



In-Depth Technical Assistance

Round Two Final Report

Prepared for:

Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment, and
Administration for Children and Families
Children's Bureau, Office on Child Abuse and Neglect

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Table of Contents

1. Introduction	3
2. In-Depth Technical Assistance Program	4
Framework and Policy Tools.....	4
Additional Products and Resources.....	5
The Application Process and Selection of Sites	6
The Term and Intensity of Technical Assistance	6
Facilitation and Expertise	7
Project and Team Structure	8
Site Orientation and Initial Meetings	9
Technical Assistance Products and Deliverables	10
3. The Sites: Products and Progress.....	11
Arkansas	11
Massachusetts	12
Minnesota	13
Squaxin Island Tribe	15
4. Evaluation Findings.....	16
Collaborative Capacity Instrument	16
Cross-Site Meeting Evaluations	17
Round Two Closing Evaluations	19
5. Project Costs	20
6. Lessons Learned	20
7. Summary	23
Appendix 1: Collaborative Capacity Instrument Scores	
Appendix 2: Cross-Site Meeting and Drug Court Site Visit Evaluation	
Appendix 3: Round 2 Closing Evaluations	
Appendix 4: Arkansas Products	
Appendix 4: Massachusetts Products	
Appendix 5: Minnesota Products	
Appendix 6: Squaxin Island Products	

1. Introduction

As an initiative of the U.S. Department of Health and Human Services, the National Center on Substance Abuse and Child Welfare (NCSACW) is jointly funded by the Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Treatment, and by the Office on Child Abuse and Neglect within the Children's Bureau of the Administration on Children, Youth and Families.

NCSACW began providing In-Depth Technical Assistance (IDTA) in July of 2003. In the first round of IDTA, NCSACW provided assistance to four sites – Colorado, Florida, Michigan and Virginia – from July 2003 through December 2004. NCSACW began providing IDTA to four new sites – Arkansas, Massachusetts, Minnesota and the Squaxin Island Tribe – in January of 2005, and concluded approximately fifteen months later. This report summarizes the interventions, outcomes, and lessons learned in this second round of the IDTA program, which built on the experience developed in Round 1.

The IDTA program is a unique approach to developing and promoting system change. Of the myriad activities of NCSACW, the In-Depth Technical Assistance program has the most direct and far-reaching impact on States, tribal governments and communities. It is designed to facilitate cross-system collaboration among the professionals who work with families affected by substance use disorders that are involved in the child welfare system and may also be involved in the dependency court system. The IDTA Program provides strategic, intensive technical assistance to jurisdictions around the country that have demonstrated a commitment to cross-systems collaboration and are struggling to achieve improved outcomes for these families at the intersection of these three systems.

The approach of NCSACW's IDTA program is based in part on Radin's (1997) analysis of a task force on technical assistance composed of more than one hundred people from the Department of Health and Human Services. In concluding that "technical assistance is one of the Department's most valuable tools for exerting a positive influence on State or locally managed programs,"¹ Radin's assessment made clear that to be effective, technical assistance requires sustained involvement over time. Furthermore, the assistance needs to be provided at sufficient depth and duration to produce lasting change, and must incorporate cross-agency involvement, multi-source support, and funding as necessary elements of the design.

The IDTA program also emphasizes the value of *knowledge diffusion* over information dissemination in achieving its objectives. This value is based on Adelman's (2005) distinction between dissemination (the simple distribution of information), and diffusion, (the communication of information in a way that has a lasting effect on practice)². NCSACW seeks to change knowledge, skills, and behavior through its program of technical assistance, with the awareness that changes in practice, and ultimately in policy, are critical elements to achieving true systems change. The literature on diffusion holds that it is easier to change knowledge than to change skills, and that changing behavior is the most difficult of all three tasks involved in initiating a process of active change. The IDTA program is designed to support this process and help it flourish within jurisdictions where it is germinating. The framework for accomplishing this is described in the following section.

2. The In-Depth Technical Assistance Program

In every round of NCSACW's IDTA program, a multi-faceted approach to facilitating system change is used with the selected sites, based on a framework of collaborative linkages and policy tools that have been used and proven in various contexts over time. As in Round 1, the sites selected for Round 2 benefited from a constellation of interventions focused on cross-system collaborations designed to create lasting change. These interventions are enriched by an increasingly broad resource and knowledge base that is readily available on the NCSACW website. The framework, policy tools, interventions, and resources that provide the foundation for the IDTA program are described here briefly.

Framework and Policy Tools

The framework for collaboration and a set of policy tools incorporated in NCSACW's approach to its IDTA program provide a comprehensive perspective on systems and their critical linkage points, which are essential to achieving results-based cross-system collaboration. The framework consists of ten critical elements of system linkage that are fundamental to improving outcomes and long-term well-being for families with substance use disorders involved in the child welfare and dependency court system. It is based on work originally conducted by Children and Family Futures, a California-based public policy firm, and on five major reports on system overlap issues published between 1998 and 1999. As the IDTA program was being conceptualized, the framework was revised to integrate the perspective, roles, and responsibilities of the staff in the dependency court (e.g., judicial officers and attorneys), and to acknowledge the significant role played by community members and community support systems in child safety and family recovery.

In the IDTA program, the collaborative 10 element framework of system linkages is used for both needs assessment and monitoring progress. IDTA teams refer to the ten elements throughout the IDTA program. The framework of the elements is a useful tool to help sites consider the broad range of system linkages and identify areas needing development or improvement. Each site must eventually address each element for effective and sustainable collaboration to occur. The elements are:

- Underlying values and principles of collaborative relationships
- Daily practice: client screening and assessment
- Daily practice: client engagement and retention in care
- Daily practice: services to children of substance abusers
- Joint accountability and shared outcomes
- Information sharing and data systems
- Training and staff development
- Budgeting and program sustainability
- Working with related agencies
- Working with the community and supporting families

To support the collaborative framework, NCSACW uses several policy tools that help sites improve their practice and policy responses. These tools include:

Collaborative Capacity Instrument (CCI) – This self-assessment is designed to encourage discussion within and among child welfare workers, substance abuse treatment providers, dependency courts, and community agencies about their progress in addressing specific issues, and to help them prioritize their most urgent program and policy plans. The CCI elicits responses related to the ten elements of system linkage and

is easily administered online. In the IDTA program, individual participants complete the CCI early in the technical assistance process. NCSACW tabulates the results and reviews them with the site team to facilitate understanding of areas that need strengthening, as well as existing strengths that can be leveraged in implementing change. The CCI is administered again at the conclusion of the IDTA, and results are compared to the initial assessment to reveal developments in collaborative capacities over the course of the program.

Collaborative Values Inventory (CVI) – This questionnaire serves as an anonymous way of assessing the degree to which a group perceives the values that underlie its work and identifying issues that may be overlooked if the site begins its work without first clarifying its underlying values. Relationships are a fundamental aspect of collaboration, and the CVI encourages discussions which form a basis for trust and effective communication. Like the CCI, this tool can also be administered online.

Matrix of Progress in Linkages among Alcohol and Drug and Child Welfare Services and the Dependency Court System (Ten-Element Framework) – The Matrix of Progress is a tool for assessing collaboration across particular systems, organized around the Ten-Element framework described above. This tool identifies recommended benchmarks for improving the system linkages in terms of improved practice, good practice, and best practice for each of the ten key elements. This tool incorporates the feedback and experience of over 100 professionals with expertise in these areas.

Additional Products and Resources

The sites participating in the IDTA program have improved access to a broad array of organizations that represent families, to professional and national leaders on practice and policy issues in substance abuse, child welfare, family courts, the tribes, and to policy makers. These resources include the five NCSACW Consortium Partners; the National Resource Centers sponsored by the Administration for Children and Families, Children's Bureau; and other government resources such as SAMHSA's Center on Substance Abuse Treatment, the National Clearinghouse for Alcohol and Drug Information and the National Clearinghouse on Child Abuse and Neglect Information.

In addition to the framework and policy tools mentioned above, products and resources (available in detail at www.ncsacw.samsha.gov) relevant to the focus of the IDTA program have been developed and gathered by NCSACW that support the sites in achieving their objectives. These include:

Online Curriculum –The curriculum presents basic information on substance abuse, child welfare, and the dependency court systems for professionals in other disciplines; the objective is to facilitate cross-system work. Those who successfully complete the course can receive Continuing Education Units by submitting the Certificate of Completion.

SAFERR Model – *Screening and Assessment for Family Engagement, Retention and Recovery (SAFERR)* – This publication addresses screening and assessment policies and protocols to foster family engagement, retention and recovery. The publication provides guidance on developing collaborative efforts, including cross-system teams and communication mechanisms, to improve outcomes for families.

White Paper on Funding Comprehensive Services for Families with Substance Use Disorders in Child Welfare and Dependency Courts –This white paper outlines the fiscal issues that affect the ability of programs to provide the services needed by children and families affected by substance abuse, outlines the concept of unified fiscal planning, and briefly describes the Federal sources of funding for child welfare and alcohol and drug services along with several other sources of funds for services for children and adolescents.

Information Switchboard and Clearinghouse – NCSACW acts as a “live” switchboard, connecting programs with common interests and sharing information on collaborations and promising practices across the nation. Knowledge gained from the experiences in other States and pioneering programs enriches the efforts of the IDTA program and allows the participating sites to benefit from those experiences. This includes access to products developed by the Round 1 IDTA sites.

The Application Process and Selection of Sites

In each Round, NCSACW solicits applications from States and Tribes interested in participating in the IDTA program. Sites were included in the Round 2 solicitation based on meeting one or more of the following criteria:

- Round 1 applicants that were not selected,
- Sites that have requested technical assistance from NCSACW in the past,
- Jurisdictions that were awarded Access to Recovery grants with a focus on the child welfare population,
- Sites that specifically mentioned NCSACW technical assistance in their Child and Family Services Review and/or Program Improvement Plan, and
- States with a total population over 2.5 million.

In addition, the National Indian Child Welfare Association (NICWA) conducted targeted outreach to Federally-recognized Tribes that administer their own child welfare and substance abuse programs and have an established Tribal court. In the application, potential IDTA sites needed to demonstrate that the relevant agencies and courts were committed to improving their policies and practices with regard to families involved in the child welfare system who were also affected by substance use problems. Sites were selected based on their demonstrated commitment to collaborative systems change, and on NCSACW's intent to focus on sites at various levels of development in terms of cross-system collaboration. Four Sites – Arkansas, Massachusetts, Minnesota, and the Squaxin Island Tribe – were chosen to participate in the second round of the program.

The Term and Intensity of Technical Assistance

The Round 2 IDTA program was structured to provide intensive technical assistance over a continuous period of at least fifteen months. This approach incorporates lessons learned from Round 1, in terms of delivering technical assistance that is both uninterrupted and longer in duration than the twelve months envisioned initially. This time commitment is necessary to position the site to realign the policies and practices of multiple systems, develop a plan for ensuring that the changes are sustainable, and support the progressive interdependence of the three lead systems. Within this timeframe, participants must

establish mutual trust, develop collaborative agreements, identify and prioritize strategies, develop new policies and protocols, and lay the groundwork for broad practice-level change.

Facilitation and Expertise

A Consultant Liaison is chosen and trained by NCSACW and then assigned to each site selected to participate in the IDTA program. Each Consultant Liaison is a senior-level professional with extensive experience and knowledge in the areas of child welfare, substance abuse treatment services, and dependency courts. Most have worked on the frontlines in at least one of the fields, and have executive-level experience in at least one of the others. They are among a select group of professionals who can knowledgeably communicate on multi-systems issues.

The role of the Consultant Liaison is multi-faceted. During the course of the IDTA delivery, the CL serves as guide, coach, interpreter, facilitator, resource broker, sounding board, cheerleader, task master, monitor, and mediator. The CL's responsibilities include:

- Facilitating the development of the Scope of Work and corresponding work plan
- Determining and coordinating the technical assistance needs of the site
- Fostering cross-system communication and collaboration
- Brokering additional resources as needed by the site
- Providing a neutral perspective on issues and problem-solving
- Providing content expertise
- Conducting research and assisting with product development, material preparation, review and feedback
- Supporting collaborative leadership development
- Maintaining an outcome-driven focus for the site team
- Researching and sharing information and materials on model programs, evidence-based and promising practices, and emerging trends
- Reporting to NCSACW on site-specific progress, barriers, and lessons learned

The Consultant Liaison works with the site for an average of 32 hours per month, combining his or her professional background and skills, knowledge of promising practices, and access to nationwide resources with an independent perspective to provide the site with an effective catalyst for change.

In addition to the Consultant Liaison, NCSACW provides a Judicial Consultant to work with all of the sites on an as-needed basis. This Judicial Consultant is a retired dependency court judge who has extensive experience in family treatment courts, and who established the first family treatment court in New York State. The Judicial Consultant plays a key role in bridging the gap across systems by communicating with judges and court representatives.

NCSACW staff supports these consultants by overseeing the delivery of technical assistance, coordinating resources, and disseminating information.

Project and Team Structure

Based on lessons learned in Round 1, the technical assistance provision in Round 2 was much more prescriptive with respect to project and team structure (see Figure 1). Round 2 sites were challenged to make a defensible case for choosing to utilize a structure that veered too far from the recommended establishment of an Oversight Committee, Core

Team (ideally consisting of no more than 6-8 individuals that includes staff from each of the three lead systems), and a Statewide Advisory Committee comprised of key stakeholders.

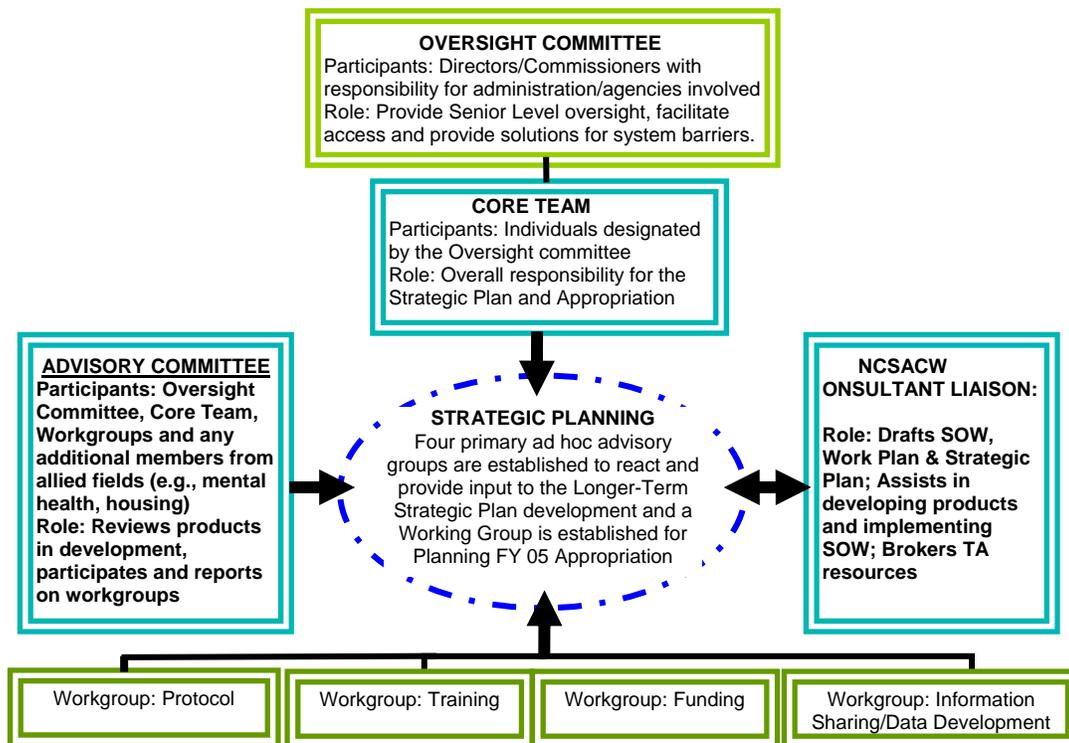


Figure 1

The IDTA learning curve has consistently validated the viability of this model over other options, and is directly connected to the other lessons presented here. In fact, those teams that initially chose to utilize a different structure inevitably transitioned to the recommended structure. There are some key reasons that this recommended structure has proven to be effective. Having this specific project structure in place accommodates:

- Sustainability, through the authority and endorsement of the Oversight Committee;
- Communication, through the system of accountability that is implicit in the hierarchical relationships as well as the peer-to-peer relationships;
- Regional buy-in, through the participation and subsequent investment of the diverse stakeholders that make up the larger State Team; and
- Internally supported change, through the co-investment of multiple systems in achieving jointly defined project outcomes.

Site Orientation and Initial Meetings

As with Round 1, a series of structured meetings was utilized to launch the program of IDTA with Round 2 sites. Based on lessons learned from Round 1, however, the timing of these events was refined for Round 2.

Introductory Call - Upon receiving notification of their selection, Round 2 sites were scheduled to participate in an introductory conference call that included the site's core participants, the assigned Consultant Liaison, the IDTA Program Manager, and the NCSACW Director. The initial call served to introduce the parties, review the IDTA program, and draft the agenda for their respective kick-off meetings to launch the project at their sites. Following this introductory call, the Consultant Liaison and the core team finalize the agenda for the kick-off meeting, coordinate logistics, prepare materials and identify necessary participants.

Site Kick-off Meeting: The kick-off meeting is a two-day planning event that typically involves 25-30 system stakeholders (including members of the Oversight Committee and the Core Team) in addition to representatives from the NCSACW. The established goals of the kick-off meeting are to:

- Introduce and engage the representative stakeholders, and orient them to the NCSACW Program of IDTA and the site's goals as identified in their application
- Provide participants with basic knowledge of the organization, vocabulary, resources, and challenges of each of the partnering systems
- Summarize NCSACW's resources and services
- Define project structure, team roles and responsibilities, communication protocols, and a meeting/site visit timeline for the period of IDTA
- Identify the site team's mission, vision, and priority population for the IDTA
- Identify the site's priorities and desired outcomes for the technical assistance, which sets the stage for defining necessary deliverables to be included in the site-specific Scope of Work (SOW) and detailed Work Plan

Cross-site Meeting and Program Site Visit – The IDTA cross-site meeting is designed to bring the sites together to exchange ideas, introduce their proposed products, share their experiences, and meet the key players involved in the IDTA program. Additionally, this meeting offers participants the opportunity to observe the Sacramento County model, which has demonstrated success in implementing a set of cross-system practice and policy innovations that have resulted in improved outcomes for children and families, as well as cost benefits for the systems themselves. This visit includes time for meeting participants to interview program staff as well as clients, and incorporates a visit to a family drug treatment court, which is a model that IDTA sites are always interested in exploring.

Feedback received by Round 1 sites indicated that it would have been helpful to experience the orientation and peer-to-peer connection made possible by the cross-site meeting much earlier in the process. As a result, the cross-site meeting in Round 2 was conducted earlier in the cycle. NCSACW sponsored a team of five from each site to attend the meeting, held five months into the process. This cross-site meeting included sessions for information presentation, break-out sessions for each site to work separately, access to the NCSACW Consortium Partners for consultation, and opportunities for cross-site exchange. Participants reported that the ability to consult with other sites was highly valuable and motivating, as was the site visit with the Sacramento County team.

Technical Assistance Deliverables and Product Development

The ultimate result of the Kick-Off Meetings for Round 2, as with Round 1 sites, was the development of the Scope of Work and corresponding work plan that define the objectives and desired outcomes for the period of in-depth technical assistance. The Scope of Work outlines the specific deliverables that are necessary to achieve those objectives, and defines which party is responsible for completing specific tasks by a certain target date. This document also identifies additional resources that may be needed to accomplish the site's goals, and provides a tool for managing the distribution of NCSACW resources in the most effective and responsive manner. The corresponding work plan serves as the site's "roadmap" throughout the period of IDTA, and provides guidance to the workgroups that are convened to complete specific products and tasks. The fact that the Scope of Work and Work Plan must be approved by the Federal Project Officer encourages sites to ensure that they are well-thought out and will yield meaningful results.

As a result of lessons learned in Round 1, sites in Round 2 were encouraged to incorporate a longer-term strategic plan in their set of deliverables. Developing a strategic plan allows sites to include longer-range collaborative goals in their vision that may not be realistic to address within the scope of the IDTA. Ideally, these long-range goals become imbedded in existing agency strategic planning efforts, in a manner that facilitates overall project sustainability.

In addition to the long-term strategic plan, the list of deliverables for most sites in Round 2 included a Memorandum of Understanding that defines joint outcomes as well as a set of cross-system shared values and guiding principles; a set of protocols that facilitates collaborative practice on the front line; a training delivery plan that supports joint training efforts of the lead systems; and a collaborative funding plan that identifies opportunities for sharing resources and leveraging available funding streams in innovative ways. Each site's specific products and deliverables, as well as their process for accomplishing those, is described in more detail in the following section.

Mid-way through the IDTA period (September 2005), Round 2 sites were asked to complete a self-assessment to measure their progress in completing the Scope of Work as specified in their detailed work plan. This mid-term assessment is an effective tool that allows the team to step back and assess their efforts to date, re-focus their energies, and determine whether any course corrections are necessary. It also provides explicit reinforcement of the reality that the IDTA is time-limited and that progress is necessary, and encourages overall accountability. Based on how helpful the mid-term assessment has been in both IDTA rounds to date, it is likely to be utilized on a more frequent basis for sites in future rounds.

Throughout the course of Round 2, the CL's utilized their allocated time with sites as creatively and efficiently as possible. Ongoing technical assistance is delivered through strategically scheduled on-site meetings, combined with frequent team teleconferences and even more frequent electronic correspondence. In the course of their work with each site, CLs conduct research, draft documents, broker resources, manage meetings, facilitate workgroup activity, design forms, templates and tools, monitor progress on the Work Plan, tend to the Oversight Committee, and troubleshoot the unexpected challenges that undoubtedly arise. This mix of tasks and frequent contact serve to reinforce the relationship between the CL and the team, and ultimately help the site make it to the finish line.

3. The Sites: Products and Progress

NCSACW began implementation of the second round of In-Depth Technical Assistance to four sites in late January 2005. The program offered fifteen months of technical assistance with the opportunity for limited follow-up technical assistance, referred to as "aftercare". Only Minnesota applied for the aftercare TA from NCSACW. The Squaxin Island Tribe elected to obtain follow-up technical assistance from NICWA, one of NCSACW's Consortium partners, as a way to secure ongoing technical assistance resources for the longest possible duration.

Each State experienced success in incorporating collaborative strategies into the policies and practices of its systems. In Minnesota, an on-line tool kit of 20 recommended practices is available statewide. The Squaxin Island Tribal Council created a Family Wellness Team that will utilize the products developed through the technical assistance. Arkansas made a commitment to hire a substance abuse specialist within its Child Welfare agency in order to ensure implementation of the collaborative planning process. Massachusetts is designing a Family Engagement Program which will target those families involved in the State Department of Social Services that are experiencing difficulties engaging in the treatment and recovery system. These significant steps solidified the progress made during the IDTA program and carried each site's work forward into the future. The changes exemplify the results of cross-system collaboration in support of better outcomes for families that is the goal of the IDTA program.

The following sections describe how each site organized itself for collaboration, the work proposed in the site's Scope of Work and corresponding Work Plan, and the outcomes of each site's efforts.

Arkansas

Arkansas created a core team consisting of representatives from the Administrative Office of the Courts, providers and the Arkansas Department of Health and Human Services Divisions of Behavioral Health, Children and Family Services, Youth Services, Developmental Disabilities, and County Operations. The State also formed a Stakeholder Committee that included representatives from Arkansas' child welfare, substance abuse, courts, developmental disabilities, county operations, mental health and youth service systems and a service recipient. This group identified the priority issues and goals for the technical assistance. Ad hoc subcommittees were created to address specific areas of the Work Plan.

Given the relative newness of Arkansas' collaborative effort on both the state and local levels, their products and process were designed to raise awareness of the need for and value of cross-system collaborations, gain an understanding of local level perceptions of barriers and input on strategies to address these, and promote interest and generate support for system and practice change. To this end, the development of a **Memorandum of Understanding** among the Department of Health and Human Services, the Office of the Courts and the Department of Workforce Development is seen as a significant achievement that will foster new linkages that benefit families in the child welfare system by making new resources available related to treatment and employment services.

While Arkansas initially envisioned a lengthy set of products and goals to accomplish in a relatively short time period, their focus was eventually streamlined to develop a **practice protocol** designed family-centered, cross-system teaming at the local level for screening, assessment, retention and engagement of families involved in the child welfare system who

have familial substance use or disorders. Additionally, the technical assistance supported Arkansas in revising their **Family Risk Assessment tool** to incorporate screening for substance use disorders, and allow for cross-system information sharing in order to improve families' earlier access to treatment services. Another important accomplishment, while not a specific product or an originally defined objective in the site's Scope of Work, is the joint commitment of the three lead entities to fund a **new staff position**, housed in the Division of Child and Family Services. This position will be responsible for coordinating the continued collaborative activities of the Core Team and ensuring that their longer-term goals come to fruition. This staff person is expected to be hired in late Fall 2006, and be positioned at manager-level status in order to allow access to the Commissioner and Deputy Commissioner.

The longer-term objective of the Arkansas team is to create a training plan will facilitate protocol implementation, and a coordinated, systemic interagency strategic plan that addresses the comprehensive needs of families and children along the entire developmental spectrum, organized around the ten-element framework. The site plans to submit a request for follow-up technical assistance by early September to NCSACW to finalize the draft protocol, develop a training plan, and complete the interagency strategic plan.

Massachusetts

The Family Recovery Collaborative in Massachusetts was established through the administrative authority of the Executive Office for Health and Human Services, the Massachusetts Juvenile Court, and the Wampanoag Tribe. Oversight accountability for the project resided with the Commissioners of Social Services and Public Health, Chief Justice of the Juvenile Court, and the Wampanoag Tribal Council. Leadership for the initiative was provided by a State Team, with a Core Team of multi-system representatives acting in a steering capacity.

The State Team consisted of representatives from the Department of Social Services, Department of Public Health/Bureau of Substance Abuse Services, Massachusetts Juvenile Court, the Wampanoag Tribe, as well as representatives from service providers, community agencies, advocates, and consumers/advocates within the Commonwealth of Massachusetts. Their mission was developed in the first cross-agency meeting and stated: "To improve outcomes for children and families affected by substance use by enhancing collaboration among child welfare, substance use services, tribal, and juvenile court systems." Three ad hoc work groups were created to address specific products as they related to the overall goals and objectives outlined in Massachusetts' Scope of Work: a Training Workgroup, a Cross-Systems Workgroup, and a Family Engagement Workgroup.

Massachusetts established an ambitious set of product goals and provided for local community input and feedback through the use of focus groups. The major product goals for which there was a significant level of accomplishment were:

Memorandum of Understanding among collaborative partners on State level –

The Memorandum has been signed by the Department of Social Services, the Department of Public Health, the Juvenile Court, and the Wampanoag Tribe of Gay Head (Aquinnah). The signing took place at the Family Recovery Collaborative State Team meeting on April 19, 2006.

Statement of shared values and principles – This was included in the MOU and signed by all parties on April 19, 2006. The Core Team is now focused on a process of

disseminating the Statement of Shared Values broadly to stakeholders throughout the Commonwealth.

Screening protocols for families involved in substance abuse, child welfare, and the courts – This product is underway but not completed. The team researched and selected a screening tool for use in child welfare cases, and is in the process of developing a training curriculum for screening procedures.

Service standards across systems for best/promising practices – The team completed research on standards that have been adopted by other jurisdictions, and is in the process of developing a draft set of standards for local practice which ensures that the shared values and principles are reflected.

Cross-systems information sharing protocols – The development of collaborative-specific information-sharing protocols has been postponed until the Executive Office of Health and Human Services, which has an overarching role in the project, develops its plan for information sharing.

Develop system for improving family engagement in services – The Family Engagement Model was developed and a concept paper was produced which was presented to the Core Team to consider potential funding strategies. An implementation and funding strategy is being considered by the Department of Public Health and the Department of Social Services that will link child welfare system clients to substance abuse treatment services. In addition, the Institute of Health and Recovery is being funded to implement an engagement model in three DSS Area Offices as part of the child welfare system of care.

Interim services and strategies to transition families to treatment – Focus groups were convened to ascertain recommendations from DSS-involved families involved in recovery as to how to most effectively engage and retain families in treatment. Recommendations were made regarding how DSS and Substance Abuse Treatment providers can improve services to families impacted by substance abuse. Elements of pre-treatment and interim services were incorporated in the Engagement Model concept paper and will also be considered in funding strategies reviewed by the Core Team.

Multi-year strategic plan for on-going collaboration and systems integration – The 10-element framework was used to lay the groundwork for developing a multi-year plan for this collaboration.

As a result of the in-depth technical assistance provided, Massachusetts has developed a structure to sustain the work that was formalized during the project period. Although all of their goals and objectives have yet to be reached, they have the commitment from the key stakeholders to continue the work of developing a more integrated system for child welfare families impacted by substance abuse. The team is currently working to establish the Family Recovery Collaborative as a standing sub-committee of the Governor's Inter-Agency Council on Substance Abuse and Prevention to coordinate statewide activities related to substance abuse, family systems, and child welfare issues.

Minnesota

Minnesota's IDTA project was organized using the framework of the State Supreme Court's existing Children's Justice Initiative (CJI). Minnesota utilized the NCSACW provision of technical assistance to launch the CJI Alcohol and Other Drugs (CJI-AOD) Workgroup to

enhance the capacity of the child welfare, chemical health and court systems to further develop cross-systems partnerships and improve practices related to serving families with substance abuse problems in the child welfare system. Minnesota's Core Team is comprised of representatives from the Department of Chemical Health, the Child Safety and Permanency Division, the State Court Administrator's Office, a Parent Partner, and a member representing the three designated pilot Counties. The Core Team members provided coordination for the CJI-AOD State Advisory Committee during the course of the project, which was made up of a diverse array of stakeholders representing public and private agencies as well as tribes.

The products developed in Minnesota were designed to ensure that:

- Parents are engaged earlier in the process of assessment, treatment and recovery
- Partners in the process are improving practices through cross-systems collaboration, and use of team-based and relationship-focused approaches,
- Children's and families' stability are improving with increased reunification supports and services
- Community members and stakeholders are improving their knowledge base and communication regarding families' needs and resources.

Minnesota accomplished all of its originally defined product goals, as well as several additional products not originally identified in the State's Scope of Work. Their major deliverables that were outlined in their Scope of Work were as follows:

Statement of Shared Value and Guiding Principles – Signed by the Commissioners of each lead entity, this document articulates each entity's expected contributions and commitment to support, and facilitate implementation. This will also serve as a model for communities to use.

Catch the Vision Tool Kit of Recommended Practices for Working with Families – These practice guidelines reflect recommended practices based on lessons learned nationally as well as from the three pilot counties and other regions within Minnesota that have implemented successful strategies in working with families. The core team will disseminate this information broadly to tribes, counties and communities to support statewide implementation of promising practices to improve outcomes for families.

CJI-AOD Training Plan – A training delivery plan to ensure local agencies and service providers receive guidance and training necessary to support the implementation of collaborative strategies outlined in the Tool Kit to improve engagement and retention of families in supports and services.

CJI-AOD Recommendations for Sustainability- A set of long-term implementation and sustainability recommendations to institutionalize the collective vision and promising practices into existing agency strategic planning efforts in order to ensure expansion of the project.

Minnesota's team was intensely committed to ensuring that parents were represented in the process and given a legitimate role in shaping the outcomes identified for the technical assistance. As evidence of this commitment, each lead entity contributed financial resources to work with a Parent Partner who was contracted to serve on the Core Team and coordinate a series of regional focus groups with recovering parents who had a history of involvement with child welfare and the courts. As a result of the work done in this regard, these additional products were developed that will prove to be useful models for future IDTA recipients:

- Parent Partner Job Description
- Parent Partner Handbook
- Parent Focus Group Summary
- Parent Partner Research Summary

Minnesota's CJJ-AOD Workgroup is now institutionalized within the overall CJJ working structure, and is accessing follow-up technical assistance ("aftercare") from NCSACW to assist them in sustaining the momentum of the admirable progress that has been made to date and to provide ongoing support facilitation of their collaborative efforts. Minnesota's aftercare goals are to:

- a. Draft an evaluation plan to measure and support improved outcomes that result from Tool Kit use and implementation;
- b. Plan for an October conference that will establish collaborative team training for select Counties in the first round roll-out of the "Catch the Vision" Tool Kit.
- c. Obtain guidance in structuring a plan and training design for first round team maintenance, modeled after the NCSACW state-level IDTA, and
- d. Set up a checklist type of maintenance plan for ensuring that the "Catch the Vision" Tool Kit is kept up-to-date.

Squaxin Island Tribe

The Squaxin Island Tribe utilized the program of technical assistance project to develop effective cross-system collaboration between the Tribe's HHS Family Services Division Indian Child Welfare (ICW), the Northwest Indian Treatment Center (NWITC) and the Public Safety and Justice Department (Tribal Court). These lead entities comprised the Core Team, in addition to a representative from the Squaxin Island Legal Department. Additional representatives from these key stakeholder entities filled out the larger team. The group invested a great deal of time together identifying some of the major obstacles that were hindering their ability to operate effectively.

The team members identified building and sustaining institutional knowledge for systems collaboration as their top priority. Therefore, the team decided to focus on the specific deliverables that they deemed critical to institutionalizing system-level collaboration. In addition, building strong relationships with tribal council members, while perhaps not a tangible "product," was identified as a critical strategy and primary focus in order to facilitate sustainable collaboration among the key stakeholders.

The team's success in accomplishing this is illustrated by the fact that the Tribal Council is formally recognizing the Core Team at their Council meeting in July 2006. The Council is also supporting the creation of a "Family Wellness Team" that will essentially function as a multidisciplinary team that collaboratively oversees the management of child welfare cases and facilitates the appropriate utilization of the products developed during the technical assistance. Tribal council members and tribal administrators are highly invested in sustaining institutional knowledge for systems collaboration.

While the team did not develop a cross-system training plan as originally envisioned, topical training was provided to all tribal system staff that included: Guardianship Reports, Youth in Need of Care, Court Form Development, Federal Disclosure Law, Mandatory Reporting: Substance Abuse and Child Abuse-What It Is and What to Look For. The list of the Squaxin Island Tribe's completed products includes:

- Critical Path for Responding to Youth in Need of Care
- Guidance on Forming a Family Wellness Team
- A Guide to the Squaxin Island Tribe's Youth Court
- A Guide for Parents in the Squaxin Island Tribe's Youth Court
- Guardianship Procedures Checklist
- Procedure and Review Checklist for Termination of Parental Rights
- Northwest Indian Treatment Center Consent for the Release and Exchange of Confidential Information Form
- Squaxin Island Tribal Court Forms
- Working Agreement between the Squaxin Island Tribal Family Services and the Mason County Division of Children and Family Services – Shelton Office

4. Evaluation Findings

During Round 2, NCSACW utilized three different methods to assess the following indicators:

1. Administration of pre- and post-IDTA Collaborative Capacity Instruments to gauge each site's capacity to collaborate across systems;
2. A Cross-Site Meeting Evaluation to assess participant satisfaction about the meeting; and
3. Distribution of a Site Self-Assessment and Closing Evaluation at the end of the IDTA period to elicit feedback on the resources and technical assistance services provided by the NCSACW and the Consultant Liaisons.

The information gathered through these methods has proven to be very important for informing the IDTA process as to what improvements need to be incorporated into future IDTA rounds, and has also yielded valuable information regarding the existing strengths of the program. The results are discussed below.

Collaborative Capacity Instrument (CCI)

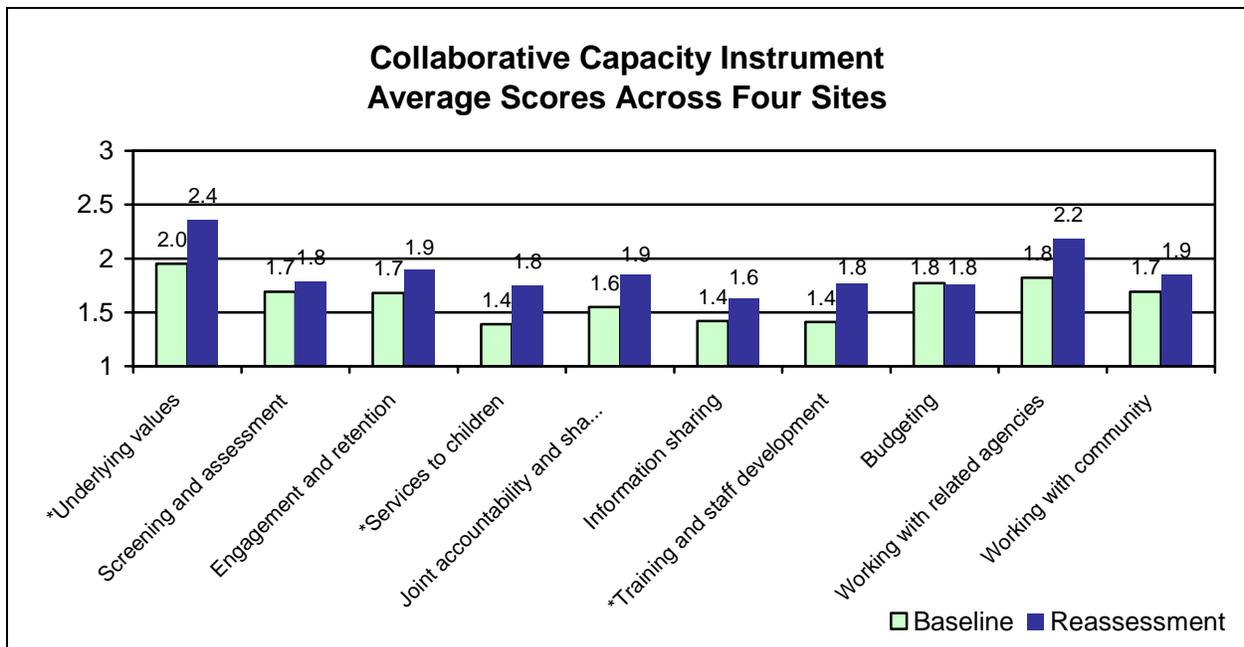
The CCI is commonly used to establish or enhance collaboration in work with Counties and State agencies. A recent study³ has confirmed the strength of the instrument. Factor analysis was used to examine the internal consistency of the instrument and its individual components. The reliability of the CCI is very strong, with an internal consistency of .97. Each of the ten factors that make up the instrument also has a strong internal consistency of approximately .80 or more.

As with Round 1, The Round 2 IDTA program incorporated the use of the CCI as a tool that was completed by as many Core and State Team members as possible in the first 60 days of the process. The results were tabulated and provided to the site team via a facilitated analysis that provided the site with some indicative features of their cross-system dynamics. This information was subsequently used to inform the project Work Plan for each site. The CCI was administered again at the conclusion of the IDTA to reveal changes in collaborative capacities that occurred over the course of the IDTA program.

A total of 209 participants completed the CCI at the beginning of the Round Two IDTA program, compared with 49 participants that completed the post-IDTA CCI's. The imbalance is due to the fact that Minnesota completed the CCI as part of an NCSACW-related activity that actually occurred prior to their selection as a Round 2 site. For that activity, both

County and State personnel were targeted to complete the CCI, resulting in 182 CCIs being collected in Minnesota. Rather than have the CCI re-administered in Minnesota once they were selected as a Round 2 site, those 182 responses were used to provide the pre-IDTA results to inform the work plan, which resulted in a significant variance in comparison to the number of post-IDTA CCIs that were completed, since those were distributed to and collected from only Core and State team members. We do not expect this to occur again with any of the sites, and note that the results for the four sites combined (and for Minnesota, separately) in Round 2 should be interpreted with caution.

For the four sites combined, there was a significant increase in the mean score in nine of the ten elements of collaboration across time (see Appendix 1). The three areas with the greatest average increases and which reached statistical significance in mean change scores were “Services to Children,” “Training and Staff Development”, and “Underlying Values and Principles of Collaborative Relationships.” Overall, there was a 25.9% increase in mean score from baseline to reassessment in the “Services to children” area, a 25.5% increase in the “Training and Staff Development” area, and a 21.0% increase in the “Understanding Values and Principles of Collaborative Relationships” area. The significant change in the “Underlying Values” scores is appropriate given the emphasis in the program to create common understandings and approaches with families. The one area that showed a decrease over time was “Budgeting and Program Sustainability.” While not reaching statistical significance, the decrease in mean score may reflect a greater awareness among team members of the lack of coordinated approaches across agencies in funding and sustaining systemic change. The graph below displays totals and levels of significance for all sites combined. Differences among the sites were also found, perhaps reflecting each site’s unique climate. Appendix 1 provides more detail about the assessments in each site.



Note: *p<.05

As stated above, the results from this the Round Two CCI’s should be interpreted with caution due to the sampling issues that were unique to this cohort of sites. To prevent this from occurring in the future, CCI’s will only be administered once the core team has been created. If a larger group from the state wants to take the CCI, their data will be separated

out from the core team via a separate web link that only those from the larger group use to submit their CCI results.

Situations like the one that happened in Squaxin are more difficult to resolve. The low response rate for the reassessment CCIs was due to an extremely high number of the core team members leaving the project. Once a core team member leaves, it is nearly impossible to get them to complete a CCI survey. In order to encourage core team members to complete both the baseline and reassessment CCIs, the Evaluation Director from NCSACW writes a letter to the core team asking for their compliance in completing the surveys. This letter is sent to the Consultant Liaisons who forward it to the core team for distribution. Several attempts are made by NCSACW staff and the Consultant Liaisons to get surveys returned from all of the core team members and to maximize the number of respondents. The Evaluation Director provides the Consultant Liaisons with periodic updates on the number of respondents from each site so that he or she can provide this feedback to the core team. In order to produce at least an 80% response rate (which is considered best practice in the field), completion of the CCIs could be written into the contract with the sites as a required task.

There is no way in the past to determine if those completing the reassessments are the same individuals who completed the baseline CCIs since the surveys are anonymous. For this round, we did add a data item which asks for the last four digits of the respondents' social security number but this item is optional (and is only on the online version). The plan was to use this information to identify those who had/had not completed the assessment. We did not feel that we could require people to provide this information if they did not want to. Currently, less than half of the respondents include their information. In the future, we could make this a mandatory item, thus allowing for matching of baseline and reassessments to possibly occur. There is no way to control, however, what numbers the respondents use in this field (i.e., 1234, 4444, etc). Assuming low turnover in core team, however, one can assume that the majority of respondents would be the same for both assessments. While it would be ideal to have a matched group of respondents for each assessment, the data analytic techniques allow for variation in baseline and re-assessment respondents while still accurately providing information on the change over time.

Cross-Site Meeting and Drug Court Site Visit Evaluation

Forty-three participants attended NCSACW's Technical Assistance Cross-Site Meeting and Drug Court Site Visit on March 21-24, 2006 in Sacramento, California. State team members came together to discuss the IDTA process in their State, hear from other participating States, and receive on-site technical assistance from the Consultant Liaisons, NCSACW, and Federal sponsors. The majority of participants represented State agencies (70.8%) or local government (8.3%). Three-quarters of the participants were women.

In compliance with the Federal Government Performance and Results Act (GPRA) standards, NCSACW used the Center for Substance Abuse Treatment Baseline Meeting Satisfaction Survey to obtain feedback on the cross-site meeting. Participants gave positive ratings for the overall quality of the cross-site meeting. A majority of the participants reported feeling satisfied or very satisfied with the quality of the meeting. Most also agreed that the site visit was well organized and were satisfied with the overall meeting experience. The participants were asked about the usefulness of the materials presented during the Cross-Site Meeting. In particular, they were asked whether the materials would help them address substance abuse, child welfare, and dependency court issues in their State; whether they expected to use the information; and what they thought the benefit to their clients would be. Overall, the participants agreed that the materials presented would be helpful to them in addressing

these issues and would benefit their clients. Most believed that the materials would help them in dealing with substance abuse, child welfare, and dependency court issues in their State. Appendix 2 contains a table which summarizes the mean score for each item in the evaluation.

In addition to the above areas, participants were asked to answer the following two questions: "What about the meeting was most useful in supporting your work responsibilities?" and "How can we improve our meetings?" The narrative comments produced the following conclusions regarding the usefulness of the meeting:

1. The cross-site meeting was useful in bring bringing State agencies together. The participants found it valuable to be able to access work from other sites, including tools and documents. The participants also found it valuable to meet with their TA liaison and to network with other State groups. They found it useful to have the opportunity to discuss issues with my team and those from other states; and to hear from other states regarding their experiences with the IDTA process.
2. The Drug court experience, including the process, court proceeding and meeting the participants was found to be valuable. Many found the entire court day to be useful, particularly the evaluation of progress and observing the drug court. One participant reported that the panel discussions validated the frustrations and growing pains of collaborating agencies in the developing FTDC. Lastly, one participant noted that it was helpful to hear and understand the role and functions of the EIS and STARS workers.
3. In terms of content, some of the participants noted the expertise provided and the quality of the information and our individual state breakout meetings. One participant cited the usefulness of the opportunity to learn about current practice and collaborative between AOD/CPS and chance to have discussions with own state team about issues to be addressed. Another reported that it was useful to take the time to be reflective about what's happening now, what needs improvement, how to roll out some ideas statewide. Finally, another reported that the cross-site meeting helped him/her to understand the difficulties and rewards of effective collaboration.

In terms of ways that the NCSACW could improve its meetings, the participants suggested these improvements:

1. In terms of content, some participants cited the desire for more interaction of participants in cross-state, cross-discipline small groups (including the identification of specific state-oriented goals). Others expressed a desire for a demonstration of some of the products. One participant noted that some of the days felt irrelevant for non-IDTA states. He/she was not sure to fix that problem but suggested perhaps a re-organization of the schedule so that SAFERR comes earlier and the non-IDTA sites are finished earlier. Lastly, one participant reported a desire for a CPS worker panel regarding drug court and their perception, plus what services they provide.
2. The length of the days was cited as an issue for several participants. Although the participants enjoyed the meeting and found it to be interesting and useful, several reported that the days were too long making it hard for them to absorb all the information. A few of the participants stated that they would have liked some interactive experiences or more focused opportunities to move them around and help them retain the information. One participant suggested shortening the court visit, debriefing at the court location, and ending the day once they leave the court.

Round Two Closing Evaluations

Near the end of the IDTA process, participants from the Round Two sites were asked to complete an evaluation of the NCSACW IDTA program. The purpose was to get feedback from all the site team members about IDTA that was provided by the NCSACW and the Consultant Liaisons. The feedback will be used improve the NCSACW's efforts to provide IDTA to other sites in the future.

The response rates varied across sites. Thirty Round 2 closing evaluations were returned: 6 from Arkansas, 19 from Massachusetts, 3 from Minnesota, and 2 from the Squaxin Tribe. In Arkansas and Massachusetts, the Closing Evaluations were distributed at a core team meeting where a NCSACW staff member or Consultant Liaison was in attendance. In Minnesota and Squaxin, the evaluations were electronically mailed. While the low response rate from Minnesota is difficult to explain because team engagement was perceived to be high, it is believed that the low response rate from Squaxin is directly related to the high turnover rate among core team members that had occurred by the end of the project.

The process of distributing the closing evaluations, as with the CCI's, is initiated by the Evaluation Director, who submits a letter to the core team asking for their compliance in completing the evaluation, and highlighting the importance of their feedback regarding to the effectiveness of the IDTA program and Consultant Liaisons. This letter is sent via the Consultant Liaisons who then distributes it to the Core Team for distribution to the State Team. Multiple attempts are subsequently made by both NCSACW staff and the Consultant Liaisons to maximize the number of evaluations that are returned from all of the core team members. Similar to the process with the CCI, the Evaluation Director provides the Consultant Liaisons with periodic updates on the number of respondents from each site so that this feedback can be provided to the Core Team. Given the uneven response rate in Rounds 1 and 2, an 80% response rate will be targeted in future rounds, beginning in Round 3, and the expectation of participation in the closing evaluation process will be incorporated into the set of tasks that future IDTA recipients will be expected to complete.

For Round 2 closing evaluations, responses ranged from 1 (strongly disagree, useless) to 5 (strongly agree, very useful). The respondents gave very high scores of the usefulness of the IDTA program (Mean=4.47), the helpfulness of the consultant liaison in bringing information or resources to the site (Mean=4.28) and in NCSACW providing IDTA as it was explained in the kick off meeting and in correspondence (Mean=4.26). The lowest scores related to the implementation of some of the changes that were developed during the IDTA process (Mean=3.62) and the length of time that the IDTA was provided (Mean=3.88). See Appendix 3 for detailed information regarding the round two closing evaluations.

Participants were also asked open-ended questions to elicit additional feedback regarding the IDTA process. Questions were asked regarding the helpfulness of the IDTA, what the NCSACW staff did best, and changes/improvements that they would recommend to the IDTA process and regarding NCSACW's role in providing IDTA. The narrative comments received produced the following conclusions:

The most helpful thing about the IDTA was:

- The consultant liaisons were helpful in their depth of knowledge, their ability to organize the sites, answering and addressing questions and issues that surfaced, and in their facilitation of meetings. In addition, the consultant liaisons assisted the sites

in summarizing key issues, identifying final products, setting up timetables and keeping the sites on target. They also were helpful in maintaining on-going communication regarding the project.

- The IDTA process was helpful in providing connection to and information from other states, helping the sites learn how to collaborate, bringing cross-agency and other stakeholders together, and providing a bigger picture of how other states have approached this issue and what they have developed.

What did the NCSACW staff do best?

- The consultant liaisons were available, followed through, and held the sites accountable. They made themselves available at crucial times in the process and kept sites on track. The consultant liaisons also facilitated meetings, helped sites assign tasks with realistic deadlines and provided sites with the opportunity to develop system changes in all three systems that are realistic, comprehensive and achievable.
- The NCSACW also helped the sites in dividing up tasks, provided a structure and timetable, and offer resources across states and online. They were also clear and concise in their expectations. The NCSACW also provided the sites with information regarding other states' work and initiatives.

The one thing I would change about the IDTA is:

- For the NCSACW to provide more concrete and applied assistance with helping the sites in producing the products and alerting the new sites to challenges and encourage alternative plans to be used as needed to keep collaborative efforts moving along.
- The increase the length of the IDTA process so that it is a two year process instead of one.

What improvements need to be made regarding the role of the NCSACW staff and consultant liaison?

For NCSACW to address funding issues, keep day long meetings moving along more quickly and work to better smooth relationships among core team members as needed.

5. Project Costs

The cost of delivering the IDTA program to four sites for fifteen months was approximately \$295,000, compared to \$400,000 for eighteen months in Round 1. Monthly expenditures in Round 2 averaged just under \$20,000, compared to over \$22,000 per month in Round 1. The cost of professional services accounted for 78% of the total costs. This compares to 74% for Round 1. This comparison seems to support the theory that, while professional services comprised a slightly larger proportion of overall IDTA program costs in Round 2, the services were provided more efficiently, as NCSACW personnel and consultants were able to leverage the knowledge and products developed in the first Round.

Professional services included those of the four Consultant Liaisons, the Project Manager, and the Judicial Consultant. Over the course of fifteen months, each site received professional consultation worth approximately \$57,000. Other direct costs such as travel,

per diem, meeting costs, printing and reproduction, and postage accounted for the remaining 22% of total costs.

The sites also committed significant resources to the project. Each site contributed the time and expertise of its leaders, management staff, and policy developers. Community providers and stakeholders helped develop the sites' products. Sites were responsible for the costs of in-state travel, meeting space, materials, conference calls, and other items.

6. Lessons Learned

The second round of IDTA yielded valuable information and lessons to augment the insights developed in the first round. Indeed, many of the lessons learned in Round 1 were further underscored during this second round. Regular CL calls were utilized to prompt collaborative internal thinking to understand how best to utilize the resources available through NCSACW to support collaborative growth and development at each of the sites. By applying the following lessons regarding team structure, leadership, accountability, transition, regular self-assessment and communication, NCSACW was able to further refine its provision of technical assistance to jurisdictions in Round 2 to be more efficient and effective in facilitating sustainable, systems-level change.

Leadership

The role of leadership in multi-system collaboration is an important and complex factor that has a direct impact on the outcome of the IDTA. The sites' experience in Round 2, as in Round 1, collectively highlighted the correlation between stable leadership and project success. The technical assistance provision needs to cultivate "layered" leadership at two key levels within the site team's structure – at the Oversight Committee level and at the Core Team level. In the instances where Core Team leadership transitioned mid-stream, the sites, without exception, experienced a loss of momentum and varying levels of role confusion which created somewhat of a ripple effect throughout the project. In at least one site, this appeared to be the primary factor in how successful the team was in completing its Scope of Work. Similarly, in instances where Oversight Committee leadership changed, the project was also negatively impacted, but usually in a more subtle way that resulted in longer-term impact to the project's potential for institutionalization.

While leadership transitions are often inevitable, there are some critical pathways to which the technical assistance must attend in order to help the team through the transition. By working with the outgoing leaders to establish and facilitate a solid transition plan, the CLs can help to ease the disruption to the project. Additionally, by ensuring that project leadership is established in a way that is agency or system-supported versus person-dependent, the team and the CL are more likely to successfully weather the transition. Finally, by communicating the importance of the leadership role with the team at the front end and emphasizing the need to collaboratively anticipate and manage potential leadership changes during the course of the project, the CL can help prevent the team from being "asleep at the wheel" when those changes suddenly become a reality.

Relationship Management

Without exception, every recipient of IDTA to date has grappled with the challenges that arise as diverse leadership and personality styles collide in the process of developing collaborative relationships. At their worst, these clashes can disrupt the work at hand,

sometimes irreparably. This experience, albeit frustrating and perplexing at times, reinforces the reality that forging collaborative alliances is a delicate task, and requires patience and perseverance on the part of both team and consultant. Even teams with “all the right stuff” in terms of resources, management authority, and stakeholder buy-in can be quickly undermined if these relationship and personality dynamics are not attended to skillfully. Technical assistance that is delivered with the goal of systems change must take this unavoidable factor into account from the onset or be continually blind-sided by it, making it necessary for Consultant Liaisons to possess an aptitude for mediation in addition to advanced facilitation skills in order to help sites successfully weather the stormy periods.

Co-ownership versus Co-equality

In Round 2, it became apparent that the presumption that the three lead systems needed to be co-equal in terms of their investment and leadership in the project created an unrealistic set of expectations. In most jurisdictions, the reality is that politics and policy dictate the level, availability, and utilization of agency or system resources and influence on behalf of the IDTA project, and that these factors vary widely from one system to the next. While true co-ownership is the ideal, it is not likely to exist, at least in the project’s early stages. The more likely scenario is that, in almost every site, one system emerges as having the lion’s share of power, resources and influence, and is therefore in the best position to provide overall leadership for the project.

It is therefore necessary to cultivate *co-ownership* of the project among the lead systems, openly acknowledging that it is acceptable for each to have differing capacities to contribute resources during the course of their collaborative project leadership. The most successful sites are those in which the lead entities co-own the solutions with one another as well as with other critical partners, such as mental health, education, public health, providers, and others.

The IDTA framework described earlier reinforces the notion that the collaborative process is not weighted toward one system and that each system’s role is necessary for the project’s outcomes to be realized. When the ownership of the project becomes unbalanced, it is felt throughout the life of the project. To prevent this from occurring, the CL must work with the Core Team to ensure that all team members have a sense of value in terms of their role in the project, the vital nature of their participation, and the assurance that each system’s perspective will be respected.

Accountability

Directly connected to the notion of co-ownership is the concept of accountability. It became evident toward the later stages of Round 2 that conducting progress updates and self-assessments at more regular intervals throughout the life of the project would allow for earlier identification of potential problems and facilitate less cumbersome course corrections. By structuring quarterly reviews of the project work plan with Round 3 sites, Consultant Liaisons will be able to assist site teams with communicating regularly to one another and to their respective management systems regarding project benchmarks and updates. It will also help teams to monitor their progress and identify timely solutions for unanticipated obstacles, working within established timeframes to accomplish project tasks. This regular self-assessment process also enhances the ability of the Core Team to keep the project mission and vision at the forefront of their work with the State Team and other stakeholders. In addition to establishing more regular progress and process reviews, another strategy for enhancing a site’s shared accountability for project outcomes is to

ensure that the Core Team and the Oversight Committee determine their input and review process for refining and finalizing their deliverables at the outset.

Finally, and most critically, evaluation planning will be incorporated into the Scope of Work for future sites, beginning in Round 3. This will establish a deliverable that concretely addresses how sites will evaluate their progress in achieving the intended outcomes of the products they develop. Mid-year self-assessments will continue to be administered as a means to assess the state's progress in meeting the deliverables in their Scope of Work, including the timeliness of their progress. The mid-year assessments have been slightly modified to include questions about how the sites will evaluate whether they have met their intended outcomes for each product. Questions have also been added which ask if the necessary resources are in place and if the right parties are committed to make measurable success a real possibility in their site, if there is agreement among the Core Team and State Advisory Team about how success will be defined and measured, and what are the primary challenges that the site has faced to date with the IDTA project.

In addition, evaluation as to the sites' success in completing their Scope of Work will continue to be conducted at the close of the IDTA process, when NCSACW gathers the sites' products. For sites that will be receiving IDTA past the 12-15 month contract period, additional evaluation will be built into the "aftercare" period that assesses their continued progress in meeting the project goals.

Managing Collaborative Relationships

It is no secret that the cultivation of collaborative relationships requires patience, sensitivity and a degree of tenacity. Philosophical, political, and even personal differences invariably arise as these relationships evolve, which can either derail the process or serve as learning opportunities for the team as they come face to face with the nuances of one another's culture and "quirks." In order to weather these challenges positively, it is critical to keep the project vision and purpose at the forefront. The CL can facilitate this by recognizing that team relationships must be developed, monitored encouraged throughout the collaborative process. Additionally, it is important to help the Core Team remember that it is equally important to tend to vertical relationships (ensuring that leadership remains informed, supportive, and engaged) as to horizontal relationships (ensuring that the process is inclusive, trust is fostered, and communication is well-managed.) In order to do this, the levels of authority for each relationship need to be understood, as well as how expectations are both fashioned and perceived as they pertain to the relationship.

7. Summary

Since the initial kick-off meetings for Round 2 IDTA were held in early 2005, each site has made important strides in developing their collaborative capacity to better address the needs of the children and families that make up their priority population. The IDTA consultants assisted each site in utilizing the 10-element framework to guide them through the process of planning, visioning, and developing goals and products that strengthen system linkages and have practical application for implementation.

Each site was able to leverage the products and resources developed in Round 1 in ways that built upon their respective jurisdictions' strengths and was responsive to regionally specific needs. In addition, the Round 2 sites have assessed their training needs and have begun to develop longer-term strategic plans that address the implementation of system-

wide changes. Almost every site found creative ways to incorporate their work into the existing institutional “fabric” of the lead systems, to varying extents.

The opportunity is ripe for the cross-system gains in these sites to be leveraged to positively impact other systems, such as mental health, education, and public health, and to improve cross-system effectiveness in general. The linkages established as a result of the IDTA have already served to broaden the network of stakeholders in each site which share common concerns and interests. While their work is far from complete, these four sites are poised to serve as models for future IDTA recipients as well as other jurisdictions that are interested in developing or strengthening collaboration between child welfare services, substance abuse services, and dependency courts.

Appendix 1: Collaborative Capacity Instrument Scores

In Arkansas, there were 7 core team members who completed the baseline assessment and 10 core team members who completed the reassessment. For Arkansas, there was an increase in six of the 10 elements over time, with the largest being in the areas of "Daily Practice - Services to Children of Substance Abusers" (25.3%) and "Training and Staff Development" (21.1%). Increases were also seen in the areas of "Underlying Values and Principles of Collaborative Relationships," "Daily Practice - Client Engagement and Retention in Care," "Information Sharing and Data Systems," and "Working with Related Agencies." In Arkansas, there were decreases in the perceived collaboration levels in four areas: "Daily Practice - Client Screening and Assessment," "Joint Accountability and Shared Outcomes," "Budgeting and Program Sustainability" and "Working with Community and Supporting Families."

Massachusetts had 12 core team members who completed the baseline CCI and 19 core team members who completed the reassessment. In Massachusetts, increases were seen in nine of the 10 areas of collaboration. The largest changes were seen in the areas of "Joint Accountability and Shared Outcomes" (26.1%) and "Information Sharing and Data Systems" (22.7%). The smallest change was seen in the area of "Daily Practice - Client Engagement and Retention in Care." As with Arkansas, there was also a decrease in the area of "Budgeting and Program Sustainability."

As discussed earlier, there was an unusually large number of people who completed the baseline CCI in Minnesota (n=182). There were 17 core team members who completed the reassessment. Minnesota saw increases in six of the 10 areas of collaboration. The area with the largest increase in perceived collaboration was in "Underlying Values and Principles of Collaborative Relationships" (29.6%). Other areas experiencing increases were: "Daily Practice - Services to Children of Substance Abusers," "Joint Accountability and Shared Outcomes," "Training and Staff Development," "Budgeting and Program Sustainability" and "Working with Related Agencies." Decreases occurred in the areas of "Daily Practice - Client Screening and Assessment," "Daily Practice - Client Engagement and Retention in Care" "Information Sharing and Data Systems" and "Working with Community and Supporting Families."

Finally, in the Squaxin Tribe, there were 8 core team members who completed a baseline CCI and only 3 who completed the reassessment. Results indicate increases in all 10 areas of collaboration. It is important to note that only 3 post-IDTA CCI's were completed. Thus, it is not clear if these three respondents are truly reflective of the entire core team from Squaxin. The largest increase came in the area of "Training and Staff Development" (63.4%). Other notable increases were seen in "Daily Practice - Client Engagement and Retention in Care" and "Daily Practice - Services to Children of Substance Abusers." The smallest change was seen in the area of "Budgeting and Program Sustainability."

The table below presents pre and post mean scores for all the Sites combined and individually. Change scores are also presented indicated the percent change in score from baseline to reassessment.

Elements of System Linkages	Baseline	Reassessment	Change Score (%)
Summary Totals for All Sites	n=209	n=49	
Underlying Values and Principles of Collaborative Relationships	1.95	2.36	21.0*
Daily Practice - Client Screening and Assessment	1.69	1.79	5.9
Daily Practice - Client Engagement and Retention in Care	1.68	1.90	13.1
Daily Practice - Services to Children of Substance Abusers	1.39	1.75	25.9*
Joint Accountability and Shared Outcomes	1.55	1.85	19.4
Information Sharing and Data Systems	1.42	1.63	14.8
Training and Staff Development	1.41	1.77	25.5
Budgeting and Program Sustainability	1.77	1.76	-0.6
Working with Related Agencies	1.82	2.17	19.2
Working with Community and Supporting Families	1.69	1.85	9.5
Arkansas	n=7	n=10	
Underlying Values and Principles of Collaborative Relationships	1.98	2.33	17.7
Daily Practice - Client Screening and Assessment	1.88	1.74	-7.4
Daily Practice - Client Engagement and Retention in Care	1.71	1.80	5.3
Daily Practice - Services to Children of Substance Abusers	1.50	1.88	25.3
Joint Accountability and Shared Outcomes	1.85	1.81	-2.2
Information Sharing and Data Systems	1.47	1.70	15.6
Training and Staff Development	1.47	1.78	21.1
Budgeting and Program Sustainability	2.17	1.87	-13.8
Working with Related Agencies	1.83	2.07	13.1
Working with Community and Supporting Families	1.88	1.86	-1.1
Massachusetts	n=12	n=19	
Underlying Values and Principles of Collaborative Relationships	1.99	2.21	11.1
Daily Practice - Client Screening and Assessment	1.48	1.66	12.2
Daily Practice - Client Engagement and Retention in Care	1.48	1.53	3.4
Daily Practice - Services to Children of Substance Abusers	1.30	2.58	16.2
Joint Accountability and Shared Outcomes	1.34	1.51	26.1
Information Sharing and Data Systems	1.28	1.69	22.7
Training and Staff Development	1.34	1.57	18.7

Budgeting and Program Sustainability	1.80	1.59	-6.7
Working with Related Agencies	1.70	1.68	11.2
Working with Community and Supporting Families	1.68	1.89	7.1
Minnesota	n=182	n=17	
Underlying Values and Principles of Collaborative Relationships	2.03	2.63	29.6
Daily Practice - Client Screening and Assessment	1.96	1.94	-1.0
Daily Practice - Client Engagement and Retention in Care	2.05	1.98	-3.4
Daily Practice - Services to Children of Substance Abusers	1.61	1.84	14.3
Joint Accountability and Shared Outcomes	1.70	2.01	18.2
Information Sharing and Data Systems	1.73	1.67	-3.5
Training and Staff Development	1.70	1.82	7.1
Budgeting and Program Sustainability	1.76	1.99	13.1
Working with Related Agencies	2.06	2.23	8.3
Working with Community and Supporting Families	1.96	1.94	-1.0
Squaxin Tribe	n=8	n=3	
Underlying Values and Principles of Collaborative Relationships	1.80	2.28	26.7
Daily Practice - Client Screening and Assessment	1.42	1.82	28.2
Daily Practice - Client Engagement and Retention in Care	1.46	2.29	56.9
Daily Practice - Services to Children of Substance Abusers	1.13	1.75	54.9
Joint Accountability and Shared Outcomes	1.30	1.87	43.9
Information Sharing and Data Systems	1.18	1.58	33.9
Training and Staff Development	1.11	1.88	63.4
Budgeting and Program Sustainability	1.35	1.50	11.1
Working with Related Agencies	1.69	2.50	47.9
Working with Community and Supporting Families	1.24	1.87	45.2

Note: *p<.05, **p<.01, *p<.001**

Appendix 2: Cross-Site and Drug Court Site Visit Evaluation

The following table summarizes the mean score for each item in the evaluation:

Item	Mean	N
1. How satisfied are you with the overall quality of the cross site meeting and the dependency drug court visit?	4.54	26
2. How satisfied are you with the quality of the information/instruction from this meeting?	4.50	26
3. How satisfied are you with the quality of the meeting materials?	4.62	26
4. Overall, how satisfied are you with the meeting experience?	4.54	26
5. The morning session introducing the Federal Staff and the sites was useful.	4.04	23
6. The discussion of the collaborative framework and tool was informative.	4.04	23
7. I found the Day 1 background discussion of Sacramento's Dependency Drug Court to be helpful.	4.27	22
8. The working lunch and dinner with my state team and consultant liaison was beneficial.	3.78	20
9. Hearing about the Specialized Treatment and Recovery Specialists (STARS) Program on Day 2 was informative.	4.67	24
10. Learning about the court component of the dependency drug court was helpful.	4.57	21
11. I enjoyed the panel discussion with Sacramento Dependency Drug Court participants.	4.63	24
12. Learning about the attorney's roles and perspectives during the lunch with the attorneys was useful.	4.38	24
13. Observing the dependency court proceeding was of value to me.	4.61	23
14. The discussion on the evaluation findings of the Dependency Drug Court was beneficial.	4.26	23
15. I found the Day 3 discussions on the "Lessons Learned" to be helpful.	4.24	23
16. The breakout sessions by state were useful.	4.63	23
17. The discussion on the screening and assessment for family engagement, retention, and recovery (SAFERR) was informative.	4.14	14
18. The meeting was well organized.	4.62	26
19. The material presented in this meeting will be useful to me in dealing with substance abuse issues in my state.	4.46	24
20. The material presented in this meeting will be useful to me in dealing with child welfare issues in my state.	4.33	24
21. The material presented in this meeting will be useful to me in addressing dependency court issues in my state.	4.23	26
22. I expect to use the information gained from this meeting.	4.58	26
23. I expect this meeting to benefit the clients in my State/Tribe.	4.38	26
24. This meeting was relevant to substance abuse treatment.	4.28	25
25. Overall, how useful was the information you received?	4.54	24

Appendix 3: Round Two Closing Evaluations

The following table summarizes the mean score for each item in the Round Two Closing evaluation:

Item	Mean	N
1. Overall, NCSACW met its goals of providing in-depth technical assistance as they were explained at the kick-off meeting and in correspondence.	4.26	29
2. Overall, the State's (or Tribe's) goals for technical assistance were met, as they were described in our application and at the kick-off meeting.	4.05	30
3. The technical assistance that was provided helped to create or improve relationships among agencies and systems.	4.17	30
4. The cross-site meeting added value to the IDTA process.	4.14	28
5. The products that were developed will be useful to our state/tribe.	4.17	30
6. The length of the time that the IDTA was provided was sufficient.	3.88	20
7. We have already implemented some of the changes that were developed during the IDTA process.	3.62	29
8. The consultant liaison was helpful in bringing us information or resources.	4.28	30
9. The consultant liaison was helpful in:		
Keeping us on schedule	4.26	29
Guiding us in making decisions	4.08	30
Addressing problems that arose	3.95	29
10. Overall, how useful was the IDTA program?	4.47	29

Appendix 4: Arkansas Products

List of Completed Products:

- Memorandum of Understanding
- Protocol (draft, not ready for distribution)
- Arkansas Department of Health and Human Services Family Strengths, Needs and Risk Assessment

Memorandum of Understanding for the Arkansas Department of Health and Human Services,
Administrative Office of the Courts and the Arkansas Department of Workforce Services

The Arkansas Department of Health and Human Services (DHHS) the Administrative Office of the Courts (AOC), and the Arkansas Department of Workforce Services, (DWS) do hereby enter into this Memorandum of Understanding (MOU) to develop and implement an integrated and coordinated response to the problems of parental substance abuse in child maltreatment and neglect cases.

The parties agree as follows:

1. This agreement sets forth the intention of the parties to commit their time and efforts towards the goals set forth in the Work Plan Summary of Products (the Work Plan) attached and incorporated herein as Exhibit "A".
2. All parties agree to use their best efforts to accomplish the action steps within the timeframes for completion set forth in the Work Plan
3. This agreement shall be in effect from the date of execution and approval by all required parties.

IN WITNESS WHEREOF, the parties hereto have executed this agreement as evidenced by their signatures below, this _____ day of August, 2006.

ARKANSAS DEPARTMENT OF HEALTH AND HUMAN SERVICES

John Selig, Director

Signature

Date

THE ADMINISTRATIVE OFFICE OF THE COURTS

J.D. Gingerich, Deputy Director

Signature

Date

THE ARKANSAS DEPARTMENT OF WORKFORCE SERVICES

Artee Williams, Director

Signature

Date

08/05/2006

Appendix 5: Massachusetts Products

List of Completed Products:

- Memorandum of Understanding
- Shared Principles and Values
- Engagement Model Concept Paper
- Family Engagement Consumer Focus Group Summaries
- Wampanoag Tribe of Gay Head (Aquinnah) Summary of Products

Appendix 6: Minnesota Products

List of Completed Products:

- Statement of Shared Values
- Catch the Vision Tool Kit of Recommended Practices for Working with Families
- Parent Partner Job Description
- Parent Partner Handbook
- CJI-AOD Training Plan
- CJI-AOD Recommendations for Sustainability
- Focus Group PowerPoint Presentation
- Parent Focus Group Summary
- Parent Partner Research Summary
- Collaborative Communication Structure and Protocol
- CJI-AOD Website: <http://www.courts.state.mn.us/?page=642>

Appendix 7: Squaxin Island Products

List of Completed Products:

- Critical Path for Responding to Youth in Need of Care
- Guidance on Forming a Family Wellness Team
- A Guide to the Squaxin Island Tribe's Youth Court
- A Guide for Parents in the Squaxin Island Tribe's Youth Court
- Guardianship Procedures Checklist
- Procedure and Review Checklist for Termination of Parental Rights
- Northwest Indian Treatment Center Consent for the Release and Exchange of Confidential Information Form
- Squaxin Island Tribal Court Forms
- Working Agreement between the Squaxin Island Tribal Family Services and the Mason County Division of Children and Family Services – Shelton Office

Endnotes

¹ B. Radin, (1997) *Technical Assistance in the U.S. Department of Health and Human Services, Report of the Technical Assistance and Training Liaison Work Group*. Washington, D.C.: DHHS.

² Adelman, H. Personal communication, January 2005. www.smhp.ucla.edu

³ Drabble, L. (2005, February). *Pathways to Collaboration: Understanding the role of values and system-related factors that contribute to the adoption of promising practices between child welfare and drug systems. Summary of Research Project Findings*. Report to CalSWEC Research and Development Committee. San Jose, CA: San Jose State University College of Social Work.