

HUMAN SERVICES HEALERS IN COVID-19: Policy, Practice and Advocacy Implications



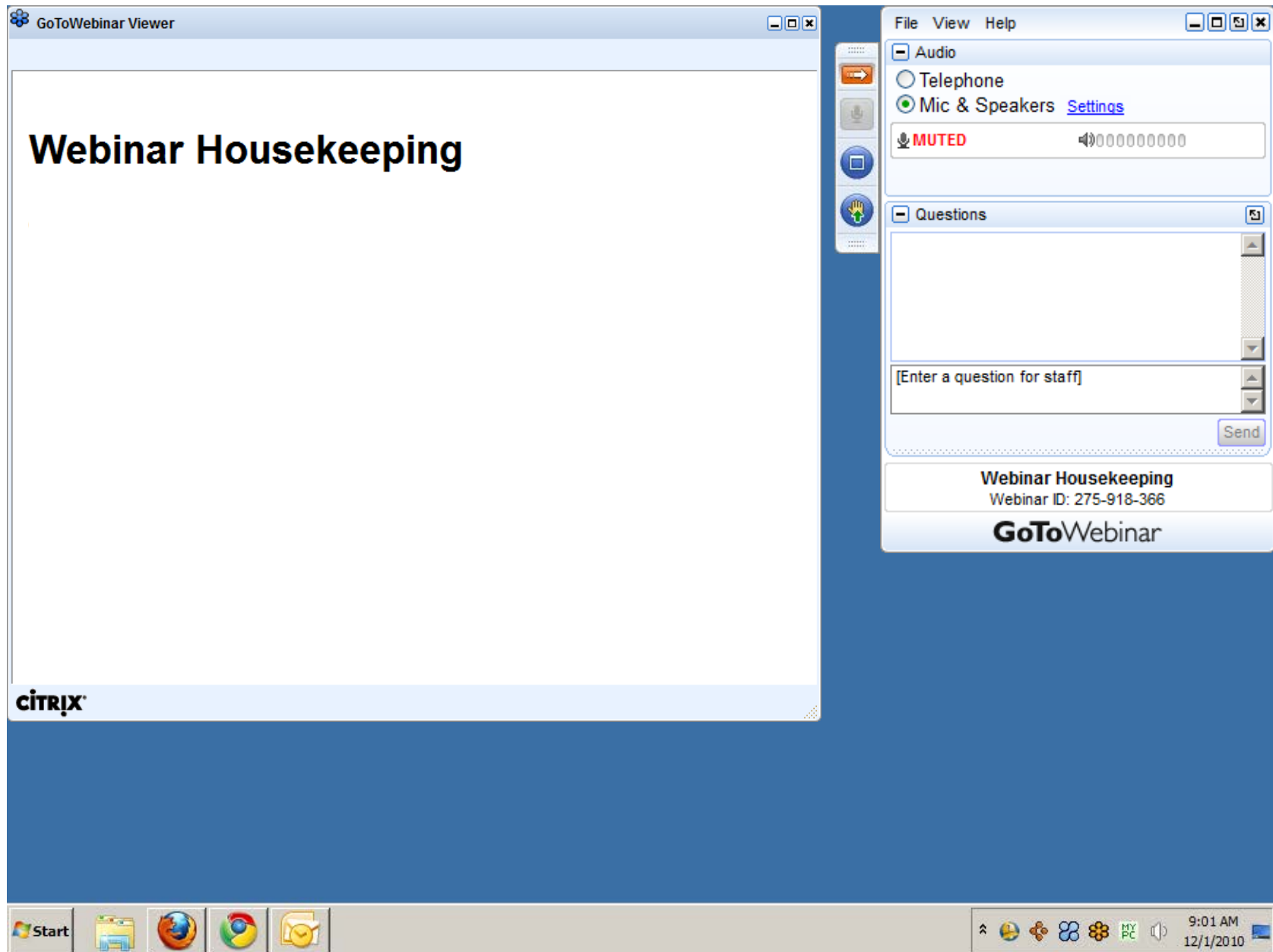
**Responding to
the Needs of
Family: A
Practitioners
Perspective
Amid COVID 19**

Hosted and Moderated by:

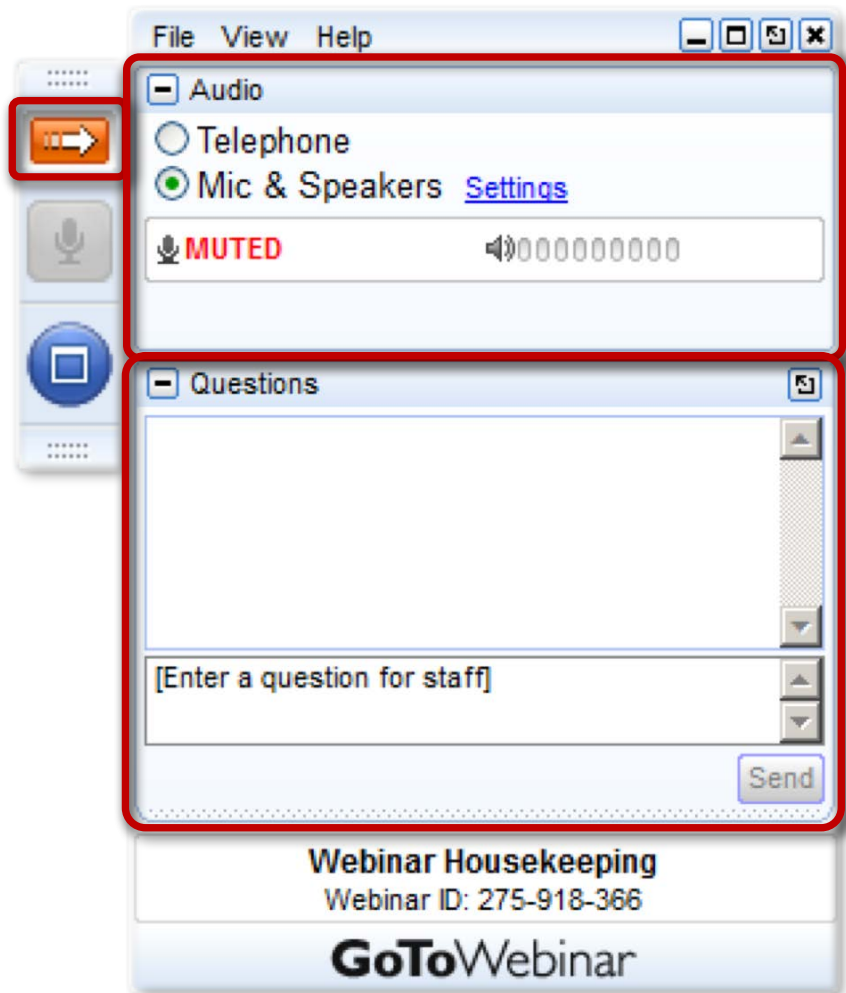


KINSHIP *Insight* Solutions
LLC

GoToWebinar Housekeeping: what your attendees see



GoToWebinar Housekeeping: attendee participation



Your Participation

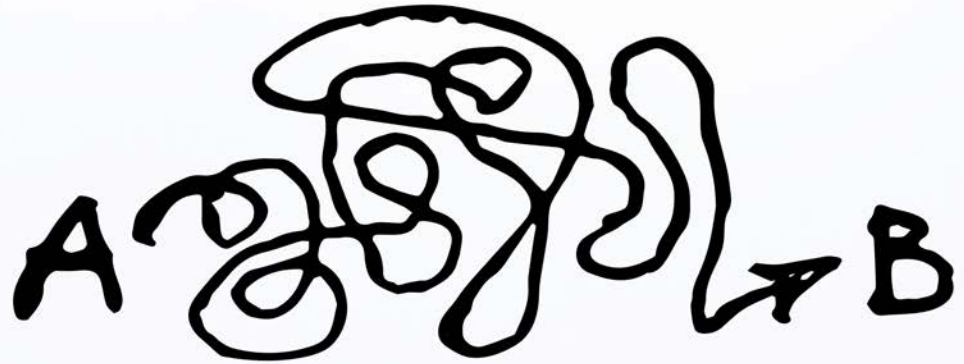
Open and close your control panel

Join audio:

- Choose **Mic & Speakers** to use VoIP
- Choose **Telephone** and dial using the information provided

Submit questions and comments via the Questions panel

Note: Today's presentation is being recorded and will be provided within 48 hours.



Purpose

Describe tactical strategies and interventions needed to maintain high levels of family engagement that help ensure safety and well-being for children, their families and our staff during the COVID-19 pandemic.

Speak to the comprehensive plans and strategies needed to address the unique challenges human services is facing in COVID 19 pandemic.

COVID 19

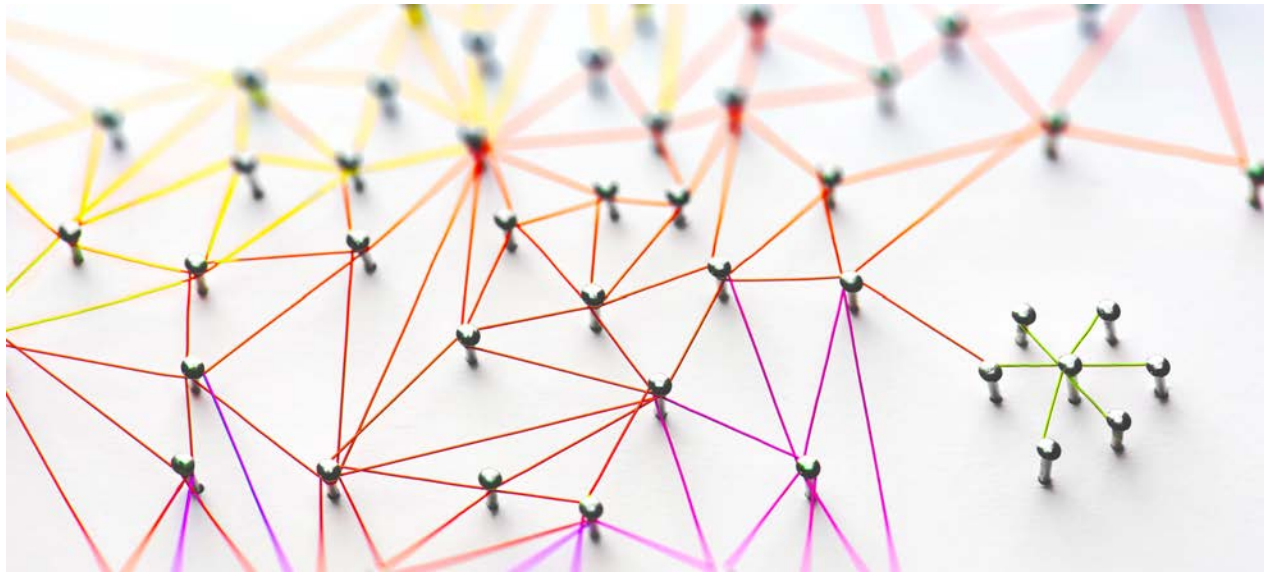
Speaking to Specific Administrative Strategy

Tara Skibiel, MSW, LCSW

EVP, Child and Family Services, A Second Chance, Inc. Pittsburgh

Caitlin Price, MSW, LSW

EVP, Child and Family Services, A Second Chance, Inc. Philadelphia



High Level of Communication

1. Communication regarding changes and updates have been sent to our families via email, text, website and phone call.
2. Consistent communication via phone call and email with our partners like the County and Community Umbrella Agencies.
3. Immediate launch of COVID Crisis Line for engagement of triad



Data Tracking for Safety and Wellbeing:

1. Homes were triaged into High, medium and low risks categories to help to better assist the families and prioritize the work.
2. Daily report – we are speaking with our teams daily to ascertain any challenges and verify the work being completed.
3. Tracking tools were developed to have full accessibility to the information in order to make the best point in time decisions.

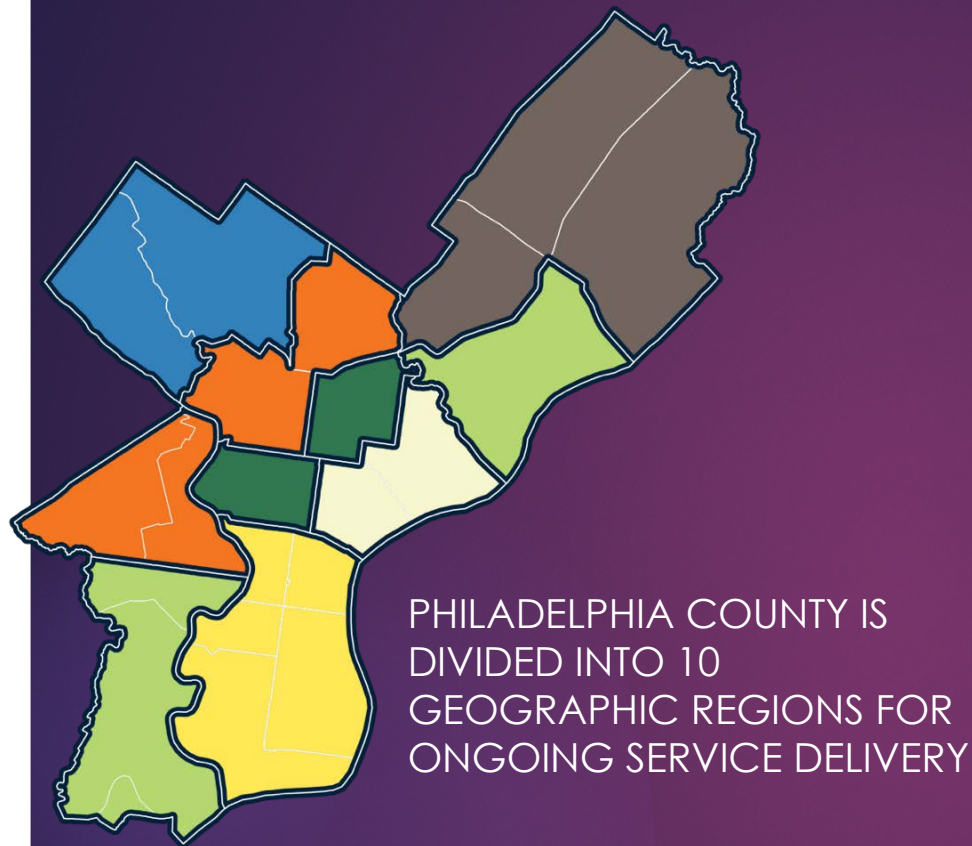


Technology for Engagement:

- We ensured that our families and workers had the necessary technology to be successful.
- We set-up trainings for staff and families to understand how to conduct a virtual visit and what the expectation would be.
- We were creative in our use of technology by still able to hold FGDM conference, youth engagement groups, clinical sessions and other essential services
- Launch of Family Wellness Warmline.

Child Welfare Case Management Services

Working to ensure the safety and well being of children, while supporting the professionals and staying connected to system partners, amid covid-19



PHILADELPHIA COUNTY IS
DIVIDED INTO 10
GEOGRAPHIC REGIONS FOR
ONGOING SERVICE DELIVERY

Philadelphia Department of Human Services (DHS) investigates all reports of child abuse or neglect

All cases opened for service are assigned to the Community Umbrella Agency (CUA) for that region

CUA provides a continuum of services (in home, placement, permanency), to safe case closure

10 CUAs are located in a defined geographic area

CUAs are accountable to DHS, families served, system partners, and local community stakeholders

Safety & Well-Being of Children and Families Served

Virtual Connections:

- ▶ Consistent virtual contact with families
- ▶ Video conferencing for home walk-throughs and assessments
- ▶ Video conferencing for visits between parents and children in care
- ▶ Resource sharing
- ▶ Utilizing social media platforms
- ▶ Hosting virtual parent and caregiver support platforms
- ▶ Virtual incentives and give-aways



Safety & Well-Being of Children and Families Served



Physical Connections:

- ▶ Deliveries of concrete goods (food, toiletries, basic necessities)
- ▶ Utilizing donors for creative concrete supports (tables for home schooling)
- ▶ In person safety visits as needed (emergencies, placement moves or disruptions, transports)
- ▶ Some families do not have smart phones with ability for video calling

Supporting the Professionals

Virtual Supports:

- ▶ Consistent virtual communication from direct supervisor
- ▶ Video calls for weekly Supervisions and Team Meetings
- ▶ Resource and idea sharing, for use as professionals as well as personally with our families at home
- ▶ Keeping social media platforms updated with information
- ▶ Additional IT funds would support enhanced virtual service delivery



Supporting the Professionals



Physical Supports:

- ▶ Equipment with IT support (laptop, smart phone, hot spot, network & WIFI access)
- ▶ Minimize staff presence at office as much as possible
- ▶ Minimize staff face to face contact as much as possible
- ▶ Maximize work with minimal travel time
- ▶ Provide sanitary gloves, sanitizer, and face masks (as able) for necessary in-person visits

Staying Connected to System Partners

Why Important:

- ▶ Various system partners are working with, and advocating for, mutual client families
- ▶ Being on the same page as a system will mitigate confusion for children and families being served
- ▶ Offering joint virtual conferences with partners can minimize the number of virtual visits for families
- ▶ Ensuring available resources are obtained from system partners (ie laptops)
- ▶ If system partners have collective needs and ideas, we are able to advocate for them as a system, together



Staying Connected to System Partners



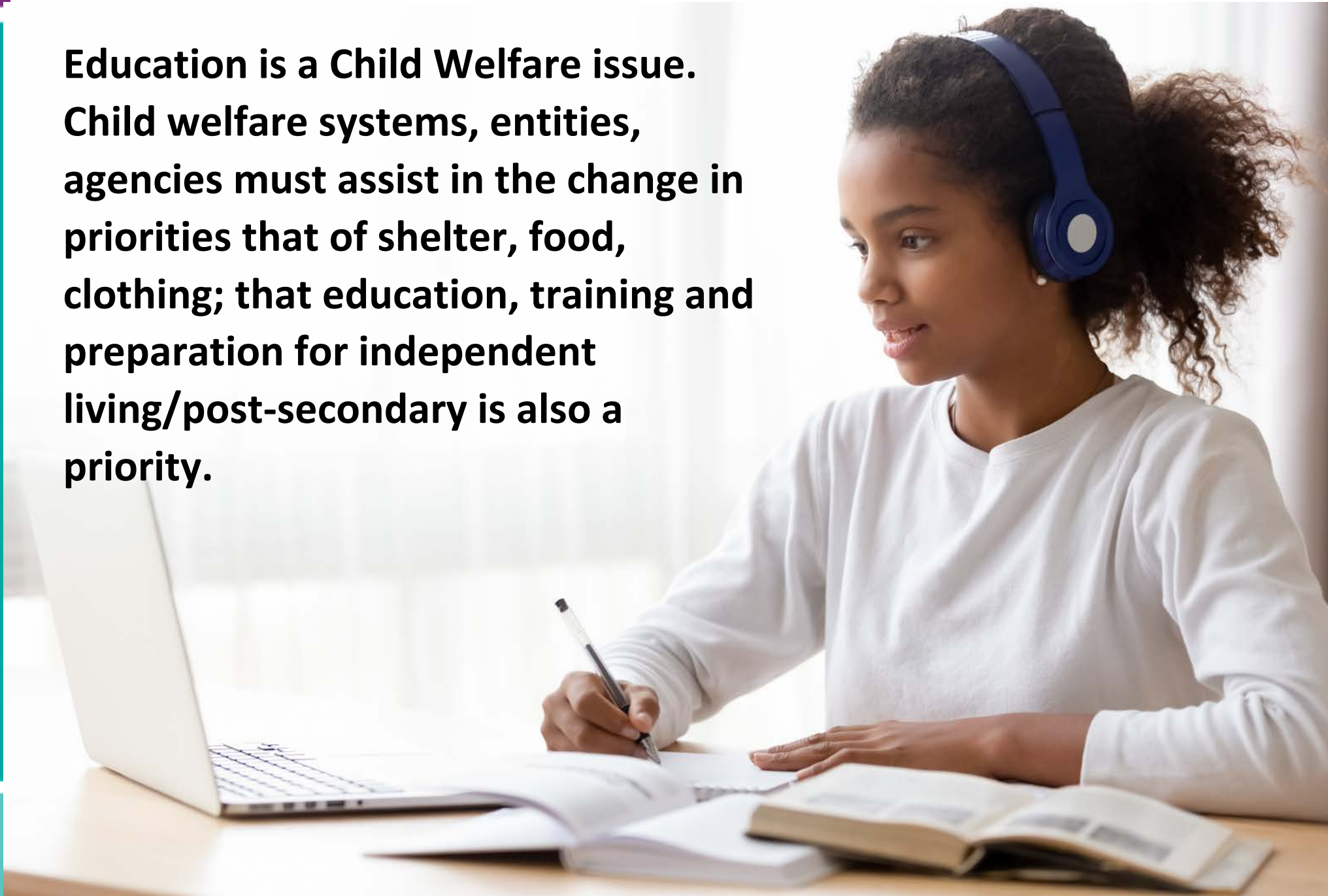
How We Stay Connected:

- ▶ Consistent virtual platform opportunities
- ▶ Utilizing these platform opportunities
- ▶ Providing updates to, and asking questions of, one another
- ▶ Keep social media platforms updated with resources and virtual events
- ▶ Virtual case reviews, weekly
- ▶ Being open to new ideas from all stakeholders for positive long-term change to come from COVID-19



Dr. Christine Taylor, Education Liaison
A Second Chance, Inc.

Education is a Child Welfare issue. Child welfare systems, entities, agencies must assist in the change in priorities that of shelter, food, clothing; that education, training and preparation for independent living/post-secondary is also a priority.



According to 2010 Census data; stated in a 2019 Associated Press Report, 3 Million students in the United States do not have internet in their home. 18% do not have home access to broadband internet.





Change in the current and perhaps future “social distancing” has suddenly included the responsibility of education, training, and instructional delivery in the hands of “Caregivers”.

Leading and navigating a
public private partnership
during a pandemic



Uncharted Waters

How do you share
knowledge, passion,
and energy to bolster
partnerships?

How do you maintain an
aligned mission and
vision with your
partners?

Is everyone aware of
the mission?

What strategic visions
are essential right now?

How to incorporate the
3M's into current day to
day?

WHAT'S ESSENTIAL

- Stewards of the information
- Constant check ins at each level
- Monitor daily Input and output
- Prioritize the essential
- Plan with others
- Share and advocate



How we communicate

- Daily provider calls
- Work groups on essential services
- Updates at: <https://bit.ly/COVID19DHSProviders>
 - The previous link: <https://www.allegheycountyanalytics.us/index.php/2020/03/17/information-for-dhs-staff-and-providers/> will redirect here

Ask questions at: DHS-COVID19Planning@allegheycounty.us

- Providers, DHS staff can join the daily calls by registering:

"REGISTRATION for DHS / Provider Touchpoint on COVID-19":
<https://forms.office.com/Pages/ResponsePage.aspx?id=EJ0n4MvksU6fcl6FvuWjUkxQI749jdHphHNKdg0g-tUNzNBMOIEQzBNS0ZCNFNVMERET0czWVE5NC4u>

Essential Service Status Snapshot

Essential Service	Overall Service Capability Ability to serve those in need	Staffing Rating Are there enough people to deliver service?	Supplies Rating Does service have necessary supplies?	Service Locations Rating Are there safe places to deliver service?	Funding Rating Does service have enough funds?
Food: for Seniors	At Risk	At Risk	Unstable	Stable	Stable
Aging Services - Elder abuse investigations, in-home services & other critical aging services	Stable	Stable	Unstable	Stable	Stable
Food: for Broader Community	At Risk	At Risk	Unstable	At Risk	Stable
Childcare for essential employees, including first responders	At Risk	At Risk	Unstable	At Risk	Stable
Services for people experiencing homelessness or in supportive housing	At Risk	At Risk	Unstable	At Risk	Stable
Behavioral health: acute, crisis and residential care	At Risk	At Risk	Unstable	At Risk	At Risk
Early Intervention	Stable	Stable	Unstable	At Risk	Stable
Transportation to essential medical and social services	At Risk	At Risk	Unstable	At Risk	Stable
Child welfare critical services, hotline, investigations, required visits, group care	At Risk	Stable	Unstable	Unstable	Stable
Intellectual Disabilities and Autism services	Stable	Stable	Unstable	Stable	Stable

Last Updated:

<https://forms.office.com/Pages/ResponsePage.aspx?id=EJ0n4MvksU6fcl6FvuWjUkxQI749jdHphHNKdg0g-tUNzNBMOIEQzBNS0ZCNFNVMERET0czWVE5NC4u>

10

DAILY 60-MINUTE DAILY DEBRIEF

- Health
- Legislative updates
- Essential services
- Resources

- Measure current operations
- Define who is most at risk
- Determine the pain points
- Engage staff and providers in planning
- Prioritize the critical
- Implement & Analyze
- Be fluid and flexible

ASCI Webinars - A Second COVID-19 Information for Covid-19-Daily-Provide

https://dhstraumaresourcelibrary.alleghe.../wp-content/uploads/2020/03/Covid-19-Daily-Provider-Briefing-3_27_20.pdf

7 of 48 Contents

Fit to width Page view Read aloud Add notes

Child Welfare Referrals	Average Daily			
	Feb. 26- Mar. 8	Mar. 9 - Mar. 25	% Change	
	Referrals	52	34	-52%

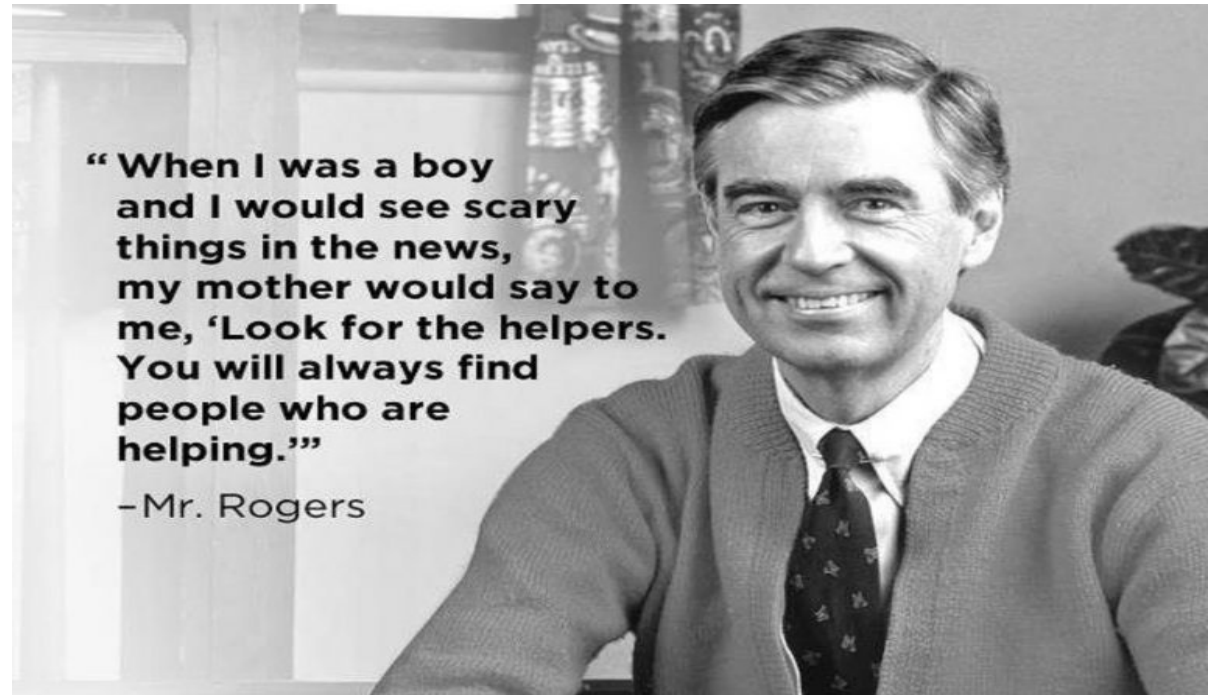
Child Welfare Placement Point-in-time	March 8, 2020			March 27, 2020	% Change
	No. of Children in CYF Placement				
	1,543	1,546	0%		

Shelter and LINK	Average Daily			
	Feb. 29- Mar. 8	Mar. 9 -Mar. 27	% Change	
	People in emergency shelters	371	379	2%
	People calling LINK	151	117	-29%

MH	Average Daily			
	Feb. 26- Mar. 8	Mar. 9 -Mar. 27	% Change	
	MH Information Referral and Emergency Calls (IRES)			
	33	27	-23%	
MH Petitions (IRES)				
17	15	-16%		
Calls to RESOLVE				
176	175	0%		

Aging Services Calls	Average Daily			
	Feb. 25- Mar. 8	Mar. 9 - Mar. 27	% Change	
	Calls to Senior Line			
	170	169	-1%	

Elder Abuse	Average Daily			
	Feb. 25- Mar. 8	Mar. 9 -Mar. 27	% Change	
	Calls to Older Protective Services			
	48	31	-53%	
Abuse reports				
21	15	-35%		




This too shall pass. How will you respond next?

Jacki.hoover@alleghenycounty.us

(412)350-5799

<https://www.alleghenycounty.us/human-services/index.aspx>

The background of the slide is a dense, abstract composition of three-dimensional numbers. The numbers, including digits 0 through 9, are rendered in a light blue or cyan color and are oriented in various directions, creating a sense of depth and movement. They appear to be floating or stacked, with some numbers being larger and more prominent than others. The overall effect is a complex, data-like texture.

DATA: What are the challenges of managing data in the Era of COVID-19

◆ James T. Freeman, PhD.,
LCSW

How are the Children: Using Data to Tell the Story



Data Collection



Family Assessment



Performance Monitoring

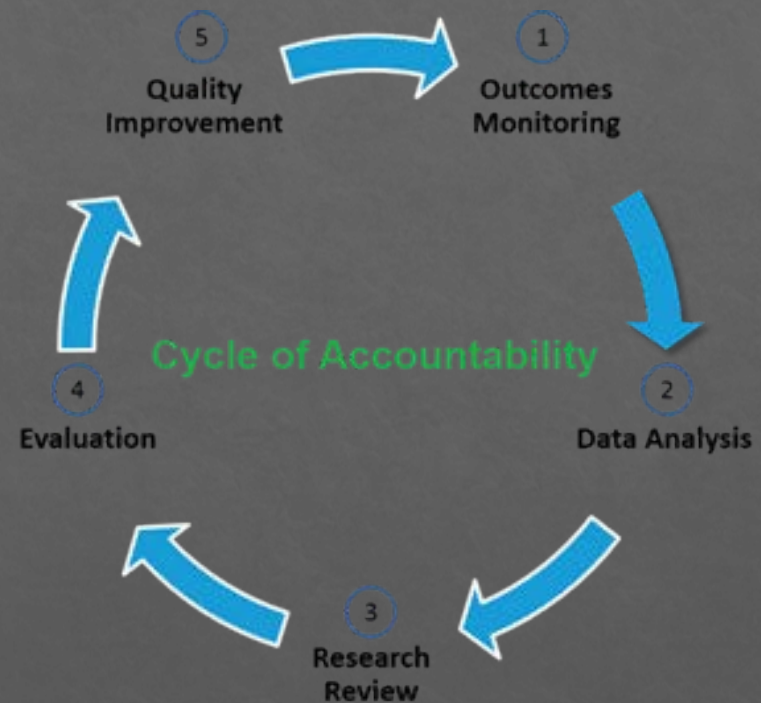
Data Impact

- ◆ Management Relationships
- ◆ Ensuring Data Entry (what are the check in procedures)
- ◆ Emergency reporting procedures and ensuring this data is captured and shared
- ◆ Collecting information/data on families' preparedness for virtual engagement, assessment and intervention
- ◆ Identifying the gaps

Challenges and Threats

- ❖ **Outcome Monitoring** includes activities required to define, validate, implement and monitor outcome measures throughout the Child Welfare Community. In this phase, outcome goals are defined, valid and reliable performance measures are constructed and data is collected to evaluate and corroborate performance.
- ❖ **Data Analysis** encompasses approaches and procedures required to critically analyze performance results to determine if variances noted are in fact issues which should be explored further.
- ❖ **Research Review** is a series of activities employed to gather and to validate evidence to support interventions
- ❖ **Evaluation** includes the activities and procedures required to consider promising interventions for children and families to determine if implementation on a wider basis is warranted.
- ❖ **Quality Improvement** is an interrelated series of actions required to implement interventions across new domains, or to challenge, modify and test new assumptions about the underlying goals supporting the Child Welfare practice model.

The cycle of accountability comprises the following activity phases:



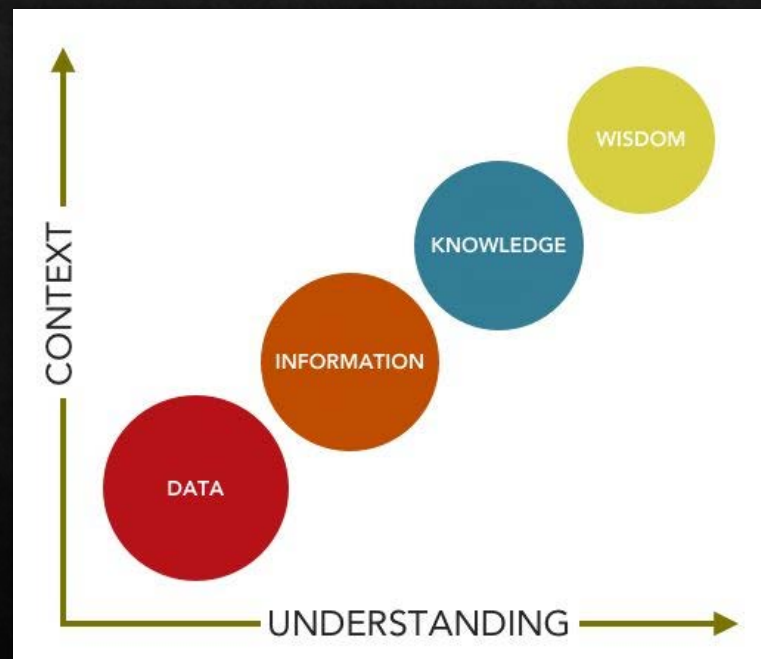
<https://ficw.fsu.edu/cycle-accountability>

Conclusion: How Does Best Practice Inform Our Work with Data

Highlighting the Counter Measures

- ◆ How will the agency/organizations practice model change post COVID-19
- ◆ Monitoring how families needs change during the interruption of the “normal” service delivery process
- ◆ Ensuring the racial and ethnic consideration have been assessed
- ◆ Collecting the feedback from families, staff and community partners

Tracking the “Lessons Learned”

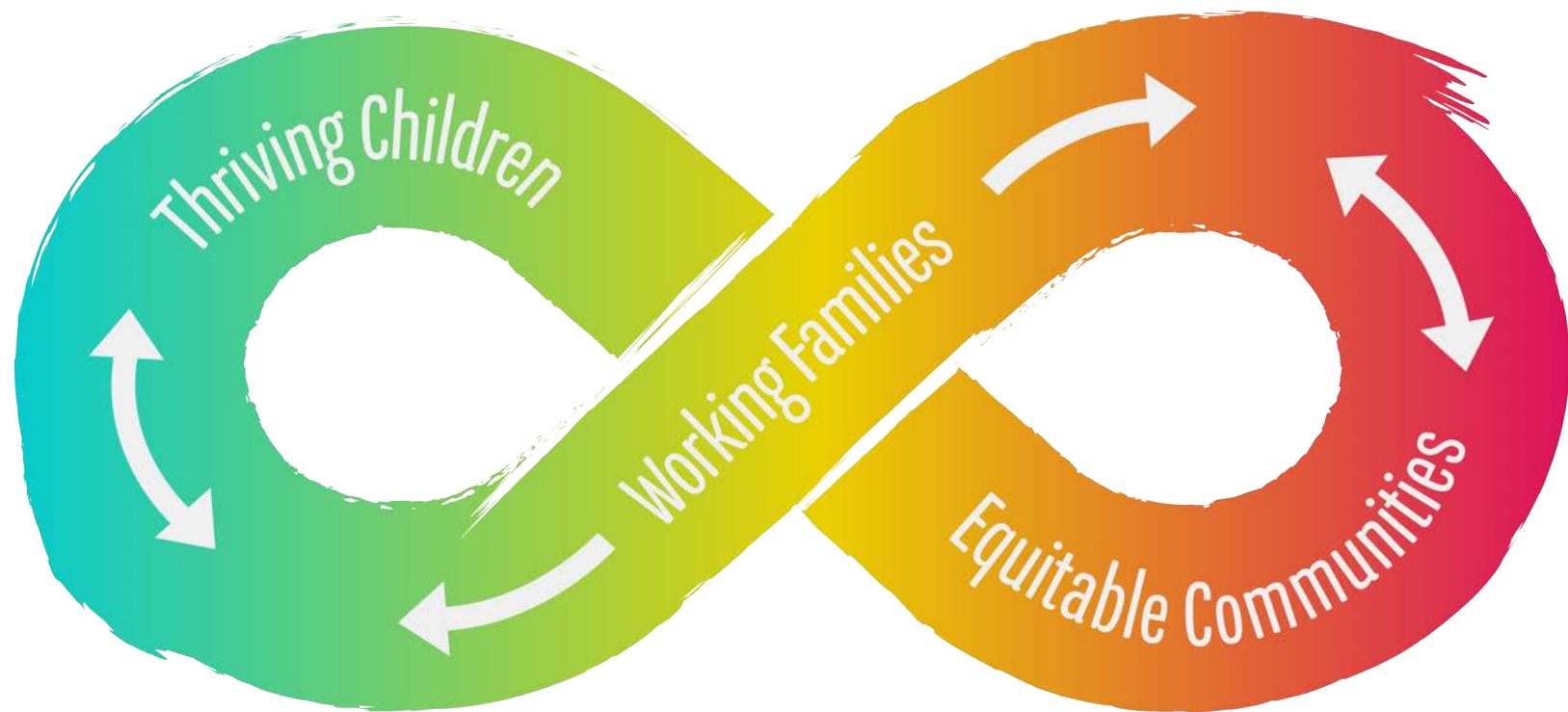


*Use the money as you please so long as it promotes
the health, happiness and well-being of children*

W.K. KELLOGG




CHILDREN. FAMILIES. COMMUNITIES.



DEEPENING RACIAL DISPARITIES

The COVID-19 pandemic has exposed and deepened existing health and well-being disparities within U.S. society.

Structural racial disparities:

- Chronic disease; Stress/weathering
 - Health care insurance, access and quality
 - Poverty and loss of income
 - Low-wage, forward-facing service jobs
 - Housing and density of living conditions; Transportation access
 - Environmental racism and pollution
 - Access to healthy food
 - Plumbing, running water, electricity
- 
- Race data matters: New Jersey, Illinois, Wisconsin, Michigan, Louisiana, other
 - Impact of centralized testing and treatment; Implications for rural communities and community health care
 - Denying / rationing medical care; bias

DOING JUSTICE / SERVING FAMILIES



Racial disparities similarly persist in experiences and outcomes for families and children who become involved with this nation's child welfare systems.


- Flexible funding; access to material supports and resources
- Access to high quality and culturally responsive social and emotional supports and resources
- Timely and frequent visits between children and their parents; in-person whenever possible
- Coordinated responses, visits, information sharing; technology



- Creative strategies for engaging fathers and members of the extended family network
- Collaborative planning and decision-making processes with families
- Well-being: school, friendships, etc.

CLARITY OF FOCUS AND VALUES

A clear focus on supporting and preserving families is arguably more important now than ever, especially during such a crisis as this.

- We have to safeguard against racial, ethnic and cultural bias – whether implicit or otherwise. This is an expression of racism.
 - Protecting family integrity is a priority.
 - Prolonged family separation is a source of harm and trauma for children and parents. Strengthening parent-child-sibling relationships is critically important.
 - Reunification as soon as a health and/or safety threat is no longer present must be a priority.
 - COVID-19 is not a safety threat by default. We must live into our reasonable efforts standards.
- 
- A photograph showing a woman with dark hair, wearing a black top and a red and blue patterned scarf, sitting at a table and feeding a young child with a spoon. The child is looking at the camera. In the background, there is a window with a red 'Open' sign and other people are visible, suggesting a public space like a cafe or a community center.
- ASFA timelines; agency discretion to not file for TPR in special circumstances
 - Importance of courts and attorneys
 - Good intentions, misguided efforts contribute to racial disparities.
 - What do we know? Data by race and ethnicity is an imperative.

CREATING JUSTICE: A NEW NORMAL

Our profession has for too long accepted racial disparities as 'normal'. We know how to support families. We must extend the best of our knowledge and resources to families who have been most marginalized.

- Our racialized pattern of outcomes does not reflect the best of our profession.
- Our social safety net systems consistently become more punitive and restrictive as the recipients become Blacker and Browner. Empathy is very much racialized.
- Targeted universalism is a better strategy.
- Our policies must evolve to reflect our knowledge of child and family development.
- This is the time for family-focused flexibility.



PLEASE STAY IN TOUCH



Oronde A. Miller

Program Officer, Racial Equity
and Community Engagement

W.K. Kellogg Foundation

Phone: (269) 213-6438

Email: oronde.miller@wkkf.org





**Failure will never overtake
me if my determination to
succeed is strong enough.**

Og Mandino

Let's stay determined together!

