Care Management Coalition of Western New York, Inc.

Participating Organizations

- Baker Victory Services, Lackawanna, NY
- Boys and Girls Clubs of Buffalo, Buffalo, NY
- Buffalo Urban League, Buffalo, NY
- Child & Family Services, Inc., Buffalo, NY
- EPIC, Buffalo, NY
- Gateway-Longview, Inc., Buffalo, NY
- Joan A. Male Family Support Center, Buffalo, NY
- New Directions Youth and Family Services, Inc., Lockport, NY

Please note that all data below was derived from the collaboration's nomination for the Collaboration Prize. None of the submitted data were independently verified for accuracy.

Formation
Type of Collaboration:

- Joint Programming to launch and manage one or more programs
- Administrative Consolidation to share, exchange, or provide back office services such as accounting, IT, human resources
- Merger by which governance, programs and administrative functions have been combined but which may or may not have included the integration into a single corporate entity.

Geographic Scope: Multi-County
Collaboration Focus Area: Human Services
Population Served: Families
Year Collaboration was Established: 1998
Goals Sought Through Collaboration:

- Develop a stronger / more effective "voice"
- Improve the quality of services / programs
- Leverage complementary strengths and/or assets

Reasons Prompting Collaboration:

- Advancement of a shared goal
- Response to a community need
- Response to a funding opportunity

Who Initiated Collaboration:

- Executive Director(s) / CEO(s) / President(s)
- Community leader(s) / organization(s)

Number of Participating Organizations: 8-10
Nature of Funder Involvement:

- Suggested / encouraged the collaboration
- Funded implementation

Were Partners Added or Dropped?: Yes
Consultant Role:

- To conduct financial due diligence
- To draft the governing agreement or provide other legal advice
- To facilitate negotiations or discussions that led to the formation of the collaboration
- To develop a business plan or strategic plan for the collaboration

The Chief Executive Officers of five large, quality-driven human service agencies met on a regular basis over several years to collectively better serve the needs of the children and families of Western New York that depended on them. They decided to incorporate this group into a unified, not-for-profit coalition in 1998. Each agency has retained its independent status and mission but works collaboratively to improve the services they provide for those in need. They are committed to being the voice for those unable to speak or be heard. Of the 5 remaining members, 4 remain today and comprise the Coalition's solid foundation.

Management

Management Structure: One Executive Director / CEO / President
The founding members of the Care Management Coalition of Western New York, Inc. understood the importance of retaining their agencies' independence while also functioning as a collective body for the improvement of the overall systems of care. It was therefore agreed that the board of director's would be comprised of the acting CEOs from each of the founding agencies and one elected representative from all subsequently added members. This process is culminated at the Annual Meeting where, after the election of the 'B' agency representative (non-founding members), the full membership then elects the officers for the coming year. The membership is therefore comprised of the CEOs from every member agency and the Board of Directors is comprised of the "A" agency (founding members) CEOs and the 'B' agency representative. For the first time in the Coalition's 12 year history, the acting board president is the 'B' agency representative. This truly exemplifies the governing spirit of open, transparent and collaborative leadership for the good of all. By regularly incorporating new and innovative Coalition leadership through the Member Nominating Committee and Annual Meeting process, the Coalition's future potential for success and sustainability are maximized. This system assures that new and innovative approaches to effective operations, management and advocacy will be regularly upgraded and evaluated. Incorporated throughout this process are ongoing self-assessment exercises designed to measure collective and individual progress and assess Coalition membership value to the agency and the region.

Challenges

Challenges to Making the Collaboration Work:

- Raising funds or integrating fund development to support the collaboration
- Creating a shared culture
- Facing competitive factors in the operating environment

Given the fact that, to some extent, each Coalition member is competing for services in an extremely difficult environment, it has been absolutely essential to maintain an open, transparent method of operation. It is widely understood that we are facing a societal 'perfect storm.' Driven by the economic challenges we all face, the societal needs for social and mental health services are steadily increasing while the funds required to support them are steadily shrinking. This environment could either drive increased collaboration and efficiencies or it could result in the collapse of institutions and a further erosion of the basic needs to remain a civilized, productive society. The strength and effectiveness of the well-organized, unified work of the Care Management Coalition of Western New York is widely recognized and appreciated now more than ever. We constantly strive to remain vision-focused in every facet of our operation and decision making process. This Coalition remains the ‘unified voice supporting the needs of families and children.’

Impact

Internal Efficiencies and Effectiveness:

- Human resources - Shared and / or improved training and professional development
- Greater ability to allocate resources to areas of need - Greater ability for each partner to focus on core competency
- Greater ability for each partner to focus on core competency - Greater ability to allocate resources to areas of need

Community Impact:

- Increased collaboration with / among other community organizations (beyond the scope of the original collaboration)
- Stronger / more effective "voice"
A regular and ongoing subject of the board/membership process is a self-assessment of the organizational effectiveness of each member agency as a result of Coalition membership. There are formally organized inter-agency operational committees comprised of, but not limited to, Human Resources, Corporate Compliance, Staff Training (Supervisory, Community-Safety), and Staff Recruitment/Retention. These committees drive the internal support needs’ decisions of the Coalition and serve as a conduit for “top-down” and “bottom-up” priority assessment and communication. On a global scale, the Coalition has earned the well-deserved reputation as the regional convener for systemic quality measurements and data management improvement. The Care Management Coalition is firmly entrenched as the conduit for representing the recommendations and needs of the entire regional preventive services agency network. We have positively influenced the entire county RFP process and driven positive and tremendously needed improvements throughout the overall system of care. We also spearheaded a recent state-wide effort that successfully documented and presented the need for preserving funding streams for specific preventive services based not only on societal impact but also on sound financial investment strategies. The Coalition’s Executive Director/CEO also chairs the Advocacy Committee for the Erie County Community Coordinating Council on Children and Families. This council, under the Advocacy Committee leadership, is deeply engaged in a data management project for the collective needs of the private service providers and the county. These efforts are fully supported and endorsed by the broad spectrum of service providers and funders throughout Western New York and beyond. By clearly demonstrating positive outcomes, the providers of quality services benefit through definitively demonstrating those outcomes, the counties and state are better able to make difficult funding decisions based on more clearly trended data and the private foundations are able to focus on supporting programs that truly have a positive and lasting impact. Finally, the ultimate beneficiaries are the families and children that are the ultimate recipients of these life-changing and sometimes life-saving services.

Model

There are almost 4,000 human services and mental health professionals employed through the Coalition’s agencies. Each is committed to being a leader throughout the industry. They are driven by and held accountable to national research-based best practices. Through the refinement and implementation of these efforts, the services delivered by the Coalition’s members are stellar and serve as the regional model for other providers. The Coalition is Mission-Driven. It collectively fosters the well-being of families and children through strategic advocacy efforts and by improving the member agencies quality of service, outcomes and capacity. To fulfill our Vision of being the unified voice supporting the needs of families and children, we never take for granted the role we play - collectively and as individual service providers - nor do we fail to appreciate and respect the leadership role we have hold for every service provider, family and child throughout the 8 counties of Western New York and now growing towards the rest of New York State. As we begin to emerge from one of the most traumatic economic and societal periods in our history, the leaders and members of the Care Management Coalition of Western New York, Inc. are committed to helping everyone function as a more compassionate, efficient and collaborative society. We cannot afford not to.

Efficiencies Achieved

A significant strength of the Coalition is the presence of inter-agency committees, including Human Resources, Compliance, Best Practices and Staff Training. Each committee is comprised of management personnel from the member agencies. Committees are designed to foster savings of administrative resources while demonstrating positive, ongoing improvements in the quality of service and the resultant meaningful outcomes. Regular meeting schedules vary by committee but are either quarterly or monthly. Each committee is charged with its own mission and metrics and is evaluated and held accountable to the same through the Coalition’s Board of Directors and the Executive Director.

Given the inherent difficulties of delivering consistently high levels of quality social and mental health services to a rapidly growing and more challenging population of constituents, it has become increasingly more difficult for the service providers to remain viable and sustainable. Revenue is substantially down while the demand for services is significantly up. The collaboration, elimination of certain administrative redundancies and transparent sharing of information practiced through these committees has allowed each member agency to channel valuable saved resources back into direct services. Regional and national memberships to worthwhile coalitions and similar membership organizations have been utilized through the Coalition for the benefit of all. Templates for compliance standards and a myriad of HR criteria have been specifically developed by and for each member. Worthwhile training opportunities for the betterment of all are continually sought and utilized. Staff turnover is historically high among these types of organizations. The criteria, expectations, and demands on entry-level staff throughout the social services and mental health sectors in particular are stringent. It is also difficult to provide competitive wages for these workers. The economy is driving streamlined budgeting practices necessitating that every available dollar be channeled into the direct care for the recipients of the services. The ability to conserve these administrative costs has been a significant asset for the member organizations.

The quarterly staff training sessions provided by the Coalition for its members are a tremendous asset to address staff retention as well as the quality of overall delivery of services. Three-day supervisory and community-safety trainings are conducted four times a year and are open to the professionals from the member-agencies. The
training committee and team are comprised of seasoned supervisors from each of the members. Course graduates provide open feedback throughout the session and formally at the conclusion. The newly-trained personnel are also encouraged to join the Coalition’s training team, if interested and available. Each agency has formally incorporated these trainings into their individual agency’s specific staff improvement requirements.

The collective attrition rate of the Coalition’s member agencies is currently under 15% after 2 years of employment. The national average exceeds 30%.

The Care Management Coalition has attained a lead role in the leadership of the Erie County Community Coordinating Council for Families and Children. This council is comprised of the numerous social services and mental health providers throughout Erie County and the eight county region of Western New York. It is chartered through the county to provide oversight and leadership to these agencies and to make recommendations to the county legislature for policy revisions when appropriate. The Care Management Coalition has headed a system-wide project on the standards, assessment and evaluation of data outcomes throughout the service sector. The goal is the coordination, with families, of schools, health & human services, law enforcement and healthcare sectors to advocate for improving children’s academic, social, health & wellness and emotional outcomes. Given the traumatic economic climate affecting all facets of our society, the Coalition strongly believes that it has an obligation to advocate for the transparent measurement and sharing of the data that ultimately influences the services received by children and families throughout Western New York and beyond.

The Care Management Coalition of Western New York, Inc. is the unified voice supporting the needs of families and children. This underlying motivation drives every collaborative effort and decision. It is the impetus for the determinations to advocate for systemic change when deemed warranted. A recent effort was conducted to demonstrate the tremendous need to support and deliver quality preventive services, designed and intended to support children and families before they have formally entered the county and/or state-mandated system through child protective services, foster care, or judicial intervention. The Coalition led a successful state-wide effort that not only highlighted the impact on societal standards of life and well-being, but also the proven financial effects of short and long term neglect of these ‘non-mandated’ services. It is currently engaged in a county-wide foster care advocacy effort to hold the overall impact of the systems’ affect on children as central to all decisions and actions.

The numerous inter-agency program collaborations as a result of Coalition membership are noteworthy. Several joint projects have started and thrived through member agency relationships. From pilot projects to joint service-delivery models, thousands of constituents throughout this region are positively affected annually due to collaborative ideas that came to fruition as a direct result of Care Management Coalition membership. Coalition members have not ceased to be competitors in the regional service delivery market. To the contrary, due in particular to an aggressive ongoing county Request For Proposal process intended to outsource traditional publicly-delivered services to the private sector, in many ways the environment is more competitive now than ever. We have, however, chosen to focus more now than ever on one of our Core Values; ‘Be good partners, willing to work in a spirit of collaboration before competing if it results in a stronger project that creates better outcomes for children and families.’

The Care Management Coalition of Western New York, Inc. has never lost sight of its Mission; to ‘Collectively foster the well-being of families and children through strategic advocacy efforts and by improving the quality of service, outcomes and capacity for its members.’
Evolution

The initial collaborative efforts of the 5 founding members of the Care Management Coalition were driven by the need to collectively address a perceived threat in the New York State residential reimbursement rates for foster care and hard-to-place children. The potential reductions in state funding would have substantially eroded the quality of care and created an operating deficit for all the private residential services providers. It could well have resulted in the demise of the entire system of residential care. It was correctly perceived to be a real and present danger. Very few situations at that time, real or perceived, could have prompted these competitive service providers to sit around the same table and to work together in a spirit of trust and collaboration. The legislative change in rate-reimbursement, in fact, actually never came to fruition. The immediate collective threat that prompted this informal collaborative was gone. The leaders of the agencies, however, had been meeting regularly, sharing philosophies and strategizing as one for almost 2 years. Each had grown to respect and appreciate the intrinsic values and core strengths of each of the other agencies. Each also grew to realize that, through cooperation, collaboration and ultimately trust, significantly greater good on a more global scale could be accomplished for the families and children they all served.

The group formally incorporated the collaborative into a 501 (c) (3) not-for-profit corporation in 1998. The original board of directors was comprised of the professional leaders of the initial 5 chartered members. These Chief Executive Officers elected officers annually from among themselves and hired a full-time Executive Director to manage the operational needs of the Coalition. The annual operating budget was assisted by a start-up grant from a local foundation and then composed entirely from member-supported dues. As new member agencies joined, their governance privileges and dues obligations were less than the original chartered members as per the Bylaws and Articles of Incorporation. The Coalition recently completed an extensive re-evaluation of its business model and strategic plan. One of the many positive results from this undertaking was the restructuring of the board governance and the reduction of the membership dues structure (for the now 10 members). Every agency now shares equal governance privileges (one member, one vote) and the annual dues are based entirely on each member agency’s annual operating budget. This model solidifies the viability and sustainability of the Coalition for the foreseeable future and allows it to grow in scope and effect.

When the Care Management Coalition formally incorporated 12 years ago, many of the initial challenges faced by the founders pertaining to transparency and trust issues had been diminished. It is interesting to note, however, that once the collectively perceived threat of the state’s reductions in residential rates was lost, many of these issues experienced a resurgence. Much of the time and energy expended by the directors was, and is to this day, focused on the most effective means to identify and mediate shared issues and the overall process of setting relevant priorities that affect every member collectively. It remains crucially important to strategically focus on the best interests of all the children and families while realizing and including the shared priorities of each individual member agency.

This unique organization has pro-actively cultivated a tremendous climate for collaborative efforts. This system has become a part of each agency’s culture. The ability to speak with a unified voice has resulted in regional and state-wide improvements to the entire system of care. Noteworthy advocacy projects have included state-wide advocacy for funding ‘optional’ preventive services; leading regional quality of service initiatives; specialized trainings for county-wide service networks; driving regional foster care and adoption standards; driving county RFP improvement processes; coordinated intake process for county family court; leading regional data outcomes management; and collaboration on continuing care services through New York State Office of Children and Families. Inter-agency initiatives that strengthen service deliveries include ongoing centralized best practices; Supervisory and Community Safety trainings; collaborative grant proposals for local, state and federal initiatives; cost-effective purchasing initiatives, including a pending breakthrough in group-insurance rates; cross agency youth and family service delivery surveys; sharing information technology; and regularly scheduled member forums to openly discuss and strategize seamless solutions for community’s child and family service needs.

A formal annual assessment of the Coalition is completed by each director annually. This is an evaluation of the organizational value to the community as a whole and each individual agency’s membership value. Feedback is also pro-actively sought and received from many of the additional community service providers that interact with the Coalition, as well as the governing and funding bodies that work with it. These include county and state social service and mental health departments, educational systems, United Way organizations, local foundations and even individual families. We believe that it is imperative to regularly ask ‘Are we doing what we should and how well are we doing it?’

The Coalition is currently evaluating how to best advocate for the resources that are required to support a tremendously neglected segment of our society. There are currently no sufficient ways in place through which to correctly identify and provide quality care for children and their families that have experienced severe trauma but have not yet formally entered the social and/or mental health systems. There is no available funding for a child or family to receive these life-changing or, at times, life-saving preventive services for the lasting effects of trauma unless they are in this ‘system.’ By then it is often too late to effectively deliver evidence-based treatment services or to provide a valid means for them to exit the ‘system’ successfully; resulting in severe societal issues and increasingly-stressed deep-end financial shortfalls. The children and families are often permanently damaged and
must be indefinitely supported by the far too stressed resources from the rest of society.

We are thankful that The Collaboration Prize has chosen to look further at the good work of the Care Management Coalition of Western New York, Inc. It would be an honor and a privilege to receive much needed support from your outstanding organization. We are proud to assure you that it would be most efficiently utilized.