

## **Certificate Program/Breakthrough Series Collaborative (CP/BSC) Change Package Philosophy, Values and Principles**

The work of this Collaborative will be rooted in key foundational principles. These principles express the overarching values that must guide all policies, programs, practices, services and supports for children, youth, and families.

1. The most desirable place for children to grow up is in their own safe, nurturing, and caring families. As such the end goal of devising improved interventions for cross-over youth and their families is to prevent institutionalization of children and to the extent possible while ensuring public safety, keep them with their families and in their communities.
2. The purpose of child serving systems is to understand and meet children's unique needs.
  - ◆ Children need to be treated differently from adults in systems of care, and appropriate treatment strategies should be defined within a child development framework.
  - ◆ There is a belief amongst juvenile justice and child welfare professionals, the courts and their community and tribal partners that it is possible to change the dominant trajectory of maltreated or neglected children into delinquency.
  - ◆ Children and families have strengths and we need to learn about these strengths in order to effectively meet their needs
  - ◆ The "victim/predator" dichotomy is not a helpful construct in serving children
  - ◆ Every child has potential and is served individually based on their history and experiences
3. An integrated and collaborative approach between juvenile justice, child welfare the courts and their other system partners is the best way to meet the needs of cross-over children and their families.
4. The intentional and meaningful involvement of families and children in policy and practice development, service planning and delivery, evaluation and oversight is foundational to system success.
5. Delivery of services to children and their families honors and respects the beliefs, values, and family practices of different cultural, racial, religious, and ethnic groups.
  - ◆ We actively seek to eliminate disproportionality and disparities as it relates to the need for access to utilization of and/or quality of services received by children of color.
6. Prevention of further delinquency, maltreatment, or neglect is a priority, for children already known to systems, their siblings and other family members.
7. The benefits of sharing power and "turf," information, and resources across agencies far outweigh the difficulties inherent in such integration and promote good stewardship.
8. All children receive equal protections and access to services regardless of jurisdiction
  - ◆ Partnerships with the diverse communities and tribes in which children and families live are essential to increase safety, reduce potential risk of maltreatment to children and decrease their entry into the juvenile justice system.

9. The knowledge base, skill and capacity of individuals doing the work and children and families served by the system are vital to effective service delivery.
10. Service development and utilization is driven by a common set of outcomes, and informed by data and evidence
  - ♦ Sound research and evidence results in effective investment of resources that are culturally and gender responsive;
  - ♦ We learn from the resiliency factors of children who do not cross over in an effort to inform our work and learn from children who do cross over.

## **Components**

The ten key principles/values can be translated into practice through six component areas. Work done in each component should reflect the core values defined by the key principles. These six components reflect “best practice” for an integrated system of care between juvenile justice, child welfare and community partners. We expect that participating jurisdictions may have several of these components in place. In order to develop an effective and integrated system of assessment, case management, and treatment plans for dual-system involved youth, teams will need to test strategies and enhance practices in every component area.

### **Component 1: Measurable Systems of Agency/Interagency, Court and Community Accountability**

- A. A shared set of beliefs exists about the joint responsibility in serving cross-over youth that has been developed through honest and forthright conversations between system leaders, staff and community partners including education, behavioral health and substance abuse.
- B. A Memoranda of Agreement exists between child welfare and juvenile justice systems, the courts and their community partners that describes common goals, understanding of cross-over youth and that clearly outlines roles and responsibilities of each entity for sharing of information and coordination of services.
- C. Community partners and tribes are invited, included, and given meaningful roles in the design, selection, and evaluation of programs, policies, and services related to building an integrated system of service delivery for cross-over youth and their families.
- D. Judges are aware of cross-over cases and calendar these cases appropriately, including establishing one family-one judge, dedicated dockets, and encouraging continuity of counsel.
- E. Interagency planning and coordination meetings occur that ensure ongoing communication and coordination between the child welfare agency, the juvenile justice system, and the courts thereby facilitating working together in support of cross-over youth and their families.
- F. Cross-training is provided to police, probation officers, judges, child welfare workers, attorneys, institutional corrections staff, community partners and tribes to increase familiarity with one another’s policies and to develop relationships that support shared responsibility and services for cross-over youth.
  - Common outcome measures have been designed that assess success across-systems i.e. academic success, medical and behavioral health care continuity, development of life skills.
  - Tools and processes are used to evaluate cross-system policies through a racial equity lens so that the policies result in agency staff working with families in a culturally sensitive, unbiased, and equitable manner.

## **Component 2: Active Engagement of Family and Youth in Planning and Decision Making**

- A. Children and their families are actively and authentically engaged in the design and evaluation of the integrated system of services and supports.
- B. Families, children and their identified informal/natural supports are actively engaged in the assessment, case planning, case plan review, and decision making process and the evaluation of the efficacy of services delivered.
- C. Children and their families are informed of their rights and intentionally prepared to participate in assessment and case planning, court proceedings, and other decision making processes.
- D. Clear information about agency and family roles and responsibilities is shared openly and agreed upon during the cross-system team meeting processes.
- E. Explicit mechanisms are in place to assess children and families' satisfaction in the service delivery process and learnings are disseminated throughout the jurisdiction.

## **Component 3: Integrated System of Information Compilation and Sharing**

- A. An integrated information system exists that has the following capacities:
  - Provides for a Master ID# to identify children involved in multiple systems
  - Allows for access at multiple levels (administrators, supervisors and workers)
  - Allows for the capturing and analyzing of outcome data in an organized manner.
- B. Processes to actively “mine data” are in place that assists staff in understanding the populations that cross -systems including the disproportionate representation of children and families of color.
- C. Staff and stakeholders receive training in reading and interpreting these data, and in using data in their day to day work. Open forums are held to discuss the meaning of these data and what they say about the cross-system integrated performance.
- D. We cross train staff, professionals, volunteers, system partners (formal and informal) in understanding the data and evidence around what causes children to cross over into another system
- E. A Resource Guide for Information Sharing is available to staff that provides instruction for legal, policy, and practice matters regarding the exchange of case-related information necessary for joint case assessment, planning, and integrated service delivery. This guide dispels common myths that restrict the flow of important information while at the same time safeguards issues of privacy .
- F. Information sharing tools are developed that lead to effective joint case planning and case management, i.e., single release of information for multiple systems, information sharing technology across systems, inventory of documents needed at each decision making point.

## **Component 4: Shared Approach to Prevention, Identification, Assessment and Case Plan Development Within and Across Systems**

- A. A Practice Model exists that includes the following:
  - early identification of cross-over youth,
  - a unified assessment,
  - coordinated case planning and case plan review.

- B. Mechanisms are in place for the identification, ongoing assessment and case planning processes for cross-over youth including multi disciplinary teams, specialized case management, supervision units and use of common assessment and case planning tools.
- C. Assessment processes include assessment of educational, developmental, medical and behavioral health needs of youth.
- D. Assessment tools are evaluated through a racial equity lens so that the tools and accompanying processes result in workers assessing families in a culturally sensitive, unbiased, and equitable manner.
- E. The assessment process integrates knowledge about race, culture and ethnicity as part of understanding family dynamics and family decision making processes, and applies this knowledge to case plan development.
- F. Specific strategies are in place to prevent penetration of children deeper into the child welfare, mental health and juvenile justice systems, including identification of and support for younger siblings of high-risk youth.

### **Component 5: Shared Case Management, Decision Making and Community Service Utilization**

- A. Sound clinical practices result in optimal child and community safety. These practices are child-focused, strengths-based, family-centered, and community-connected. Such practices are rooted in evidence-informed, promising, and emerging practices as well as individual and institutional practice wisdom.
- B. Case decisions are transparent, open, and grounded in the comprehensive, specialized, and integrated tools that are used to gather and assess information.
- C. Specific interventions are utilized to reduce detention bias for children in foster care (i.e., formal delinquency notification protocols to increase appearance rate of child welfare representatives at detention hearings, joint pre-hearing conferences, joint court orders and courts reports, probation/child welfare liaisons, continuity of counsel, ensuring translators available for non-English speaking foster families or kin, maintaining foster care bed while children are in detention).
- D. Supervisory and line staff are well versed in their roles and legally mandated responsibilities regarding working in partnership with other agencies and with community partners.
- E. Services are customized to meet the needs of the individual child/youth, and family in response to assessment and continuous reassessment, i.e., gender specific programs, services that support sexual orientation, treatment for mental health and substance abuse, educational assessments, transitional services, mentoring, etc.
- F. Services are provided in ways that engage families and their natural, self-identified supports in the least intrusive ways possible.
- G. Staff recognizes the individual, systemic, and societal factors related to case decisions that result in disproportionality and disparate outcomes for children of color and mitigate those factors by employing culturally responsive practices and approaches.
- H. When necessary, access to placements options exists for cross-over youth, i.e., kinship care, foster family care, group care, and structured therapeutic living arrangements so that youth are not placed in detention or jail when not indicated.
- I. Case workers reinforce kin, foster families or other alternate caregiver's understanding of and commitment to serving as a "release resource" for youth leaving detention and returning to foster care,
- J. Child welfare system keeps cases open when youth are arrested and adjudicated either under juvenile or criminal court.

## **Component 6: Effective Use of Blended Resources**

- A. Interagency agreements exist that guide the pooling of funds to serve cross-over youth and their families.
- B. The identification of services, service providers and funding sources that cross both systems is used in cross-system planning.
- C. Families, youth, and staff are engaged in identifying criteria necessary in quality services.
- D. Reinvestment strategies result in increased resources dedicated to prevention or early intervention for children entering the child welfare and juvenile justice systems.
- E. Services and supports for cross-over youth are co-located to enhance ease of access.
- F. Decategorizing: Removing narrow eligibility requirements or other rules that restrict how groups can spend funding.