



Foster Care in Mesa County Improvement Plan Summit: April 15-16, 2008

Foster Care in Mesa County Goals

Review and analysis of three major goal statements for foster care in Mesa County. Key words to keep; key concepts to express:

KEY WORDS

Assures
Success
Seamless continuum
Every
Support
Participation

KEY CONCEPTS

Unique needs; Individualized situations
Consensus
Embrace diversity
Timeliness
Different opinions are valued
Community

Notable quotes from the large group conversation about the goals:

"I'm not a paycheck, I'm a child."

"I need a *home* not a *placement*."

"To kids, *respite* feels like we're being punished."

"There is no such thing as failure - mistakes by youth are welcomed in a loving, learning, environment."

"We must build a safety net for success."

"We need to change our perception from the 'level of placement' to one that assures clients receive well thought out, unduplicated and the targeted services they need."



Mesa County Goals: Draft #2

A strong and caring Mesa County foster care system:

- Assures that every child receives a home & services that are unique to his/her needs and in a timely manner
- Assures that every foster family receives what they need to participate equally and successfully
- Develops a seamless and cooperative continuum of placements and services, across all providers and programs, to support children and foster, kin and bio families.



Mesa County Vision

What has been accomplished three years from now that has made foster care in Mesa County a success?						
Right Kid. Right Home. Right Time!	Foster Parents are Valued and Recognized through Support, Resources, and Compensation	Comprehensive Recruitment and Training Program for Foster, Kin, and Adoptive Families	State Obstacles are Overcome	A Continuous Quality Improvement Process is in Place	Collaboration and Teamwork exists between DHS and CPAs	Family to Family is Embraced throughout Mesa County
<ul style="list-style-type: none"> ○ Shelter Assessment Center ○ Available and diverse living arrangements ○ Orientation for foster care children ○ "Modern" orphanages ○ Listen to focus on the children ○ Offsite RCCF ○ Specialized placements with assessed matching ○ DHS homes receive immediate behavior assessment for each placement ○ One family for life 	<ul style="list-style-type: none"> ○ Community resources and credits for respite care ○ Formalized respite care program ○ Overhaul respite program ○ Creative approaches to respite care ○ Benefits package for foster families ○ Contract emergency child care services ○ Grief/loss support options ○ All homes receive equal pay, training and services ○ Community based transportation resources ○ Customer care for foster families 	<ul style="list-style-type: none"> ○ Unified training and recruitment with shadowing and mentoring ○ Recruitment specialist ○ Specialized, flexible training ○ Foster parent internships ○ Clear understanding of risk involved for foster/adoptive parents 	<ul style="list-style-type: none"> ○ Redefine Respite rules ○ Two weeks turn around for fingerprints 	<ul style="list-style-type: none"> ○ Consistent criteria for all decisions ○ Quality assurance throughout system ○ C.A.B.s meet with agencies monthly to problem solve ○ Needs assessment for foster care and resource system ○ Concurrent planning is effective and institutionalized ○ Timely access to services (medical, therapy, etc) ○ Access to case information ○ Uniform/consistent case management and provider services 	<ul style="list-style-type: none"> ○ DHS=Kinship/Kin Foster Home ○ CPA=Family Foster Home ○ Group Home ○ Non-competitive, non duplicative countywide foster care ○ Take a worker to work day ○ Central collaborative placement unit 	<ul style="list-style-type: none"> ○ Foster parents are invited to TDMs ○ Community wrap around services for foster homes ○ Foster parent participation in decisions ○ Family to Family implemented throughout Mesa Co. ○ Neighborhood network for placement and support ○ Foster and Bio parent speaker teams ○ Neighborhood support through MCFPA

Barriers to Reaching the Vision

Undefined Respite and Prohibitive Rules Retards Effective Support/Alternatives

DHS does not have programs designed to provide respite care
Respite care provider must be certified foster care provider
Rules are prohibitive for group homes
Currently foster parents have to pay for respite

Lack of Accountability and Integration Inhibits Effective Approaches

Family to Family not being followed
Not integrating different approaches

Inattention to Quality Leads to Low Morale/Commitment

Quantity vs. quality
Employee retention

Blinders to Obstacles and Unclear Communication Inhibits Collaboration and Effective Teamwork

No defined internal process for identifying and addressing obstacles at various levels of govt.
Operating in silos
Effective communication
Power and control re: decision-making and competition for resources
Imbalance of power

Tight Resources Challenge Good Performance

Difficulty of getting additional county FTEs
Ability to follow thru on recruitment and training
Allocation of time and money

Differences in Perspectives Hinders Collaboration


Thinking inside the box
Placement vs. case mgt perspective
Philosophical differences (between agencies)
Not everyone believes in or understands Family to Family
Negotiation and agreement between DHS and CPAs

Solutions generated in the large group for improved Treatment Team meetings:

Improve and increase our communication
Identify which paradigm/approach we're using in each case
Be willing to look at everything
Learn how to manage conflict
Re-examine our process and intent for treatment team meetings
Work from accomplishments
Communicate/clarify when DHS regulations may change decision post meeting
Define success for each party



Foster Care in Mesa County Implementation Plan

Task Team	Success Indicators: Two Years	First Year Accomplishments
Family to Family 	<ul style="list-style-type: none"> ○ Consumer Advisory Board ○ Regular consumer advocacy Board meetings ○ All customers/stake holders groups represented ○ All agency and service managers at the table ○ Open agenda to identify and address system issues and problems 	<ul style="list-style-type: none"> ○ F2 F is represented on existing community boards ○ Full-time F2F Coordinator hired ○ 2 Full-time TDM Facilitators hired ○ F2F Coordinator participates in resource home R&R efforts ○ Active foster, Biological and youth Advisory Council in place ○ Data analysis connected to QA
Recruitment and Training	<ul style="list-style-type: none"> ○ Recruitment based on needs ○ Homes that provide stability for children/prevent the foster care shuffle. 	<ul style="list-style-type: none"> ○ Scheduled meetings to discuss joint recruitment plan ○ Protocol for expedited service ○ Developed CORE training w/ all agencies ○ Developed a specialized training curriculum -Behavior Specialist -Special Needs -Adoption
Foster Parent Support, Resources and Compensation	<ul style="list-style-type: none"> ○ Improved foster parent retention (excluding successful adoptions) ○ Strong respite program in place ○ Reasonable compensation based on needs and the economy ○ System being utilized by foster, kin, adoptive families address grief/loss issues ○ A satisfaction survey or system that would be in place to determine success and dissatisfaction of foster families ○ Daycare plan developed to assist working foster parents, who need emergency daycare until a permanent plan can be arranged 	<ul style="list-style-type: none"> ○ Initial survey to determine foster parent needs (respite, transportation, etc.) completed ○ Initial meeting about respite program – needs held ○ Identified Common Assessment tool F.P., Children, Bio-Parents ○ Grief/Loss system in place (individual & group) ○ Quarterly survey done with PRM regarding satisfaction/dissatisfaction

	<ul style="list-style-type: none"> o A Transportation plan to address multiple needs of the multiple children within families (supervised visitation, therapy, etc.) o Recognition packages: (to offer to families) o Health insurance o Date weekend o Respite o Recognition awards o Case worker involvement with recognition o Discounts to various businesses w/in community o Repair services (for damages to home) 	
Right Kid, Right Home, Right Time	<ul style="list-style-type: none"> o Community based placement options so children can stay in their churches and schools. o Active in home support groups o Respite program developed by CPA that allows every MC foster home to earn credits toward paid respite placement o Stable, highly skilled, visit supervisors o Transportation program development by CPA that MC can/will contract with for transport needs of MC parents who have time conflicts 	<ul style="list-style-type: none"> o Support/Orientation for new foster kids completed o Pre-placement visits to potential home (spelled out?) o behavior intervention and minimizing moves for each child provided o Program for matching child to a/the parent/s designed o Achieved shelter assessment centers w/ strength-based homes
Continuous Quality Improvement	<ul style="list-style-type: none"> o Timely access to services: o Length of the time btwn authorization and svs start is measured o Expedited svs protocol o Assignment of therapist in Mgmt Team 	<ul style="list-style-type: none"> o Length of time between service authorization and service start is measured o Therapist assigned in management team o Centralized emergency response for all homes o Consistent case management
Collaboration DHS/CPAs		<ul style="list-style-type: none"> o Financial feasibility of outsourcing FFH and GH, not kin explored o CPAs have representatives on CMT/AMT o Institutional abuse investigations by 3rd party performed

Six Month + Action Calendar

Task Team	May	June	July	Aug	Sept	Oct	Nov	Dec-Feb
Family to Family	F2 F is represented on existing community boards	Full-time F2F Coordinator	2 Full-time TDM Facilitators	F2F Coordinator participates in resource home R&R efforts	Active foster, Biological and youth Advisory Council			Data analysis connected to QA
Right Kids Right Home Right Time		Support/Orientation for new foster kids	Pre-placement visits to potential home			Provided behavior intervention and minimized moves for each child		Program for matching child to a/the parent/s Achieved shelter assessment centers w/ strength-based homes
Collaboration of DHS & CPAs		Explore Financial feasibility of outsourcing FFH and GH, not kin	CPAs have representatives on CMT/AMT			Institutional abuse investigations performed by 3 rd party		
Foster Parent Support, Resources & Compensation	Initial survey to determine foster parent needs (respite, transportation, etc.)		Initial meeting about respite program - needs Identify Common Assessment tool F.P., Children, Bio-Parents		Grief/ Loss system in place (indiv. & group)			Quarterly survey done with PRM regarding satisfaction/dissatisfaction
Continuous Quality Improvement			Length of time between service authorization	Centralized emergency response for all homes				Consistent case management

			tion and service start is measured					
			Therapist assigned in manageme nt team					
Recruit- ment & Training		Schedule meetings to discuss joint recruitment plan	Protocol for expedited service	Developing CORE training w/ all agencies		Special- ized training curricu- lum develop – ment: >Behavior >Specialist >Special Needs >Adoption		

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