

REGIONAL PLANNING CONSORTIUMS

CHILDREN & FAMILIES SUBCOMMITTEE

KICKOFF MEETING





REGIONAL PLANNING CONSORTIUMS

CHILDREN & FAMILIES KICKOFF AGENDA

- **Welcome / Introductions**
- **Recognition of State Partners**
- **RPC Overview (101)**
- **Children and Families Subcommittee Overview and Structure**
- **Next Steps**
- **Questions/Answers**



REGIONAL PLANNING CONSORTIUMS

RECOGNITION OF STATE PARTNERS



**Department
of Health**



**Office of
Mental Health**

**Office of Alcoholism and
Substance Abuse Services**



**Office of Children
and Family Services**



REGIONAL PLANNING CONSORTIUMS

RPC 101 – WHAT IS AN RPC?



REGIONAL PLANNING CONSORTIUM

INITIATIVE SUMMARY

A Regional Planning Consortium (RPC) is a board including regional representation from: community based organizations, healthcare providers, children & families, peers, county mental health and Managed Care Organizations (MCOs).

There will be 1 RPC in each of the 11 regions across New York State.

FOUNDATION: Each region will experience unique challenges and opportunities as the behavioral health transition to managed care occurs. These challenges require in person dialogue and collaboration to resolve.



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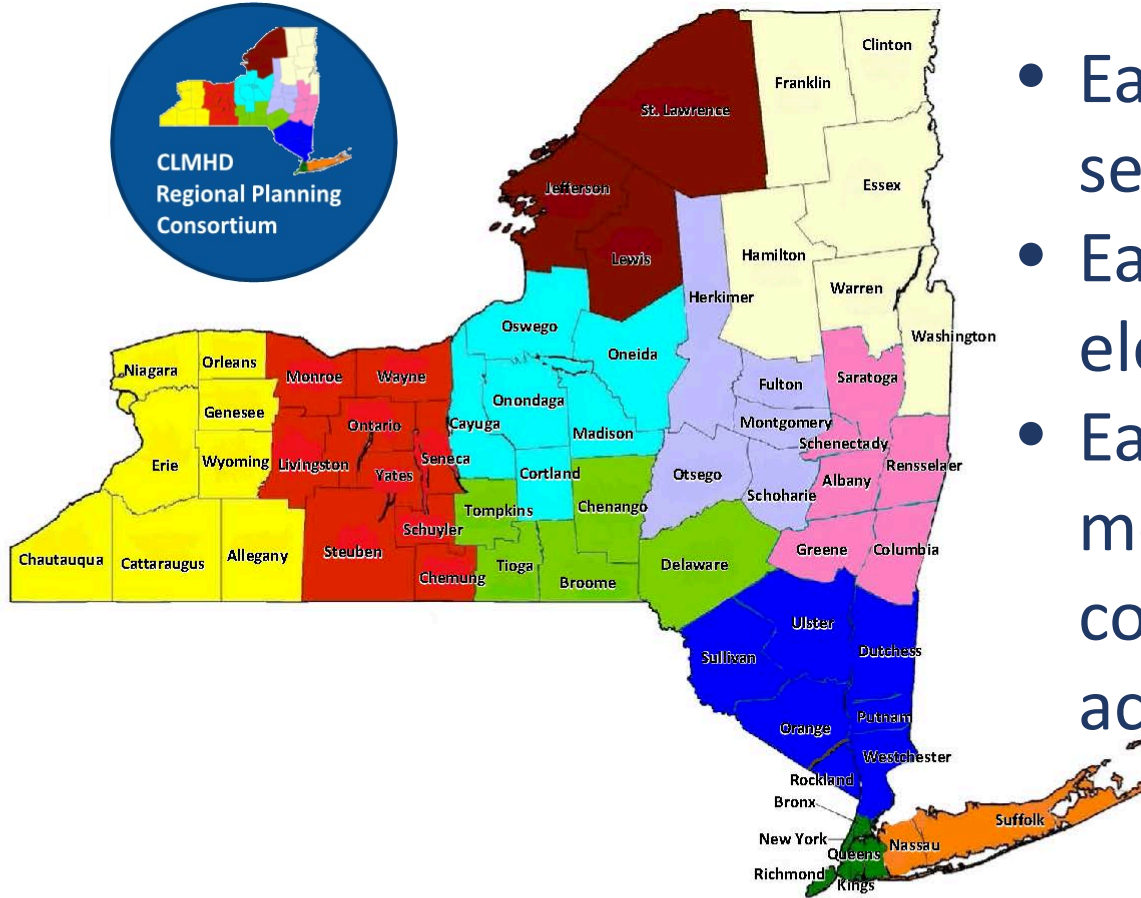
AUTHORITY & SUPPORT

AUTHORITY: The Regional Planning Consortia derive their authority from New York State's 1115 Waiver approved by Centers for Medicare & Medicaid Services (CMS) approved. The 1115 Waiver application includes the RPC as a specific component of New York's implementation of Medicaid Managed Care.

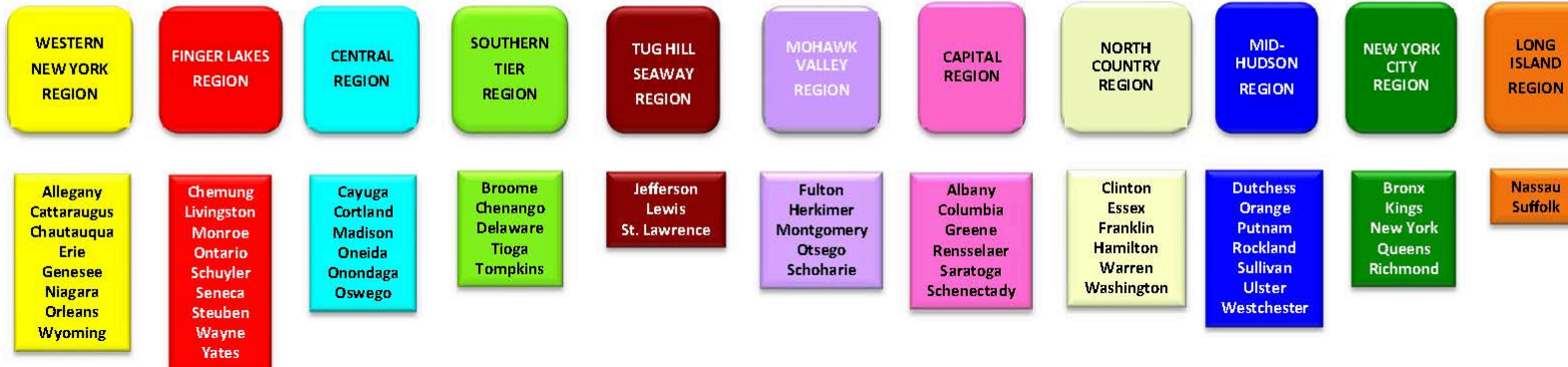
STATE GOVERNMENT SUPPORT: The RPC has partnered with NYS DOH, NYS OMH, NYS OASAS and NYS OCFS.

PLAN PARTICIPATION: Each of the MCO's working within Medicaid Managed Care are participating in the RPCs.

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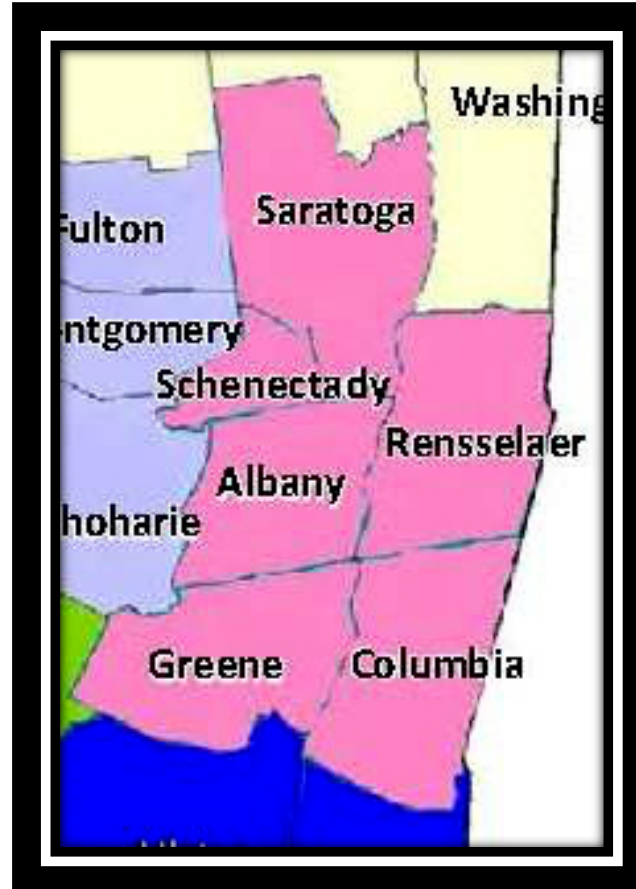
- Each region's board has been seated.
- Each region's Co-Chairs have been elected to facilitate the RPC.
- Each region has a dedicated staff member responsible for coordinating the region's board activities.





CAPITAL REGION - RPC

Albany, Schenectady, Rensselaer, Greene, Saratoga & Columbia Counties





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CAPITAL REGION RPC CO-CHAIRS

Katherine Alonge-Coons, Director of Community Services, Rensselaer County

&

Robert Holtz, VP of Behavioral Health, Capital District Physicians Health Plan



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PURPOSE & OBJECTIVES

The purpose of the RPC is to:

“The RPC will work closely with State agencies to guide behavioral health policy in the region, problem solve regional service delivery challenges, and recommend priorities for reinvestment of Medicaid savings.”

- The RPC will **work collaboratively to resolve issues** related to access, network adequacy and quality of care occurring in the region around the behavioral health transformation agenda (specifically Medicaid Managed Care) and;
- The RPC will **strengthen the regional voice** when communicating concerns to the state partners and;
- The RPC will **act as an information exchange** and a place where people can come to get updates on the health and behavioral health transformation agenda.



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STRUCTURE

In each region, the RPC is comprised of:

- **county mental health directors**
- **community-based providers,**
- **children, youth & families, and peers**
- **managed care organizations in the region**
- **hospital and health system providers (HH Leads, FQHC's)**
- **state field office staff**
- **key partners (PHIPs, PPS, LDSS and LHD)**



REGIONAL PLANNING CONSORTIUMS

STRUCTURE & FUNCTION

FUNCTION: The RPC formulates an issues agenda, uses data to inform their discussions, collaborates together and resolves the issues identified within their region.

ACCESS: RPC Board Meetings are open to the public.

FREQUENCY: The board will come together on a quarterly basis. The RPC Board closely resembles a steering committee.

COLLABORATION: Within each RPC, there will be work groups known as multi-stakeholder ‘subcommittees’.



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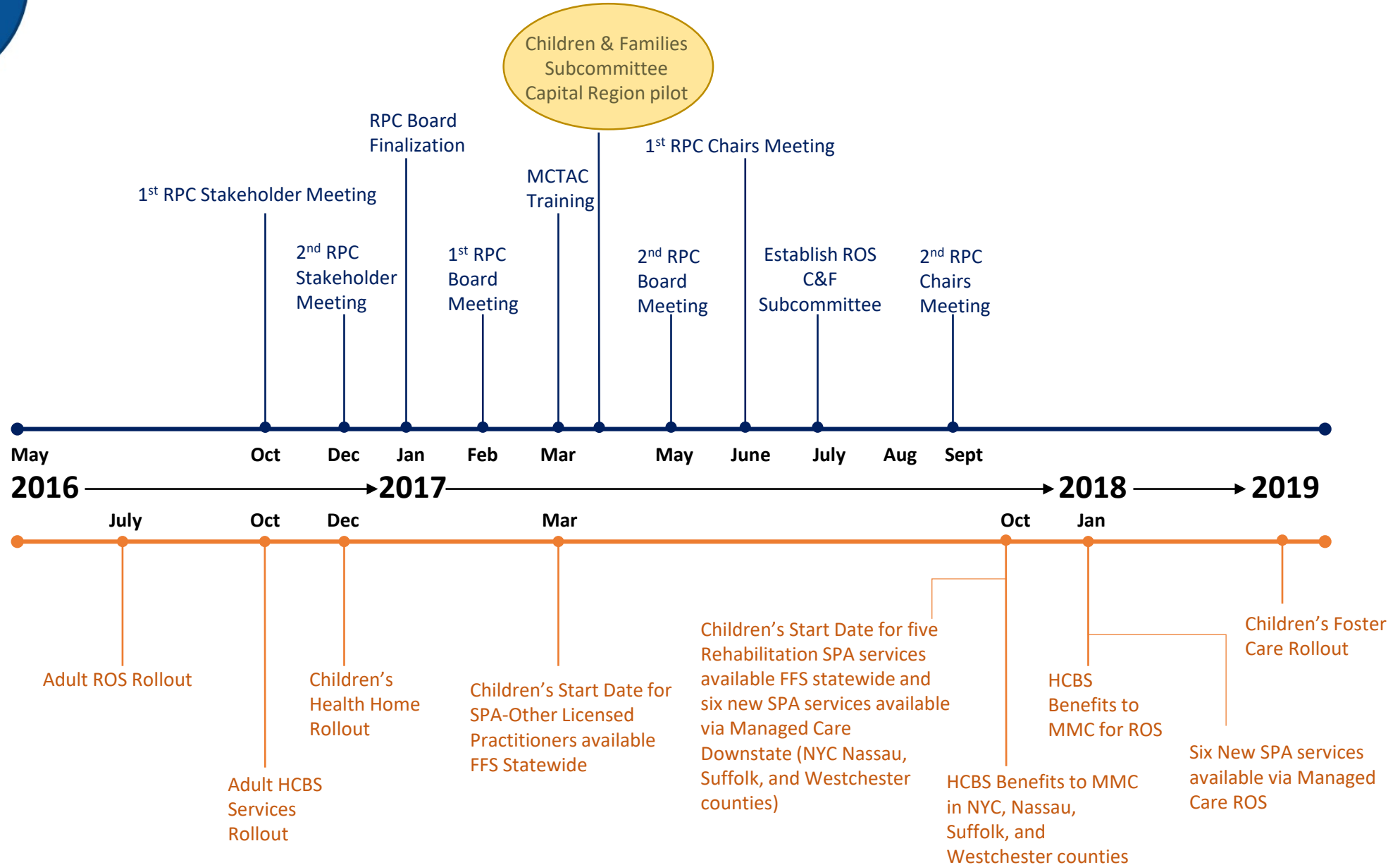
MULTI-STAKEHOLDER SUBCOMMITTEES

- In each RPC there will be various multi-stakeholder subcommittees, convened to focus on specific agenda items.
- The one standing subcommittee that is prescribed in the RPC model is the Children and Families Subcommittee.
- Each region will have a Children & Families Subcommittee, among other work groups and subcommittees.

TIMELINE: While most regions will establish their Children & Families Subcommittee in July, the Capital Region is being piloted to inform the rest of state.



RPC & MEDICAID MANAGED CARE TIMELINE





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CHILDREN & FAMILIES SUBCOMMITTEE PILOTS



CHILDREN & FAMILIES SUBCOMMITTEE

(PURPOSE & OBJECTIVE)

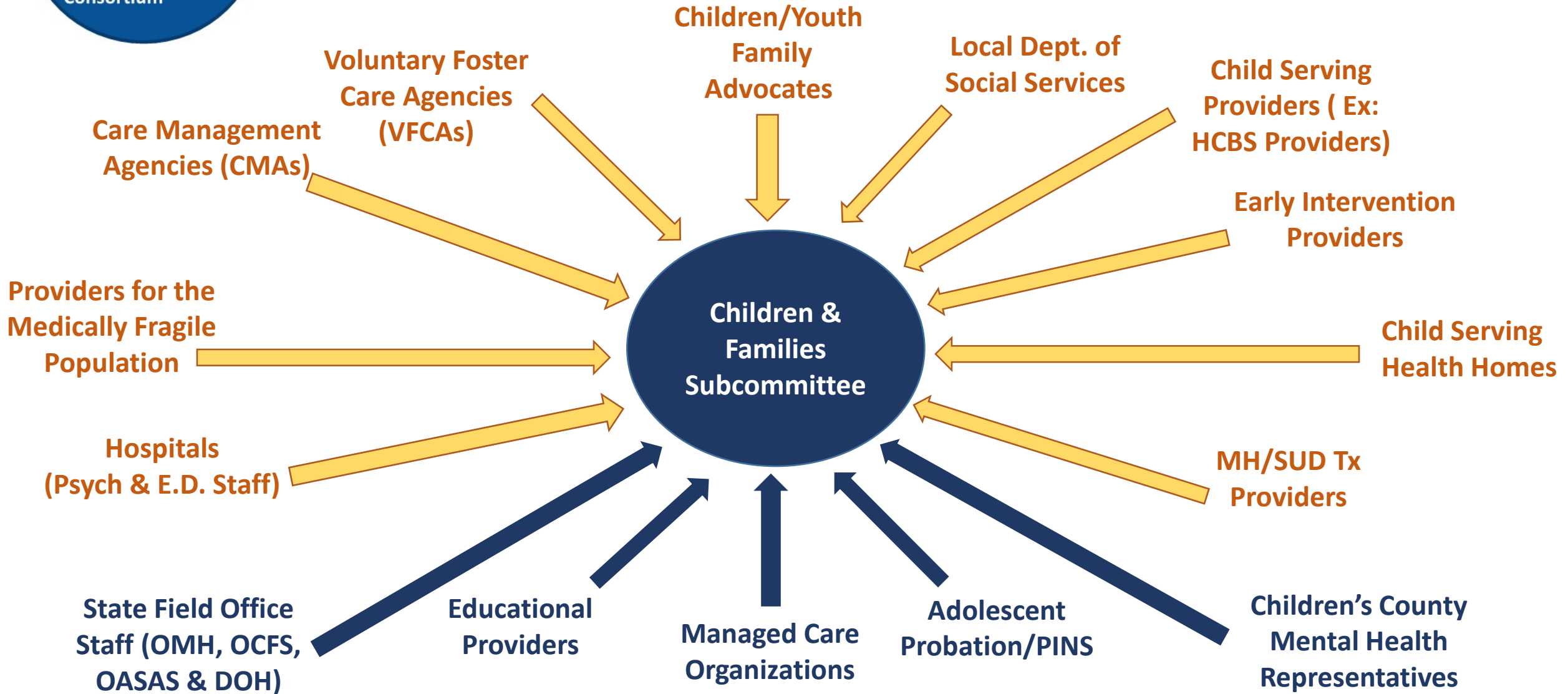
PURPOSE: To bring together stakeholders associated with services for children, youth and families in every region to collaborate around systems challenges related to the transformation of children's services across New York State.

OBJECTIVE: Subcommittee stakeholders will work together to identify solutions and provide recommendations to State Government to improve network adequacy, increase access to services and to support children at-risk to thrive in their home and community.



REGIONAL PLANNING CONSORTIUM

CHILDREN & FAMILIES SUBCOMMITTEE COMPOSITION





CHILDREN & FAMILIES SUBCOMMITTEE

WHO LEADS THE CHILDREN & FAMILY SUBCOMMITTEE

C & F CHAIR: The Children & Families Subcommittee will be chaired by a child-serving provider or recipient from the region. The chair must not only have a direct connection child-serving system, but also be a member of the RPC board.

LGU LEAD: The Chair will be supported by a member of the region's county mental health provider system. This person has been chosen based on their experience and their connectivity to the children's services in their region.

The Chair and the LGU Lead will oversee the process, guide the conversations and serve as the liaisons between the subcommittee and the RPC Board.



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CAPITAL REGION CHILDREN & FAMILIES CHAIR

**Bill Gettman, Chief Executive Officer,
Northern Rivers**

CAPITAL REGION CHILDREN & FAMILIES LGU LEAD

**Moira Manning, LCSW-R
Deputy Commissioner,**

Albany County Department for Children, Youth and Families



CHILDREN & FAMILIES SUBCOMMITTEE (COMMUNICATION FLOW)



Department of Health



Office of Mental Health

Office of Alcoholism and Substance Abuse Services



Office of Children and Family Services



CHILDREN & FAMILIES SUBCOMMITTEE (STAGGERED)



REGIONAL RPC MEETINGS (QUARTERLY)






RPC CHAIRS MEETING QUARTERLY (STAGGERED)





CHILDREN & FAMILIES SUBCOMMITTEE

(STATE GOVERNMENT PARTICIPATION)

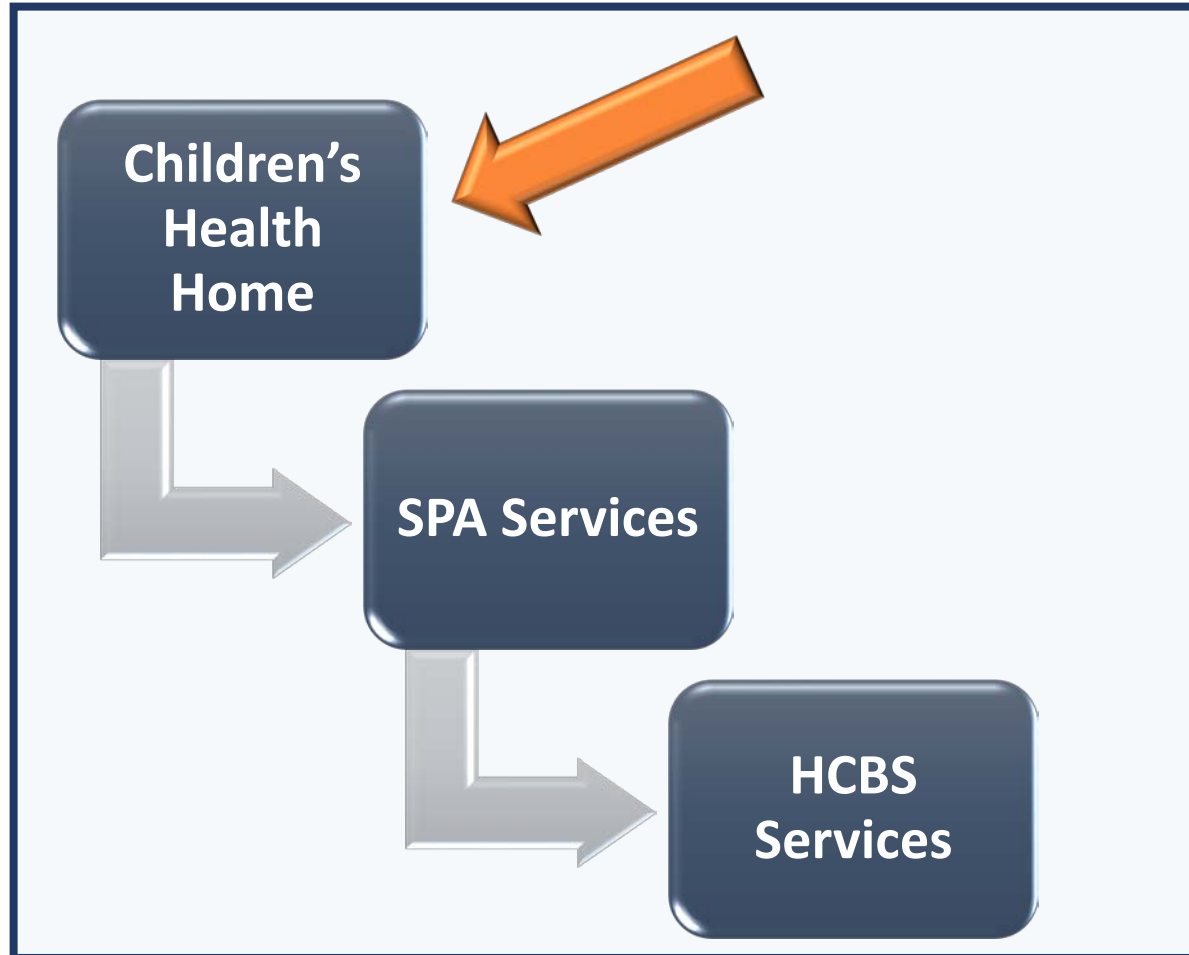
State Agency	Participation
 <p>Office of Mental Health Office of Alcoholism and Substance Abuse Services</p>	<p><i>Field Offices</i> will provide support and serve as two-way information conduits between each of the 10 ROS RPC's and the state government.</p> <p><i>Central Office</i> staff will meet quarterly with the RPC Chairs to discuss best practices and collaborate around system improvements.</p>
 <p>Office of Children and Family Services</p>	<p>The NYS OCFS will provide support and serve as two-way information conduits for all levels of the RPC process, specifically focusing on the Children and Families Subcommittee and serving on the regional boards, but also participating in the RPC Chairs meetings.</p>
 <p>Department of Health</p>	<p>The NYS DOH will work with the RPC's, attending the RPC Chairs Meeting quarterly.</p>



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CHILDREN & FAMILIES SUBCOMMITTEE

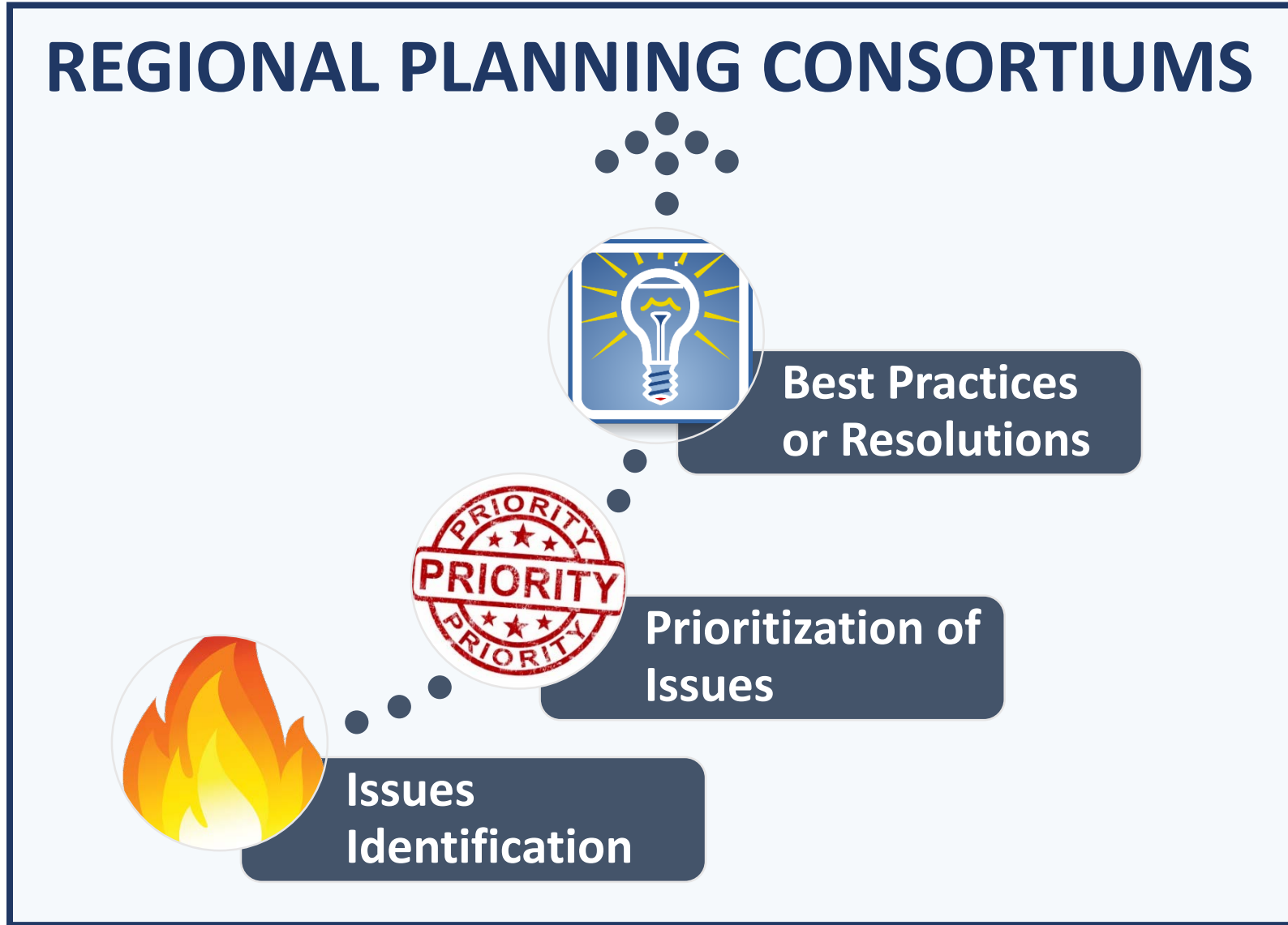
RPC SCOPE



- Please use this scope to shape the C & F discussions in each of the regions. It should be noted that this is not an exclusive list.
- We have encouraged the Children and Family Chair and LGU Lead to keep a tight focus on the issues that are discussed and develop a sense for what is a reasonable issue for the C & F Subcommittees to work on.
- While some discussions may be more relevant to your stakeholder group than others, it is a critical component of the process that all child serving systems are included in the C & F Subcommittee dialogue.



REGIONAL PLANNING CONSORTIUMS CHILDREN & FAMILIES SUBCOMMITTEE PROCESS





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CHILDREN & FAMILIES SUBCOMMITTEE

GUIDING PRINCIPLES

The Children & Families Subcommittee is founded upon the following principles:

- Families are best engaged in their own communities where they live and are most comfortable, and where they have culturally relevant resources to use in the achievement of their goals;
 - Families are viewed as partners and colleagues in the discussion;
- Child and Family serving systems/agencies must collaborate to create a seamless system;
 - **Every child serving stakeholder must be included in the conversation;**
 - Recommendations must be solution-focused;

*This is not unique to the RPC's, but it is a reiteration of the CASSP values (Child and Adolescent Service System Program) which were developed in 1983.



CHILDREN & FAMILIES SUBCOMMITTEE

(FAQs)

WHAT IS THE SIZE OF THE SUBCOMMITTEE?

Subcommittee size will be decided by the region.

CAN ANYONE SIT ON THE C & F SUBCOMMITTEE?

Any stakeholder who is involved in the delivery or receipt of children and families services in New York State.

WILL THE MEETINGS BE OPEN TO ANYONE? Yes, the public is welcome to attend.

WHEN & WHERE WILL THEY TAKE PLACE? The meeting frequency and location will be determined by the region.



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CHILDREN & FAMILIES SUBCOMMITTEE

ROAD MAP

**CHILDREN &
FAMILIES
SUBCOMMITTEE
KICKOFF**

**TODAY - MARCH
22nd**

**CHILDREN &
FAMILIES
SUBCOMMITTEE
TOWNHALL**

LATE APRIL 2017

**CHILDREN &
FAMILIES
SUBCOMMITTEE
WORK GROUP IS
FORMED**

EARLY MAY 2017



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FOR MORE INFORMATION ON CAPITAL REGION CHILDREN & FAMILIES SUBCOMMITTEE

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