

2009 Nevada
Juvenile Services Strategic Plan
Juvenile Services
Division of Child and Family Services
State of Nevada

EXHIBIT E NevadaStakeholder Document consists of 24 pages.

☒ Entire document provided.

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The purpose of this paper is to describe the strategic plan which will enhance the current delivery of juvenile justice services in Nevada as well as assist in the preparation for the 2011 State Legislative Session. The State of Nevada, Division of Child and Family Services (DCFS) – Juvenile Services has developed a strategic plan which will help to better address the needs of youth and their families involved in the juvenile justice system.

This project has helped the Division assess the current needs of Nevada's state juvenile corrections system and collaboratively developed this plan with county partners who provide juvenile probation services at the local level prior to committing youth to state custody. The process included an open dialogue within the state's juvenile justice community through staff interviews and focus groups. County level participation included the Nevada Association of Juvenile Justice Administrators (NAJJA) where county juvenile justice officials participated in focus groups. The state's Juvenile Justice Commission (JJC), comprised of stakeholders representing a variety of disciplines, participated as well through its Planning and Development Committee.

The State of Nevada is facing an increasing budget crisis as revenue's continue to decline and the 2011 Legislature could face a budget shortfall of \$3 billion (Nevada Appeal September 16, 2009). At the same time juvenile detention rates in Clark County increased during the first half of 2009 due in part to violent offenses by youth resulting in an increased rate of commitment to state juvenile correctional facilities (Clark County Juvenile Reports 2009). Due to the increase in commitment rates state correctional facilities are operating at full occupancy resulting in a backlog of youth in county juvenile detention centers. Pressure to release youth early from state facilities has

impacted youth parole caseloads as these youth are released back into their community earlier than expected.

Juvenile services strategic plan will be developed in five phases; analysis of existing data, staff interviews, focus groups, analysis of findings and goal setting. Data collection included monthly caseload reports, institutional population and programming reports, and county state commitment records which have been examined to determine trends and anticipate future needs. Staff interviews included a representative sample of correctional care, parole and juvenile justice program staff. The focus groups represented the three functions included in the interview stage plus a focus group which contained correctional care and parole staff, and a group whose membership included state and county staff. This information has been analyzed through the lens of Systems of Care guiding principles (see Attachment A).

The goal of this plan was to enable Nevada to be proactive in making choices regarding the future of juvenile services. The priority was to establish a set of values and direction that would assist the state's juvenile justice system in "staying the course" in the midst of uncertain economic times.

Phase I

Data Collection. This phase was conducted during the spring of 2009 and included the review of the following documents by the youth parole unit managers, facility superintendents, and county juvenile justice officials:

1. Youth Parole Bureau Monthly Caseload Reports
2. State Juvenile Correctional Facility Monthly reports

3. County Juvenile Probation Quarterly Reports submitted to the state's Juvenile Justice Program's Office where they were summarized.

Phase II

Staff Interviews. Juvenile Services staff interviews (representative sample) took place during the summer 2009. This allowed for analysis on a regional basis as the sampling of staff included north, south and rural parole and correctional staff.

Based on the principles of the SWOT Model staff members were asked the following questions:

1. What programs or practices of parole (or your facility) work well and what would you look to enhance?
2. What programs or practices are in need of improvement or need to be deleted?
3. What opportunities do you see for new programming or practices that could be introduced to youth parole (or our facility)?
4. What problems do you foresee in the future that could serve as obstacles to the enhancement of current services?
5. Are there any other issues that didn't come up today that you would like to discuss?

In regard to the Juvenile Justice Programs office, the state juvenile justice specialist who performs the daily work of the Juvenile Justice Commission was interviewed regarding federal mandates, legislative issues and mandates from the 2009 Legislation session.

Result of Staff Interviews

During the summer of 2009 parole and correctional staff were interviewed (Phase

II). The results of these interviews are as follows:

Strengths

- Strong academic programs in the institutions as evidenced by the increase in graduation rates and credit accumulation by youth committed to state custody
- Good staff ratios in facilities but there is a growing concern about additional furlough days if the budget doesn't improve
- Institutional programming i.e. Anger Management, Life Skills
- Parole works well with local gang units
- Parole case management system works well
- Caliente Youth Center and Nevada Youth Training Center function very well and there is hope the new superintendent at Summit View will be a positive influence
- Parole has an experienced veteran staff

Weaknesses

- No in-house parole programming
- Need to enhance electronic programming
- Need for a better restitution policy to include accepting cash, record keeping, and payment to victims of crime
- Lack of timeliness in receiving school and mental health reports from institutions
- Communication between parole and institutions was better when parole officers spent more time at institutions

- Need a better array of services at the local level for youth returning from correctional facilities

Opportunities

- Workgroup to explore the Medicaid approval process with First Health
- Safety Committee to study officer safety to include communication processes, O.C. spray, carrying weapons, and other devices useful to ensure safety.
- A residential substance abuse program
- Gang awareness training for staff in the two rural facilities
- Re-establish the dog program at Summit View (and perhaps other facilities) which had the buy-in of staff and youth
- Commitment for the increased use of videoconferencing
- Expand the Juvenile Detention Alternatives Initiative (JDAI) to include a state component.

Threats

- Furlough days and the concern that more may be forthcoming
- The overall budget
- Concern that more youth with mental health issues will be committed to state correctional care due to lack of treatment beds
- Inconsistent orders from juvenile court judges

Correctional care and parole staff were clearly concerned about furloughs and the effect on programming as well as their personal budgets. The possibility of further budget cuts was unanimously discussed by participants. Communication between the institutions and parole staff was prioritized during most of the interviews with

institutional staff feeling that parole overall is not as involved with youth as they should be prior to their release and parole staff stating that progress reports are not received in a timely manner. The academic achievements obtained by youth while in a facility were brought up by several staff along with the need to continue this progress upon their return to the community. While there was a strong endorsement of the facilities in Elko and Caliente there was also an acknowledgement that Summit View has a new superintendent, the third in three years, and it will take time to stabilize that facility. The Safety Committee and Juvenile Detention Alternatives Initiative (JDAI) were seen as opportunities to increase job satisfaction and enhance a best practice.

Phase III

Focus Groups. The goal of the focus groups were to complete the SWOT model then refine the concepts developed during the staff interviews through facilitated discussion. This format was aimed at increasing awareness among participants of how their colleagues across the state viewed issues their respective agencies are facing. The interdisciplinary groups were designed to increase awareness among correctional and parole staff, and county/state staff with a goal of promoting better collaboration among these entities.

The focus groups utilized the same SWOT principles and questions which guided the staff interview phase of this planning process.

Five focus groups were formed as follows:

- Parole Focus Group – This group consisted of five Youth Parole Counselors representing north, south, and rural Nevada. Parole supervision of youth from the time of their commitment to release back into the community was discussed. This

group's directive was to discuss casework practices used in the various regions of the state for consistency and effectiveness. Communication between the regions was also a priority.

- Institution Focus Group – This group consisted of six institution staff, two staff from each of the state's three facilities. This group discussed programmatic issues such as the delivery of academic, mental health, and substance abuse services, security and supervision practices and communication between institutions.
- Parole/Institution Focus Group – This group consisted of five parole counselors representing north, south, and rural Nevada and five institutional staff representing our three correctional facilities. This group discussed communication practices between parole and institutional staff as it pertained to the admission process, monitoring by parole during time of commitment and discharge planning including reintegration matters i.e. school reports, mental health reports, etc.
- County Probation/State Juvenile Services Focus Group – This group consisted of three county level juvenile probation staff and six state staff representing youth parole and the correctional facilities. This group discussed the process in which a minor is accepted into state custody after commitment to either a correctional facility or to a mental health placement. Emphasis was placed on what issues could be addressed that would ensure a seamless transition of a youth from county to state custody. The implementation of the enhanced Community Partnership Block Grant funding was prioritized since ultimately our state's juvenile justice

system benefits most from local programming which diverts youth from needing state correctional care.

- Juvenile Justice Commission Focus Group – The Juvenile Justice Commission was represented in this planning process by its Planning and Development Committee. This group discussed methods in which the Juvenile Justice Commission could better monitor the four core requirements of the Juvenile Justice Prevention Act and provide better information to the Governor’s office regarding juvenile justice statistics and programming in Nevada. This group also reviewed best practices such as the state juvenile services in Missouri which have been recommended by the Annie E. Casey Foundation as part of their Juvenile Detention Alternative Initiative (JDAI) programming.

Results of Focus Groups

The five focus groups met in September and October of 2009. The results of this exercise are as follows:

Strengths

- Teamwork between parole regions regarding transports.
- Strong track record of providing community supervision to youth on parole
- An experienced parole and institution staff
- Thinking for a Change (T4C) programming in institutions
- Programming in facilities i.e.: alcohol and drug counseling, Girls Circle, Caseload Management system, Anger Management, Life Skills Training
- Good relationship with counties and courts systems

- Willingness to change, develop better programming.
- Due process for all youth when addressing acting out behaviors and sanctions.
- Community Resource Team works well, statewide perspectives is useful
- Increased use of the information management system including the recent addition of critical incident reporting
- Daily parole briefings; could add a monthly statewide briefing.
- Manner in which cases are staffed
- A lot of talented staff in the agency
- Good staff/youth ratios (subject to furloughs)

Weakness

- Not enough communication between parole staff and youth while they are in a correctional setting
- Delay in getting transcripts and other records from institutions upon a minor's release.
- Southern parole cases not assigned to officers in some cases until two weeks prior to release.
- Institutions seeing more gang involved youth and therefore need more gang training.
- Institution staff members need more basic training on teen development.

- Need to improve training opportunities
- Need clearer facility policies
- Need a broader pool of staff comprising the Quality Assurance team.
- Need more Independent living programming including a halfway house
- Need for in house parole programming.
- Review parole supervision to include core programming i.e.: services provided, how long we supervise, look at establishing a level system, token economy, re-evaluate classification system; case closures based on objective data.
- Parole has decreased its involvement with the institutions; case plans not being done as well.
- Need for better electronic monitoring system
- Need process for handling restitution dollars
- Need more services from group homes in which youth on parole are placed
- North/South rift in parole causing morale problems.
- Need for day treatment programs to include family involvement
- Enhance Evening Reporting Centers

- Need to improve communication with Clark County Juvenile Justice Services in terms of acquiring sufficient background information on youth committed to state custody.
- Improve the information management system in terms of accessing information
- Majority of youth do not have birth certificates or Social Security cards when leaving institutions making it difficult for them to access employment and community services as well as delay their enrollment in school.
- Need residential substance abuse treatment programs.

Opportunity

- New programming associated with newly acquired Workforce Investment funds
- Expand Community Service programming
- Reestablish the dog program and look into a music program, horticulture programs.
- Develop monthly institution report and disburse via e-mail. Report to contain incident report summary, family visitations and interaction
- Parole to attend review meetings when schedule allows.
- Increased use of video conferencing
- Written protocol on transports

- As many youth in correctional facilities are parents; establish a parenting program.
- Enhance sex offender treatment at Caliente Youth Center through contract with Evergreen Counseling in Las Vegas who provides this service to Summit View
- Develop list of all community programs to be updated quarterly.
- Pursue grant funding for independent living programs
- Establish separate unit for Mental Health Counselors
- New Request For Proposal can enhance and better organize the accessing of community based services
- Increased travel will improve relationship between parole and institution.

Threat

- Decline in state revenues and the possibility of additional budget cuts.
- First Health process is cumbersome regarding Medicaid funding approvals
- One day a month furloughs and the threat of additional furlough days per month.
- Furloughs make it difficult to provide additional activities, training, etc.
- Staff apathy due to not having staff to implement new programs.
- Adoption and Foster Care Analysis and Reporting System (AFCARS) requirements

- Counties will get more Medicaid denials, and therefore, will commit more youth to the state for services.

While the focus groups brought up many of the same themes as the staff interviews this process allowed for much discussion regarding these issues, which was the goal. Staffing and programming in light of furloughs was discussed in terms of using staff time as efficiently as possible in addition to seeking temporary help. All of the focus groups agreed that communication among the various functions needs active attention and specific methods, such as requiring two visits per year to an institution by each parole officer. Programming within the facilities and in the community was discussed, particularly as it relates to mental health.

Phase IV

Compilation of Data. Data were reviewed and analyzed during this phase by juvenile justice staff and stakeholders with the goal of identifying common themes which could be addressed through this plan. Juvenile Services staff reviewed the results of the SWOT exercises looking for common areas of interest which could then be addressed through the development of goals, objectives, and strategies.

Discussion of Results

At the conclusion of phase three, the weekly meetings of the parole managers and facility superintendents were used as work sessions to identify common themes which were identified during the staff interviews and ensuing focus groups. These themes will be presented to Division of Child and Family Services (DCFS) Administration for input

and approval. At that point specific goals, objectives, and strategies will be developed to properly address the identified themes.

Correctional Facilities

Implement Backfill/Temporary Staffing Program. Staff expressed concern about furloughs and their impact on daily operations. The 2009 State Legislature implemented a one day a month furlough policy for all state employees equaling a 4.6% salary reduction as a means to address the state's budget crisis. This policy has caused scheduling difficulties in all 24/7 operations including correctional facilities particularly when you consider the staffing ratios recommended by the Department of Justice (1:8 daytime and 1:16 during evening hours). A temporary staffing program is a priority since it will enable state facilities to maintain appropriate ratios as well as keeping overtime costs down with temporary staff versus regular staff that would accumulate overtime.

Parole/Institution Communications. The communication process between our state's institutions and the Youth Parole Bureau is essential to assisting youth in transitioning back into the community and was discussed at length during Phases II and III of this process by youth parole and correctional staff. Juvenile Services believes that aftercare begins the day a minor is admitted to a facility; therefore, the communication processes between parole and institution staff must improve to help ensure a minor's successful reintegration into the community. To help ensure a smooth reintegration process for a youth from institutional care to community supervision, school records, mental health reports, etc. need to be completed in a timely manner and communicated to the parole officer to assist with reintegration back into their local school and to access the appropriate community based services. Likewise parole officers need to spend more time

with youth prior to their release to enhance the prospects that the reintegration process back into the community will be successful.

Thinking for a Change. Several staff discussed the need to improve life skills programming at each facility with programs such as Thinking for a Change (T4C). This program is taught in the state's three correctional facilities and was identified as a priority. T4C is an integrated, cognitive behavior change program for offenders that include cognitive restructuring, social skills development, and development of problem solving skills. T4C is designed for delivery to small groups in 22 lessons and can be expanded on to meet the needs of specific participant groups. This program is also administered in Nevada's county detention centers which provide consistency of programming to youth as well as enhancing county and state communications.

Mental Health Services. As more youth entering state correctional care display mental health issues, more emphasis is needed in assessing how mental health services are delivered in our institutions. It was recommended that the division's Children's Mental Health assess current delivery of services and alternatives for improvement.

Statewide Adoption of the Juvenile Detention Alternatives Initiative (JDAI). JDAI currently has two pilot programs in Nevada's two largest counties, Washoe and Clark. The Nevada Association of Juvenile Justice Administrators recently formed a committee to move towards the implementation of JDAI statewide. The Annie E. Casey Foundation which sponsors JDAI has identified the State of Missouri as a model state for state correctional programming due to its commitment to cognitive behavior programming. It was recommended by staff that a current Nevada Superintendent visit that state to view their approach to programming first hand.

Academic Programming. Most staff agreed that academic programming needed to be reviewed and updated accordingly. Youth who enter correctional facilities in Nevada are functioning far below their grade level. Their period of incarceration provides a unique opportunity to gain back ground that they have lost. However, as with mental health programming, these youth need to be properly assessed, proceed with a prescribed curriculum of study and have a smooth transition process back into their school district.

Parole

Contract Development and Implementation. Parole staff indicated a need for additional community based services. For parole supervision to be most effective youth and families must have access to community based services that best address their needs. Parole staff must not only be aware of these services but have a well organized referral system, including access to funding mechanisms (i.e., Medicaid authorizations, budget reintegration funds). The contracts which enable this must be reviewed and modifications made to ensure services are accessed in a timely manner.

Interstate Compact for Juveniles (ICJ). Nevada approved the new ICJ during the 2005 Legislative Session pending the ratification of the 35th state which occurred during the summer 2008. The new compact contains additional responsibilities including the development of a state council, and participation as a member state in the Interstate Commission, which includes the development of rules and regulations.

Adoption and Foster Care Analysis & Reporting System (AFCARS). Nearly all youth parole staff interviewed alluded to the complexities of complying with AFCARS. Federal foster care regulations and AFCARS were expanded as of October 1, 2007 to include youth under the supervision of youth parole. These regulations involve youth placed in foster care and unlocked facilities. These new requirements afford to youth all of the rights and privileges of youth placed in foster care including judicial rules and other safeguards such as 72 hour hearing, review and permanency hearings. Also, any effort on the part of the state to gain federal reimbursement for certain services associated with the case management of parole youth under Title IV-E of the Social Security Act, requires these youth are afforded these protections. This includes an AFCARS hearing process for the review of parole placements in non-secure settings.

Officer Safety. Youth parole counselors have become increasingly concerned about their personal safety on the job and this was evident during Phase II of this process. Several officers stressed looking at best practices around the country in an attempt to enhance officer safety. Clark County juvenile justice officials indicate there has been a dramatic increase in crimes involving deadly weapons during the past year and those youth who are not certified into the adult court system will be committed to juvenile institutions and placed on youth parole. This trend has elevated parole counselors' concern for their safety.

Juvenile Justice Programs Office

The daily business of the Commission is carried out by the state's Juvenile Justice Specialist. During an interview with her several priorities were identified which were then discussed with the commission's Planning and Development Committee.

Outcome Measures for Community Corrections Partnership Block Grant. The 2009 State Legislature increased this grant fund by \$490,000.00 in hopes that the additional funding will divert more youth from requiring correctional care. It was recommended that performance measures be associated with the increase in funding to measure the programs impact in decreasing commitments to state facilities.

JDAI Statewide Implementation. As noted above JDAI currently has two pilot programs in Nevada's two largest counties, Washoe and Clark. The Nevada Association of Juvenile Justice Administrators recently formed a committee to move towards the implementation of JDAI statewide. The Juvenile Justice Commission has also prioritized the statewide implementation of JDAI by promoting JDAI activities during the Commission's grant process.

Juvenile Sex Offender (JSO) Task Force. There is a need to develop protocols and procedures to effectively capture juvenile sex offender data and develop standards to analyze the effectiveness of JSO treatment in Nevada

Develop Standards for Juvenile Detention Centers. There is a need to establish standards on a statewide level that ensures compliance with the federal JJDP Act.

Juvenile Justice Crime Database. There is a need to reevaluate our current data gathering process in order to produce reports more conducive to making policy decisions.

Phase V

Goals, Objectives, Strategies. The final step in the strategic planning process will begin in January 2010, as the Division works with UNR Extended studies in identifying specific goals, objectives, and strategies to implement themes and recommendation

developed in the plan. A formal presentation of these plans will be given to the Juvenile Justice Commission and the Nevada Association of Juvenile Justice Administrators.



NEVADA CHILDREN'S BEHAVIORAL HEALTH CONSORTIUM

"Building Nevada's System of Care for Children and Their Families"

Membership:

Clark County Children's Mental Health Consortium
Clark County Children's Mental Health Consortium Family Member
Rural Mental Health Consortium
Rural Mental Health Consortium/Family Member
Washoe County Children's Mental Health Consortium
Washoe County Children's Mental Health Consortium Family Member
Division of Child and Family Services
Division of Health Care Financing & Policy
Division of Health
Division of Mental Health & Developmental Services
Washoe County Dept. of Social Services
Clark County Dept. of Family Services
Nevada Youth Care Providers
Nevada PEP
Substance Abuse Prevention and Treatment Agency
Substance abuse provider
Solutions Recovery Inc.
Family and Juvenile Courts
Clark County School District
Washoe County School District
Clark County Dept. of Juvenile Justice
Washoe County Dept. of Juvenile Services
Inter-Tribal Council

NEVADA'S SYSTEM OF CARE

Nevada's System of Care meets the multiple and changing needs of families, children, and youth through a comprehensive, integrated, and coordinated continuum of services and supports.

Definitions:

Family – can be defined in a myriad of ways such as: adult(s), children, and youth in a parenting relationship; legal guardians; adoptive relationship; substitute or foster care; or emancipated youth. Throughout this document the word family will be used in place of any specific situation.

Comprehensive – a full array and timely access to services that families, children and youth need

Integrated – the elimination of service delivery silos

Coordinated – agencies working together to ensure services are seamless

Philosophy:

System of care is not a program — it is how care is delivered whether voluntarily or involuntarily; directly or indirectly. System of Care is a committed and sustainable approach to services that values and responds to the importance of family, school and community, that seeks to promote the full potential of every child, youth and family member by addressing their individual physical, emotional, intellectual, educational, cultural and social needs while balancing risks that may be identified for the child, youth and/or family.

Attributes:

Family Driven: Families have a key-decision role in the care of their own children as well as in policies and procedures governing care for all children in their own community, state, and tribe. This includes: choosing supports, services, and providers; setting goals; designing and implementing programs; monitoring outcomes; partnering in funding decisions; and determining the effectiveness of all efforts to promote the behavioral health and wellbeing of children and youth.

Youth Guided/Youth Directed/Youth Driven: Recognizes that youth must be heard and listened to but that in order for their full, authentic involvement we must provide them with tools and opportunities to participate in the process.

Strengths-based: Recognizes and builds upon each family's unique strengths which are the cornerstone for immediate and future success.

Comprehensive array of Traditional and Non-traditional Services: Includes the full range of services and supports from public and private agencies, and the community. Non-traditional services can include, but are not limited to, recreation, faith-based, and the performing arts. These services must be accessible in a timely and meaningful manner to support positive outcomes for families.

Common Intake and Assessment: Commitment by all partners to the collection of common information that with proper consent can be shared across systems.

Outcomes, Evaluation, and Quality Improvement: Outcomes are evaluated at the individual, agency, and system levels to measure the quality of care. Results from evaluation and quality improvement processes are used to make decisions and to guide policy making. Evaluation and quality improvement activities include:

- How to best meet the needs of children, youth and families;
- Determining if services and supports are working and used;
- Determining the cost of services and supports
- Assessing the need for additional resources and services;
- Providing feedback to those who provide services and information; and,
- Continually assessing the system of care's capacity to respond to feedback and implement change.

Evaluation and quality improvement aids in building a system of care by examining what we are doing and how we can do it better. The results of all evaluations and quality improvement activities are provided to families, system partners and community stakeholders.

Workforce Practices: Provides state-of-the art and effective organizational supports to workforce development initiatives and continuous improvement processes in service development and delivery. State of the art workforce development practices include an organizational culture which supports worker well-being, evidence based practice in

recruitment, retention, and selection strategies, clinical supervision programs, mentoring, evaluation and goal setting, team building, organizational culture change management, and other related initiatives. The intention is to facilitate family and youth choice in achieving positive outcomes for children and families, and to support the service delivery system.

Culturally and Linguistically Competent/Responsive: Recognizes that every family has individual cultural values. Services are responsive with an awareness and respect of the importance of values, beliefs, traditions, customs, and parenting styles of families. Services also take into account the varying linguistic needs of individuals who speak different languages, have varying literacy skills, and who need a variety of communication formats.

Community-based Services and Supports: Afford families early intervention and services in the communities where they live. Such services and supports allow families to remain intact **and** recognizes that children, youth and families thrive in the context of their homes, communities and schools.

RESOURCES

Tips and Additional Talking Points:

Youth Guided/Youth Directed/Youth Driven: The process from youth guided to youth driven is a continuum to engage youth with the final goal of authentic youth involvement. At this point in time we must begin by implementing youth guided policies with the goal of moving these policies through youth directed to youth driven. When we have reached youth driven policies they will include policies such as: youth setting agendas and calling meetings; youth informing the public about current policies and having a position platform; and youth being able to function as self advocates and peer advocates in the policy making process.

Strengths-based: A recognition that type and context of strengths can vary from family to family. A request for information and/or services can be the starting point for dealing with strengths in some families.

Common shared information: This attribute is an essential component of a seamless system to expedite services to a family.

Workforce practices: The success of this attribute lies in building the infrastructure needed to ensure that we have the right people with the right skills doing the right things at the right times. Workforce practices which build the needed infrastructure include: evaluation and goal setting, supervision, mentoring/coaching, professional development (of which training is one service component), recruitment, retention, selection, performance appraisals, developing teams and delegating authority for decision making

to teams, workforce performance, organizational readiness and culture change management, etc. These work force development elements will build our infrastructure to support our workforce in moving the system forward toward improved services, including a better and broader service array, and improved outcomes for children and families.

Community based: By offering a wide range of community-based services we are promoting safety, permanency and well being of children, youth and families.

Performance and Quality Improvement: This process commits us to “continuous quality improvement” in Nevada’s System of Care.

The following references provide additional information on System of Care, Family-Driven Care, and Youth Guided, Directed and Driven Care.

Pires, S.A. (2002). *Building systems of care: A primer*. Washington, DC: Human Service Collaborative.

Working Definition and tools: www.ffcmh.org/systems_whatism.htm

Webinar and supporting documents – follow links under Defining Family Driven Care to: View the PowerPoint slides for the Webinar; View the definition of family-driven care; Read the story "Journey to Family-Driven Policy;" or post a message to the discussion board: www.tapartnership.org/advisors/family/the_family_page.asp

Achieving the Promise: Report of the President’s Commission on Mental Health Web site: www.mentalhealthcommission.gov/reports/FinalReport/toc.html

McCarthy, J., Marshall, A., Collins, J., Arganza, G., Deserly, K. & Milon, J. (2003) A family’s guide to the child welfare system from www.tapartnership.org/advisors/ChildWelfare/resources/AFamilysGuideFINAL%20WEB%20VERSION.pdf

Substance Abuse and Mental Health Service Administration System of Care Web site: www.systemsofcare.samhsa.gov.