Community Partnerships that Improve Child and Family Outcomes Webinar Transcript
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Presenters:

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- Peter Vriens, Director, Dauphin County Human Services
- Helen Spence, Community Outreach Coordinator, Dauphin County Human Services

Nicole Bossard: So good morning everyone that is on the line, it sounds like we have a lot of folks that are very interested in this topic. This is the Community Partnerships that Improve Child and Family Outcomes webinar presentation, sponsored by, as you can see if you happen to be at your computer screen, the National TA and Evaluation Center for Systems of Care. A couple of housekeeping things very quickly, for those of you who do happen to be at computers, I would love to have you post questions as we go throughout the presentation, you don’t have to wait until the end to ask questions on air. If you post those questions on the computer, we will read those questions to our presenters, and that’s how we will be able to respond to those questions that way, without getting really loud and messy with so many people on the phone. And secondly, please feel free to go ahead and post your written questions that way because even if we don’t get to your question during the course of the presentation, I’ll work with the presenters from Dauphin County after the webinar is done and we will include the responses to all questions in the transcript that will be uploaded to the Child Welfare Information Gateway after the presentation that will go along with obviously the PowerPoint as well as the audio archive, so you will be able to see and hear whatever we talk about of course on the web later, but you’ll also be able to read responses to questions that we don’t have time to get to today. So with that said, let us go ahead and begin.

One of the things that I am hoping that some of you all out there around the country will indulge is to respond to this question in writing, and that is, just to think about your own experiences with community partnerships, and thinking about what makes those partnerships work best and thrive over time. And the question that I want to ask you is, “Based on your own best experiences, what do you want to take away from today’s call to help create, rescue, revive or empower thriving partnerships within your agency as well as between the agency and the community?” So I’ll ask that question again, “Based
on your best experiences with community partnerships, what do you hope to take away from today’s call, what do you hope to hear, that helps you create, rescue and repair, or empower thriving partnerships within your agency or between your agency and the community.” So with that said, as we move through the presentation today and you all are thinking about that, please go ahead and write your questions, write in the comment box in the chat feature on go-to webinar.

So first again, welcome. I just want to say thank you all so much for your interest in this topic. We have a maximum of 125 lines for this webinar and my understanding is we had over 200 folks register, so that means we aren’t going to be able to hear from everybody, or everyone may not be able to hear us, but again the webinar will be recorded and transcribed and it will be uploaded to the Child Welfare Information Gateway and the website as you can see there is www.childwelfare.gov.

And without further ado, let’s go ahead and get into it. Today in the webinar overview, basically the places that we will go today. I am Nicole Bossard and as your moderator I’m going to give you a brief overview of the Improving Child Welfare Outcomes through Systems of Care demonstration grant program. And what we’ve learned through that demonstration grant program, through the national cross site evaluation, particularly related to inter-agency collaboration and community engagement. And I am going to try and be as brief as I can and I guarantee you want me to do that because the presenters that we have on the line for you today are quite dynamic and the work that is going on in Dauphin County, Pennsylvania, which is where they will be talking about, is quite exciting. So we are going to have our presenters give you a closer look at Dauphin County System of Care as well as discuss strategies for empowering community engagement that exceeds or extends beyond the service providers and the formal systems folks. And then we will conclude the call with some opportunities for discussion and questions from you all.

Our presenters today are Peter Vriens, who is the Director of the Office of Human Services in Dauphin County. We also have Helen Spence, who is the Community Liaison, also with the Office of Human Services in Dauphin County. And we had a third person as you can see here, Troy Tate, who was representing the family coach and the community advocacy voice, but he was not able to make it with us today. And I am Nicole Bossard, I am the TA specialist, one of the TA specialists for the National TA and Evaluation Center and I had the great privilege of providing training and technical assistance and long term consultation to Dauphin County, Pennsylvania during the grant program.

So without further ado, let us begin. Improving Child Welfare Outcomes through Systems of Care grant program, the vision for the program was really to, as you can see, transform “how Child Welfare does its work and how it relates to families as well as those interactions with other agencies to make a difference for children and families,” and
I really want to underscore this last point, “and all the people who serve them.” That quote came from Jan Shafer who is still the Director of research and innovation, the division where the grant program came out of. And that was kind of the, that was the star that we were shooting for with the demonstration grant program. A way to literally transform, not only the way the Child Welfare agencies do their work but also that would have a positive impact on the people who serve them. And today we are going to be hearing about how this initiative did just that in Dauphin County, but also how it even went a little bit further to touch the lives of those folks within the agency as well as without and in the community.

So very quickly, what is Systems of Care for those of you that are not familiar with Systems of Care, this approach. This is an initiative that incorporates a set of core values and principles, or guiding principles that combine to meet the diverse needs of children, youth and families. And the Systems of Care concept really is a framework that states, tribes, counties, cities, can use as they develop the infrastructure, the roads and railways, if you will, to support these guiding principles, which you will see there in blue up: interagency collaboration; individualized, strengths-based care; cultural and linguistic competence; child, youth and family involvement; community-based approaches; and accountability.

Just a little bit in terms of the logistics about the demonstration grant program itself, it was a five year initiative starting in 2003, concluding in 2008, there were 9 grants awarded, 18 communities participating all together, in rural, urban counties and tribal communities. The primary goals, I just want to point out quickly, were to engage in infrastructure development activities to change the culture of child welfare agencies as well as to impact that conceptual framework within which the services are delivered, so that systems change focus rather than service delivery focus or direct services focus. The second goal, or secondary goal for the program was to work collaboratively with partner agencies in order to assure safety, permanency and well being for children and their families. And that is a point that we will return to in a little bit when we start looking at Dauphin County. But this next slide here is just a map so you can see where the System of Care grant communities were situated, you can see pretty much they were spread out evenly among the east coast, right in the middle of the country, as well as on the west coast, three sites in each of those regions, east, middle and west.

Very quickly, just a couple of things from the national cross site evaluation that we found interesting related to this issue of again, how do communities and partnerships, what do community partnerships have to do with child welfare outcomes anyway, and here is what we discovered. We found that community partners perceived that their collaborative efforts were effective at promoting positive changes at a policy level, the level of procedures, as well as at the practice level, even though as I said earlier we are focusing more on infrastructure development, the perception of folks involved in the initiative was that they were still having an impact through the Systems of Care approach at a practice
level, and ultimately creating positive outcomes for children and families. Secondly, child welfare staff felt increasingly encouraged and supported to adopt these collaborative practices and community based approaches. So not just doing things in ways that perhaps had been working very much within the agency, but really looking at innovative ways to collect, collaborate and to really utilize community based approaches that they may not have been aware of or ever utilized previously. Third, child welfare agencies experienced increases in broad based community support, which helped them weather crises associated with child fatalities, helped them to really transform the perceptions of child welfare agencies in the community at large, and of course help to create new opportunities for again, identifying community based resources to utilize for the purposes of supporting families that were receiving services. And lastly, interagency partners became more active participants in child welfare case planning processes and their services to children and families resulting in nearly tripling those services within the Child Welfare system.

And just some systems level findings, here you have a graph that again, focusing on interagency collaboration that, you know interagency collaboration that increased or improved across our grant communities, going from 2003 to 2008, and our time points here for our national evaluation start in 2005, 2006 and 2008, and we started in 2005 because that first year was only focused on strategic planning and then of course, taking that first year, 2004 getting up to speed, so our first evaluation time point is in 2005 and what you’ll see here is that pretty much the trajectory of collaborative development was uneven across the grant communities, and that stakeholders did though perceive that their efforts were improving child welfare outcomes, and for those of you that have been on these kinds of systems change initiatives or had these big collaboratives, it’s really important that stakeholders believe that their time is being spent wisely and they are doing what they came there to do, and this last point here does demonstrate that even with the inconsistencies, that by and large stakeholders perceive that the work they were doing did have a positive impact on improving child welfare outcomes.

And lastly, just a little bit from the organizational level findings, the principles that you’ll see here, these are each of the System of Care principles that I read off before, that the principles applied across the child welfare as well as the partner agencies, again being infused into policy and practice, so what we see here over time is that there was increased support for System of Care principles, as well as there was an improvement in the caseworkers implementation and day to day practice as a result of bringing these principles to practice. And particularly the integration of individualized, strengths-based care and family centered practice was really crucial here, as well as family involvement being accepted and embraced by the child welfare staff.

So I just kind of want to put this point here on loudspeaker. In terms of family and community engagement, through the grant program, child welfare agencies really discovered new ways of working with families as well as the community, so for example
community collaboratives that were created for the purposes of just coordinating and running the activities of the grant, created a space for family and community engagement, it became a vehicle for bringing families together and hearing their concerns, but beyond hearing what they had to say about their experience, it also became a place, those collaborative tables became a place for families to contribute as partners and to go to work right alongside the social workers or the probation officers or the attorney’s; other folks involved from more formal systems, it became a place where the planning field could be leveled and everybody could contribute to how can we make this system work a little bit better based on what we know. As well as the other kind of new way, this discovery we found with our folks, you know, policies and procedures have to be developed to actually support a new level of family centered practice, for example change in policies around flex time, so that workers if we want them to do team decision making meetings at times that families and community members can actually attend, then that means we have to make sure that our workers can be there at 6 or 7 o’clock at night as well, and how can we again create the policy and procedure structure to support the level of practice that we say we want. And these were some of those pieces that our folks kind of had to figure out along the way. And with that, I want to hand it over now to Peter and Helen, so that we can take a closer look at Dauphin County System of Care. Peter and Helen I give it to you.

[16:33]Helen Spence: Hi, just want to quickly apologize for Troy Tate not being able to be with us today, unfortunately he became very ill, and being who he is he really wanted me to come get him but I kind of had to fight with him to say, “I’m not going to get you out of the hospital to be on the TA call, I’m sure people will understand,” but that’s the kind of relationship that Troy and many other families who were once consumers of our agency and now providers along with us, has taken that type of approach. I just want to start with, Dauphin County was in a unique position when the Systems of Care grant came about. In 2000 we began to look at a new way of doing business across the board, through all of our Systems, not just the Child Welfare system but all of our categorical agencies under the Human Services office and therefore in 2001, under the direction of our then human services director Sandy Moore, brought about a new practice called “Family Group Conferencing” that was from the West coast here, and began to talk with administrators and judges about looking at implementing that here as a way of doing business with families that come to the attention of our agency and the focus was really on the strengths, shifting the focus from deficit thinking to strength-based thinking, and using those strengths of the families and our agency to develop collective solutions, became what we began to do at that time once it was implemented. This was so successful over a period of time that as we rolled out many families, the engagement and the barriers that were normally there began to slowly chip away and break down, and as we did the nuclear family and began to develop those relationships by allowing them to come to the table with us, and make decisions about their families for their family and we could support that. [Phone interference]
Nicole Bossard: Helen, I’m sorry we’ve just got someone on the line who hasn’t muted their line.

Helen Spence: Oh, I’m sorry.

Nicole Bossard: So you can keep going, you keep right on going.

Helen Spence: Sorry! So that practice in essence became the foundational practice for us, as we began to look at expanding the already very actively engaged practice of family group conference with the families. And because it was so successful, it just seemed like it was a natural progression for us to move forward with implementing the principles of Systems of Care and initially we started with our categorical agencies all coming to the table again, looking at how we could collectively roll out these principles and practices together to better serve our families across the board and my role originally became to move into a community liaison, to actually help to move the practice that we had initiated together into the community, and with that we were able to actually engage all of our administrators and judges and commissioners to form a coalition if you will, where we would go out into the communities and develop various forums, and talk to the community about what it was that we would like to engage them in and not being afraid to say to the community, “this is where we are in terms of a county, and our ability to provide services across the board and want to engage you in your decision making around what it is that you can bring to the table to help us increase these things and to do what we do.”

And out of those community forums that we went out in the community, talking to our community partners, our faith based partners, families, and groups across the county, literally, in the evenings and on the weekends and on Sunday’s, we began to establish some very clear committees that began to grow out of that ability to do that in the community and what formed from that was actually five distinct committees that actually operate today. As you can see, we have our family committee, our faith based committee, community based, cultural competency and our youth leadership committee and each of these committees are structured whereby the community actually takes the lead in these, they have their own chair, a co-chair, a secretary and while I attend each meeting, I am no more of a leader in their group than they are, we are all very much engaged in the true partnership, or an engagement if you will, whereby I share with them many instances of what the needs may be from the county level and they’ll share with me what their strengths are in terms of the solutions to them, and that’s true of some of the concerns for our families, for some of the things that we are doing here with our workers, and what kinds of things we would like them to be engaged with, and this has just been a phenomenal engagement that continued to grow and go, continuously throughout the years. In fact, it started off with these committees, and once the grant was over of course, these committees did not want to end in any way and did not end; in fact they developed their own and became their own 501(c )(3) to continue the work that they had already put
in place, and developed their own, like I said their own 501(c)(3) and began to look at ways that they could further continue the work that they had begun.

One of the first things that happened with the sub-committee groups was that they developed, began to develop their own programs, that’s what I mean by moving from consumers many of them to providers of agencies and so forth. Many of them began to look at their own communities collectively and began to say, “these are the needs that we can do, to help our kids that are coming into the child welfare system, the juvenile probation system or whatever our system that we were working with,” and the first thing that happened over time was our faith based committee began to look at ways to improve the child welfare and juvenile probation families’ outcomes by developing support systems within the community. So they started with actually a summer program and you may think that’s an odd way to do that, but it really was a unique thing that they did to be able to collaborate with the schools and the formal partners of children and youth and juvenile probation and many community partners to work on a way to provide a holistic program over the summer for this at risk group of young people that would allow them to get them and their families to have multiple needs met under one roof, and that started actually with no new money, but actually using the principles and practices of Systems of Care to integrate and collaborate and to blend services and support all under one roof, with an array of different partners.

Starting in 2006 with the first program being in the school district, which collaborated with the community and other individuals at that time, maybe about ten different groups came together and began to work together to develop this one stop shop if you will, sort of reminds me of a Wal-Mart where you can get everything done at one time. So they actually started with maybe about 60 kids, mainly the referrals came from children and youth and drugs and alcohol and juvenile probation agencies, some mental health kids, and all of the community partners and the formal partners began to work together to develop this kind of strong infrastructure for our young people and their families to be able to get the kinds of services and supports they needed over the summer and lo and behold, this was so effective that after the first year, that type of support system began to grow from maybe 10 organizations to maybe 30 or 40…to date they are having almost 100 organizations and still the supports and assistance of the formal partners to work together to engage the young people and their families in such a way that is very unique and not costly to any one agency but everybody working together to provide the types of services.

And the outcomes have just been phenomenal in terms of being able to keep these kids over a period of time over the summer and now throughout the year in these kinds of programs in little pockets in the community. And again, that grew right out of the practice of forming these small sub groups that became what we call now a “new beginning” and that is the name of the new 501(c)(3) that actually acts as an arm in many instances to some of the needs of our formal partners. That was one thing that came about
early on and continues to this date, as we move forward with our Systems of Care in Dauphin County. The county was very mindful in terms of being able to identify a person and again, looking at strengths and using the principles about what their own staff had and actually allowing me to be the community coordinator continues to allow their Systems of Care grant and even when it was over to integrate that into the integrated human service plan to be able to continue the work with the community and with myself as that liaison for the community. But one of the things that I learned early on is that to develop those relationships were key, were absolutely key to this type of work. To have someone available to be right there, day and night in the community with…having the knowledge of the agencies and their mandates and functions is just a kind of an essential ingredient in developing a System of Care.

Other things begin to grow out of that and continue to grow out of that are the ongoing programs that are developed by and for the community. Many programs that now grew out of these sub groups that expand into develop, that meet the needs of our caseworkers and other workers in our county agencies to meeting the direct needs of our families. One of the things that we now have here in Dauphin County, aside from these pockets of core, one-stop shop programs that we developed throughout the community is we have family coaches now, we actually engage our families, some of them who have been involved with our agencies to now empower them and actually pay them to become the people in the community who connect other families that may be coming to the attention of our organization or to provide intervention services for them to not come through our services. That too has been something that you’ll hear Peter talk about that later on as he talks about integrated human service plans, That has been some of the things that grew directly out of the ability to have a Systems of Care grant and utilize that in a way that develops a strong infrastructure change within the community by actually putting the principles into operation on a daily basis, and one of the things that we did all the time is to actually model what we talk about instead of just talking about it, and that has always been paramount to what we do from the foundational practice that we use to the principles that guide us as we work, as I work and the agency works towards sustaining a System of Care practice here in Dauphin County.

Nicole Bossard: Hey Helen? This is Nicole, I had a question. If you could give an example of that last bullet there in the activities slide about the 400 resources, supports or services, excuse me the resources, supports and services to over 400 families. Can you give a specific example of say how the faith based committee may have provided something, or met a real need there? What that was like?

Helen Spence: Every year the community again, the faith based community, and we have a rather large faith based subcommittee, of all kinds of faiths come together on a monthly basis, each of these committees that I talked about, faith based committees and community based partners, all of those committees come together on a monthly basis and sit down and strategize actually how they can individually meet needs but also
collectively how they can meet these needs, and every year they provide these huge events in the community whereby they look at ways that they can meet basic needs of families, and one of the things that this particular subcommittee, the big event that they do is during the holidays where they assist the child welfare agencies and all of our systems in identifying some of the most needy families, or families that are in the most need in our community and then providing a meal, food and other items that they may need, whether it be financial stipends for families that are in dire need of furniture, all kinds of things, but in 2010, they brought in over 400 families of at-risk people in need and provided everything again from furniture to clothing, and with a huge collaboration from all kinds of organizations. The United Way for instance was one of the organizations that collaborated with us and they gave the community over $6000 dollars worth of clothing, I mean brand new clothing for all the children, and we kind of focus on the older kids, because many times they are kind of left out, because this whole thing Toys for Tots, but we have kids that are passed the Toys for Tots, so we kind of focus on a lot of, getting a lot of that for our older kids that certainly want and need things, and we were able to get them everything from school supplies, book bags, and all kinds of organizations, the faith based community came and cooked like you’ve never seen before. They don’t just have a little sit down meal, they have everything from home made collard greens, fried chicken, to spare ribs, food unbelievable to feed this many people. But they do it for, they utilize this whole Systems of Care collaboration, integration, individualizing them, the individual strengths that they bring, whatever that is, whether that’s making a fabulous cake or pie, or being able to provide $6000 dollars worth of clothing, bringing it all together to be able to support and provide resources and services, ongoing and while that was one big event, these same groups along with all of the organizations involved, are there to provide a continuous net of services and supports for our families.

As I sit in the office now of the Human Service directors’ office, I get calls from all of the categorical agencies whether it’s a mental health worker or a case worker or a JPO worker, even adult probation, and they’ll say, or I’ll have a family come in and they even need a job, they need, whatever the needs are, and now with my connection with all of the sub-committee groups, I just put it into the computer and send out a huge email and I can tell you within a day or so those needs are met. We get everything from beds to, we even have been able to essentially work with some realtors and provide transitional homes and things like that, we are able to provide the housing or something for whatever the need is. I remember one time there was a young mother who was in need of a surgery immediately. She had five kids and she was kind of in isolation here in Dauphin County. She had just moved here and unfortunately the doctor had told her she needed to have her, she had cancer, and if she didn’t get this operation immediately it was going to spread, so because she had no one for these five small kids, the choices were we either develop a new network for her or bring these kids into child welfare and there is five of them, the oldest being five years old and the youngest being three months. And what we were able to do with the networks is get our faith based people, our family committee
people and other community partners to work continuously with this young lady in her own home. Now of course all of our volunteers like that have their clearances, that is one of the things that we do. We make sure that that is a part of what they do, they have all of the mandated clearances so when they go into people’s houses we feel comfortable with that, that was part of what they set up. And they were able to maintain this young woman from the time she went into the hospital they took shifts, and one faith based lady lived not too far, she would go in early in the morning, someone else would spend the night, the other one would be in between, and some community partners would step up and provide day care during the day for some of the three and four year olds and it all worked out.

To make a long story short, those are the kinds of systems of care that we have developed here in Dauphin County as a true system whereby it takes everybody working together not apart from each other, but together to make the system work smoothly. Here we are able to get it, and understand that it is an engagement, a true engagement not just a partnership but an engagement which really means a oneness. That is, without one part the other part can’t work. So the groups have become that oneness for the workers here in Dauphin County, and that’s how we get to provide so many resources and supports to families.

Nicole Bossard: Thank you. Thank you for that.

Peter Vriens: Good afternoon everyone. The Systems of Care initiative gave us the approach, this new way of doing business in Dauphin County, and we had seen such great results that we wanted to make sure that once the grant ended, the work didn’t stop. We wanted to find a way to ensure its continuation. So we decided as a team that the vehicle that could support the work of our Systems of Care initiative and ensure its continuation beyond the grant period was the County’s Integrated Human Services Plan.

Just a little bit of history about the Integrated Human Services Plan. When Estelle Richmond came into office a little over 8 years ago as Secretary of Public Welfare for Pennsylvania, her vision was to see counties break down what she called the silos in which agencies can tend to work and move toward a stronger collaboration and true integration of services. Pennsylvania tends to look at this plan as an Integrated Children’s Services Plan, focusing on the child serving systems, but in Dauphin County we felt it was really important to have the adult serving systems at the table as well. We all work with the same families, and we wanted our Integrated Human Services Plan to be a comprehensive planning approach and really the overarching vehicle that drives practice in Dauphin County. So it was the perfect vehicle to oversee the continuing work of Systems of Care.

Our planning team consists of over 30 organizations including the human services agencies, providers, faith based leaders, schools, community representatives, and of
course families. The plan we developed is very values based. One of our first steps in developing a plan for the team was to agree upon the value sets on which we wanted to build the Integrated Human Services Plan. So we came up with five value sets and just to go over those briefly, first the efficient, responsive, accessible, courteous customer service with staff modeling strengths based, solution focused practice at all times. Second value set: a strong interagency collaboration and integration, utilizing a no wrong door philosophy, and a one stop shop model of service provision, which Helen alluded to earlier. The third value set is seeing families, youth and community as equal and full partners in decision-making. Fourth value set; children, adults and families are served in their own homes and communities whenever possible. Families are engaged as equal partners and the family and community are viewed as a team. Last value set; cultural competence and sensitivity-an appreciation of differences and the promotion of multiculturalism. So what we did really was take the values that had been established through Systems of Care and really expanded upon that in developing our Integrated Human Services Plan. I think that’s what sets it apart a little bit from other plans is those values then are integrated into the entire plan. So to further ensure the continuation of Systems of Care, the sub committees that Helen was describing were directly linked to the integrated planning team. And Helen, who is the Systems of Care Community Liaison, moved to the Human Services office, and we saw that as really critical because it sent a really clear message to the county that this initiative would continue in a totally cross-systems manner.

You can see the core vision of our Integrated Human Services Plan: that families and communities are empowered through the use of strengths based solution focused practices that create true partnerships between families and informal and formal community support systems. Plans to keep children, adults, families and the community safe are individual and family driven, culturally sensitive and are supported by an integrated approach that results in a seamless array of services. And lastly, this holistic approach combined with positive, supportive relationships and family centered resources will result in positive outcomes through healthy communities. So this holistic approach again is supported by our one stop shop philosophy. We feel it critical to take services to the individuals and families where they are, in their communities, and when they need them. So really, all of our new initiatives utilize this approach. We have opened two Neighborhood Reporting Centers through juvenile probation, which serve as alternatives to detention. Through a court order, youth can be committed to these neighborhood reporting centers, again as an alternative, where they go after school each day, they are still living at home, they are still in their communities, but they report to the center after school at 3:00 and stay until 9:00 each night, and all day on Saturday.

**Helen Spence:** And I’d just like to say those centers are churches.

**Peter Vriens:** That’s right. Yes. And our faith based group came through when we needed to have sites for these centers, that is an excellent point.
**Helen Spence:** Putting the kids back into their own community with supervision and changing the culture of the community as well as the child.

**Peter Vriens:** Right. So while the youth are at the centers they are not only getting obviously their supervision by juvenile probation but there is also an educational component to the program, a mentoring component to the program, and then the county provides drug and alcohol prevention training, mental health screening, any and all services in this one stop shop that would benefit that youth and the family. We involve the family just as much. We’ve also been working with school districts using this approach. One of our local school districts recently decided they wanted to bring all of their alternative education students back to the district. They felt they could serve them better themselves. We agreed to partner with them at the county and look at that new site they had established, as again, a one stop shop, so as these students are returning to the district for their alternative education programming, the county is providing support for the youth and the family again around mental health services, drug and alcohol services, and looking at that student and the family in a holistic way. I think one of the most interesting things here is that as that student is transitioning back to the district, the family has a Family Group Conference. And through that Family Group Conference, the individual education plan, or IEP, is established for that student. And in addition, through that Family Group Conference, we look at the family as a whole and what other needs they have that we could help support and the team or the family comes up with a plan around all of that.

[46:37]. Let’s see, the holistic approach is also supported by a common screening tool that we have developed that ensures a no wrong door philosophy. So in Dauphin County, no matter where an individual or family might first approach for services, we are screening for all of their needs. So, for example, if they are first involved with juvenile probation, during that intake we want to make sure that we are screening for mental health needs, drug and alcohol needs, is there an elderly individual in the family that could benefit from services, we are really looking at the family as a whole and how we can best serve them. We now have a lead case management model for families who are being served by multiple agencies. And we also want to move in the future towards a single case plan as well.

The Systems of Care initiative and the subsequent Integrated Human Services Plan really positioned Dauphin County pretty well to participate as a pilot county in two additional initiatives. First, the permanency practices initiative through the Pennsylvania Supreme Court. The goal of this initiative is to safely reduce the number of children in out of home placement through the use of family engagement strategies including Family Group Conferencing, family finding and family development credentialing. Also, Dauphin County was able to participate in the National Governor’s Academy initiative, through the National Governors Association. Again, with the goal being to safely reduce the
number of children in out of home placement by 15% in the two-year period ending December of 2010. Dauphin County exceeded that goal by overall reducing out of home placements by 16.2%, and because we’ve modeled this practice across all of the child, youth and family services, we continue to see further reductions. In fact, juvenile probation has further reduced their placements are now looking at total reduction of 36%. We have 36% less kids in out of home placement through juvenile probation than two years ago. And you can also see that we’ve greatly reduced the number of children re-entering care who have been returned home. So all of this has really gone together to continue to move Dauphin County forward in the areas that we are talking about.

Next slide please. We have to take just a minute to really talk about how important it is to have support from the top. We are very fortunate here in Dauphin County to have that support. The three county commissioners, the President Judge, they are all sending the same message: that we are to engage families, and we are going to partner with the community and this is Dauphin County’s philosophy, so having their support and everybody saying the same thing has really helped us achieve a lot of this.

**Helen Spence:** Absolutely and I just want to add that this modeling the practice and actually kind of walking the walk if you will, with the families and the community has been paramount to the movement that we’ve made here because it has truly, in my opinion, broken down a lot of the barriers that initially are there between formal systems and community based systems. When you show people how much you care, how much you really care, not exactly how much you know it really makes the difference in what they will do, and giving them a venue to be a part of the process is just paramount also to the sustainability of the system of care. Again, unfortunately Mr. Troy is not here but he would always tell us to make sure we keep it real. And in other words, don’t just say you are going to do something without really doing it or don’t actually say you want a partnership if you really just mean you want a pawn. He often would say that, and when we are really thinking about engaging families at the table, we have to be ready to relinquish some of the power that we think we have or the way we utilize the power that we have, and truly allow people to be engaged in the process of making decisions to sustain their families and to meet the mandates that we are asking them to meet, and to be able to have them educated enough, or involved in being educated in understanding what your systems really mean, and keeping it simple. And that’s why it’s so important to…we often times have our family partners look at our materials and say, “how can we make this family friendly, what are the words that we need to make them understand what it is we are trying to get them to understand?” It’s amazing how just simply tweaking some things about your own practices and policies makes a world of difference in how people can, families can really understand the meaning and the impact of what you are trying to get across to them. And again, giving people the opportunity to really be a part of the change and the decision-making is crucial for sustainability.
Peter Vriens: I wanted to give just a couple of examples of what we mean when we say model the practice. You know, we really try to use this approach and the strengths based philosophy in all that we do and that could mean a strategic planning session for one of our human services agencies. When I first came to Dauphin County one of the first things I did to help each agency plan to move forward but also to help me learn about each agency is we had a strategic planning day, we took an entire day and utilized the Family Group Conferencing model to strategically plan for that agency. It’s a perfect planning modality. Looking at the strengths of the agency first and then what folks’ concerns were, what resources we have available to help that agency and then really come up with a plan to both build upon the strengths identified and address the concerns identified, so it’s a great planning tool. We run staff meetings using the same model, as well as hopefully direct supervision. Always looking at strengths first, you know, then concerns and how can we move forward, and that’s kind of what we mean by modeling the practice. We really do utilize that approach.

Helen Spence: Exactly, you know and it has really caught on in the community. Certainly they, like I mentioned earlier, they have their own subcommittee groups that they too model when they identify a purpose or a concern the first thing they rally around is okay, what are the strengths that we bring to the table to be able to address those things, and even look at what might be some of the solutions that we can collectively come up with and where do they need our supports. So again, they use that as a tool to creating ways to address concerns. And that has been a marvelous tool for us.

Peter Vriens: Next slide please. Just some takeaways for building better agency and community partnerships. It’s all about creating those opportunities for the agency and community members to work together, and I think Helen has spoken very well to that in terms of all of the opportunities that we have that the community creates for all of us to work together to meet their needs. It’s really about empowering the community to fully serve and develop its constituents. And as Helen said, keeping it simple and avoiding textbook jargon. And again, it’s not about money, it’s about relationships. And I think something that just Helen and I laugh about is when we had that big event at the holidays with the 400 families coming together and the community partners and how are we going to serve this community this year, I mean you cannot believe the food that was there and all of the gifts and things that people were giving to these families to help them and support them and we had entertainment and it just went on and on, and we held it at the community college here in Harrisburg, because we’ve outgrown all of our other sites. What was really interesting is afterwards, someone from a local bank came up to Helen and said, “Well, what was your budget for this event? It would have cost us thousands to put it together and serve this many people,” and we just laughed and Helen said to her, “What do you mean budget? There was no budget for this. There was no money, everyone just came together and whatever they were willing and able to contribute they did,” and it was an incredible event and it’s not about the money, it’s about relationships and people being willing to come to the table and offer what they have to contribute. And
it’s all about a willingness to share authority, and you know again looking at families and communities as true partners. That’s a scary proposition for a lot of people, and don’t think that we didn’t haven’t our bumps along the way because that’s a pretty big leap. And I’ve been in human services for more years than I’d want to admit, it’s over 35, I was six when I started, but you know when I was trained in the 70’s we were trained to identify problems, and then we were trained to tell people what they needed to do to resolve this problems. So, this is a tremendous shift in philosophy, it’s a huge paradigm change. And you know you go through a lot of struggles when really making that significant a change, but everybody was willing, they came to the table, and they made it work ultimately.

**Helen Spence:** And it is a continual process. I find that as we grow and we learn, but the willingness to do that is there, you have to be able to not be scared, not be scared to fail or for something not to work quite right. Just knowing that you have that close relationship and to be able to say, “Okay well that piece didn’t work quite like we thought, let’s do it this way,” is how things continue to go. And not working looking for everything to be perfect. I remember early on in this practice when we started with the faith based, developing their strategic plan for themselves, I remember working with the child welfare training department coming in and actually training our faith based community on how to develop this strategy to do this one stop shop that they wanted to do over the summer, and I remember the young lady that came in and said, “Well you probably won’t be able to get this started and going for probably a couple years,” or whatever, but needless to say they did it and they got it and they did it in six months, and it’s been rolling off ever since, because they weren’t afraid of anything not working and to start over and to do anything like that. And, I think that’s what I see more than anything, that the community, our faith communities and our families have is that resilience, to be able to say, “Okay, well maybe we need to tweak it there, tweak it here,” not being afraid to do that but to continue to work for the common goals of being able to provide for each other and to build that whole collective system again, to work as one. Very exciting to me, as it becomes…I’m kind of from the old school myself, I won’t reveal how old I am but I am a little bit up there and I can remember being from a community where everybody thought they were rich, I mean even when you didn’t have anything. I had to grow up to realize that I was not rich, but we were rich in what we had as a oneness and that, as I see our Systems of Care in Dauphin County, that oneness is becoming very essential to what we do and who we are, that we are interdependent on each other, as a community, the families, all of us supporting each other has really made the difference and continues to make the difference in what we do and who we are.

[1:00:33]**Peter Vriens:** And I think from a human services perspective it’s so important to always try to do things cross system and a resource that we have here in Pennsylvania is the Child Welfare Training Program, that Helen was talking about, but when we utilize them, we often utilize them whenever possible in a cross systems way, so if they are providing training or assistance for Dauphin County, I have all of the systems there and
as long as child welfare is involved, they are willing to do that. They’ve been a tremendous resource for us, from training, technical assistance, all of that.

**Helen Spence:** And that’s another thing. Training has been cross systems for our community partners. We as a county actually provide a lot of training because it’s one thing telling them to work with you, but if they don’t share the same knowledge base that you do it’s hard to work from your perspectives, so by giving a lot of our training on drugs and alcohol, child welfare, a lot of the trainings that our case workers have and our other workers have here, we offer a lot of it to our community partners now. So that has really also made a difference. Keeping people using the languages is really important.

**Peter Vriens:** Yes, in fact a good example of that is we’ve been providing customer service training for all of our formal systems direct serve staff, and we have an entire day on this Saturday dedicated to our community partners to receive the same training and like Helen said, that was the fastest one, quickest one to fill up, so it really is great to see that response from the community.

Okay so again, we’ve been talking about, “Don’t be afraid to walk the walk, and not just talk the talk,” and how modeling the practice really is the key. That brings us to questions, challenges, opportunities, anything. Nicole, anything else you would like us to cover, are there questions we could start to answer, have some discussion?

**Nicole Bossard:** Yes, actually, Elyse while you look and see if there are any questions available, I actually do have a question that I would like for you all to share about your experience, but before I go to my list of questions, and for those of you that are on the line, hopefully by now you’ve heard enough to know that we have some pretty incredible folks on the phone, and even more so the whole community of folks is absolutely incredible, so before we get into questions is I’m going to have Elyse look to see if any of you have provided questions via our online chat venue, but also if there are some questions that you have, in terms of opening all the lines, because it sounds like we have so many people, I’m just going to, after Elyse lets me know if we have any written questions, have her open the line for just a few minutes and I’m going to ask, it’s going to be a little bit jarring and confusing because you can’t see across the room to see if anybody is wanting to jump in there with a question, so I’m going to ask that we be patient with each other and just will open the lines for just a few minutes, and if there are those of you that have questions, just say your name, where you are from and please just provide your question because I know it’s easy for me to hear some of the things that are being talked about and want to talk about all of those experiences in kind, but we just don’t have that kind of time, so please be very quick on your question and let our presenters respond. So first, Elyse do we have any questions that have been written?

**Elyse Goldenberg:** We do.
Nicole Bossard: Okay, great. Let me ask you to read those first.

Elyse Goldenberg: Okay, do you want me to read them one by one or read them all at once?

Peter Vriens: One by one.

Nicole Bossard: Yes, read them one by one so that they can have the chance to respond to those.

Elyse Goldenberg: Okay, the first question was “How did you measure the overall effectiveness of the community partners and grant success?”

Nicole Bossard: Helen or Peter?

Helen Spence: They measured the ongoing success by the rate of how many…are you talking about partners, how the success of the partners, is that what you are talking about specifically or the Systems of Care grant period?

Peter Vriens: Yeah, I think the Systems of Care grant.

Helen Spence: Well actually we developed our own implementation team and that team with Sarina Bishop being the lead person, began to develop some measurable goals and outcomes that they wanted to achieve, and as they began to achieve those goals that became their measurement of what they looked for. I’m sure we have achieved all of those goals that are set forth.

Nicole Bossard: And Helen, one of the slides that we hinted at one of those, the specific child welfare outcomes at least around re-entry rates, so were there, it sounds like you all were also looking at independently re-entry rates, how long kids were staying, and if I’m not mistaken you all were also looking at how many kids did we prevent from having to go into care, was that something that was being considered?

Hello, we are having a moment on the phone line here folks.

Peter Vriens: That’s better. It goes back to the child and family service review goals for child welfare, and that relates back to everything you were saying Nicole, how many children are in out of home placement, the length of time they are in out of home placement, how many children re-enter the system within 12 months of reunification and how many placement settings does a child have while they are in foster care? And we talked about some of those positive results earlier, we are really seeing a continued reduction in safely reducing the number of children in out of home placement because of
the alternatives that we have put in place from the Neighborhood Reporting Centers to our faith based initiatives, and all of that, so we really look at all of that and again the Integrated Human Services Plan is helping us track that as well, because we have very specific goals stated in that plan and each year we evaluate where we are with each goal, and that helps us plan for the next year.

**Nicole Bossard:** Elyse, next question.

**Elyse Goldenberg:** The next question is “In the demonstration grant, how were collaborative development and capacity building measured?”

**Nicole Bossard:** In terms of collaborative development we were looking at everything from, and let me make this the caveat for those on the phone, you have the TA person on the line and our evaluation person unfortunately also could not be here due to a health situation, so with that said, I’m going to, from the TA side, respond to that as best as I can. But with the, in terms of collaborative development, we were looking at things like composition, who is actually a part of the collaborative, who is showing up on those, again what agencies are represented, are families represented or consumers represented on those collaboratives? We are also looking at what are the transitions, so again based on our time points we were looking at the composition, but what are the transitions in those compositions; meaning was there a sense of spread, were more agencies coming on board, was there greater community representation or was just the opposite, was there less, did we find over time we actually had less involvement from folks that were from various agencies as well as consumers that were involved, again utilizing those Systems of Care principles, we were not only looking for the interagency representation of the formal Systems of Care systems but again those family involvement principle and community based resources principle had us looking just beyond the “service providing professional.” And we were also in terms of collaborative development, and Elyse read that second part for me again.

**Elyse Goldenberg:** “In the demonstration grant, how were collaborative development and capacity building measured?”

**Nicole Bossard:** Okay, and so that was the, the collaborative development was looking at the actual, just the short to get right to that point there, they were really looking at okay, so who is around the table, and the capacity building pieces, there were several interviews done at the various time points with the, what we were interviewing actually front line staff and supervisors about their knowledge of the Systems of Care demonstration initiative, and we were specifically asking them about, and you saw this on the slide, to ask them about those Systems of Care principles and did they feel at their level that they were being supported by the agency, again to utilize those principles in their practice, and so we spoke a little bit earlier about things like needing to change policies and procedures, so that they could, if there was an evening meeting that was called, for
example here in Dauphin with family group conferencing, so that folks feel like they have the support of their agency to utilize those principles or to utilize that strength based focus to just be able to be there and to meet when the families said they needed to meet, rather than having it be, “hey well our agency is, we work from 8:15 to 4:30, and if whatever you need isn’t happening in those hours, then hey we have to kind of do some scrambling” or feeling like they were getting resistance from inside the agency. But the other piece that I will leave you all with in terms of really finding out more details about the evaluation and the cross site findings, in a couple of slides I will provide the website where you can go and get a look at our evaluation reports, specifically the ones related to organizational and systems change, and that will provide you with additional information and specifics on how we defined what, and of course what those findings actually were.

Next question Elyse.

**Elyse Goldenberg:** “Is the Integrated Human Services Plan for services beyond child welfare?”

**Peter Vriens:** In Dauphin County it is, yes. As I said, Pennsylvania’s focus is on an Integrated Children Services Plan, and that focuses on the child serving systems but we really put a little bit of a different twist on it in Dauphin County because we saw the value in having everybody at the table, so we do have our adult serving systems as well, the Area Institute On Aging as well as Adult Probation and we have some unique initiatives going on in our county with Adult Probation, we have a truancy initiative with Adult Probation and Children And Youth Services that really was the brain child of our adult probation chief. He wanted to break that cycle and really looking at education as the key to that and so he worked with the school districts around identifying students in their districts that had parents on probation or parole, and he would work with those parents around educating them as to the importance of their child’s schooling and being involved in that and at the same time tracking attendance of those students, so whenever a child of one of his consumers hit five days of unexcused absences a truancy elimination plan was upheld and the family was offered a family group conference to really look at whatever was happening within that family that was causing that child to miss school, because we know that the truancy really is the symptom of something else that is going on in the family, so yes, the adult serving systems are involved in Dauphin County because we saw that as critical.

**Nicole Bossard:** And Elyse, were there other questions?

**Elyse Goldenberg:** Yes, there are a couple more. This next question was in regards to the 25% reduction in re-entry and the 16.2% reduction in OOHP. They asked, “Was there a similar reduction in incident reports for these children?”
Peter Vriens: When you say incident reports, what do you mean? You mean referrals to child welfare or I’m not exactly sure what you mean by an incident report.

Nicole Bossard: Did they happen to provide any additional clarification on that one Elyse?

Elyse Goldenberg: No.

Nicole Bossard: My suggestion is Peter just answer that one as best you can, and for the person who submitted that question if you happen to be near your keyboard can you offer some additional clarification for us.

Elyse Goldenberg: He said subsequent reports of maltreatment.

Peter Vriens: Oh were there subsequent reductions of reports of maltreatment. Ah you know what I don’t have that stat in front of me I’d have to research that but I could get that to you.

Elyse Goldenberg: The next question is, “How did you overcome barriers related to confidentiality?”

Peter Vriens and Helen Spence: [Laugh]

Peter Vriens: That’s always a very good question and always comes up, but in terms of our Systems of Care work or the Integrated Plan, or both?

Nicole Bossard: I would say because it’s such a huge issue as we are talking about not only interagency collaboration but certainly collaboration with the community at large in the ways that you all have described it, why don’t we take the broader view on that Peter, because this is a huge issue of addressing issues of confidentiality when it comes to collaboration.

Peter Vriens: Maybe Helen would start with the work…

Helen Spence: Well one of the things we did early on was educate the community, bringing people in, our child welfare people to provide presentations around the importance and how to keep that mandate of confidentiality in place. In some instance, depending on the level of what they were working on, they may even, I know for the ones that are doing family conferencing, all those kinds of things, they sign a release giving permission to allow them to talk to other members in their families or in the community or something in order to continue to help out. But it’s usually through our education, the cross education or the signing of releases that helps us to keep the confidentiality in place.
Nicole Bossard: And Peter did you have anything that you wanted to add onto that?

Peter Vriens: As part of the Integrated Human Services Plan we are actually developing a Microsoft platform that will allow us to share information across systems, so of course confidentiality was brought up as a significant challenge in that way so we are working with different systems around what can and can’t be shared, you know I would ultimately like to see us develop a common release of information form. I know there are a couple of counties in the state that are doing that and who said they would share that with us when it is complete. Drug and Alcohol services of course has the most stringent rules of confidentiality, but again we share what we can with proper releases and I hope to move towards a common release of information form in the future.

Were there any other questions?

Nicole Bossard: Yes, other questions Elyse?

Elyse Goldenberg: The next one is “What was the approach or some strategies used for engaging the community and providers to buy into this System of Care process?”

Helen Spence: Well I think one of the biggest things was to have these professionals go in and kind of wear two hats, and be viewed in the community as a community partner and certainly here as one of the professional partners but you know having that kind of flexibility to kind of engage and to be a part of that development of trust and understanding to the community partners has been really I guess a plus here to be able to engage them and get them to feel comfortable that it may be okay to have some things going one way but looking at the strengths that you do bring to the table is how we can help you and here is how you can help us you know especially as it pertains to child welfare mandates. You know I think the most important thing is to look at the strengths of the extended family and be able to say to them this is where we want you to go. You certainly have an obligation to maintain safety and welfare of children, but if you all can tell us how you can make that happen then we can work with you to make that happen, but just that kind of understanding on that level in meeting people where they are, when they are at and where they are at has really made a difference in engaging people in the long run.

Peter Vriens: And I think initially as Helen said earlier, the community forums that were held across Dauphin County were a big part of engaging the community in this process. I mean we had commissioners go out as a part of these forums, we had our judges go out, talking to people and really making them a part of the process, so there was a lot of engagement through forums, through training, you know all of that, so really making them feel a part of the process, making them a part of the process.
Helen Spence: And letting them see, you know it was again, people look at a lot of what you do, and I think the more that they see us working together at the times, I mean I was a line worker and I’m in the community with the commissioner and the judges at the time, and actually having a significant role, and they have the role that they have, but saying to the community, “this is who we are,” and at the same time saying to them that we are limited to these things and looking at, engaging them and giving them a partnership with us by saying, “this is where we see that you can be of help to us and we can help you.”

Peter Vriens: Some of our initiatives we are out in the community knocking on doors. I mean engagement gets down to that level where we are knocking on doors to talk to people and engage them in the process, so you know that’s a part of it as well.

Nicole Bossard: And Elyse before you go on to the next question there, for those of us that are listening, I do just want to underscore something that is kind of sitting right in between what Helen and Peter are sharing and that there is a true “we” going on there. So as Helen said, from the commissioners on to the line workers on to the supervisors, you know so agencies were constantly, literally going out into the community and it wasn’t good enough just to have the community come in to the agency turf, if I can use that language. There was constantly this flow of folks from various categorical agencies and formal systems, going into the community as Helen just said going where people were. And meeting in churches, meeting in community centers, wherever the “community” was, that was where they were going to meet and not kind of requiring everybody to always come into the agency to talk and to share their concerns. So I wanted to underscore that.

Helen Spence: That continues to be the way we do business here, even now, with all of the new initiatives that we’ve started in the schools and communities and stuff, our formal partners actually go in and do the work in those places, in the churches, like you heard Peter mention that we now have what we call the Neighborhood Reporting Center from the detention center for our delinquent kids, but those things are now done in the churches, and for allowing the community to play a huge role in the sustainability of the young person and the families alike right where they are so that when the formal partners have to step out the community has made changes, not just trying to make the child have some changes through a program. The program becomes all of ours.

Peter Vriens: It’s about going out into the communities in the evenings, on weekends, any time it’s convenient to the folks in the community.

Nicole Bossard: And I’m sorry to all of our listeners, I got a little happy so you heard a little amen corner “yes, uh huh” coming from me because I think that ties us right back into the person that was asking questions about the outcomes, because after all the title of this workshop is “Community Partnerships that Improve Child Welfare Outcomes” and
as Helen said, boy oh boy if we can not only support that youth or that child that’s in care, we can support and lift up the family, but we can also support and engage and lift up and empower the whole community, it seems to me that there may be some link there with that and a reduction in re-entry rates into the system so I just wanted to throw that out there as well. Elyse I think we’ve got time for one more question and then I’ve got some materials that I want to make sure that I share with all the folks that are on the line here with us.

**Elyse Goldenberg:** “How were you able to facilitate a change of mindset/culture of the systems where they were able to buy into the concept of collaborative Systems of Care?”

**Helen Spence:** Well, one of the things that we learned early on is not to spend a lot of time with the naysayers, to kind of move forward with those who believe in the practice and the rest will either follow or they will get off the ship, one or the other, but that’s how we took the stance here in Dauphin County. We kind of looked at the big picture and the majority of where they wanted to go, of course some people, I remember especially early on in juvenile probation people said, “oh my goodness this is so touchy feely type of stuff and we are correctional people.” But as time moved on and you kind of allow them to watch what you do and not what you say, I remember a time in juvenile probation, I’ll give you an example I remember as we moved into this practice and I was the probation officer kind of tasked to kind of roll some of this out in that department and some of my main tactics that I would have less problems or concerns with my clients then eventually the other PO’s would ask me, “How did you make that happen?” and I would say, “because I don’t try to do it all myself, I engage everyone else so I don’t have to do all the work” and it then began making sense to them so they began to follow suit with that, so it goes back to being able to walk the walk better than you can talk the talk, so that is how we kind of led here, and we continue to allow those one or those couple of people that are kind of the naysayers about the practices and not being a part of them for whatever reasons they see, but when we are able to actually show the results with the families themselves and then by engaging them and their extended families it really makes a difference in brining others along that are involved.

**Peter Vriens:** Like Helen said, you run with the people who get it, who are excited about it, who want to be a part of it, and as other folks see the excitement and the positive outcomes they’ll jump on board. If they don’t ultimately they usually weed themselves out and either one is okay.

**Nicole Bossard:** Alright. Thank you whoever posted that question, you must have reached right inside of my head and pulled that one out because that’s certainly one I wanted to put on the table. But with that let me first of all say thank you to Peter and Helen for joining us today and sharing their experiences and the experiences of Dauphin County and really the amazing work that they are doing, and I would dare say when they started folks may have had for many of the communities they are working in the parts of
Harrisburg, folks may have had some question marks about if the community was even able or capable of doing the things that they are doing now and I am just so enthused and excited to know about not only what’s been accomplished but the manner in which you all are continuing to blaze new trails and not just the agencies leading the way. You have made clear that it’s not only the business of the agencies to do this work but certainly that all of us have a part to play in this and as agencies and professionals we can make space and make room and make those relationships real, so I want to say thank you so much for sharing what you shared with us today. And just to let you all know that are out there in cyberspace, we have a couple of products that I want you to know about. There is a website again at [www.childwelfare.gov](http://www.childwelfare.gov). The materials that are related to the Systems of Care demonstration project and that being from the evaluation reports and also to some of these other infrastructure TA development and knowledge development products are available there for you to download for free. A Closer Look, again looking at the implementation strategies for each of the Systems of Care principles and how across all nine sites those principles were operationalized, as well as a strategic planning guide, and just looking at how this whole process of infrastructure development for improved outcomes, how that works and how it’s worked for our 9 grantees.

Also wanting to let you know about specific evaluation reports, one of which I mentioned earlier. The other two I want to make sure that I point out, we’ve done a case study, a qualitative case study on family involvement as well as leadership. You can find those online and download them for free. And lastly, a couple of action briefs as well as of course we’ve discussed the webinar series will be available for you to download also from the [www.childwelfare.gov](http://www.childwelfare.gov) website, so again I just want to say thank you so much for jumping on and listening and contributing your questions. For all of those questions that we didn’t answer, we will respond to those once we upload the transcript and the PowerPoint. So thank you again, Helen and Peter thank you so much. Give Troy our best.

We look forward to learning more from you. You all are certainly a community to watch. Thank you and thank you to those of you that tuned in. Be well.