developed and are ready for implementation*
- *Planning for making these changes is in process*
- *Ready to begin planning*
- *Not ready to begin planning*

2. To what extent are the internal resources necessary to support rapid stabilization, family discovery and engagement, and community care planning in place?

- *Structural and staffing changes are in place*
- *Plans for these changes have been developed and are ready for implementation*
- *Planning for making these changes is in process*
- *Ready to begin planning*
- *Not ready to begin planning*

3. To what extent are the external resources in place that will be needed to help families or primary caregivers prepare for reunification, support a safe and sustained reconnection, assist children and youth with connection and participation with schools and other community activities and programs, and help children or youth and their families build or reinvigorate sustainable informal and formal social support systems?

- *Structural and staffing changes are in place*
- *Plans for these changes have been developed and are ready for implementation*
- *Planning for making these changes is in process*
- *Ready to begin planning*
- *Not ready to begin planning*

4. To what extent are the resources in place to support effective family finding and engagement, including parent advocates who combine personal experience in reconnection with their children who have been highly system involved, and staff trained in identifying, connecting with and supporting disconnected parents and other family members for children and youth who have become separated from natural and sustainable caregivers?

- *Structural and staffing changes are in place*
- *Plans for these changes have been developed and are ready for implementation*
- *Planning for making these changes is in process*
- *Ready to begin planning*
- *Not ready to begin planning*

5. To what extent has a system for multi-domain, multi-environmental, strength-based and family-centered care planning and coordination been developed and staff recruited, trained, hired and supported for implementing this system?

- *Structural and staffing changes are in place*
- *Plans for these changes have been developed and are ready for implementation*
- *Planning for making these changes is in process*
- *Ready to begin planning*
- *Not ready to begin planning*

6. To what extent are resources in place for developing and maintaining linkages and partnerships with schools, formal community service providers, and informal community and neighborhood resources and organizations to assist in developing comprehensive support networks for returning children and youth and their families?

- *Structural and staffing changes are in place*
- *Plans for these changes have been developed and are ready for implementation*
- *Planning for making these changes is in process*
- *Ready to begin planning*
- *Not ready to begin planning*

7. To what extent has flexibility in staffing and resource development and provision been established so that a plan of care can be implemented for each child and youth and his or her family that responds creatively to the specific critical unmet needs that are the driving forces preventing sustained reunification and positive outcomes?

- *Structural and staffing changes are in place*
- *Plans for these changes have been developed and are ready for implementation*
- *Planning for making these changes is in process*
- *Ready to begin planning*
- *Not ready to begin planning*

8. To what extent are evidence-based emotional and behavioral treatment options in place or readily available through a provider network to respond to the specific needs of children or youth and their families as identified through objective, careful and culturally competent clinical assessments?

- *Structural and staffing changes are in place*
- *Plans for these changes have been developed and are ready for implementation*
- *Planning for making these changes is in process*
- *Ready to begin planning*
- *Not ready to begin planning*

### **Fiscal Changes**

Implementing an RBS system is one thing, finding a way to get paid for doing it is quite another. Funding the shift from operating a group home to delivering residentially based services will require new systems for itemization, documentation, invoicing and accountability. These systems will have to be developed with the purchasing agencies and be built in the context of existing federal and state funding streams, but must step beyond their traditional constraints by focusing on accuracy of description and effectiveness of intervention.

From the provider's perspective this will mean becoming much more specific about the nature, purpose and impact of each resource or intervention that is provided to enrolled children or youth and their families. In addition, providers will have to participate in establishing a risk sharing arrangement with purchasing agencies that takes into account the unpredictability and variability of care costs among children and youth with complex needs and their families. Among the many challenges in building a viable fiscal model is the fact that residentially based services span multiple public service systems, each of which pays for purchased care in different ways.

As a new approach, there is no well-established pathway for funding RBS, so during its developmental phase each community will be shaping its own fiscal approach. Two alternative approaches are to either bundle or unbundle funding. Bundled funding will involve setting a case rate that covers all of costs involved in delivering residentially based services for a child or youth and his or her family during a given period of time, regardless of whether the child or youth is in a residential placement or in the community. Unbundled funding will involve itemized invoicing for each element of service that is provided.

Bundled funding offers the advantages of simplicity and a built-in incentive to move youth to the community as quickly as possible, but also presents two challenges: setting a fair case rate and not having a single funding stream that can be accessed for this rate. Unbundled funding offers the advantages of accuracy and transparency, but presents its own challenges: complexity, and the fact that some services, such as parent partners and

family-finding have no obvious funding streams. In practice, communities are likely to develop systems that include some bundling and some unbundling.

Regardless of the fiscal approach taken, an additional issue will be presented to providers – demonstrating effectiveness. A shift is being made to performance-based contracting in all of human services, and this expectation is likely to be placed even more firmly on new service than on traditional services.

For all these reasons, a provider entering into the world of RBS will need to establish a clear, consistent and well-documented business model not only to satisfy the expectations of the purchasing agencies, but also to stay afloat.

1. To what extent does the agency's business model explicitly project the expected costs for each major service and operational component that will be included in the RBS program?

- *All elements have been mapped and costed out*
- *Some elements have been mapped and costed, others are still being explored*
- *We are in the process of developing our business model*
- *We have a general concept for a business model but have not yet begun developing it*
- *We need to develop a business model*

2. To what extent is each of the major cost areas in the agency's business model linked to a specific revenue source?

- *All elements of the model have either a direct or indirect source of support*
- *Most of the key elements are covered and options for the others are being explored*
- *Some of the elements are covered, some are being planned for, some are not yet covered*
- *A few elements are covered, we are in negotiations about some of the others*
- *We need to develop a business model and a plan for supporting it*

3. To what extent has an agreement been reached with the purchasing agencies about what service and operational elements should be included in the RBS program?

- *Full agreement has been reached about what will be offered*
- *Partial agreement on the RBS components, with some elements still being negotiated*
- *We are in the process of developing an agreement about what should be included*
- *We need to begin discussions with the purchasing agencies about what should be included*

4. To what extent has an agreement been reached with the purchasing agencies about how the elements of the RBS program will be invoiced, the amounts that may be billed, the ways in which reimbursement will be made, and the sources that will be used to pay for these services?

- *Full agreement has been reached on what will be provided, how our agency will invoice for these services, how we will be paid, and the sources for funding these payments*
- *Agreement on some of these issues has been reached, some areas are still in negotiation*
- *We are in the process of developing an agreement*
- *We need to begin discussions*

5. To what extent has an agreement been reached with the purchasing agencies about how performance will be measured and incentivized?

- *Full agreement has been reached on the key performance indicators, how they will be measured, the targets for performance, and how achieving these targets will be rewarded*
- *Agreement on some of these issues has been reached, some areas are still in negotiation*
- *We are in the process of developing an agreement*
- *We need to begin discussions*

6. To what extent has an agreement been reached with the purchasing agencies about how risk exposure will be balanced so that the provider is not over-penalized for unexpected and exceptional costs of care that greatly exceed the projected needs for enrolled children and youth and their families, and the purchasing agencies are not in the position of providing funding far in excess of the actual costs of care?

- *Full agreement has been reached on the creation and operation of a shared risk pool or other risk management and balancing mechanism*
- *Agreement on some of these issues has been reached, some areas are still in negotiation*
- *We are in the process of developing an agreement*
- *We need to begin discussions*

7. To what extent has your agency established a system for tracking service delivery, measuring productivity, translating services offered into billable units, and linking those units with an accurate, consistent and reliable system for invoicing the purchasing agencies?

- *A complete service tracking and billing system is in place, staff have been trained in and are comfortable with its use, and we are able to bill with a high degree of accuracy, consistency and reliability*

- *We have developed a service tracking and billing system and are in the process of installing it and training and supporting staff in its use*
- *We are in the process of developing a service tracking and billing system*
- *We need to develop a service tracking and billing system*

8. To what extent has your agency established a system for tracking service impact, measuring outcomes, assuring and improving quality, and estimating cost effectiveness?

- *A complete accountability system is in place, staff have been trained in and are comfortable with its use, and we are able to document positive outcomes with a high degree of accuracy, consistency and reliability*
- *We have developed an accountability system and are in the process of installing it and training and supporting staff in its use*
- *We are in the process of developing an accountability system*
- *We need to develop an accountability system*