

SUSTAINABILITY STRATEGIC PLANNING TEMPLATE

(Updated 12/23/03)

Brief Overview On How to Use the Sustainability Strategic Planning Template with a System of Care Community

(For a more detailed explanation on completing this Template, please see the: Instructions for Completing the Sustainability Self-Assessment Tool and Strategic Planning Template, also included in the Tool Kit.)

This template has been developed as a companion to the **Sustainability Self-Assessment Tool**. After you have completed the self-assessment, the results will provide your community with valuable information that can be used to complete a sustainability strategic plan. Each of the *sustainability objectives* and *key indicators* will become part of this plan, with the *progress rating* and *barriers* serving as important information to help you think about the strategies or action steps that your community will undertake to achieve a fully-sustained system of care after the six-year Federal funding ends. This planning template should be considered a working document – to be updated as needed.

The **Sustainability Strategic Planning Template** begins with the development of a Sustained System of Care Vision. (For suggestions on how to develop a vision statement, see the more detailed Instructions.) The remainder of the template is divided into five sections, with question prompts for each. The template concludes with a roster for signatures of planning participants. The planning development sections are:

- System of Care Elements and Sustainability Objectives
- Key Indicators of Success
- Strategies or Action Steps

- Responsibility
- Timeframe
- Roster of Participants

For each section of the planning template, the following areas of system of care development are listed. Each area includes key indicators to be addressed. The areas are:

- Vision & Philosophy
- Service Array
- Management & Coordination
- Interagency Planning & Coordination
- Family & Youth Involvement
- Cultural & Linguistic Competence
- Political & Economic Support
- Strategic Financing Strategies

Beginning with the first area of system of care development listed in the Planning Template (Vision and Philosophy), the facilitator should lead a discussion of each key indicator across the five sections of the protocol. Use the completed Self-Assessment Tool as a guide for identifying key indicators, action steps, key responsibilities and time frames for completion.

| System of Care Elements & Sustainability Objectives | Key Indicators of Success | Strategies or Action Steps | Responsibility | Timeframe |
|---|------------------------------|-------------------------------|----------------|-----------|
| Vision & Philosophy | | | | |
| Service Array | | | | |
| Management & Coordination | | | | |
| Interagency Planning & Coordination | | | | |
| Family & Youth involvement | | | | |
| Cultural & Linguistic Competence | | | | |
| Political & Economic Support | | | | |
| Strategic Financing Strategies | | | | |



| | Plan Date: |
|---|---------------------------------------|
| System of Care Community: | |
| (What is the descriptive name of our system of care community?) | |
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| Sustained System of Care Vision: | |
| (What will our system of care look like when it is fully sustained beyond Federal g | rant funding? Write in future tense.) |
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| System of Care Elements and Sustainability Objectives* (Where do we want to be? What do we want to sustain?) | Key Indicators of Success (How will we know when we have gotten there?) | Strategies or Action Steps (How will we get to where we want to be?) | Responsibility (Who will make it happen? | Timeframe (When will we get there?) |
|---|---|--|--|-------------------------------------|
| Vision and Philosophy | generality | 10000 | торр стт | |
| ☐ A clear vision for sustaining the system of care framework has been defined and disseminated. | | | | |
| ☐ Through social marketing practices, the needs of children, youth, families, community partners and stakeholders are integrated into the vision, philosophy and goals of the system of care. | | | | |
| ☐ The "right" key stakeholders, representing the diversity of the community served, have been involved in defining and disseminating the vision. | | | | |

^{*} The permanent presence of youth and families in every process is required in the most recent RFA and a sustaining factor in all other SOC communities.



| System of Care Elements and Sustainability Objectives* | Key Indicators of Success | Strategies or Action Steps | Responsibility | <u>Timeframe</u> |
|---|---|---|---------------------------|---------------------------|
| (Where do we want to be? What do we want to sustain?) | (How will we know when we have gotten there?) | (How will we get to where we want to be?) | (Who will make it happen? | (When will we get there?) |
| ☐ Clear-cut objectives for the cooperative agreement/grant have been identified through a planning process, and are developed and disseminated. | | | | |
| □ SOC values and principles are continuously redefining the larger community based service delivery system. | | | | |
| A definition for sustainability of the system of care framework to implement change at the policy, system and practice level has been developed and disseminated. | | | | |

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|--|---|---|---------------------------|---------------------------|
| (Where do we want to be? What do we want to sustain?) | (How will we know when we have gotten there?) | (How will we get to where we want to be?) | (Who will make it happen? | (When will we get there?) |
| ☐ Ongoing education and training on system of care vision, philosophy, goals, and operation is being provided. | | | | |
| Service Array | | | | |
| ☐ Services that families and youth (inclusive of the full diversity of the community) prefer and find useful and that partner agencies support and/or fund are continuously being created as needs change. | | | | |
| ☐ Access to appropriate and effective services and supports has been increased to meet needs. | | | | |

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|--|---|--|--|-------------------------------------|
| Ongoing mechanisms for providing individualized (with full recognition and support of cultural and linguistic preferences), integrated and coordinated care are being implemented. | | | | |
| Mechanisms are in place to assure a service array that meets the unique needs relevant to the demography of the community – based on age, race, ethnicity, language, spiritual identity, physical ability/disability, language, legal status, etc. | | | | |
| Ongoing mechanisms have been developed to decrease reliance on out-of-community and out-of-state placements are being implemented. | | | | |

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|---|---|--|--|-------------------------------------|
| Ongoing training and technical assistance on culturally and linguistically competent service delivery, and on culturally and linguistically competent evidence-based and promising practices to SOC staff, family members, youth, community providers and other stakeholders is being provided. | | | | |
| Management and Coordination | | | | |
| An ongoing focal point or centralized location for management of system of care implementation has been identified and is fully operational. | | | | |
| Leadership for sustainability of the system of care implementation efforts is maintained with a focus on continuity through continuous training, workforce development, skill-building and leadership development. | | | | |

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| System of Care Elements and | Key Indicators | Strategies or | Responsibility | <u>Timeframe</u> |
|--|--|--|---------------------------|---------------------------|
| Sustainability Objectives* (Where do we want to be? What do we want to sustain?) | of Success (How will we know when we have gotten there?) | Action Steps (How will we get to where we want to be?) | (Who will make it happen? | (When will we get there?) |
| ☐ Ongoing mechanisms for using data and evaluation to support planning, development and maintenance of implementation efforts have been created. | | | | |
| ☐ Flexibility and innovation is built into the leadership framework, policies, and structures. | | | | |
| Interagency Planning and Coordination | | | | |
| ☐ Ongoing mechanisms for interagency planning and coordination at the State/Tribal/Territorial and local policy and system level are in place. | | | | |

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| Sustainability Objectives* (Where do we want to be? What do we want to sustain?) | of Success (How will we know when we have gotten there?) | Action Steps (How will we get to where we want to be?) | (Who will make it happen? | (When will we get there?) |
| Ongoing mechanisms for interagency planning and coordination (inclusive of community and faith-based organizations and cultural and ethnic specific entities) at the service delivery level are in place. | | | | |
| Ongoing, shared administrative processes among two or more agencies that involves family members and/or youth are in place. | | | | |
| Family and Youth Involvement | | | | |
| ☐ Families and youth (reflective of the full demography of the community) are actively involved in policy making, system reform and fill administrative roles at the system level. | | | | |

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| System of Care Elements and Sustainability Objectives* | Key Indicators of Success | Strategies or Action Steps | Responsibility | <u>Timeframe</u> |
|--|---|---|---------------------------|---------------------------|
| (Where do we want to be? What do we want to sustain?) | (How will we know when we have gotten there?) | (How will we get to where we want to be?) | (Who will make it happen? | (When will we get there?) |
| ☐ Families and youth (reflective of the full demography of the community) are active participants in evaluation efforts. | | | | |
| ☐ Families and youth (reflective of the full demography of the community) are involved in the service planning and delivery process. | | | | |
| ☐ Families and youth (reflective of the full demography of the community) participate in training both as trainers and as participants in training activities. | | | | |

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| System of Care Elements and | Key Indicators | Strategies or | Responsibility | <u>Timeframe</u> |
|--|--------------------------------|------------------------------|-------------------|-------------------|
| Sustainability Objectives* | of Success | Action Steps | | |
| (Where do we want to be? What do we | (How will we know when we have | (How will we get to where we | (Who will make it | (When will we get |
| want to sustain?) | gotten there?) | want to be?) | happen? | there?) |
| Peer-to-Peer support is in place. | | | | |
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| Cultural & Linguistic Competence | | | | |
| ☐ Cultural and linguistic competence is | | | | |
| evident at the system, policy and | | | | |
| practice levels. | | | | |
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| ☐ Social marketing practices ensure that messages, images and outreach | | | | |
| strategies are culturally and | | | | |
| linguistically appropriate. | | | | |
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| System of Care Elements and Sustainability Objectives* (Where do we want to be? What do we | Key Indicators of Success (How will we know when we have | Strategies or Action Steps (How will we get to where we | (Who will make it | Timeframe (When will we get |
|---|--|---|-------------------|-----------------------------|
| want to sustain?) System-wide leadership is committed to continuing to lead the change process. | gotten there?) | want to be?) | happen? | there?) |
| ☐ Cultural and linguistic competence is adopted as a personal mission for each individual involved in the system of care. | | | | |
| Policies are established that assure cultural and linguistic competence. | | | | |

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|--|---|--|--|-------------------------------------|
| Structures are established to assure the planning and implementation of culturally and linguistically competent services. | gottom triore :) | want to bo.) | паррет | there. |
| Adequate resources – financial, personnel and volunteers – to support cultural and linguistic competence are established. | | | | |
| ☐ The service array is constructed to provide appropriate and acceptable services tailored for the unique demographics of the community. | | | | |

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| System of Care Elements and Sustainability Objectives* (Where do we want to be? What do we | Key Indicators of Success (How will we know when we have | Strategies or Action Steps (How will we get to where we | (Who will make it | Timeframe (When will we get |
|---|--|---|-------------------|-----------------------------|
| want to sustain?) MIS systems are designed to track services, clinical and functional outcomes, and service satisfaction based on the unique demographics of persons served. | gotten there?) | want to be?) | happen? | there?) |
| Quality management/quality improvement systems are designed to measure impact of services tailored to the unique demographics of the community. | | | | |
| ☐ Cultural competence is infused into the core plans and operations of agencies, programs and organizations involved in the system of care. | | | | |

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| System of Care Elements and Sustainability Objectives* (Where do we want to be? What do we | Key Indicators of Success (How will we know when we have | Strategies or Action Steps (How will we get to where we | Responsibility (Who will make it | Timeframe (When will we get |
|---|--|---|----------------------------------|-----------------------------|
| want to sustain?) Diverse cultural and linguistic communities are meaningfully involved in all components of the system of care – planning, administration, care coordination, service provision, and evaluation, etc. | gotten there?) | want to be?) | happen? | there?) |
| ☐ Cultural competence is a focus of system wide collaboration. | | | | |
| ☐ Mechanisms are in place to support attitudinal change of all members of the system (governance, executive, provider, practitioner, families and youth, community at large). | | | | |

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| System of Care Elements and | Key Indicators | Strategies or | Responsibility | <u>Timeframe</u> |
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| Sustainability Objectives* (Where do we want to be? What do we want to sustain?) | of Success (How will we know when we have gotten there?) | Action Steps (How will we get to where we want to be?) | (Who will make it happen? | (When will we get there?) |
| ■ Mechanisms are in place to facilitate continual cultural knowledge development of all members of the system of care at institutional and individual levels. | | | | |
| Mechanisms are in place to provide linguistic access throughout the entire system in compliance with Title VI of the Civil Rights Act and others with limitations in communication (e.g., limited literacy or disability). | | | | |
| Political and Economic Support | | | | |
| ☐ Sufficient financial and other resources are mobilized and available. | | | | |

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| Sustainability Objectives* (Where do we want to be? What do we want to sustain?) | of Success (How will we know when we have gotten there?) | Action Steps (How will we get to where we want to be?) | (Who will make it happen? | (When will we get there?) |
| ☐ Partnerships at state and local levels are developed and maintained to effect mutually beneficial outcomes. | | | | |
| ☐ Evaluation/accountability results are integrated in the design and implementation of the system of care framework. | | | | |
| ☐ Key stakeholders representing the diversity of the community (including state and local public officials) are involved in the initiative and are committed to sustaining and expanding the system of care. | | | | |

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| Sustainability Objectives* (Where do we want to be? What do we want to sustain?) | of Success (How will we know when we have gotten there?) | Action Steps (How will we get to where we want to be?) | (Who will make it happen? | (When will we get there?) |
| ☐ Political and policy-level support for the system of care approach has been generated at the state and local level. | | | | |
| Policies have been reformed or developed to support system change at the state and local level in order to sustain the initiative. | | | | |
| ☐ Coalition building among advocates, including those representing specific cultural, racial, ethnic, linguistic, religious and other communities, is being supported in order to impact change. | | | | |

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| System of Care Elements and Sustainability Objectives* (Where do we want to be? What do we | Key Indicators of Success (How will we know when we have | Strategies or Action Steps (How will we get to where we | (Who will make it | Timeframe (When will we get |
|--|--|---|-------------------|-----------------------------|
| want to sustain?) Strong interagency relationships are being cultivated or are in place. | gotten there?) | want to be?) | happen? | there?) |
| A strong family organization that reflects and effectively supports the diversity of families in the community is evolving and/or in place and is supported by the community at large. | | | | |
| ☐ The system of care framework and its values and principles are infused within the broad service delivery system. | | | | |

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|--|---|--|--|-------------------------------------|
| Strategic Financing Strategies | | | | |
| Refinancing strategies for utilizing existing resources have been developed and implemented. | | | | |
| ☐ A plan for maximization of federal, state and local revenue is being implemented and is operational. | | | | |
| Strategies for creating more flexibility in existing funding streams have been developed and implemented. | | | | |

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| Sustainability Objectives* (Where do we want to be? What do we want to sustain?) | of Success (How will we know when we have gotten there?) | Action Steps (How will we get to where we want to be?) | (Who will make it happen? | (When will we get there?) |
| ☐ Partnerships between the public- private sectors have been developed. | | | | |
| ☐ Financing strategies are developed that assure continued access to appropriate and acceptable services for all demographic groups within the community. | | | | |

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Roster of Participants:

As members of the community, we actively participated in completing the Sustainability Strategic Plan.

| Name | Agency Affiliation or Family/Youth member | Date |
|------|---|------|
| Name | Agency Affiliation or Family/Youth member | Date |
| Name | Agency Affiliation or Family/Youth member | Date |
| Name | Agency Affiliation or Family/Youth member | Date |
| Name | Agency Affiliation or Family/Youth member | Date |
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