



### **Brevard Family Partnership**

Protecting Children, Strengthening Families, Changing Lives.



CREDIBILITY • INTEGRITY • ACHIEVEMENT

# CBC of Brevard History (DBA) Brevard Family Partnership

#### Began as a Partnership Between

- Brevard County Board of County Commissioners
- Children's Home Society of Florida
- Devereux Florida





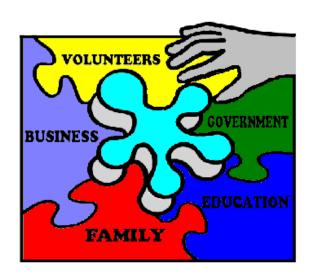




# CBC of Brevard History (DBA) Brevard Family Partnership

#### **Governed Locally**

- Volunteer Board of Directors
- Leadership Roundtable Alliance
- Together in Partnership



### Together in Partnership Priorities for Brevard Family Partnership SOC

- Implement an aggressive, front-end prevention and diversion program.
- Establish a single case-management model.
- Utilize Family Team Conferencing.
- Create an emergency response system.
- Become nationally accredited.
- Maintain caseloads below a ratio of 1:20.
- Ensure Brevard's children remain in Brevard.



### **BFP Leadership**

#### **CEO**

- Stable leadership founding CEO
- 25+ years of experience in human services
- Systems of Care and expert in system reform
- Published author
- IV-E Waiver Guide and trainer
- National technical assistance and training to nonprofit agencies, county, state and federal government

**Brevard Family** 

### 4.2.12.1 Approach and Resources

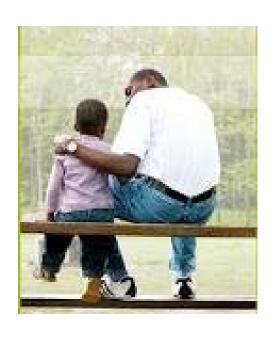
Present your organization's approach and philosophy including mission statement, core values, and vision. Describe how your organization will leverage existing community resources and add/seek new funding sources in order to develop a robust service-delivery system.



# BFP Mission Our Purpose

Brevard Family Partnership's mission is to "protect children, strengthen families and change lives" through the prevention of child abuse and the operation and management of a comprehensive, integrated, community-based system of care for abused, abandoned and neglected children and their families.

**Brevard Family** 



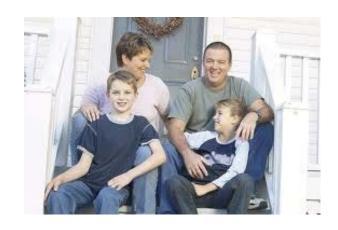
- The safety of children, at all times, will be our foremost concern.
- Permanency issues will be resolved in accordance with a child's sense of time.



Services will be provided by a comprehensive, community-based network of providers who are equipped to manage and deliver all needed services and supports to meet the needs of child abuse and neglect victims, and at-risk children and their families.



Resources will be efficiently and effectively managed to achieve better outcomes for children. Our ultimate goal is child safety and permanency within a twelve-month timeframe.







Financial support will be available from diverse federal, state and local sources, and flexibly managed at the local level to meet child and family needs in a timely and appropriate manner.



The system will be able to collect and use data to accurately forecast what services and supports are needed, at what level of intensity and duration, and at what cost to achieve desired outcomes for each child and family in need.



# BFP Core Values Our Guiding Principles

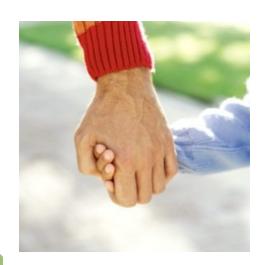
- Strength Based
- Family Centered
- Team Driven
- Integrated
- Individualized
- Community Focused
- Unconditional Care
- Responsive

- Data Driven
- Outcome Oriented
- Least Restrictive
- Culturally Competent
- Inclusive of Natural Resources and Supports
- Efficient/Accountable
- Resourceful



# BFP Core Values Our Guiding Principles

- Child safety is first and foremost
- Child well-being and normalcy is a chief priority
- Family engagement: voice, choice & ownership
- Respect of cultural diversity and faith affiliation
- Strong and sustained partnerships with the local community
- Financial stewardship
- Innovation & Excellence
- Accountability & Transparency



Strong and Focused Commitment

### **Accountability& Transparency**



DCF

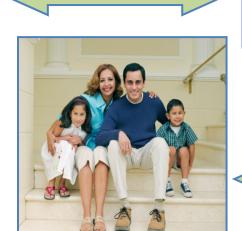
**BFP Board** of Directors

Community
Alliance
LRA

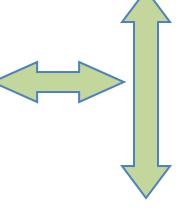


Together in Partnership (TIP)







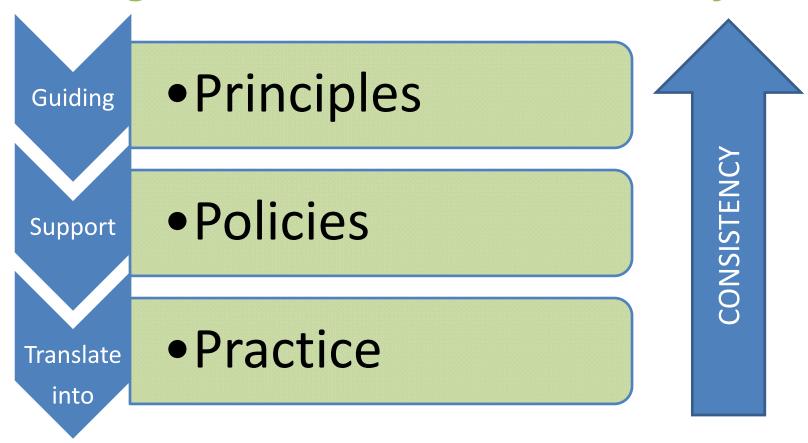




**TIP Community Based Care Subcommittee** 

### **BFP Approach**

Strong Commitment to Child Welfare



# Approach and Philosophy Strong and Focused Commitment to Child Welfare and Safety

- Reduction of children in care-diversion
- Reduced recidivism
- Timely permanency
- Improved well being
- Increased family engagement

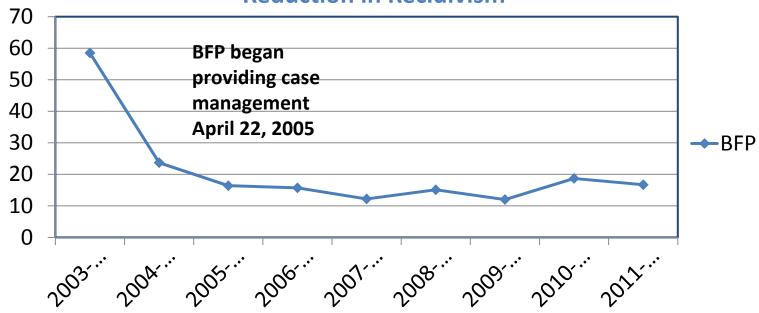
- Reduced caseloads
- Low turnover
- Placement stability
- Increased adoptions
- Increased cost savings and reinvestment



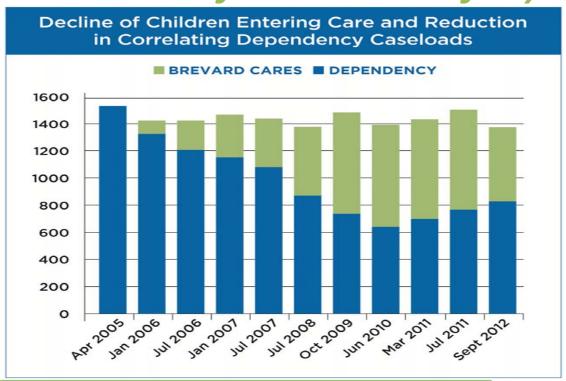
### **Approach and Philosophy**

### Strong and Focused Commitment to Child Welfare and Safety

#### **Reduction in Recidivism**



# Approach and Philosophy Strong and Focused Commitment to Child Welfare and Safety



# Approach and Philosophy Strong and Focused Commitment to Child Welfare and Safety

#### 2003-2004

28% of the children removed were reunified with their families within 12 months of removal

#### 2011

53% of the children removed were reunified with their families within 12 months of removal

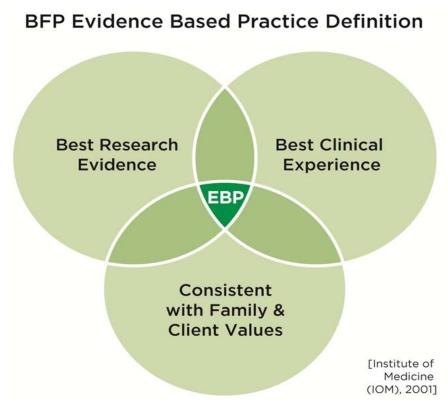
Percentage of Children Reunified





#### Youth and Family Engagement

# Approach and Philosophy Robust Service Delivery System





# Approach and Philosophy Robust Service Delivery System

- Alumni Support and Services
- Anger Management Group
- Assessments and Evaluations
- Basic Needs
- Batterers Intervention
- Behavior Management
- Brief Strategic Family Therapy
- Camp
- Child-Parent Psychotherapy
- Clinical Consultation
- Cognitive Behavioral Therapy
- Crisis Intervention Child Care
- Dialectical Behavior Therapy

- Diversion Services
- Domestic Violence Services
- Early Childhood Services
- Educational Stabilization
- Family Therapy
- Family Support
- Faith Based Services
- Family Preservation Services
- Father specific groups/service/support
- Flex Funding
- Functional Family Therapy

Depicts EBP

### Approach and Philosophy Robust Service Delivery System

- Individual Therapy
- Intensive Care Coordination
- Intensive Family Services
- Mentoring
- Mobile Response
- Outreach to Families
- Parenting Groups
- Parent Support and Advocacy
- Parenting With Love and Limits
- Post Adoption Services
- Prevention and Diversion
- Reactive Attachment Therapy

- Respite
- Social Skills Groups
- Specialized After School Programs
- Substance Abuse Counseling
- Suboxone Treatment
- Therapeutic Recreation
- Tutoring
- Trauma Focused Cognitive Behavioral Therapy
- Trauma Treatment /Recovery
   Services
- Therapeutic/Supervised Visitation

Depicts EBP

### **Approach and Philosophy**

### Robust Service Delivery System Full Placement Continuum

- Rational continuum of care from entry to exit;
- Early assessment of need: CBHA/CAFAS;
- Multiple levels of care;
- Children do not fail up the system to get what they need;
- Incentives for placement stability;
- Resources are used wisely and children placed appropriately; and
- Brevard's children are placed in Brevard.



# Approach and Philosophy Strong Local Partnerships

- Brevard Health Alliance
- Space Coast Foster & Adoptive Families Alliance
- Brevard Dept. of Health: CMS
- Law Enforcement
- Guardian Ad Litem
- Children's Advocacy Center
- Department of Children and Families
- Department of Juvenile Justice

- Grandparents Raising Grandchildren
- Brevard Public Schools
   Guidance Counselor
- Domestic Violence Providers
- United Way
- 18<sup>th</sup> Judicial Circuit
- AARP
- 211 Brevard
- Faith Community



#### **Innovations & Excellence**

- Brevard C.A.R.E.S.
- National Replication
- Evidence Based Practice
   Initiative
- Brevard Interfaith Coalition
- Youth as Staff
- Alumni Program
- Capacity Building
- Diversification
- Family Finders



- Achievement of Strategic
   Plan Goals
- Quality Parenting Initiative
- National Youth Workers
   Certification
- Approaching 10th Anniversary
- National Wraparound Conference
- National Center of Innovation & Excellence



# Leveraging Existing Community Resources





### **Approach and Resources**

### Leveraging Existing Community Resources

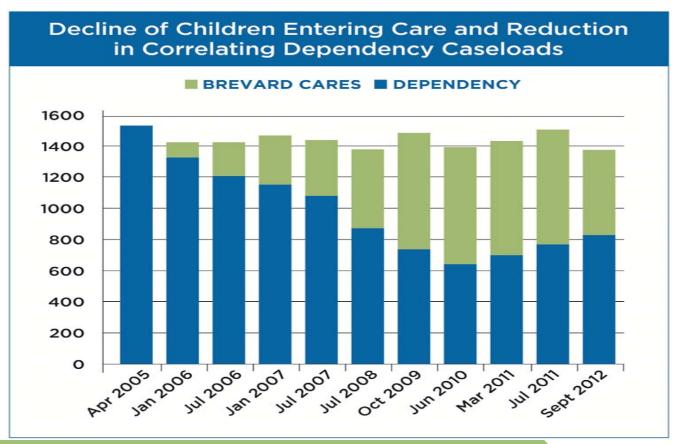
#### Prevention and Diversion

- Safely maintaining children at home and in the community: \$200 per month vs. \$2,500 and less trauma to children.
- Partnering with DJJ to divert delinquent youth from entry into the child welfare system (Validated by AED).
- Brevard C.A.R.E.S. successfully diverting over 13,000 children from entering care.
- Continual reinvestment of funding in front-end and capacity-building efforts to better serve Brevard's children and families.



### **Approach and Resources**

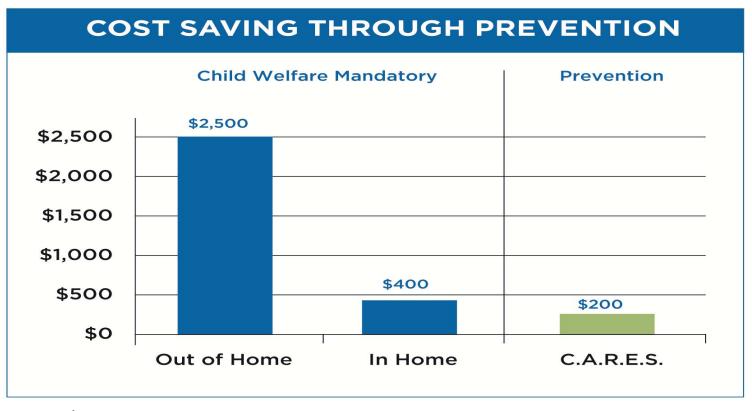
### Leveraging Existing Community Resources



Reaching Children and Families Early and Keeping Them Safe

### **Approach and Resources**

### Leveraging Existing Community Resources



<sup>\*</sup> Total budget divided by total served

Creative, Proactive Solutions to Service Gaps

#### Maximizing use of alternative funding streams

- Use of 100/800 first
- Magellan Partnership
- Medicaid and Third party
- Community agency resources

#### **Contracting Methodologies**

- Performance-based contracting
- Unbundling fixed-price contracts
- Cost reimbursement CMA contracts
- BFP facility and IT management: keep AO down

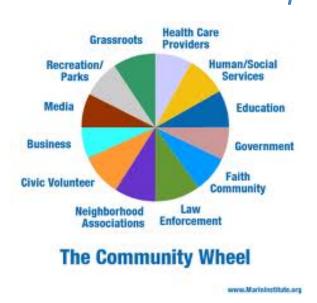


- Cost reimbursement contracting: over \$10m in 8 years
- Diversion efforts: Tens of millions in savings
- Reduction in deep-end and group care placements:
  - 26 children in RTC in 2004 to average of 2 per year
  - 125 kids in group care to an average of 32 children today

**Brevard Family** 

- Unbundling fixed-price contracts: ensuring continuity of care and maximization of purchased services funding
- Consolidation of CPA contracts: \$1.1m in savings over 2 years

Volunteer Recruitment Program & Civic Groups and Business Partnerships



- -MD's, Psychologists, AARP, LICSW's
- -Faith communities and local businesses
- -Gattos Tires
- -MB Rotary
- -Publix
- -Knights of Columbus
- -Walmart
- -Starbucks
- -KSC/NASA

#### Development of Mindshare

 PSAM automated UM system to track service referrals on a real-time basis. This enables BFP to track services authorized verses utilized on a daily, weekly, monthly basis along with use of maximized alternative funding referrals.



Inclusion of natural and community supports in case planning and Family Team Conferencing

- Performance target of 51% of informal supports required at FTC.
- Each paid provider serving a family is required to minimally create and report one community linkage made on behalf of youth and/or family.
- Partnership with Faith Community & grassroots community organizations.



# Innovative and Aggressive Approach Leveraging Existing Community Resources Creative & Proactive Solutions to Service Gaps

#### Sustainability Grants

- Evidence Based Practice
- Faith Based Initiative
- Healthy Start
- Healthy Families
- Independent Living Public/Private
   Partnership with Paxen Learning Corp.



**Brevard Family** 

#### Strong Public Private Partnerships

- Over the past 3 years, BFP and Brevard
   C.A.R.E.S. have obtained more than \$2,315,262
   in overall donations, grants, fundraising events, donated services, and gifts-in-kind.
- The System of Care partners have leveraged an additional **\$778,968** in 2011-12 in alternative funding and donations that have been invested in the local child welfare system.

**Brevard Family** 

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#### **Diversified Revenue**

Donations / Grants \$1,789,819

In-Kind \$ 525,443

Match \$ 796,867

3 Year Total \$3,112,129

2011: SOC Partners \$778,968

Total (Plus 2011) \$3,891,097



Diversified Funding Streams - Brevard Family Partnership and Brevard C.A.R.E.S.								
BFP	FY10	FY11	FY12	TOTAL				
Individual Donations	\$6,250	\$11,814	\$9,684	\$27,748				
Corporate Donations/Grants	\$62,761	\$54,012	\$154,545	\$271,318				
Event Revenue	\$46,879	\$173,694	\$6,476	\$227,049				
Subtotal	\$115,890	\$239,520	\$170,705	\$526,115				
BREVARD C.A.R.E.S.								
Individual Donations	\$2,035	\$3,846	\$3,823	\$9,704				
Corporate Donations	\$2,000	\$O	\$2,000	\$4,000				
Grants	\$0	\$0	\$1,250,000	\$1,250,000				
Subtotal	\$4,035	\$3,846	\$1,255,823	\$1,263,704				
GRAND TOTAL	\$119,925	\$243,366	\$1,426,528	\$1,789,819				

		telement.		
BFP	FY10	FY11	FY12	TOTAL
GIFTS IN KIND:				
Holiday Gift Drive	\$21,430 \$47,327		\$79,685	\$148,442
Other	\$17,464	\$21,520	\$10,966	\$49,950
Subtotal	\$38,894	\$68,847	\$90,651	\$198,392
DONATED SERVICES:				
Media Advertising	\$31,829	\$9,668	\$25,784	\$67,281
Other	\$24,615	\$44,514	\$83,091	\$152,220
Subtotal	\$56,444	\$54,182	\$108,875	\$219,501
TOTALS FOR BFP	\$95,338	\$123,029	\$199,526	\$417,893
BREVARD C.A.R.E.S.				
GIFTS IN KIND:	\$8,706	\$9,427	\$4,341	\$22,474
Subtotal	\$8,706	\$9,427	\$4,341	\$22,474
DONATED SERVICES:				
Media Advertising	\$7,695	\$12,035	\$14,446	\$34,176
Professional Services	\$50	\$600	\$50,250	\$50,900
Subtotal	\$7,745	\$12,635	\$64,696	\$85,076
TOTALS FOR BREVARD C.A.R.E.S.	\$16,451	\$22,062	\$69,037	\$107,550
GRAND TOTAL FOR BFP & BC	\$111,789	\$145,091	\$268,563	\$525,443

Exceeding Match Requirements										
FISCAL	DONATIONS	NATIONS			MATCH					
YEAR	CASH	IN-KIND	TOTAL	REQUIREMENT	EXCEEDED BY:	PCT.				
FY09-10	\$81,016	\$191,677	\$272,693	\$183,390	\$89,303	48.8%				
FY10-11	\$68,202	\$197,870	\$266,072	\$176,480	\$89,592	50.8%				
FY11-12	\$69,212	\$188,890	\$258,102	\$176,480	\$81,622	46.2%				
TOTALS	\$218,430	\$578,437	\$796,867	\$536,350	\$260,517	48.6%				

#### **CBC Core funding 3 Years**

FY 2010-2011: \$18.3m

FY 2011-2012: \$17.5m

FY 2012-2013 : \$17.3m

#### Census of Children in OOHC

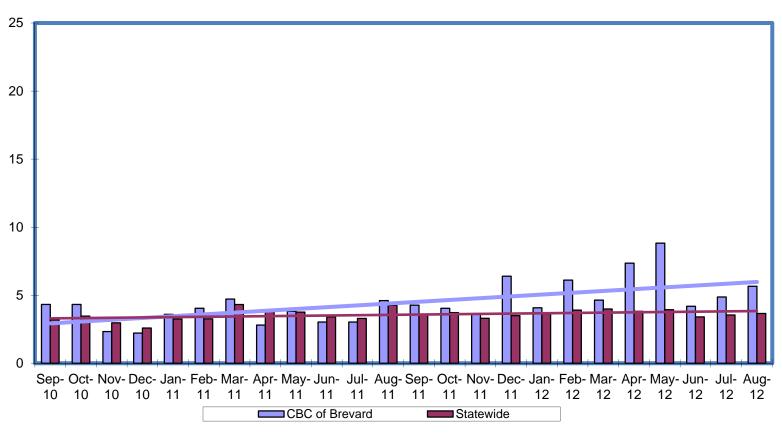
▲ 2012-13: 505 children

2011-12: 432 children

2010-11: 390 children



#### Less Money-More Children





## Identifying & Soliciting New Fund Sources





## Approach and Resources Identifying & Soliciting New Fund Sources

- Board Development
- Brevard C.A.R.E.S.
   Diversification
- BFP Donor Relations
- National Center For Innovation and Excellence
- National Replication Programs



## Innovative and Aggressive Approach Identifying & Soliciting New Fund Sources

- Mindshare
- FastTrack GED
- Reduce subcontractor AO
- Increase social media presence
- Diversify services: apply for state and nonprofit contracts that align with the BFP and C.A.R.E.S. mission and purpose
- Head Start Grant





## Proactive Solutions to Service Gaps





## Approach and Resources BFP's Proactive Solutions to Service Gaps

- Committed to capacity-building and the reinvestment of funding in system enhancements.
- Implemented an EBP capacity-building roadmap as part its strategic capacity-building process.
- Conducts an annual analysis of needed capacity to identify gaps and needed services.
- Conducts monthly capacity-building planning meetings
- Engages community in the planning process.



### Capacity Building 2005-2006

- MRT
- DBT
- Family Residence
- Family Style Group Homes
- Flexible Supports: Unbundling Services



#### Capacity Building 2006-2007

- B.O.A.T.
- Hidden Potentials
- Space Coast Counseling Center
- Center for Life Enhancement
- Supportive Counseling
- Brevard Psychology and Learning Center

- Adult and Child Counseling and Psychiatric Center
- CHANGES
- Open Door International
- Jennings Applied Behavior and Cognitive Center



#### Capacity Building 2007-2008

- Faith Based Initiative
- Royal Priesthood Residential Group Home
- Lighthouse Mentoring Group
- Family Enhancement Services
- Center for Drug-Free Living



#### Capacity Building 2008-2009

- Expansion of Brevard C.A.R.E.S
- Domestic Violence Specialists
- Substance Abuse Specialists



### Capacity Building 2009-2010

- Parenting With Love and Limits
- Project Success
- Academy of Competent Youth Work Certification
- Therapeutic Visitation



Capacity Building 2009-2010

- Hiring of IL Youth Advocates
- Suboxone Treatment Program
- Mindshare Technology



Capacity Building 2010-2011

- Family Finders
- Evidence Based Associates
- Healthy Start Expansion Grant



# Creative and Proactive Solutions to Service Gaps Capacity Building 2011-2012

- Brief Strategic Family Therapy (BSFT)
- Trauma-Focused Cognitive Behavioral Therapy (TF- CBT)
- Child-Parent Psychotherapy (CPP)
- Independent Living Public/Private Partnership with Paxen Learning Corp.
- Agreements to expand dental care options for youth in care

**Brevard Family** 

#### Capacity Building 2012-2013

- Trauma Informed Care
- Positive Youth Development
- FAST Diversion Program
- Tele-health: Psychiatric Consultation



## Innovation & Excellence in Service Delivery

- DBT
- Mindshare UM System
- Flexible Supports & Unbundling Services
- Brevard C.A.R.E.S. Replication
- CAFAS & Continuum of Care
- Center for Community Leadership
- Youth and Family Partners
- Suboxone Treatment
- Co-location

- Evidence Based Practice Initiative
- FastTrack GED
- Paxen Learning Corp.
- National Center For Innovation and Excellence
- Brevard Interfaith Coalition
- Brevard C.A.R.E.S. Alumni
   Program
- Group care staff certification

### Family Preservation Services Brevard C.A.R.E.S.





### 4.2.12.2 Family Preservation Services

Describe how your organization would manage entry into the child welfare system (the front door) and empower family accountability. Include how your organization would integrate prevention and family preservation services to ensure children and families remain in tact when safe to do so and each child and family receive the appropriate level of service to mitigate risk.



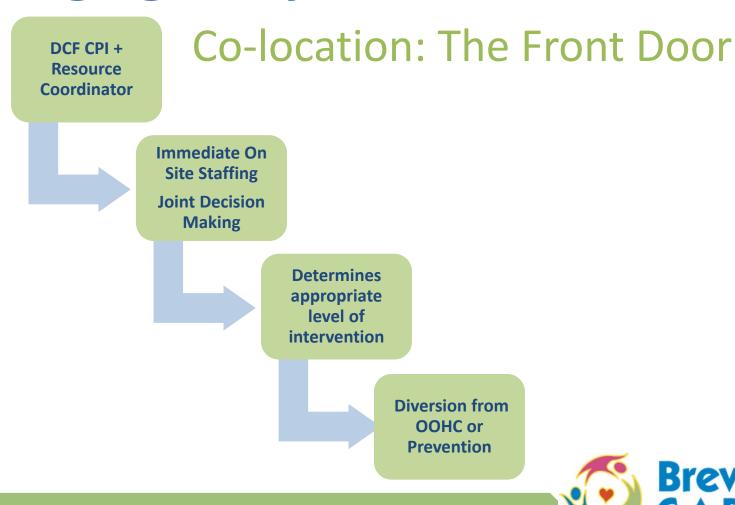
#### **Brevard C.A.R.E.S.**

#### Mission

To prevent child abuse and neglect by supporting and strengthening families so that they can remain together in the community.



### **Managing Entry Into Child Welfare**





## Managing Entry Into Child Welfare Comprehensive Approach

Immediate Crisis Mobile Response Team and F.A.S.T. Diversion

Brevard C.A.R.E.S. Prevention & Diversion Continuum

#### High Risk

Immediate Service Authorization & Safety Planning Initial Family Visit within 24-48 hours Family Team

Conferencing

#### **Moderate Risk**

Assessment
Short-Term
Intensive Case
Management
Care Coordination

**Strength Based** 

Broker Services Based upon Identified Needs

#### Low Risk

PI Flexible Funding (rent, utilities)

Tangible Resources (car seat, portable crib)

Community Linkages

**Child Care** 

**Cribs for Kids** 

**Prevention & Diversion Continuum** 

### **Managing Entry Into Child Welfare**

Utilizing & Integrating Prevention Services to Ensure Children and Families Remain Intact and Safe

Family Engagement and Assessment Establish Risk Level Family Team Conferencing Informal/ Natural Supports Formal Services

Care Coordination Intensive Case Management Family
Sustainability
& Aftercare
Alumni
Program



### **Managing Entry Into Child Welfare**

Utilizing & Integrating Prevention Services to Ensure Children and Families Remain Intact and Safe



**Cumulative Number of Families Safely Diverted** 

## Beat the Clock...21 Days Ungovernable Youth Protocol

Crisis 10 Youth Sheltered 1 month Early Identification of Youth

Over 100 Youth
Diverted in 2011-2012

Develop Care Plan EBP interventions: PLL, FFT, MST

Respite or Not? "21 Day Cooling Off"



**Youth Strength Discovery** 

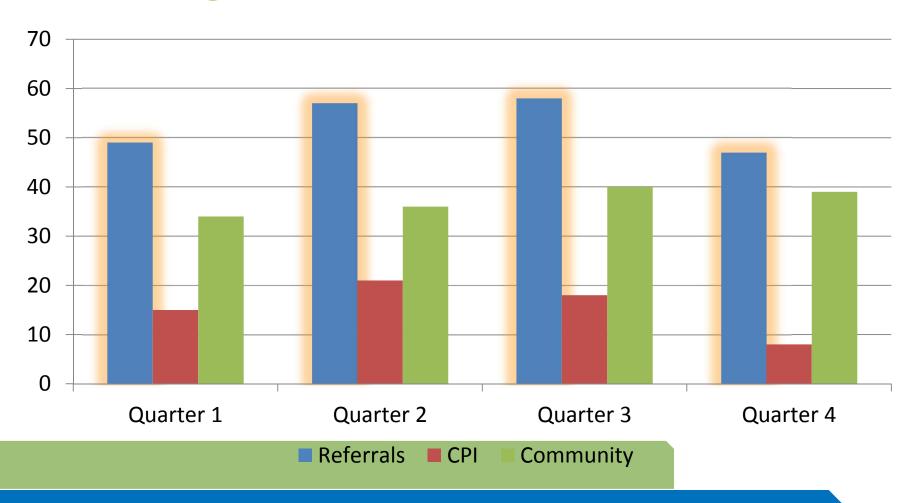
Strength and Cultural Discovery Initial Family Team Conference

Court Appearance with Family



### **Managing Entry Into Child Welfare**

Ungovernable Youth FY: 2012



Ungovernable Youth Safely Diverted

### **Ensuring Children & Families Receive Appropriate Level of Service to Mitigate Risk**



**Brevard** 

### Mature and Comprehensive Approach

#### Levels of Service to Mitigate Risk

#### **Primary**

General messages, commercials, bus wraps, magazine ads and other social media outlets

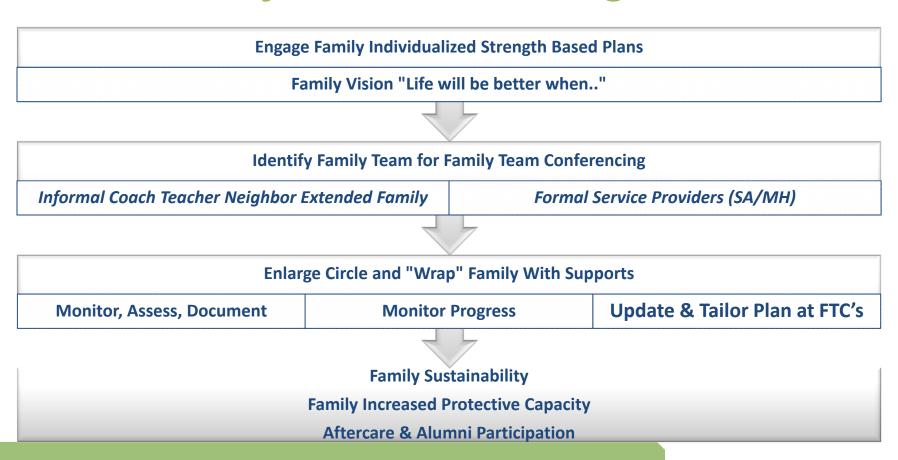
#### **Secondary**

Family is defined as *at risk* due to the presence of one or multiple risk factors, without intervention and support may lead to verified abuse

#### **Tertiary**

Families with verified abuse exiting the dependency system or history of abuse to prevent them from *re entering the system* 

### Mature and Comprehensive Approach Levels of Service to Mitigate Risk



### Approach and Philosophy Comprehensive Services

- Alumni Support and Services
- Anger Management Group
- Assessments and Evaluations
- Basic Needs
- Batterers Intervention
- Behavior Management
- Brief Strategic Family Therapy
- Camp
- Child-Parent Psychotherapy
- Clinical Consultation
- Cognitive Behavioral Therapy
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Depicts EBP

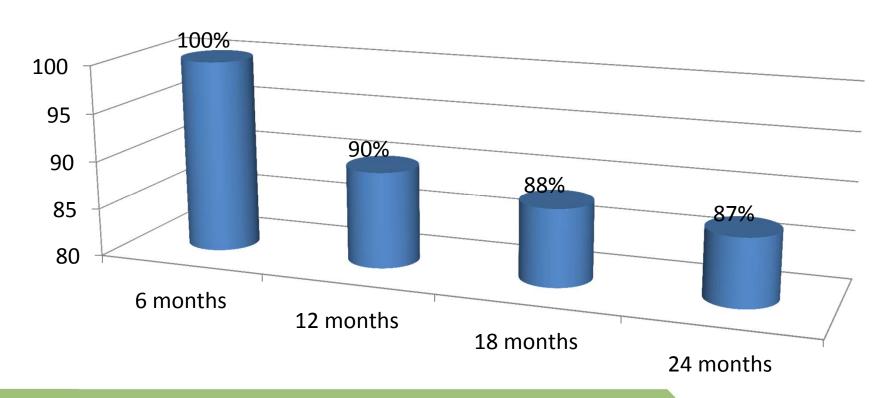
Prevention and Diversion Families have full access to the same service continuum as Dependency Families.

### Approach and Philosophy Comprehensive Services

- Individual Therapy
- Intensive Care Coordination
- Intensive Family Services
- Mentoring
- Mobile Response
- Outreach to Families
- Parenting Groups
- Parent Support and Advocacy
- Parenting With Love and Limits
- Post Adoption Services
- Prevention and Diversion
- Reactive Attachment Therapy

- Respite
- Social Skills Groups
- Specialized After School Programs
- Substance Abuse Counseling
- Suboxone Treatment
- Therapeutic Recreation
- Tutoring
- Trauma Focused Cognitive Behavioral Therapy
- Trauma Treatment /Recovery Services
- Therapeutic/Supervised Visitation

# Utilizing & Integrating Prevention Services to Ensure Children and Families Remain Intact and Safe



### **Ensuring the Importance of Timely Documentation into SACWIS**

- Its about ownership; Accurate and timely documentation into FSFN is paramount to child safety and to ensuring open and transparent communication with DCF Protective Investigators, service providers and Brevard C.A.R.E.S.
- C.A.R.E.S. Voluntarily Participated in the FSFN Family Support pilot.



#### 4.2.12.3 Assessment and Engagement

Describe the methods and protocols that would be used to ensure infant, child, and family assessments and resulting services are trauma informed. Describe how children and parents will be appropriately engaged in all aspects of their case.



- Family engagement and family-centered practice is a core value upon which the BFP system of care is founded.
- All staff are trained in Wraparound Family Team Conferencing and Family Centered Practice, including methods of family engagement.
- The SOC has implemented Youth and Family Partners as staff and alumni leaders to ensure a youth and family-driven system exists and aftercare is available.

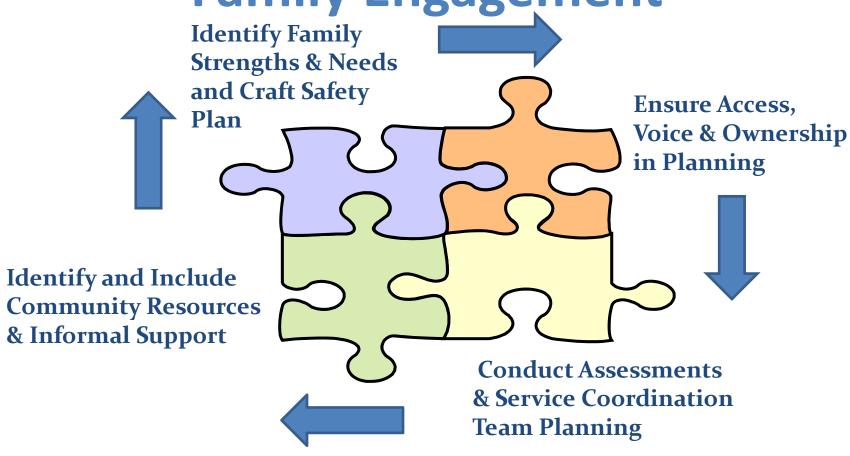


- All partners and practitioners sign an annual attestation, agreeing to adhere to the core values.
- The Wraparound Fidelity Index is used to measure adherence to Family Centered Practice and build continued competency in Wraparound Facilitators.
- Family satisfaction surveys are administered throughout the process to ensure model drift does not occur. Satisfaction remains consistent at 99%.



- Early engagement of family begins with a strength and cultural discovery in an informal setting at the preference of the family.
- Identification and inclusion of informal supports who know the family best are identified.
- The Family vision statement of, "Life will be better when..."
  as outcome and goal is established.
- Use of youth and family partners as peer role models.
- Consumer involvement and voice on all levels of system.







#### Strength & Cultural Discovery

An informal meeting with the youth and/or family to become acquainted and hear their story. This is an opportunity to explore their cultural and traditional norms, values, strengths and needs, build rapport, and identify informal supports in preparation for the family team meeting and development of the plan.



### Child and Adolescent Functional Assessment (CAFAS)

A professionally-rated measurement tool designed to assess the level of functioning in children and adolescents with emotional, behavioral, or substance use symptoms or disorders (Hodges, 1990) covering eight domains of the child's life. Used in the BFP system of care to determine placement level needs and progress through the child's placement.

**Brevard Family** 

#### **FSFN Family Assessment**

This assessment is completed within 15 days of case transfer. Family Assessment begins with the initial contact and continues through the life of the case. While a formal Family Assessment should be done at least once every six months and at all critical junctures, the CM continuously assesses risk to children and families during every contact.



### Comprehensive Behavioral Health Assessment (CBHA)

A comprehensive examination of the behavioral health needs for children in out-of-home care. This psycho-social assessment is intended to, along with other tools, identify service needs and guide case planning and service provision for youth.



#### Brigance Early Childhood Screens (0-35 months)

- The BRIGANCE Early Childhood Screen is a collection of quick and highly accurate assessments and data-gathering tools to use with children.
- Assessments cover a broad sampling of a child's skills and behaviors in:
  - Fine and gross-motor
  - Language Academic/Cognitive
  - Self-help and Social-Emotional



Parents Evaluation of Developmental Status (PEDS)

- PEDS is both an evidence-based surveillance tool and a screening test; it is also a tool for identifying and managing a wide range of developmental, behavioral and family issues.
- PEDS helps professionals identify children at risk for school problems and those with undetected developmental and behavioral disabilities.



Infant Developmental Inventory (IDI)

- The IDI uses a chart based on parent reporting to track developmental skills in five areas - social, self-help, gross motor, fine motor and language
- The infant's development is observed by behaviors and recorded on the chart, where the baby's progress will be scored as "typical," "borderline" or "delayed" in each developmental area.

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Ages and Stages Questionnaire, 3<sup>rd</sup> edition (ASQ-3)

- The ASQ, 3rd Edition, is a screening and tracking program for infants and young children, from 1 month to 5 years of age, who are at risk for developmental delays.
- This screening tool helps to determine whether or not a child may need further diagnostic testing and intervention services.



Ages and Stages Social-Emotional Questionnaires (ASQ-SE)

 The Ages & Stages Questionnaires-Social Emotional (ASQ: SE) were developed to monitor a child's development in the behavioral areas of self-regulation, compliance, communication, adaptive, autonomy, affect and interaction with people.



### Brief Infant Toddler Social-Emotional Assessment (ITSEA)

- Brief, comprehensive screening instrument to evaluate social and emotional behavior of children ages 12 to 36 months.
- **ITSEA** provides an in-depth analysis to guide intervention planning.



- Psychological Assessment
- Substance Abuse
   Assessment
- Neuropsychological Assessment
- Psychiatric Assessment
- Biopsychosocial Evaluation
- Parenting Evaluation

- Educational Assessment
- Trauma Assessment
- Sexual Abuse
   Assessment
- Occupational Therapy Assessment
- Psychosexual Assessment
- Bonding Assessment

#### Sophisticated Approach Leading to Trauma Informed Care

- All system partners have received introductory TIC training.
- BFP is in the process of full TIC implementation, led by national experts in the field, inclusive of:
  - Interagency TIC team;
  - Development of intensive training;
  - Strategies for change management and adherence;
  - Development of policies and integration of TIC practices;
  - Ongoing education strategies; and
  - Marketing and branding campaign.



#### Sophisticated Approach Leading to Trauma Informed Care

The TIC initiative includes an anti-stigma and positive youth development component, inclusive of:

- A former youth consumer spokesperson;
- Youth voice and inclusion: youth advisory committee;

Culture of

Change & Outcomes

Positive

Trauma Informed Care Development

- Promulgation and training on latest research on trauma and adolescent brain development;
- The launch with a system wide summit inclusive of successful young adults; and
- The result: Positive Change!

## The Importance of Timely Documentation into SACWIS (FSFN)

BFP understands the critical importance of documenting all casework activities and contacts in FSFN in a timely manner because it:

- Ensures real-time access to critical case information;
- Improves child safety, permanency and well-being; and
- Ensures accountability.



## The Importance of Timely Documentation into SACWIS (FSFN)

- Any information pertinent to the family's case is documented clearly and concisely in the SACWIS.
  - This documentation takes place within two business days, with a goal of 24-48 hours.
- BFP convenes weekly operations calls to report and monitor progress towards goals and targets.



#### **4.2.12.4** Well Being

Describe how your organization would leverage multiple community partnerships and data sources to ensure the child's well-being. Explain what approaches will be utilized to ensure continuity of these services throughout and beyond the life of the case.



#### Comprehensive Approach to Implement a Medical Home Model

- BFP has a MOU between DCF, BFP and Brevard Health Alliance.
- Initial EPSDTs are scheduled through a single point of contact at BHA. Well child checks are completed six days per week at one of five BHA offices in Brevard County.

#### Comprehensive Approach to Implement a Medical Home Model

- Follow up appointments are scheduled at the initial medical assessment.
- BHA ensures that all children are up to date on their immunizations.
- Referrals are made for assessments and identified, needed medical services through BHA and Health First network.
- BFP has ranked in the top 3 for the past 3 months in the state in dental and medical care of children.

  Brevard Family

#### Comprehensive Approach to Implement a Medical Home Model



- BHA offers medical, dental and vision screening onsite, and takes all Medicaid and Medicaid HMO plans.
- BHA can continue to provide medical services to the children and their families after case closure.



### Comprehensive Approach to Medical Foster Care

#### Medical Well-Being of Children

**Brevard Family** 

- Managed by Children's Medical Services Network (CMS).
- Medical foster homes follow the same DCF licensing requirements as traditional foster placement but require additional medical training and must meet Medicaid requirements to have children from Level I – Level III placed in their homes. This training is provided through CMS.

### Comprehensive Approach to Medical Foster Care

- Children are deemed medically eligible through the Children's Multidisciplinary Assessment Team (CMAT) staffing process. CMAT has up to five working days to review a case but typically assess children with medical needs within one working day of the referral.
- CMS homes are trained to take children with minimal medical needs to severely medicallycomplex children.

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### The Importance of Well-Being Efforts Documented in SACWIS

BFP has developed a process where the initial court order is scanned to administrative support staff who track:

- The completion of the initial EPSDT;
- Data entry into the medical module of FSFN; and
- Overdue appointments for medical dental or immunizations.



#### **4.2.12.5 Education**

Describe how your organization would leverage multiple community partnerships and other resources to ensure that each child is assessed for educational needs, and that corresponding ancillary services are provided to ensure success for children in care.



### Comprehensive Approach to Assessment & Education

Upon entry into the child welfare system, the DCM coordinates with Brevard Public Schools to identify and address any educational needs.

- For children who have specific education needs:
  - Referrals are made for tutoring assessments that are completed by local providers and tutoring is provided when determined necessary.
  - Requests are made for appropriate educational evaluations and an IEP.



## Special Education: Early Intervention Preschool

#### **BFP Works Collaboratively**

- The Early Learning Coalition provides early intervention pre-school program.
- Head Start provides early education programming for low income families with children ages 3-4.

#### **Special Education Programs**

- Space Coast Early Steps
- Easter Seals
- Space Coast Early Intervention Center
- Scott Center for Autism



#### **Advocacy With the School System**

- The CPA and several Brevard Group Homes have educational liaisons on staff who work collaboratively with the schools to ensure children are meeting their educational goals as well as receiving assessments and services, when necessary.
- Educational Advocacy is provided by the Educational Surrogate Parent program and GAL program, as well as through the Brevard Public Schools contract with the Family Learning Program.

**Brevard Family** 

### Advocacy With the School System Foster Care Guidance Counselor



- BFP has funded a full time guidance counselor for children in licensed care aged 13 and up.
- The guidance counselor works with each student and DCM to ensure that the children are progressing towards education completion, identify needed services, and to facilitate transfers between schools.

#### **School Partnerships & Joint Efforts**





#### **School Partnerships & Joint Efforts**

**Brevard Family** 

- "Everyone is a Teacher" event
- Children In Transition Committee full array of services for students and families who are homeless.
- Parenting in Today's World Annual BPS Conference to educate parents about community resources
- In partnership with BPS, BFP sponsored a Parent to be NAMI trained to lead support groups for families impacted by mental health issues.

### Communication with Courts and Parents

- All judicial reviews contain current education information.
- DCMs and parents have access to the Ed-line.
- Education plans are filed with the court.
- Every effort is made to keep children in their local school.



#### FastTrack GED

- BFP has partnered with Education Solutions to provide an accelerated, comprehensive GED program to young adults who have exited foster care without an educational completion.
- Through July 2012, 32 young adults had received their GED through this program.
- All young adults who enroll in FastTrack GED are concurrently enrolled in the Next Gen program at Brevard Workforce.

**Brevard Family** 

#### **Ensuring Academic Success**

- Crosswinds Youth Services is the contracted IL service provider.
- Annually, Crosswinds conducts college tours for high school seniors and young adults who have exited care.
- Along with the Guidance Counselor they assist youth and young adults in enrolling in post secondary institutions and applying for scholarships and grants.

**Brevard Family** 

### Documenting Education Efforts into SACWIS

- A monthly list of children in licensed out-ofhome care is provided to Brevard Public Schools.
- BFP Administrative staff ensure all current education information is entered into the education module.
- From November 2011 through September 2012,
   BFP increased the documented educational achievement and success of young adults by 22%.



#### **Conclusion: Why BFP?**

- BFP: Quality and performance
- BFP: Excellence and achievement of DCF vision
- BFP: Dedicated, competent, stable leadership
- BFP: Strategic, innovative and resourceful
- BFP: Committed to child safety and well-being
- BFP: Comprehensive service array
- BFP: Strong partnerships and collaborative
- BFP: Efficient, lean and leverages funding opportunities
- BFP: Leaders in system transformation
- BFP: Positive outcomes for children and families





#### Thank You!

This Concludes Our Presentation



Protecting Children, Strengthening Families, Changing Lives.