County Improvement Plan (CIP)

County Name: Snyder

Date of Plan: 10/20/16

☒ **Initial** ☐ **Update**

Section I. Team Members

(List the members of the Sponsor Team and members of the Implementation Team(s) and identify co-chairs with an asterisk, if applicable):

Sponsor Team:

Rose Weir, Administrator

Angela O'Brien, Casework Supervisor

Brian Shambach, Casework Supervisor

Shannon Fisher, Casework Supervisor

Implementation Team:

Matthew Boop, Caseworker

Joni Parker, Caseworker

Sean Trent, Caseworker

Karen Stewart, Caseworker

Kimberly Shemory, Caseworker

Donna Shriver, Social Worker

Courtney Raker, Caseworker

Arvel Brown, Caseworker

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

(Provide a detailed narrative about the process that was implemented during the development of the CIP. Who was involved? What data was reviewed? How did you analyze your data? How were the outcomes determined and prioritized? List and describe the overarching outcomes that were identified. NOTE: Outcomes can be limited to approximately two to four priority areas.)

Snyder County participated in the DAPIM process to develop the plan. We formed a Sponsor Team and CI Team to address the following priority areas:

Outcome #1 – Maintaining Family Relationships

Outcome #2 – Assessment and Understanding

Outcome #3 – Child/Youth and Family Planning Process

Section III. Plan Strategies and Action Steps to be Implemented and Monitored
(The purpose of the plan is to remind leadership and work team(s) of commitments made, track accountability, and monitor progress. There are essentially three types of continuous improvement planning – quick wins, which can start being identified and implemented as gaps are being identified, mid-term improvement planning, and longer term improvement planning.)

Outcome # 1: Maintaining Family Relationships

Definition: *Interventions are building and maintaining positive interactions and providing emotional support between the child/youth and his/her parents, siblings, relatives and other important people in the child/youth's life, when the child/youth and family members are temporarily living away from one another.*

Strengths

- We have contracts with providers that do FGC, other services mentioned above
- Visit coaching is a really good tool
- We have a visitation room that is family friendly
- A passionate judge, who feels strongly about family finding
- We do family finding
- We offer more visitation than required (kin and non-kin placements) by using kin to supervise visits
- We spend quality time with our kids – not conventional visits (e.g. hiking, basketball, Frisbee golf, birthday parties, graduations)
- We try to engage families in our planning process (FSP's, CPP's) – Permanency Planning Meetings every 3 months for kids in placement
- Our main goal is to preserve/reunify families – everything we do is toward that end
- We respect how families function
- We are honest, upfront with families about expectations – what we and they need to do
- We communicate healthy standards for families
- Our resource families share our values, believe children should be with their birth families – often mentor, maintain contact with child/family after child returns home, become extended family
- We send monthly progress letters, continue to inform parents of all meetings, hearings, appointments, etc. – even if they choose not to be involved
- If parent is a stranger to start, we help them to build a relationship with child
- Whether or not mother/child wants us to, we reach out to fathers
- Persistence, despite challenges
- We explain to families that the more supports/connections in a child's life, the more successful they're likely to be – regardless of parents' feelings toward one another; child is the focus
  - Everyone is valuable in the child's life
  - We are required to contact parents, relatives – agency has no choice
- We listen to parents' worries, concerns – respond with protective measures where needed
- Priority to ensure child's safety during all visits, contacts
- We care about the children/families we work with, their connections, reunifying/preserving families

Gaps

- We don't have family history
- Parents disappear, don't want to be involved
- Family doesn't share information RE everyone involved in the child's life
- Family's negative lifestyle – can isolate families
- Mental health
- Substance abuse
- Not enough staff time to do everything we want to do (e.g. call everyone who doesn't respond to family finding letters, foster that relationship if we do make contact with a relative)
- Not enough time for child to see everyone (outside school, activities, services, etc.) – also resource parents, relative, etc. (everyone involved)
- History of violence
- Child's behaviors, mental health, juvenile delinquency (fines)
- Parents have to pay child support for children in placement – may interfere with parents ability to provide for other children
- Not enough providers – visit coaching (1 worker at 1 agency, out of county); providers to work with teens
- MST is a great service, but not enough transition time and families don't maintain changes
- Services are only as good as the worker, can only get the service once
- The judge has good intentions, but his expectations are sometimes too high, doesn't understand daily work/challenges, doesn't consider reason for placement (safety issue RE parents' care vs need for treatment)
- We get shared cases with JPO

Root Causes

- **Gathering family, resources**
  - Family reluctance to tell relatives that they are involved with CYS, what's been going on in their home
  - No providers to assist with family finding – responsibility lies with caseworker
    - No expectation for providers to assist
    - Not sure if this is a possibility

  *Possible recommendation: State should consider making family finding a SWAN unit of service
  - Still new, doesn't come naturally yet, not yet in our routine repertoire like safety assessment
- **Skillset, resources, tools, asking the right questions**
  - Hasn't been a long-term priority, like safety assessment, risk assessment, etc.
  - Not a priority when time is limited and safety, FSP/CPP, other pressing issues need to be addressed
  - No formal tool/resource or guidance issued by the state – how to do it?
  - Some staff attended the FF training a long time ago and don't remember it, some have not attended
  - Family Support Specialist/dedicated position was eliminated

GOAL: To develop and maintain families' natural support systems

Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring

1. Bring families together through FGDM and/or Family Teaming, facilitating connections			
a. **Talk with the family** about holding a FGDM and/or Family Team meeting	Dictation	Caseworker	Info included in *Accept for Services letter* – some families have called to inquire Sups not there, but assuming this conversation is occurring w workers, families FC talking about these options during PPM's, but relatives/supports don't typically attend PPM's
b. Inform family of **purpose** of FGDM and/or Family Teaming, potential positive outcome	Dictation	Caseworker	SAA
c. Identify **who should be invited**	*Family Tree* completed List developed by coordinator	Caseworker FGDM coordinator	This discussion naturally occurs if family expresses interest Review completed *Family Tree*, use it for ideas, to generate list *Family Tree* is being completed more often – in-home have this on review logs
d. Make **referral** to provider or use the internal facilitator	Referral form completed and submitted	Caseworker	FC unit making more FGDM referrals In-home units utilizing more Family Team meetings
e. Hold the **meeting**	Dictation Completed plan	Caseworker	FGDM meetings are being held when referral made – most of the time; families sometimes resistant Family Team meetings are being held inconsistently – resistance from family is the issue
2. Strengthen quality and timeliness of FGDM services being provided to families			
a. Supervisory Team to work with providers on **expectations**	Supervisory meeting minutes	Supervisory Team	FC has experienced improved timeliness of FGDM meetings w 1 provider (no improvement w others)

3. Increase the number of connections for families through Family Finding			
a. Have **ongoing discussions** and complete Family Finding tools with the family	Completed Family Finding tools	Caseworker	Ongoing discussions for GPS don't generally occur after ***Family Tree*** completed, unless placement is imminent Ongoing discussions do occur in DP cases
b. Utilize Family Finding **tools**	Completed Family Finding tools	Caseworker	Using Facebook, Accurint, revised family tree form
c. Provide Family Finding **training** to staff	Training Log	Supervisors	Courtney, Dave, Joni, Seth attended FF in Oct-Dec 2016 1/24/17 staff training by sups, Donna
d. **Document** Family Finding efforts in court documents	Petitions and review orders	Paralegals Supervisors	This is being done for DP cases
e. Engage in discussions with **newly found connections** that have been identified	Family Finding List	Caseworker	Making more in-person contacts with connections, more phone calls, documenting these case notes, have a form for the 10-day hearing for court. Increased contact from prospective individuals. Need to revise form to increase last column space. Change name to FF court form.
f. Complete a **diligent search** for absent parents	Accurint search	Caseworker Paralegals	We are finding more individuals through Facebook than Accurint. Attempted to obtain Agency Facebook Account however due to parameters of Facebook, having an Agency page wasn't going to assist with FF efforts. An Agency page doesn't allow direct messaging.

GOAL: To promote/enhance family connections in order to achieve reunification

Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring

1. Coordinate visitation and contact			
a. Identify **duration and location** of visits and/or method of contact	*Plan for Visitation/Contact with Child* completed	Caseworker	Location is identified as Agency, home, and community. Challenge is that visits plans change frequently based on family progress or lack thereof. Reminder to use Ice breaker meetings
b. Identify and **eliminate barriers**	Dictation	Caseworker	Plans change due to work schedule, agency schedule changes with caseworker and aide. Transportation and distance between family and children is addressed as needed. Sibling visits and parent visits can be challenging if they can't occur at the same time. Time is also a barrier. Sometimes the Agency is able to eliminate the barriers especially if they reside in family foster care. However if residing in residential visits are more challenging as there is no transportation assistance from the facility.
c. Develop the ***Plan for Visitation/Contact** with Child*	CPP completed	Caseworker	Plans are generic in CPP in order to accommodate the ever changing family and child needs and circumstances.
2. Ensure positive interactions during visitation			
a. Meet with the parent prior to the visit to plan and discuss healthy **expectations**	Dictation PPM Record	Caseworker Supervisor Paralegal	Ongoing discussion.
b. **Observe** parent-child interactions during the visit	Dictation PPM Record	Caseworker Supervisor Paralegal	Visit Coaching utilized as well as social service aides.

c. Make **suggestions** to the parent for future visits	Dictation PPM Record	Caseworker Supervisor Paralegal	Ongoing discussion and is documented in dictation and PPM record
d. **Discuss progress and challenges** as it relates to making changes to the visitation plan	Dictation PPM Record	Caseworker Supervisor Paralegal	Ongoing discussion and is documented in dictation and PPM record

Outcome # 2: Assessment & Understanding

Definition: *Interventions are building and maintaining positive interactions and providing emotional support between the child/youth and his/her parents, siblings, relatives and other important people in the child/youth's life, when the child/youth and family members are temporarily living away from one another.*

Strengths	

• Communication with service providers – PC's, monthly contact reports
  o helps us to monitor success of service being provided, family's progress
• Workers attend IEP meetings, appointments for child and parents, etc.
  o FC workers do this as a support
  o GPS workers do this to aide assessment, provide transportation to ensure they get there
• Group supervision in fc helps to understand family better, identify needs
  o GPS workers accomplish this informally through conversations between workers, doing HV's together.
	• FSP's/CPP's include step-by-step what we want families to get out of services, lots of detail regarding what they are expected to do – clear path from plan to case closure
	  o Plans geared toward specificity of the need, individualized
	• Staff training conducted
	• Plans revised between regular review dates if there is an issue; progress documented ongoing
	• We've been working on this area – trainings provided, etc.
	• We use Safety and Risk Assessments as resources

Gaps	
• Family may not be in agreement with agency assessment, identification of issues • Generational issues – pattern of behavior; trying to break that cycle can be difficult	• Being able to identify underlying issues • Need to screen out more referrals prior to accepting as a referral – lots of custody stuff lately, not really safety; sometimes same concerns over and over again
Root Causes	
• Families are guarded, have trust issues – we need to be able to build relationship, rapport for them to share information o Not experts on all areas, may miss things unintentionally	

GOAL: To ensure quality assessments are completed for children and families

Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
1. Advocate for needed services in our community			
a. **Research/review additional** assessment methods/tools; develop recommendations for which to use, when, and how	Materials received Recommendations developed	CQI Team	Gathered information on what other counties are using for assessment/ screening. Additional trainings have been offered every month on various topics to enhance knowledge and skill set
b. **Consider** which assessment methods/tools will be used by Agency staff, when , and how	Discussion documented in meeting minutes	Supervisory Team	
c. **Share** chosen assessment methods/tools with all program staff and provide **training** on when/how they will be used	Information/materials shared Instruction provided	Supervisory Team	
2. Use assessment methods/tools to identify root causes to family issues			
a. **Use** the identified assessment methods/tools to determine root causes and facilitate change in families	Tools completed and/or method documented	All program staff	
b. Provide **coaching and support** to caseworkers as they implement the chosen assessment methods/tools	Observation and communication	Supervisors	
c. Hold **monthly unit meetings** to review difficult cases and provide added support and learning opportunities	Meetings held	Supervisors	
d. Create a method for periodically **reviewing completed assessments** for quality and consistency	Plan developed Review tool established	Supervisory Team	
3. Develop family plans that are clear and understandable			
a. Ensure that FSP/CPP objectives and tasks are **realistic, measurable, and achievable**	Service plans are measurable and	All program staff	

	achievable		
b. Ensure that FSP objectives and tasks **clearly outline the steps** families need to take in order for their case to be closed	Service plans address SAW & RA	All program staff	
c. Ensure that CPP objectives and tasks **clearly outline the steps** families must take in order for their child to return home	Service plans address SAW & RA	All program staff	
d. Create a method for periodically **reviewing FSP/CPP's** for quality and consistency	Plan developed Review tool established	Supervisory Team	
e. Develop a means to provide visual, concrete **feedback to families** regarding progress toward FSP objectives and tasks	Document/method created	Supervisory Team CQI Team	
f. **Ensure that FSP/CPP's are revised** as families' circumstances/needs change	Service plans address current SAW & RA	All program staff	

Outcome # 3: Child/Youth & Family Planning Process

Definition: *Degree to which the planning process: • Is individualized and matched to child/youth's and family's present situation, preferences, near-term needs and long-term view for safe case closure. • Provides a combination and sequence of strategies, interventions, and supports that are organized into a holistic and coherent service process providing a mix of services that fits the child/youth's and family's evolving situation so as to maximize potential results and minimize conflicts and inconveniences.*

Strengths	

• We're clear about why we're involved, situation
• Before developing the FSP/CPP, we hold a meeting with the family to discuss what needs to happen, open forum for discussion
  o For CPPR's, we hold a PPM to gather concerns, assess progress, etc. – family members, providers, attorneys all invited to attend/participate
  o When children return home, we hold meeting to develop FSP – how to ensure child remains in the home
  o Transitional meetings for older youth – focus is on the youth; everyone assigned tasks
  o In-home uses informal meetings, can include extended family members – some families don't want to include relatives
  o We do a good job being empathetic, listening to families, getting a feel for things and getting their input before making recommendations
  o Contracted FGC providers – Adelphoi, KidsPeace, JusticeWorks
  o Quality/timeliness not consistent
	• What are staff doing RE effective family planning
	  o Understand where families are coming from
	  o No finger-pointing
	  o We start with strengths
	  o For transitional meetings, we identify who are supports, include their contact info
	  o We do all of the things listed above, even if it means putting another family on the backburner – not with all families, not consistently
	  o We do a good job explaining why it's important for both parents to be involved – better than we did in the past
	  o In FC, we do a good job explaining the importance of parent involvement, even when child not in your care (e.g. need to attend school meetings, dr appointments, services, activities, etc.)
	  o Our philosophy – families are the expert on their family (mission, vision, values)
	  o Task letters to keep parents informed of progress
	• Better at using clear, family-friendly language

Gaps	

• Provider issues
  o Quality/timeliness not consistent among contracted FGC providers (Adelphoi, KidsPeace, JusticeWorks)
• Sometimes families are just stuck
• Getting the family to understand time, urgency
• Our agency name, stigma
	• Gaps RE family finding
	  o Need help to connect, build relationship
	  o Need early identification (prior to placement)
	  o Not enough time
	  o Need a visitation coach and/or family finding person to help with this. May specialize in this, better versed in questions to ask

• Sometimes families have burnt bridges among their own relatives/supports – have no one to help them • Sometimes families want to do the work, but not vested – want someone else to do the work, want it to be easy • Families are ambivalent, give lip service, don't follow through, fail to cooperate • Location (e.g. state prison 3 hrs away, inpatient treatment) – logistics may be a barrier • Missing parents, trying to locate them • Kids and parents each have their own issues • Conflict within the family/between parents (mom is the gatekeeper) – keep issues secret from one another; keep kids from one another o Finger-pointing, back and forth between parents o Parents' relationship, issues creates barrier to children's relationship with both parents o Better at discerning between custody issues and CYS issues o Understand that root issue may be genuine concern/CYS issue, but appears initially as custody issue	o Attending family events/functions is intrusive o Contact relatives/kin is intrusive, confidentiality issues o Some families don't know who relatives are (5th degree) o Change of thinking – families may not be lying to us, withholding information o Not sure what are the right questions to ask o State has provided no guidance on how to do this o No tool/set of questions/screen to use – can we get/create one? • Are we asking the right questions? o Yes; feel we've gotten better at this over the years • Gaps to involving nuclear/existing family in planning? o Existing family dynamics (e.g. parents can't get along) o Denial that an issue even exists (especially with substance abuse) • Location – living out of the area, incarcerated, in rehab, transient
Root Causes	
• Gathering family, resources o Family reluctance to tell relatives that they are involved with CYS, what's been going on in their home o No providers to assist with family finding – responsibility lies with caseworker o No expectation for providers to assist o Not sure if this is a possibility o *Possible recommendation: State should consider making family finding a SWAN unit of service o Still new, doesn't come naturally yet, not yet in our routine repertoire like safety assessment • Location, bridging the gap	• Skillset, resources, tools, asking the right questions o Hasn't been a long-term priority, like safety assessment, risk assessment, etc. o Not a priority when time is limited and safety, FSP/CPP, other pressing issues need to be addressed o No formal tool/resource or guidance issued by the state – how to do it? o Some staff attended the FF training a long time ago and don't remember it, some have not attended o Family Support Specialist/dedicated position was eliminated

o Logistics when families live outside the area – ICPC, time, plane tickets/transportation	

GOAL: Child/Youth and Family participate in plan development based on identified needs

Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
1. Have a Full Disclosure conversation with the family to encourage participation in planning			
a. Discuss **steps** to have CYS out of the family's life and/or to enhance/improve their current situation	Dictation Full Disclosure Statement	Caseworker	Workers believe that this conversations are happening but documenting these actions are not always occurring.
b. Identify the **specific actions to be taken** by the youth/child and family	Dictation Case Reviews	Caseworker/ Supervisor	Reflected in plan. Ongoing discussions may not be documented.
c. Remind family that **they are the experts** on themselves	Dictation Case Reviews	Caseworker/ Supervisor	
d. Inform family of the **consequences** of not engaging in planning and successful completion of plan requirements	Dictation Case Reviews	Caseworker/ Supervisor	Workers believe that this is occurring with their discussions with the families.
e. **Engage additional family members** in planning beyond the nuclear family	Dictation Case Reviews	Caseworker/ Supervisor	Family team meetings are occurring.
f. Meet with the family at a **time that is most convenient for them**	Dictation Case Reviews	Caseworker/ Supervisor	This is occurring. Workers work various hours to accommodate family's needs.
g. Build the **relationship** with the family to allow for open sharing of their concerns	Dictation Case Review	Caseworker/ Supervisor	Ongoing and occurring
h. **Empower** the family to work through their plan with agency support	Dictation Case Reviews	Caseworker/ Supervisor	Ongoing and occurring
2. Based on child/youth and family input involve providers in plan development			
a. **Gather information** from providers regarding family needs	Dictation Releases of Information	Caseworker	Occurring. Sometimes this occurs with joint family meetings. Obtain monthly reviews from MST and Justice Works. Regular phone calls/ emails. Attend a lot

	Copies of information sent from provider FSP/CPP		of school meetings – CAASP, IEP. Collateral contacts with SA providers.
b. **Evaluate** whether providers services are meeting the specific needs of the child/youth and family	Dictation	Caseworker	Discussion with family is occurring to determine if quality services are being provided. MST sends a questionnaire asking about quality of services.
c. **Discontinue services** that are not meeting the needs	Dictation	Caseworker	Counseling services have been changed.
d. **Replace services** that don't meet the needs with one that will	Dictation	Caseworker	Did change FGDM provider

GOAL: Connect families with services that are specific to their needs

Action Steps	Evidence of Completion	Person(s) Responsible	Monitoring
1. Identify the services in the area that will meet the child/youth and family needs			
a. Review the **list of services** and what they provide	Service Authorization Tab in CAPS Dictation Copy of Referral Form	Caseworker	Assign someone to manage this task.
b. Check with system partners for **other providers** that may address the needs	Dictation Case reviews	Caseworker	
c. If current providers listed can't meet the needs, **request additional provider options** from them	Dictation Case reviews	Caseworker	
d. Staff receive **education on services** offered by local providers to determine appropriate fit for child/youth and family needs	Staff Meeting Agendas/Notes	QA Program Specialist	
e. Add permanent item to **staff meeting agenda** to talk about community services/resources available for families	Staff meeting minutes	Caseworkers Supervisors	

Enter monitoring plan here: The CQI Team and Supervisory Team will each meet quarterly to review progress.

Month and Year for the next state-supported Quality Service Review: May 2019

State-supported QSRs must occur at least every 3 years, but frequency cannot occur more than once every year.