

Symposium

Using Data to Transform Indiana's Behavioral Health System

Symposium Introduction

Betty A. Walton

The transformation of Indiana's behavioral health system has focused on the availability of quality data on which to base decisions. Lessons learned from a system of care study based on the state's existing database suggested that multiple tools are needed to improve the quality of mental health and addiction services. Specifically, Indiana has implemented the Child and Adolescent Needs and Strength (CANS) assessment (Lyons, 1999), the Consumer Service Review (CSR; Groves, 2007), and the Wraparound Fidelity Index (WFI-4.0; Bruns, et al., 2006) because of their focus on the needs of children and families and their consistency with system of care values.

References

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Groves, Ivor. (2007). *Consumer services review baseline report for children and families and adult services*. Retrieved January 10, 2007, from http://www.in.gov/fssa/files/CSR_Baseline_Report_1.pdf

Chair

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Predictors of Improvement for Children Served in Developing Systems of Care: Lessons for Transformation

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Introduction

Research regarding the effectiveness of systems of care (SOCs) for children with serious emotional disturbances is limited (Burns & Hoagwood, 2002). For example, there have been few studies using comparison groups (Rosenblatt, 1998), and SOC research is limited by issues related to determining the degree of adherence to the system of care framework (i.e., fidelity). The incremental development of local SOC in Indiana provided an opportunity for a quasi-experimental study. This paper focuses on the lessons learned that are relevant to the successful transformation of a behavioral health system.

Method

A state database was used to identify children receiving wraparound services and to identify a sample of similar children receiving usual public mental health services. Improvement in functioning related to psychosocial and contextual factors was measured using the Hoosier Assurance Plan Instrument for Children (HAPI-C; Newman, et al. 2002). Fidelity to the system of care framework was determined based on a developmental assessment (Sprague Efland, Walton & McIntyre, 2005) of emerging SOC's adherence to essential elements. The hypothesis was that children who are served in moderately to highly developed SOC's will have better outcomes than similar children receiving usual services. Logistic regression was used to identify predictors of improved functioning.

Sample

Three hundred eighty six children who were served in Indiana's developing SOC in 2004 were matched with youth served in the public mental health system. The following variables were considered: time between assessments, functioning, age, race, system functioning, living arrangement, gender, and ethnicity.