Overview of Integrated Family Services (IFS) for the House Human Services Committee

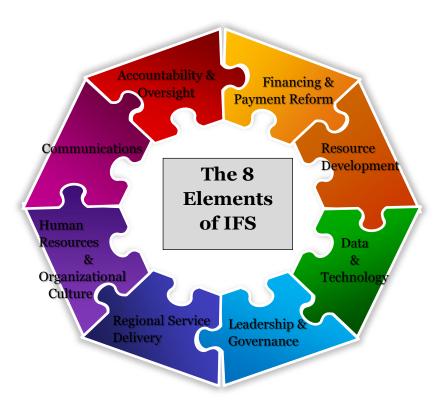


Susan Bartlett, AHS Director of Special Projects Cheryle Bilodeau, AHS~IFS Director Carol Maloney, AHS Systems Integration Director January 23, 2015

Vision: Vermonters work together to ensure all children, youth and families have the resources they need to reach their fullest potential.

Mission: Integrated Family Services brings state government and local communities together to ensure holistic and accountable planning, support and service delivery aimed at meeting the needs of Vermont's children, youth and families.

Integrated Family Services mobilizes our collective resources to secure the best possible future for our children, youth, families and communities. The Agency of Human Services' six departments and the community-based service providers with which AHS partners, operate in silos which make it difficult to meet the needs of Vermont's children, youth and families in a way that is compassionate, efficient and financially responsible. Integrated Family Services changes this by breaking down those silos and shifting strategic planning, practice, language, service delivery and other key aspects of Vermont's human services system so the resources available to children, youth and families better match their needs and are deployed more efficiently.



IFS moves us from talking about programs to talking about supports and services -getting families what they need rather than fitting their needs into a program based on its requirements

IFS supports and promotes innovation

RE-BOOTING IFS

- Integrated Family Services is currently going through a process of "re-booting" what we are and how we operate.
- With a new AHS Director of Systems Integration, a new IFS Director and the Director of Special Projects in place, we have built on the hard work that occurred over the past three years. We have developed a clear vision and mission; decision making process; readiness guidelines for new regions; governance models, a strategic plan and a 2015-2016 work plan.

HOW ARE WE DOING THIS?

- Through Teaming:
 - o IFS Management Team
 - o Senior Leadership Team
 - o Implementation Team
- Work Groups as needed
- Regional Support:
 - Providing increased capacity for technical assistance with the early implementer regions
- Community Readiness:
 - o Supporting regions to prepare for integration
- Data-driven practice
 - o Data will drive decision-making in communities
 - o Results-Based Accountability is embedded into the process

HOW ARE WE PAYING FOR IFS?

- Payment Reform:
 - Maximizing the flexibility of existing dollars to permit their effective use to support children, youth and families.

WHERE IS IFS WORKING?

- There are currently two regions that are early implementers of this new system;
 Addison County and Franklin County.
- Addison implemented IFS nearly three years ago and Franklin began in April
 2014.

Family-focused and team is the theme!!!

IFS uses a team-based decision making process; modeling want we what to see in the communities

WHY WILL THIS EFFORT OF INTEGRATION BE SUCCESSFUL?

- Previous attempts at integration were about moving the chairs around-this time we are knocking down walls and renovating.
- Payment reform is occurring to support the innovative work in regions.
- Results Based Accountability is being integrated into regional outcomes.
- We are assisting with a cultural shift in the way communities team and make decisions.

"Culture eats strategy for breakfast."

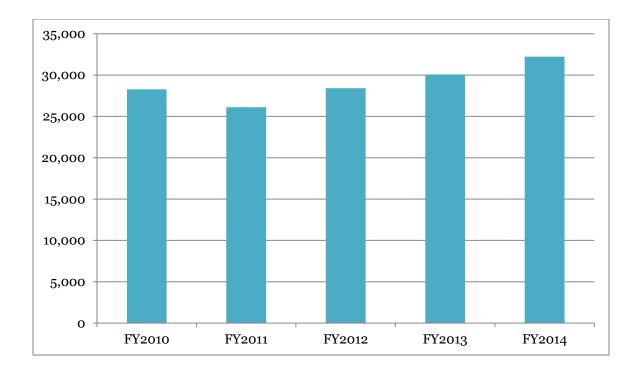
~Peter Drucker, Management Consultant

WHAT ARE THE DATA POINTS TELLING US?

The following data was provided by Addison County, the first IFS implementer.

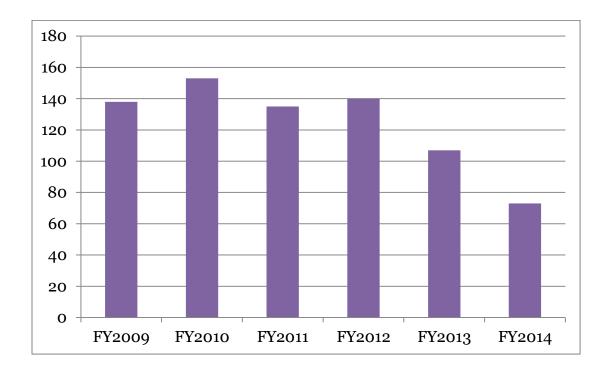
Total Hours of Service Provided

The first year of IFS was FY12, with the same level of funding they have been able to steadily increase the number of service hours they are providing.



Crisis Interventions

Since IFS implementation, there has been a nearly 50% decrease in crisis intervention needed for children because the community now has the flexibility to provide supports and services earlier than they were able to under the traditional fee for service model.



WHAT DOES THIS MEAN FOR FAMILIES?

Before IFS	After IFS	What does this mean for families?
Individual focus only	Focus on healthy children, family, schools, child and family environments including communities	Offered a parenting group in Bristol at NO COST to parents
Eligible only when circumstances became bad enough to qualify for services	Early intervention, treatment and support	"John" –a young man with an extensive history of hospital and residential placement was supported with a skills worker. As a result, he has been able to remain at home with his mother for the last two years, has successfully attended the Teen Center and is now able to move towards greater independence. Prior to IFS, skills workers were only available to 1-3 youth annually who received Medicaid Waiver services. Through IFS, 34 youth received this service during FY 14.
Multiple individual providers with separate systems and standards, intakes, budgets based on separate expectations from each AHS division/department	Unified local network/continuum for direct services Multi-disciplinary team approach available with consistent guidelines in each region	Prior to IFS, services were limited to case management supports for children not on developmental services (DS) waivers. IFS has enabled families to receive full wraparound supports if needed, including home-based services, Applied Behavior Analysis (ABA) consultation, and respite care

NEXT STEPS:

- 1. The IFS Management Team is working with state and regional partners to lay the groundwork for expansion of the IFS model statewide.
- 2. A stakeholder's work group is establishing performance measures for IFS regions using the Results Based Accountability framework.
- 3. Ongoing work is occurring to explore and define what payment reform means for IFS regions and service provision.