

# SERVICE PARTNERSHIP FOR CHILDREN OF HIGH CONFLICT FAMILIES

Meeting #4, May 29, 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
Robert Beneckson	Children's Home Society	X	
Michelle Benjamin	Victim Service Center		X
Emily Bennett	United Way	X	
Janna Bolling -Heller	MDPD- Domestic Crimes Bureau	X	
Queen Brown	Human Service Coalition		X
Lina Castellanos	Little Havana Community Partnership		X
Teresa Descillo	Victim Service Center	X	
Angela Diaz-Villadet	Victim Response, Inc. (The Lodge)	X	
Delores Dunn	Center for Family and Child Enrichment		X
German Dubois	Switchboard of Miami		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	
Maria Harris	Eleventh Judicial Circuit/Domestic Violence Division	X	
Mary Horan	All Children Together		X
Robin Hunter	Department of Juvenile Justice	X	
Cece Hurtwiz	YWCA of Greater Miami		X
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	Institute for Children and Family Health, Inc.	X	

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Representative	Organization	Present	Absent
Sarah Magnes	The Village		X
Emily Marquez	Humane Society Miami-Dade		X
David McGriff	Advocate Program, Inc.	X	
Robert Morgan	Heroes Program		X
Lea Murray	All Children Together		X
Barbie Ongay	Our Kids of Miami-Dade/Monroe, Inc.		X
Bettina Toscano	Kids Hope United	X	
Vivian Perez Pollo	AOC Mediator		X
Tom Pietrogallo	National Association of Social Workers		X
Susan Reyna	MUJER		X
Jim Rudes	Barry University		X
Jennie Rundell	Eleventh Judicial Circuit	X	
Jackye Russell	DCF	X	
Lisette Sanabria	Eleventh Judicial Circuit/Family Division	X	
Christine Sainvil	CHARLEE Program		X
Wayne Salter	Early Learning Coalition	X	
Stephanie Solovei	Miami Bridge Youth Services	X	
Carrie Soubal	State Attorney's Office		X
Wilma Steiner	Miami Dade County Public Schools		X
Michele Sweeting	DCF/SAMH		X
Paula Swope	Miami Dade County Public Schools		X
Dawn Thompson	Kristi House		X
Heather Winters	Family Counseling Services		X
Mary Grace Yale-Kaiser	UM/Linda Ray Center		X

### MOU signatures received to date

Organization	MOU signed
CCDH- All Children Together	
American Therapeutic Corp.	X
Barry University	X
Center for Family & Child Enrichment	
Clerk of Courts	X
CHARLEE	X
Children's Home Society	X
DCF Substance Abuse Mental Health Office	X
Early Learning Coalition	X
Eleventh Judicial Circuit	X
Family Resource Center	
FIU/Victim Advocacy Center	
Healthy Families	
Heroes Program(UM)	X
Human Service Coalition	
Humane Society	
Institute for Children and Family Health, Inc.	X
Jewish Community Services	X
Kids Hope United	X

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Organization	MOU signed
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	
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

## WELCOME, AGENDA REVIEW/MEETING GUIDELINES

Project Director, Isabel Perez-Morina welcomed everyone back for the fourth meeting of the Service Partnership for Children of High Conflict Families and immediately turned the meeting over to the Facilitator, Janice M. Fleischer.

Mr. McGriff requested that introductions were done since there were several new partnership members in attendance.

Ms. Fleischer reviewed the Agenda for the day (Exhibit A).

## INTRODUCTION AND INITIAL RANKING ON COMPREHENSIVE SYSTEM OF CARE IMPLEMENTATION PLAN

Prior to the meeting, members had received a copy of the proposed *Comprehensive System of Care Implementation Plan* (Exhibit B) and were asked to rank each section and bring their rankings with them to the meeting. Ms. Fleischer led the members in ranking the Overall Document and each section individually. The results of the rankings are reflected on Exhibit B. The entire document was accepted as consensus was achieved on all sections.

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The drafters of the document and the members were congratulated on a job well done. Having achieved consensus on the document, the members moved to their next exercise of working in small groups developing action steps for the Objectives developed at the last Partnership meeting.

**Member Input:**

1. Has fire rescue ever been invited to these meetings?
  - a. Yes, but they have not responded
2. What is the outside timeline
  - a. If planning item, must be done by September, 2007
  - b. If implementation, then Oct, 2007 to September, 2008 or indicate if subsequent years

At this point in the meeting, the group took a short break.

**SMALL GROUP INSTRUCTIONS: ACTION STEPS**

Ms. Fleischer reviewed the instructions for the Small Groups (**Exhibit C**). Members broke into small groups to discuss the development of actions steps.

**SMALL GROUP WORK, REPORTS AND MEMBER RESPONSES: ACTION STEPS**

What follows are the results of the Small Group Work of the members, followed by member comments to the reports of the small groups. The Objective to which Action Steps were written is indicated prior to the list of steps.

**Shelters:**

**Objective II (D):**

1. Shelter management staff meet together
2. Research best practice screening tool
  - a. Consult with professional
3. Select effective screening tools
  - a. Age appropriate
  - b. culturally relevant linguistically relevant
4. Make screening tool universal or access records from agency
5. Screen for need for in-depth evaluation
6. 24 hour access to staff to implement screening tool
  - a. Ongoing training of staff on using screening
7. Decision makers from all domestic violence shelters (public and private) participate I planning, implementation and evaluation of comprehensive system of care plan
8. Screening follows the children and given on case manager to action screening
  - a. Assure that results are forwarded to appropriate services.

**Objectives: III (H); IV (I); V(R)**

1. Identify instruments for comprehensive assessments
2. Set eligibility criteria for comprehensive assessment
3. Develop referral form
4. Set referral procedures
  - a. Set assessment policies, including timeline for service access
  - b. Develop assessment procedure and triage guidelines
5. Develop training on referral process

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6. Have comprehensive for adult and another for children
7. Staffing requirements
8. Have staffing meetings quarterly following children for one year
  - a. Well educated
  - b. Well trained staff from point of entry
  - c. Well paid
  - d. Multi-lingual
9. Have continuous quality improvement to facilitate changes

Objective V (P):

1. Family will be assigned an advocate to help navigate system and make sure families are referred to services.
2. Family advocate follow up to make sure receiving identified services

Objective V (Q):

1. Each member of family admitted to shelter will have a physical within 72 hours
2. Each shelter will have a fully equipped exam room onsite
3. Licensed physicians' nurse come to shelter two times a week to perform comprehensive medical exam
  - a. Medical services independent of medical insurance and funded separation
4. Multi-lingual staff

Objective V (S):

1. Shelters will have transitional agreements with long-term housing programs
2. Identify community resources that provide short-term housing
3. Expand services available; offering them to community resources and services in established transitional agencies

Member comments following small group report:

1. The link up issue: investigating or researching about the linking groups/houses- you may want to look at the Homeless Trust to see what kind of funds they might have for transitional housing
2. Sometimes a block to getting families into transitional housing
3. Transitional housing issue: getting families to take advantage of services when they are offered in the shelters; this needs to continue to be pursued
4. Can we find a best practice for keeping in contact with families after the initial 3-4 day stay

**Courts:**

Objective I C (1):

1. Define "centralized" integrated system
2. Further develop concept of a centralized intake/ data (physical?) hub for high conflict court involved families
3. Investigate models of system of care utilized in other areas
4. Develop criteria that identifies high conflict families who may potentially need services/assessment
5. Develop intake form with necessary information to be provided
6. Coordinate form with evaluator
7. Have intake//assessment tool on screen?- check legal/public information who: Linda Kearson Kelly; June/July
8. Investigate how ODYSSEY can be utilized; who: Sharon Abrams; When: June/July 2007

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9. Explore/investigate other county information technology systems
10. Enterprise technology services department (SSIS- VAN)
11. Select and integrate data systems
12. Develop centralized data base with ability to link to service providers
13. (Court) technology/data base linked to First Responder/Shelter information
14. Collect data and cross reference with other entry locations

Objective I C (2)

1. Investigate assessment tools used in other communities- who: Service partnership
2. Select one tool or combine or develop tool
3. Coordinate with Switchboard of Miami/211
4. Sort services applicable to court component
5. Coordinate tool with evaluator
6. Develop standardized procedures

Objective J:

1. Investigate other areas that use triage system
2. Vera Institute of Justice in New York- Sarah to give contact; Belinda to check Connecticut
3. Investigate number of cases to be handled per triage facilitator
4. Triage job descriptions/case manager/mental health
5. Advertise
6. Hire
7. Define "family plan"
8. Monitor parties' provision of service(s)
9. Keep data base current for each party/family

Additional note on flipchart:

- Virtual database
- Database integration
- Sharing information electronically

Objective V (N):

1. Identify/formulate role of victim advocate
2. Develop job description (volunteer, peer, independent)
3. Identify/oversight/supervision source-responsible organization
4. Develop training on court processes/appropriate expectations
5. Partner advocate with appropriate families
6. Coordinate/provide data as needed/develop reporting process

Objective V (O):

1. Identify possible providers
2. Analyze cost and prioritize service needs
3. Look at existing initiatives providing these services to maximize on resources
4. Investigate Legal Aid/Put Something Back; who: Sharon Langer

Objective VI (V):

1. Coordinate with trainers and provide support and assistance as appropriate

Objective VII (Y):

1. Invite service providers to Lunch and Learns; invite judges
2. Coordinate with service providers to provide/address topics of interest
3. Develop a Speakers Bureau
4. Develop cross training of service providers/invite to tour

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5. Develop website
6. Provide information on website and link to court

Objective VIII (Z):

1. Invite to Lunch and Learns
2. Put materials on website/link to court site
3. Create website
4. Continue to develop and disseminate brochures; who: Self-help FCS
5. Develop materials to keep public aware of impact of high conflict; who: Court Liaison Office
6. Develop materials to educate on non-adverse resolution of conflict

Objective IX:

1. Outreach to various community organizations
2. Identify agencies providing training and utilize
3. Partner to train partnership
4. Invite to Lunch and Learns on cultural competency
5. Services to families in native language whenever possible

Member comments following small group report:

1. Suggest the term of "virtual" intake center; means you will share the data electronically; need data integration and interoperability; should not be a lot of issues on basic core data
2. Some parties may be referred but not through the courts
3. There may be some questions that we would not want to ask that would be put on a central data base but would be on an intake form
4. Need to coordinate with the evaluator so that person is very well informed of exactly what is being done
5. Use "identifiers" with families, no duplication of services, referrals, etc. The only problem is with DV victims and confidentiality; you may use a number for anonymity
6. We want not only "virtual" centers, but also face to face meetings if folks are not already in the court

### **First Responders**

Objective I (A):

1. Assess training needs of First Responders
2. Obtain SOPs of all agencies involved
3. Develop information sharing guidelines
4. Develop MOUs between involved acute first responders
5. Establish a taskforce convened by liaison
6. Develop First Response policies and procedures
7. Develop referral mechanism to liaison
8. Policy to include Objective E; children whether present or not will be referred for screening

Objective II (C):

1. Choose a geographical locator for implementation
  - A. cross section
  - B. no current response
  - C. unincorporated Dade
  - D. moves response
2. Develop a hotline with staffing requirements to receive referrals

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- A. Decides time of response
- 3. Adopt a screening tool (universal)
- 4. Develop staffing requirements
- 5. Develop staff policies for time response and on-call procedures
- 6. Develop database for entering data

Objective II (D):

- 1. Get baseline data
- 2. Obtain data of children already identified/DCF numbers
- 3. Work with first responders to collect data for a set time frame

Objective II (F):

- 1. Set inclusion criteria for comprehensive assessment
- 2. Develop staffing requirements
- 3. Develop referral policies for those not eligible to enter SOC

Objective II (G):

- 1. Identify instrument
  - 1. Assessment to include services family is currently accessing
- 2. Develop procedure
- 3. Develop triage guidelines
- 4. Develop assessment policies
  - 1. timeline for services to be included
- 5. Develop staffing requirement
- 6. Develop referral form
- 7. Set referral procedure
- 8. Develop training on referral process

Objective IV (H-J):

- 1. Adopt Action steps 1-7
- 2. Capacity of service providers
- 3. Assess training needs
- 4. Assess database
- 5. Information sharing
- 6. Develop MOUs
- 7. Develop timeline for services
- 8. Multi-disciplinary staffing-develop protocols
- 9. Immediate/prompt feedback to First Responders from SOC

There were no comments following the small group report.

Following the Small Group Reports, Isabel Perez-Morina made an announcement regarding another grant possibility that the Advocate Program would be applying for in the name of the Service Partnership. It is due June 8 which is a very short turn around time. She said they may need Service Partnership members to sign a letter of support to agree to the application.

Members made the following two comments:

- 1. Make sure you look at who else might be applying
- 2. This funding would really help with implementation of our plan

## EVALUATIONS

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Members were asked to complete their evaluations prior to departing. Everyone was thanked.

## **ADJOURN**

The meeting was adjourned.

## **COMMENT CARDS RECEIVED**

*"Partners who cannot attend meetings or who send representatives should be aware of what has transpired in previous meetings, participants please keep in mind that this is a planning grant."  
-Anonymous*

*"1)Incentives for attorney recruitment is mentioned-what about for Master's level clinicians; 2) marketing may include elevating perception of social service providers so that professionalism can be maintained, good salaries provided, staff longevity in positions maintained and encouraged."  
-Anonymous*

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