

Kindergarten Readiness CAN

Eighth Meeting

May 23, 2017



Welcome/ Overview



Vision

Every Generation Achieves Success – Cradle to Career

Mission

*To Align our Community Resources so
Everyone is Empowered to Achieve Success*

FamiliesFirst Network

Shawn Salamida

- Child Protection / Foster Care / Adoption
- Circuit 1 (Escambia, Santa Rosa, Okaloosa, Walton)
- 350 employees, \$43 million budget (\$35.8 core)
- 15 years in ESC
- DCF (state and federal child welfare funds)
- Key Contact: Shawn Salamida,
shawn.salamida@bhcpns.org

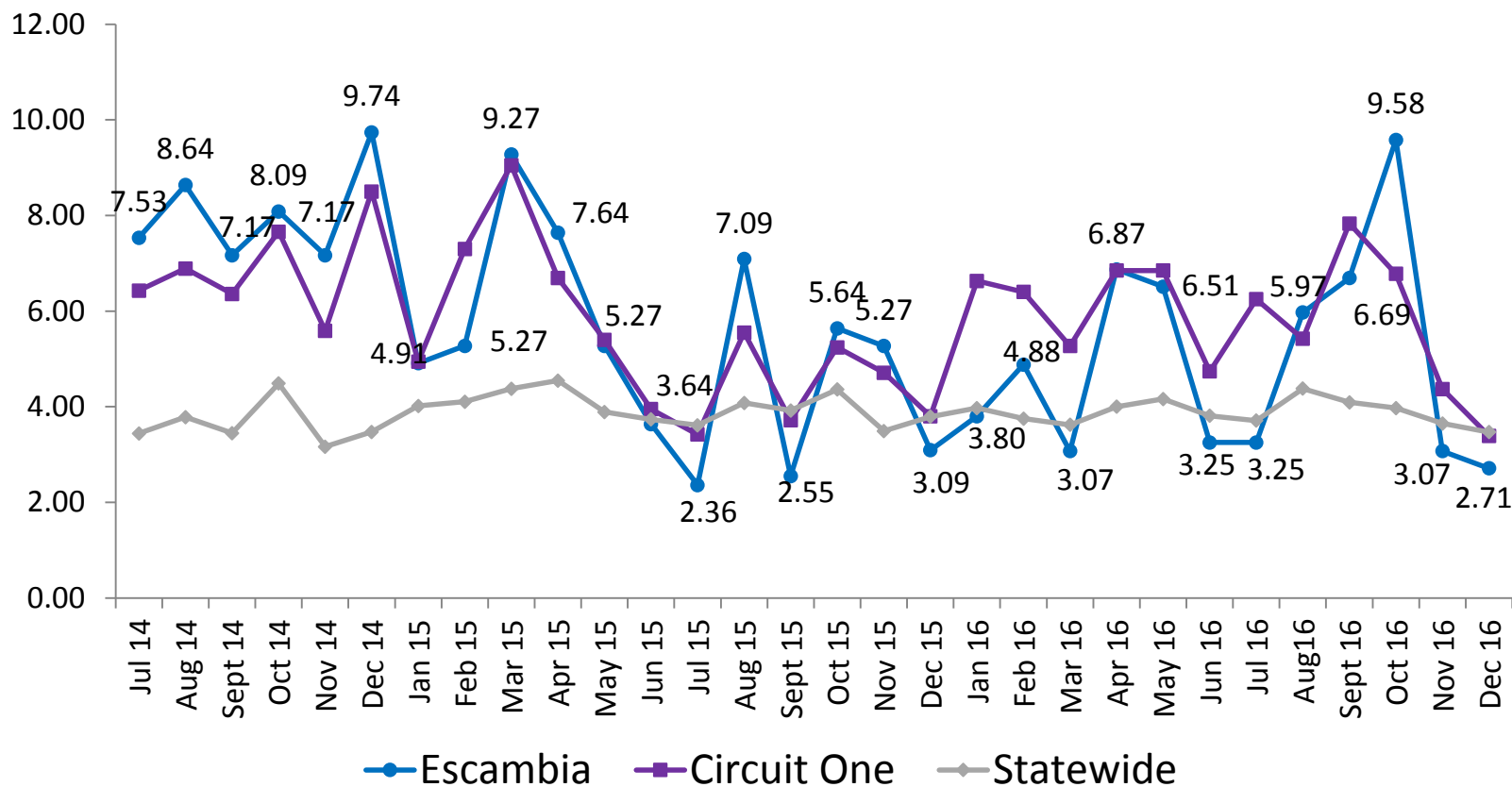
FamiliesFirst Network of Lakeview Center



- FFN must meet federal child welfare outcomes in the area of child safety, permanency, and well being.
- There are **1,415** children in foster care in circuit 1, seventh highest total in the state.
- All KR contributing indicators are impacted by FFN.
- Contextual indicators: verified findings of abuse / neglect, children removed from the home
- FFN's greatest challenge is the number and acuity of children entering Out Of Home Care in Circuit 1, and the demand for resources.
- Our greatest opportunity is partnering with community stakeholders to preserve families and safely maintain children in their families.

Removal Rates

Removal Rate Per 1,000 Children
Comparison of Escambia County, Circuit One, and State



Program 1: Safety Management and Wraparound Services



- Goal: Serve High Risk Families to safely maintain children in their homes
- Services are provided to families that are the subject of an abuse investigation and referred by DCF
- Children's Home Society

Program 2: Early Childhood Court



- Goals: Promote infant attachment and brain development for infants entering foster care
- Must be in state custody and be referred by dependency judge
- 3 years in existence in Escambia County
- Key Partners: courts, DCF, FFN, behavioral health providers, parents, GAL, ELC
- Tied to % of children 0-5 screened by appropriate tool, as well as contextual indicator of children removed from the home due to abuse and neglect
- Program outcomes being evaluated by Ounce of Prevention

Trauma Exposure



- A traumatic event is defined as an event that threatens injury, death, or the physical integrity of self or others and also causes horror, terror, or helplessness at the time it occurs.
- 2/3 of youth under 16 report experiencing a trauma event (intentional memory)
- 27% of maltreatment victims are between the ages of 0-3 (2013)
- Nearly ALL children exposed to trauma experience at least short term trauma reactions, including infants.



Trauma Reactions

Children 0-2

- Act withdrawn
- Demand attention through both positive and negative behaviors
- Demonstrate poor verbal skills
- Display excessive temper tantrums
- Exhibit aggressive behaviors
- Exhibit memory problems
- Exhibit regressive behaviors
- Experience nightmares or sleep difficulties
- Fear adults who remind them of the traumatic event
- Have a poor appetite, low weight and/or digestive problems
- Have poor sleep habits
- Scream or cry excessively
- Show irritability, sadness and anxiety
- Startle easily

Children 3-6

- Act out in social situations
- Act withdrawn
- Demand attention through both positive and negative behaviors
- Display excessive temper
- Be anxious and fearful and avoidant
- Be unable to trust others or make friends
- Be verbally abusive
- Believe they are to blame for the traumatic experience
- Develop learning disabilities
- Exhibit aggressive behaviors
- Experience nightmares or sleep difficulties
- Experience stomachaches and headaches
- Fear adults who remind them of the traumatic event
- Fear being separated from parent/caregiver
- Have difficulties focusing or learning in school
- Have poor sleep habits
- Imitate the abusive/traumatic event
- Lack self-confidence
- Show irritability, sadness and anxiety
- Show poor skill development
- Startle easily
- Wet the bed or self after being toilet trained or exhibit other regressive behaviors

Trauma Interventions

- Include Family and Community
- Utilize interventions across caregivers or persons interacting with the child
- Positive Attention/Feedback
- Key Focus:
 - Routine
 - Role Identity
 - Trigger Identification
 - Stimuli Reduction
 - Build Relationships



Children's Home Society

Lindsey Cannon

Children's Home Society



- Mission: Building Bridges to Success for Children
- Service Area: Statewide; Local – Escambia, Santa Rosa, Okaloosa, and Walton Counties
- Size of Organization: 90 employees, Annual Budget = approx. \$5.5m, 5100 Served Annually, 3200 served in Escambia County annually
- Years in Operation in Escambia County: 97
- Funding Sources: Lakeview Center, Inc./Families First Network (State/Federal); Medicaid; HHS – NCTSN (Federal); HHS – FYSB (Federal); Escambia County School Board; Ounce of Prevention (State); Santa Rosa County School Board (Federal/State); United Way of Escambia County; United Way of Okaloosa/Walton Counties; University of Central Florida; CareerSource Escarosa(Federal/State); FL Department of Education (Federal); Variety of local foundations including Gulf Power, Impact 100; Pensacola Charitable Open; and Private Donors.
- Key Contact: Tim Putman, tim.putman@chsfl.org, 850-266-2701

- Overall organizational outcomes: To help children and youth grow up safe, healthy and prepared for life; To create strong, stable families.
- Contributing Indicators:
 - % of eligible children enrolled in early education program
 - % of 4-year olds enrolled in VPK program
 - % of children ages 0-5 screened by appropriate tool
- Parent education/engagement components vary from program to program and include informal support groups, advisory council participation, parenting classes – Nurturing Parent, other adult learning opportunities.
- Greatest Challenge: Breaking through the parents' pain and fear that creates a lack of hope, paralysis of vision, and suspicion of continued exploitation.
- Greatest Opportunity: Working with community partners to align resources to create a greater impact than any one organization can create themselves.

Family Counseling



- Goal of Program: Heal the pain of children who have experienced trauma and/or are experiencing behavioral health challenges
- Target Audience/ Participants: 450-500 children annually, ages 0-21, mostly Medicaid eligible, approximately 70% of children served have experienced trauma
- Years in Escambia County – 35+
- Key Partners – DCF, FFN, Escambia County School District, Community Action – Head Start, University of South Florida, University of West Florida
- Contributing indicators - % of children ages 0-5 screened by appropriate tool
- Program outcomes – Increase access to trauma-informed, evidence based/informed treatments (CPP, PCIT, TF-CBT, Real Life Heroes) in community; Increase resilience in children who have experienced trauma; Strengthen caregivers skills in positive caregiving and effective discipline

- Goal Program: Engage teen mothers in completing high school graduation while effectively parenting their child
- Target Audience/ Participants: Approx. 40 pregnant and parenting youth who are attending Escambia County District Schools, qualified by risk factors including economic status
- Years in Escambia County: 19
- Key Partners in Program: Escambia County School District, Early Learning Coalition, Healthy Start, Healthy Families, Studer Community Institute
- Contributing indicators:
 - % of eligible children enrolled in early education program
 - % of children ages 0-5 screened by appropriate tool
- Program outcomes: Attendance rate of teen parents; Graduation rate of eligible youth; Increase knowledge and application of effective parenting skills

- Goal of Program: Eliminate child abuse and neglect in families that are high or very high risk through safety management and/or wrap around services.
- Target Audience/ Participants: Families where there has been indicators/findings of abuse or neglect, approximately 200
- Years in Escambia County: 15
- Key Partners: DCF, FFN, various service providers
- Contributing indicators:
 - % of eligible children enrolled in early education program
 - % of 4-year olds enrolled in VPK program
 - % of children ages 0-5 screened by appropriate tools
- Program outcomes: Children will be safe from abuse/neglect; Improvement in family functioning; Families will engage in formal and informal wraparound supports;

Nurturing Parent



- Goal of Program: Create safe, healthy families through effective parenting.
- Target Audience/ Participants: Families who are at risk of abuse/neglect or otherwise court-involved, Serving 182 annually.
- Years in Escambia County: 2
- Key Partners: DCF, FFN, Circuit 1 Family Court, DOC
- Contributing indicators:
 - % of eligible children enrolled in early education program
 - % of 4-year olds enrolled in VPK program
 - % of children ages 0-5 screened by appropriate tools
- Program outcomes: Children will be safe from abuse/neglect; Demonstrate age appropriate parenting skills for parents of children 0-17

Weis Community School



- Goal of Program: Create a hub of support and empowerment for children, families, and the community through compassionate collaborative partnership.
- Target Audience/ Participants: 500+ children at C.A. Weis Elementary, their family members and the neighboring community
- Years in Escambia County: 1.5
- Key Partners: Escambia County School District; University of West Florida; Escambia Community Clinics; Community Action; Early Learning Coalition; ECARE; First Baptist Church; Greater Little Rock Church; Gulf Power; Studer Community Institute-LENA Start and other funding partners.
- Contributing indicators:
 - % of eligible children enrolled in early education program
 - % of 4-year olds enrolled in VPK program
 - % of children ages 0-5 screened by appropriate tools
- Program outcomes: Maximize participation in on-site 3 yr old HeadStart class and VPK, and Reading Pals.

Recap from Last Meeting & Where We are Headed:

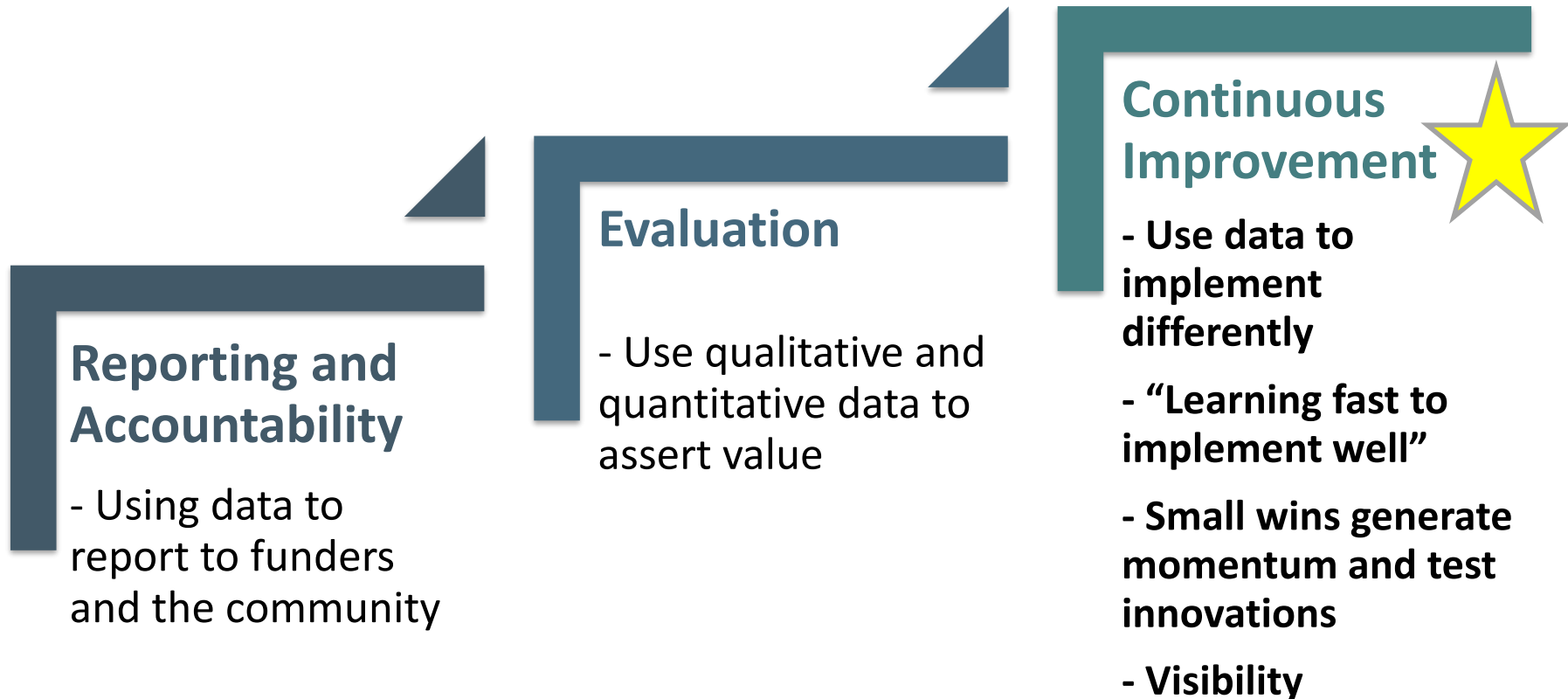
Present Action Plans to CAN (+OST) **on June 22**; Present to Leadership Council **July 12**

- **GOAL:** Identify WHAT this CAN **CAN** do that will bring about improvements in the selected contributing indicator that will be achieved faster or at a higher level than if we were not working together.
- **...But first, a reminder on continuous improvement!**



Why Continuous Improvement?

What is Different about Continuous Improvement?



Continuous Improvement Model:

PLAN, DO, STUDY, ACT

The Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?

AIM Statement

Measurement & Metrics

Changes

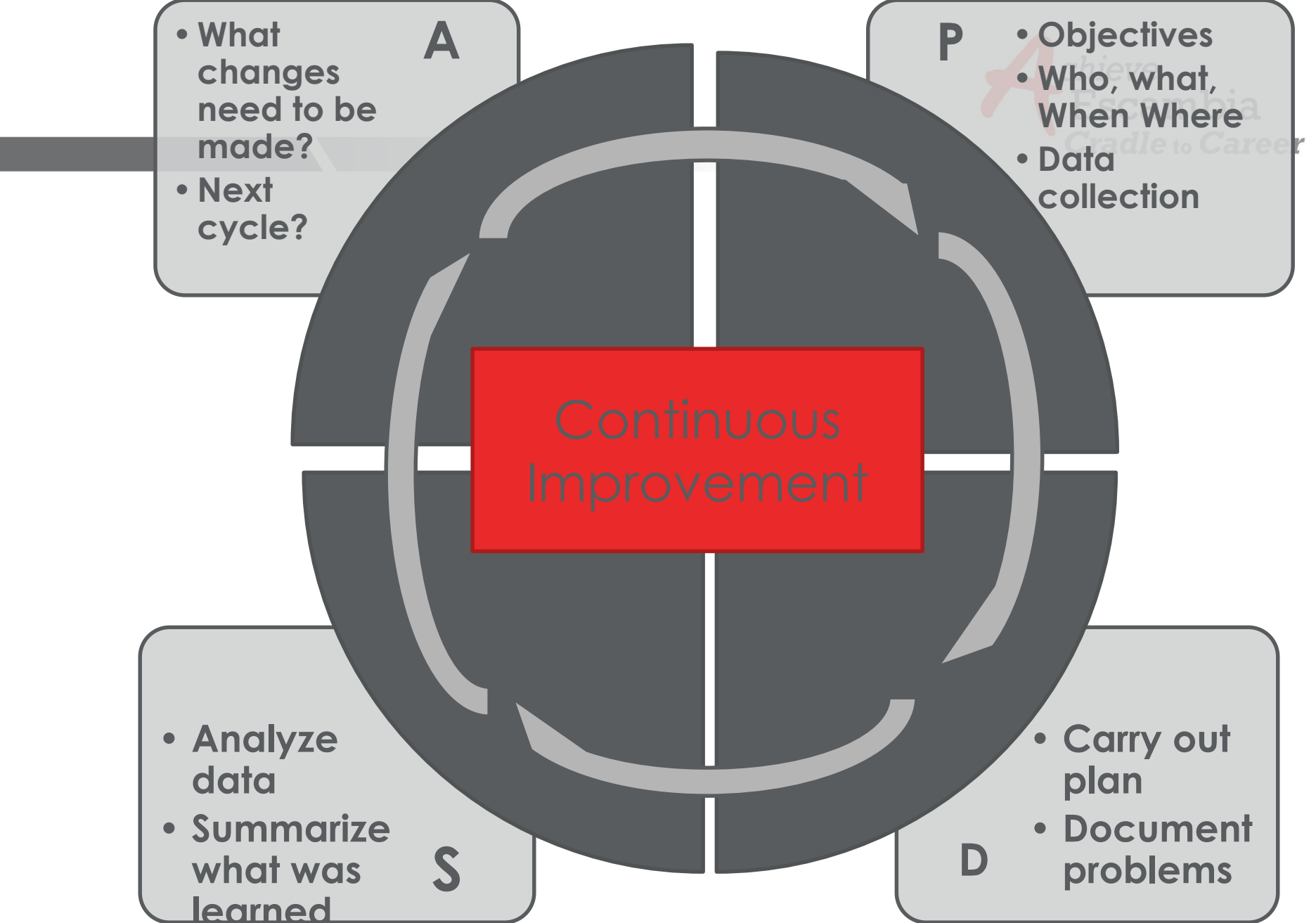
...the Model for Improvement.

A Model for Learning and Change

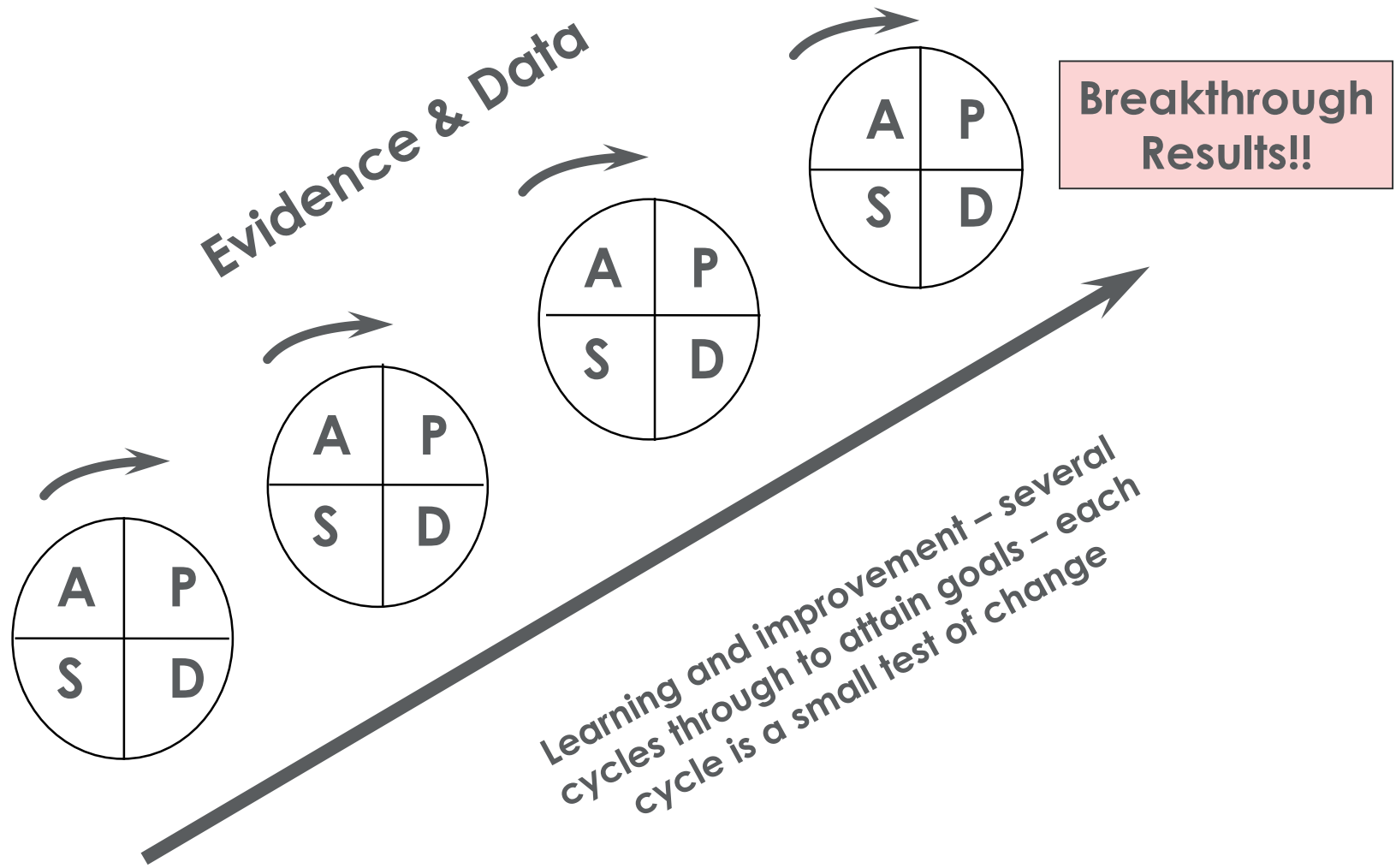
When you combine the 3 questions with the...

PDSA cycle, you get...





PDSA Cycles



- Prepare to report out to group at 9:30:
 - How/when you plan to meet
 - How you are identifying/engaging additional partners
 - What your strategy ideas are from Blue Sky template.
 - **“Plan” step in PDSA**
 - Plan with user/family/child/practitioner in mind
 - Use disaggregated data to aide in answering “who?” – “where?”
 - What additional resources you need to be prepared to present Action Plans on June 22:
 - Data needs?
 - Communications/information-sharing?
 - Other?

Report Out & Discussion

Close