

What you need to know about promoting systems integration to serve consumers with multiple needs.

Making Systems Change Happen

- ◆ Define strategies to progress from concepts to reality without loss of momentum.
- ◆ Efficiently mobilize and deliver services that will move systems toward a new, collective vision.

Move From Planning to Action

This issue of *The Change Agent's TOOL BOX* describes various strategies for sustaining the momentum required to make change occur at both the system and service levels.

Even with the right players at the table and the resources identified, systems change initiatives can falter if the change process is not paced comfortably enough to promote ongoing participation and quickly enough to overcome resistance and prevent stagnation. Change activities must also be punctuated with opportunities for both “quick victories” and long-term projects that only yield significant results over time.

Virtually every stakeholder in every system is familiar with the trap of endless processes that produce thick piles of well-intentioned reports but that never really get anything accomplished. It is invariably true that with each new study of a problem, a system learns more about the nature of the issues involved and how to best solve them. This is particularly true where problems and issues cut across multiple systems. There will always be another perspective to

consider. Doing “just one more study” can also become a convenient excuse for avoiding action; resistance to change can be easily cloaked in the robes of research and review. However, at some point it becomes necessary to declare that enough information has been gathered, that no more studies are needed and that the time for concrete action has arrived.

Helping to identify when this point has been reached and to pivot the system from contemplation to action is a key responsibility of the systems change agent. The change agent must not only be skilled at the processes required for bringing stakeholders together and finding common ground for problem definition, but he or she must also know when there has been enough process and discussion and how to move risk-averse or overly cautious players from contemplation to action.

Setting goals and deadlines for taking concrete steps is essential. Stakeholders should agree at the outset on the timelines and event horizons of their collective work, and they should decide in advance on when the mobilization of innovative, integrated services will begin.

Implementation of systems-integration activities will fare better when they are identified as core components of a system's basic business rather than a specialized set of activities that funders and managers will get around to when they finally have the time. In many government and non-profit provider systems, that “extra time” for systems-integration efforts rarely, if ever, materializes.

In short, unless the systems-integration agenda is woven into the basic business agenda, it will probably never happen. Senior system managers may find it useful to place integration activities into the work plans of those who are responsible for program design, implementation and management.

Achieve Early Victories

Promoting integration and systems change is hard work. If all of the goals and objectives identified in an integration work plan envision changes that will not have an impact on the systems involved for a long time, the energy and motivation required to make change happen may not materialize.

Participants in the change process need to know that what they are doing is making a difference. Creating an integration plan that facilitates a series of early “quick victories” can be very helpful in increasing motivation, participation and the energy applied to the change process.



Achieving these early victories requires participants and leaders in the integration initiative to identify programs and tasks that reflect the vision of an integrated approach to problem solving that can be accomplished with relative ease and in a comparatively short period of time. A number of examples from King County, Washington, will help to illustrate these types of smaller, incremental yet highly visible integration interventions.

Mental Health Enhancement for Detoxification Services. Adding mental health staff to the local alcohol and drug detoxification facility greatly increased the willingness and ability of the program to accept persons manifesting a higher level of mental health symptomology—including suicidal ideation. This change was not hard to accomplish and required reassignment of the resources needed for less than three full-time positions. Yet the tangible results were remarkable.

The feasibility of blending resources was demonstrated. Managers in the alcohol and drug system were reassured that systems integration did not mean a “take-over” of the chemical dependency system by its larger mental health sibling; resources and staff were actually moved from the larger to the smaller system. Significant system savings were realized. Suicidal individuals with substance-induced mood disorders who, in the past, would have been inappropriately placed in more expensive psychiatric inpatient settings could now receive less costly and more clinically suitable detoxification services. Linkages at the back end of detox to residential or community-based drug/alcohol treatment could be more easily facilitated.

Jail-Mental Health Information Linkage. Creating an automated data linkage between the jail and the mental health system provided real-time notification

of client incarcerations to mental health case managers. For years local jail officials had complained that case managers in the mental health system were slow to respond to clients who were arrested and booked into the county jail. In reality the mental health providers had no reliable way of knowing when these incarcerations were occurring; few clients call their case managers to report that they have been booked.

Initially, jail officials requested that the mental health system provide them with a list of all “enrolled” mental health clients. Although confidentiality statutes prohibited this type of information exchange, it was possible for the jail to provide the mental health system with

a daily list of all bookings. (This information is a matter of public record.) Utilizing less than two weeks of (expensive) information system staff programming time, the mental health system was able to work with the jail to receive this information electronically, compare the names provided with those in the mental health information system and route electronic notification to the responsible case managers at each provider agency. The result of this modest effort was revolutionary. Case managers were now being informed that clients had been incarcerated within 24 hours of booking.

Cross Agency System Training. Creating a regular opportunity for training on accessing mental health and substance abuse services for youth helped to make the youth treatment system more navigable for all involved. For many years, providers of services to youths in a variety of settings including schools, community centers, youth detention and elsewhere had indicated that the mental health and drug/alcohol treatment systems were complex, difficult to access and not user-friendly to youths and their families.

Working in partnership with multiple systems, the mental health system in King County developed a quarterly training called the Cross Agency System Training (CAST), which is open to all interested parties including providers, advocates, family members and consumers. The 8-hour CAST curriculum is designed to give participants an introduction to the range of services and opportunities available to youth in need of a variety of supports. Presenters from different systems provide information about how their respective systems operate and how to access assistance. Expenses are minimal, enabling the training to be offered free of charge.

NTAC Director's Message

Most of us have had the experience of spending countless hours meeting, planning or consulting to develop a plan of action, only to discover that implementation of the plan never seems to be entirely successful. This issue of *The Change Agent's TOOL BOX* addresses an important issue—how to move from planning to action.

Pay special attention to the discussion of implementation; much more is required than simply following the plan. The Change Agent needs to be flexible and ready to respond to events as they unfold while always keeping an eye on the long-term goals. As this issue points out, system integration “is not an event—or even a series of events—but an ongoing process of change.”

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High Utilizer Staffing. Providing a regular forum for multi-system case conferences and consultations on clients who are using large quantities of the most expensive and/or restrictive services gave King County opportunities to create coordinated case plans for challenging clients and to promote interdisciplinary cross training among multiple disciplines. Consultations are regularly held for frequent users of both detoxification and crisis triage services. When providers from multiple systems

Focus on Long-Term Goals

Even as these early, quick victories are realized and celebrated, it is important to ensure that the longer-range goals of systems integration are not forgotten. The enthusiasm that results from the types of interventions described above can distract policy-makers from larger systemic changes and leave managers and providers with a sense of relief that they have done their job and achieved the ends of integrated services.

information and crisis lines serving persons with mental illness and drug-alcohol problems. It makes little sense to maintain two separate telephone services when a majority of the callers to both systems are experiencing both mental health and substance abuse problems;

- ◆ Merging the mental health and chemical dependency involuntary treatment systems into a single, integrated service. Candidates for involuntary commitment are frequently persons with co-occurring disorders. Forcing them into the narrow commitment criteria or protocols for one or the other system makes little sense;
- ◆ Training and deployment of Crisis Intervention Teams (CIT). Local law enforcement professionals who have received extensive additional training in management of behavioral health issues encountered doing police work are most effective at de-escalating potentially dangerous situations involving persons with behavioral health issues without resorting to use of force or arrests. Once the corps of CIT-trained officers reaches a critical mass, they can be dispatched as needed by 911 operators to respond to situations involving mental illness or chemical dependency; and
- ◆ Implementation of mental health courts. Utilizing the model of “therapeutic jurisprudence,” local misdemeanor courts can seek to promote ongoing treatment for persons with mental illness and co-occurring substance abuse problems. These courts offer an alternative to incarceration and an invitation to treatment strengthened by judicial authority and encouragement.

It is at this point in the process that the key players in each system must be reminded that integration is not an event—or even a series of events—but an ongoing process of change. The familiar systems-integration goals of sharing information, planning, clients and resources are difficult to achieve and require focused energy and effort over extended periods of time.

sit down to review the specific details concerning individual clients, coordinate and consolidate treatment plans and develop a consistent response to client needs across multiple agencies, the impact on client recovery can be dramatic.

Co-Occurring Disorders Breakfast. Offering a monthly breakfast meeting for line staff and clinical supervisors who are serving clients with co-occurring disorders offered an excellent vehicle for sharing accomplishments, frustrations and emerging best practice models in the field. In King County, this breakfast meeting started informally and has become one of the best attended and most popular activities in the systems-integration arena. The breakfasts have attracted the attention of local and state mental health and chemical dependency system managers, who have attended the meetings to learn more about what systems integration actually means and looks like at the direct-service level.

It is at this point that key players in each system must be reminded that integration is not an event—or even a series of events—but an ongoing process of change. The goals of sharing information, planning, clients and resources are difficult to achieve and require focused energy and effort over extended periods of time.

In King County, the work plan for systems integration included not only the short range initiatives such as those described above but also longer range efforts that require greater time and work. Just as successes in the recovery process for persons with co-occurring disorders must be measured in years rather than months, so it is with the systems that must recover from their familiar experiences of siloed, categorical operations. A few examples of longer-range goals for the King County system include:

- ◆ Coordination and merging of the separate 24-hour telephone

Create Strategic Leadership Plans

These types of systemic changes may not only take more time to accomplish, but they may also engender more intensive political and fiscal conflicts. As the work becomes more challenging and potentially more threatening to stakeholders who are worried about the implications of change on their particular system or interests, it is essential for the change agent to maintain the partnerships that have facilitated the change process thus far. It may also be of value to add to and enhance stakeholder participation as systems that have not yet been at the table (but need to be) are identified.

As the systems-integration process moves closer to tangible changes at the structural levels of the system, reluctant or cautious participants often disappear from stakeholder advisory groups and associated planning efforts. This is a dangerous time for the systems-integration initiative.

As key players disappear, it may seem that one or another system is dominating or controlling the change process. Stakeholders who are resistant or reluctant may begin to point fingers at the process itself and suggest that what was envisioned as a partnership among equals to enhance outcomes for persons with co-occurring disorders has become a "takeover" of the service system and its resources by one key player.

If this seems to be happening, it may be useful for the change agent and the key stakeholders to pause in the process to take stock and implement preventive or corrective measures to enable the change process to continue to flourish. Create a "strategic leadership plan" to keep the process and players on track toward the collectively identified vision

The next issue of the *The Change Agent's TOOL BOX* series will focus on evaluation of systems-integration efforts and how these evaluation products are conceptualized, mobilized and supported.

that was established at the outset of the integration initiative. Activities that may be undertaken as part of the leadership plan include:

- ◆ Management or leadership retreats involving senior players from all involved systems that can help to reestablish both the trust and participation necessary for successful systems integration initiatives;
- ◆ Public forums or events at which consumers, family members and advocates have the opportunity to remind funders, planners and providers of the need for a system that makes sense from the perspective of the person with multiple problems; and
- ◆ Conferences or workshops for providers that focus on best practice models for persons with co-occurring disorders.

To be successful, systems-integration processes require ongoing refinement. The type of attention required is defined by the level of maturity the change process has achieved.

The next issue of the *TOOL BOX* will focus on evaluation of systems-integration efforts. Unless clear and positive results are demonstrated, pilot projects and change activities cannot be sustained over time. Evaluation activities must communicate that the energy and resources required to integrate systems is actually worth the time involved.

How these evaluation tools are conceptualized, mobilized and supported is a critical component of a successful systems-change initiative. Evaluations must not only tell stakeholders how well identified systems-change goals are being accomplished but also how much of an impact these changes are having on the clients for whom the system has been created in the first place.

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