



Clark County Department of Family Services

Training Workgroup Meeting

June 16, 2014 4:00 pm – 6:00 pm

Present

Anne Marie Abruscato (Mojave)

DFS Staff – Tara Donohue, Denise Parker, Shannon Rooney, Dianne Kramer

Agenda

1. Welcome and Introductions
2. Meeting Minutes from May
3. Review of the Proposal
 - a. Michael Knight thought it looked good. There were things that the group wanted to change, though. The next step is taking it to the next QPI Implementation Meeting to get approval to move forward.
4. Pre-Services Training
 - a. What else should be included?
 - i. Focus Groups?
 - ii. Categories?
 1. Licensed a year or less.
 - b. What will the discussion look like?
 - c. Who should be involved?
 - i. Training, Licensing Supervisor over PS-Map, Assistant Manager?
5. Foster to Foster Parent training
 - a. Would like to start a series of trainings where foster parents work in collaboration with DFS to train.
 - b. How do we go about recruiting for this?

Minutes

1. Welcome and Introductions
2. Review Meeting Minutes from May
3. Review of Training Proposal
 - a. Lauren (not present) has presented the proposal to Michael and he thought it looked good. There were things that the group had wanted to change.
 - i. Denise remembers that one of the proposed changes might have been using “Effective Discipline and Developmental Stages” instead of “Effective Discipline.”
 - ii. Shannon thought it was the Crisis Management area that the group had wanted to remove because there were not enough classes available in community and enough information on the topic.
 1. The last meeting’s minutes were reviewed to find where this was discussed, and it was Item H.
 - iii. It was decided that prior to having Crisis Management as a category, there needs to be a curriculum developed in this area and that the group is not yet ready to develop this.
 - iv. The partners who had originally suggested the Crisis Management area are not actively attending the meetings, and the existing group is not ready to roll this out yet.
 - v. Denise brought up that for all of the other areas there are enough trainings, especially when you include the QPI trainings.
 - vi. The goal is to have a single class in each area that is a baseline class, and moving forward from that there will be a variety of different classes taken that are more advanced.

1. We want to have some kind of baseline to start from, so that every single parent will be on same page.
- vii. One option for caregivers would be that they could even have one-on-one sessions and count them towards the required training hours (they could get a certificate to verify the training).
- viii. The group believes that there is enough Trauma-Informed Care and Ages and Stages (this would go together with discipline), and Car Seat training will be taken care of with the Child Passenger Safety Training.
 1. There will not be much increased availability through DFS (The Department of Family Services) because it will be offered through the Child Passenger Safety training.
- ix. Another concern regarding car seats is the liability to DFS of doing car seat training and installing car seats (i.e. someone installs a car seat incorrectly, etc.)
- x. Crisis Management is the only category that the group is recommending not be a mandatory one.
 1. There isn't a full curriculum that the department can put its stamp of approval on, and we can't have this as an area until the curriculum is further developed.
 - a. An increase in Trauma-Informed Care training may lead to less crises and a lower need for Crisis Management training.
 - b. Dianne notes from several meetings back that two higher level of care agency staff members had identified that the reason they are pushing this concept is that it is encompassed in the common language used across agencies.

- i. When agencies call into caregivers, there is common language used in these homes that can be used so that case managers can understand very quickly what is going on in the home, and “crisis management” falls into this language.
 - ii. These agencies were never able to follow through to provide their curriculum to DFS.
 - iii. There is too much DFS training going on to be able to include this.
 - c. Our group is recommending twelve (12) hours and specific required trainings; the existing four (4) trainings seem adequate, and Trauma-Informed Care may give enough information to handle crises.
 - d. Previously, the agencies had offered to run these Crisis Management classes, so we can potentially see if these agencies are willing to train DFS parents on this area in the future if we want to incorporate this at a later time.
 - e. Trauma-Informed Care is incorporated and prioritized because it is an important concept nation-wide.
- b. The next step in regards to the training recommendations is to take it to the next QPI Implementation Meeting to get approval to move forward.
 - i. After receiving approval from Management and the Implementation Team, the information will go out to our families.
 - ii. We are still looking at how this information will be released.

- iii. We have discussed having town hall meetings in order to bring the information to both families and case managers so that they understand and hear the information at same time.
- iv. Families are still trying to understand SIPS (Safety Intervention Permanency System).
 - 1. It will be important to get families on board with this.
- v. Denise would like to propose that we see at the next round of SIPS training if there are a few foster parents who are willing to go through it and give feedback.
 - 1. It may be best if foster parents hear it from their colleagues/foster parent friends instead of from staff.

4. Pre-Services Training

- a. What else should be included?
 - i. The current pre-service training in place is TIPS-MAPP.
 - ii. One factor to be aware of in redoing the pre-service training is the importance of recruiting the right people.
 - 1. Ex: are we only recruiting those who want to adopt infants instead of those who can meet the needs of DFS and the children in its care?
 - 2. We need to make sure we are recruiting a number of families that are not looking to adopt, since only a small percentage of the children are available for adoption.
 - a. We want to make sure we don't isolate the population that wants to adopt, either, however, it is important to make sure this isn't our entire population.
 - iii. The length of time it takes between someone expressing interest in becoming a foster parent and that person receiving his/her

license is fairly long, and our data suggests that we are losing some people.

1. It is important to ask if we can find ways to not lose people due to the amount of time it takes to get licensed, potentially including shortening the length of time.
- iv. Other communities have looked at and/or implemented “canned trainings,” which are not personalized to the community, in which caregivers take ten (10) weeks of in-person training where caregivers need to be present.
1. This may not be right for our community, as the feedback we receive from families tends to be that there are professional couples who work different shifts, and this type of format may exclude these people.
- v. What we have started to ask is whether the current training is really working for us?
1. Does TIPS MAPP produce what we want (i.e. do people remember what they need to remember and get what they need to get out of the training). The feedback from the survey will help us discern this.
 - a. Denise gets a lot of feedback in her interactions with foster parents. The survey will provide us with feedback that we can use to see anecdotal stories vs. trends that are consistently happening for our foster families.
 2. In the meantime, we have contracted with Carol Schaffer to do work with us around the training and to help us accomplish what we want to do. We will be able to use her skill & knowledge.

3. One avenue to collect useful information would be to get together a focus group of foster families and get a variety of foster parents (including both those who finished the training recently and those who finished it a long time ago) and do story-booking in order to identify which sections have really worked and which ones could use improvement.
4. We are being tasked with looking at the length of time of training specifically, and looking at it sooner rather than later.
5. Denise has looked at all of the canned trainings and has noticed that the community-developed trainings, in comparison to these ones, are more relevant to unique needs of the communities they serve (Ex: they address specific support systems available to caregivers in the communities in which they live).
 - a. These trainings might cover things such as where to go to court, CFT staffing, mentorship, etc.
6. It can be scary to go to the other side and do an exclusively community-based training that looks good but doesn't have any data or research backing it up the way the national curriculums do.
7. The training needs to have a balance between these two extremes.
8. Moving forward with this, we will likely need to bring in an expert in curriculum writing that can pull in facilitators and foster parents to get feedback to incorporate into the new curriculum.

9. There is a push from Management to finish this, however there are a lot of steps that need to happen before serious change can take place.
10. In making changes to the training, it is important to not have a knee-jerk reaction, and instead to gather and analyze the important information and respond to what is going on.
 - a. The surveys can hopefully help with this.
 - i. Ex: if 200 of 240 people report in the survey that “the training told me that I was going to get to adopt and I couldn’t,” this would not necessarily indicate that the training itself is poor but instead that the message being disseminated is inaccurate. In this case, it is important to see where this is coming from.
 1. For example, maybe either Recruitment or the information sessions are distributing this inaccurate message.
 - vi. It took a year and a half to revise the Kinship curriculum, and the group that did it was well informed on what the training needed to accomplish for relatives/fictive kin.
 1. We haven’t yet completely asked what the training needs to do. In the revision of the Kinship training, this was well laid-out prior to development.
 - a. Completion of the Kinship training development took a year and a half of weekly meetings and an

understanding what DFS wanted the relative caregiver training to include.

- b. The developers got feedback from relative caregivers prior to reforming the training.
- c. Relative caregivers seem to give the feedback that the new training answers the questions they need answered.

vii. We need to ask questions regarding what we want to accomplish for our regular foster parent training.

- 1. We would like to see an assessment of foster parents coming in, and understand what is motivating them.
- 2. Dianne has looked at the tools to do this over the years. These tools can help us get a better understanding of foster parents' motivations.
 - a. Casey's assessments
 - b. Action's assessments
- 3. If we shorten the training, we might want to bring in an assessment piece. In the current training, the assessment aspect is not strong enough.
- 4. A good goal would be to shorten the training, assess foster parents' motivations, and give experiential activities including those that communicate an understanding of what we are asking them to do.
 - i. This could probably be accomplished in 6 weeks of training.
 - b. The assessment piece is something that Tara is looking at doing sooner rather than later.
 - c. The assessment from Action ties into assessing caregiver capacity.

- i. It is a form that CPS and Permanency currently use with placement, and it can tie into the assessment that Licensing does.
 - ii. At this point, it is not a document in UNITY but it could be moving forward
 - iii. It could be passed from CPS (Child Protective Services) and Permanency to Licensing for assessments of relatives and regular foster parents. This assessment focuses on having a conversation with the family instead of them answering yes or no. It will help start honest conversations with the families about their knowledge and abilities to meet the needs of the children placed in their homes.
- d. This type of assessment centers on the concept of articulating where caregivers are in their thoughts/behavior/attitudes towards caregiving.
 - e. These ideas need to mirror each other. If they don't, the assessment component is weak and subjective.
 - f. We have gotten ourselves into creating checklists when assessing caregivers.
 - g. If we take another checklist assessment, is this solving the issue? Are we assessing the family and giving them the tools to do what they need to do?
 - h. If Action is an extension of SIPs, are they training Permanency on this tool?

- i. Right now those who have gone through SIPS include CPS, Licensing, and the DAs (District Attorneys). There is still a large group that needs to get through the training and then we need to get families through it as well. There is a push to get everyone there.
 - j. Tara has used most of these different tools and likes the Action assessment tool best.
 - i. While this tool isn't perfect, it seems to be the best option out there.
 - ii. Once the staff is trained on it and how to use and implement it, we can move forward with this tool.
5. Denise believes that what we could be doing while we are in the process of designing the curriculum is bring in a curriculum specialist and have him/her help us working through the steps.
- a. When the curriculum writer is chosen, it is important to have someone who understands child welfare.
 - b. This person needs to be able to pull information and integrate it with an understanding of child welfare system.
 - c. It will be important to look at doing these things in tandem to preparing for the new curriculum with focus groups that include asking people what they wish the training would have covered.

- i. Over the years we have heard people express wanting things like a field trip to court, coverage of CFTs, etc.
- d. As the agency moves forward, we are paving lanes and the assessment piece is something where we can create processes that are being built in tandem so that the skills the staff gains from caregiver capacity would fit in any curriculum designed.
- e. We currently have a contract in place with Carol.
- f. An important part of revising the training will include assessing when we hear from families “I wish _____” from the survey.
 - i. The things families bring up as being lacking from the training may be some things that “we teach,” but this means that it isn’t what families are hearing/learning.
 - ii. If families aren’t hearing it, then we need to improve our method.
 - iii. We know people who are good at working with curriculum, but it is probably best to go with people who are outside and get their perspective.
 - iv. We could bring in families that have had negative experiences and they can give feedback as to how the training could have better prepared them.
 - v. Unless you have previously revamped a training program, it is hard to understand how many variables that are involved.

Variables that will need to be considered include:

1. How we recruit
 2. The information session
 3. Tracking data all the way through
 4. Assessing where we are losing folks and whether it actually has to do with training
 5. How long the training is taking
6. Many times families report things such as that they anticipated more support.
- a. People need support in many different avenues (mental health, school, child care, etc.).
7. We also have Licensing workers with large caseloads. In other states the average caseloads may be smaller, and the type of support foster parents need may be outside of the scope of FPCs. Foster parents may need the support from Licensing workers and our Licensing workers are unable to provide this kind of support given their caseloads.
- a. Support is complex issue. For the most part people in the survey may say that they want to ask question and get answers, and DFS has struggled with Permanency and Licensing workers unable to provide this type of support. With a higher level of care workers this type of support is possible.
 - b. Some of this support isn't something that a FPC (Foster Parent Champion) can do, and other

jurisdictions are sometimes able to provide this support.

- c. Things like HUB homes can help, by enabling foster parents to get this necessary support from other foster parents who are comfortable providing it.
- d. In other jurisdictions FPC programs can be tied to the foster parents.
- e. Another important piece is to lower the caseload for Licensing workers.
 - i. Sometimes Licensing workers feel like mediators between DFS and foster homes, and if they have the ability to build greater connections and provide greater support we may have fewer Licensing complaints because the families would get support and have their needs met.
- f. Having Licensing workers to support foster families is important, as our case managers' main responsibility is to be there for child, and their second priority is to provide support to the biological parents. Supporting foster families is their third priority.
- g. Implementing stronger assessments could create a situation where a Licensing worker is not afraid to have conversations about concerns with foster families; the assessments can open the door to these important conversations.

- h. Denise & Tara can bring up in the meeting tomorrow that we should try to bring together groups and making steps on this process.
- i. Tara asked Ann Marie about the needs of foster parents in training. She noted that the years of experience don't make as much of a difference as the way the child's needs are perceived, and this perception seems to have a lot to do with understanding trauma and not taking behaviors as willful/personal.

8. Maybe the behavior component of training/trauma training needs to be beefed up.

5. Foster to Foster Parent training

- a. The group would like to start a series of trainings where foster parents work in collaboration with DFS to train.
- b. How do we go about recruiting for this? Who do we use as trainers?
 - i. Ex: if there is a foster parent who is a financial advisor, we could ask this person to do financial trainings for foster parents.
 - ii. We can ask Audrey to do trainings about creating connection with biological families.
 - iii. We probably know enough people who would be willing to do it and well-suited.
 - iv. Will this be volunteer or paid?
 - 1. The goal would be to give these foster parents a stipend for providing training.
 - 2. They would be paid much less than traditional trainers.
 - 3. This set up can play a role in the development of HUB homes.

- a. Often foster parents report that the person who they felt closest to was their Licensing worker because of relationship that develops in the beginning.
 - i. Foster parents need help with the little things as much as they need help with the big things.
- b. We have 4 foster parent associations, and only 12% of our foster parents belong to associations.
 - i. Other communities have association membership that is much higher than this.
 - ii. We need to encourage our foster families to unite.
 - iii. In most other states each community has their own association, and a representative from each association sits on a state committee, which has a representation in a national association.
 - iv. In the beginning it would be beneficial to bring the “movers and shakers” forward and ask these people to help with trainings and to be HUB homes.
 - v. Our initial look into marketing segmentation suggested that we have 800 homes that meet criteria to be a HUB home.

6. Summary

- a. We will recommend moving forward with the training curriculum, excluding Crisis training.

- b. We will move forward with redesign of training.
- c. We hope to develop a program that utilizes foster parents as trainers that plays into the development of HUB homes.

Next meeting: Monday July 21st