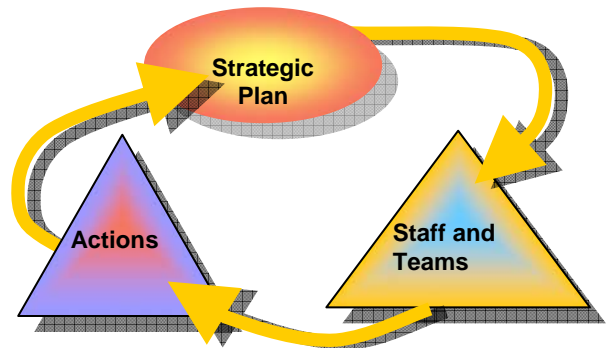




Vermont Department for
Children and Families
Family Service Division

Transforming Services for Families



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Family Service Mission

Mission

We are committed to protect children and strengthen families, in partnership with families and communities.

Guiding Principles

- ✦ We will carry out our responsibility to serve the best interests of children who are abused, neglected, delinquent or beyond the control of their parents.
- ✦ Children deserve to be safe and secure.
- ✦ Children belong in families who are committed to them into adulthood.
- ✦ We will focus our services on the child in his or her family, culture and community.
- ✦ We will involve individuals we serve in the planning and evaluation of services.
- ✦ We will collaborate with communities to create public policy and services to support children and their families.
- ✦ We will deliver services within the available budgets.
- ✦ Our decisions, policies and internal organization will support and reflect our mission.

Four Key Practices of the Agency of Human Services

- ✦ Customer Service... *doesn't stop at rules and regulations.*
- ✦ Holistic Service... *is about looking past discrete individual needs to the whole person.*
- ✦ Strength-Based Relationships... *are more effective than talking about what's wrong with someone.*
- ✦ Results Oriented... *means more than how much we did and how well we did it, it's about people's lives being better.*

Core Practice Principles

Children are safe from abuse:

- Keeping children safe is our primary concern; we address it in every intervention, every plan and every contact.
- Child safety is a collaborative effort; we engage families and community members to find safe solutions for children.
- We ensure ongoing safety through frequent, meaningful contact with children and their caregivers.

Children have enduring relationships with healthy, nurturing families.

- Permanency planning for children is considered at every stage of decision making
- When children cannot safely live with their families, we first consider kin who are capable of providing safe, nurturing homes.
- Lifelong connections are critical for children; we strive to promote and preserve family and community connections for all children.
- Permanency is best achieved through a legal relationship, such as reunification with parents, adoption or guardianship.

Children are successful in family, school and community:

- We recognize that all families have strengths and deserve a voice in decisions regarding their children. We serve families from diverse backgrounds in a responsive manner.
- We recognize that families and individuals have the capacity to make positive changes in their lives. We engage family members and state and community partners to inform case planning and service delivery to maximize the opportunities for success.
- We utilize strength-based assessments and research findings when determining the best interventions for children and families.

Youth are free from criminal behavior:

- Youth on probation receive professional and consistent services based on best practice, customer services, holistic and collaborative family-based approaches, strength-based assessment principles, balanced and restorative justice, and progressive responses.
- We are committed to working in partnership with communities and families, improving community safety by decreasing risk; providing supervision levels that are commensurate with risk; and matching placement and services to meet the needs of families and youth.

Staff is supported, valued and receive ongoing training:

- We are responsible for creating and maintaining a supportive working and learning environment, with open communication and accountability at all levels.
- Our staff is our most important asset. Children and families deserve trained, skilled staff to engage and assist them. Our training focuses on building specific skills for engaging families and creating permanency.

Introduction

On any one day, staff of the Family Services Division are responsible for working with some 3000 of Vermont's most vulnerable children and families. About 1400 are children in our custody. For those children, we have decided that the benefit of state custody outweighs the trauma of separating them from their families. These are difficult choices, not to be made lightly. Our work and our decisions must be guided by a set of values that all share.

Values statements are fundamental statements of belief, and influence behavior in many ways. In the process of creating this transformation plan, we have discussed the following set of values. As an organization, we are moving towards a practice model that aligns with our core practice principles, and with the following values.

- ✦ All people are capable of growth and change. In our work, we are informed by knowledge of past behavior, but do not assume that it is a perfect predictor of their future.
- ✦ When circumstances require us to choose among competing interests, we will elevate the child's need for safety and permanency over the needs of involved adults.
- ✦ It is our responsibility to focus not only on immediate safety, but on the long term wellbeing of the children and families we serve. Lifelong connections are a key ingredient to wellbeing, both in childhood and into adulthood.
- ✦ To be effective over time, our social workers have regular contact with children and families, where they live. Respectful, engaged relationships with children and families hold the greatest promise for positive change.
- ✦ We are aware of the power entrusted to us, and use it responsibly.
- ✦ We believe that families have expertise about their own lives. We use a variety of ways to engage families and mobilize their resources to promote safety and wellbeing of their members.
- ✦ Risk is inherent in all of the work we do and the decisions we make, and cannot be entirely eliminated. Our job is to recognize risks and build safety around them, making full use of the protective factors families and communities have.
- ✦ We assume that separation of children from their families will be traumatic. When separation must occur, we will preserve the continuity of supportive relationships for the child.
- ✦ When children must be separated from their families, we do all we can to help families to safely reunify. This includes a plan for parent-child contact that is supportive and educational.
- ✦ In communicating with our staff and the public, we clearly articulate our values and practice model.
- ✦ We strive to build a workforce that works in alignment with our core values and our practice model – and to support them through open dialogue, clear policy, excellent training and supervision, formal and informal performance evaluation and appropriate resource allocation.

- ✦ We believe that no one social worker or supervisor should shoulder the burden of critical decisions related to the safety and wellbeing of children. Our practice incorporates teamwork and, whenever possible, shared responsibility and accountability for decision-making.
- ✦ When a tragedy happens, we will strive to find the learning in that experience, and apply that learning to our future practice.

To live these values, we, as an organization, must be:

- ✦ Intentional – we know where we are going and our decisions reflect that.
- ✦ Unwavering – We are in this for the long run. Change takes time.
- ✦ Committed to addressing capacity – We believe that our social work staff want to do the best work possible, and deserve to have a work environment and workload that enhances success.
- ✦ Focused on the long term – For the children and families we serve and for the quality of our services.

The following plan is one we are committed to carrying out over the next 3-5 years. It represents our best thinking at this time, and will be adjusted as necessary.

What Do We Know?

Our recent Child and Family Services Review confirmed many things we know:

- ✦ We have many dedicated staff at all levels who want to do the best job possible. They entered their professions with high hopes and great aspirations.
- ✦ Our greatest practice strength is safety. Once we intervene, we intervene promptly and competently.
- ✦ Nevertheless, many Vermonters feel that we are inconsistent in our report acceptance, and that we wait too long to intervene, leaving many children at risk.
- ✦ The work we do at the front-end of our system sets the tone for the work we will do ongoing. Relying on an investigative response focuses our work too much on an incident and too little on the factors underlying an incident. In addition, we do not employ practice strategies for meaningful engagement of families at this stage. Arguably, we should deploy more resources in the front-end of the system.
- ✦ As a system, we have too often “contracted out” the relationship with the children and families we serve.
- ✦ Concurrently, we have come to see court intervention as a necessary ingredient to success with challenging families.
- ✦ The frequency and quality of our contact with children and families is not consistent with adequate, much less best practice. This is driven by a complex set of workload issues. The result is that, in our long term work with children and families, we are crisis-driven.
- ✦ Workload pressures are reflected in consumer concerns, complaints from foster parents and residential providers.

- ✦ Across the nation, quality supervision has been found to be key in the quality provision of services. We do not currently build and support capacity to consistently provide the kind of supervision that supports best practice.
- ✦ Our placement stability data suggests that we do not consistently improve the lives of children in our custody.
- ✦ Our model for probation practice is not well-articulated and does not consistently assess the underlying factors which led to the youth being delinquent.

Family Services Strategic Directions

Increase Safety for Children by Enhancing Front-End Services

Our primary “front end” services are intake, report screening, child abuse investigations and Chapter 55 assessments. This part of our system is subject to criticism by many different stakeholders, some of whom feel that we wait far too long to intervene, leaving children at risk; and others who feel that we invade the privacy of families without legitimate reason. Thus, we are constantly balancing the right of children to be safe with the right of families to be free from government intrusion.

To strike this balance and provide quality services, we need to be consistent in our decision about when to intervene, and more flexible in how we intervene. Also, we need to ensure that we have sufficient staff resources devoted to front end services so that workload concerns do not subtly affect report acceptance. We need to provide more holistic services designed to address the underlying factors that brought the family to our attention. This preventive focus will help families to get their lives on course without oversight by the courts.

We propose a number of changes to strengthen the front end of our system:

- ✦ Centralize intake, in order to improve consistency of approach to decision-making, and to free up supervisory time in the districts.
- ✦ Strengthen practice with intact families, in part by deploying more staff resources to this type of work.
- ✦ Incorporate family engagement strategies into the early assessment process.
- ✦ Implement due process and expungement requirements of H.148.

Centralize Intake and Report Acceptance

WHY?

- ✦ Our current system does not promote a consistent approach to intake and report acceptance, in spite of our best efforts to establish clear policy, provide good consultation and training.
- ✦ Vermont has the lowest report acceptance rate in the nation, according to 2005 statistics generated by HHS.
- ✦ There is a built-in incentive to restrict report acceptance, due to workload concerns.
- ✦ Centralizing intake will significantly free up supervisory time to focus on casework practice.

PRIMARY STRATEGIES

- ✦ Use a combination of re-deployed and temporary positions to create a centralized intake unit in Waterbury.
- ✦ Employ a phased implementation plan to ensure quality.
- ✦ Address the concerns that staff, mandated reporters and others may have.

WHAT RESOURCES ARE NEEDED?

- ✦ Analysis of available data indicates that about 6 FTE social workers and 2 FTE supervisors/managers are needed in order to credibly implement centralized intake.
- ✦ The unit would be physically located at our Waterbury site.
- ✦ Infrastructure supports are needed – telephone systems, computers, etc.

MEASURING SUCCESS

- ✦ Centralized intake is up and running by 9/1/08.
- ✦ With centralized intake, 90% of reports are reviewed for acceptance within 2 hours of the intake.
- ✦ District supervisors complete a satisfaction survey by 12/1/08 and appropriate changes are made by 4/1/09.
- ✦ Mandated reporters complete a satisfaction survey by 12/1/08 and appropriate changes are made by 4/1/09.

Use Front-End Services to Improve Family Capacity to Keep Members Safe

WHY?

- ✦ Best and emerging practice around the nation indicates that a differential response to child abuse and neglect is more effective in engaging families in needed services, and does not compromise safety.
- ✦ Differential response allows an assessment response to many reports, rather than an investigative response. An assessment response focuses on services needs and does not require a substantiation decision and entry of a name into the Child Abuse Registry.
- ✦ The response is proportional to the situation, rather than a “one size fits all” response.
- ✦ The implementation of H.148 due process requirements has the potential to reinforce incident-based practice, rather than the kind of holistic, prevention-based practice we aspire to.
- ✦ Our recent federal Child and Family Review confirmed that our practice with intact families is not well-developed. In recent years, we have not served many intact families, instead referring to community services. As a result, we have “lost” that part of our practice expertise. CFSR findings indicate that we need to

increase contact, craft case plans that are responsive to safety and risk factors, and assess effectiveness regularly.

- ✦ We have successfully demonstrated the power and efficacy of employing family engagement strategies later in our involvement; using these strategies right up front is likely to enhance our ability address safety issues without court involvement.

STRATEGIES TO EMPLOY

- ✦ Create a compelling argument for differential response.
- ✦ Build in support for family engagement in assessing and planning for safety.
- ✦ Increase discretion for case opening after investigation, based on risk.
- ✦ Fully implement the YASI as a way to fully assess youth on probation and to target the right services to the right youth.

WHAT RESOURCES ARE NEEDED?

- ✦ An assessment response and a more liberal case opening policy will require shifting of social worker time and contractual support to the front-end. We anticipate that due to centralized intake, more reports will be accepted for a response. To accommodate this need, we will have to shift more personnel resources to the front end.
- ✦ Technical assistance is needed to develop a framework for practice and supervisory supports.
- ✦ Social workers and supervisors need training and support for this kind of work.
- ✦ Clear policy guidance is needed.

MEASURING SUCCESS

- ✦ The report to the legislature due 11/1/07 creates a compelling case for differential response.
- ✦ By 9/1/08, 100% of investigations/assessments are commenced according to policy guidelines, or supervisory waiver is documented.
- ✦ We continue to meet or exceed the national standard for child safety following substantiation.
- ✦ 75% of social workers attend training on practice with intact families by 12/31/08.
- ✦ The percent of all open cases which represent intake family cases doubles by 7/1/09.
- ✦ 100% of families with new open cases have case plans completed within 60 days of case opening by 7/1/08.
- ✦ All districts have the capacity to facilitate a variety of family convenings by 10/1/08.

Implement Due Process & Expungement Requirements of H.148

WHY?

- ✦ Recently passed legislation – H.148 – requires this change, including contracting for this service.
- ✦ The change will promote consistent, quality decision-making by incorporating a robust feedback loop to districts, as well as allowing us to target training and technical assistance;
- ✦ District director time will be freed up by eliminating current Level 1 substantiation reviews.
- ✦ We will have the discretion to expunge names from the central registry based on current risk to children’s safety and well-being, if seven years have passed after the substantiation.

WHAT RESOURCES ARE NEEDED?

- ✦ Up to 6 FTE independent (contracted reviewers);
- ✦ One administrative assistant employed by the state;
- ✦ District supports in the form of record retrieval and review, and space to hold reviews;
- ✦ New computer applications;
- ✦ Additional AAG support for Human Services Board Hearings.

MEASURING SUCCESS

- ✦ Reviewers are hired and trained by 9/15/07.
- ✦ Administrative support is hired and trained by 9/15/07.
- ✦ Database support is available to track reviews by 9/15/07.
- ✦ 85% of requested reviews on new substantiations are completed within statutory timelines. All reasons for non-compliance are documented.
- ✦ 70% of requested reviews on old substantiations are completed within statutory timelines. All reasons for non-compliance are documented.
- ✦ Expungement reviews are handled as expeditiously as possible. Timelines are tracked.

Improve Stability, Permanency and Wellbeing for Children and Families

A variety of changes are needed to ensure that children experience stability and permanency in their lives. We believe that we must re-configure services in a substantial way to ensure that we make it possible for social workers to have the kind of relationship with children and families that is needed to (1) get ahead of problems and (2) be effective when problems do occur. Also, we must ensure that when a child, family, or foster family requests information or support, we respond in a timely and

courteous way, providing excellent customer services. We believe that addressing social worker contact will also promote placement stability.

The first round of the CFSR, those states who were most successful in improving outcomes were the states who focused time and energy on the quality of supervision. Also, studies of social worker retention indicate that high quality supervision is one of the most important factors in retaining staff – even more important than workload and other working conditions.

Although the division has a longstanding policy that defines the role of the supervisor, we have not provided the kind of training and supports needed for supervisors to excel in all of the realms of supervision.

This plan calls for significant changes in the role and focus of the social worker – and in the structure and purpose of supervision. The role of the supervisor will be critically important to the success of the plan. New skills – particularly in the area of teambuilding and group supervision – will be needed.

Create Capacity for Social Workers to Have Engaged Relationships with Children and Families

WHY?

- ✦ Our recent federal Child and Family Services Review (CFSR) confirmed that the quantity and quality of contact between the worker with case-planning responsibility and authority is “unacceptable”.
- ✦ New federal Title IV-B requirements require us to achieve 90% monthly social work contact with children in custody by 10/1/2008 (?), with the majority of contact occurring in the child's living situation.
- ✦ Current workload is not conducive to creating and sustaining the kind of engaged relationships necessary to do quality work focused on avoiding problems and engaging children and families in seeking long term solutions to the challenges they face.
- ✦ We lack the specialized functions needed to succeed in a new proactive model. For instance, we need staff who are expert in convening various family meetings – Signs of Safety facilitated consultations, icebreaker meetings between children's families and foster families, family group conferencing, etc.
- ✦ Re-focusing on the permanency agenda in a different way requires both the central office and field offices to re-evaluate safety and risk in this context. We will need to be clear about what we are aiming for – risk recognition vs. risk reduction vs. risk elimination. In order for the “system” to tolerate the risks we will no doubt face, our social workers will need to have frequent “eyes-on” contact in the home.
- ✦ Family reunification services, including strategies to assure regular, positive parent-child contact, need retooling. Also, to transform supervised visiting into

an opportunity for true parenting support, we need to re-think where parent-child contact takes place.

PRIMARY STRATEGIES:

- ✦ By 9/1/08, re-deploy resources to ensure that the social worker or other person with primary responsibility for the child and/or family has the time and resources to have regular, quality contact with the child and family, with an emphasis on in-home contact. Contact will be focused on:
 - developing meaningful relationships.
 - true engagement of family and youth in case planning, including ongoing assessment.
 - providing opportunities for parent-child contact that explicitly support successful reunification, whenever possible.
 - unwavering focus on preserving connections to family and others, or developing new connections when necessary.
 - providing an avenue for honest dialogue about challenging issues,
 - preventing problems, and planning for the future.
- ✦ By 9/1/08, re-visit the role of state employees vs. contractors in serving children and families.
 - Increase the number of professionals who have case planning responsibility.
 - Ensure specialized professional support of core practice strategies and decision-making (e.g. kinship supports, initial screening, convening family groups, family finding, transition support, immediate crisis supports, post-adoption supports).
 - Maintain current level of federal funding to support services under Global Commitment.
 - Address access to technology, physical co-location and other practical issues.
- ✦ By 10/1/07, convene workgroup to develop practice guidelines for deciding if and for how long parent-child contact should be supervised. Ensure that supervised contact is focused on enhancing the parent-child bond, and on teaching positive parenting skills. By 7/1/08, publish practice guidance, and build in contractual services aligned with guidance.

MEASURING SUCCESS

- ✦ Average caseload is reduced from 16 to 12 by 1/1/09.
- ✦ The percent of children with at least monthly face-to-face contact increases from 10.6% to 24% by 10/1/08.
- ✦ 100% of children in custody have case plans completed within 60 days of case opening by 10/1/08.
- ✦ A family meeting is convened as part of the case planning process in 50% of cases by 3/1/09.

Improve Permanency Outcomes for Children in Custody

WHY?

- ✦ Several national studies have shown in no uncertain terms that children who do not achieve permanency in the child welfare system have poor outcomes as adult. They show up in highly disproportionate numbers in homeless shelters, mental health and correctional settings, and on public assistance.
- ✦ Findings of our recent CFSR highlights challenges in a number of areas related to permanency – timely establishing of permanency goals, concurrent planning practice, identification of kin resources, involvement of fathers and father's families, timely completion of case plans and placement stability.
- ✦ The Agency of Humans Services has identified services to transition-age youth as a top priority issue. These youth too often have substantial unmet service needs. The governor concurred, and established an initiative to expand services to this population. The legislature supported the Governor's recommendation, funding expanded services to youth formerly in custody ages 18-22.
- ✦ The Family Services Initiative has had an active permanency initiative for the last two years; this initiative has not resulted in substantial improvements in permanency outcomes for youth.

PRIMARY STRATEGIES:

- ✦ Complete revision of case plan formats by 11/1/07.
- ✦ Complete automation of new case plan format and implement by 9/1/08. Allow identification of concurrent goals as part of automation plan.
- ✦ Design training on concurrent planning for supervisors.
- ✦ Fund kinship care advocate for Vermont Kin as Parents.
- ✦ As part of redeployment of contracted resources, identify kinship support person(s) for each district, proportional to caseload.
- ✦ Promulgate regulations and policy to address new transition age services.
- ✦ Ensure that all new social work staff attend NEET sessions at the earliest opportunity. As part of a continuous learning plan, encourage and support the attendance of other staff at NEET sessions.

MEASURING SUCCESS

- ✦ 100% of children in custody have case plans completed within 60 days of case opening by 7/1/08.
- ✦ Case plan format and database allows for selection of concurrent goals by 9/1/08.
- ✦ Training on concurrent planning is developed and attended by 100% of supervisors by 12/31/09.
- ✦ On 9/30/07, there were 893 children in custody living in family-based substitute care. 17.5% of those children were living with relatives. By 9/30/09, that percent will increase to 23%.

- ✦ Placement stability, as defined by the federal composite measure which focuses on children with two or fewer placements, will increase from 69.5 to 71.5 by 12/31/09.
- ✦ By 7/1/08, assertive efforts to locate and involve fathers in case planning occurs within 30 days in all cases where the father's identity is known.
- ✦ By 10/1/08, transition planning for older teens addresses relationships, services and supports necessary to promote success in 100% of cases.
- ✦ By 10/1/08, assertive efforts to identify and locate kinship resources are documented with 60 days, in 80% of cases of children are newly in custody.
- ✦ By 1/1/09, family finding activities are being pursued for 50% children in custody for 3 or more years who are not living with a family committed to adopt.
- ✦ By 7/1/09, when the father's identity is not known, parentage is addressed in court at the earliest opportunity.

Ensure High Quality Supervision

WHY?

- ✦ Those states who were most successful in the first round of the CFSR focused on the enhancing the quality of supervision in their states.
- ✦ Research shows that quality supervision is closely linked with the retention of social workers.
- ✦ With the anticipated retirements among managerial ranks, supervisors will be key in sustaining a positive direction into the future.
- ✦ With movement towards group supervision strategies, supervisors will need a new skill set and the supports to develop confidence in employing those skills.

PRIMARY STRATEGIES:

- ✦ Identify practical barriers to a focus on supervision of casework, by completing timestudy on supervisors.
- ✦ Clarify the role and performance expectations for the Family Services Supervisor; provide ongoing training and consultation to ensure that supervisors have the skills and support to provide quality supervision in alignment with core practice principles and goals of the system transformation. Enhance supervisors' role in continuous quality improvement.
- ✦ Clarify the role of district directors in the supervision and support of supervisors.
- ✦ Mandate attendance at monthly supervisors's meetings; incorporate training sessions into the meetings.

MEASURING SUCCESS

- ✦ Time study results are available by 11/15/07. By 4/1/08, identify strategies to free time for supervisors to focus on supporting quality social work.
- ✦ Attendance at supervisors' meeting is tracked monthly. 85% of supervisors attend monthly. Operations managers address any problematic patterns of attendance with district directors.

- ✦ Training sessions are regularly incorporated into supervisors' meetings by 11/1/08.

Promote Use of Teaming Models

WHY?

In our present model of individual assignment of case to individual social workers, there is considerable pressure on workers to know everything and take responsibility for all decisions. In addition, social workers do not receive the kind of support they need to handle the secondary trauma they experience. Burn-out is a real and present issue for our social work staff, causing good workers to leave the system pre-maturely, and perhaps worse, causing others to stay and provide poor quality services.

Individual assignment of cases means that when a crisis happens, the worker can quickly get pulled off course for a day, or even a week. The worker is on his or her own with the crisis. Appointments are cancelled, the worker is unavailable to answer the phone or return messages. More crises result.

For the last 2 years, the Massachusetts Division of Social Service (DSS) has been experimenting with a model of teamwork that does not rely on a unit of social workers with individually assigned families. Rather, the entire team takes responsibility for the entire group of families. The family has a primary team of 2 workers, but in a crisis, the whole team can be deployed to provide a quick response. Thus, a crisis may take 2 hours to resolve, instead of all day. Home visits are typically done by the team, allowing for use of each worker's strengths in a synergistic fashion. Group supervision is the norm, allowing for the skills and expertise of the whole team to be accessed. Practice is far more transparent. There is always a worker assigned to be in the office. That worker is immediately available to take a phone call and, due to group supervision, will know something about the family.

The DSS teaming model has been very successful. Although careful preparation and ongoing attention is needed to assure that teams can work together effectively, workers and supervisors – as well as families served -- report a high level of satisfaction with the model. There may be other teaming models that will achieve the same purposes.

PRIMARY STRATEGIES

- ✦ Invite Massachusetts colleagues to present to supervisors.
- ✦ Design a protocol to assess readiness for district offices and/or units to adopt the teaming approach.
- ✦ Identify 4-6 districts/units to pilot the approach. Begin readiness work by the end of FY '08 and implement in FY '09.
- ✦ Identify needed resources to support the development of teaming, including intensive training and consultation.
- ✦ Develop a clearly articulated model for teaming.
- ✦ Make necessary IT modification to support the model.

- ✦ Design evaluation and implementation evaluation model.
- ✦ Engage in ongoing collaboration with colleagues in Massachusetts and New York who are piloting this model.

MEASURING SUCCESS

- ✦ Design evaluation model that focus on worker satisfaction, consumer satisfaction and outcomes – and that supports modification of the model.

Ensure Appropriate Use of Residential and Other High End Care

WHY?

The use of residential care has decreased in the last 2 years as the division has paid more attention to the appropriateness of admissions and to length of stay. At the same time, there are still many questions about whether we have the right configuration of residential and other high end care, and whether we are using high end care at the right time, for the right purpose, and for the right length of time.

PRIMARY STRATEGIES

- ✦ The Department of Mental Health published a framework for use of residential care 2 years ago.
- ✦ A System of Care Group has been meeting for 2 years, and has just issued a survey that is designed to gain a better understanding of the needs of children and youth who have been in the residential system.
- ✦ A VPM group has recently completed a needs assessment for residential care.
- ✦ Engage residential providers in re-examination of the role of residential care in Vermont, including strong engagement with youth's families and a commitment to permanency planning.
- ✦ With staff and stakeholders, devise a clear plan to ensure use of residential care for the right youth, at the right time, for the right length of time. Strengthen community-based, and ideally family-based, step-down care options.
- ✦ Articulate the system of care that is needed to better serve girls with intensive needs.

MEASURING SUCCESS

- ✦ By 2/1/08, post the Department of Mental Health's framework on our intranet page.
- ✦ By 3/1/08 an analysis of the System of Care survey will have been completed and the results distributed to interested parties.
- ✦ By 3/7/08, representatives from the System of Care group will meet with VCORP and review goals related to this strategic area.
- ✦ By 7/1/08 DCF/FS will have a plan for entertaining proposals from existing residential providers for program changes to address the identified unmet needs.

Provide Appropriate Technology Supports

WHY?

Lack of appropriate IT supports cause staff to do redundant work and distract from the kind of practice we aspire to. There are a multitude of reasons for this:

- ✦ The division has been chronically under-resourced to meet the IT needs of its employees. This is true from a staff and budget perspective.
- ✦ Development of new applications is slow and laborious. New development tends to be driven by federal and state legislative requirements, and not by worker priorities.
- ✦ Workers cannot presently take technology with them into the field, as the department does not supply or support use of mobile devices, such as laptops. This causes redundancy, as workers take notes and do case planning in the field, and then they must return to the office and do the same work there.
- ✦ The department does not supply cell phones, a tool that would make workers safer and more accessible. Lack of cell coverage in many areas of the state is still an issue.

PRIMARY STRATEGIES

- ✦ Hire temporary IT support, to be funded by JABG.
- ✦ Capitalize on present planning spearheaded by OVHA to develop a new IT system that will handle all aspects of Medicaid eligibility and payments.
- ✦ Work closely with the DCF leadership team to ensure that current initiatives to support imaging and document management are extended to Family Services.
- ✦ Dedicate staff to work with the DCF IT staff to craft an RFP for an IT needs assessment to be conducted on the department level.
- ✦ Clearly articulate the IT implication for other sections of this transformation plan and plan accordingly.
- ✦ Address safety concerns by increasing commitment to providing cell phones for investigative staff and others.
- ✦ Continue to research mobile technologies that would support social workers in the field and align technology with desired practice.

MEASURING SUCCESS

- ✦ Hire temporary employee by 12/15/07.
- ✦ As part of plan to address caseload, plan for needed IT resources.
- ✦ Address needs for cell phones/mobile devices as part of (at the latest) FY '10 budget building process.

Support and Reinforce Desired Practice

WHY?

Moving practice as outlined in this strategic plan will take a clear focus and perseverance. We must reinforce the message over and over again. It is far too easy for field staff to adopt a “this too shall pass” attitude.

PRIMARY STRATEGIES

- ✦ Work with DCF Marketing Coordinator on messaging for internal and external stakeholders, with both short and longer term strategies.
- ✦ Plan for an FSD Practice Conference to take place Spring or Fall 2008.
- ✦ Create new division awards for excellence and practice leadership, with awards to be given at the conference.
- ✦ Align central offices supports with transformation plan.

MEASURING SUCCESS

- ✦ Implement new operational structure by 9/15/07.
- ✦ Convene meeting of directors and supervisors by 12/15/07 to further discussion of this plan.
- ✦ Meet with Marketing Coordinator by 2/1/08 to begin planning for communications approach.
- ✦ Present strategic plan to key partners and stakeholders by 3/15/08.
- ✦ Implement communications plan by 5/1/08.
- ✦ By 7/1/08, convene committee to plan for awards and conference.
- ✦ Hold conference no later than 12/31/08.