Prince George's County PATH Theory of Change

Key Context

- Hierarchy/Bureaucracy
- State-County Relationship
- •The County often leads change that is ultimately adopted state wide
- High uninsured rates for TAY
- Need to repurpose current funding from county, including current agencies serving TAY
- Difference between TAY needs and providers equipped to serve them in developmentally appropriate ways
- •\$\$ embedded in other systems (education, adult services) and how to access it
- •Billing break at age 18
- Current youth voice structure does not result in policy and systems change impact, and in some places doesn't exist
- •The system operates in an adult-centric

Assumptions

- •We all have the same definition of behavioral health
- •We all have the same understanding of available services and how to access them
- •We can all work together without red tape
- •If we build it, they will come...
- Change can and will happen
- •The system can reach everyone who needs it
- •Young people will step up if given the opportunity
- Youth-adult partnership is possible

Inputs

Service providers across systems

Invite missing partners (BOE, DSS, etc)

Data from various sources and service providers

Financial Resources

- County-funded BH dollars
- •CW Resources (Family First)
- Other county examples/resources

Youth Voice

State Perspective

County oversight of BHS providers

Partners

- Community School Programming Homeless Support System
 - TΑ

Time

Outputs

Fund Mapping

Universal Needs Assessment used by TAY serving agencies

Snap shot of eligibility for services

Developed training modules and curriculum to meet set standards

Map/Inventory of currently available TAY services

TAY treatment standard of care

Evaluation Plan

Outcomes

Systems Changes

- Cross-sector collaborative training to enhance county-wide capacity to address TAY needs in a culturally/linguistically competent and developmentally appropriate way
- •Cross-sector, system wide youth engagement strategy

Policy Changes

- •Align eligibility criteria and definitions across child and adult serving systems to reduce gaps and cliffs experienced by TAY
- Enhance system capacity to address social determinants of health

TAY Experience Outcomes

- Increase access to services for TAY who currently don't or can't access services
- Increase quality and responsiveness of existing services for youth who are served by the system
- Services address intersectional trauma and skill building

Impacts

System (with funding) that is specific to the behavioral health needs of 16-24

Behavioral Health system that is responsive to holistic TAY needs

TAY driven and responsive providers

Sharing of behavioral health service data within and across systems

Local effort will have broader impact at the state and federal level