

## Site Visit Report:

# State of Connecticut Department of Children and Families-Early Head Start Partnership, Early Childhood Child Welfare Collaboration Project

[https://www.childwelfare.gov/management/funding/funding\\_sources/earlyeducation.cfm](https://www.childwelfare.gov/management/funding/funding_sources/earlyeducation.cfm)

**Award #:** 90CO1061

**Cluster:** Child Welfare - Early Education Partnerships to Expand Protective Factors for Children With Child Welfare Involvement

**Grantee:** State of Connecticut Department of Children and Families

**Contact:** Nancy DiMauro, Program Manager, State of Connecticut Department of Children and Families, Central Office, [nancy.dimauro@ct.gov](mailto:nancy.dimauro@ct.gov)

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# Site Visit Report: State of Connecticut Department of Children and Families-Early Head Start Partnership, Early Childhood Child Welfare Collaboration Project

## SUMMARY

In 2011, the Children's Bureau awarded the Connecticut (CT) Department of Children and Families (DCF) a grant to implement the Early Childhood Child Welfare Collaboration Project (ECCWCP). The project was a collaborative effort between the CT DCF, Head Start (HS), and partner programs/organizations. The purpose of the project was to provide staff training to enhance services and case management for families and to build collaborations to help ensure that children in foster care, ages birth to 5, were referred for quality early childhood services. DCF wanted to ensure that children were meeting developmental milestones and that other education-related performance markers were consistently met. DCF recognized that it did not have the resources on its own to meet all these needs, so it collaborated with other agencies to help families and to promote systemic change.

The collaboration included approximately 130 DCF and HS supervisors, managers, caseworkers (from local, regional, and central offices) who participated in quarterly meetings to develop and implement plans for the project. The project tasks included enhancing the collaboration, a train-the-trainer and training initiative for the Strengthening Families Program (SFP), infant mental health training, and reflective supervision.

The project focused its attention on the following:

- Establishing deeper collaborations between child welfare stakeholders
- Conducting train-the-trainer sessions for the Strengthening Families Program followed by community training events
- Training DHS and HS staff about infant mental health
- Providing reflective supervision

The project was designed to increase system connections, create mutually beneficial working relationships and partnerships, improve services to families, build community resources, align policies and procedures, and create cross-training opportunities.

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## PROJECT DESCRIPTION

### Abstract

In 2011, the Children's Bureau awarded the Connecticut (CT) Department of Children and Families (DCF) a grant to implement the Early Childhood Child Welfare Collaboration Project (ECCWCP). The project was a collaborative effort between the CT DCF and Head Start.

The purpose of the project was to provide staff training to enhance services and case management for families and to strengthen collaborations to help ensure that children in foster care were referred for quality early childhood services. DCF wanted to ensure that children were meeting developmental milestones and that other education-related performance markers are consistently met. DCF recognized that it did not have the resources on its own to meet all these needs, so it collaborated with other agencies to help families and to promote systemic change.

The collaboration included approximately 130 DCF and HS supervisors, managers, caseworkers (from local, regional, and central offices) who participated in quarterly meetings to develop and implement plans for the project. The primary project tasks included enhancing the collaboration, a train-the-trainer and

training initiative for the Strengthening Families Program (SFP), infant mental health training, and reflective supervision.

Participants included all DCF and HS staff from throughout the State of Connecticut. The DCF Area Offices that participated in the site visit included:

1. Danbury Area Office
2. Torrington Area Office
3. Norwich Area Office
4. Hartford Area Office
5. Manchester Area Office
6. Stamford Area Office

The HS programs that participated in the site visit included:

1. Danbury Head Start/Early Head Start of Northern Fairfield County
2. Education Connection/Litchfield County Head Start/Early Head Start (New Milford)
3. Education Connection/Litchfield County Head Start/Early Head Start (Torrington)
4. Thomas Valley Council for Community Action Head Start/Early Head Start
5. CRT Head Start
6. Enfield Head Start
7. EASTCONN Head Start/Early Head Start
8. Stamford Head Start/Early Head Start

DCF and HS worked together in three critical areas and used several strategies:

- **Building trust and partnerships**
  - Both organizations visited each other's offices regularly.
  - Both organizations planned and attended "get-to-know-you" meetings.
- **Maintaining ongoing collaboration**
  - Both organizations attended each other's trainings.
  - Both organizations provided cross-training opportunities.
  - Both organizations participated in each other's committees.
- **Improving services to families**
  - Both organizations worked together to serve families jointly.
  - Both organizations made referrals to each other for relevant events.
  - Both organizations scheduled joint home visits.
  - DCF placed an "outposted" worker at an EHS/child care site.

Additionally, ECCWCP partnered with other organizations, agencies, and programs (such as Early Childhood Consultation Partnership, Supportive Housing for Families, and Child First) to provide families with needed services, such as housing, legal advice, health care, and employment assistance. (See the Lessons Learned section of this report for more information.)

### **Need for This Service**

Historically, CT DCF has focused, across the agencies and at the policy level, on children from birth through 8. DCF has been instrumental in developing convincing documents to communicate the services that young children need in order to meet cognitive, growth, and academic goals from birth. Not long ago, the State invested in quality initiatives, new opportunities for public/private partnerships, and for some expansion of preschool and early childhood activities, etc. Project staff stated that, unfortunately, even with those resources and people willing to put their support behind advancing children, including proposing legislation and giving equal importance to the issues related to early childhood concerns, other issues can take precedence and opportunities can be lost. According to project staff, this is when new solutions must be developed.

DCF is committed to attend to these issues through the work and training happening through ECCWCP. People are being pulled back together to ask questions, to make sure that developmental milestones are met, and to continue to build programs to ensure that kindergarten, early childhood literacy, and

performance markers are consistently met. All of the resources that children ages birth to 5 need for wellness are not available at DCF, so DCF works with other agencies to bridge the gap in order to help families. By gathering everyone together, the family is better positioned to receive services in a timely manner and start functioning in ways that are healthy and beneficial for everyone involved.

### **Project Activities**

Twenty-five trainers from across the State, including community partners and DCF training academy participants, took the SFP train-the-trainer 3-day session. This activity also included opportunities for newly trained individuals to co-train with staff from the Center for the Study of Social Policy to provide community SFP events across the State to over 300 participants. SFP (<http://www.strengtheningfamiliesprogram.org/>) is a nationally and internationally recognized parenting and family strengthening program for families. It has been found to significantly reduce problem behaviors, delinquency, and alcohol and drug abuse in children and to improve social competencies. The SFP train-the-trainer and community training programs cover topics such as protective factors, trauma and the developing brain, and community-level collaboration. Participants learned how to deliver the SFP curriculum, which was adapted to focus on children from birth to 5 years, and empower communities and community leaders.

The following quotes were collected during the site visit from individuals who participated in the training:

- "The training provided excellent information on improving and sustaining relationships and talked a lot about different models and solutions to improve and move the field forward."
- "The importance of cross-sector work and promoting protective factors was taught."
- "I left the training feeling secure and confident about bringing the information back to my community. The training teaches that it is not just about what happens in a classroom and that a supportive and non-confrontational approach to wellness works."
- "The material was encapsulated information in an easy-to-understand fashion. I better understood the goal of promoting the same language around protective factors in working with families and using the information as a framework for interacting with families. This training is important for foster and adoption service providers, discovery, early childhood consultants, and various training academies."
- "DCF Academy participants learned more about conducting family assessments and making visits more purposeful. The staff needed and got more knowledge about protective factors."

The train-the-trainer sessions helped build capacity to pass information along to other DCF and HS staff and to connect with other stakeholders on the local level. The need for the training emerged from conversations with community partners who wanted to implement change in communities such as Hartford and Manchester. The trainings helped foster and implement community events (e.g., Child Abuse Prevention Day, a foster parent enrollment fair, an early childhood fair), relationship-building efforts, community partnerships, and connections with service providers.

(To view the SFP trainer's guide and the train-the-trainer slides, refer to the Attachments section of this report.)

The Connecticut Association for Infant Mental Health (<http://www.ct-aimh.org/>) provided training to DCF and EHS staff through a series of workshops about infant mental health, with a focus on ensuring quality early relationships that help young children regulate emotions and feel secure in their environments. The series included sessions that focused on one or more of the following topics:

- Infant brain architecture
- Effects of toxic stress on infant brains
- Importance of positive, early relationships with primary caregivers
- Likelihood that children birth to 5 in child welfare would experience toxic stress and neglect
- Cultural competence in infant mental health work
- Making parent-child visits successful
- Integrating a "trauma lens" into practice
- Screening for infant and toddler social and emotional development

The trainings also highlighted some specific content, including the following:

- Brain development issues caused by neglect
- Importance of warm, responsive, and early relationships to help babies explore
- Doing the right thing, at the right time, for the right reason for families by understanding possible clinical cues from the baby or other reasons for a family's situation
- How to foster positive relationships with families, especially those with young children

The training provider reported that there has been a dynamic and systemic approach to the "creation of a new focus on infant/early childhood mental health." During the site visit, staff who attended this training communicated the following:

- "I better understand the child's exposure to trauma in utero. We have to give them a family that will help them through the trauma of their in utero experience. We should have a lot more debates about the way we're doing things. There needs to be systemic change. The training changed my personal context."
- "I learned how to read a baby's cues and identify stressors by reading facial expressions, and how to understand the effects of previous trauma."
- "I learned to focus on the young children during supervised visits instead of focusing on the parent's parental abilities. You can learn a lot about the child's relationship with their parent just by noticing their reactions when you arrive and when you leave."
- "I scrutinize the reports more closely to see if the provider is observing interactions, body language, or other cues from the child."
- "There is a difference between supervised visitation and therapeutic visitation. The training gives you a basis from which to try and make the distinction. Is there a child in that kind of environment that doesn't need therapeutic visitation? How can we move to a more developmental approach to visitation? By observing and applying the training on infant mental health."

The ECCWCP project also had a reflective supervision component. During reflective supervision, staff met with someone other than their supervisor who would listen to them, without judging, in order to help them explore the following questions:

- How are they responding to a particular situation?
- Is their response to the family valid and informed or based on a personal trigger or vulnerability?
- Have they experienced trauma that has tainted how they treat a family?
- Are they looking at the total process and taking into consideration other variables or are they just looking at the current facts of the case?
- Has their supervisor's treatment of them influenced how they treat a family?

The experience helped DCF and EHS staff work better with families, recognize their personal triggers and vulnerabilities, and manage their reactions and decisions in relation to their cases and case family interactions. In reflective supervision, individuals engaged in a process of self-evaluation and self-observation in order to define actions and reactions with the purpose of refining, altering, and/or changing responses, either in general or on a case-by-case basis. The self-reflection kept workers conscious of themselves in order for them to recognize triggers and adjust decisions or processes, as needed. Project staff indicated that reflective supervision helped child welfare workers reflect on how the family may best be assisted by taking other variables into account, such as issues related to infant mental health or infant cues, and instituting the case management plan or process that works for a particular family with children ages birth to 5.

Reflective supervision encouraged case management that was respectful, caused the worker to step back and relate to the family, asked the worker to reflect upon his/her own triggers and vulnerabilities, and then provide a solution that repairs the situation. Several DCF caseworkers who are a part of the collaboration participated in reflective supervision and provided feedback to their managers and to the project director regarding their experience.

## SITE VISIT HIGHLIGHTS

The site visit occurred at a Department of Children and Families office in Hartford, CT. The program director, Nancy DiMauro, convened a meeting that included a variety of staff including representatives from the Department of Children and Families (DCF), the Connecticut Association for Infant Mental Health, and Head Start. The daylong meeting consisted of updates, presentations, and firsthand testimonials related to grant features. The following is a list of the project's leaders:

- Janice Gruendel, DCF, Deputy Commissioner
- Nancy DiMauro, DCF, Program Director
- Michael Williams, DCF, Regional Administrator, Region I
- Grace Whitney, CT Head Start State Collaboration Office
- Walter Gilliam, Ph.D., Evaluator, Yale University, Edward Zigler Center for Child Development and Social Policy
- Chantal Thomas, CT DCF, Logistics

Highlight of the meeting: Heartfelt testimonials from staff who participated in the reflective supervision project component. Several DCF and HS staff attended the meeting specifically to speak about this topic, and it was evident that they valued, appreciated, and, most importantly, utilized the information they received during their experiences. Individuals provided the following comments:

- "My communication skills have been enhanced. I made some important and personal observations and realized how my emotions are triggered. The work is hard, and you need a safe place to reflect on what you're doing."
- "Reflective supervision provides a safe environment to reflect on cases. I received something positive that I can share with the rest of the practice."

## LESSONS LEARNED

### Unique and Innovative Features

- Enhanced collaboration through training and involvement in other agencies' committees, which provided opportunities for joint treatment planning and goal setting and an increase in referrals for services
- Planned a golf tournament to raise funds for a domestic violence event
- Held a Child Abuse Prevention Day where there was book-reading to children citywide
- Developed and distributed a monthly newsletter that was distributed to DCF and HS staff on the ECCWCP project
- Planned, marketed, and implemented resource fairs for families in the community

### Challenges

- The project's first SFP community training event was canceled due to a lack of participants. The project modified its recruitment strategies by reaching out through various mediums and contacts to increase participation.
- In some cultures, parents may believe that they should care for their children instead of sending them to an early childhood learning center. However, the system must work to make sure children are meeting developmental milestones during their early childhood years.
- The project's leadership is searching for alternative financing to bolster sustainability. They plan to replicate information presented at the site visit meeting in front of administrators to garner support for moving forward.
- The 17-month grant period was challenging for the project and had dramatic implications for how they structured the evaluation. The project did not have enough time to mature, and they did not have enough time to determine the impact of the training in the workers' practice.
- The project recognized the need to create a formal, internal infrastructure and institutional capacity to maintain the collaboration.

## Successful Strategies and Keys to Success

- Working collaboratively to utilize joint case planning to develop solutions and close cases
- Revisiting the mission and goals regularly to reinforce the project's purpose and expectations
- Identifying and recruiting staff and community partners (e.g., Interval House, Wheeler Clinic, Neighborhood Legal Services, Hartford Area Childcare Collaborative, South Park Inn Shelter) to include in the collaboration on a regular basis
- Scheduling additional training related to infant mental health
- Recognizing that local needs may differ from statewide goals
- Recognizing and embracing opportunities to share and learn
- Exploring competing initiatives and their effect on collaborative efforts and on the project's ability to reach its goals and objectives
- Examining training materials and tailoring them to focus on children from birth to 5 years
- Identifying key participants and leaders to help sustain efforts
- Developing mechanisms to capture information and data

## OUTCOMES

The goal of the project evaluation was to measure changes in knowledge among staff who took the SFP train-the-trainer and community training and participated in reflective supervision. The participants took pre- and post-tests to measure their knowledge before and after training. The results of the training evaluations consistently showed statistically significant increases in knowledge among the participants. The project did not have time to conduct follow-up surveys that would provide information about changes in practice.

ECCWCP's accomplishments have:

- Helped to inform policy around visitation
- Helped people realize how little it takes to make a significant impact
- Built the capacity of staff to work with young children
- Increased understanding of how children are affected by toxic stress, trauma, and loss and how they express this

The evaluator highlighted these considerations for conducting the evaluation:

- Recognize the timeframes for the pre-test and post-test when developing the evaluation
- Consider the length of the project when planning the evaluation (e.g., start-up time, Institutional Review Boards)
- Allow another person to develop the measures to assist with the validity of the results

## ATTACHMENTS

- [Strengthening Families Trainer's Guide](#)
- [Strengthening Families: Train-the-Trainer](#)



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