

2016 System of Care Community Collaborative Self-Assessment (CCSA): N.C. Statewide Results

The tables below show percentages of participating collaboratives (N = 63) who agreed or strongly agreed in their self-assessments with each of the 40 assessment items. The agreement percentage ranged from 22% to 97% (mean = 65%). The self-assessment items are presented here in descending order of the percentage agreement. Four statistical groupings include items with which high, moderately high, moderately low, and low percentages of participating collaboratives agreed or strongly agreed.ⁱ

High Percentages of Community Collaboratives Agreed	Percentage
Collaborative members are flexible and open to change	97%
Collaborative members see themselves personally and collectively responsible for improving outcomes for children and families	97%
Individualized assessments of child and family needs and strengths are used to plan services and supports	94%
Our Collaborative members feel listened to and respected by other Collaborative members	94%
Our Collaborative shares a common vision	92%
There is a strong trusting, cooperative relationship among Collaborative members	90%
Collaborative participants have access to information and research on best practices in child welfare, mental health/substance use treatment, juvenile justice, and youth development	89%
Our Collaborative members enjoy coming to Collaborative meetings	89%

Moderately High Percentages of Community Collaboratives Agreed	Percentage
Our Collaborative participants have the skills needed to analyze and interpret data using charts and graphs	87%
Parents/caregivers have choice of services and supports	87%
Family and youth strengths are incorporated into their plans	86%
Array includes developmentally appropriate services for very young children (0-5 years) and their families	81%
Our Collaborative members feel our work together is respected and heard by other child serving agencies such as the department of social services or our public school system	79%
Families have primary decision making role in service planning and delivery for their children	79%
Community and natural supports are included in service plans across the systems (PCPs, IEPs, Juvenile justice and social service plans)	79%
Systemic efforts are made in our community to identify behavioral health problems at earlier stages and ages (e.g., screening in primary care)	78%
Youth are active partners in their service planning and delivery	75%
Parent/caregivers have access to adequate information about services, behavioral health challenges, and their options in order to be a decision maker in their care and overall well-being	73%
Our Collaborative members feel our work together is respected and heard by our LME/MCO	71%
Our Collaborative members have a clear understanding of the Collaborative's priorities	70%
Our Collaborative identifies and resolves barriers related to children's behavioral health services and supports	70%
Our Collaborative has adequate time to review and analyze shared data (data from multiple community sources)	68%
The child-serving agencies in our Collaborative work to reduce barriers related to data sharing between systems	67%

Moderately Low Percentages of Community Collaboratives Agreed	Percentage
Parent/caregivers have access to family peer support	63%
Youth have access to adequate information about services, behavioral health challenges, and their options in order to be a decision maker in their care and overall well-being	62%
The array includes developmentally appropriate services for youth and young adults in transition to adulthood	56%
In our county/region, there is an opportunity for youth voice in each child-serving system	52%
Child serving systems work together to provide the family with one integrated family plan (even as different agencies have their own components of the plan on their own forms)	51%
The Collaborative has a clear plan for recruiting and maintaining membership order to have full community representation (family members, youth, faith-based groups, social services, school system, juvenile court, court system, providers as well as representatives from the cultural and linguistic diversity of our community)	48%
Our Community Collaborative uses data for joint decision making about priorities	46%
Our Collaborative has reliable procedures to track progress on the priorities of the Collaborative	46%
Our Collaborative uses data as a tool to understand and improve current practices and policy	43%

Low Percentages of Community Collaboratives Agreed	Percentage
In our county region, family members are involved in county boards and committees across the agencies serving families	41%
The Collaborative has a community training plan to better address the needs of children and youth with mental health and substance use challenges across all systems	37%
The Collaborative has an interagency agreement that spells out how each participating agency will support the Collaborative's priorities	37%
Our Collaborative analyzes data to identify and eliminate any cultural/linguistic/racial/ethnic disparities in services and supports	32%
Reimbursement methods are in place for family peer trainers to co-train (Child and Family Teams, and other System of Care topics)	32%
Youth have access to youth peer support	27%
Evidence of the Collaborative's commitment to cultural and linguistic competence is evident in the Collaborative strategic plan	25%
Youth representatives on our Collaborative are provided incentives (ex stipends and mileage reimbursement) to regularly participate on the Collaborative	22%

ⁱ The statistical groupings are based on the average item agreement of 65% and standard deviation (s.d.) of 23%. The four groups include items with agreement percentages more than one s.d. above the mean, within one s.d. above the mean, within one s.d. below the mean, and more than 1 s.d. below the mean.