

Project Name

TriWest Website Feedback, November 27, 2019

Deleted: 1

Who We Help

Our clients

In the list of organizations we've helped, there's a stray item— Division of Behavioral Health— Between Department of Human Services/Division of Mental Health (Illinois) and Grays Harbor County, Division of Behavioral Health (Washington). Which state is this division from?

Formatted: Font: Italic

Formatted: Font: Not Italic

Formatted: Font: Not Italic

Formatted: Font: Italic

Formatted: Font: Not Italic

In the same list, Meadows Foundation should be The Meadows Foundation, Inc.

Formatted: Font: Italic

Formatted: Font: Italic

Zia Partners, Inc. needs a state. The organization's location is now Tucson, AZ. See <http://www.ziapartners.com/contact-us/>

Formatted: Font: Not Italic

Formatted: Font: Italic

Formatted: Font: Not Italic

Our expertise

I'm not completely sure the following edits are correct—please review and correct, as needed.

Formatted: Font: Italic

Formatted: Font: Italic

We are well-versed in the often complex intersection of health, behavioral health, educational, child welfare, and juvenile and criminal justice systems.

Deleted: -

Deleted: s

Deleted: among

Formatted: Font: Not Italic

Behavioral Health

Our behavioral health experts have training and experience in mental health and substance use disorder services for children, youth, adults, and older adults. We know public mental health service delivery systems and how they interface with child welfare, education, employment, and juvenile and criminal justice systems. We understand the systems of care that are necessary to support people with mild to moderate conditions and those with serious mental health challenges. Our network of associates includes specialists in substance use disorders, co-occurring conditions, rehabilitation, criminal and juvenile justice, consumer-run services, and evidence-based practices.

Commented [WW1]: What do you think about this suggested edit, Joe? Not a big deal—I know this suggest has been review to death.

Deleted: mental health and substance use disorder services

Child Welfare

Formatted: Heading 3

TriWest has led or helped conduct evaluations of four Title IV-E Waiver demonstrations. These evaluations featured managed care reforms, best-practices in kinship navigation, community-based systems of care, subsidized guardianships, tribal system governance, and implementation of a child protective services alternate response model.

Deleted: CPS

Evaluation

Working with clients of varying sizes—from local programs and foundations to statewide federally funded projects—we have helped systems better serve their clients by focusing evaluation efforts on identifying program successes and opportunities to improve. Our program evaluations often include helping organizations articulate their theory of change and develop logic models. They have involved working with agencies, stakeholders, and communities to gather and analyze qualitative data, using interviews, surveys, and meetings. We have worked with various data sources, including local proprietary systems and large statewide and national databases, to gather and analyze quantitative data. Most importantly, we provide feedback and recommendations that prioritize program improvement and sustainability. Recent projects included multiple regional behavioral health needs assessments, a four-year statewide evaluation of a comprehensive integrated physical and behavioral health reform effort, and a five-year evaluation of a state IV-E Waiver Demonstration project, implementing a child protective services alternative pathway.

- Deleted: for
- Deleted: ing
- Deleted: ing
- Deleted: including

- Deleted: C
- Deleted: P
- Deleted: S

Juvenile Justice

We are passionate about our work with juvenile justice systems. And we approach this work with an understanding of the socioeconomic factors affecting this population and the disproportionate representation of youth of color in these systems. Among the many projects we have successfully completed in this area is a multi-year, 22-site evaluation of an alternatives to detention program for Colorado’s Division of Youth Corrections.

- Deleted: bring
- Deleted: awareness
- Deleted: and socioeconomic factors in approaching our juvenile justice work...

Managed Care & System Reform

We have also recently helped communities develop comprehensive approaches to reducing the criminal justice system involvement of people with behavioral health conditions by designing and helping facilitate the implementation of best practices that support diversion and behavioral health interventions for people with mental illnesses and co-occurring disorders who are involved with the criminal justice system.

- Deleted: across the sequential intercept map

Commented [WW2]: I don’t think everyone who checks out our website would know what the sequential intercept map is, so I borrowed this language from these sources: <https://www.prainc.com/wp-content/uploads/2017/08/SIM-Brochure-Redesign0824.pdf>; <https://www.prainc.com/what-exactly-is-a-sequential-intercept-mapping/>

how we help

Our services

Data Analysis & Visualization

We have the infrastructure and experience to work with large statewide person-level data sets, including all payer claims data, Medicaid claims and encounters, hospital discharge records, and child welfare SACWIS data. We regularly generate customized population estimates using American Community Survey PUMS data and prevalence estimates based on the National Survey on Drug Use and Health and other sources. We also frequently work with smaller

Commented [WW3]: Should this be spelled out?
Statewide Automated Child Welfare Information System

Commented [WW4]: Should this be spelled out?
Public Use Microdata Sample

propriety data, everything from electronic health records for community mental health center patients to the location of mental health related 911 calls.

Deleted: CMHC

Data analysis approaches vary from basic descriptive and inferential statistical presentations, to quasi experimental estimates of effect size, to geographic information system maps used to identify geographic gaps in care. We have experience with analysis techniques, including matching algorithms such as coarsened exact matching, imputation of missing values, and estimates of treatment effects for treated and untreated populations. We display data using static and interactive maps, infographics, and dashboards.

Deleted: GIS

Our qualitative analysis team has years of experience in survey design and distribution, focus groups, interviewing, and other techniques. We have been on site with case workers, administrators, teachers, healthcare specialists, and families, among others, throughout the country. We have convened stakeholder meetings, steering committees, and workgroups to inform our analysis and provide clients with meaningful and targeted feedback. Above all, we can customize our approaches to the size, objectives, and limitations of projects, ensuring that deliverables are data-driven and useful.

Deleted: -

Deleted: actionable

Program Evaluation

Our experience with large multi-jurisdictional and geographically-dispersed evaluations has taught us the importance of considering the various cultural, social, and demographic contexts in which a program or policy is implemented. Many factors can influence program implementation, including the availability of services, the cultural beliefs and practices of consumers and clients, and levels of poverty within a community, among others. These factors can ultimately affect the evaluation.

Commented [WW5]: I'm thrown off a bit by "consumers and clients" since those terms are often interchangeable in our reports—feels redundant to me. What comes to mind is this edit:

"...the cultural beliefs and practices of our clients and the people they serve."

Program Implementation

We have helped our clients implement a broad range of programs, including such evidence-based practices as Assertive Community Treatment, Multisystemic Therapy, the Matrix Model of substance use treatment, and the Collaborative Care Model.

Deleted: The range of programs

Deleted: w

Deleted: is

Deleted: and

Deleted: es

School-Based Mental Health Services & Multi-Tiered Systems of Support

We conduct school mental health service assessments to help school districts improve academic outcomes by addressing the social and emotional needs of all students. We use a multi-tiered systems of support framework to help school districts engage families and incorporate mental health, community, and school resources into a single integrated system.

Deleted: , and families

Our school district plans recommend evidence-based strategies to improve need-based access to supports across all tiers of support. They also identify cost-effective and sustainable opportunities to increase access to school- and community-based behavioral health services.

Deleted: three

Deleted: s

These plans also highlight opportunities to develop, strengthen, or restructure school district and community partnerships.

Deleted: And they

How We've Helped

Project descriptions

Colorado State Innovation Model (SIM)

We successfully completed a 3.5-year evaluation of Colorado's State Innovation Model (SIM) project, a statewide effort to support greater integration of behavioral and physical healthcare, encourage the expansion of value-based payment models, and improve population health by helping communities address stigma and other barriers to care access across the state. SIM was funded by a \$65 million federal grant from the U.S. Department of Health & Human Services, Centers for Medicare & Medicaid Services.

Deleted: TriWest

Deleted: to

Deleted: -

Deleted: -dollar

The Anne and Henry Zarrow Foundation

We are working with the Anne and Henry Zarrow Foundation in Tulsa, Oklahoma, to assist in the formation of a new mental health policy endeavor, Healthy Minds Policy Initiative of Oklahoma. The foundation-funded effort aims to develop, with broad community collaboration, a behavioral health system improvement strategy. Our role includes helping the community assess, educate, design, and support implementation of large system-level improvements. The project involves data analysis, program development, and convening dozens of stakeholders across adult, child, and family systems in diverse fields (justice, public education, mental health care, substance use services, higher education, state and local governments, private foundations, and community organizations).

Deleted: a philanthropic foundation

Deleted: convening, and

Deleted: among

Deleted: treatment

Cross System Crisis Response Pilot

We provided qualitative data collection and analysis in support of a pilot project that tested better ways to serve people with developmental or intellectual disabilities during a mental health crisis. We conducted site visits, including a desk review of client files and program planning documents, and compliance reviews to compare practice to requirements. Likewise, we interviewed clients, families, staff, and administrators to obtain diverse perspectives about current challenges and as well as to include information about the impact of social determinants of health on access to services. We were selected for this project, in part, because of our clinical expertise in working with people who have mental illnesses and developmental disabilities. We were praised for the high quality of our written products and our team's ability to quickly build relationships with clients, staff, and administrators.

Commented [WW6]: I think we should name our client for this project.

Deleted: In

Deleted: ing

Deleted: , we provided qualitative data collection and analysis...

Deleted: which

Deleted: ed

Deleted: in order

Deleted: consider

Deleted: how

Deleted: accompanying

Commented [WW7]: Who selected us?

Deleted: impact

Commented [WW8]: Who praised us?

Washington IV-E Waiver Demonstration

For five years, we worked with the state of Washington to evaluate its Family Assessment Response (“FAR”) program, implemented under a federally monitored Title IV-E Waiver Demonstration. For this project, we interviewed administrators and caseworkers at over 40 offices across Washington. We designed and implemented an evaluation plan that included interviews with parents who were participating in FAR, which were conducted by “parent allies” who have had involvement with child protective service. We also worked with large data systems from multiple state agencies to analyze outcomes for children, youth, and families as well as program costs. We implemented a matched comparison group design to take advantage of the programs’ rolling implementation plan to ensure the most robust evaluation design possible. We were able to provide ongoing program feedback through regular agency briefings, reports, and legislative testimony that led to substantive changes in legislative policy and helped reduce out-of-home placements for children and families.

Deleted: TriWest

Deleted: together

Deleted: S

Deleted: e

Commented [WW9]: The term “lived experience” seems vague to me.

Deleted: with lived experience

Deleted: Child Protective Services

Deleted: in the form of

Deleted: change

Office of the Court Monitor, United States District Court for the Western District of Washington at Seattle, and the Department of Social and Health Services

On behalf of the court monitor appointed by the United States District Court, and in collaboration with the Washington Department of Social and Health Services, we conducted a forensic bed demand study focused on inpatient competency evaluation and restoration. We analyzed factors that were potentially driving a recent spike in statewide bed demand. Using referral data, we designed a model that calculated how long patients were likely to wait for available beds at the two state hospitals. The model showed how many additional beds were needed to satisfy court-ordered limitations on waitlists. We also created a web-based tool that allowed our client to make future changes in the forecast model based on changing assumptions about the growth rate of bed demand.

Deleted: appointed court monitor

Deleted: TriWest

Saginaw System of Care (Michigan)

We worked with the Saginaw County Community Mental Health Authority for eight years as evaluator and consultant for their System of Care and Expansion Grants. The SAMHSA-funded grants were intended to develop and expand a single, integrated system of care to provide comprehensive, community-based mental health services and supports for Saginaw County youth and their families. In the early stages, we helped develop the grant application and then provided technical assistance on grant implementation, service components, and project staffing and facilitated strategic planning and logic model development. Local evaluation activities included a Cultural and Linguistic Competency assessment of the family leadership team, a Family Involvement assessment, key informant interviews to assess stakeholder perceptions of the grant process and progress, Wraparound fidelity assessments through team observations, and management of the project Government Performance and Results Act National Outcome Measures requirements. The national evaluation activities included data

Deleted: TriWest

Commented [WW10]: Wasn't sure if this was necessary here—feel free to reject this edit.

Deleted: ing

Deleted: GPRA

analysis, monthly reporting, completion of a services and costs study, and completion of longitudinal outcome study interviews with youth and their caregivers, which were conducted by a parent interviewer with the experience of raising a child who has a mental illness or serious emotional disturbance. We also convened an evaluation advisory group with community stakeholders, including youth and family members, to help us interpret data through a local context.

Commented [WW11]: The term "lived experience" seems vague to me.

Deleted: with lived

Deleted: , data analysis, monthly reporting and completion of a services and costs study

Paso del Norte Health Foundation, Think.Change Stigma Reduction Initiative

We worked as the evaluator of the Paso del Norte Health Foundation's Think.Change Stigma Reduction Initiative, which was aimed at reducing the prevalence of mental health stigma in El Paso, Texas; Las Cruces, New Mexico; Deming, New Mexico; and Juarez, Chihuahua, Mexico. We developed surveys and outcome instruments to assess the impact of grantee-selected mental health stigma reduction activities such as Youth and Adult Mental Health First Aid, National Alliance on Mental Illness (NAMI) courses, and locally developed courses for promotoras (health workers) in colonias. We completed a population survey to assess mental health stigma in the region and evaluated the perception of stigma among residents with mental illness and their families. We translated surveys and tools into Spanish to ensure that individuals who preferred Spanish or were primarily Spanish speaking were able to complete surveys.

Deleted: TriWest