



Colorado **LINKS** for Mental Health

Behavioral Health Action Plan Benchmarks

The benchmarks below are a window into the complexity of systems change efforts. LINKS is unique in the history of behavioral health system reform in Colorado because it fully engages communities, youth and families – not only in developing the plan for reform, but in playing leadership roles in implementation and long-term activities within the system. It is not state government doing “business as usual,” but rather it is those affected the most by state government becoming *active* participants in opportunities to improve and enhance the current and future system.

Priority#1: Integrating Behavioral Health Efforts

Outcome 1: Streamline practices across state agencies and increase interdepartmental coordination.

- ✓ **Benchmark #1:** Three *leadership teams* are formed and meeting regularly to address the three following priorities. These teams will be made up of:
 - Representatives of the various interagency planning groups already focusing on these outcomes, to provide the breadth and depth of expertise needed to achieve the outcomes;
 - Decision-makers and their designees, to ensure the system changes can be implemented; and
 - The LINKS project director and consulting staff, to support the work of the teams during and between meetings.
- ✓ **Benchmark #2:** *Signed commitments* by State Department Directors, the Governor and the First Lady for the LINKS action plan are achieved in partnership with the Colorado Prevention Leadership Council.
- ✓ **Benchmark #3:** *Signed MOUs/MOAs* between key interagency groups and statutory bodies will demonstrate their commitment to action around integration of behavioral health efforts; partnering with families and youth; and streamlining budgets, funding and financing.
- ✓ **Benchmark #4:** *Common language* around integration, family/youth partnership and flexible funding strategies are developed and documented *in state-issued RFPs* in partnership with the Colorado Prevention Leadership Council.

Outcome 2: Help local communities develop specific integrative practices & engage non/traditional partners.

- ✓ **Benchmark #5:** An *on-line clearinghouse* is hosted and sustained by an agency or statutory body which includes tools to enable local communities to develop and implement integrative practices, such as:
 - Examples of other Colorado community approaches and “lessons learned”
 - Step-by-step guides from national efforts such as the Systems of Care Primer
 - Tools addressing cultural competency, assessment and evaluation, etc.
- ✓ **Benchmark #6:** *Local communities*, consumer advocacy groups and statewide family organizations have *identified needed regulation changes* in order to remove barriers to integration at the local level.

Priority #2: Partnering with Families and Youth

Outcome 1: Ensure consistent and institutionalized participation of families and youth in state and local boards.

- ✓ **Benchmark #7:** Representatives of all interagency groups in the LINKS Guidebook are trained on the value of and meaningful ways to involve families and youth.
- ✓ **Benchmark #8:** At least 50 families and 25 youth are trained on participating in policymaking and on boards, committees, commissions and councils at the state and local level.
- ✓ **Benchmark #9:** All interagency groups in the LINKS Guidebook have family and/or youth participating in their planning and implementation efforts, including revised membership bylaws regarding family and youth participation, where possible.
- ✓ **Benchmark #10:** As a component of Benchmark #5, a *clearinghouse* of boards, committees, and councils working on kids’ mental health will support families and youth interested in participating at the policy level.

Priority #3: Creating Innovative Strategies for Budgets, Funding and Financing

Outcome 1: Reform budget, funding and financing practices in order to develop long-term, consistent and flexible funding streams.

- ✓ **Benchmark #11:** A concrete list of barriers to flexible funding across State agencies, including regulations, state rules, etc. is developed.
- ✓ **Benchmark #12:** A cost-benefit analysis of flexible funding is developed.
- ✓ **Benchmark #13:** A common message based upon the barriers and cost-benefit analysis of financing reform is created and disseminated to key state leaders and decision-makers at the state and local levels.

~ Summary of LINKS Benchmarks ~

Priority #1: Integration of Behavioral Health Efforts	
YEAR 1	YEAR 2
#1: Leadership teams are actively meeting.	#3: Signed MOUs/MOAs
#2: Signed commitment by key state leaders	#4: Common language in state-issued RFPs
#6: Identify needed regulation changes	#5: Clearinghouse for local communities

Priority #2: Partnering with Families and Youth	
YEAR 1	YEAR 2
#7: Training for LINKS Guidebook partners	#9: Families and youth participate on Guidebook groups.
#8: Family and youth training	#10: Clearinghouse of boards and committees

Priority #3: Streamlining Budgets, Funding and Financing	
YEAR 1	YEAR 2
#11: List of barriers identified.	#13: Common message based on barriers and cost/benefit analysis is shared.
#12: Cost-benefit analysis completed.	