



PERMANENCY
INNOVATIONS
INITIATIVE

Developing Interventions to Increase Permanence for LGBTQ, African American, and American Indian Children in Foster Care, **Part One: Operationalizing Interventions**

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PERMANENCY INNOVATIONS INITIATIVE
Training & Technical Assistance Project

PII-TTAP



California Partners for Permanency
Reducing Long-Term Foster Care



Session Objectives

- Learn about the experiences of two Children’s Bureau Grantees as they identified barriers to permanency for LGBTQ, African-American, and American Indian children and youth and developed theories of change to address these barriers.
- Understand the process of, and challenges related to, identifying and operationalizing core components of interventions.
- Understand the importance of clearly defining behaviors that can be observed so that practitioners can be trained and coached to implement interventions.

Permanency Innovations Initiative

Permanence is critical to the future success of foster youth and must be a key component of foster care initiatives.

*My Administration is committed to achieving security for every child and supporting adolescents in foster care as they transition to adulthood. The **Permanency Innovations Initiative**, spearheaded by the Department of Health and Human Services, is providing support to public-private partnerships focused on decreasing the number of children in long-term foster care . . .*

- President Barack Obama
Presidential Proclamation, April 29, 2011



What Is PII?

- Permanency Innovations Initiative, 5-year, \$100 million, multi-site, federal demonstration project
- Six Grantees, each with unique intervention designed to help a specific subgroup of children leave foster care in fewer than three years
- Goal to improve permanency outcomes and build evidence in child welfare

PII Training and Technical Assistance Project (PII-TTAP)



PII-TTAP provides training and technical assistance to the PII Grantees in the implementation of innovative and evidence-informed intervention strategies.



PII Evaluation Team (PII-ET)

PII-ET designs and conducts site-specific and cross-site evaluations to examine the implementation and effectiveness of the PII project.



An Employee-Owned
Research Corporation*



- Ronna Cook Associates
- Andy Barclay

The PII Approach



California Partners for Permanency (CAPP)



California Partners for Permanency
Reducing Long-Term Foster Care



- CA Department of Social Services, four county jurisdictions
- Barriers to permanency for African American and American Indian children and youth
- Child welfare practice model co-created with community and Tribal partners
- LEAN IN, LIFT UP, CONNECT to CULTURE

Recognize, Intervene, Support, Empower (RISE)



- Public-private collaboration led by L.A. Gay & Lesbian Center with foster care providers
- Help LGBTQ children and youth (ages 5-19) in child welfare to achieve permanency
- Outreach and Relationship Building (ORB) practice protocol
- Care Coordination Teams (CCT)

Key Steps in Operationalizing an Intervention

- Identify barriers
 - Analyze existing program and administrative data to confirm or identify factors that put the identified target population at risk of long-term foster care.
- Develop a theory of change
 - Agree on assumptions that undergird pathway to change for target population.

Key Steps in Operationalizing an Intervention (cont.)

- Identify and develop or adapt intervention.
 - Conduct literature searches of relevant interventions.
 - Assess feasibility of implementing interventions.
 - Assess degree to which adaptations are needed.
 - If existing interventions do not align with theory of change, develop an intervention that comprises evidence-supported components.

Case Study



California Partners for Permanency **Reducing Long-Term Foster Care**

Initial CAPP Processes

- Data analyses by UC Berkeley to identify target populations
- State, local, and community partnerships to examine permanency barriers and introduce Practice Model
- Youth, parent, and caregiver focus groups
- Creation of stakeholder advisory and cross-site teams

Identifying Barriers: Institutional Analysis

System Reviews (Institutional Analysis)

- CAPP site interviews with:
 - Families
 - Practitioners
 - Caregivers
 - Service providers
- Information pinpointed institutional actions *that were not* supporting permanency goals for the population.

Key Findings from System Reviews

1. Weak and insufficient engagement practices
2. Lack of family voice and urgent, sustained permanency focus
3. Lack of relevant, timely, well-coordinated services
4. Lack of accurate understanding of family strengths and needs

Theory of Change

- Process for addressing barriers and improving outcomes for targeted population:
 - Implementation science knowledge and skill-building
 - Literature review on barriers and Evidence-Based Practices (EBPs) for population
 - Practice models research
 - Short and long term outcomes development

Theory of Change

Practice, organizational, and systems change at the local level supported by a strengthened and coordinated statewide infrastructure for training, coaching, and quality assurance as well as supportive policy development and financing will result in reduced long term foster care for African American and Native American children and youth.

Identifying and Developing Core Components

- Convened multiple planning sessions, engaged state and local stakeholders and community partners
- Criteria to develop practices in the model:
 - Level of evidence base for the practice
 - Relevance of evidence to target population
 - Extent to which it leverages practice already used in project counties
 - Expression of our values and practice principals

Identifying and Developing Core Components

- Partners and county-level project staff identified 8 core elements that work together to support CAPP's approach to practice.

LEAN IN, LIFT UP, CONNECT to CULTURE

Defining Practices for Practitioners

- Engaged in multi-phased process with county staff, community, and Tribal partners to identify actions for staff to employ when working with families that support the Practice Model
- Identified, tested, and refined 23 Practice Behaviors

Defining Practices for Practitioners

- Developed behavioral profile for each behavior that identifies:
 - Proficient Use
 - Developmental Use
 - Practice That Lacks Fidelity
- CAPP Behaviors and Practice Profile promotes worker confidence and the system alignment and supports needed for successful implementation.

LEAN IN, LIFT UP and CONNECT to CULTURE

CHILD and FAMILY PRACTICE MODEL

	LEAN IN	LIFT UP	CONNECT	CULTURE
PRACTICE BEHAVIORS	Listens with Openness	Links Family	Caregiver Respect & Resources	Customized Visitation
	Explores Relationships	Interactions are Affirming	Optimal Team Environment	Using Experiential Coaching
	Actively Finds Connections	Facilitates Sharing	Natural Supports	Listening for Loss
	Nurtures Honest Dialogue	Team Solutions	Normalizing Needs	Tailoring Supports to Underlying Needs
	Insures Connection & Support	Uses Cultural Lens	Continuous Dialogue & Adjustment	REcovery and Well-Being
		Promotes Speaking Out	Teams Post-Permanency	
CORE ELEMENTS	Inquiry & Engagement	Self Advocacy & Advocacy	Teaming & Shared Commitment and Accountability	Well-Being Partnerships Safety, Recovery & Well-Being

Overview of Process

- Listening
- Learning
- Evolving
- Improving

Case Study



RISE Background

- Public-private collaboration led by the L.A. Gay & Lesbian Center with:
 - Five Acres
 - Hathaway-Sycamores
 - Penny Lane
 - So. CA Foster Family & Adoption Agency
 - Vista Del Mar
 - LA County DCFS and DMH

Identifying Barriers

- Disproportionate representation of and disparities of experience for LGBTQ children and youth in child welfare but:
 - Little data available about this population
 - Systems of record do not collect information
 - Scant literature on their experience

LAGLC Gathered Existing Information

- Literature review - for data, experiences, and services
 - Experience of professionals (“subject matter experts”)
 - Experience of L.A. foster care providers
 - Experience of LAGLC staff with homeless youth

LAGLC Gathered Existing Information (cont.)

- In 2011 RISE collected and mined info from:
 - System data about 400 residents of G.L.A.S.S. group homes
 - 44 case reviews of current and former LGBT foster youth
 - Foster youth speak-outs
 - Public and private staff speak-outs
 - Expert Roundtable on identification

Barriers: What We Learned

- Invisibility, no clear data on prevalence or experience
- Training exists but is not routine or mandatory.
- No evidence-based service models
- System-wide heterosexism, anti-gay bias, and anti-transgender bias
- Intersection of SOGIE, race, and ethnicity in child welfare

Developing a Theory of Change

When lesbian, gay, bisexual, transgender, and questioning (LGBTQ) foster youth and their families are competently identified and appropriately served, then they will be able to achieve safe and stable permanency.

Identifying RISE Intervention Components

- RISE originally proposed 5 components, then 3, then 2:
 - RISE developed Foster Youth Survey on SOGIE
 - RISE chose 2 components:
 - Outreach and Relationship Building (organizational-level intervention)
 - Care Coordination Services (child and family-level intervention)

Developing the ORB Components

- RISE:
 - Hired trainers
 - Contracted with researchers and permanency experts
 - Assigned a work group to do lit reviews, collect materials, and confer with experts using Implementation Science framework
- Key Questions: Is what exists effective? Does it “recreate the wheel”? Is it enough?

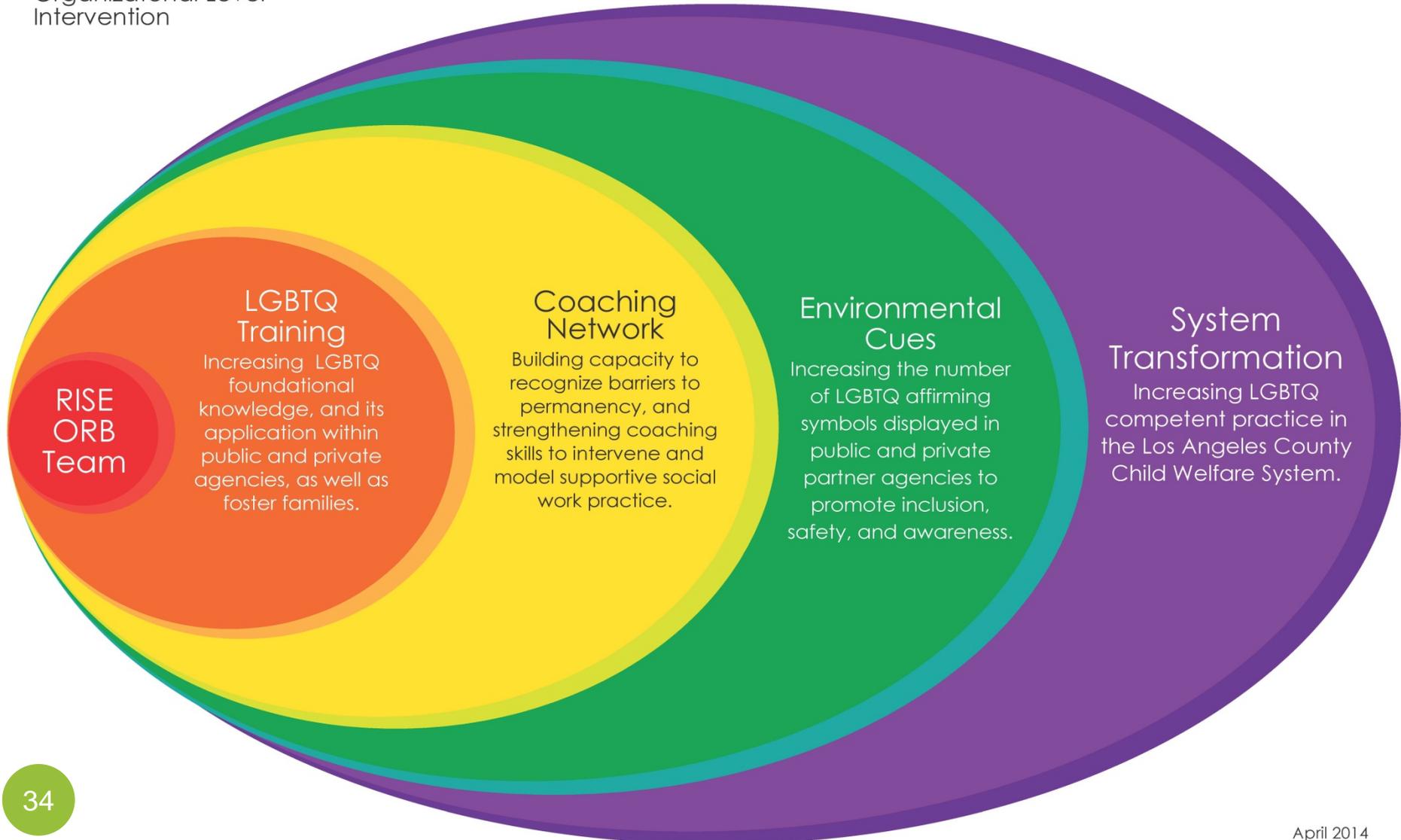


The RISE Project Outreach & Relationship Building: 3 Essential Functions & Goal



The RISE Initiative is funded by the Children's Bureau, Administration on Children, Youth and Families, Administration for children and Families, U.S. Department of Health and Human Services, under grant number 90-CT-0154.

Organizational Level
Intervention



Developing Care Coordination Components

- RISE staff, providers, and researchers identified possible approaches and key questions.
- Work group did lit reviews on care coordination, permanency, LGBTQ children, and youth.
- Staff attended trainings on Wraparound and “Residentially-Based” Services.

Developing Care Coordination Components

- Key Questions:
 - Placement services or community/family-centered approach?
 - Lead care coordination or adjunct specialists?
 - Permanency team or Wraparound team?
- RISE hired Wraparound-experienced staff, consulted key purveyors, and followed Implementation Science framework.



The RISE Project Care Coordination Services: 5 Essential Functions & Goal



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Child Level Intervention



Lessons Learned Discussion



Lessons Learned

- Be clear about roles and responsibilities.
- Plan to engage, support, and coordinate stakeholder involvement early in the process.
- Create an environment conducive to meaningful partnership-building through authentic engagement, listening, and humility.
- Accept that community engagement takes time and does not all look the same.
- Involve staff at all levels from the beginning.

Lessons Learned (cont.)

- Explore and interpret data with community and Tribal partners.
- Build deep understanding of the approach to implementation.
- Engage and create understanding of the important role of leaders in the process.
- Establish a process for meaningful involvement and participation in the review and development of materials that will be used to communicate certain messages.

Lessons Learned (cont.)

- Be prepared for challenges when there is little data or experience available.
- Recognize the tension between evaluating with rigor and certain timelines for deliverables in a demonstration project.
- Know there are implications related to public governance and private, non-profit governance.

For more information

- PII resources page on the Children's Bureau website:
<http://www.acf.hhs.gov/programs/cb/resource/pii-project-resources>
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