

# SERVICE PARTNERSHIP FOR CHILDREN OF HIGH CONFLICT FAMILIES

Meeting #6, August 28, 2007

## REPORT OF PROCEEDINGS

### ATTENDANCE

Representative	Organization	Present	Absent
Sharon Aarons	FIU/Victim Advocacy Center		X
Sharon Abrams	Eleventh Judicial Circuit	X	
Vanja Abreu	American Therapeutic Corp		X
Paula Bain	MDC Dept. of Human Services		X
David Battenfield	Miami Dade Fire Rescue		X
Robert Beneckson	Children's Home Society	X	
Michelle Benjamin	Victim Service Center		
Emily Bennett	United Way	X	
Melissa Brail	Jewish Community Services		X
Janna Bolinger -Heller	MDPD- Domestic Crimes Bureau	X	
Queen Brown	Human Service Coalition		X
Marcelo Castro	Research & Evaluation Network	X	
Teresa Descillo	Victim Service Center		X
Angela Diaz-Vidaillet	Victim Response, Inc. (The Lodge)	X	
Delores Dunn	Center for Family and Child Enrichment		X
Maryellen Ebert	Institute for Child & Family Health	X	
Joan Farr	Miami-Dade County/DHS/Family & Victim Services		X
Juan Ferreiro	State Attorney's Office/MOVES	X	
Linda Fieldstone	Eleventh Judicial Circuit/Family Court Services	X	
Nadyne Floyd-Grubbs	Alliance for Human Services	X	
Susan Gold	UM Medical Mailman Center for Child Development		X
Normando Gregorisch	MDPD- Domestic Crimes Bureau	X	
Maria Harris	Eleventh Judicial Circuit/Domestic Violence Division	X	
Mary Horan	All Children Together		X
Robin Hunter	Dept. Of Juvenile Justice		X
Cece Hurtwiz	YWCA of Greater Miami	X	
Christine Jean	Family Resource Center		X

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Regina Johnson	State Attorney's Office		X
Sandra Lawrence	State Attorney's Office/Victim Witness Services	X	
Lauren Lazarus	Eleventh Judicial Circuit/UFC	X	
Fermin Leguen	Miami Dade Dept. of Health	X	
Judith Lieber	Jewish Community Services		X
Sarah Lenett	Miami-Dade County/DHS	X	
Bonnie Levin	UM/Dept. of Neuropsychology		X
Sheldon Levy	The Melissa Institute for Violence and Prevention Treatment	X	
Vicki Lopez-Lukis	Miami Dade Reentry		X
Hebe Lubowitz	Jewish Community Services		X
Conchita Lundblad	Family Counseling Services	X	
Sarah Magnes	The Village		X
Emily Marquez	Humane Society Miami-Dade		X
David McGriff	Advocate Program, Inc.	X	
Ivon Mesa	DVIU	X	
Dr. Robert Morgan	Heroes Program	X	
Barbie Ongay	Our Kids of Miami-Dade/Monroe, Inc.		X
Daniel Ore	MDPS-Division of Student Services	X	
James Pann	Research & Evaluation Network	X	
Colleen Perdue	Our Kids of Miami-Dade/Monroe, Inc.	X	
Vivian Perez Pollo	AOC Mediator		X
Cheryl Pestaina	Youth on the Move	X	
Tom Pietrogallo	National Association of Social Workers		X
Jesus Pinero	Kids Hope United		X
Susan Reyna	MUJER		X
Rose Marie Rodriguez	Miami Dade Fire Rescue		X
Rose Marie Rodriguez	UM/Dept. of Neurology		X
Jim Rudes	Barry University	X	
Jennie Rundell	Eleventh Judicial Circuit	X	
Jackye Russell	DCF		
Frank Sanabria	Switchboard of Miami	X	
Lisette Sanabria	Eleventh Judicial Circuit/Family Division	X	
Christine Sainvil	CHARLEE Program		X
Wayne Salter	Early Learning Coalition		X
Sabrina Salomon	Fl. Immigrant Advocacy Center	X	
Stephanie Solovei	Miami Bridge Youth Services		X
Carrie Soubal	State Attorney's Office	X	
Michele Sweeting	DCF/SAMH	X	
Bettina Toscano	Kids Hope United		X
Dawn Thompson	Kristi House		X
Heather Winters	Family Counseling Services		X
Mary Grace Yale-Kaiser	UM/Linda Ray Center		X

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## SERVICE PARTNERS

Organization	MOU signed
CCDH- All Children Together	X
American Therapeutic Corp.	X
Barry University	X
Center for Family & Child Enrichment	
Clerk of Courts	X
CHARLEE	X
Children's Home Society	X
DCF	X
Early Learning Coalition	X
Eleventh Judicial Circuit	X
Family Resource Center	X
FIU/Victim Advocacy Center	
Heroes Program(UM)	X
Human Service Coalition	
Institute for Children and Family Health, Inc.	X
Jewish Community Services	X
Kids Hope United	X
Kristi House	X
Miami Bridge	X
MDC Dept. of Human Services	
MDC Dept. of Juvenile Justice	X
MDC Dept. of Health	X
MDC Office of County Manager	
MDC Public Schools	
MDC/DHS/Family & Victim Services	
MDPD- Domestic Crimes Bureau	
MUJER	X
National Association of Social Workers(Miami Chapter)	
Our Kids, Inc.	
State Attorney's Office	X
Switchboard of Miami	X
The Journey Institute	X
The Melissa Institute for Violence Prevention and Treatment	X
The Village	X
United Way Miami	X
University of Miami Linda Ray Center	X
University of Miami Medical School Mailman Center for Child Development	X
Victim Response, Inc. (The Lodge)	
Victim Services Center	X
Young Women's Christian Association of Greater Miami	X

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## WELCOME, ANNOUNCEMENTS AND AGENDA REVIEW

Project Director, Isabel Perez-Morina welcomed everyone to the sixth meeting of the Service Partnership for Children of High Conflict Families. She explained that this would be a short meeting so that the Evaluators could conduct a Focus Group with the Providers who are members of the partnership. Once the substantive portion of the meeting was concluded, the general meeting would be adjourned and the Focus Group would be initiated.

The meeting facilitator, Janice Fleischer, reviewed the Agenda for the day (Exhibit A) and all members of the Service Partnership introduced themselves to the new Evaluators.

Ms. Perez-Morina made note that the next scheduled meeting date in September conflicts with the Youth Prevention Violence Summit at Florida Memorial College. The purpose of the Summit is to bring all partnerships together to discuss their work in an effort to avoid duplication and create a forum to talk about resources. Ms. Perez-Morina asked if this Summit should take the place of the next meeting and then two meetings would be scheduled in October to make up for the missed meeting in September. She explained that the next big deliverable is due from the Service Partnership on October 15, 2007.

The members of the Partnership agreed to postpone the next meeting of the Partnership until October in order to allow a delegation of Service Partnership members to attend the Summit. October 2 was tentatively set for the next meeting.

## EVALUATION TEAM: INTRODUCTIONS, OVERVIEW AND Q & A

Ms. Perez-Morina introduced the Evaluation Team, Dr. James Pann & Dr. Marcelo Castro, and directed members to their packets for copies of their Bios (Exhibits B and C)

The evaluators reviewed their responsibilities under the project for the Evaluators, including:

1. Developing data collection measures
2. Assessing needs
3. Literature review
4. Evidence based practices
5. Scientific review of indicators of domestic violence
6. Screen tools
7. Helping to consult on MIS needs
8. Assisting with write up of Outcome Evaluation Plan

Members were directed to their packets for a copy of a survey (Exhibit D). This is a pilot survey that was administered to 60 parents from Domestic Violence (DV) and High Conflict families.

The survey has 3 major components:

1. Services needed- childrens needs
2. Parents needs
3. Family services needed

Member comments:

1. Referring to the Survey: are the answers to the "don't need" column contained in the "has it" column?
  - a. No, they are mutually exclusive
  - b. This was a pilot to help us ascertain the weaknesses and items that need improvement

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2. What do you make of the fact that in the table, the majority of respondents say they don't have any needs
  - a. the needs are reported relative to each other
  - b. this needs to be looked at, we must evaluate this
  - c. shows some of the limitations of surveys; can't get in depth with a survey since you don't know why they answered the questions the way they did; no reasons given for why they answered the way they did
  - d. this survey will be used to help finalize the actual survey
3. Final survey will be given to providers and they will be asked to distribute to families and help in getting as many clients to respond to the survey as possible.
4. Will this Survey be available to providers to administer to clients and the school system as well?
  - a. Not in the schools since there is no screening available to see if the families fit the conflict or DV level
  - b. Only administered to families of DV and High Conflict
5. There will also be consumer focus groups and the Evaluators will want Partners input on what questions should be asked, what types of items should be explored.

Members then were asked to make suggestions for consumer's questions. Many members asked for additional time to think about this answer and get their responses to Ms. Perez-Morina and Ms. Paulicin subsequent to this meeting. A few suggestions were made immediately:

1. Ask parent what their biggest concern with their child is.
2. School system intervention; do they take advantage of it, is it there, what could schools do, reintegration into school, etc.
3. How many times they have moved in general; shows stability of the children, how many transitions they have; shelter to shelter, home to home
4. What demographics were surveyed which would help understand the answers?
  - a. Don't want to collect too much information, zip code and income level could be used
  - b. Ethnicity and relationship; helps us target population and areas

## PLANNING UPDATES

Following the discussion regarding the Survey and responsibilities of the Evaluators, Ms. Perez-Morina talked briefly about the updating of the Plan. She explained that some of the information from the last meeting was given to the Evaluators; while much of the information developed at the last meeting was incorporated into the newest draft of the Planning Document (**Exhibit E**).

Ms. Perez-Morina and Ms. Paulicin made the point that there is a need for the Partners to be aware of and understand the realities of the Service Partnership at this juncture. The mentioned the following items as being extremely important:

1. Current funds will be less than originally anticipated
  - a. We will continue to look for other funding sources
  - b. We must be realistic in what our funding requests are in priority
2. The Children's Trust wants us to consider "how we do things differently"; the Trust does not want to fund the "business as usual" stuff, they want to see collaborative innovative services/actions.
3. We need the Partners to look at their current programs and evaluate how they could do things differently to work with the Partnership.

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- a. Evaluate where your program is

In response to this information, Members made the following observations and comments:

1. Concern with budget cuts and agencies cutting; we must share and commit to look at what we are doing so there is no duplication/ maximize your resources.
2. We are going to have to look at what we are doing now and how it can be improved and ensure no duplication.
3. As we get results from surveys and data collection, we need to look at how a wrap around service would work.
4. Want a very open ended conversation so we can ensure we get our outcomes.
5. From a public policy focus, what you need to collect and how you do it I wouldn't suggest, but you need to look at how much things cost and how you get the money.
  - a. It may cost you more in your agencies budget but could save money in another program.
  - b. To the extent possible show dollars and cents saved.
  - c. Economic effects are very important.
6. Need to show true cost benefit; challenging but important.
7. There are 13 service partnerships overall; they are all in various stages of planning, design, etc.; we are lucky to have heard the clear picture of what the Trust is looking for and what they do not want.
8. A "system of care" is really a "system"; this would need analysis to see how it is being reviewed systemically.
  - a. Some tools are standard that are designed to do exactly that but you need to format them for your particular programs/partnership.
  - b. This must be an ongoing process/relationship even after the initial work is done.
9. One example is changes in school grades, ripple effect.
10. The good news is that budget legislation has not affected the Trust, the Trust will have money for the approved partnerships.

## **OPERATIONAL PLAN: SCREENING & REFERRAL – OVERVIEW AND COMMENTS**

Ms. Perez-Morina had sent out an Operational Plan to the members prior to this meeting. She explained that the document in the packet is just refined a little, the content is the same. (Exhibit F)

Agencies will be asked to look at resources and how they do business; the best way to do this is an interview style screening rather than a survey tool. One change is that formerly it had been decided there would be one universal tool to pick up on exposure to domestic violence, but it became apparent that there was a need for a tool for the Court to pick up on high conflict not just DV.

Members comments on the document:

1. Family Court comment: one concern in terms of resources, Self Help is part of the Court, how can we meet the needs and not take away from Self Help's capacity, concern is to allow Self Help to continue so they continue to get their income and without affecting their staff.
  - a. We are looking at a concise screening tool, not extensive or in depth in take.

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- b. Two conflicts about having only two points of entry; there are actually more than that; our funding will not allow us to put a staff person in each point of entry so we need to figure out how we cover these other points without additional staff (funding limitation)
  - i. Do we have enough resource for points of entry?
  - ii. Do we have a self administered tool?
2. This might be a good point for us to explore how each of us looks at self help; how could self help do things differently to assist with the assessment and do it more efficiently and maximize resources?
3. Explore the concept of different screening tools; some administered by staff and others self administered; some agencies do not have the time to use staff administered tools.
  - a. Need to consider literacy.
4. In terms of using two tools that measure different things rather than one that measures levels; you could miss an important piece of information.
5. The Wrap Up piece and when we need to sign MOUs: we need to know how it will impact families going through self help; at what point can we provide that type of details?
6. Ask yourself for your individual agencies; how will this impact me, will the impact be critical to your operation; is there a point in this self help (or some other aspect) upon which we could maximize; needs to be looked at from the standpoint of the system as a whole as well as through lens of individual agencies?
7. We need to remain optimistic and forge ahead and deal with the concerns as they arise.
8. Does family court self help make referrals for services?
  - a. No
9. It is always difficult starting up something new; the benefit is that it will get the families the help they need sooner.
10. Just don't want the tool to negatively impact the positive aspects of any program.
11. Organizations need to be told why the change is good for them and why good for the population they serve.
12. Benefit to population we serve isn't always to our agencies benefit.
13. There must be a training on the tools to be used.
14. Confidentiality is being provided for.
15. Under first responders: decision by October on what geographic area of Miami Dade will be chosen.
  - a. RE: geographic area: Will you pick only by number of DV calls police/fire rescue get?
    - i. No, also want a good diverse sample of Miami Dade County

Partners asked to be allowed to get additional comments in to Ms. Perez-Morina and Ms. Paulicin. It was decided that any such comments should be sent by September 7.

## **SERVICE DELIVERY: DOING BUSINESS DIFFERENTLY**

Belinda Paulicin explained about care coordination; what that system is and what the benefits to providers are.

Some of the elements of a System of Care that are usually involved:

1. Initial Screening process identifies the families
2. Assessments will be conducted for the level of needs and risk
  - i. If high risks, they would be referred for care coordination

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- ii. An assessment includes a look into what families have in place and what they need
- 3. Family Conferencing Team; the family is really involved in identify the appropriate team members.
- 4. Family Plan created is by Care Coordinator with family, providers and natural supports.
- 5. All members of the Team are aware of this Family Plan
  - i. What are resources naturally available to family and what needs to be acquired through service providers
  - ii. This increases family's engagement; family has a say in whether this works for them
- b. Barriers to services and gaps are also explored, addressed and documented in the plan.
- 6. Care coordination successes fully using the wrap around process, is able to close cases with services being maintained and the family having gained skills on how to access and use resources to meet their needs.

Member comments:

- 1. Does care coordinator continue to follow the family?
  - a. Yes, helps them keep things together and functions more as technical assistance after case is closed.
  - b. Yes, and provides a bridge from the family to providers
- 2. This sounds so ideal; most needs are financially driven, where does the money come from to assist the family?
  - a. This system allows documentation of these issues and picks up data needed to support requests for assistance
- 3. The court should be part of the Team so services are not duplicated.
- 4. Family Court: 3 tier approach to referrals
  - a. Depends on how much family wants shared
  - b. Triage model; work with court on a different level if person has failed in mediation, etc.
- 5. Suppose a family comes in through another "door", like the shelter and it is shown that family should be reunited and there is no mechanism to mandate therapy or other services?
- 6. The more families are engaged and aware, the more you see a community education of these families and they know/use the services.
- 7. It does take time for this program to really run smoothly and have the community know about the benefits of the services and how to access them.
- 8. The community must be informed of what this system means to the community itself.
- 9. When you don't have to work alone as an agency or individual makes it so much easier to get help for the family.
- 10. There is a difference in mandated services and volunteer services for a family. The coordinated service allows for setting priorities for the family and dealing with those items that need to be addressed first.
- 11. Another benefit is that there would be one call needed to the care coordinator rather than having to call several agencies.
- 12. Possibilities and impossibilities are explored and the system is much more responsive.
- 13. Let's not get stuck in some "ideology" rather than the actual needs of the families.
- 14. How do you involve "interested parties" in the process who are not formal partners.
- 15. What are "natural resources" in a community?

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- a. Example: neighbor down the street who has watched the child
- b. Those resources not generally provided by agencies, etc.
- c. Church resources, non-traditional sources of assistance.

## EVALUATIONS

Members were asked to complete their evaluations as the meeting was adjourned.

## GENERAL MEETING ADJOURNMENT

The meeting was then adjourned.

## COMMENT CARDS RECEIVED

*"The \_\_\_\_? And commitment of agencies involved continues to be an issue of concern. Agencies must re-think their roles and learn to think and perform as a team for true partnership."*

*-Anonymous*

*"My observation as a first time attendee for ICFH is that there is a risk that multiple services will not be effective because they may be duplicated, overlap and this will be confusing for the family. Perhaps the levels of care and services can be clarified next time."*

*-Maryellen Ebert-ICFH*

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