

Region 4 Advisory Council Updates

The DCF Region 4 RAC **annual meeting** was held at the Hartford DCF office on May 19, 2015 from 12:00 PM - 2:00 PM. This meeting was the full membership & DCF Staff.

Update:

The By-Laws were updated 2014. Region 4 RAC's structure includes An Executive Team (DCF executive leadership and RAC Co-Chairs); Voting Members and Non-voting members.

There are 6 Sub-Committees which are made up of chairs, parents, providers, community members and DCF staff. The Subcommittees are Professional Development, Prevention, Membership, Healthy Development, Permanency and Community Partnership/System Development. The RAC work is done through these subcommittees. A process is now in place for subcommittees to make recommendations for approval.

Significant Changes occurred during this period.

- **Change in region 4 DCF leadership** - significant percentage of DCF managers are new to the management team
- **Change in region 4 RAC leadership**
 - New Co-Chairs were voted into office in June 2015 and assumed positions in July 2015
 - 13 members were nominated and voted for in July 2015 to fill the vacant seats.
 - The executive team is completing the review process to ensure that the 21 voting member seats are filled by the August 2015 meeting.
 - The new terms are 3 year terms
 - A new representative was identified to participate in SAC meetings

Meeting agendas generally includes presentations by DCF staff in response to specific questions and or issues identified by the RAC, presentations by the Continuous Quality Improvement Teams (CQI Teams), Legislative summary updates, region 4 strategic plan/performance expectations quarterly reports and subcommittee reports and recommendations and voting on recommendations.

In addition to the above, the focus of future meetings will include:

Presentations on new DCF policies and practices, and data, based on the interest and work of the RAC. RAC members in discussion with DCF will identify what data will be relevant to the RAC.

Prevention and CIP

RAC, SAC and Regional Systems of Care to connect with each other and DCF to address issues identified by RAC and preventative info not just focus on Behavioral Health

RAC to foster the connections between DCF SW and providers

Discussion regarding discharge planning - Case closing in relation to connecting parents with supports

Note: Over this period, RAC members had ongoing discussions regarding the work of the CQI Teams and that of the Subcommittees. Discussions were held regarding duplication and/overlap and the most effective use of the RAC subcommittees. CQI Teams presented to the RAC membership on their work as a result of

the inquiries to the DCF Executive Management Team. Subsequently, RAC members were invited to attend the CQI meetings and continue to explore next steps related to CQI and RAC Subcommittees. This has been an ongoing discussion. In the July 2015 RAC meeting, it was reported that the voting members will focus the August meeting on identifying the framework for 2015-2016 fiscal year and that it will be presented during the September RAC meeting.

Next Steps: During the August 2015 RAC Voting Members' meeting, the Regional Administrator will present 2nd Quarter Strategic Plan Performance Expectations Data and findings. In a previous meeting, the executive team discussed 1st Quarter report and 2nd quarter preliminary findings. The Team discussed using the strategic plan and the findings thus far, both successes and areas needing to be addressed as the central point of the work to be done during the 2015-2016 fiscal year. The result of the August meeting will be shared with the Full Membership during the RAC September meeting. A summary report of these meetings will be made available for presentation at the following SAC meeting.

Summary of Subcommittee Reports

Professional Development Subcommittee:

Through the learning forum which was developed in collaboration with the Trauma Champions and the Early Childhood Instructional Assistant:

- In June 2014 in the Hartford Office and in September 2014 a forum was held on "The Color of Justice: Addressing racial inequities in all areas of the office's practice." This forum was developed in collaboration with the Diversity Action Teams.
- In March 2015 we had forums in each office on the theme "Increasing Accountability," and "Creating a Learning Organization."
- The PD committee is hoping to collaborate with the Community Partnership committee and Regional Systems Director on a forum for the final theme: "Improving the Intra Agency and Community Partnerships" in the next few months.

Supervisor Feedback Tool: Supervision is an important area of focus, and with the current Region 4 Strategic Plan and the recent implementation of the new Supervision Model, it was decided that a Supervision Feedback Tool would be created to give staff an opportunity to give feedback on their supervisory relationship. Staff would voluntarily complete an anonymous online survey to share their perceptions about daily interactions with their direct leadership. The result of the survey would serve as a learning tool to encourage increased support and supervision of staff.

Summer 2014 the PD committee developed, sought and gained approval through the RAC and Executive management, and implemented the Supervision Feedback tool. The tool was first sent to supervisors in the region to complete. The tool was then sent to all other staff members in the region to complete in January 2015.

26 supervisors completed the tool which was a 30% return rate.

112 staff (other than supervisors) completed the tool which was a 32% return rate.

Each supervisor/manager was given their individual results

Each manager/director was given a compilation of their supervisors/managers results.

Three managers voluntarily met with a member of the PD committee to share their experience in receiving their individual results

Other supervisors will be given the same opportunity.

Most of the feedback were positive except that some individuals wanted to know how many of their staff had completed the tool. The committee will re-visit this prior to re-distributing the tool to all staff in July/August.

Next Steps:

Compare the questions on the job satisfaction survey with the PD subcommittee survey to see if there are enough similarities or if the PD subcommittee needs to conduct the survey again this summer to determine if there has been improvement in the application of the principles of partnership and the cross cutting themes.

Meet with supervisors to discuss their feedback on receiving their results of the Supervision Feedback tool. Redistribute the Supervision Feedback tool every 6 months

Collaborate with the Racial Justice CQI and Diversity Action Teams in planning a learning forum on Racial Disparity in June 2015

Collaborate with the Community Partnership committee and Systems Director to plan the last learning forum on the Cross Cutting Themes.

Create a list of Professional Development activities for supervisors.

Plan and collaborate with other committees on learning forums on topics identified

Prevention Subcommittee

During the fiscal year the subcommittee members discussed and worked on identifying the following items:

- 1) What is the definition of prevention?
- 2) What area does Region 4 cover where the subcommittee can take a closer look at prevention strategies"

In exploring these questions we were able to define prevention as education and collaboration (with families and providers) and take a look at how the towns within the region would benefit the most from any implemented prevention strategies.

Concerns: Struggle within this fiscal year involved lack of membership within the subcommittee and specific information regarding the area of focus for the subcommittee as deemed by the department. At the end of the fiscal year, subcommittee membership increased. Request was made to the department for assistance in regards to specific areas of focus moving forward.

Next steps

The subcommittee plans to set a goal for 2015-2016 of not only implementing strategies to educate and collaborate with the community, families and providers but to explore the best practices to streamline accessibility of services to families

Healthy Development Subcommittee:

The purpose of the subcommittee is to define 2-3 measureable goals around healthy development for 0-18+ year olds that can be developed and expanded into actionable items for the region. The area of focus has been on Education, Mental Health, and Physical Well-Being.

Goal#1 Education - When a child has entered into a placement, upon notification from the regional matcher, the Education Specialist will request and review the child's education records.

Goal #2 Mental Health - Ensure that Mental health needs of children entering care are proactively assessed, identified and addressed in a timely manner.

Goal #3 Physical Well Being- Ensure that the physical and medical well-being of children in care is identified, assessed, and addressed at regular intervals.

Update:

Many of the Healthy Development subcommittee's ideas and suggestions were implemented or incorporated into some of the existing program and structures.

Concern: The subcommittee wanted to ensure that their subcommittee is working in sync with the needs of the department and that their specific work is in line with the region's priorities while being able to make recommendations and provide information on the members' areas of concern. Following a meeting that was held with the Area Director, the Healthy Development subcommittee members will have the opportunity to join the case planning Continuous Quality Improvement Team meetings.

Membership Subcommittee Report

The purpose of this subcommittee is to assist the Region 4 RAC in meeting its' membership requirements in accordance to the By-Laws and practices established by the RAC. More specifically, the Membership Subcommittee is responsible for establishing a voting membership of no more than 21 persons and the recruitment of additional DCF employees, community partners, parents, foster parents and other leaders that makes up the full RAC membership.

Goals:

Develop and maintain a membership database to track membership;
Track members' attendance and compliance to RAC By-Laws and to;
Develop strategies to recruit new members and promote the RAC in the community.

Update:

- Robert's Rules of Order was introduced and adopted by the RAC membership
- Election of the 21 Voting Members and 3 Alternates were finalized June 2014
- Multiple email- lists were consolidated into one central RAC email distribution list.
- During the fiscal year, the Membership Committee applied for a State Advisory Council grant and was awarded funding (\$1,200) to better engage family, biological parents, foster parents, kinship caregivers, and special study caregivers to participate in the creation of policies and procedures that impact children and families in the Region 4 catchment area.

- During the month of July 2015, the Membership Committee facilitated the nomination and voting process for the vacant RAC seats as previously mentioned.

- A new process was established in July 2015 to ensure that in addition to the RAC meetings, parents are able to present any issues and concerns they may have prior to the meetings. The membership committee members and/or co-chairs will be available at least 1 hour before RAC meetings to meet with parents should they desire such a meeting. Need for linkages to be made and resources to be obtained will be assessed and addressed. System issues and concerns will be presented at the RAC meetings.

Proposed Goals for 2015-2016

- Continuously identify and recruit parents and other community partners to join the Region 4 RAC
- Identify individuals from the current Region RAC e-mail distribution list of approximately 125 people that no longer want to be notified of RAC activities, initiatives or meetings.
- Recruit new members to join the Membership Subcommittee and to elect a new chairperson.

Permanency Subcommittee

Update:

This subcommittee was initially active in recruiting members, identifying an area of focus that involved the identification of resources within the community for children and families. It was determined early that a resource guide would be helpful to family members and the team would work with the Community Partnership subcommittee and DCF to identify the best strategies for achieving its goals.

During this period, due to the resigning of the chair with his shifting responsibilities, there was a transition period where a new chair was identified. The focus of the subsequent meetings were on requesting from the department data specific to foster care and adoption, congregate care, children returning to the community and outcomes related to their transitions back to the community. Other data was requested as well as presentations on the various practices that were recently rolled out and that related to permanency. The presentations were extremely helpful to subcommittee members.

At the time of the meetings, subcommittee members were informed that the CQI team and QA staff were working on collecting and mining the data and they would be presented as soon as they were available. Subsequent to these meetings, multiple discussions occurred at the RAC meeting regarding the relationship between the CQI and the subcommittees. Meetings will resume during the next few weeks.

Next steps: Subcommittee members will attend and participate in the Permanency Continuous Quality Improvement Team, discuss observations during subcommittee meetings and propose permanency related discussion items and/or make recommendations.

Community Partnership/System Development

Summary of accomplishments since June 2014

1. Worked to highlight the importance of the RAC providing feedback related to 13-178, the Children's Mental Health Plan and assisted with tabulating the feedback which was submitted by the Region 4 Area Director
2. Discussed concerns related to Integrated Service System (ISS) format with Dr. Springer. There was a subsequent change in the ISS meeting format and focus.

Next Steps: This subcommittee will join the intake/Placement Averted Continuous Quality Improvement Team.

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The below was added as it is relevant to the discussion for Region 4 Taken from -

**Statewide Provider Meeting Breakout Session Notes
April 8, 2015
Central Connecticut State University**

REGION 4

What service gaps exist in our region?

After School programs adolescents particularly JJ population

Adol SA treatment – IOP and Inpatient

Services for youth to support transition from DCF to DMHAS when youth are not "cooperative" with transition

Case management for youth who transition into the community with high acuity level

Fatherhood engagement services

Services for victims of Human Trafficking both homes and services in the community

Services for transgender youth

Triple P does not meet the needs of all clients who need parenting skills. Model is limiting.

What existing services should we consider expanding?

ICAPS, MDFT, MST, EMPS, FBR, MST-BSF, Reunification/TFT is already full.

What services, if any, have excess capacity?

MST-PSB seems to have capacity in our Region. Need to look closely at this

CHAP referrals are decreasing. Providers seem to think it has to do with the lack of coordination by the previous staff in CO? We will talk to our Adol staff in Region.

What language needs are unmet by the service array in the region? Are there specific services where bilingual staff and/or interpreters would be helpful?

Spanish speaking clinicians in EBP services are limited

Sign Language needs are an issue also