Two Approaches to Building Funding and Provider Support in Scaling a Promising Practice for Transition-age Youth with Implications for Sustainability and Growth of Evidence-informed Models

Blueprints Conference, May 2018

Youth VILLAGES®
The force for families

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Agenda

1) Model Overview

2) Approaches to Replication

3) Small Group Discussion

4) Discoveries and Considerations for Implementation and Scaling

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Model Overview

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YVLifeSet Model Elements

- Voluntary, young adult-driven services that last 7-9 months on average
- Minimum of one face-to-face session per week; 24/7 on-call to young adults
- Teams of 4-5 staff per team
- Low caseloads: Staff carry 8-10 youth
- Highly structured weekly supervision and consultation process
- Use of best-practice and EBP's to meet individual needs
- Structured program model and annual fidelity reviews
- Outcome data collection at 6, 12, and 24 months

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Service Components

- Pre-Enrollment/Psychosocial Assessment
- Casey Independent Living Assessments
- Assessments to determine clinical necessity for evidence-based interventions
- Structured Treatment Design & Clinical Protocols
- On-Line Clinical Manual

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Evidence-based and best practices

Evidence-based practices:

- CBT (Cognitive Behavioral Therapy)
- Motivational Interviewing (MI)
- Community Advocacy Project (CAP)*
- Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)*
- Adolescent Community Reinforcement Approach (A-CRA)*

Best practices as outlined in the online clinical portal:

- Sexual Health Modules
- Casey Assessments
- Preparing Adolescents for Young Adulthood (PAYA)

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Clinical and Operational Training and Support

Training at Start Up	• On-site 3 Day Clinical Foundations Training • On-site 1 Day Supervisor 'Group Supervision' Training • On-site 3 Day Operational Foundations Training • Operational Foundations for Supervisor via Adobe Connect
Weekly	• Clinical Consultation conducted via Adobe Connect • Supervisor Development Meeting • Red Flag Case Review Meeting • Weekly Implementation Meeting with Program Lead
Monthly	• Monthly Key Performance Indicator Review
Quarterly	• On site Clinical Booster Training: Provider Specific
As Indicated	• EBP Training as Selected • Staffing cases with Clinical Consultant as needed • Supporting Staff Development Activities

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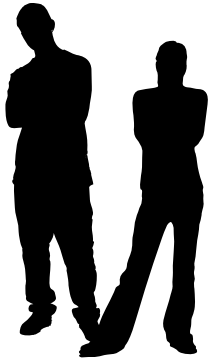
The MDRC Study

A random assignment evaluation with a sample size of more than 1,300



60% received YVLifeSet services

40% had access to usual community services

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The MDRC Study

Youth participated in nearly one individualized session per week, averaging over an hour per session.

Sessions covered a wide range of topics:

- Education issues
- Employment issues
- Housing and economic stability
- Mental and physical health
- Relationships
- Sexual health
- Alcohol or drug use
- Criminal justice
- Government support

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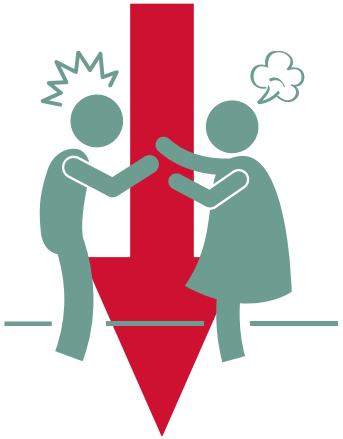
Study Results: Health and Safety

Mental health problems

13%

Violent relationships



30%

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Study Results: Employment and Earnings

17%
increase in employment

7%
increase in earnings

Notable given the national decline in youth employment at the time of the study

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Study Results: Housing Stability and Economic Well-being

22%
decrease in homelessness

13%
decrease in hardship, lack of food, etc.

Notable given that the program does not offer housing or substantial financial support

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Approaches to YVLifeSet Replication

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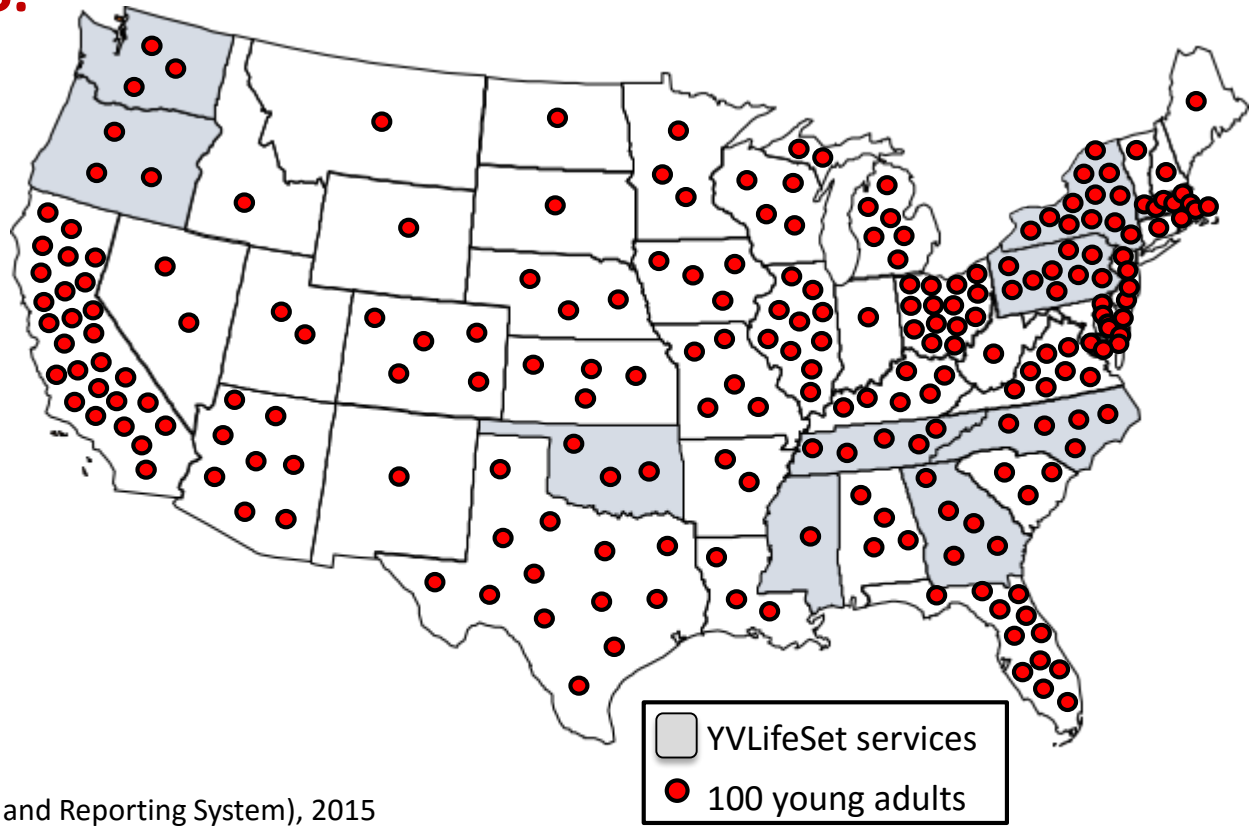
More than 20,000 young people age out of foster care every year in the U.S.

- **45 states have extended care** (24 through federal IV-E)
- **Most extended care youth exit before their 19th birthday**
- **Most entered care at 15 years old**; 30% have been in care > 3 years



[1]AFCARS (Adoption and Foster Care Analysis and Reporting System), 2015 data; Child Trends fact sheet: "Transition-Age Youth in Foster Care"

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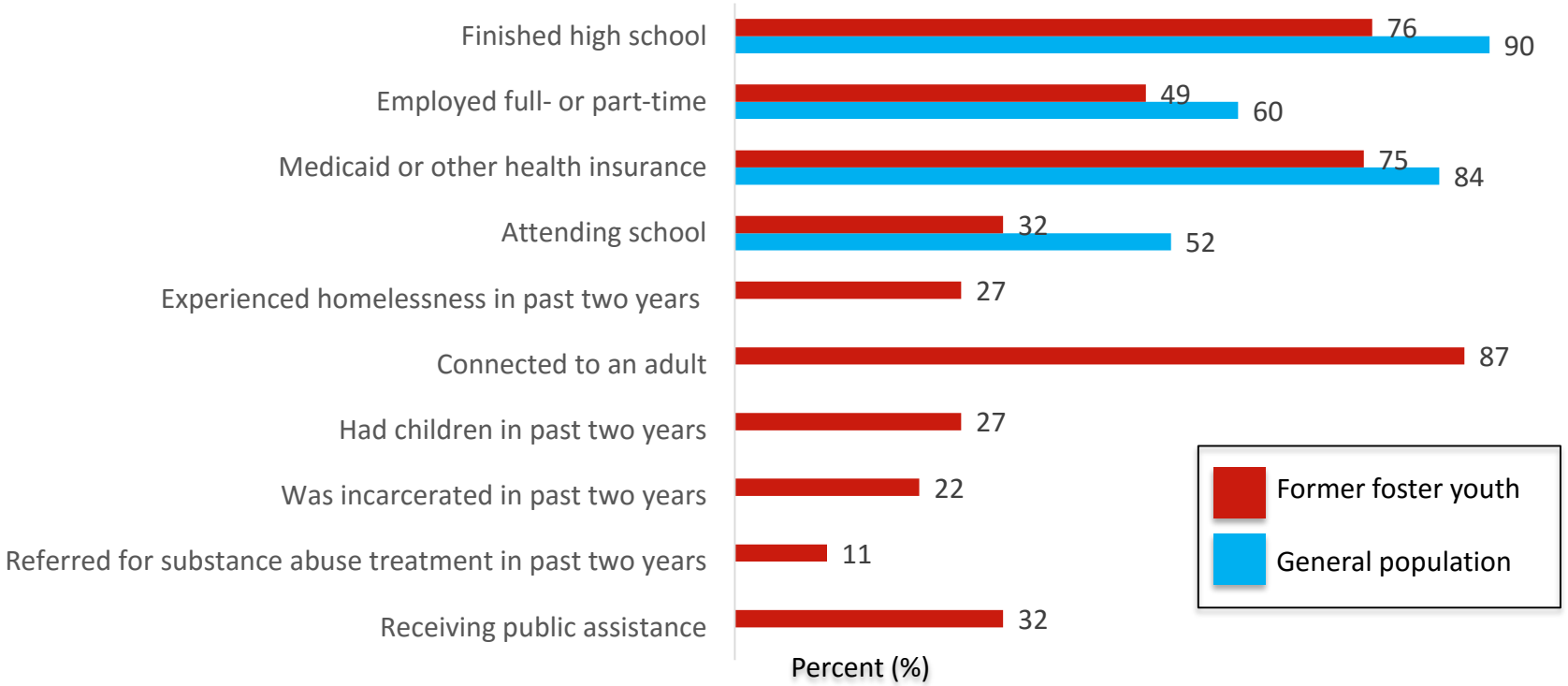
Outcomes at age 21 for youth who were in foster care



[1]AFCARS (Adoption and Foster Care Analysis and Reporting System), 2015 data; Child Trends fact sheet: "Transition-Age Youth in Foster Care"

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Why replicate YVLifeSet?

Blue Meridian Partners is a partnership of **results-oriented philanthropists** seeking to **transform the life trajectories of children and youth living in poverty across America**.

Blue Meridian **finds the best of what works** and **invests significantly to bring these promising strategies to scale**.

Blue Meridian has selected **Youth Villages** and **YVLifeSet** as a program to scale in order to **solve the problem of the poor long-term outcomes experienced by older youth "aging-out of care**."

Meeting Scale with Scale

solutions at scale through investments at scale

*Blue Meridian is being incubated by the Edna McConnell Clark Foundation (EMCF), whose decades of experience in combatting poverty, performance-based philanthropy, and capital aggregation have informed our approach. EMCF is one of the founding General Partners.

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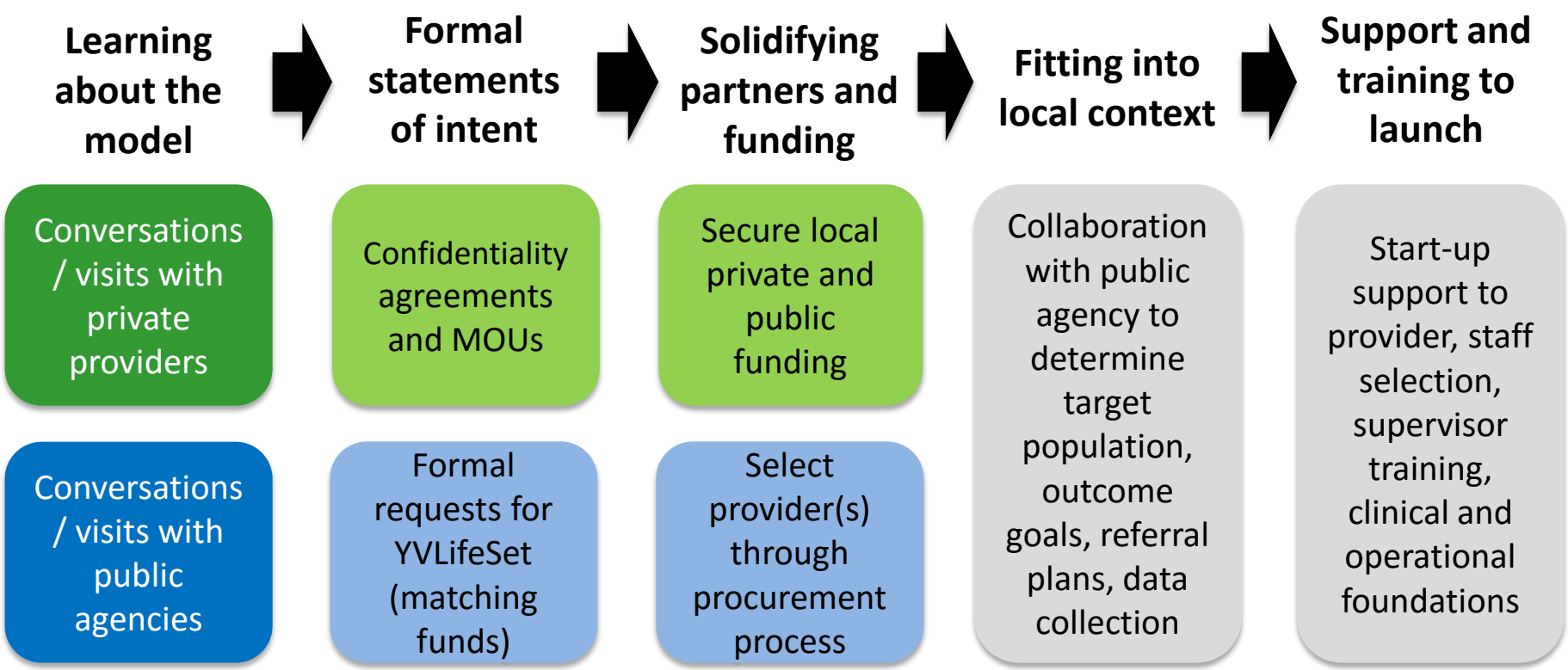
Paths to Replication of YVLifeSet



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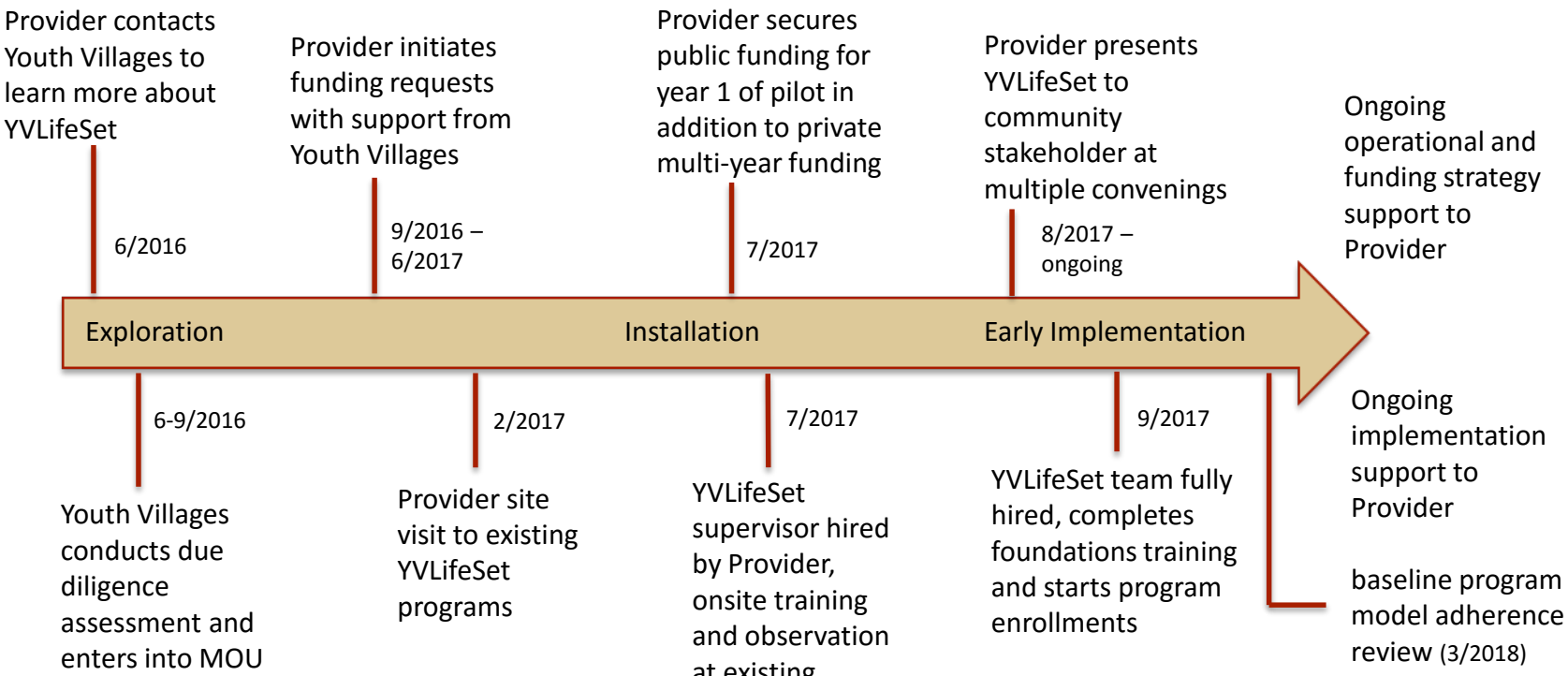
Replication Scenario A



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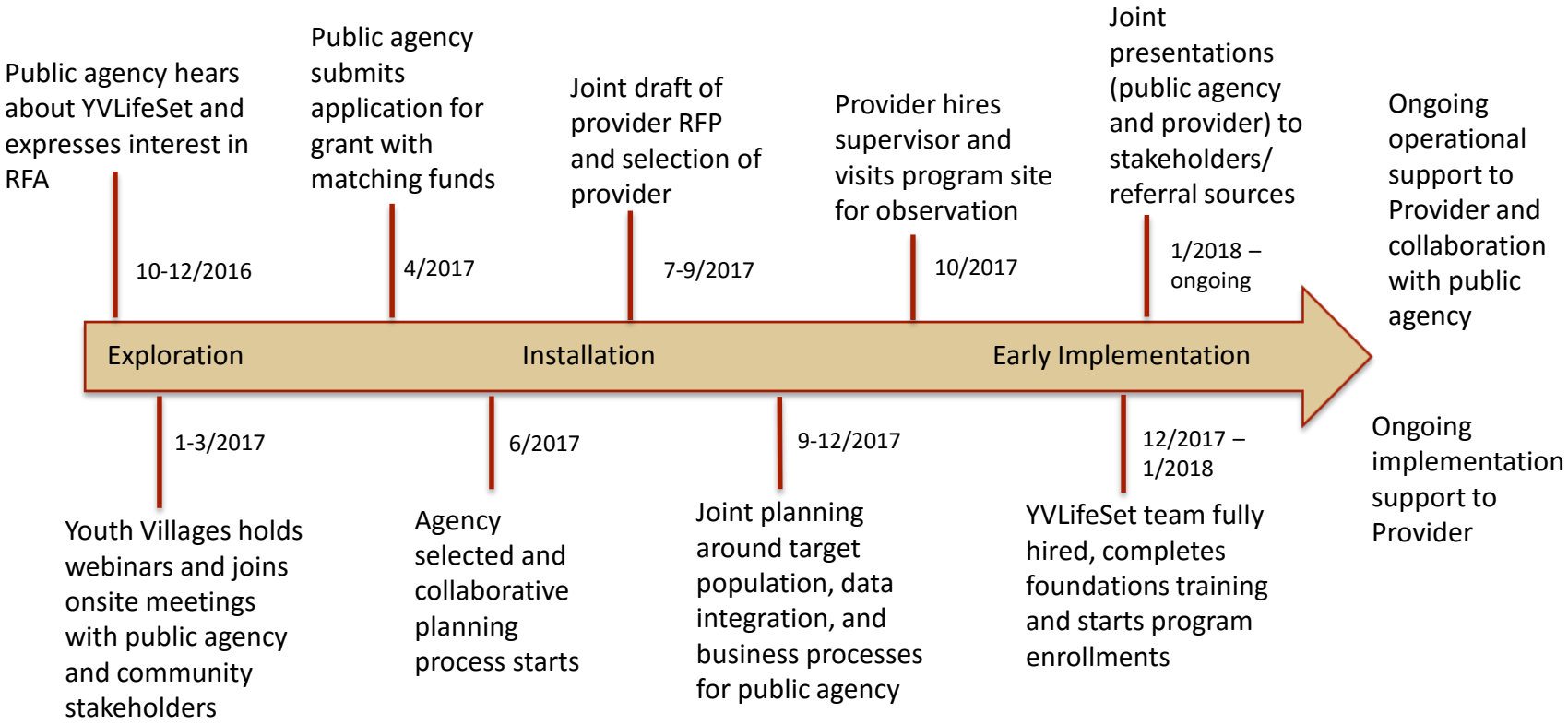
Replication Scenario B



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Small Group Discussion

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Discussion Questions

1) Does one scenario provide a higher likelihood of fidelity in model implementation? What implementation drivers do you believe may be different or the same in each scenario that support your hypothesis around likelihood of high fidelity implementation?

2) Does one of the scenarios have a higher likelihood of long-term sustainability of funding for the promising practice? What factors do you believe impact long-term sustainability of funding?

3) Is one of the scenarios better positioned for scaling? In your opinion, what are factors that influence this?

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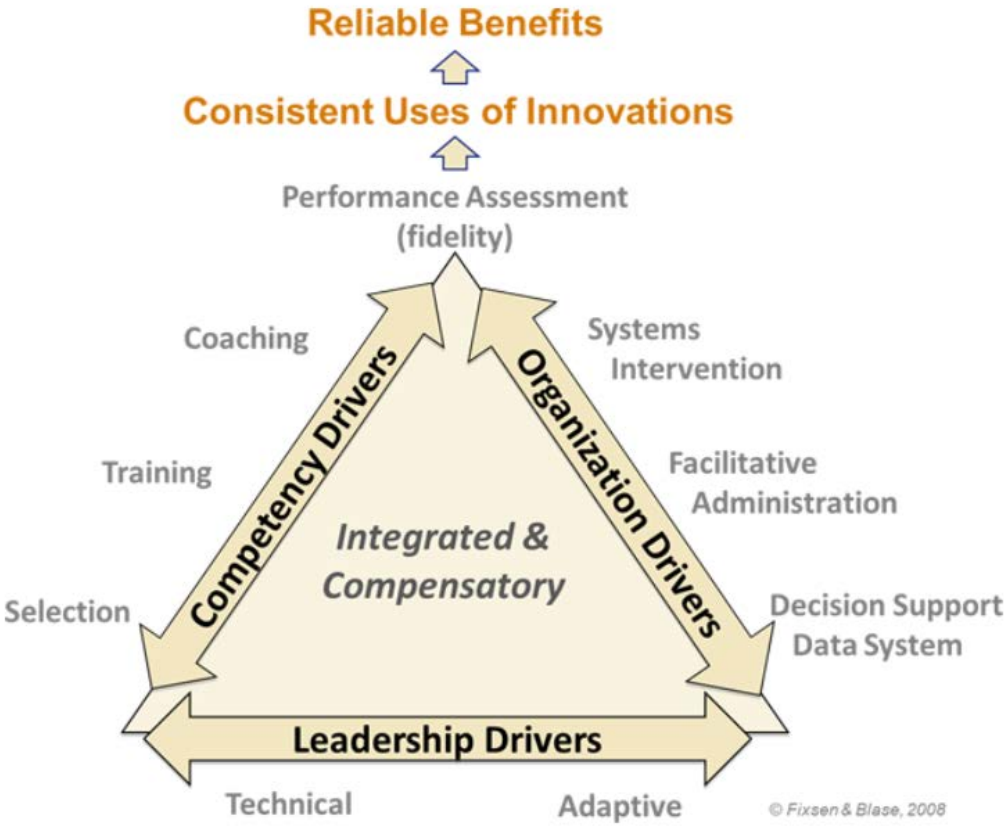

Implementation Drivers

Credit: NIRN

(Fixsen & Blase, 2008)

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Discoveries and Considerations for Implementation and Scaling

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Considerations for Implementation Fidelity and Outcomes

- Provider selection criteria and level of organizational commitment
- Support of provider with staff selection
- Program observation in existing direct service sites and/or replication sites
- Accessibility of program/ eligible population and collaboration with funding source
- Data integration across public agency, private provider, and purveyor data management systems
- Funder oversight and leadership regarding new model implementation

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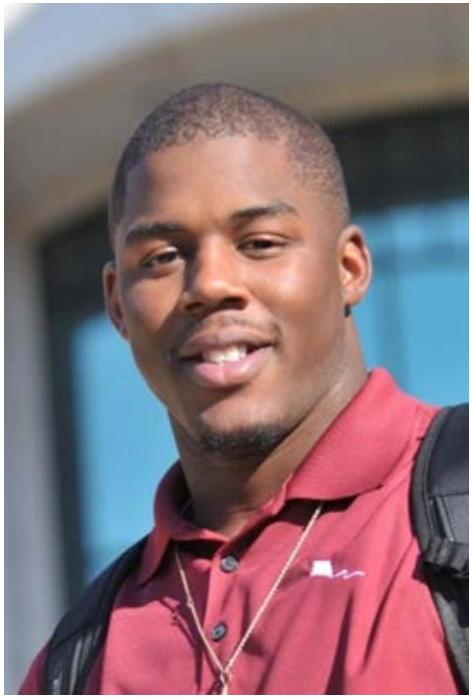
Considerations for Scalability and Sustainability



- Champion leader in public child welfare agency who has devoted resources and ongoing attention to the implementation of the new practice/program
- Integration with existing service context and landscape
- Coalition of community champions and stakeholders advocating for initial implementation and sustainability of the practice/program
- Implementing provider level of ownership and shared vision in scaling the program

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Thank you for attending!

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