



Building a Vision for Child Welfare for the 21st Century: Technical Expertise to Population-Level Improvement

- **Uma Ahluwalia, Director, Montgomery County, MD, Department of Health and Human Services**
- **Frank L. Alexander, Director, Boulder County, CO, Department of Housing and Human Services**

**Children's Bureau
State Team Planning Meeting
Washington, D.C., July 18, 2018**



Driving Outcomes for Families and Children

- Building Child Welfare Systems that Achieve Population-Level Outcomes
 - What We Hope to Achieve: Frank Alexander (5 mins)
- Services and Systems Integration and Child Welfare
 - Boulder County, CO: Frank Alexander (20 mins)
 - Montgomery County, MD: Uma Ahluwalia (20 mins)
- The Opportunity Before Us-Population Level Support for Child Well-Being:
 - Uma/Frank (15 mins)



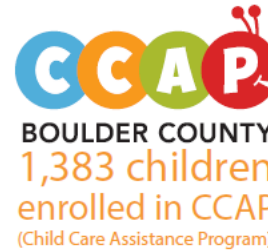


The Challenge As We See It

Siloed Funding
Siloed Processes
Siloed Systems



Inefficiency,
Redundancy,
Poor Outcomes



19,129
average
monthly
SNAP
enrollees



9,795 Calls Generated:
3,850 Child Welfare Reports &
990 Adult Protection Services Reports



611 Households

Living in Boulder County Housing Authority rental units



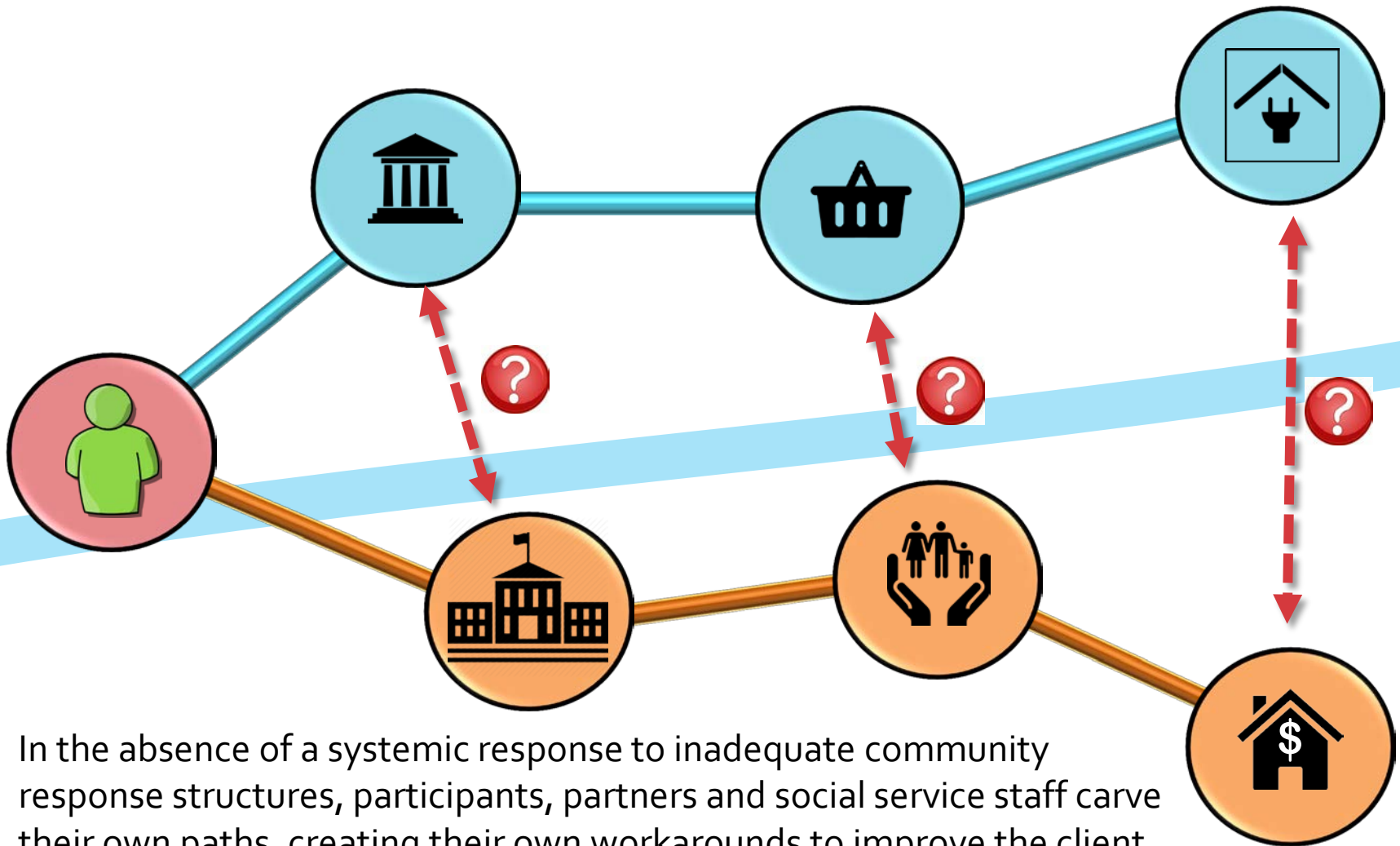
189 Elderly
Households
receiving
Housing
Choice
Vouchers



You can work really hard, and serve a lot of people, but if you are not focusing on deep connections and root cause then you ultimately won't have an impact.



Traditional Human Services Delivery



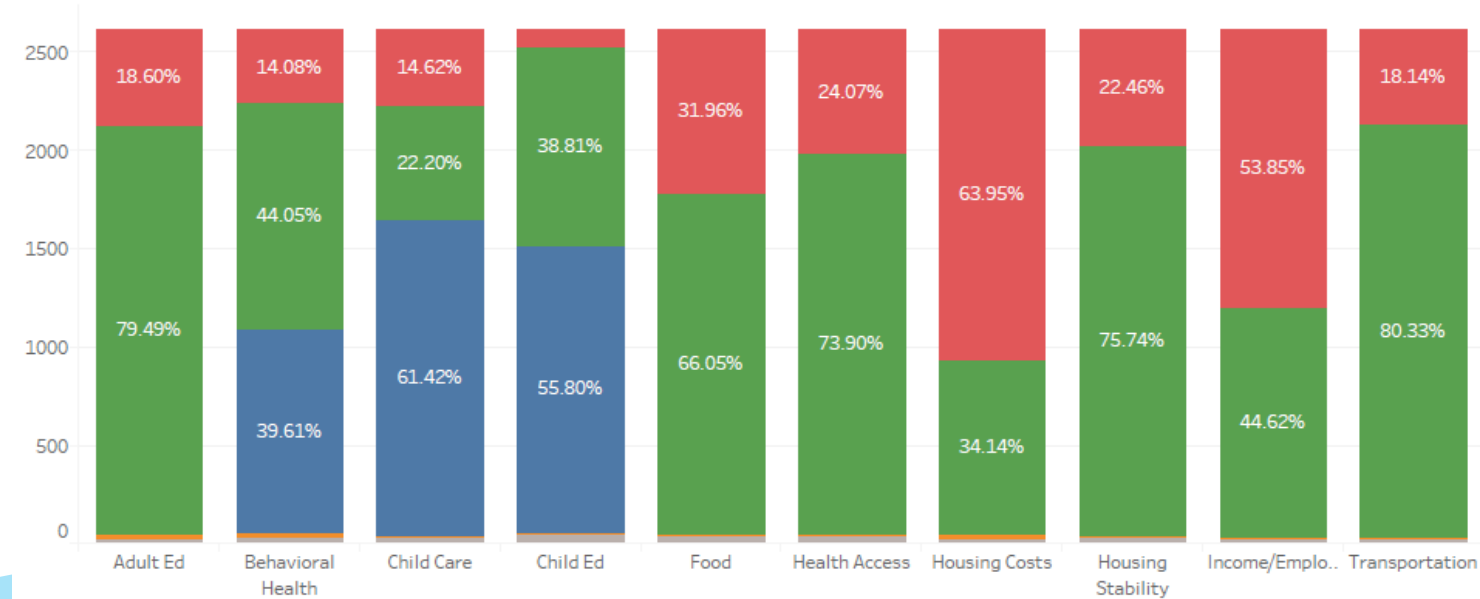
In the absence of a systemic response to inadequate community response structures, participants, partners and social service staff carve their own paths, creating their own workarounds to improve the client experience. Cycles of abuse and neglect continue and child protection systems remain isolated from community.



Insights about Need and Risk

Responses by Question

Question Topic

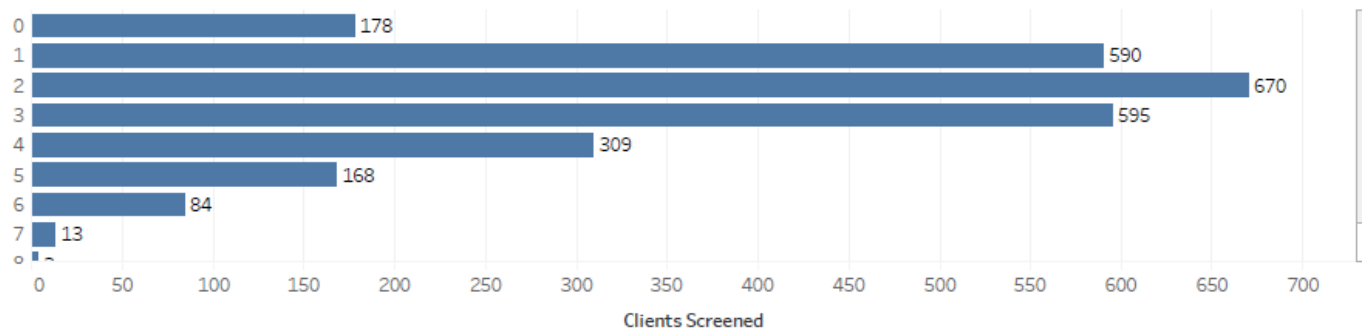


**HHS Navigation
Screening Pilot
Data
Over 4000
screeners
administered in a
month to general
assistance
population.**

Modified Response Value

Neg Response: Need Present Pos Response: No Need N/A Refused Blank/Null

Count of Clients by Number of Needs



Social Determinants of Health



Underscores the relationships between social factors and health outcomes in communities.

Pushes for service frameworks and structures to align and function together on behalf of families and individuals.

Integrated Services Model

Integrated Services Model of Care

Moving beyond 'programs' to an integrated continuum of whole-person care.



Enter
through any
door, tell
your story
once

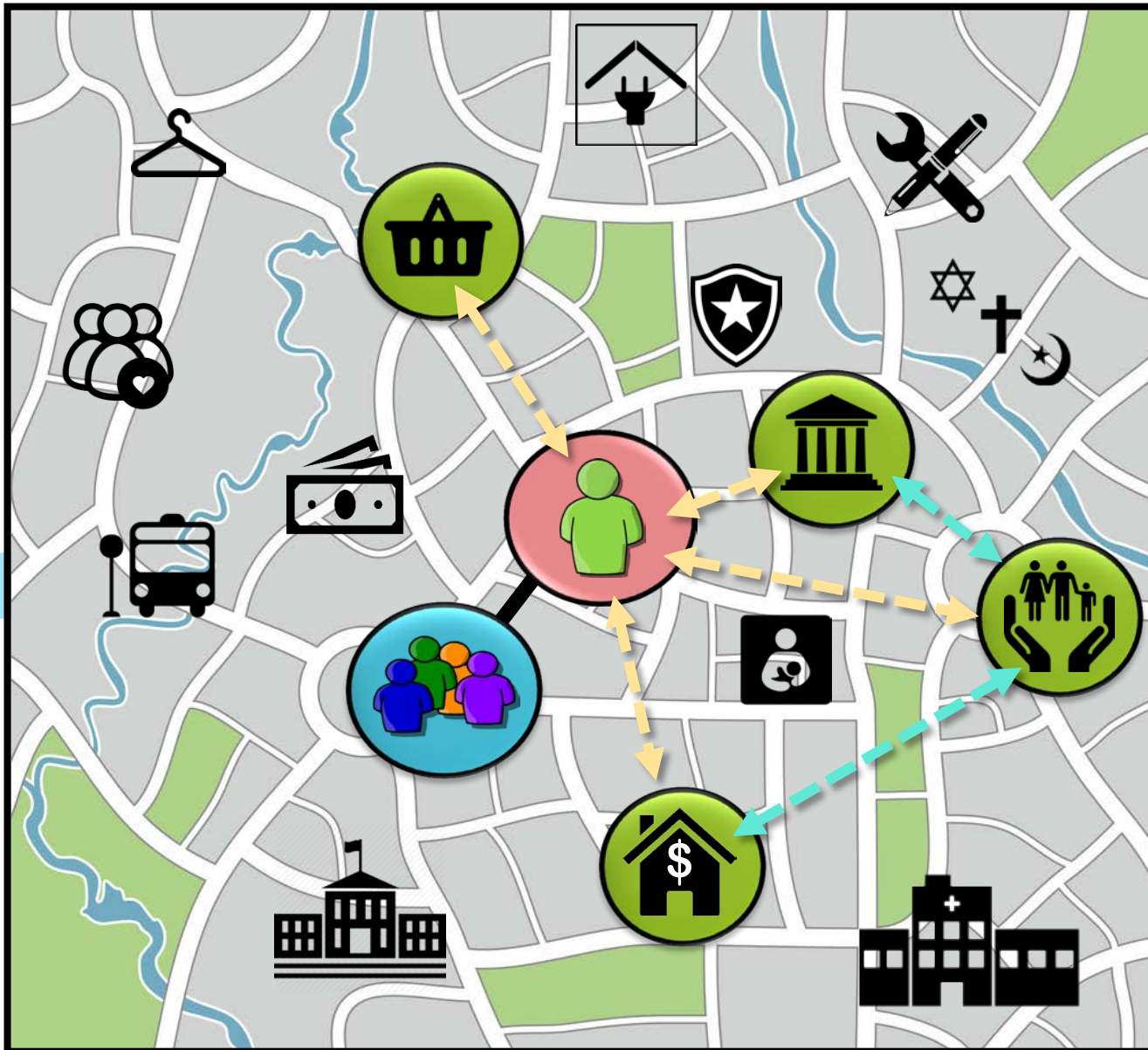
Receive the
right
services at
the right
time

Connection
to
community
and natural
supports

EBP Informed
Case
Management

Increased
stability and
self-
sufficiency

Connected Community Practice



Welcome to Kestrel in Louisville, CO!



A mixed-use inter-generational neighborhood designed within the four guiding principles of affordability, connectivity, sustainability and diversity.



- 200 homes
- 129 1-3 bed townhomes
- 17 buildings , 2 and 3 stories
- Floor plans 623 to 1,310 sq ft.
- A 71-unit, 3-story building for residents with a household member age 55+



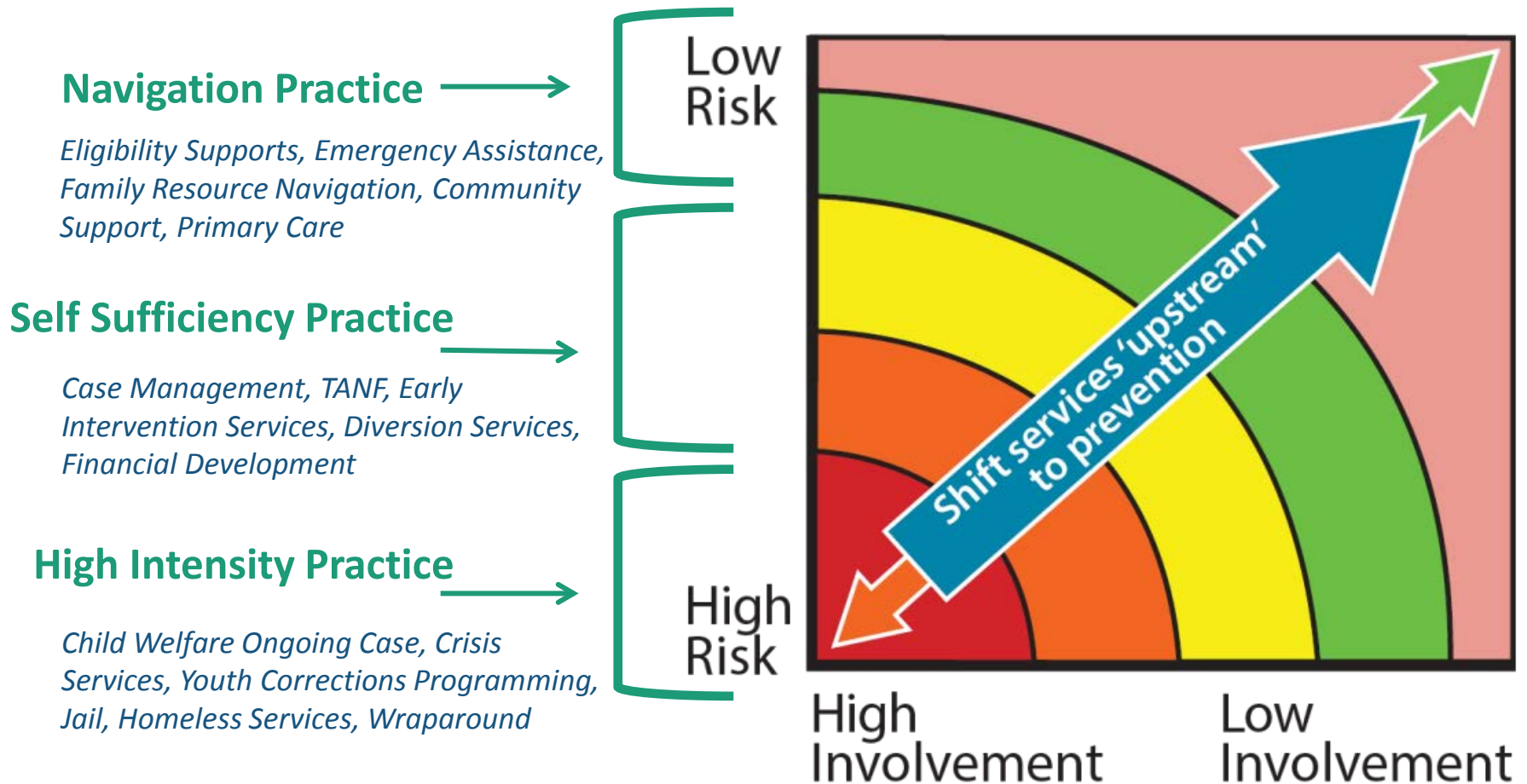
341 total residents
128 are 55-and-over, **86** are 18-and-under
60 are living with a disability





Integrated Services: Practice Continuum

Practice continuum highlighting family based services





Integrated Services: Components of Practice

Navigation

- Entry
- Screen
- Triage and Referral



Screening

Services &
Programs

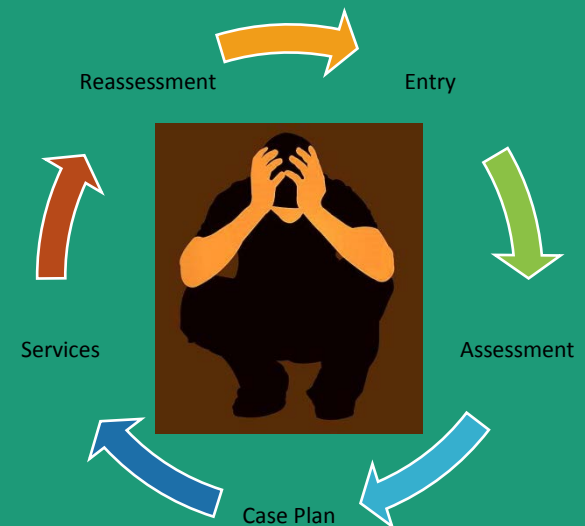
Self-Sufficiency Case Management

- Entry
- Assess
- Case Plan
- Referral
- Reassessment



High Acuity Clinical Case Management

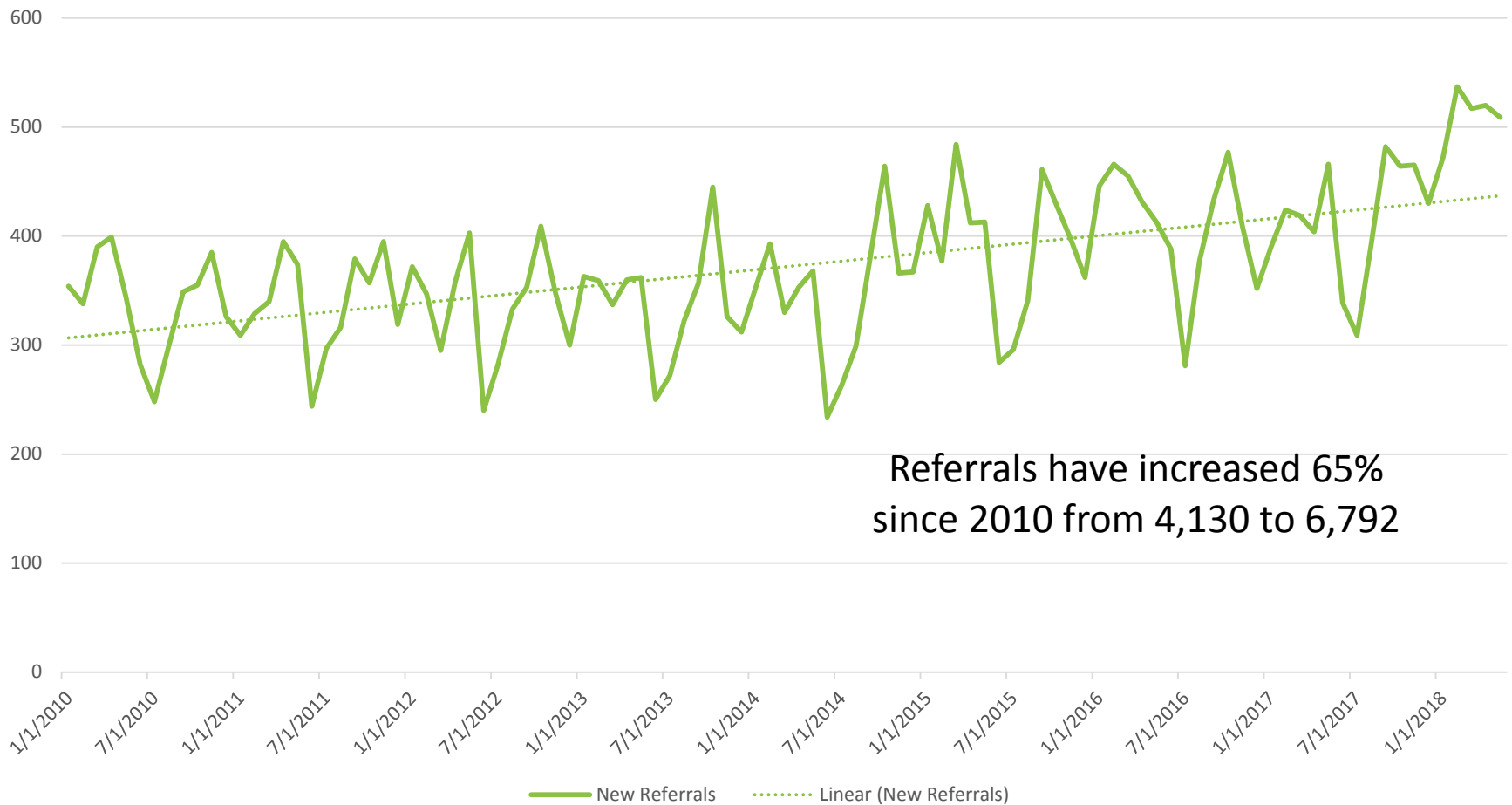
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Child Welfare Referrals

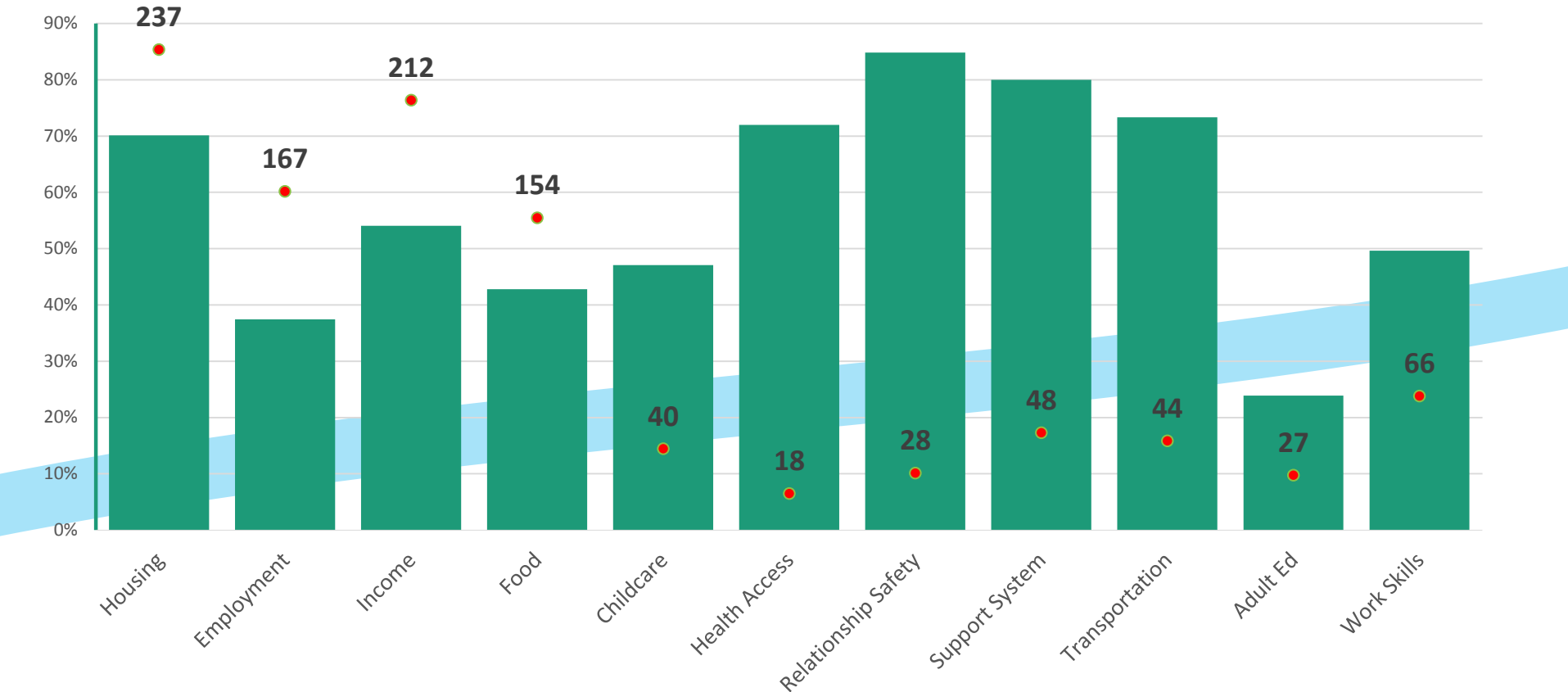
Boulder County New Child Welfare Referrals





Self Sufficiency Progress

Percent and Number of HHs Showing Improvement by Domain

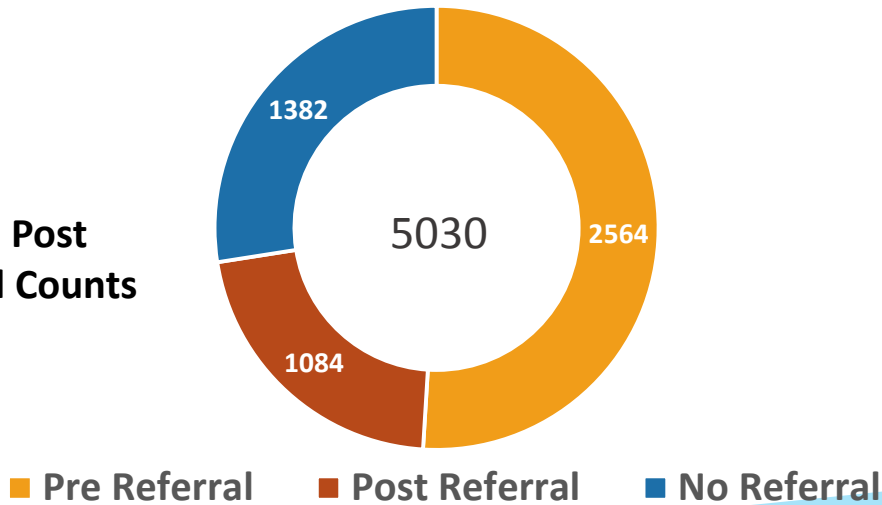


The bar highlights the percentage of households improving above the prevention line for each domain. Scores based on comparison of entry and exit assessments for households completing case management programs where initial scores indicated vulnerability for the given domain.

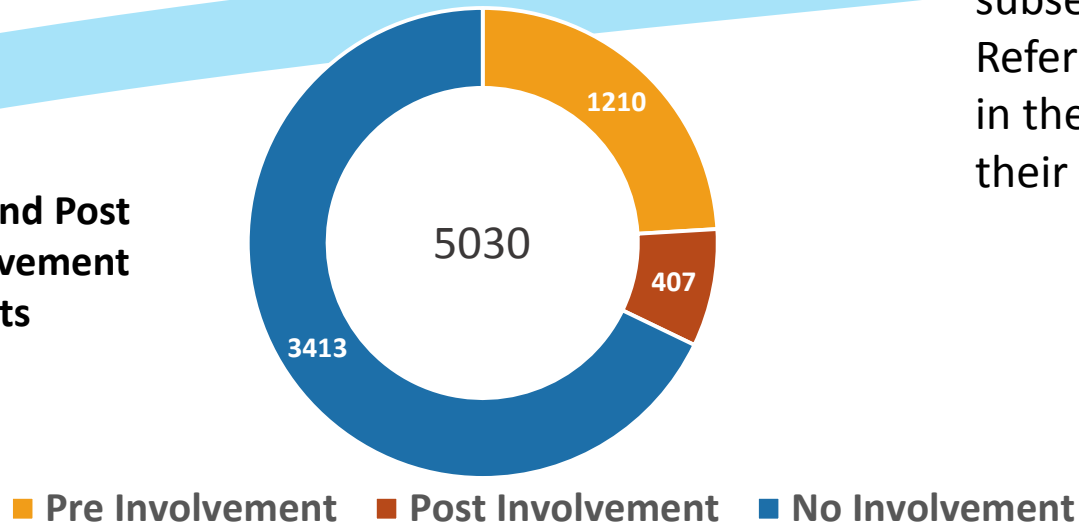


Housing Case Management Outcomes

Pre and Post Referral Counts



Pre and Post Involvement Counts

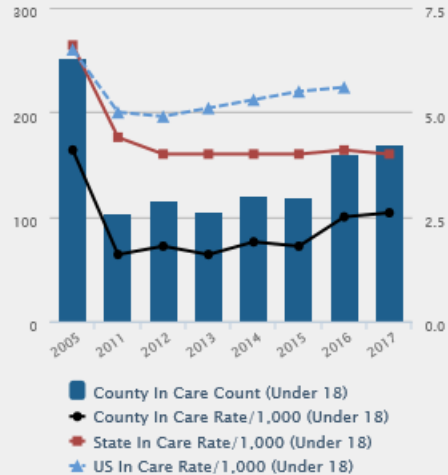


Data looks at individuals exiting housing case management programs and whether they experienced a subsequent Child Welfare Referral or Case Involvement in the 12 months following their exit from the program.

BOULDER COUNTY TRENDS

In Care

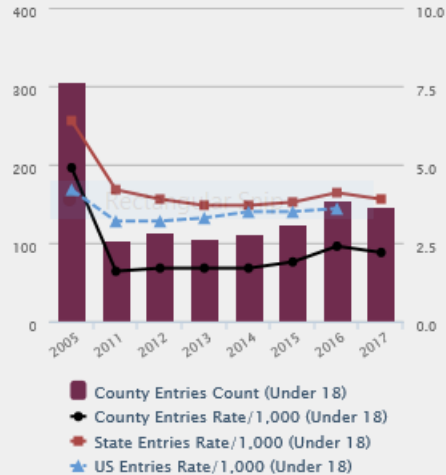
Annual In Care | Under 18 [View Larger](#)



As of	Count	Rate	Change (2005)
9/30/05	252	4.1	-
9/30/06	225	3.7	-10.7%
9/30/07	214	3.4	-15.1%
9/30/08	219	3.5	-13.1%
9/30/09	186	3.1	-26.2%
9/30/10	134	2.1	-46.8%
9/30/11	103	1.6	-59.1%
9/30/12	116	1.8	-54.0%
9/30/13	105	1.6	-58.3%
9/30/14	120	1.9	-52.4%
9/30/15	118	1.8	-53.2%
9/30/16	160	2.5	-36.5%
9/30/17	169	2.6	-32.9%

Entries

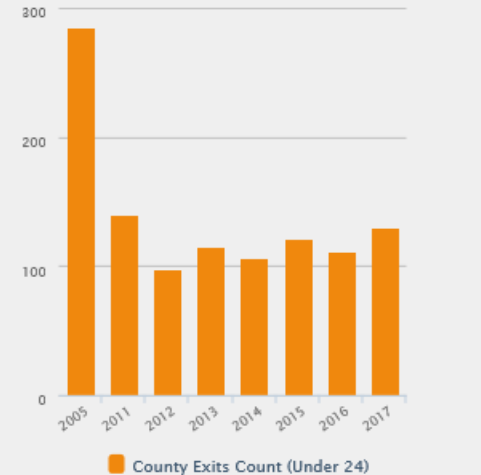
Annual Entries | Under 18 [View Larger](#)



12-mo Ending	Count	Rate	Change (2005)
9/30/05	304	4.9	-
9/30/06	269	4.4	-11.5%
9/30/07	252	4.0	-17.1%
9/30/08	261	4.2	-14.1%
9/30/09	220	3.7	-27.6%
9/30/10	141	2.2	-53.6%
9/30/11	103	1.6	-66.1%
9/30/12	113	1.7	-62.8%
9/30/13	106	1.7	-65.1%
9/30/14	111	1.7	-63.5%
9/30/15	124	1.9	-59.2%
9/30/16	153	2.4	-49.7%
9/30/17	146	2.2	-52.0%

Exits

Annual Exits | Under 24 [View Larger](#)



12-mo Ending	Total Exits	Change (2005)
9/30/05	285	-
9/30/06	274	-3.9%
9/30/07	267	-6.3%
9/30/08	247	-13.3%
9/30/09	235	-17.5%
9/30/10	181	-36.5%
9/30/11	140	-50.9%
9/30/12	97	-66.0%
9/30/13	115	-59.6%
9/30/14	106	-62.8%
9/30/15	121	-57.5%
9/30/16	111	-61.1%
9/30/17	130	-54.4%



Integration In Action

Kimber



NAME: KIMBER WEST AGE: 24

RELATIONSHIP STATUS: ☐ SINGLE ☒ ~~MARRIED~~
☒ ~~SEPARATED~~ ☐ DIVORCED ☐ WIDOWED

HOUSEHOLD COMPOSITION:

NAME	RELATIONSHIP	AGE
<u>CORAL WEST</u>	<u>DAUGHTER</u>	<u>5</u>
<u>KENNEDY WEST</u>	<u>DAUGHTER</u>	<u>2</u>
<u>CARSON WEST</u>	<u>DAUGHTER</u>	<u>5 MO.</u>

EMPLOYMENT: STAY-AT-HOME MOM

MONTHLY INCOME: \$0

OTHER INFORMATION: MY HUSBAND'S AN ALCOHOLIC

CURRENT SUPPORTS RECEIVED:

☐ MEDICAID/CHP+ ☐ CCAP ☐ FCS SERVICES
☐ FOOD ASSISTANCE ☐ TANF ☐ LONG TERM CARE
☐ CHILD SUPPORT

I HAVE BEEN MARRIED FOR 4 YEARS - IT WAS GREAT IN THE BEGINNING, BUT THEN MY HUSBAND STARTED DRINKING. HIS BEHAVIOR CHANGED SIGNIFICANTLY. I FINALLY LEFT AFTER HE TRIED TO CHOKE ME AND SAID HE WISHED I WAS DEAD. I TOOK OUR DAUGHTERS AND FLED TO A SHELTER. I'VE NEVER HAD TO ASK FOR HELP BEFORE. I DON'T EVEN KNOW HOW TO BEGIN REBUILDING MY LIFE.

THINGS I NEED:

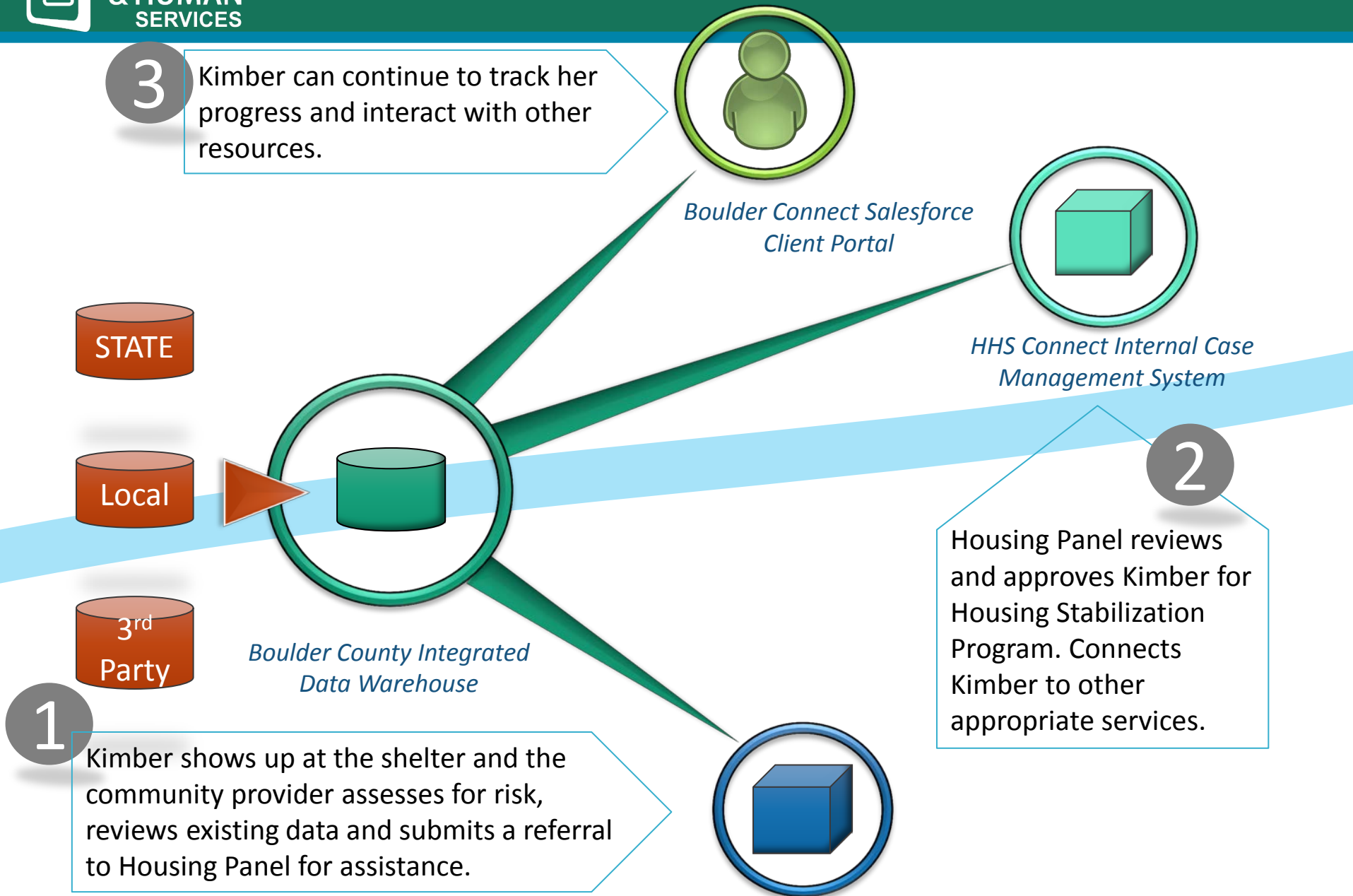
MONEY A JOB
WORK EXPERIENCE
A CAR A HOME
CHILD CARE MY MOM
FRIENDS
SECURITY

THINGS I HAVE:

MY GIRLS!!  HOPE
HIGH SCHOOL DIPLOMA
COMMON SENSE TO KNOW
ENOUGH IS ENOUGH!
SO, WHAT DO I DO NOW? -KIMBER



Integration In Action



Putting Families First and the Promise of Integration



July 2018



1.04m Residents
33% Foreign Born

**55% Racial or Ethnic
Minority**
**41% non-English Spoken at
home**

**36% Growth in the Senior
Population by 2025**
**2015 projection is 196,000
individuals**

**159,010 Children in the
Public School System**
**35% currently receiving
FARMS**

**6 Zip Codes of Extreme
Need —**
**Residents living <200%
Federal Poverty Level**

**99,000 clients served in
FY17**
**Average client accessed 1.8
services/benefits in 1.2
service areas in FY17**

A Staff of Over 1600
More than 130 Programs
Over 600 Provider Contracts

**Caseload Changes for FY16 -
FY17**
TCA – 5% Decrease
SNAP – 8% Decrease
MA – 3% Increase

**Serving 31,000
Uninsured Adults,
Children, and
Pregnant Women**

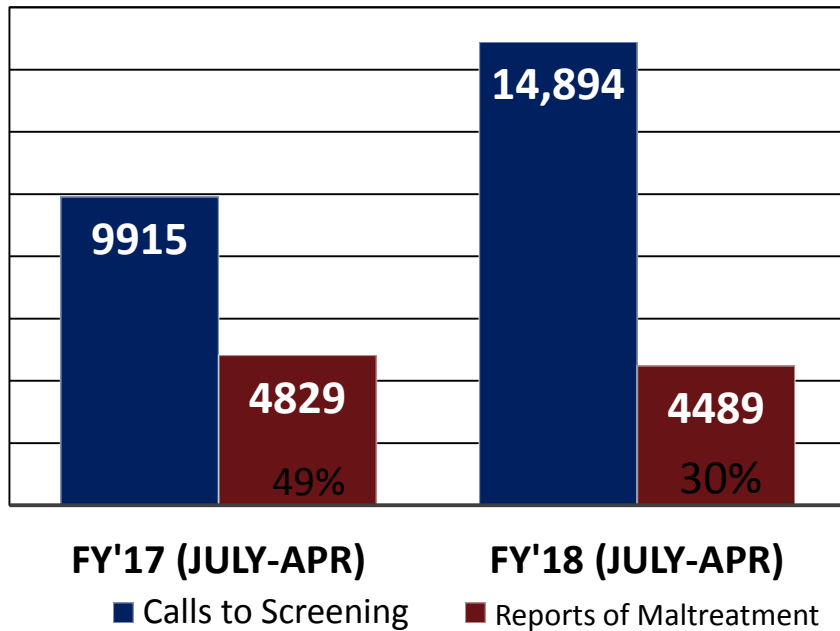


Montgomery County At-a-Glance.

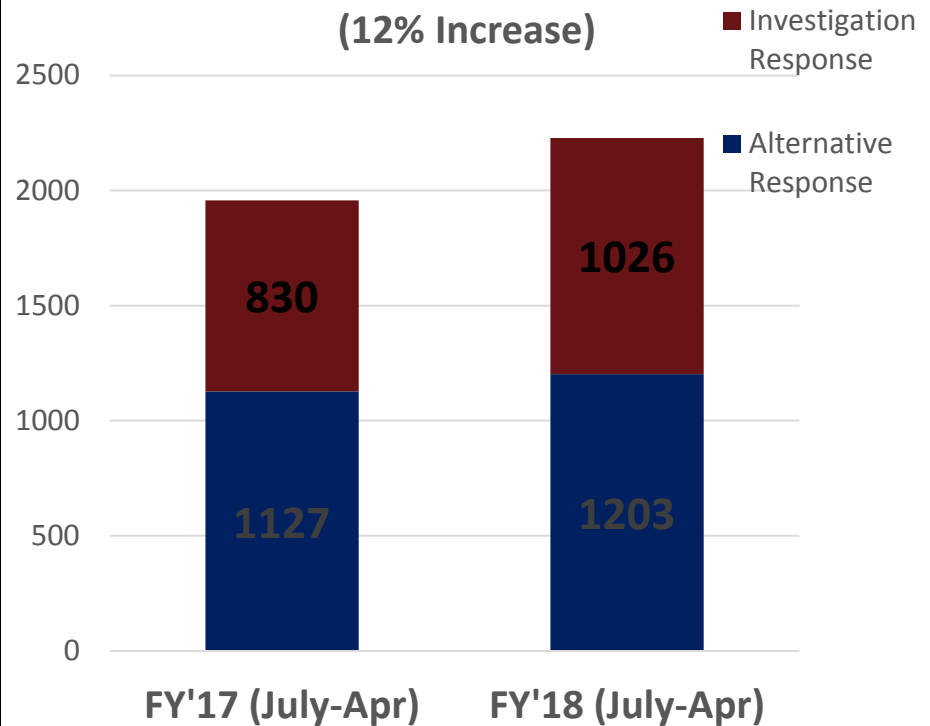


Assessment

Total # of Calls to Screening (33% Increase)

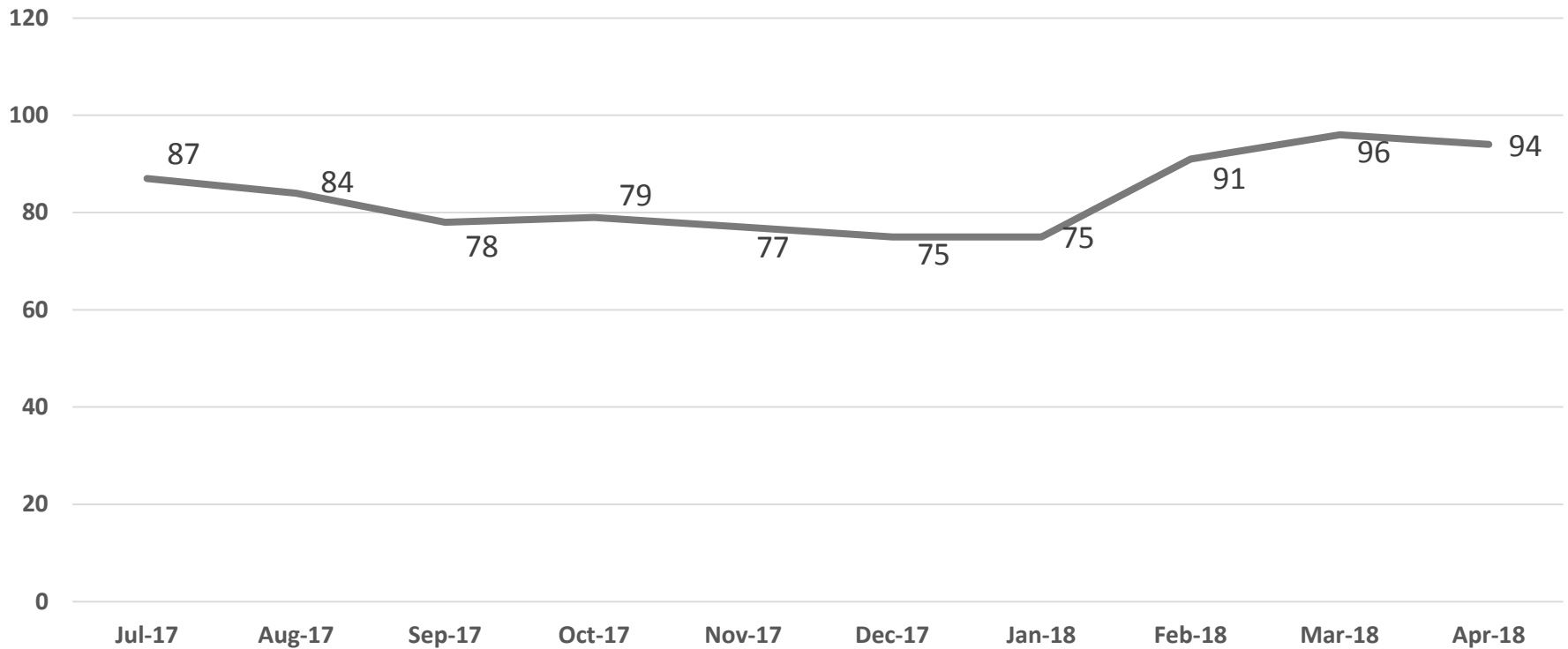


New Investigations (12% Increase)



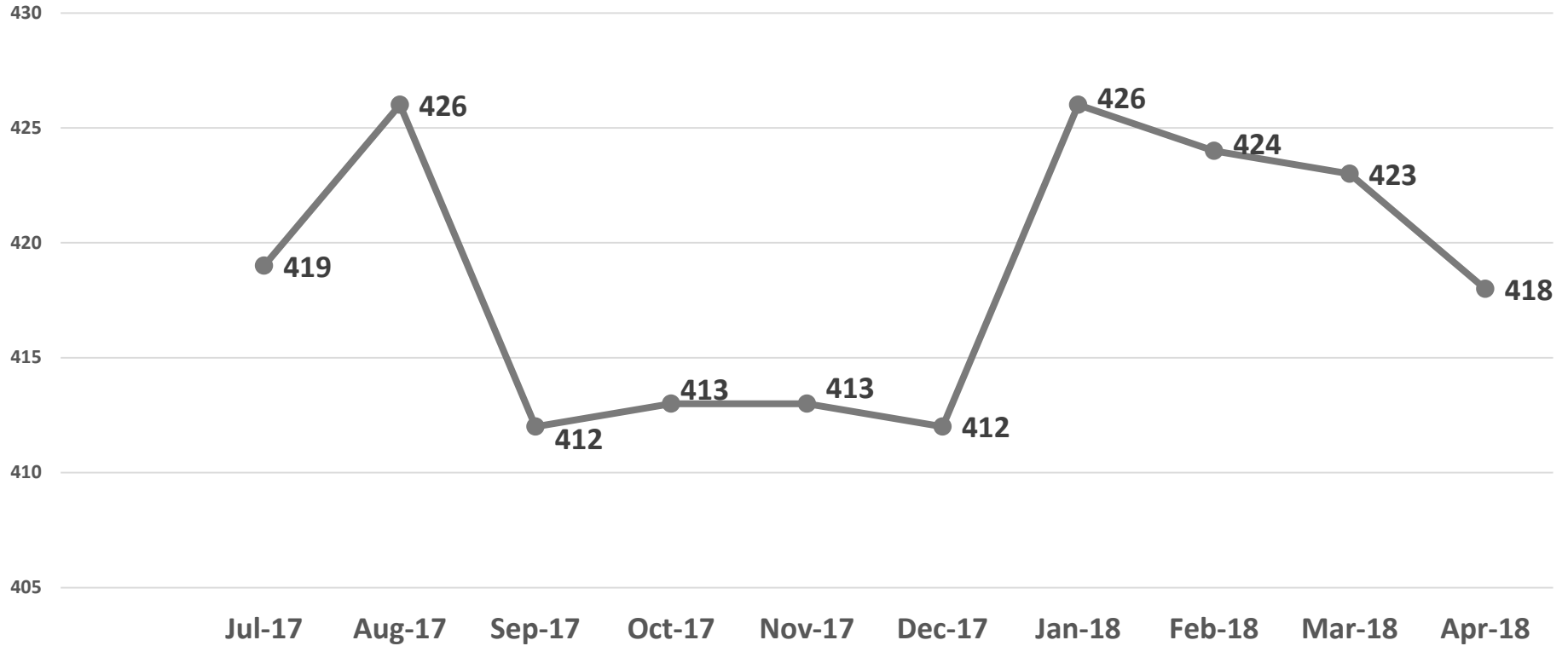
In-Home Services

There have been 215 families served this fiscal year



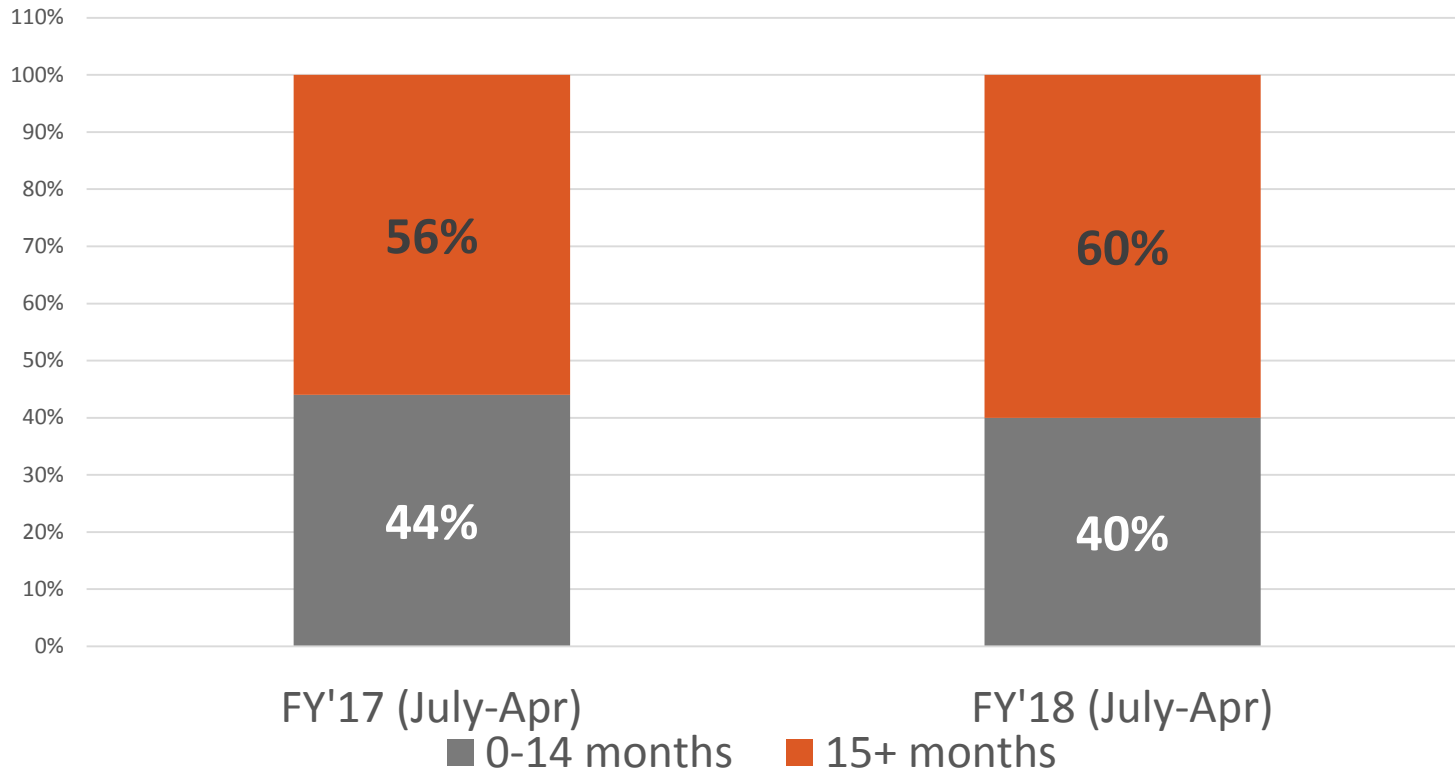
Out-of-Home

5% increase in the monthly average

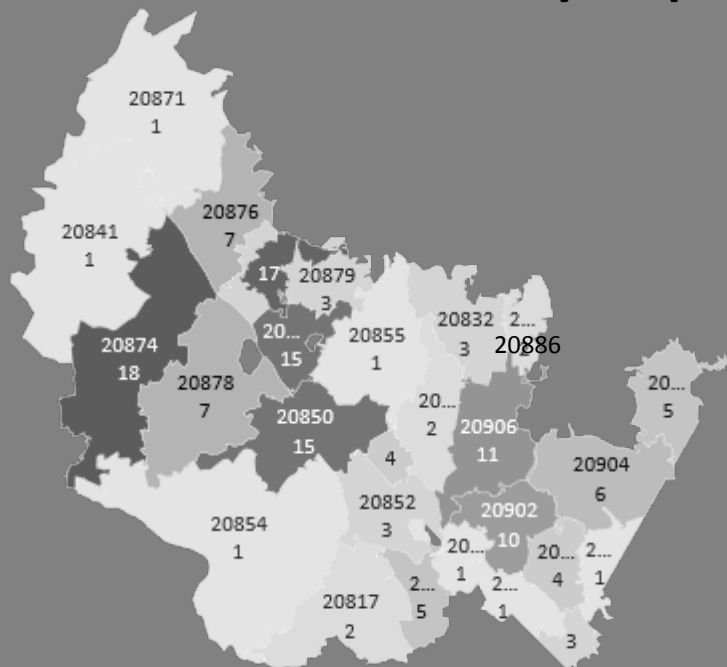


Average Length of Stay

FY'18 average length of stay for all children has been 32 months



New entry zip codes



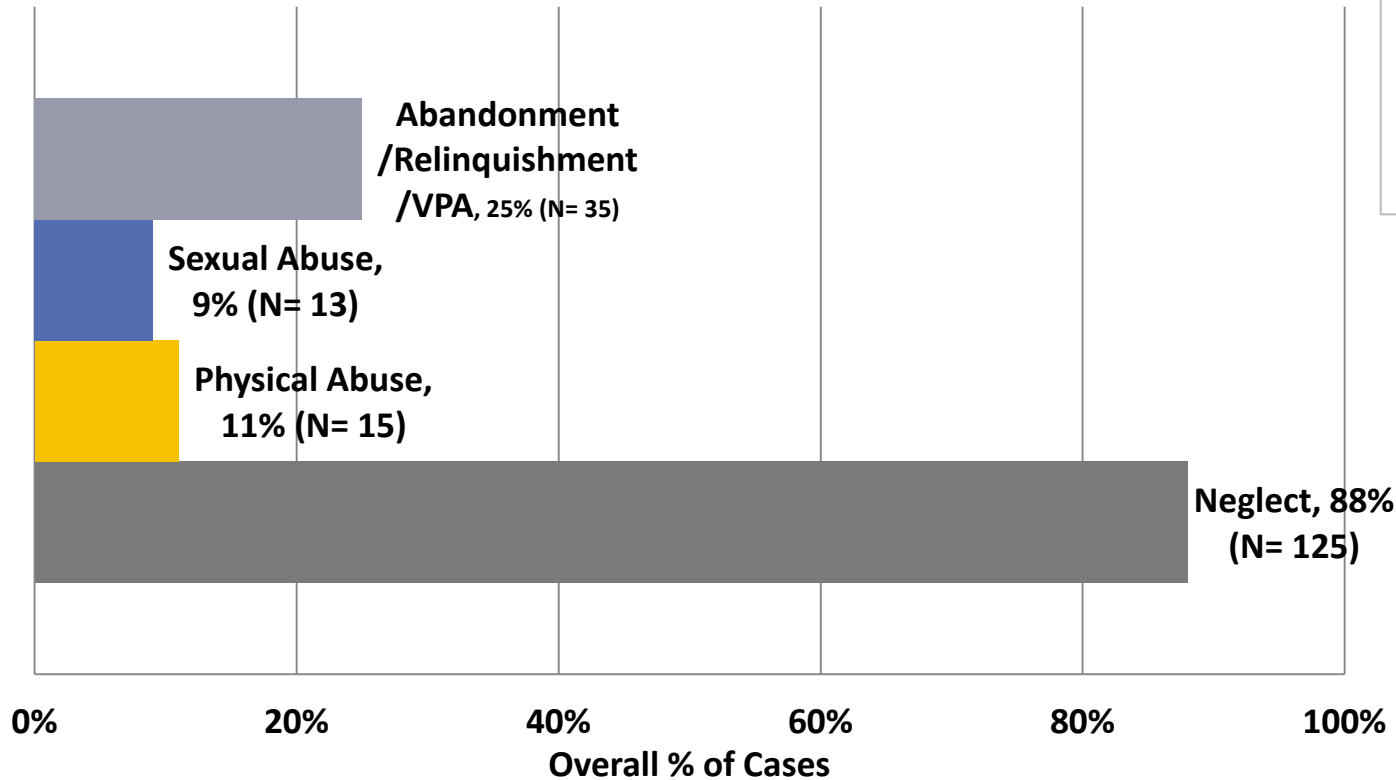
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© Navteq

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Factors at Entry 2017

Type of Maltreatment (N of Shelters = 142)



This graph represents the different types of maltreatment involved in the 142 shelters in 2017. Please note, there are several shelters that have **more than one maltreatment type** associated with them. Percentages **do not** add to 100%. Figures reflect the % of the overall cases that came in. For example, "Neglect" was involved in 88% (N= 125) of the 142 shelters in 2017.



The Structure of HHS and Intersects with MCPS

- HHS Enterprise

- Integrated Enterprise

- Aging and Disabilities
- Behavioral Health and Crisis Services
- Children, Youth and Family Services
- Public Health
- Services to End and Prevent Homelessness
- Office of Community Affairs – Community Action Agency

- MCPS intersects

- Aging and Disabilities –Intergenerational programming and DD kids turning 21 and entering adult system
- BHCS – MCPS kids referred to crisis center – topped 1700 this year – the highest referrals we have seen in my 11+ years. Child and adolescent mental health, in home mental health for kids in care and juvenile substance abuse referrals and diversion
- CYF – Child Welfare, Early Childhood, Community Schools, At Risk Youth and Positive Youth Development, Tutoring and Mentoring, Eligibility
- Public Health – School Health, School Based Health Centers and High School Wellness Centers, Disease surveillance
- SEPH – McKinney Vento protected homeless kids and families
- OCA/CAA – HeadStart and Anti-Poverty





Elements of a Partnership

- Multiple intersects
- Deep and trusting relationships at the leadership level
- A clearly articulated value proposition – have answered the why and the how to get it done
- A willing partner in our respective attorneys
- An executed MOU that is clear and supportive of the needs of all parties
- Don't let perfect be the enemy of the good

Community Schools Initiative – Prevention and a Putting Families First Agenda

- What makes up our Community Schools Initiative:
 - Linkages to Learning – 29 elementary and middle schools
 - School Health – all 208 schools
 - School Based Health Center – 9 elementary and middle schools
 - High School Wellness Centers – 4 high schools
 - Positive Youth Development
 - Hunger Strategies
 - Early Childhood Services
 - After School Time Activities
 - Access to eligibility services and the entire HHS enterprise
 - Integrated Case Practice Framing



How to Leverage the School District Partnership in A Family Centric Approach

- Define who is at risk more broadly – to include TANF/SNAP/Medicaid/FARMS/WIC?
- Custody and non-custody families who are at risk
- Focus on improving safety and child well-being while also placing an emphasis on eliminating generational poverty – these then will include issues related to homelessness, incarceration, mental health and substance abuse issues, unemployment, domestic violence....
- Come with a strengthening families and strong prevention focus
- Leverage all the work states have already done on their IV-E waivers – such as applying a trauma informed approach, partnerships with domestic violence or substance abuse treatment providers, SDM, etc.,.



What Does a Community Schools Initiative Look Like?

- Delivery of services in schools – mental health, primary health care, parent engagement, food market, afterschool time activities, early childhood services, access to benefits – **serve kids who attend that school, their parents, siblings and neighbors**
- Full Service LTL/SBHC only offered where there is 75% or higher EverFARMS rate
- Proposing a light model LTL
- Real time data sharing for custodial and non-custodial children – need a legal framework that keeps us compliant with FERPA, HIPAA, 42CFR, VAWA and CWS statutes – Not an easy task but can be done
- What questions need answering, what data should be shared and why, take time to frame access methodology and staff expectations of how to manage with the data
- Track Prevention and Intervention outcomes data – manage with the data



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HIGH SCHOOL DIPLOMA
COMMON SENSE TO KNOW
ENOUGH IS ENOUGH!

What would Happen to Kimber in MoCo

If Kimber had a 4 year old in HeadStart and a 6 year old in 1st grade -

- The children were presenting as anxious, hungry and easily distracted in school
- Kimber and the children are referred to LTL and from there the family is assessed and services are initiated including benefits, housing, DV supports, Mental Health, access to healthcare and workforce development supports
- A two generation prevention response





OUR BIG HAIRY AUDACIOUS GOAL –

**NATIONAL CALL TO ACTION TO
END CHILD FATALITIES NATIONWIDE FOR ALL
CHILDREN AGES 0-3**





Early Childhood National Imperative

- Relentless focus on improving health and well-being for every child 0-3 years old
- Focusing on healthy births and family formation
- Support for families with risk factors
- Increased access to quality childcare
 - Investments in local access
 - Prioritizing access for 0-3 year olds
- Early intervention teams focus on 0-5 y.o. referrals
- Coordination of care with community partners
- National partnership between HHS and PH
- Building Universal Home Visitation Program with universal screening and risk mitigation





Ecosystem Discussion in the Context of Strengthening Families

- Using this family as a case study - build a solution driven response to leverage Health/Housing and Human Services

(The goal is to push our efforts upstream to support primary prevention and community-based solutions)

