Boone Impact Group Taxonomy of Services Survey Feedback and Responses

Revised: June 1, 2017

Overview:

The following document contains feedback from local organizations regarding the Boone Impact Group (BIG) Taxonomy of Services draft. The table outline follows the survey designed to collect the feedback. The Question/Service Category relates to the service category found on the BIG Taxonomy of Services. The Feedback column contains survey comments from respondents. Lastly, the BIG Response column provides information/reasoning on changes made or not made to the taxonomy per a feedback comment.

Question/Service Category:	Feedback:	BIG Response:
General Feedback	While I can't speak to all areas, some of the taxonomies might need to be further subdivided to represent what different organizations due.	RFP applications provide organizations the opportunity to describe services more thoroughly.
	The taxonomy is promising and has the potential to be helpful. I especially like that the BIG partners are working together on this. That is promising as well, offering the potential for more comprehensive funding. My one concern at the outset is about how flexible the taxonomy may be as it is used and the service landscape experiences change.	The document will remain open to make edits as gaps are discovered, definitions need to be adjusted, and additional feedback is received from experts. Innovative services will still be considered and may be added to the taxonomy.
	What about meals and snacks that are provided to youth as part of the "around school support programs"? What about transportation support for families that don't have transportation to enroll their children in "around school support" and our agency is providing for that to help close the opportunity gap. I don't feel your enrichment categories are broad enough.	• Food/snacks provided in a program setting would fall under '1.2 Congregate Meals' • Transportation (1.22) has been added to included services provided by organizations to access program services. • Please note, Cultural Enrichment was changed to include organization feedback.
	6.3.6 Recommend changing as follows: Vocational Training- Provides occupational training for individuals experiencing barriers to employment	Vocational Training (6.10) was added to the taxonomy and the definition reflects hard job skill development.

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		Soft skill development was also added and can be found under Personal Development (9.10).
	This taxonomy covers all of our funded services. Depending on the program, our services could fall under both 1.1.3 Food Distribution and 1.18 Supplemental Food.	
	This looks really comprehensive and awesome! Glad to see street outreach and outreach supplies mentioned. I don't see anything about veterans/military. I think this may get covered via other terms but I don't see anything specific to Homeless Prevention and Rapid Rehousing (I see rental assistance, utility assistance, etc.).	• The taxonomy was designed to include different populations for all the services so veterans/military isn't identified. • Rapid Rehousing would be listed as a program and services being utilized would be described in a RFP application.
Food	Broad Area: Basic Needs, Service .1 Food, Sub Service- I don't see where our serving youth in "around school programs" fits in. We provide snacks and a hot meal once a week. Isn't that distributing food?	Food/snacks provided in a program or group setting would fall under 1.2 Congregate Meals.
Material Goods	1.2.1-8 Are we "providing" these items if donors have supplied them to distribute?	Funding would cover the expense of distributing the material items even though it was donated. The definition is stated "provision of" to cover the expenses of eligibility screening and distribution.
Transportation	1.3.3- we receive "donations" from Tiger Taxi and provide cab rides for clients in need- would this qualify?	Funding would cover the expense of distributing the vouchers even though it was donated. The definition is stated "provision of" to cover the expenses of eligibility screening and distribution.

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	We provide transportation support for those families that have no vehicles or access to public transportation to get their children to and from our program services and enrichment experiences. For children to grow we have to unlock their access.	Transportation (1.22) has been added to include services provided by organizations to access program services.
Community Advancement	Are agencies going to be able to identify under multiple taxonomies? Wouldn't most nonprofits engage in 2.1.2 (Community Needs Assessment) to identify the need for their programs? Additionally, if organizations are sharing funding, they most likely are also doing 2.1.1 (Community Collaboration). What activities would be categorized under 2.1.3 (Public Awareness/Education)? Would public presentations, social media and newsletters be categorized here?	• The program is able to identify numerous services in different categories. • The taxonomy provides the opportunity to apply for funding for a Community Needs Assessment and Community Collaboration. • Public Awareness/Education would include presentations, distributing prevention materials, public health campaigns, etc.
Education	3.5 English Language Learning (ELL) might make more sense than English as Second Language (ESL) since English may actually be their 3rd, 4th, 5th, etc language	This has been changed in the taxonomy. Please see the updated service name and definition.
Health Education	This is the only category you have that focuses on prevention. Since prevention is so poorly funded at the state level, I think it may be beneficial for us to focus a little more on this component by expanding it.	There are multiple services that have a focus on prevention (i.e.- Positive Youth Development, Crisis Care, Rental Assistance, etc.).
Medication/Medical Supplies		
Mental Health Care	Current wording excludes non-psychiatrist mental health professionals. This seems unnecessarily restrictive. First, other trained, licensed mental health professionals regularly make	• Psychiatric Assessment and Psychiatric Evaluation services were changed to Behavioral Health Assessment and

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	psychiatric (DSM-5) diagnoses that are recognized by insurance companies. Second, the most reliable psychiatric diagnoses come from individuals (e.g., psychiatrist, psychologist, social worker, even trained paraprofessionals) who are trained to administer a structured diagnostic interview (see, e.g., Aboraya et al., 2006). 4.3.2.5 The current wording indicates that the youth must be present at the session in addition to others. However, several research-supported interventions for child and adolescent social, emotional, behavioral, mental health problems include at least some therapy sessions where the youth is NOT present. The current nomenclature would exclude a number of solid, research-supported interventions. This omission would be most glaring for youth behavior problems where the most effective interventions would be excluded from this taxonomy (e.g., MST, TFC-Oregon, PCIT, Incredible Years).	Behavioral Health Evaluation. The definitions were changed to include qualified mental health professionals. • Group and Individual Therapy service definitions can include sessions where the client is not present. The main difference is the focus of a therapy session being placed on the client so even if the client isn't present for the session, the focus is still placed on the individual. The definitions leave room for the client to not be present in the session.
	4.3.1.1 and 4.3.1.6 will these be usable if screenings are done outside a mental health facility or for reasons other than mental health counseling services?	The screening definitions do not limit a facility location. They can be performed outside a mental health facility or for reasons other than counseling services. The RFP program/service narrative can state the location and purpose of providing the screenings.
	DBT Therapists for adolescents	Therapy techniques and strategies can be identified further in an RFP program/service narrative.
	I wonder if it might be better not to divide mental health services by adult and child. For example, bccsf funds youth through age 19, even though technically the 18 and 19 year olds are	• The age range for youth will follow the Boone County Community Services age range.

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	adults. Also, for things like group therapy, i'm not sure with this taxonomy whether a behavioral parent training group would qualify as adult (since the participants are adult caregivers) or child (since the child's disruptive behavior disorder is the target of the treatment). 4.3.1.3 PSYCHIATRIC ASSESSMENT Assessment by a psychiatrist of an individual's history, mental health, and functioning with the purpose of establishing a psychiatric diagnosis and develop a treatment plan. 4.3.1.4 PSYCHIATRIC EVALUATION Evaluation performed by a psychiatrist to determine a mental health diagnosis. May be better to call these "diagnostic assessment" or "diagnostic evaluation" instead. Most importantly, clinical psychologists such as myself and other qualified mental health professionals establish diagnoses routinely in accordance with our scope of practice and so the word "psychiatrists" should be replaced by a broader term, such as "qualified mental health professionals." 4.3.2.2 GROUP THERAPY- ADULT Provides psychotherapy treatment for adults arranged in a group format with a qualified mental health professional and six to twelve participants with a related problem. Group Therapy places focus on all group members. 4.3.2.3 GROUP THERAPY- CHILD Provides psychotherapy treatment for children arranged in a group format with a qualified mental health	• Psychiatric Assessment, Psychiatric Evaluation, Psychological Assessment, and Psychological Evaluation have been replaced with Behavioral Health Assessment and Behavioral Health Screening. • The group size was removed from Group Therapy definitions. • Family Therapy was added to the taxonomy. • The individual therapy service definitions do not state the individual has to be present during sessions.

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	professional and six to twelve participants with a related problem. Group Therapy places focus on all group members.	
	I would recommend not having a specific range of the number of participants or adding "typically" or "approximately" before 6-12. Would funded agencies have to turn away a 13th group member? If only 5 people showed up one night, would the group need to be cancelled or not billed for? Also, behavioral parent training (the evidence-based treatment for disorders such as odd and adhd) can be administered in group format rather than with one set of parents at a time and you may have groups a bit smaller than 6 participating families since you could have multiple caregivers from each family and thus a group of 5 could really be 10.	
	Lastly, i wonder why family and couples therapy are not included (only group and individual)? Although your definition of individual notes that others can be in the room, those definitions state that the focus is still on the individual. With true family or couples therapy, the treatment is focused on changing the family (or couple), not just one individual. Also, there is no provision for parent only sessions for youth clients. These are a key component of many evidence-based protocols for youth. To solve this problem, you could either change the definition of individual child therapy to note that the child is not necessarily present or, if you add family therapy, it is typical with insurance billing cpt codes to have and option of "family	

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	therapy with patient present" and "family therapy without patient present."	
Physical Health Care		
Fair Housing Counseling		
Home Maintenance		
Home Ownership		
Low Income/Subsidized Rental Housing		
Shelter Services	5.5.2- this doesn't specify an overnight stay or any timeframe. Perhaps it should say, "provides a safe location for victims of domestic and sexual violence to stay when fleeing from their abuser."	The time frame would be used as a unit measurement (i.e.- 24 hours=1 unit)
Supportive Permanent Housing		
Transitional Housing		
Utility Assistance	Should this specify low income households?	Eligibility requirements of consumers will be identified in the RFP application to specify low income households.
Credit Building		
Economic Opportunities		
Job Preparation/Training	6.3.1 Is this limited to specific job title type exploration (i.e. attorney, doctor, etc.) or can it include larger areas such as leadership, entrepreneurship, communication, marketing, etc.)?	Vocational Training (6.10) has been added to the taxonomy to cover education and training for particular occupations and hard skills such as marketing. Soft skills (leadership, communication, etc.) is included in Personal Development (9.10).
Personal Finance Education		

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Tax Preparation Assistance		
Legal Services		
Continuous Improvement		
Infrastructure	8.2.2 What if these services are contracted outside of the organization itself?	Professional Services can be contracted outside of the organization for capacity building efforts but not for general organizational functions.
Provider Professional Development		
Adult Day Programming		
Behavioral Support Services		
Companionship	You might want to more closely define "interaction" and/or "social isolation" to avoid sounding like a dating service.	Feedback was received.
Cultural Enrichment	Does "cultural identities" refer to how people identify themselves? What about exposure to the arts, culinary pursuits or other activities that help people broaden their horizons?	Cultural Enrichment (9.4) was changed to include different activities (culinary, art, etc.) rather than focus only on cultural identities.
	What does this mean exactly? Whose culture? We provide enrichment to enlarge the educational and social awareness and understanding of the youth and their families. We also provide enrichment to allow them to obtain skills that can save their lives such as swimming. Is that cultural?	Cultural Enrichment (9.4) was changed to include different activities (culinary, art, etc.) rather than focus only on cultural identities. Swimming could fall under Physical Activity (recently added as 4.21). The service narrative provides the opportunity to explain how swimming will be taught in order to prevent drowning accidents.
Mentoring	9.5.1 and 9.5.2 should also be provided by trained mentors too for most effective outcomes	Mentoring Services are not required to be provided by trained mentors. Explanation

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		of services can be provided in the RFP application.
	We provide mentoring to the parents on staying focused on school and making decisions that benefit their children and school, putting school first. We mentor the kids on respect, understanding authority, persistence, working hard, learning academic rigor. We do this as community based mentoring. Is this what you are thinking about when you say community based mentoring?	Family Education, Parent Skills Training and/or Parent Partnership would most accurately reflect these service activities.
Parent Education	Would you call what we do with parents, parenting education? There is no curriculum, it is crisis based and provided through orientation and when needed. Some parents are afraid of "bookworms and eggheads" for kids. We have to help them to be comfortable with having a smart child and understanding how to support that.	Family Education, Parent Skills Training and/or Parent Partnership would most accurately reflect these service activities.
Support Groups		
Youth Development	The additional work around the tutoring is positive youth development. Is that what you think of here?	Additional services that take place would be listed out in an RFP application. For example, the services listed could include, Tutoring, Family Education, Physical Activity, Positive Youth Development, etc., as long as the services being provided fit in the service definitions.
Youth Drop-In Center	We are not a drop-in center but we are a youth community center. We don't own a building, but we want one.	Your Youth Community Center could be identified as the program and then drill down the different types of services (i.e. Taxonomy of Services) that are offered at the center.
Access to Services	What about scholarships used to help kids access enrichment activities such as attend camps, be on athletic teams, etc?	The definition was adjusted to include extracurricular/enrichment activities.

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Case Management	The interim, school-based, child/adolescent psychiatric treatment program includes intensive case management by psychiatric RN's in order to ensure treatment compliance, encourage other needed services to help children progress in treatment, and to identify other needs.	Does the service you mention fit into one of the three types of Case Management services? Clinical Case Management and Psychiatric Case Management definitions limit practice to qualified mental health professionals, which would include the psychiatric RN's. Your description of the service sounds most like Psychiatric Case Management, due to it being an intensive treatment program.
Crisis Care		
Crisis Intervention	We do advocacy work by attending meetings with parents in moments of crisis. What is the crisis? No one is hearing each other. Not the parent, the child, or the school. It becomes a crisis. How do I record our work under this area?	This service could fall under Advocacy, Advocacy Education, and/or Parent Partnership.
Expectant/New Parent Assistance		
Forensic Interview		
Parent Partnership		
Respite		