

**REQUEST FOR APPLICATIONS  
TO WORK WITH OMHSAS**

**On**

**The Development of the Pennsylvania Youth and Family Institute**

**Requested by  
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# PENNSYLVANIA YOUTH AND FAMILY INSTITUTE

## PART 1 GENERAL INFORMATION

### Overview

The Pennsylvania Department of Public Welfare (DPW), Office of Mental Health and Substance Abuse Services (OMHSAS), is seeking applications from Pennsylvania State Universities and community partners committed to working with OMHSAS in the establishment of a Youth and Family Institute. OMHSAS wants to enter into an Intergovernmental Agreement with one (or more) of our state owned, or state affiliated, universities to establish the Pennsylvania Youth and Family Institute beginning in September, 2007. Applications are due June 29, 2007.

The Youth and Family Institute will be the centerpiece of the effort to transform Pennsylvania's Children's Behavioral Health System. The vision of the transformed system is one which will engage and empower child and family teams as the primary determinants of service. The Institute will be responsible for extending the practice of Youth and Family Teams across the Commonwealth. It will do this through the provision and coordination of training and technical assistance to engage and empower youth and their families in the treatment and recovery process.

Pennsylvania has had a long standing commitment to the Child and Adolescent Service System Program (CASSP) started by federal legislation in 1984. In addition to supporting CASSP Coordinators in counties, Pennsylvania has funded the CASSP Institute which has provided training and technical assistance in support of CASSP principles.

The Youth and Family Institute is the next stage in the evolution of the CASSP movement in Pennsylvania. It will replace, but build upon, the work of the CASSP Institute, as Pennsylvania moves to the next level of a child-centered, family focused system.

The activities of the Youth and Family Institute will include:

- Training and certifying youth, family members, and provider/professional staff to serve as facilitators of the Youth and Family Team process;

- Building awareness regarding the effective use of Youth and Family Teams, and the potential application of these practices in treatment that does not involve a formal Youth and Family Team;
- Providing technical assistance to organizations implementing the Youth and Family Team process;
- Monitoring fidelity to evidence-based principles for Youth and Family Team practice utilizing the Wraparound Fidelity Index (WFI-4<sup>1</sup>);
- Conducting an evaluation of outcomes and cost-effectiveness for Youth and Family Teams statewide;
- Promoting ongoing communication between researchers, clinicians, and families implementing the approach; and
- Building awareness, at all levels of the system, through training and presentations to youth, families, and professional staff on the practice and promise of Youth and Family Teams.

## Background

Pennsylvania's commitment to progressive child and family services is long-standing. When the CASSP model was first articulated nationally in the early 1980s, Pennsylvania quickly embraced the underlying concepts and, by 1985, had formally endorsed the model. Family-based and "Wraparound" treatment models informed by CASSP principles were implemented in the 1980s and early 1990s. Now, as research increasingly demonstrates the need to formalize CASSP values through the family-driven processes and practices of Wraparound planning, the Youth and Family Institute will provide a vehicle to transform practice again.

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<sup>1</sup> Bruns, E.J. & Sather, A. (2007) Pilot test of the Wraparound Fidelity Index, Version 4. Presentation at the 20<sup>th</sup> Annual Systems of Care Research Conference, Tampa FL.

The Wraparound Fidelity Index, version 4, has been updated to more fully align with the Phases and Activities of Wraparound as specified by the National Wraparound Initiative (see [www.rtc.pdx.edu/nwi](http://www.rtc.pdx.edu/nwi)). The WFI-4 includes 40-item forms for Wraparound Facilitators, Caregivers, and Team Members, with each of the 10 principles of Wraparound assessed via 4 items. There is also a 32-item Youth form. The WFI-4 is supported by a comprehensive User's Manual, a power point presentation for use in training interviewers, and SPSS and Excel data entry shells. For more information, visit the Wraparound Evaluation and Research Team web site: <http://depts.washington.edu/wrapeval>.

The drafters of the CASSP model have described effective systems of care as “a comprehensive spectrum of mental health and other necessary services, which are organized into a coordinated network to meet the multiple and changing needs of children and adolescents with severe emotional disturbances and their families” (Stroul & Friedman, 1994<sup>2</sup>). This model assumes that the needs of children and families are best served through treatment that occurs in the least restrictive, most natural setting possible. Outcome studies are increasingly demonstrating that structural changes and implementation of evidence-based practices are not, in themselves, sufficient to achieve this vision (e.g., Worthington, et al., 2001<sup>3</sup>). Specifically, research has increasingly demonstrated that family engagement in children’s behavioral health services is central to improving the delivery of services, as well as outcomes of care, for youth and their families.<sup>4,5</sup> There is growing understanding that successful treatment requires child and family engagement in the process and commitment to change.

The growing emphasis on Wraparound planning and fidelity to the Wraparound model has emerged from research demonstrating that outcomes improve when youth and families are actively engaged in core Wraparound processes. The factors underlying successful treatment for children and adolescents has been found to depend on the participation of the child and the family in:

- understanding their strengths and needs,
- planning and implementing services, and
- evaluating the success of those services.<sup>6</sup>

Youth and family participation promotes a focus on the youth and family as the source for recovery. Meaningful youth and family participation supports the development of true partnerships with professionals, the use of natural

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<sup>2</sup> Stroul, B.A. & Friedman, R.M. (1994) A system of care for children and youth with sever emotional disturbances (rev. ed.). Washington DC. Georgetown University Child Development Center, National Technical Assistance Center for Children’s Mental Health.

<sup>3</sup> Worthington, J., Hernandez, M., Friedman B., & Uzzell, D. (2001). Systems of Care: Promising Practices in Children’s Mental Health, 2001 Series, Volume II. Washington, D.C.: Center for Effective Collaboration and Practice, American Institutes for Research.

<sup>4</sup> Knitzer, J. (1993). Children’s mental health policy: Challenging the future. *Journal of Emotional and Behavioral Disorders*, 1(1), 8-16.

<sup>5</sup> Bruns, E.J., Walker, J.S., Adams, J., Miles, P., Osher, T.W., Rast, J., VanDenBerg, J.D. & National Wraparound Initiative Advisory Group. (2004). Toward a better understood and implemented Wraparound. 17th Annual System of Care Research Conference, Tampa FL. March 1, 2004.

<sup>6</sup> Bruns, E.J., Suter, J., Burchard, J.D., Force, M., & Dakan, E. (2003). Fidelity to the Wraparound Process and its Association with Outcomes. In C. Newman, C. Liberton, K. Kutash, & R.M. Friedman (Eds.), *The 15th Annual Research Conference Proceedings: A System of Care for Children’s Mental Health*. Tampa: University of South Florida, Florida Mental Health Institute Research and training Center for Children’s Mental Health.

supports, cultural sensitivity, and responsiveness to each youth and family's changing needs.

However, experience shows that without training and support, many youth, families, and providers are uncertain about the role of families in the treatment process. Pennsylvania is in the process of transforming the way we serve children and youth with behavioral health challenges. The transformation will partner with youth, families, and treatment providers in order to empower youth and families in the treatment process. This transformation process will involve the following:

- The Youth and Family Institute will train and certify youth, family members, and professionals to serve as facilitators of the Youth and Family Team process (utilizing the standards of the National Wraparound Initiative<sup>7</sup>);
- OMHSAS will identify those service and program aspects of the youth and family team process that are Medicaid reimbursable. OMHSAS will work with Behavioral Health Managed Care Organizations (BH-MCOs) in the HealthChoices Program and enrolled providers to identify strategies associated with cost-effective implementation. The Youth and Family Institute will use the service definitions and certification standards developed through this process to help BH-MCOs and providers utilize Medicaid funding to promote the practice;
- The trained facilitators will support Youth and Family Teams as they address complicated, multi-system situations, especially those that involve the potential for out-of-home placement, or other restrictive services;
- Standardized instruments such as the Child and Adolescent Needs and Strength (CANS)<sup>8,9</sup> instrument will be utilized to assist in making determinations of service needs;
- In order to enhance the clinical components of the Youth/Family Team plan, access will be expanded to evidence-based services such as Multisystemic Therapy (MST) and Functional Family Therapy (FFT), as well as promising practices such as Intensive Case Management and Family Based Mental Health Services. These services will be delivered within a treatment culture that upholds engagement and collaboration with youth and families;

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<sup>7</sup> For more information on the National Wraparound Initiative, visit their web site at: [www.rtc.pdx.edu/nwi](http://www.rtc.pdx.edu/nwi).

<sup>8</sup> Lyons, JS, Mintzer, LL, Kisiel, CL, Shallcross, H. (1998). Understanding the mental health needs of children and adolescents in residential treatment. *Professional Psychology: Research and Practice*, 29. 582-

<sup>9</sup> Lyons, John S., Griffin, Gene, Quintenz, Sharon, Jenuwine, Michael, Shasha, Michelle (2003). Clinical and Forensic Outcomes From the Illinois Mental Health Juvenile Justice Initiative. *Psychiatric Services*, 4: 1629-1634.

- The Youth and Family Institute will provide support and technical assistance to those facilitators that are trained and certified;
- The Youth and Family Institute will work with providers and facilitators to monitor fidelity to the Wraparound process using the Wraparound Fidelity Index (WFI-4).

The Youth and Family Team concept is based on the nationally recognized Wraparound Fidelity Index Model. Wraparound is a structured team-based approach for the development of individualized plans that are family driven and youth guided, community-oriented, strengths-based, culturally and linguistically competent. It relies on a balance of formal and informal (or natural) supports to help children and families achieve important outcomes while they remain, whenever possible, in their neighborhoods, schools and homes.<sup>10</sup>

Wraparound approaches have been utilized in Pennsylvania for many years. However, like many states, Pennsylvania has not implemented Wraparound with universal fidelity to the principles of building on youth and family strengths and natural supports. A commitment to the team process needs to begin at the initial request for service, with diligence in forming an inclusive Youth and Family Team and preparing its members, ensuring effective facilitation and communication during team meetings with a strengths based focus, and ensuring team continuity and functioning after and between formal meetings. The Youth and Family Institute will ensure fidelity to the research based principles of the consensus model of Wraparound developed through the National Wraparound Initiative.

<sup>10</sup> Additional information available at:  
(<http://www.rtc.pdx.edu/nwi/Wraparound%20evidence%20recognition%20070316.pdf>)

## **PART 2 Expectations for Development of the Youth and Family Institute**

OMHSAS is seeking to work with one (or more) of the State Universities in Pennsylvania to establish and develop the Youth and Family Institute. The entity selected must demonstrate extensive collaboration with youth and family members in the design and implementation of this initiative. The collaboration can include working with established organizations, with informal groups, or with knowledgeable youth and family representatives.

In addition to collaboration in developing the proposal, there must be assurance that there will be an Advisory Board for the Youth and Family Institute. This Advisory Board shall be composed of one third youth, one third family members and one third professionals (such as staff from provider agencies, staff from the BH-MCOs and County Mental Health Programs).

Annual state funding of approximately \$500,000 will be available to support the staff and operating costs of the Institute. Additional funds from OMHSAS will be available for special projects such as testing and certification of Family Based Mental Health Services staff, sponsorship of the biennial Interagency Children's Conference, and other projects requested by OMHSAS. The Commonwealth intends to enter into a five year agreement to support the Youth and Family Institute, with annual reviews. Start up is expected to begin in September, 2007.

Funding is available for a Director, several youth and family trainers, evaluation staffing, and administrative and financial support. Preference for staff positions should be given to individuals who have personal experience with children's behavioral health services. Efforts are also expected to support the DPW commitment to providing employment opportunities to former recipients of Public Assistance and to minority applicants.

Training for staff of the Youth and Family Institute must be in conjunction with the NWI, which is affiliated with the Portland University Research and Training Center. The NWI engages national experts in a process of defining standards and compiling specific strategies for conducting high-quality Wraparound. The NWI website offers contacts and recommendations for identifying and selecting technical assistance providers:  
(<http://www.rtc.pdx.edu/nwi/NWIConsultants.htm>).

### **PART 3 WORK STATEMENT**

Applications are to be presented in accordance with the following order. OMHSAS will consider applications that address the expectations identified in Part 2 of this RFP, as well as all of the following components.

1. Identify the applicant and describe the organizational structure, including those individuals responsible for management of the Intergovernmental Agreement between the entity and the Commonwealth. Describe arrangements with partnering organizations. Describe the collaboration with youth and family members in the design of this initiative.
2. Describe the role of the Advisory Board. If the names of individuals expected to participate are known, these should be included, along with a brief description of their qualifications. If names are not available, the qualifications of potential Advisory Board members should be identified.
3. Identify the proposed staffing arrangement; showing how the expectations delineated in Part 2 are met.
4. Describe the proposed training and support that will be provided for staff of the Youth and Family Institute to ground their understanding of the NWI model.
5. Describe the means for accomplishing the following major aspects of the Youth and Family Institute:

a) Public Education on the Youth and Family Team (Wraparound) Model:

Describe how the Youth and Family Institute will provide public information through such means as a website, publications, and presentations to advance understanding throughout Pennsylvania's child-serving system regarding Wraparound values, principles and implementation factors. The public information is designed to create collaborative partnerships with families and youth, improve practice and delineate the necessary organization supports for successful Wraparound implementation.

b) Wraparound Practitioner Certificate Program:

Describe how the Youth and Family Institute will provide specific training for individuals, especially youth and family members, interested in receiving certification and working as Wraparound facilitators. Standards for the certification program are expected

to be developed through multiple versions over time and eventually will need to incorporate guidance from OMHSAS regarding future criteria developed for Medicaid reimbursement of Wraparound planning and Youth and Family Teams. The Youth and Family Institute will be expected to develop an initial certification program for Youth and Family Team Facilitators, drawing on current research and existing certification programs as models. For example, the University of Maryland Certificate requirements include successful completion of the Wraparound Training Series, 12 hours of coaching / supervision and skill observation reviews to ensure that the individual has attained the necessary skills to facilitate high-fidelity Wraparound.<sup>11</sup>

c) Wraparound Coaching:

Describe the plan to insure the transfer of learning to team facilitators to ensure the capacity for internalizing the attitudes, knowledge, and skills necessary for Wraparound implementation. In other states, on-site and telephone coaching is done utilizing Wraparound Fidelity Monitoring Coaching Tools. Examples of coaching topics include Building Partnership, Successful Facilitation of Teams, Visions and Strengths for Youth and Families, and Review of Youth and Family Plans and Crisis Plans.

d) Wraparound Fidelity Monitoring

Describe how the Youth and Family Institute will utilize the Wraparound Fidelity Index (WFI-4) to monitor the nature of the Wraparound process that an individual family receives. The WFI-4 was designed to assess adherence to essential elements of Wraparound as described by the NWI.

The WFI is conducted through brief, confidential telephone or face-to-face interviews with four types of respondents: caregivers, youth (11 years of age or older), Wraparound facilitators, and team members. The process is strongest when the unique perspectives of these four respondent types together inform how Wraparound is being implemented.

<sup>11</sup> Information on the University of Maryland certification standards can be found at: <http://medschool.umaryland.edu/innovations/staff.asp>

6. Technical Assistance

Describe how the Youth and Family Institute will provide technical assistance to youth organizations, family organizations, provider agencies, county organizations, BH-MCOs, and others in support of Youth and Family Teams, and in support of the application of the principles to situations that do not require the use of formal Youth and Family Teams.

7. Other Training

Describe potential for the provision of additional training to support implementation of Youth and Family Teams in Pennsylvania, or other related training, as resources permit. OMHSAS is committed to working with the Institute to identify resources to address the broader range of training needs of the children's behavioral health workforce.

8. Maintain Data Base

Describe how the Youth and Family Institute will develop and keep current a listing of all individuals who have been certified as Wraparound Facilitators, results of fidelity monitoring, outcome monitoring, and program evaluation, and provide that information when requested.

9. Evaluation Plan

Describe how evaluation will be done to measure progress toward OMHSAS Objectives. Evaluation can be either through staff capacity, or by contracting for the expertise. Evaluation is required to monitor fidelity to Wraparound principles, implementation of evidence-based and promising practices, and the use of standard outcome measurement (using tools such as the CANS).

10. Budget

Describe how the available funds, as well as any other funds, or other resources, identified by the Contractor, will be allocated. It is anticipated that office equipment, supplies, etc. will be transferred from the CASSP Institute, so the budget does not need to show expenses for these items.

## **Submission Date**

Applications are due by 5:00 pm Friday, June 29, 2007.

This Request for Applications, as well as any additional information related to this request will be posted on the DPW website.

Questions can be submitted to:

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DPW OMHSAS

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## **PART 4 CRITERIA for SELECTION**

### **RESPONSIVENESS TO REQUIREMENTS**

To be eligible for selection, an application must be:

- a. Received in accordance with established timeline; and
- b. Properly signed by an official authorized to bind the applicant.

With the exception of these requirements, in its sole discretion, OMHSAS may accept a proposal, which does not conform to a requirement of this request.

### **EVALUATION OF PROPOSAL**

All qualifying applications will be reviewed and evaluated by a committee selected by the Commonwealth. The committee will include youth, family members, and professionals. The Request for Application (RFA) Evaluation Committee will submit its findings to the Deputy Secretary of OMHSAS. Notification will be made to the applicant whose proposal is determined to be the most advantageous to the Commonwealth. OMHSAS may choose to negotiate with one or several applicants to arrange for the best possible agreement.

The following criteria will be used in evaluating each application:

A. **Organizational Commitment and Capacity.** The focus will be on the conceptual framework of the proposal and on organizational strengths for implementing the program consistent with the commitment to youth and families. The inclusion of additional resources by the Applicant will also be considered under this criterion.

B. **Involvement of Youth and Families.** This indicator will examine the role of youth representatives and family representatives in the design of the proposal, its implementation, and the proposed evaluation processes.

C. **Soundness of Approach.** This indicator will assess whether the application is completely responsive to all specifications and requirements contained in the Work Statement (Part 3), and if it appears to meet DPW objectives. Evaluation of the soundness of the approach will take into account all information provided by the applicant, including letters of support or endorsement.

## **BUDGET**

Budget Proposals will be subject to the evaluation process as identified below:

- a. The Committee will analyze the budget to determine if clarification is needed and if proposed budgets are within the available funds.
- b. Proposals which include additional funds identified by the applicant will be evaluated for their benefit to the Commonwealth, as well as their ability to meet or exceed the intentions of this request.

## **PART 4 CALENDAR**

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|--------------------|-----------------------------|
| 1. May 11, 2007    | Release of request          |
| 2. June 29, 2007   | Proposal due                |
| 3. July 31, 2007   | Decision expected           |
| 4. August, 2007    | Intergovernmental Agreement |
| 5. September, 2007 | Start-up                    |