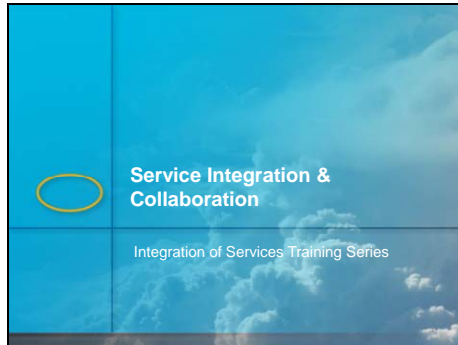


THE INTEGRATION OF SERVICES TRAINING SERIES

MODULE 5: SERVICE INTEGRATION AND COLLABORATION

SESSION 1: EVERY FAMILY HAS A TEAM

SLIDE 1-1: SESSION TITLE SLIDE



Summarize:

- Today's Module is the final module in our series and offers you a chance to think about the role of the DCM/Investigator in partnering with families and their team members to collaborate on planning and services/implementation. This session is very experiential. Participants will use their experience and current case situations to further apply the concepts of family centered practice within their local system of care.
- We will learn from each other about our best practices in this circuit.
- Acknowledge that this is an integration day, which is fitting for the topic, as we think together about the best way to assess our own current practice. The purpose is to identify specific best practices for collaboration and integration.
- Reinforce that this training is not specific to one model of teaming or integration. The training focuses on the basic principles of teaming and should reinforce and enrich local efforts to improve collaborative work with children, families, and other partners.

TRAINER NOTE

The trainer should use an analogy they are comfortable with to compare the role of the DCM/Investigator to the conductor of an orchestra, captain of a team, chair of a work group, etc. The purpose of the analogy is to help caseworkers think about their role in providing leadership to the group of people (team members) who are involved with a child and family to help them succeed with changes they are making in their lives. In a leadership role, their job is to recruit members for different roles and activities. In order to achieve the best performance, there needs to be mutual understanding of respective roles, parts, sequencing and implementation efforts. As the case progresses, leadership should shift to the family.

Refer to the Participant Guide, Module 1, page 2. Ask them to complete the Before and After Training Survey.

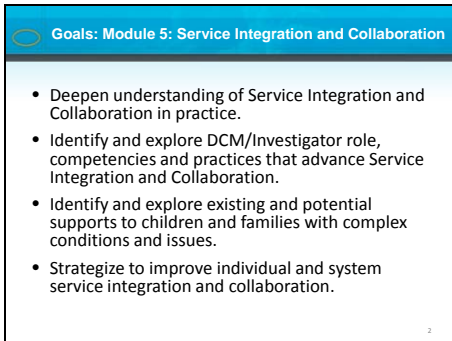
The directions are written on the survey.

Emphasize that this is not a test with right and wrong answers and it is anonymous.

Ask the participants to please keep the survey in their participant guide because, as the name implies, we will be using it at the end of the day as well.

WORKING AGREEMENT

SLIDE 1-2: GOALS FOR MODULE



Goals: Module 5: Service Integration and Collaboration

- Deepen understanding of Service Integration and Collaboration in practice.
- Identify and explore DCM/Investigator role, competencies and practices that advance Service Integration and Collaboration.
- Identify and explore existing and potential supports to children and families with complex conditions and issues.
- Strategize to improve individual and system service integration and collaboration.

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FLIPCHART

Ask:

Based on the stated goals for our work together today, what would you say you would like to learn, practice, or think about together, related to Service Integration and Collaboration?

Note responses on flipchart and post for later reference.

Ground Rules

Say:

As we have in other modules, today we will want to strengthen our working agreement and make sure we understand your goals for the day as well as giving you a sense of what we are planning to cover and are prepared to offer. This includes setting or revising our plan for how we will work together, or ground rules.

Ask:

Is there any revision we need to make to our working agreement to most effectively meet our goals?

Record responses on the flipchart.



FLIPCHART


Say:

Today's work includes close review on your part, related to a child and family with whom you are working. I would like to suggest that we agree on some way of working that allows each of you to be candid with your peers related to being best able to share your strengths and needs within the group. Is there anything you need from this group to best be able to openly reflect on your practice?

TRAINER NOTE

Prior to local sessions, the trainer will be familiar with the local system of care (SOC) and principles and practices that support family centered practice and collaboration. Where there are formal teaming mechanisms at the heart of the SOC practice, familiarity with the teaming model and practices will help make the training relevant. If there is not a formal teaming practice in place that is led by the DCM/agency, there are still opportunities to collaborate both formally in multi-disciplinary team staffing, level of care staffing, transfer staffing, etc. In addition, there are likely teams that meet around children in other non-child welfare led settings, such as in mental health treatment settings, schools, and corrections/DJJ systems. Throughout this day, we will use collaboration and service integration as the standard for practice, either building on existing formal teaming opportunities or assisting individual staff in their efforts to provide individualized and synthesized plans with families.

OVERVIEW OF THE ISSUE SLIDE 1-3: DEFINING OUR TERMS

 Defining our Terms

- **Integration of Services, or Integrated Services:** incorporation [of services] as equals into society or an organization of individuals of different groups (Webster's Dictionary)
- **Collaboration:** to work jointly with others or together especially in an intellectual endeavor (Webster's Dictionary)
- **Teams:** a number of persons associated together in work or activity. (Webster's Dictionary)

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Say:

- *The first session will offer you an opportunity to think about your work in real time. We will think together about a child and family you currently work with in terms of what is going well, and what could be even better.*
- *This session assumes that there is already collaboration and some degree of service integration occurring. Before we begin, let's talk about the terms we will use today. The primary terms we will use are on the slide.*

TRAINER NOTE

The exercise works best when a sufficient number of participants currently carry cases to use as the basis for discussion. An alternative to having participants pick their own case is to have all participants use "Kourtney's Scenario" which is included in the Trainer Resources.

Materials:
Participant Guide Activity worksheet

ACTIVITY 1-1: Every Family Has a Team

PURPOSE: Every family has a team, whether it is a functional or formal team or not. The elements of family teams include people who are invested in reaching common goals for the child and family. That said, this activity invites DCM/Investigators to think about a complex family on their caseload for practice and reflection about teaming and collaboration.

SLIDE 1-4: SYSTEM PARTNERS

System Partners	
• A Few External Partners:	• A Few Internal Partners:
– Child Care	– Investigators
– School	– DCMs
– Children's Medical Services	– Supervisors
– Department of Juvenile Justice	– CWLS
– Workforce Development	– Program Specialists
– Mental Health Providers	
– Substance Abuse Providers	
– Domestic Violence Centers	

Participant Guide Module 5, p. 4

TIME: 25 minutes

DIRECTIONS:

Divide the large group into smaller groups of three and tell the small groups they are beginning with this activity and will continue to use this case and work together through the day. If there are a number of Investigators in the training, ask them to use a case they are just commencing to help them think about the Investigator's role in working with collaterals and setting the stage for collaboration over the life of the case. This may include stakeholders who are part of a safety plan.

Step 1: Identify a child who is involved in three of the external systems listed on the slide.

Step 2: Using your worksheet, on page 4 in the participant guide, enter some summary information about the child/family, their supports, and involved partners.

Step 3: At the bottom of the worksheet, list out what you believe is going well in terms of coordinating and collaborating with external and internal partners. Also be sure to include the family and their informal supports.

Beneath the strengths, or what is going well, note a few things that you would like to strengthen or build into your work with this family.

Step 4: Share the summary with your two partners within the triad.

Process:

After 20 minutes, ask the groups to think together for three minutes about the strengths they identified in their individual practice and the practice of their triad members in collaboration service integration. Ask participants to identify one thing they want to strengthen or build into their practice.

Summarize the following points to end the activity:


- No matter which model of teaming or service integration that you use, the work assists families to create support networks of formal and informal persons that can work together.

TRANSITION

As you can see, there are already many ways that you successfully bring people together, or get them on the same page, as you work with children and families involved in the child welfare system. At the same time, there are opportunities to deepen our collaboration and to improve the coordination across stakeholders in the system. In the next session, we will explore the ‘why’ behind initiatives to improve collaboration with families, informal supports, and community providers.

BENEFITS AND CHALLENGES OF INTEGRATION OF SERVICES

SLIDE 1-5: INTEGRATION OF SERVICES

 **Goals for Plans Using the Recovery Model**

- Respect for the child and/or family preferences regarding treatment and providers, whenever possible.
- Focus on developing recovery supports (services, informal supports, long term plans).
- Identifying and making efficient effective plans for co-occurring issues.
- Building a plan to support caregivers in providing safety, stability and well-being for children for their childhood.

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Say:

- *As we reviewed the recovery model in prior modules, these principles are a foundation that also spans across family centered practice initiatives and efforts.*
- *Using these principles to work collaboratively across family, informal supports, and services advances the family ownership of the plan.*
- *At the same time, the agency representative is a key member who assists the team in focusing on outcomes and non-negotiable bottom lines that drive the timeframes and urgency of the plan.*
- *We will discuss roles in our next session, but let’s start with talking about the benefits and challenges of teaming and collaboration across supports, formal and informal.*

Say:

*Teaming occurs in some formal manner in many child welfare systems. Some of the most prevalent models are listed in the back of your participant guide on page 21, **Family Teaming: Comparing Approaches**. This guide was developed by the Casey Foundation in 2009 to assist with identifying the unique features and styles of formal teaming methods. In addition to formal teaming, as we just discovered, methods of case management along with other staffing in child welfare often seek to meet the goals of integration and effective collaboration of services.*

Ask:

What are the ways that teaming with families and other partners in your systems of care is promoted?

Examples may include the major four methods listed in the guide, or other methods including:

- Wraparound
- Case Transfer Staffing or Meetings
- Level of Care Staffing or Meetings
- Permanency Staffing

TEAMING THAT IS OCCURRING IN THE REPRESENTED SYSTEMS IN FORMAL WAYS


Participant Guide Module 5, p. 21

FAMILY TEAMING: COMPARING APPROACHES



Materials:
Flipchart paper
Markers

**SLIDE 1-6: SMALL GROUP ACTIVITY
STEP 1**

 **Small Group Activity**

In your small group discuss:

When things go well, what are the benefits you experience in working collaboratively with the following:

- Parents
- Providers and Educators
- Friends and Supports
- Agency Staff, DCM, Supervisor, Investigator, and Specialist

What are the challenges or worries you have had or dealt with in including these partners in meetings?

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ACTIVITY 1-2: Small Group Activity

PURPOSE: Break into four small groups and ask the groups to each brainstorm an answer to the questions below, assigning one stakeholder group to each small group (a large group activity may also be manageable). An alternative activity is to place four posters into different parts of training room, each with a different system partner heading and the two sub topics (benefits, challenges) and allow all participants to walk around and add responses.

TIME: 45 minutes

DIRECTIONS:

Step 1:

What are the benefits you experience in working collaboratively with the following:

- Parent
- Providers and Educators
- Friends and supports
- Agency Staff (DCM, Supervisor, Investigator, Specialist, CWLS)

Have each group record their answers on a piece of flipchart paper.

Discuss briefly each group's responses.

Sample responses:

Parent: Increased ownership, increased accountability; familiar with the issues; involvement breeds honesty and disclosure; easier to know up front what the relationships are within the family and between the family and the system, evolving leadership.

Providers: get a better holistic view of the family outside of the counseling setting; see how their service links with others; offer information on progress and goals in a way that moves the case forward; lets the DCM assess the effectiveness of the therapeutic alliance; allows the DCM to help the provider and family understand the system.

Educators: give a real time functional assessment of how children are doing; involvement helps educators and caregivers maintain consistency with one another; leverages resources that come through the education system to assist with services, especially services that are behavioral and educational in nature.



Extended Family, Friends and Supports: Allows for more perspectives on the family as they live in the community; not just interactions with the agency and providers; allows friends, supports, and extended family to understand the system and be of assistance to their family members; provides opportunities to make a respite or support plan or to provide advanced directive in case of crisis (crisis planning).

Agency (DCM/Investigator, Supervisor, Specialist): Allows for more information about and for the system to come into play; makes the family real to others in the agency (not just the DCM/Investigator) affords DCM/Investigator feedback on how s/he is working with the family and the network of providers; offers additional resources and ideas to work with.

Step 2:

Using the same four areas, *ask:*

What are the challenges you encounter when these groups of stakeholders are included in case review or planning meetings?

Have each group record their answers on a piece of flipchart paper.

Discuss briefly each group's responses.

Process:

Anticipate the following responses around challenges:

Parent: May fear removal of children; retaliation of spouse in domestic violence cases; loss of privacy; can be in denial of issues; withhold information, deny events that were founded, etc.; may lack insight or willingness to honestly engage with the team or the plan; may use their lawyer to control what types of conversations and information can be shared or used by the group, etc.

Providers: Can take over the meeting; be closed to ideas from other providers; may appear to 'side' with families against the agency or against families with other providers; may refuse to participate unless they are paid to do so; may limit the time they can be available for consultation; may have agency policies that limit flexibility or time.

Educators: May be precluded from involvement in meetings outside of school; may range in being detached or enmeshed with the family; may have limitations on flexibility or time due to school policy.

Extended Family, Friends, and Informal Supports: May not see the safety concerns and therefore undermine planning; may offer ‘services’ but can’t be held accountable; may become dependent on calling the DCM/Investigator and create more work.

Agency: May have internal disagreements about how the family is seen or what should be done.

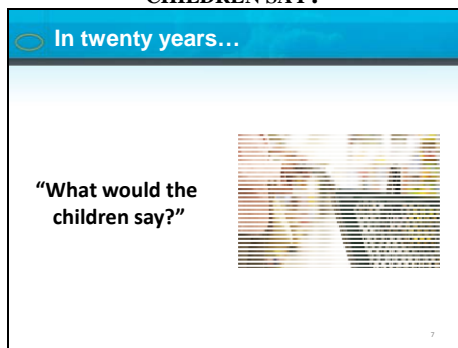
Summarize:

There are clearly benefits and challenges to integration and collaboration, and building teams in child welfare. The worker skills and system resources include:

- **Time** it takes to build a thorough shared vision.
 - As you noted both the benefits and drawbacks of the different perspectives of team members, clearly it will take some time and work for the team to grow in its understanding of the broader family strengths and challenges. When team members are able to “grow” and get to that point where everyone is truly “on the same page,” there is more efficient use of everyone’s role and everyone’s investment of “time” becomes more coordinated and thoughtful.
- **Communication and leadership skills** of the DCM/Investigator
 - The ability of the DCM/Investigator to build an effective working partnership with family members and the other involved professionals requires a different skill set: listening skills, conveying respect for all persons involved and their different perspectives, and the ability to lead team members in developing a common vision of success for each child/family and a common plan of how to achieve success.

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- **Mind set:** willingness and engagement with the family
 - The foundation for forming a constructive team is the ability of all team members to convey respect and hope to the child and family. Team members understand that the family's perspective of their strengths and needs will grow and develop over the course of their involvement, and team members are patient and persistent. Team members work in unison, not competition, to build rapport and trust with children and families. Team members are open to family input and feedback, and invite family members to discuss what is working and what is not working with planned interventions.

SLIDE 1-7: WHAT WOULD THE CHILDREN SAY?



Say:

Now to close out this section, as we move on to explore the changing role of the DCM and Investigator in creating an integrated approach. Think about the children you have served in the past and the children in the family you identified in the beginning of the day. Imagine that you succeeded in creating a highly collaborative group of people, formal and natural supports, who joined together with the family to help the family craft and realize their plan. Twenty years from now, you are walking through the grocery store, and you see a familiar face. The child you have named comes up to you and spontaneously gives you feedback about what your intervention meant to him/her.

Ask:

What would that feedback be?



TRANSITION

Note responses in quotation marks. Post for the remainder of the training. If you had this group during Module 1, when you asked the group to think of a child whose life was made better through their intervention, you may also refer to the first activity.

The role of the DCM/Investigator is integral in Service Integration and Collaboration, as we will discuss in the next session.