

County Name: ADAMS

Date of Plan: June 30, 2015

Initial

Update

Section I. Team Members

Sponsor Team:

Sue Cohick, Administrator
 Ashley Markle, Supervisor
 Lynne Alwine, Supervisor
 Tim Shinham, Fiscal Officer

Sherri DePasqua, Assistant Administrator
 Sarah Finkey, Supervisor
 Mary V Charisse, Supervisor

Melissa Tanguay, Agency Solicitor
 Sheena Williams, Supervisor
 Leasia Ayers-Caswell, Supervisor

Implementation Team:

*Amy Barcroft, Caseworker
 James Touloumes, Fiscal
 Sarah Finkey, Supervisor
 Sue Cohick, Administrator

Carolynne Saum, Caseworker
 Joanna Russello, Caseworker
 **Melanie Brodhead, Program Specialist

Barbara Baldwin, Clerk/typist
 Melissa Tolbert, Caseworker
 Sherri DePasqua, Assistant Administrator

* Chair **Secretary/Co-chair

Section II. Background and Development of the Desired Future State including Priority Outcomes

Adams County Children and Youth Services (ACCYS) held its inaugural Quality Service Review (QSR) in November of 2014. Based on review of the QSR results, feedback from Agency, provider and community stakeholders as well as information and feedback gathered from Concurrent Planning Workgroups, the Agency has identified Teaming, Engagement and Stability as areas to be addressed in our County Improvement Plan (CIP). The review results and key indicator areas that would be addressed in our County Improvement Plan were presented to county and community partners during a Next Steps meeting held on June 10, 2015.

ACCYS has been using the Sponsor Team/Implementation Team process since 2010, in partnership with the Child Welfare Resource Center (CWRC), based on the strategies defined by the DAPIM model. The teams meet monthly and are facilitated with the support of a CWRC Practice Improvement Specialist. Work groups, subcommittees of the Implementation Team, are chartered to develop strategies to address and implement the work required in the identified areas. The Implementation Team was recently chartered to develop a stability workgroup. In addition, during 2014, the Agency conducted a Teaming and Engagement workgroup which included agency staff, providers and community stakeholders. Our County Improvement Plan will be building on the preliminary work and recommendations provided by these two workgroups.

In 2013, the Agency implemented a practice of initiating immediate family engagement efforts and having an Emergency Family Team meeting at the time of placement and before the adjudication hearing. The percentage of children in kinship vs other traditional placements has increased from 15% in 2012/13 to 33% in 2014/15, we have seen a higher number of non-custodial parents coming forward as resources and increased family engagement in the planning process. In 2014/15 we also began utilizing our engagement workers at intake to help decrease the number of cases needing to be opened for services and to support decreasing placements on intake and protective cases at risk of placement. We believe that continuing our focus on enhanced teaming and engagement will positively impact other practice indicator areas that were identified as needing fine tuning or improvement as well.

Section III. Plan Strategies and Action Steps to be Implemented and Monitored

Outcome # 1: Teaming

Outcome # 2: Engagement

Outcome # 3: Stability

Desired Outcome 1. Teaming – At least 80% of all families accepted for service will participate in FGDM/Family Team meetings to initiate and refine plans.

Objective: To create a culture and understanding with staff, families, service providers and community stakeholders that having FGDMs and Family-Team meetings is our “practice” not a “service” that we offer.

Current Status: Over the last year the Agency has had two contracted engagement workers whose duties have included conducting Accurint searches, going along with intake and family support workers to help engage families and assisting with identifying their family members and supports. They also began facilitating some FGDM and team meetings for both Intake and Family Support. Beginning July 1, 2015 the Agency will have one full time engagement caseworker and one part-time contracted worker.

During 2014 an Engagement and Teaming Workgroup developed recommendations for teaming and the Agency began testing the use of contracted engagement staff to facilitate family meetings. Recommendations from the Teaming and Engagement workgroup included: “All families accepted for services will have a FGDM style meeting to develop their service plan within 30-45 days of accepted for service (prior to disposition or less than 30 days for Child Permanency Plans) and that family/team meeting reviews will be held every 30 days for the first 90 days and every 90 days thereafter.” All meetings will be facilitated by FGDM provider or in-house/contracted Engagement workers. We will be piloting this recommendation during 2015/16. In April 2015 a second workgroup, “Engagement and Structured Decision Making,” was initiated by the Administrator to broaden teaming and engagement efforts beyond CYS to cross-systems.

Outcome # 1: Teaming				
	Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
1. Clearly define Teaming and what teaming looks like in Adams County				
a. completed	a. Develop written definition of Teaming b. Share written definition with staff	There is a written document Staff will have a handout	Workgroup	
	Define teaming expectations in writing and share with staff Definition will outline teaming expectations for: <ul style="list-style-type: none"> • Intake • Family Support • Independent Living 	There will be a written document and staff will acknowledge in writing that they received and understand teaming expectations File reviews Phone surveys Team CC Notes	Workgroup Engagement workers Management Team	Supervisors Case Conference Team QA
2. Team Formation – Identifying Team members				
	a. Parents/caregivers and youth will be considered an integral part of the team. b. Parents/caregivers and youth will be engaged in identifying team members c. Family members, informal family supports, caseworkers and outside stakeholders will be invited to be part of the team	Documented list of team members, attempts to engage in team meetings and meeting participation lists File reviews Phone surveys Team CC Notes	Engagement workers Caseworkers Supervisors	QA Supervisors Assistant Admin
	Family finding activities will be utilized to help identify potential team members and supports a. Clearly define family finding activities in writing b. Define family finding expectations and roles and responsibilities in writing c. Share with staff – in writing and via network link to documents d. Provide staff training as necessary - during staff meetings, orientations, unit meetings.	Staff will provide written acknowledgment that they have received information and training. Supervisors and QA will see activities documented in file There will be documentation that staff attended training File Review	Engagement workers Caseworkers Supervisors Management Team In-House Trainer	Supervisors QA

Outcome # 1: Teaming				
	Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
	A list identifying team members will be initiated at intake. The list will be maintained and updated at least every 90 days.	Caseworkers will have a team member list documented in ICAMS (CAPS) and printed for the file Team member list will be included in service plans	Caseworkers Engagement workers	Supervisors QA
	The team member list will be reviewed and updated at all team meetings Families will confirm membership	ICAMS/CAPS Documentation FSP/ CPP signatures File Reviews Phone Surveys	Meeting Facilitator	Supervisors QA
Team Functioning – workgroup recommendation				
	FGDM/Facilitated Team Meetings will be utilized to develop, review and update FSPs/ CPPs for all cases accepted for services			
	1. FGDM will occur within 30-45 days to develop initial plan 2. Facilitated Team Meeting Reviews will occur every 30 days for first 90 days and every 90 days there after 3. Plans will include a team member list, identify team leads and plan for team communication 4. The Team Member List and eco/connections maps will be updated during reviews			
3. Pilot Recommendation from the workgroup (see recommendation above)				
	Two staff have been identified to pilot recommendations. Cases opened for services with those workers will have a facilitated family meetings to develop and review their plans.	ICAMS/CAPS Documentation FSP/ CPP File Review Monthly feedback sessions	CW Gonzalez CW Hykes CWS Williams Engagement Workers	Management team QA
4. Implementation of family/team meeting practice				
	A Charter will be developed for implementation planning to include: <ul style="list-style-type: none"> Review feedback and data from the pilot and submit recommendations for revisions if necessary 	Recommendations from the Implementation team will be submitted to the Sponsor team in writing	Implementation Team QA	Sponsor Team

Outcome # 1: Teaming				
	Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
	<ul style="list-style-type: none"> Identify what, if any, additional resources would be needed to fully implement recommendation Draft process and protocol Create or revise existing forms Develop a communication plan Plan for training staff 			
	Implement and Monitor Practice Plans will reflect that FGDM/Family Team meetings were held to develop and review plans	iCAMS/CAPS Documentation (FSP/ CPP/Case Contact) File Reviews Surveys Team CC Notes	Caseworkers Supervisors	Supervisors Case Conference Team QA
	Gather and track data, trends and outcomes	Information will be documented and shared with staff	Supervisors Engagement workers QA Staff Service Providers	Management Team QA
5. Consensus Building with Staff and Stakeholders and Promoting Cross-Systems Use of Teaming and Engagement Approach				
	Have staff talk about outcomes from teaming during staff meetings, children’s Roundtable and provider meetings	Agenda/Meeting Minutes (Staff Meetings, Children’s Roundtable, Advisory Board, Provider Meetings, Family Meetings)	Caseworkers Supervisors Engagement workers	Management Team QA
	On-going sharing of data and outcomes with staff and stakeholders	Agenda/Meeting Minutes (Staff Meetings, Children’s Roundtable, Advisory Board, Provider Meetings, Family Meetings)	Supervisors Engagement workers QA Staff	Management Team QA
	Share goals and expectations with service providers during meetings Conduct ongoing service provider meetings	Agenda/Meeting Minutes	Administrator Supervisors Caseworkers QA	Management Team QA
	Continue “Engagement and Structured Decision Making” Workgroup meetings to promote cross-systems use of Teaming and Engagement	Agenda/Meeting Minutes	Administrator Workgroup	Management Team QA

Desired Outcome 2. Engagement –100% of family members and their supports will be identified and there will be clearly documented efforts to engage all case stakeholders, including all identified family members and their supports, in decision making and planning processes .

Objective: For all staff to have and utilize engagement skills necessary for promoting engagement (and teaming) among ALL case stakeholders and provide all family members and their identified supports opportunities to be fully engaged in decision making and planning processes.

Current Status: During 2014, the Teaming and Engagement Workgroup developed a recommended definition for engagement and recommended use of the family/team meetings to facilitate higher levels of family engagement. There was significant discussion on the need to enhance individual caseworker engagement skills. Recommendations related to skill building included role playing activities for staff, using engagement workers and/or videos to model engagement skills and finding/providing formal skill building trainings for engagement. These recommendations have not yet been formally shared with all staff. Use of Family/Team meetings has already been outlined under Teaming.

Existing Efforts that will Support Enhanced Engagement Skills: Caseworkers are required to complete Eco-Mapping with families starting at intake and engagement workers are modeling engagement skills and activities when in the field with caseworkers. Also, during 2014-2015 management team members had the opportunity to receive individual coaching and participate in group coaching sessions. As part of the coaching process team members received training on and took the Myers-Briggs personality test. Individual personality types were shared and the group discussed ways to use this information to better understand one another and communicate more effectively. This was such an eye-opening and beneficial experience that we provided all of our staff with the same opportunity, shared results in groups and have posted everyone’s personality types. We anticipate that this training and knowledge will not only enhance communication and engagement among staff but will also support enhancing overall engagement skills.

Outcome # 2: Engagement

	Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
1. Clearly define engagement and what engagement looks like in Adams County				
a. completed	a. Develop written definition of Engagement b. Share written definition with staff	There is a written document	Workgroup	
	Define engagement expectations in writing and share with staff Definition will outline engagement expectations for: <ul style="list-style-type: none"> • Intake • Family Support • Independent Living 	There will be a written document staff will sign off they received and understand engagement expectations Supervisors will observe enhanced engagement skills in their workers File Reviews and phone surveys	Workgroup Engagement Workers Program Director Mgmt Team	Supervisors Case Conference Team QA

Outcome # 2: Engagement

	Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
2. Enhance Caseworker Engagement Skills – Training and TOL				
	a. Develop and/or utilize existing role play activities b. Caseworkers will participate in role playing activities	Scenarios will be written Activities will occur Supervisors will observe staff using enhanced engagement skills	QA In-House Trainer	Supervisors QA
	c. Research training providers/opportunities building engagement skills <ul style="list-style-type: none"> • CWRC • Outreach to other counties • On-line research • Consider Motivational Interviewing 	Information will be gathered and documented	QA In-House Trainer	Management Team Supervisors
	Caseworkers will participate in trainings as identified above	Training sign in sheets Training certificates		
	Supervisors and program specialists will utilize Myers-Briggs results and other critical thinking strategies to support successful coaching and promote skill building for engagement with workers Caseworkers will utilize Myers-Briggs knowledge and other identified strategies to engage families	Copy of written strategies will be handed out and commitments for utilizing will be monitored Caseworkers will be able to verbally identify engagement strategies and discuss how they use MB knowledge to adapt engagement approach with families	Supervisors Engagement workers Program Specialist Caseworkers	Management Team QA
	Collect feedback and data for assessment	Completed file reviews Surveys iCAMS/CAPS Contacts	QA	Management Team QA
	Share data and outcomes with staff	Agenda/Meeting Minutes (Staff Meetings, Children’s Roundtable, Advisory Board, Provider Meetings, Family Meetings	Supervisors Caseworkers QA	Management Team QA

Desired Outcome 3: Stability – At least 85% of children in out of home care will experience no more than two placement settings.

Objective: All children/youth shall have a safe, nurturing and stable living environment with minimal moves, with their family of origin or while in care.

Current Status: As a result of the QSR held in November of 2014, the Agency sponsor group requested a Stability Workgroup be formed to develop tools and processes to ensure minimal moves after a child enters placement. The workgroup was formed in February of 2015 and the groups work is still on-going. The Agency has also initiated utilization/testing of “best fit” placement meetings to help clearly identify and prioritize the child’s needs and desires. The information gathered during the meeting is utilized to help identify potential good fit placement resources and is also shared with potential placement resources during a “full disclosure” meeting.

Outcome # 3: Stability				
	Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
1. Clarify what “Placement Stability” means for our Agency				
	a. Create a strong vision of “Placement Stability” and expectations for how it enhances a child’s journey while placed with the agency.	Written statement WG Charter	Sponsor Group/Mgmt. Team Caseworkers	Implementation Team (IT) Management Team Quality Assurance (QA)
	b. Share our vision and expectations for placement stability with all staff, families; county and community partners.	Agenda/Meeting Minutes (Staff Meetings, Children’s Roundtable, Advisory Board, Provider Meetings, Family Meetings)	Resource Care Program Specialists Independent Living	
	c. Support staff through reviewing their planning processes so they can participate on a Stability WG	iCAMS Contact	QA Program Specialist Supervisors	
2. Develop “Placement Stability” strategies				
a. Initiated	a. Pilot use of the “best fit” placement decision making meetings.	Meetings will be documented in ICAMS	Family Support Supervisors	Assist. Administrator QA
b. Initiated	b. Charter a workgroup to develop formalized “best fit” placement decision making tools and process to help minimize the number of moves experienced by children in out of home placement. Including determining the child/youth’s underlying needs and	Workgroup Charter Exists Agenda/Meeting Minutes (WG, IT, Management Team)	Administrator	Sponsor Team

Outcome # 3: Stability

	Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
	<p>factors other than safety or risk, such as resiliency, hopes, dreams and family culture.</p> <ul style="list-style-type: none"> • Include current Agency “Best Fit” meetings • Research existing best fit/placement stability tools and strategies • Identify or develop a stability tools and strategies that will be utilize by staff • Assess where in the placement process the stability tool should utilized <p>c. Consider incorporating stability strategies into Agency staffing and placement processes</p> <p>d. Determine when to refer case for Case Panel Review to aid in placement stability decision making</p> <p>e. Explore evidence based models of assessment to aid in assessing child/youth’s needs for a best fit placement</p> <p>f. Explore Motivational Interviewing as a tool to elicit child/youth’s wants and needs for placement Include use of iCAMS/CAPS system into the process</p>	<p>Tools, Strategies and process will be submitted to the Sponsor Team for approval</p> <p>c-f. Discussions will be documented and recommendations will be presented to Management</p>		<p>Management Team</p>
3. Implementation and Training				
	<p>a. Develop implementation and training plan for use of tools, strategies and processes approved by the management team</p> <p>b. Identify and plan for any needed additional training with regard to placement stability</p>	<p>Plan will be submitted to Management for approval</p>	<p>Management Supervisors QA In-House Trainer</p>	<p>Management Team QA</p>

Outcome # 3: Stability

	Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
	c. Explore training opportunities for how to effectively assess child/family needs for effective stability planning d. Provide coaching/support to caseworkers as they implement the Placement Stability processes			
4. Facilitate Positive and Supportive Relationships between Biological and Resource Parents				
	Develop and implement Ice Breaker style meetings between biological and resource families	Meetings will occur and there will be documentation of the meeting in ICAMS	Assistant Administrator and Program Director	
5. Implementation of Promising Practice – Resource Family Support Services Program				
	The goal of this program is reduce the number of moves children experience by increasing support to kinship and resource families <ul style="list-style-type: none"> • Will target approximately 25-30 families per year • Will focus on the kinship/resource family needs • Promote enhanced understanding of how behaviors communicate needs and how to respond • Utilize the 3-5-7 model as a framework • Help kinship/resource families establish support structures through family finding and FGDM 	A provider will be identified Referrals will be made Services will be documented	Administrator Program Director Resource Parent Coordinators	