

## The Role of Collaboration in Transforming Systems of Care

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Transforming mental health care includes the creation of models that effectively coordinate agencies and systems that serve at risk children and their families. This presentation will summarize the findings and policy recommendations from a five-year study on collaboration in systems of care. The premise of this study is that collaboration is a key principle in developing systems of care to serve children with serious emotional disturbance and their families (Petti et al. 1996; Stroul & Friedman, 1986). The study purpose was to understand better how policy implementation affects collaboration at the state and community levels that, in turn, contributes to effective systems of care. A related outcome was to inform policymakers about the most effective policy implementation strategies. These strategies, often called policy instruments, include legislative mandates, inducements, capacity building efforts, and other system change initiatives (Elmore, 1987). This presentation will review the study design and methods, findings, and policy recommendations.

### Study Design and Methods

The first phase of the study was a national survey of state mental health authorities to collect information regarding the types of policy instruments that states used to promote collaboration in children's systems of care. The documents from the states were coded, and the data on types of policy instruments, agencies involved in the policy, and system of care principles were entered into a cluster analysis program to identify like groups of states. The solution produced five clusters of states with similar policy instrument approaches.

The 2<sup>nd</sup> phase of the study was to conduct site visits of two states from each cluster, in order to understand from the perspective of key informants, how policy implementation had affected collaboration at the state and community levels. The research team used a backward mapping approach on-site, beginning each visit with data collection in one or more local communities, and then collecting data at the state level from state policymakers and advocates. Site visit methods included key informant interviews, focus groups, observation of group meetings, and document reviews. Providers and policymakers who participated in the visit were asked to complete the Interagency Collaboration Scale (Greenbaum & Brown, 2001). Both quantitative and qualitative data were analyzed using a conceptual framework of facilitating and inhibiting factors in three broad areas (structural/organizational, behavioral, and attitudinal) that impact policy development and implementation.

**Findings**

The study findings are presented using the conceptual framework of facilitating and inhibiting factors that effect policy development and implementation. For example, one facilitating organizational factor is a tiered infrastructure of mandated interagency coordination entities that operate at the individual child and family level, the county or regional level, and the state level.