The Georgia Interagency Directors Team (IDT): A case study in the successful collaboration of child serving agencies

Jana Pruett
Linda McCall
Christine Doyle
Ann DiGirolamo

Follow this and additional works at: https://scholarworks.gsu.edu/ghpc_materials

Recommended Citation
Pruett, Jana; McCall, Linda; Doyle, Christine; and DiGirolamo, Ann, "The Georgia Interagency Directors Team (IDT): A case study in the successful collaboration of child serving agencies" (2016). GHPC Materials. 83.
https://scholarworks.gsu.edu/ghpc_materials/83

This Article is brought to you for free and open access by the Georgia Health Policy Center at ScholarWorks @ Georgia State University. It has been accepted for inclusion in GHPC Materials by an authorized administrator of ScholarWorks @ Georgia State University. For more information, please contact scholarworks@gsu.edu.
INTRODUCTION

Central to the System of Care (SOC) concept is interagency collaboration. Research on effective collaboration has identified barriers and facilitators to successful interagency collaboration1. However, qualitative information on how a successful collaborative looks and works, and what kinds of success can be achieved as they relate to the concept of SOC is still lacking.

Learning Objectives:
1. Describe concrete steps and specific actions that have contributed to successes realized by the Georgia IDT.
2. Identify lessons learned by the Georgia IDT that may be applicable to the work of other interagency teams.
3. Describe concrete steps and specific actions that have contributed to successes realized by the Georgia IDT.

BACKGROUND

The IDT was created to design, manage, facilitate, and implement an integrated approach to a child and adolescent SOC that informs policy and practice, and shares resources and funding. IDT is made up of 20 representatives from state agencies and non-governmental organizations that serve children with behavioral health needs. Utilizing the principle of stewardship to implement a SOC approach, the team has achieved progress toward several goals in efforts to create a collaborative system on issues, systems, and families for children and families throughout the state.

The work of the IDT both inform and help disseminate information about policy and practice, and they have accomplished past successes in the areas of ADHD and prescription medications, Juvenile Justice Reform, and Transition-Age Youth and Young Adults. Additionally, they have managed to create and adopt a Memorandum of Understanding between the state government agencies and partnerships from IDT have resulted in grant-funded projects.

TOOLS AND METHODS: COLLECTIVE IMPACT AND SYSTEMS THINKING

Five Key Concepts for Collective Impact and the IDT

The IDT has utilized the Collective Impact Framework in its formation and evolution, which is based on five key conditions that distinguish collective impact from other collaborative initiatives.

- To better child and adolescent behavioral health in Georgia, IDT design, manage, and facilitate the implementation of an integrated approach to promote the System of Care
- Data sharing between agencies
- Juvenile Justice Reform (all child-serving agencies)
- Project AWARE (DBHDD, DOE)
- Project LAUNCH (DBHDD, DPI)
- Monthly face-to-face meetings
- The COE serves as the external backbone organization, for guiding vision and strategy, supporting aligned activities, and providing research and evaluation services
- System Mapping Exercise

In order to help the group rethink to collaborative capacity in these areas, the COE brought in a dynamic systems expert to help them frame the important issues in children’s behavioral health in Georgia, analyze the root causes, and consider solutions. A handful of maps were created as a result of the systems mapping session, however the map with the most resonance among group members was the Children’s Behavioral Health Collaborative Systems Map.

The map and resulting discussion among the IDT group made clear to the members that:
- Children served cannot be divided into siloes and are the responsibility of all partners.
- Most agency resources were directed toward the middle and high school years, as opposed to a more
- Effective referral flows for prevention and early interventions that could result in more children staying “on track” and ultimately result in significant cost-savings for the entire system.

KEY ACCOMPLISHMENTS

The IDT has achieved its goals over the past few years in the following focus areas:

- Evidence-based ADHD treatment availability and provision, services and supports for emerging adults, and securing and administering grants to enhance the children’s behavioral health system

ADHD Work
- In order to determine what treatments were being brought to Georgia, the Department of Community Health, the COE, and the CDC partnered to analyze Medicaid claims data. Results revealed Georgia providers were often not utilizing best practices.
- As a result, educational resources and webinars are now available through Georgia’s largest Care Management Entity (CME).
- A blueprint of the IDT’s work can be found in this work and is in the process of designing and conducting a capacity assessment for providing evidence-based and evidence-informed treatment services (i.e., behavioral parent training) to children with disruptive behavior disorders, including ADHD,
- Among Georgia behavioral health providers in Medicaid.

Emerging Adults
- The IDT has created a resource document for providers about youth culture and challenges. Over the course of the year, the document was used and adopted by providers, and later disseminated at conferences and as an informational document.
- The IDT still continues its work in the area of Emerging Adults and is currently exploring ways in which to increase youth movement in both the IDT and with service providers and policy makers.

GRANT AWARDS AND OVERSIGHT

The IDT collaborates with its member agencies to provide federal funding to support child-serving agencies and initiatives in Georgia. Many of the SAMHSA grants awarded to the state to support children’s behavioral health needs have developed through IDT partnerships or require a broad, interdisciplinary oversight team. The IDT serves in the capacity for the following initiatives:

- Project AWARE: The Georgia Department of Education (DOE) was awarded a $1.9 million grant from SAMHSA to implement Project AWARE to build and expand the capacity of state educational agencies to increase awareness of mental health issues among school-age youth.
- Project LAUNCH: The Georgia Department of Public Health (DPI) and Department of Behavioral Health and Developmental Disabilities (DBHDD) were awarded a project LAUNCH grant from SAMHSA. The purpose of Project LAUNCH Georgia is to ensure the social, emotional, and behavioral health among children both in age eight and to promote safe, supportive, and nurturing families residing in Muscogee County, Georgia.
- The SOE Expansion Grant awarded to DBHDD, provides opportunities to further implement infrastructure and services to support a more effective service delivery system for youth with SED and their families. The grant supports the development of interagency structures, agreements, and partnerships for the coordination and financing of behavioral health systems.

CONCLUSIONS

Child-serving agencies in Georgia have a long history of collaboration. Systems thinking has led the group to shift focus to prevention. The most recent utilization of the Collaborative Impact Framework, and a backbone organization in particular, has contributed to the achievement of a number of system goals, and has increased the collaborative capacity of the group.