

Child Welfare 20/21

Advisory Committee

Session #3

July 24th 2018

Commissioner's Conference Room

150 William Street, 18th Floor

New York City, NY 10032

Session #3 Agenda

- Welcome
(Molly Armstrong, Consultant)
- Review Ground Rules, Values, Goals
(Molly Armstrong, Consultant)
- Prevention Focus on Organizational Health + Family Well Being
(Presented by Kailey Burger, DPS)
- Foster Care Focus on Permanency and Well Being in Care
(Presented by Loren Ganoë, FPS)
- Fiscal Parameters Part 1
(Presented by Jose Mercado, DFS)
- Begin Planning Stakeholder Engagement
(Facilitated by Molly Armstrong, Consultant)
- Wrap Up

Ground Rules

- Cell Phones should be on silent.
- Meetings will start on time.
- Participants will contribute, encourage exchange of ideas and practice active listening.
- Our values and goals will inform our process.
- Participants are invited to ask questions.
- Participants are ambassadors to the larger community and are encouraged to share whatever is discussed with colleagues and stakeholders.
- Participants will provide requested feedback in a timely manner

Goals and Values

- Delivering high-quality foster care and prevention services that are effective in achieving our goals of safety, permanency and well-being for children and families.
- Addressing gaps in our prevention and foster care service array.
- Incorporating family, youth and community perspective in the planning and designing of child welfare services.
- Improving the alignment of financial and contract structures of the system.

Goals and Values

- Increasing cross system collaboration, particularly as our families transition to services in the community.
- Ensuring access to the entire child welfare (foster care and prevention) continuum in every community.
- Integrating language access, equity, cultural competence, and attention to the emerging populations in all of this work.
- Keeping a lens on provider agency organizational health and organizational capacity.
- Exploring the concept of wellbeing to include critical indicators such as educational success and economic empowerment.
- Being mindful of the supports offered to children, youth and families during transitions, and planning for their success in their communities.

Advisory Committee Expectations

- Meet at least four times in the month of July, 2018, and at least once in September 2018, with the ACS CW 20/21 project team, to discuss child welfare program needs in New York City.
- Meetings will be scheduled for two hours and these meetings will start on time.
- Members will review and comment on all relevant prepared materials, and complete any assigned collaborative work in preparation for the Committee meetings. Participants are invited to ask questions about any materials presented.
- Our values and goals, listed below, will inform our process.
- Committee members are serving as ambassadors to the entire provider community and will share all information received. Committee members will engage not only with their own agency, but with all ACS contracted providers, to gather feedback, suggestions, and ideas.

Next Level Program Focus Areas...

Prevention will cover:

- Organizational Wellbeing
- Family Wellbeing

Foster Care will cover:

- Permanency
- Wellbeing while in Care

Prevention Services: Organizational + Family Wellbeing

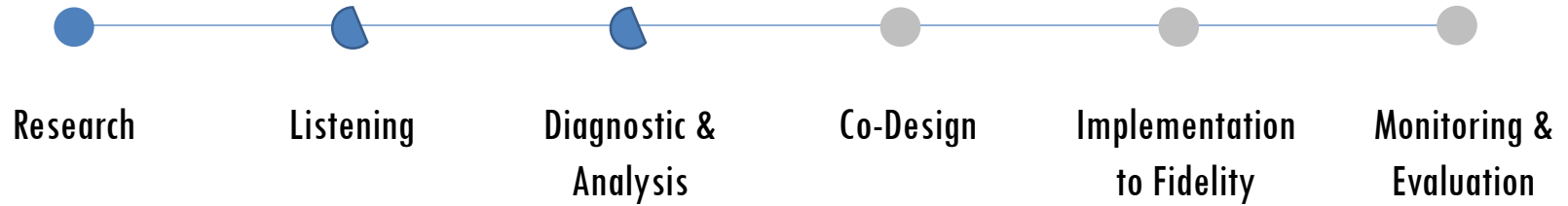
Socially Just Social Services: Prevention 2.0

Provider Advisory Committee Meeting #3

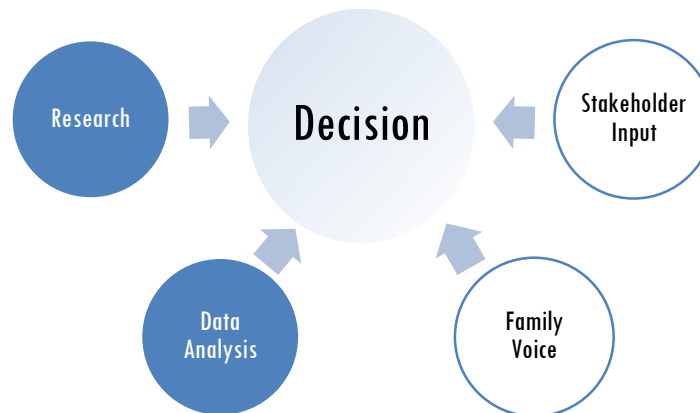
NYC Administration for Children's Services
Division of Prevention | Community Based Strategies
Deputy Commissioner Dr. Jacqueline Martin
Assistant Commissioner Kailey Burger



Our Process



Our Approach



Prevention Research

Families	Communities	Organizations	Services	ACS
<ul style="list-style-type: none"> • What do families need? • How can we bring family voice and choice into our services? • What outcomes do we want families to achieve? What outcomes do families want to achieve? 	<ul style="list-style-type: none"> • How do community needs vary? • What resources are available in community? • How do providers engage sectors of the community? • What does a place based approach look like for prevention? 	<ul style="list-style-type: none"> • What do providers need in place to deliver high quality services? • How do we support a high quality workforce? • What are providers doing now that works? • What resources are required? 	<ul style="list-style-type: none"> • Which service models best match the needs of families in NYC? • Where are the bright spots and gaps in our current continuum? • Are there services that work well that we can incorporate into our continuum? 	<ul style="list-style-type: none"> • How can ACS best support providers in delivering high quality services? • How can ACS improve service matching and initial engagements with families? • What is the best approach to oversight, collaboration, and performance assessment?

Organizational Wellbeing

Organizational Wellbeing: Research + Themes

RESEARCH TO DATE

2017:

- 6 month listening tour at COFCCA and provider meetings
- Focus groups with over 90 prevention staff at all levels
- Model Budget Steering Committee
- Diagnostic and analysis of ACS, COFCCA, provider-shared data on staffing, retention, and salaries

2018:

- Literature review of organizational factors that impact service delivery
- Review of Organizational Self Assessments
- Pre-implementation planning for model budget — lessons to be learned
- Provider and expert interviews

IMPORTANT THEMES

- Staff recruitment and retention
- Salaries and benefits
- Career ladders, opportunities for advancement
- Supervision, coaching, training opportunities
- Workload, paperwork, procedural requirements, staff safety & wellbeing
- Staff commitment and desire to make an impact
- Performance based funding, overhead, fringe, health care costs
- Coordination and oversight by ACS — multiple mandates and points of contact
- Leadership and connection to larger goals
- Meeting diverse needs of families, risk levels, geographic challenges

Model Budget Enhancements



**Strong
Supervision**



**Casework
Support**



**Quality
Improvement**



**Recruitment
& Retention**

1. Strong Supervision - Funding to reduce the supervisor to case planner ratio.
2. Casework Support - Funding to hire case or parent aides.
3. Quality Improvement - Funding to hire one designated Quality Improvement / Quality Assurance staff person for every provider.
4. Recruitment & Retention - Funding for salary increases that can be used for:
 - (a) Base Salary Increases
 - (b) Career Ladders
 - (c) Differentials

Family + Community Wellbeing

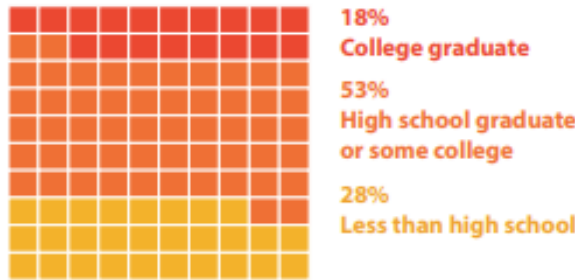
Brownsville, Brooklyn

COMMUNITY CHARACTERISTICS

Race¹



Educational Attainment²



COMMUNITY ASSETS ⁵	
Public Schools	55
Public Libraries	3
Hospitals and Clinics	7
Parks	23

CRIME RATE ⁹	
Brooklyn CD 16	Brooklyn
12.6	11.2
major felonies were reported per 1,000 residents in 2016	NYC
	11.8

LIMITED ENGLISH PROFICIENCY ⁴	
Brooklyn CD 16	Brooklyn
10%	24%
of residents 5 years or older have limited English proficiency	NYC
	23%

Preterm births (percent of all live births)



Teen births (per 1,000 girls ages 15-19)



Elementary school absenteeism (percent of students missing 20 or more school days)



* Interpret estimate with caution due to small number of events

Preterm births: NYC DOHMH, Bureau of Vital Statistics, 2013; Teen births: NYC DOHMH, Bureau of Vital Statistics, 2011-2013; Absenteeism: NYC Department of Education, 2013-2014

	Brownsville	Best-performing community district	Brooklyn	NYC
Poverty	37% (RANKS 7 th)	6% Tottenville and Great Kills (RANKS 59 th)	24%	21%
Unemployment	16% (RANKS 10 th)	5% Greenwich Village and Soho & Financial District (RANKS 58 th)	11%	11%
Rent burden	56% (RANKS 17 th)	37% Greenwich Village and Soho & Financial District (RANKS 58 th)	52%	51%

Poverty, unemployment and rent burden: U.S. Census Bureau, American Community Survey, 2011-2013; Avertable deaths: NYC DOHMH, Bureau of Vital Statistics 2008-2012

Shared Vision: Frameworks for Child and Family Wellbeing

7 community and Family Well-being Frameworks commonly cited in research

- Protective Factors Framework
- Place-Based Family Strengthening Framework
- Family Resilience Framework
- Family-Centered Practice Framework
- Trauma-Informed Care Framework
- Essential for Childhood Framework
- Two-generation Approach

Family Wellbeing Frameworks: **Outcomes**

6 shared outcomes across frameworks

- **Economic Stability**
- **Cohesive Family Systems**
- **Healthy and Safe Relationships**
- **Positive Community Connections**
- **Family Autonomy**
- **Reduction of Child Maltreatment**

1. Are these right based on your experience working with families in communities? What is missing?
2. How do we define and measure success of these outcomes?