

CPPC Coordinator Practice Guide

Community Partnerships



for Protecting Children



Iowa Department
of Human Services

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Iowa Department of Human Services

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Dear Reader,

I would like to welcome you to the wonderful world of Community Partnership for Protecting Children (CPPC).

Giving Thanks! It is a struggle to identify and recognize individually all the Coordinators, DHS staff and community partners that have had a hand in shaping this manual. Over the years, Decat and CPPC Coordinators, DHS staff and community partners worked to identify, develop and continue to revise implementation levels for each our CPPC strategy. In addition, Decat and CPPC Coordinators have provided feedback on the benefits and approaches for each component within each level. These individuals have provided valuable first-hand knowledge that has been capture and organized in this manual to be utilized by new and season veterans of CPPC. These individuals have contributed countless hours traveling, meeting, phone conferencing, e-mailing, and the list goes on.

I want to give special thanks to Amanda McCurley, AmeriCorps Coordinator and Natasha Hurley and Emily Jansen AmeriCorps Members. They put forth tremendous effort and hard work and in the development of this CPPC Guide which included many, many hours of research and writing and later reviewing drafts.

Thanks also go to CPPC Specialist Nola Aalberts, who assisted in gathering the information and reviewing drafts. Nola has also spent countless hours travelling the state and gathering information face to face from coordinators and shared decision making team members for many years and is our strongest 'Road Advocate' for CPPC!

Also giving hours of their time to the review process were Sarah Hohanshelt, Joe Burke, Mary Drees, Mindy Norwood, and Gwen Deming. These folks all offered some great concrete feedback from all levels of practice and some of them offered their processes for review and inclusion in the guide.

The one of the primary writer for this practice guide was Shelby Zirbel, CPPC Specialist. Shelby managed to capture random, but brilliant ideas, relevant experiences and blend together various written materials/styles into a cohesive manual to be utilized for years. Shelby's work was a truly valuable asset to the development of the practice guide.

The people who have contributed to the success of Community Partnership for Protecting Children and the development this manual are some the most dedicated, diligent, and compassionate people I have ever met! I will be eternally grateful for all the lessons I have learned from all of you. From the bottom of my heart, I thank you.

Peace.

Sincerely,

Sandy Lint, LMSW
DHS Community Partnership State Coordinator

Table of Contents

| | |
|---|-----|
| <u>Community Partnership Levels of Implementation</u> | 1 |
| <u>Community Shared Decision Making and Planning</u> | 13 |
| Level 1 - SDM | 14 |
| Level 2 - SDM | 26 |
| Level 3 - SDM | 36 |
| Level 4 - SDM | 47 |
| Lessons Learned - SDM | 56 |
| <u>Neighborhood/Community Networking</u> | 59 |
| Level 1 – NCN | 60 |
| Level 2 - NCN | 69 |
| Level 3 - NCN | 76 |
| Level 4 - NCN | 80 |
| Lessons Learned - NCN | 83 |
| <u>Individualized Course Action</u> | 85 |
| Level 1 - ICA | 86 |
| Level 2 - ICA | 92 |
| Level 3 - ICA | 95 |
| Level 4 - ICA | 97 |
| Lessons Learned – ICA | 100 |
| <u>Policy and Practice Change</u> | 102 |
| Level 1 - PPC | 103 |
| Level 2 - PPC | 106 |
| Level 3 - PPC | 109 |
| Level 4 - PPC | 112 |
| Lessons Learned - SDM | 119 |

| | |
|---|-----|
| <u>Resources</u> | 120 |
| General Information: | |
| Acronyms | 121 |
| Evaluation/Report Tool | 136 |
| Shared Decision Making Survey | 151 |
| Shared Decision Making: | 153 |
| 6 Principles of Partnership | 154 |
| CPPC/DCAT relationships | 156 |
| Guiding Principles for Iowa’s Child Welfare System | 157 |
| Neighborhood Networking: | 160 |
| AmeriCorps Partnering to Protect Children | 161 |
| Parent Partners | 163 |
| Moms off Meth | 164 |
| 24/7 Dads Program | 165 |
| Master List of Programs and Services for Men Who Parents | 166 |
| Other Parent Resources | 175 |
| Safe and Together Model Suite | 176 |
| Other Domestic Violence Resources | 179 |
| AMP | 180 |
| Circles of Support | 182 |
| Parent Cafes | 183 |
| Elevator Speeches | 185 |
| Host Race: The Power of an Illusion “About and How To” | 186 |
| Individualized Course of Action: | 188 |
| FTDM/YTDM Standards | 189 |
| Center for Study on Social Policy Tips | 204 |
| Policy and Practice Change: | 206 |
| PDSA Overview | 207 |
| PDSA Plan Do Study Act Sample form | 209 |
| Policy on a Larger Level | 210 |
| Tips for Writing an Effective Letter or Email to Your Legislators | 211 |
| Tips for Phoning Your Legislators | 212 |
| Practice and Policy Change Examples | 213 |

Welcome to CPPC!

You may have heard of Community Partnerships for Protecting Children (CPPC), or Community Partnerships; this practice guide strives to increase your understanding of Community Partnerships as well as the levels within the four CPPC strategies in order to grow this initiative in your community.

Community Partnerships for Protecting Children is a community-based approach to child protection. Partnerships work to prevent child abuse, neglect, re-abuse, safely decrease the number of out-of-home placements, and promote timely reunification when children are placed in foster care. The long term focus of the Community Partnerships is to protect children by changing the culture to improve child welfare processes, practices, and policies.

A whole host of factors contribute to child well-being, permanence, and safety. Community Partnerships for Protecting Children are positioned to play an important role in continuing to improve these outcomes through the enhancement of community resources and implementation of the four strategies: Neighborhood and Community Networking, Shared Decision Making, Individualized Course of Action, and Policy and Practice Change. These strategies are focused on changing child welfare cultural response by engaging communities, families, youth, and agencies to work as partners.

This guide is intended for Community Partnership Coordinators as well as key Shared Decision Making Team members to further their understanding and efforts in Community Partnerships. Whereas the levels document sets out a framework of expectations, they are just that—a frame. You can build the ‘home’ of Community Partnerships within this frame in a way that best suits your community’s needs.

In the first section, you will find a general introduction and CPPC Level document followed by a section for each of the four CPPC strategies. Being able to identify CPPC levels for each strategy enables us to measure CPPC outcome statewide.

The sections will give a more in-depth discussion of the benefits and approaches for each strategy. The final section is a resource section that is packed with useful information to assist communities with implementing CPPC.

This framework (in the form of the four strategies and 4 levels of each strategy), was developed from many years of efforts in communities by CPPC coordinators, agency partners, community members, and practice partners. There was much use of all of the components of each strategy in reaching this point, and the collaboration from all involved resulted in determination that the 4 strategies and 4 levels of each strategy promoted growth in Community Partnerships while allowing each site to tailor the approach to the unique needs of the communities served.

History

Iowa's Community Partnership approach grew from initial work in Cedar Rapids in 1995 and now encompasses the entire state. Several new policy and practice changes in Iowa have been promoted, piloted, and implemented through Community Partnership efforts. Family Team Decision Making, Parent Partners, and Youth Transition Decision Making (Iowa Dream Teams) are examples of these efforts. Trainings, professional development opportunities, and train the trainer programs have been developed and implemented to support improved practices and ensure quality and consistency across the state. State and regional networking opportunities, workshops and forums create an on-going learning community of stakeholders.

In **1995**, the Edna McConnell Clark foundation provided funding for 4 national pilot sites including Cedar Rapids.

In **2000**, DHS hires state CPPC coordinator, and Prevent Child Abuse Iowa begins to host forums and events.

In **2001**, the first statewide CPPC conference is held by Prevent Child Abuse Iowa. The Edna McConnell Clark foundation provides funding for 5 Iowa pilot sites.

In **2002**, Child Welfare policy and Practice Groups provides Family Team Decision Making Meeting training and recruitment of Iowa FTDM trainers

In **2003**, Iowa's federal program improvement plan (PIP) and Better Results for Kids DHS redesign identifies statewide rollout for FTDM and CPPC state legislation allocates CPPC funding.

In **2004**, Prevent Child Abuse Iowa provides fulltime associate CPPC coordinator.

In **2005**, in partnership with the Iowa Coalition Against Domestic Violence, a fulltime position provides technical assistance/training.

In **2007**, CPPC implements statewide and each Decat is allocated funding, Prevent Child Abuse Iowa starts CPPC AmeriCorps program, and Parent Partners is implemented in 11 counties.

In **2008**, in partnership with Youth Policy Institute of Iowa, Transitioning Youth Initiative and Dream Teams (Youth Transition Decision Making) are implemented in 9 counties, Iowa's CPPC is highlighted in national publication by Andrew White, and the first Parent Partner Summit is held.

In **2009**, Receives Federal Midwest Child Welfare Implementation Center (MCWIC) grant to expand parent partners statewide.

In **2010**, MCWIC begins Parent Partner evaluation.

In **2011**, Partnered with ISU for fulltime Domestic Violence Liaison, and Parent Partner outcome database is developed and implemented.

In **2012**, Partnered with ISU for fulltime Transitioning Youth Specialist, standards and funding allocations are implemented for Youth transition Decision Making (Dream Teams), and Parent Partners is operational in 68 counties and statewide contracting infrastructure is developed.

In **2013**, Parent Partners is contracted for statewide implementation.

In **2015**, FTDM/YTDM is contracted for statewide implementation, and Parent Partners is implemented in 99 counties.

Philosophy

The Community Partnership Philosophy is:

- Parents and youth need to be full partners in shaping supports and services for themselves and their communities
- Children should be with their own families whenever possible
- Families are stronger when all members, including caregivers, are safe from abuse
- There is no substitute for strong families to ensure that children and youth grow up to be capable adults
- Families need supportive communities to help them be strong and offer a sense of belonging
- Children can best be kept safe when families, friends, residents, and organizations work together as partners
- Services and supports need to be closely linked to the communities in which families live
- Government alone, through the Department of Human Services (DHS), cannot keep children safe from abuse and neglect
- Efforts to reduce abuse and neglect must be closely linked to broader community initiatives and priorities

It is through this philosophy, history, and many years of dedication to the development of the 4 strategies and the levels that initiatives have flourished with Community Partnership's support and Community Partnership Shared Decision Making teams have partnered locally to tailor CPPC to their community's needs. This guide shares the wealth of information gathered as well as some of the struggles coordinators have faced in order to continue growth of Community Partnerships throughout the state.

Levels of Implementation

Community Partnership is guided by four key strategies:

- Shared Decision-Making
- Individualized Course of Action (utilizing Family Team Decision Making and Youth Transition Decision Making Meetings)
- Neighborhood and Community Networking
- Policy and Practice Change

All four strategies must be implemented simultaneously in order to achieve desired results. Through a community shared decision-making process, partners work together to develop policy and practice that promotes individualized planning to meet specific needs of vulnerable families and work to increase community networks of both informal and formal supports. All sites need to meet level 1 criteria on each of the four strategies to be considered a community partnership site. This includes the following requirements:

- CPPC (Community Partnership for Protecting Children) Coordinator or SDM (Shared Decision Making) member must attend 100 % of the regional and statewide meetings
- Coordinator must complete and submit Community Partnership Reporting/Evaluation and Budget Forms by the specified dates
- Coordinator must agree to one annual site visit with the Community Partnerships State Coordinator or assigned representative

Shared Decision Making

Purpose: Provide leadership for collaborative efforts that promote community responsibility for the safety and well-being of children.

Level 1 Activities

- 1-a)** *New CPPC Coordinator attends first available CPPC Immersion 101 and 201 within 1st year.*
- 1-b)** Shared Decision Making Team must include DHS Representative and Decat Representative
- 1-c)** Shared Decision Making Team must include local community and professional members
- 1-d)** Establish linkages and develop protocol for decision-making with Decat Boards
- 1-e)** Implement the use of the Shared Decision-Making Survey - (all individuals who have participated in the CPPC Shared Decision Making process have the opportunity to take the survey)
- 1-f)** Develop plan for on- going comprehensive understanding of the four strategies for individuals involved in Shared Decision Making process (i.e. planning could include the use of CPPC brochure, video, CPPC orientation, and/or members attend an Immersion 101)
- 1-g)** Establish and develop plan to meet membership recruitment goals for SDM, including diversity
- 1-h)** Provide oversight for the planning and implementation of the four CPPC strategies
- 1-i)** Develop orientation plan for new members

- 1-j) Identify and meet initial goal for adding community members

Level 2 Activities

- 2-a) **Must meet all of the Level 1 items and also** add additional members and 1 of those members needs to be one of the following: domestic violence, substance abuse, or mental health partner
- 2-b) Implement plan for on-going comprehensive understanding of all four strategies
- 2-c) Implement orientation plan for all new members
- 2-d) Conduct Parent Partner orientation for all Shared Decision Making Team members
- 2-e) Share information and progress of the local Parent Partner program regularly
- 2-f) A Parent Partner is added to the membership of the SDMT
- 2-g) Membership recruitment plans that address diversity according to the demographics of your community
- 2-h) Review and report on diversity and disparity in the community and within the local Child Welfare system
- 2-i) Host a CPPC Immersion 101 event in CPPC area at least once every three years
- 2-j) Identify and meet goal for adding additional community members (this number can be reviewed and re-established each year)

Level 3 Activities

- 3-a) **Must meet all Level 1 and 2 items and also** have two of the following members: domestic violence, substance abuse and mental health partners
- 3-b) Have a broad representative of at least five (5) of the following members: Faith-Based Groups, Health Care, Education, Business, Legal System (courts), Law Enforcement, Government (County or City), Economic Supports, Practice Partners and Prevention Councils (See CPPC reporting and evaluation form for definition)
- 3-c) SDM develop avenue for youth voice (youth in foster care or foster care alumni)
- 3-d) Develop linkages and partnerships with other groups into SDM group
- 3-e) SDM membership diversity is representative of the local population
- 3-f) Role of the SDM group expands to include identifying, and developing a plan to meet unmet needs within the community
- 3-g) Develop plan to host a Race: Power of an Illusion in CPPC area
- 3-h) Shared decision making survey scores used as a tool to guide quality improvement of strategy implementation
- 3-i) SDM goals for community members are met (see CPPC Reporting and evaluation form for definition)

Level 4 Activities

- 4-a) **Must meet all Level 1, 2 and 3 items and also** have all three of the following members: domestic violence, substance abuse and mental health partners
- 4-b) Have ongoing implementation of new member orientation
- 4-c) SDM recruitment goal for Community Members must have been exceeded by 10%
- 4-d) Have 100% of the representation identified in the list in Level 3
- 4-e) Community representatives take a leadership SDM role as defined by the site
- 4-f) Role of SDM group expands to include advocacy for CPPC's goals with funders and policy-makers (legislators, governor, boards of supervisors, city council members, mayor, etc.)
- 4-g) SDM group implements plan and successfully addresses unmet needs within the community

- 4-h) Coordinator and/or member of SDM contributes to state and/or regional events/activities. (I.e. serve on planning committees, assisting with logistics, presenting, etc.)

Neighborhood/Community Networking

Purpose: Promote cooperation and form alliances to provide more accessible and relevant informal and professional supports, services and resources for families whose children are at risk of abuse and neglect.

Level 1 Activities

Goal: Increase awareness and understanding of how communities through partnerships can work together to keep children safe from abuse and neglect.

- 1-a) Develop Neighborhood/Community Networking plan that includes goals for engagement strategies and planned activities and that identifies potential network members to whom strategies will be directed
- 1-b) Engage the community and build awareness about Community Partnerships for the Protection of Children's four strategies through community forums, events and activities
- 1-c) Develop a cadre of spokespersons who are able to deliver CPPC information, such as the "CPPC 101" information
- 1-d) Establish performance and outcome measures and evaluate these to ensure the goals are obtained

Examples of ways to engage the Community (not limited to the list below):

Promote the name and concepts of Community Partnership for Protecting Children

- Pens
- Buttons
- Magnets
- Flyers or posters
- T-shirts
- Sign on your Building
- Message on Grocery Bag
- Other

Explain in greater depth a Community Partnership approach that protects children and/or strengthen families

- CPPC brochure
- Fact sheets
- PowerPoint/overhead slides presentations
- Speeches to civic groups
- Neighborhood / Community newsletter
- Brown bag lunches
- Public Service Announcements

- Work communications
- Other

To engage the community in shaping a plan or/and developing a specific aspect of the Community Partnership approach (i.e. one of the four CPPC strategies)

- Community meetings
- Surveys
- Customer response forms
- Roundtable discussions
- Suggestions box
- Recruit for steering committee
- Other

Involve the community in taking more responsibility for the protection of children:

- Family Movie Night
- Safety rodeo/carnival/fair
- Blanket projects
- Mini grants to communities
- Ice cream sundae party
- Link outreach to other neighborhood services
- Car seat and bike helmet safety activities
- Partner/support other civic and business group related projects
- Other

Develop spokespersons who are able to deliver CPPC information

- Send formal and informal stakeholders to CPPC 101 immersion
- Track groups to whom presentations are given, including who did the presentation,
- numbers who attended and general overview of results

Level 2 Activities

Goal: Increase linkages to informal or professional supports and resources for families in need and strengthen professional collaborations among child welfare, domestic violence, substance abuse, mental health and other community partners.

2-a) Continue to promote community awareness/engagement listed in level 1

2-b) Develop Neighborhood/Community Networking Plan that includes goals for linkages, collaborations, strategies and planned activities.

2-c) Develop/promote a plan to increase lineages between informal and professional supports and resources

2-d) Develop a plan to increase collaboration among economic supports, domestic violence, mental health, substance abuse and other child welfare professional partners

2-e) Involve Parent Partners in collaborative programs in the community

2-f) Involve Foster Parents in collaborative programs in the community

Examples of ways to strengthen informal supports and professional linkages and build collaborations (not limited to the list below):

Promote linkages between informal and professional supports and resources

- Professionals are involved in the planning and implementing of community events (Items listed in level 1)
- Develop and disseminate directory of community services
- Apartment complex projects
- Other

Engage other organizations, agencies and professionals to partner/support/promote the Community Partnerships for Protecting Children Approach.

- One-on-one relationship building
- Brownbag lunches or coffee talks
- Orientations for different organizations agencies and professional groups
- Create newsletters or put something in existing newsletters
- Partner/support/promote other related programs
- Say “Thank You” for the work they do
- Informational mailings
- Other

Level 3 Activities

Goal: Develop organized network of neighborhood/community that partner with CW professionals to provide supports and resources to families.

3-a) Continue with Neighborhood/Community Networking levels 1 and 2

3-b) At least one of the following is established:

- Organize groups/networks of community members and/or parents with prior CPS involvement and/or foster care youth. These groups focus on leadership and providing informal supports
- Implement plan to increase collaboration among economic supports, domestic violence, mental health, substance abuse and other child welfare professional partners
- The development of hubbing resources and activities that enhance the accessibility of services and supports
- Increase awareness and develop plans to address diversity and disparity locally

Examples of ways to organize networks (not limited to the list below):

Programs that promotes and facilitates informal networks that provide supports for families in need:

- Neighborhood Partners
- Circles of Support
- Other

Programs that promote and facilitate networks that involves parents who had previous involvement with CPS and will provide informal supports for families currently involved in CPS services:

- Moms Off Meth Groups
- Fatherhood Initiative
- 24/7 dads
- Parent Partners involvement in resource fairs
- Other

Programs that promote foster care youth leadership and supports:

- AMP
- Organize events that connect transitioning youth to caring adults in the community (swimming, bowling, graduation events, etc.)
- Iowa Youth Transition Decision Making
- Other

Increase in professional collaboration may include:

- Systems/Group cross-trainings
- On-going consultation with DV experts
- Increased access to low income housing programs
- Increased access to substance abuse experts
- Involvement in activities addressing cultural disproportionality and disparity
- Host Race: The Power of an Illusion training

Hubbing resources and activities:

- Resource Center
- Co-location of staff
- On-going hubbing activities that enhance access to services and support
- Other

Organized referral network that provides readily available supports and resources

Level 4 Activities

Goal: *Communities, DHS, and professionals work together to provide organized networks that include informal and professional supports, services and resources for families who children at risk of abuse and neglect.*

- 4-a) Must meet all Levels 1, 2 and 3 items and also** the implementation of at least 2 or more level 3 type programs
- 4-b)** The use of informal supports is standard practice for families involved with DHS (including involvement with family team meetings)
- 4-c)** Implementation of all programs and activities consistently address Diversity and Disparity issues

Individualized Course of Action

Family Team Decision-Making and Youth Transition Decision Making

Purpose: Genuinely engage families and youth to identify strengths, resources, and supports to reduce barriers and help families succeed.

Level 1 Activities

- 1-a)** Educate SDM and community about strength-based engagement/assessment skills and the Family Team Decision Making (FTDM) and Youth Transition Decision Making (YTDM) processes within the child welfare system.
- 1-b)** Promoting the understanding, the use, and the importance of informal supports in the FTDM and YTDM processes
- 1-c)** Promoting FTDM and YTDM trainings, and coaching and mentoring if needed
- 1-d)** Understand how FTDMs and YTDMs are available and accessed for families involved in the child welfare system
- 1-e)** Explore and understand FTDM and YTDM Iowa standards and how they are implemented
- 1-f)** Promote collaboration between FTDM and YTDM facilitators from different organizations and agencies.
 - Examples of these organizations and agencies include but not limited to: child welfare system, practice partners, schools, prevention programs, faith-based organization

Level 2 Activities

- 2-a)** **Must meet all Level 1 items**
- 2-b)** Develop plan to implement Community Based Family Team Meetings (CBFTDM) and Community Based Youth Transition Decision Making (CBYTDM)

Plans need to include:

- Assessing need for state-approved facilitators
- Recruitment of state-approved facilitators
- Maintain or have access to a list of state-approved facilitators
- Educating Community about CBFTDM and CBYTDM
- Marketing Strategies
- Building relationships with potential referral resources
- Funding resources and sustainability
- Tracking, evaluation and Quality Assurance

Level 3 Activities

- 3-a)** Must meet all Level 1 and 2 items
- 3-b)** Implement plan for CBFTDM-Community-Based Family Team Decision Making

Level 4 Activities

- 4-a)** Must meet all Level 1, 2 and 3 items
- 4-b)** Implement plan for CBYTDM-Community-Based Youth Transition Decision Making

Policy and Practice Change

Purpose: Improve policies and practices to reduce barriers and increase accessibility and relevance of services that lead to positive family outcomes.

Level 1 Activities

- 1-a) Identify needs for policy and practice change
 - Discussion about policy and practices with various agencies
- 1-b) Identify youth and/or parents who have been involved in the child welfare system and ask for their input about what works and what does not, from their perspective.

Level 2 Activities

- 2-a) **Must meet all Level 1 items**
- 2-b) Develop a plan to address identified needs
 - Gather data about policy and practice changes- needs/gaps in services
 - Document information gathered (using sources such as CFSR, surveys, focus groups) to prioritize practices and/or procedures needing to be changed or improved
 - Ensure that frontline staff from child protection system and partner agencies are included in development and implementation of practice change planning
 - Within the planning process identify cultural disproportionality and disparity issues related to Policy and Practice Change

Level 3 Activities

- 3-a) **Must meet all Level 1 and 2 items**
- 3-b) Implement plan for changes and re-evaluate using Plan Do Study Act (PDSA) or similar process
 - Develop communication strategies for implementing the change
 - Develop and implement monitoring to ensure change is successful
 - Develop specific methods for ensuring quality changes are maintained

Level 4 Activities

- 4-a) **Must meet all Level 1, 2, and 3 items and add the implementation of 2 or more policy and practice changes.**
- 4-b) Community agencies routinely involve SDM in developing and reviewing policies and practices
- 4-c) Agencies involved in CPPC routinely survey consumers and partners about their programs and make changes in response to feedback including diversity and disparity issues
- 4-d) SDM group solicits ongoing feedback from families and community members and makes changes in response to feedback
- 4-e) Ensure that all neighborhood network members and DHS-contracted agencies require specific “best practice” standards for delivering human services
- 4-f) Ensure that the SDM group, agency administrators and service recipients evaluate service delivery on a regular basis