Rural Nevada RIMS Summary

- 22 people responded to the survey; 20 met the criteria for inclusion in the data analysis.
  A description of the 56 respondents’ roles in the project is:
  - 8 Mental Health Providers
  - 5 Community service providers
  - 2 Supervisors/Administrators
  - 1 Interested community member
  - 1 College educator
  - 3 System of Care Staff
  - 2 Other (1 police administrator, 1 No information)

- Readiness score for participants was 2.72 out of 5.00; Rural Nevada’s score was in the below average range and falling within the first standard deviation below the mean.

- The Rural Nevada site received the highest ratings on items that reflect commitments to collaboration and willingness to work together, as well as recognition of the needs for more services in the communities.

- Of the 9 highly ranked items, 5 of them address issues related to the planning for and design of services, including commitments to collaboration, willingness to work together, and recognizing the need for more services in the communities.

- It also appears that the requirement for integrated services across child-serving agencies as delineated in NRS 433B, has had an impact on the organization and the delivery of services, providing an important foundation for system of care development.

- However, none of the high level ratings include any reference to family or youth participation which seems unusual considering that a priority role for families is required for NRS 433B.

- The majority of low ranking items fall into areas that delineate next steps. The low-ranking items involve facets of the system of care that are not typically seen in early stages of implementation.

- Of the 9 lowest ranked items, 7 involve families and youth and address issues that will take substantial collaboration and cooperation to implement. Low rankings offer clear guidance on what needs to be addressed to develop a system of care.

### Ranking of Components

<table>
<thead>
<tr>
<th>Component</th>
<th>Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understanding Comprehensive Services Needs</td>
<td>3.29</td>
</tr>
<tr>
<td>Shared Goals across Stakeholders</td>
<td>2.99</td>
</tr>
<tr>
<td>Evaluation</td>
<td>2.82</td>
</tr>
<tr>
<td>Committed Stakeholders</td>
<td>2.49</td>
</tr>
<tr>
<td>Community Involvement</td>
<td>2.44</td>
</tr>
<tr>
<td>Commitment to Family &amp; Youth Partnerships</td>
<td>2.25</td>
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</tbody>
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Rural Nevada has rated their site highly on Understanding Comprehensive Service Needs and Shared Goals across Stakeholders. When considering the least ready area, the component Commitment to Family & Youth Partnerships is the area where the most work is needed. It should be noted that all 6 of the domains are scored low, below the average of other sites that have been assessed. The foundation on which Rural Nevada proposes build a system of care is not strong, indicating that much work will need to be done to establish their system.
Actions Steps

Most Ready:

- There is a felt need for services within the community by the stakeholders.
- There is a willingness to work in a fair, inclusive, and open manner.
- There are strong relationships and commitments to collaboration among community partners.
- The community partners are willing to have open discussions and come to agreement on what some of the barriers and obstacles are to making the changes necessary to have a system of care.
- Services are being designed to be customer driven and strength and solution focused.
- The staff and the community partners have a demonstrated knowledge of characteristics of the population to be served.
- Sustainability of services is part of the discussion from the beginning, not waiting until the end of the funding period.
- There is a commitment from policy makers, community leaders, partners, and staff to the system of care values and principles.
- The community partners have a willingness to share resources: knowledge, staff, dollars, understanding that it is through a joint investment that joint success is achieved.

Least Ready:

- Families have been at the table throughout the visioning process.
- Community organizations such as faith-based groups have participated in the planning process.
- The community is being provided with examples of what following the values and principles of the system of care looks like in order to understand what a shift in thinking and practice it is from how they currently serve children and families.
- Everyone—community partners, leaders, families, and youth—understand the principles on which the new system will be built and share the same values.
- Families are willing to take a lead role in taking the vision to reality.
- An advisory or leadership board has been established that has at least 1/3 parent participation and they have input on the design and implementation of the project.
- Key family contacts and youth leaders have been identified prior to the application submission so that the groups are ready to roll once the funding is received.
- Family members and youth are active members of the community system of care initiative.
- Youth people are being provided support and training so that they can participate fully and comfortably in system of care planning, implementation oversight, and evaluation.

The results of the initial readiness assessment of Rural Nevada community are moderate. The respondents’ ratings indicate that although there is the beginning of a foundation on which to build a system of care, there is much work to be done in this effort is to be successful. The Rural Nevada site faces challenges of system building and of geography, to develop a system of care across a wide expanse of the state.