**Community Partnership Reporting / Evaluation Form**

Name of CPPC Site: Indianola DCAT Cluster County(ies): Madison, Marion & Warren

Reporting Period: July 1, 2020- June 30, 2021 Coordinator(s): Sarah Gibson

Contact Information: shohanshelt@gmail.com or 515.468.8181

Check the Following: Proposed Plan [x]  Year-End[ ]

Community Partnership Reporting is based not only on the 4 strategies of Community Partnerships (Shared Decision Making, Neighborhood and Community Networking, Individualized Course of Action, and Policy and Practice Change) but also on the levels within each strategy. If you find yourself questioning how to complete this report, the CPPC Practice Guide should answer many of your questions both in planning and in capturing successes at year end.

CPPC funding runs on the state fiscal calendar July 1 - June 30. There will be two times reporting is due:

1. In the SPRING (May 15) where the yellow section will be completed to capture your proposed planning and projected goals for the upcoming fiscal year starting July 1. (Report with projected/future activities) The yellow section will be completed on a new report identifying your future goals.
2. In the SUMMER (August 15) where the green section will be completed to capture the goals achieved for the fiscal year that ended June 30. (Summary report with completed activities) The green section will be completed on a report that already has the yellow filled out and was submitted May 15 the prior year.

Starting on page 5, the blank columns entitled Ongoing, Proposed, Met need only be marked with an ‘x’, and the narrative should reflect any steps you are taking or have achieved. This is an active document utilized with your Shared Decision Making Team to give them investment/ownership in planning, allow them to share in the monitoring of progress, and recognize and celebrate successes. Whereas this report may appear long and prescriptive, it provides only a framework for growth and activity. This framework and reporting mechanism was developed with the input of many different coordinators from the start of CPPC in 2007. How you choose to grow and what activities you choose to promote growth have much flexibility.

The data from this report is captured in the Community Partnerships Brochures so communities may see how CPPC impacts the state in many ways. This data is also shared with the federal government and highlights the progressive nature of community initiatives in the state of Iowa. Thank you for your time and careful attention to this document.

Community Partnership Involvement Instructions & Definitions

Page 3 is to identify during planning and at year-end the composition and roles of individuals who are involved. Below are some helpful hints to assist you. Page 3 should be completed in planning and updated at year end.

* In the gray columns put the number of professional and the number of community members who are associated with the respective category.
* In the FTDM (ICA), Shared Decision-Making, Neighborhood Networking and Policy and Practice Change columns put a check mark if there are professionals and/or community members participating in these activities.
* Please do not duplicate numbers. Select one primary category for each person. The comment section may be useful to explain when more than one category applies to one person. If a person represents two or more categories, include the person in the number count of the primary role and check mark the gray column for the other categories and explain in the comment section.
* # of Community members involved – This number count is for those who are involved as volunteer community members and are associated with one of the categories listed. Examples: faith-based members can be volunteers if they are not being paid to attend, professional who volunteers but is not serving/participating as a representative in their official/professional capacity, substance abuse sponsor who is not being paid, volunteer advocate for domestic violence.
* # of Neighborhood/Community Members – these are individuals who are neighborhood/community residents or parents and are not associated with any of the other categories.
* FTDM (ICA) - those who are facilitators conducting FTDM defined by Iowa’s Standards.
* Shared Decision Making - those who are involved on the CPPC leadership committee(s).
* Practice Partners - includes social service agencies that do not fall under another category (i.e. in-home workers, early childhood programs, when applicable).
* Economic Supports - includes social service agencies that provide financial and basic-need supports (FaDSS's workers, Income Maintenance, Community Action Agency when applicable).
* Former Clients of DHS-anyone who has been involved in child protection services and is not a Parent Partner.
* Provide a total count and % for both the professional and community members involved.

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| **Community Partnership Involvement** |
| Partner (Categories) | **# of professionals involved\*** | FTDM (ICA)\*  | Shared Decision Making \*  | Neighborhood Networking \* | Policy and \* Practice Change\*✓ | **# of Comm. members involved\*** | FTDM (ICA) \* | Shared Decision-Making \*  | Neighborhood Networking \* | Policy and \* Practice Change  | Comments/Member Names |
| DHS | 7 |[ ] [x] [x] [x]   |[ ] [ ] [ ] [ ]   Jacqueline Stubbers, Kate Roy, Kelly Brown, Chad Hargin, Briahnna Wood, Tricia Worrall & Angela Crees |
| Decat | 1 |[x] [x] [x] [x]   |[ ] [ ] [ ] [ ]   Joe Burke, Teresa Burke |
| ECI | 1 |[ ] [x] [x] [ ]   |[ ] [ ] [ ] [ ]   Deb Schrader |
| Neighborhood/Comm. Members\* |  |[ ] [ ] [ ] [ ]  3 |[ ] [x] [x] [x]   Dio Ayala (Community/American Legion) Chris Nolte (Community member) & Tisha Pleake (Foster Parent) |
| Domestic Violence | 2 |[ ] [ ] [x] [ ]   |[ ] [ ] [ ] [ ]  Katie Johnson & Sam Keith (Crisis Intervention Services) |
| Substance Abuse | 2 |[ ] [x] [x] [ ]   |[ ] [ ] [ ] [ ]  Devon Leslie (EFR), Sarah Reiss (EFR) |
| Mental Health | 16 |[ ] [x] [x] [x]   |[ ] [ ] [ ] [ ]  Pam Gumm (Mid Iowa Family Therapy Clinic), Pam Bettger (Crossroads of Pella), Kayla Halterman (Mid Iowa Family Therapy Clinic), Jordan Tarin (Mid Iowa Family Therapy Clinic), Jessica Aeschliman (Mid Iowa Family Therapy Clinic), Betsy Stursma (CICS), Jean Holthaus (PineRest), Jeanetta Nieuwsma (PineRest), Cheryl Garland (Integrative Counseling Solutions), Jen Livingston (Wildwood), Gina Schuller (Four Oaks), Kristi Howerton (Capstone), Joyce Westphal (Full Circle), Susan Crowdes (CICS-Madison), Traci Rudolf-Hanrahan (Choices Therapy) & Rose Dickinson (I-35 and MstM Schools) |
| Faith-based groups |  |[ ] [ ] [ ] [ ]  3 |[ ] [ ] [x] [ ]  Scott O’Conner (Winterset Community Church), Sam Fisher (Indianola Methodist Church) & Liz Hensley (Bring Love Ministry) |
| Health Care | 4 |[ ] [x] [x] [x]   |[ ] [ ] [ ] [ ]   Laura Leners (Madison County Health Care Systems), Jodene DeVault (Warren County Health Services), Sharon Miller (Madison County Public Health) & Rachel Garner (Marion County Public Health) |
| Education | 19 |[ ] [ ] [x] [ ]   |[ ] [ ] [ ] [ ]   Susie Meade (Superintendent-Winterset Schools), Kyla Bandstra (Indianola), Barb LaGrange (Winterset), Laura Brewer (Indianola), Jori Coghlan (Indianola), Crystal Hale (Earlham), Geoff Tessau (I-35), Leah Heidemann (Carlisle), Mary Ferden (Norwalk), Mary Schletzbaum (Heartland AEA), Patty Harrington (Southeast Warren), Fran Isley (Southeast Warren), Jodi Clendenen (Southeast Warren), Ron Lorenz (Indianola), Sue Phillips (Pleasantville), Tammy Herold (Melcher-Dallas), Kevin Oswald (Winterset), Elizabeth Young (Drake Headstart), Pam Wadle (Southeast Warren) |
| Business |  |[ ] [ ] [ ] [ ]   |[ ] [ ] [ ] [ ]   |
| Legal System (Court) | 4 |[x] [x] [x] [x]   |[ ] [ ] [ ] [ ]  Natalie Montross, Tonya King, Linda Colby & Kim Garrison (Juvenile Court) |
| Law Enforcement |  |[ ] [ ] [ ] [ ]   |[ ] [ ] [ ] [ ]   |
| Government (i.e. City, Co.)  | 3 |[ ] [x] [x] [x]  1 |[ ] [x] [x] [ ]  Doug Shull (Warren County Supervisor), Aaron Price (Madison County Supervisor), Steve McCombs (Marion County Supervisor) & Kristin Brekelmans (City of Indianola) |
| Practice Partners\* | 13 |[ ] [x] [x] [x]  1 |[ ] [ ] [x] [ ]  Bonnie Forsyth (Partners in Family Development), Sheena Sullivan (Partners in Family Development), Darcy Woodland (PAT), Stacy Haas (1st Five), Veronica McVay (1st Five), Jodie Sevier (Mercy), Julia Castillo (HIRTA), Amber Wallingford (IMPACT), Carol Liechty (CRISP), Cortney Garrington (ISU Extension), Mary Krisco (ISU Extension), Nicole Navin (ISU Extension), Savanna Richardson (Mercy) & Amy Nolan (CRISP) |
| Economic Supports\* | 3 |[ ] [x] [x] [x]   |[ ] [ ] [ ] [ ]  Roger Netsch (WeLift Job Search Center), Heather Brooks (Connect 2 Careers-CFI) & Karie Foster (FaDSS) |
| Prevention Councils | 1 |[ ] [x] [x] [x]   |[ ] [ ] [ ] [ ]  Val Cameron (Warren) |
| Youth |  |[ ] [ ] [ ] [ ]   |[ ] [ ] [ ] [ ]   |
| Former Clients of DHS\* |  |[ ] [ ] [ ] [ ]   |[ ] [ ] [ ] [ ]   |
| Parent Partners | 2 |[ ] [x] [x] [x]   |[ ] [ ] [ ] [ ]  Adam Andre & Tijana Mrvoljak |
| Other |  |[ ] [ ] [ ] [ ]  1 |[ ] [ ] [x] [ ]  Thad White (Indianola Fire Department) |
| Total | 78 |  | 9 |  |  |

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| **Total % of Professionals involved in the initiative** | 90 | Total % of Community members Involved in the initiative | 10 |

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| **Describe your community partnership shared decision-making leadership group and oversight role. Who coordinates? How is it structured? How is it linked to Decat? Are there task teams or subcommittees?** DCAT Governance BoardOur DCAT Governance Board provides oversite for our CPPC and our Shared Decision-Making Team. They have the final say in all funding, programming and contracting. Our board is made up of 3 county supervisors, 1 DHS liaison and 2 juvenile court officers; totaling 6 members. They meet about 6 times per year.Shared Decision-Making TeamOur shared decision-making (SDM) group is called the DCAT Steering Committee. The CPPC coordinator sends out agendas, records the minutes, and facilitates the meetings. The committee is designed to have four voting members per county, a total of 12 members. Currently, we have 3 members from Madison County, 3 members from Marion County, & 3 members from Warren County totaling 9 voting members. Guests are always encouraged to attend, but have no voting power. Each proposal that comes in for DCAT funds, first comes through the Steering Committee. The committee members complete consensus scoring and give recommendations on how they would like to see the funding spent to the DCAT Governance Board. Subcommittees are formed from the SDM team when necessary. They meet 9 times per year. |
| **How often does this group meet?**Our DCAT Governance Board meets about 6 times per year. Our Shared Decision-Making Team meets once per month on the 1st Tuesday. We usually do not meet in January, July and August. |

The remainder of the report includes the 3 blank columns:

* **No color-labeled ‘Ongoing’** - for things you have accomplished in the past and continue to do
* **Yellow color-labeled ‘Proposed (NEW)’** - for new goals you are working towards
* **Green color-labeled ‘Met’** - the year-end information on success and/or barriers faced

The 4th column allows for narrative on the columns described.

Note: The **Ongoing category** is to be briefly detailed in narrative in the 4th column to explain routine and/or steps taken to meet this goal ongoing. The coordinator must be able to explain Ongoing steps to the SDM team and state/federal entities if audited, and may use the narrative in this report to track current processes, plans, accomplished goals and implementation.

| Shared Decision Making-Level 1 |
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| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress. |
| 1-a | New CPPC Coordinator attends first available CPPC Immersion 101 and 201 within the 1st year |  |  | X | **Ongoing:** **Proposed Plan:****Progress:** Attended CPPC Immersion 101 in 2011. Attended first available 201 (it didn’t exist when I started). |
| 1-b | Membership of Shared Decision Making Team must include Department of Human Services (DHS) Representative and Decategorization (Decat) Representative |  |  | X | **Ongoing:** P**roposed Plan:****Progress:** Our Shared Decision-Making Team includes two DHS Supervisors and one DCAT Representative (see page 3).  |
| 1-c | Membership of Shared Decision Making Team must include local community and professional members |  |  | X | **Ongoing:** **Proposed Plan:****Progress:** Our SDMT currently has 9 voting members (full capacity is 12) as well as many other attendees with diverse backgrounds, both personally and professionally. Our SDMT represent DHS, DCAT, Juvenile Court, Parent Partners, mental health, domestic violence, early childhood, community members, etc. (Refer to pages 3-4) |
| 1-d | Establish linkages and develop protocol for decision-making with Decat Boards |  |  | X | **Ongoing:** **Proposed Plan:****Progress:** Refer to page 4 on structure. |
| 1-e | Implement the use of the Shared Decision-Making Survey |  |  | X | **Ongoing:** **Proposed Plan:****Progress:** All attendees of the SDMT were given the opportunity to fill out the survey yearly. Our voting members are required to fill out the survey. |
| 1-f | Develop plan for Ongoing comprehensive understanding of the four strategies for individuals involved in Shared Decision Making process | X |  | X | **Ongoing:** CPPC Coordinator presents updates each month at the SDMT in a format that is broken down into the four strategies. This helps SDMT attendees understand how the work we are doing fits into the strategies. Additionally, all new members get new member orientation information detailing the four strategies and are encouraged to attend Immersion 101 and 201.**Proposed Plan:****Progress:** In FY21, CPPC Coordinator also presented at the June meeting. The four strategies and the structure of CPPC in our service area were the focal point of the presentation. |

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| 1-g | Establish and develop plan to meet membership recruitment goals for SDM, including diversity | X |  |  | Ongoing: CPPC Coordinator works with SDMT attendees to identify members to recruit (and what categories we have not filled). CPPC Coordinator also reaches out at local provider meetings to keep these goals in the forefront of community members’ and professionals’ thinking.Proposed Plan: Progress: Due to COVID and the inability to meet in person, we did not add any new voting members.  |
| 1-h | Provide oversight for the planning and implementation of the four CPPC strategies  | X |  | X | **Ongoing:** CPPC Coordinator presents updates each month at the SDMT in a format that is broken down into the four strategies. This helps SDMT attendees understand how the work we are doing fits into the strategies. At SDMT meetings, attendees are encouraged to discuss new and different ideas for better implementing the four strategies.**Proposed Plan:****Progress**: The FY22 plan was developed and reviewed by our voting members. SDMT members were also educated on the four strategies at the June meeting and were able to ask CPPC Coordinator clarifying questions. |
| 1-i | Develop orientation plan for new members |  |  | X | **Ongoing:** **Proposed Plan:****Progress:** Meeting attendees can find the orientation packet at [New Member Orientation Information (cppconline1.com)](https://www.cppconline1.com/new-member-orientation-information.html). Typically, CPPC Coordinator would meet with new voting members to provide them with a copy of the packet and provide an orientation session. An orientation packet was developed by CPPC Coordinator and DCAT Coordinator in FY16. Packet was updated in FY19. |

| Shared Decision Making-Level 2 |
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| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress. |
| 2-a | **Must meet all of the Level 1 items and also** add additional members and 1 of those members needs to be one of the following: domestic violence, substance abuse, or mental health partner |  |  | X | **Ongoing:** **Proposed Plan:** **Progress:** Indianola DCAT Cluster SDMT has representation from domestic violence, substance abuse and mental health. |
| 2-b | Implement plan for Ongoing comprehensive understanding of all four strategies |  |  | X | **Ongoing:** **Proposed Plan:****Progress:** CPPC Coordinator presented updates each month at the SDMT in a format that is broken down into the four strategies. This helped SDMT attendees understand how the work we are doing fits into the strategies. Additionally, CPPC Coordinator educated attendees on the four strategies and the CPPC structure in our service area more in depth at the June meeting. |
| 2-c | Implement orientation plan for all new members |  |  | X | **Ongoing:** **Proposed Plan:****Progress:**  An orientation packet was developed by CPPC Coordinator and DCAT Coordinator in FY16. All new voting members receive a packet and review the information with the CPPC Coordinator. The packet information is also available to all who are interested at: <http://www.cppconline1.com/new-member-orientation-information.html>. Packet was updated in FY19. |
| 2-d | Conduct Parent Partner orientation for all Shared Decision Making Team members | X |  | X | **Ongoing:** Annually, Parent Partners from our service area are given the opportunity to present at our SDMT meeting on Parent Partners and the services they offer. A Parent Partner Coordinator also regularly attends our SDMT meetings.**Proposed Plan:****Progress:** Parent Partners and/or coordinators gave updates at each meeting they attended. A more formal presentation was not given. With meetings being in person in FY22, a more formal presentation/update will be scheduled. |
| 2-e | Share information and progress of the local Parent Partner program regularly |  |  | X | **Ongoing:** **Proposed Plan:****Progress:** When present, Parent Partner(s) shared information and progress at monthly SDMT meetings. Parent Partner Coordinator(s) also gave progress reports. |
| 2-f | A Parent Partner is added to the membership of the SDM Team |  |  | X | **Ongoing:** **Proposed Plan:** **Progress:** A Parent Partner and Parent Partner Coordinator attended our SDMT meetings fairly regularly and provide valuable input. |
| 2-g | Membership recruitment plans that address diversity according to the demographics of your community | X |  | X | **Ongoing:** SDMT is continuing to work together to recruit members that address the diversity in our counties.**Proposed Plan:****Progress:** A few new members were added to replace members who had moved on from their professional roles. We are continuing to look at members who can fill the gaps according to the demographics of our service area. |
| 2-h | Review and report on diversity and disparity in the community and within the local Child Welfare system |  |  | X | **Ongoing:** **Proposed Plan:** Data on child welfare diversity and disparity will be gathered in FY21.**Progress:** CPPC Coordinator gathered consensus data in FY 19. CPPC Coordinator worked with state coordinators to identify where to get information on diversity and disparity for our service area. Getting this information proved to be difficult likely partly due to the pandemic. CPPC Coordinator will reach out to Ana Clymer in FY22. |
| 2-i | Host a CPPC Immersion 101 event in CPPC area at least once every three years | X |  | X | **Ongoing:** Immersion 101 will be hosted every 3 years. Hosted an Immersion 101 training in FY16 and FY19.**Proposed Plan:****Progress:** Immersion 101 will be held in FY22 per state guidelines. |
| 2-j | Identify and meet goal for adding additional community members (this number can be reviewed and re-established each year) | X |  |  | **Ongoing:** **Proposed Plan:** Add two new community members to CPPC initiative efforts.**Progress:** Our focus was on maintaining the number of members we currently have this fiscal year. Due to the pandemic, and changes in job responsibilities as a result, we saw a drop in attendance at the start of the year. We worked to draw our normal group back in. FY22 will hopefully be a year of growth as we get back to normal! |

| Shared Decision Making-Level 3 |
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| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress. |
| 3-a | **Must meet all Level 1 and 2 items** and also have two of the following members: domestic violence, substance abuse and mental health partners | X |  |  | **Ongoing:** **Proposed Plan:** **Progress:** We have met most items in level 2.. We do have two representatives from the domestic violence, substance abuse and/or mental health categories. We will be working in the new fiscal year to add community members and to address diversity and disparity. |
| 3-b | Have a broad representative of at least five (5) of the following members: Faith-Based Groups, Health Care, Education, Business, Legal System (courts), Law Enforcement, Government (County or City), Economic Supports, Practice Partners and Prevention Councils (See CPPC reporting and evaluation form for definition) |  |  | X | **Ongoing:** **Proposed Plan:** **Progress:** Within our SDMT, we have members representing health care, education, legal system (courts), government, economic supports, practice partners and prevention councils. |
| 3-c | SDM develop avenue for youth voice (youth in foster care or foster care alumni) |  | X | X | **Ongoing:** **Proposed Plan:** CPPC Coordinator will continue reaching out to local foster care support groups and schools to attempt to get a youth voice involved in our SDMT. CPPC Coordinator will also work with Parent Partners to identify foster care alumni.**Progress:** CPPC Coordinator worked with JCSL to identify a way for a youth voice to participate. In FY22 we are looking at offering hybrid meetings. By continuing the option of virtual meetings, we believe we will be able to have youth participation from Winterset High School. |
| 3-d | Develop linkages and partnerships with other groups into SDM team | X |  | X | **Ongoing:** CPPC Coordinator continuously works with local provider groups to pull in new members/voices and partnerships to the SDMT. **Proposed Plan:****Progress:**  Our service area has a great network of partnerships through mailing lists, meetings and the website. We are able to pull from it when needed on an almost daily basis.  |
| 3-e | SDM membership diversity is representative of the local population | X |  |  | **Ongoing:** CPPC Coordinator works with local provider groups and SDMT on a regular basis to work towards our SDMT being representative of the local population. Our SDMT works to ensure all four voting positions are filled for each of the three counties (if a spot is vacant, it is held for representation from that county verses filling it with someone from another county). **Proposed Plan:****Progress:** We ended FY21 with two open voting positions in Marion County and one in Madison County. We are always working towards having representation from each of the above categories. |
| 3-f | Role of the SDM group expands to include identifying, and developing a plan to meet unmet needs within the community | X |  | X | **Ongoing:** Unmet needs in the community are discussed as needed at monthly SDMT meetings. Attendees are allowed a time for updates and open discussion during the meeting to discuss needs their clients are facing. The majority of the time, the SDMT is able to meet these needs. Additionally, we have developed a complex network of local providers, community members, etc. who, very frequently, email the CPPC Coordinator with needs within the community. The CPPC Coordinator then utilizes our mailing list to address the need. Virtually every time, the needs are able to be met by community members or professionals on that list.**Proposed Plan:****Progress:** All needs brought to the attention of the SDMT and/or the CPPC Coordinator were met in FY21 by community members and coordinated by the CPPC Coordinator. |
| 3-g | Develop and implement a plan to host a Race: Power of an Illusion in CPPC area (and/or related training opportunity, such as Understanding Implicit Racial Bias training or utilization of the Courageous Conversations Toolkit) | X |  |  | **Ongoing:** Indianola DCAT, in partnership with Boone, Dallas, Story DCAT, hosted Race: The Power of an Illusion in FY18. Indianola DCAT also hosted the follow up discussion.**Proposed Plan:** Host another RPI or related training this fiscal year.**Progress:** We were unable to old RPI or other related training this year due to COVID-19. |
| 3-h | Shared decision making survey scores used as a tool to guide quality improvement of strategy implementation | X |  | X | **Ongoing:** Survey is completed yearly and used to guide quality improvement for that year. Survey results are discussed at the SDMT. From there, a plan is developed to improve that area.**Proposed Plan:****Progress:** SDMT completed the survey in FY21. |
| 3-i | SDM goals for community members are met (see CPPC Community Involvement and Instructions for definition, page 2)  | X |  | X | **Ongoing:** We have had a goal of 10% for some time and currently are above that goal. We are always looking for opportunities to add additional communities.**Proposed Plan:** **Progress:** Maintained our community members, but were unable to add new ones due to restrictions with face to face meetings. |

| Shared Decision Making-Level 4 |
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| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress. |
| 4-a | **Must meet all Level 1, 2 and 3 items and also** have all three of the following members: domestic violence, substance abuse and mental health partners | X |  |  | **Ongoing:** Have not met all level 3 items, but do have representation of all three of the outlined categories.**Proposed Plan:****Progress:** See above section for unmet items. Do have representation for the outlined categories. |
| 4-b | Have ongoing implementation of new member orientation | X |  | X | **Ongoing:** New member orientation (orientation packet and orientation session with coordinator) is utilized as new members attend the SDMT.**Proposed Plan:****Progress:** All members are given access to the new member orientation packet and are encouraged to contact the CPPC Coordinator with any questions. CPPC Coordinator also has a meeting with voting members to go over the packet in more detail. No new voting members were added in FY21. |
| 4-c | SDM recruitment goal for Community Members must have been exceeded by 10% |  |  |  | **Ongoing:** **Proposed Plan:****Progress:** |
| 4-d | Have 100% of the representation identified in the list in Level 3 |  |  | X | **Ongoing:** **Proposed Plan:** CPPC Coordinator will reach out to networks as well as at community events to reach business, law enforcement and youth voices for representation through our SDMT. Information on CPPC, our website and the SDMT will be readily available at events, meetings, etc.**Progress:** Getting new members to attend the SDMT was difficult in FY21 due to no face to face meetings. CPPC Coordinator did work with JCSL in Madison County to discuss youth participation. We were able to create a plan for that to happen in FY22. Law enforcement officers are involved in the community meetings that feed into the SDMT so their input is noted at those meetings. |
| 4-e | Community representatives take a leadership SDM role as defined by the site |  |  |  | **Ongoing:** **Proposed Plan:****Progress:**  |
| 4-f | Role of SDM group expands to include advocacy for CPPC’s goals with funders and policy-makers (legislators, governor, boards of supervisors, city council members, mayor, etc.) |  |  |  | **Ongoing:** **Proposed Plan:****Progress:** |
| 4-g | SDM group implements plan and successfully addresses unmet needs within the community  | X |  | X | **Ongoing:** SDMT regularly discusses unmet needs in the community at monthly meetings. Plans are developed to address unmet needs as needed.**Proposed Plan:****Progress:** All needs brought to the attention of our SDMT/CPPC Coordinator were met in FY21. This included household items, connections to resources, etc. |
| 4-h | Coordinator and/or member of SDM contributes to state and/or regional events/activities. (I.e. serve on planning committees, assisting with logistics, presenting, etc.)  | X |  | X | **Ongoing:** CPPC Coordinator and DCAT Coordinator regularly serve on the discussion panel at Immersion 201. CPPC Coordinator serves on planning committees for statewide meeting and has presented numerous times. DCAT Coordinator serves on Executive Committee. CPPC and DCAT Coordinator attend all state and regional meetings.**Proposed Plan:****Progress:** CPPC Coordinator served on the ICA Workgroup, statewide planning committee. DCAT Coordinator served on the Executive Committee. All statewide and regional meetings were attended by the CPPC or DCAT Coordinator. |

**At the writing of this proposed report, select the level\* for Shared Decision Making that best fits your site: 3**

**Based on your completed activities, select the level\* for Shared Decision Making that best fits your site**: **2**

**\*For more detailed information on the levels, please see the CPPC Practice Guide**

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| Please have each committee member on the leadership/steering committee fill out the Shared Decision Making form, compile the average response for each question, and report the average response below. |
| ***\*Instructions:***Baseline= 1st year at the beginning of year on proposed plan(Yellow). Previous Year= Previous year on progress report(Green). Current Year:= Current year on progress report (Green) |
| **Shared Decision Making Survey 1=disagree, 2=mildly disagree, 3=neutral, 4=mildly agree, 5= agree** |

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| --- | --- | --- | --- | --- |
| **Category** | **Description** | **Baseline Year\* 2011** | **Previous Year\*****2020** | **Current Year\*****2021** |
| 1. Common Vision: | Members have a shared common vision. | 4.38 | 4.5 | 4.33 |
| 2. Understanding and Agreement Goals: | Members understand and agree on goals and proposed outcomes/objectives. | 4.13 | 4.5 | 3.93 |
| 3. Clear Roles & Responsibilities: | Roles & responsibilities of members are clear. | 3.88 | 4.33 | 3.93 |
| 4. Shared Decision Making: | All members have a voice and are engaged in the decision making process. | 4.38 | 4.5 | 3.93 |
| 5. Conflict Management: | We are able to successfully manage conflict. | 4.25 | 4.67 | 4.4 |
| 6. Shared Leadership: | Leadership is effective and shared when appropriate. | 4.5 | 4.5 | 4.13 |
| 7. Well Developed Work Plans: | Work Plans are well developed and followed. | 4 | 4.17 | 4.06 |
| 8. Relationships/Trust: | Members trust each other. | 2.88 | 4.83 | 4.2 |
| 9. Internal Communication: | Members communicate well with each other. | 3.88 | 4.67 | 4.13 |
| 10. External Communication: | Our external communication is open and timely within the broader community and partners. | 4 | 4.67 | 4.27 |
| 11. Evaluation: | We have built evaluation performance into our activities. | 2.5 | 4.0 | 3.67 |
| 12. Understanding of CPPC: | Members have a clear understanding of the Community Partnerships Four Strategies. | 3.13 | 4.33 | 3.93 |
| **Average Response Score:**  | This is an average score for all of the responses, the number should be between 1-5 | **3.83** | **4.47** | **4.08** |

| Community/Neighborhood Networking-Level 1 |
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| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 1-a | Develop Neighborhood/Community Networking plan that includes goals for engagement strategies and planned activities that identifies potential network members to whom strategies will be directed | X |  | X | **Ongoing:** Plan was developed in FY12. Its strategies are reviewed and adapted yearly. CPPC Coordinator began utilizing local provider groups and community activities to engage members.**Proposed Plan:****Progress:** CPPC Coordinator networked with providers at local meetings, our website and by referral. |
| 1-b | Engage the community and build awareness about Community Partnerships for the Protection of Children’s four strategies through community forums, events and activities | X |  | X | **Ongoing:** CPPC Coordinator is continuously working to build awareness about CPPC and the four strategies in our three counties. Coordinator regularly participates in community meetings, events and activities.**Proposed Plan:****Progress:** CPPC Coordinator attended various community meetings to build awareness about CPPC and the four strategies. CPPC Coordinator also presented at a couple of meetings to provide more specific information about CPPC.  |
| 1-c | Develop (select and educate) a cadre of spokespersons who are able to deliver CPPC information, such as the “CPPC 101” information | X |  | X | **Ongoing**: Our SDMT voting members serve as this cadre of spokespersons. As voting members change, CPPC Coordinator works to educate new voting members to become spokespersons.**Proposed Plan:****Progress:** Voting members continued to work as our “cadre.” No new voting members were elected this year. |
| 1-d | Establish performance and outcome measures and evaluate these to ensure the goals (from the planning stage) are obtained | X |  | X | **Ongoing:** New network members are constantly being identified. Outcome measures are identified by meeting each of the categories for representation outlined at the beginning of this form. Participants in local trainings and events provide feedback via evaluations. **Proposed Plan:****Progress:** Continuing to work towards meeting participation in each of the identified categories. The pandemic made it difficult to connect and draw in new members with “Zoom fatigue” this year. We were able to maintain strong connections with previous networking groups/agencies/individuals. As a team, we worked together frequently to make sure we were meeting the need and reaching our goals. |

| Community/Neighborhood Networking-Level 2 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 2-a | Continue to promote community awareness/engagement listed in level 1 | X |  | X | **Ongoing:**  CPPC Coordinator continuously promotes CPPC at all meetings, activities and events. Additionally, CPPC Coordinator gives presentations at local meetings and events to raise awareness and potentially engage new members.**Proposed Plan:****Progress:** CPPC Coordinator promoted CPPC at all meetings in FY21. Short presentations were also given at the meetings as requested. Providers were able to ask questions and learn of ways to network to better serve communities. |
| 2-b | Develop Neighborhood/Community Networking Plan that includes goals for linkages, collaborations, strategies and planned activities | X |  | X | **Ongoing:**  We have been able to build a strong network at our site. However, the CPPC Coordinator continues to work to develop more and deeper linkages, collaborations, etc. in all areas of work through local meetings, events, family team meetings, etc.**Proposed Plan:****Progress:** Our basic goals for collaborations have been met and maintained for several years. In FY21, the CPPC Coordinator worked to reach out to newer agencies in our area. We have several agencies that aren’t based in our counties, but that serve them. CPPC Coordinator connected with agencies such as Opportunity on Deck and Single Parent Provision to discuss how CPPC can work with them and help support their work in our counties. |
| 2-c | Develop/promote a plan to increase linkages between informal and professional supports and resources | X |  | X | **Ongoing:** SDMT and CPPC Coordinator have worked with professionals to create a mailing list that links informal and professional supports to meet community needs. This set up has been highly successful in meeting needs in our area.**Proposed Plan:****Progress:** This year, several people (both formal and informal) were added to our mailing list as a result of the work of our SDMT. These individuals helped to promote events and activities in our counties as well as meet community needs. Needs were sent to the CPPC Coordinator from a variety of sources and then pushed out to our mailing list. Needs were met 100% of the time through this method. |
| 2-d | Develop a plan to increase collaboration among economic supports, domestic violence, mental health, substance abuse and other child welfare professional partners | X |  | X | **Ongoing:** By getting each of these categories around the table at SDMT meetings, networking has naturally taken place. From there, partners have been able to reach out to each other for various needs and resources. In addition, our website and email distribution list have provided opportunities for collaboration on trainings, events, resources, employment opportunities, etc. between professionals and community members. New resources, trainings, etc. are discussed at SDMT meetings and added to our website.**Proposed Plan:****Progress:** Our SDMT meetings continued to be a natural place for collaboration among these groups. Most of our meetings included individuals from each category which allowed for conversations, brainstorming and meeting community and family needs. Additionally, our website and mailing list continued to grow in FY21 and offer agencies and individuals an opportunity to collaborate with CPPC and each other. |
| 2-e | Involve Parent Partners in collaborative programs in the community | X |  | X | **Ongoing:**  Parent Partners are made aware of local meetings, activities and events through the CPPC Coordinator and/or the SDMT.**Proposed Plan:** **Progress:** Parent Partners and/or coordinators attended our SDMT meetings as they were able. Additionally, most in our area are on our mailing list so they were made aware of different resources and opportunities for themselves and/or families in our communities. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 2-f | Involve Foster Parents in collaborative programs in the community |  | X | X | Ongoing: Proposed Plan: SDMT will work to identify foster parents within the counties. CPPC Coordinator will then reach out to them to be added to our network.Progress: A foster parents serves on our SDMT voting roster. We also work with Bring Love which is a support for foster parents. Through our collaboration, we are able to pass information, programming and other opportunities on to foster parents. Likewise, Bring Love is able to promote their trainings and opportunities through CPPC. |

| Community/Neighborhood Networking-Level 3 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 3-a | Continue with Neighborhood/Community Networking levels 1 and 2 | X |  | X | **Ongoing:** Met all areas of level 1 and 2.**Proposed Plan:** **Progress:** All areas have been met. |
| 3-b | At least one of the following is established (mark the X and detail narrative next to the appropriate category listed below) |  |  |  |  |
|  | * **Organize** groups/networks of community members and/or parents with prior CPS involvement and/or foster care youth - these groups focus on leadership and providing informal supports
 | X |  | X | **Ongoing:** Our site has been able to build a network of community members that serve as a great network of informal supports and leadership in meeting family needs. The group, led by a local church, seeks out household items and stores them in a local storage unit until they are needed. Community members also volunteer time to deliver needed items to families.**Proposed Plan:****Progress:** Our site has continued to fortify a network of community members that serve as a great network of informal supports and leadership in meeting family needs. The group, led by a local church, seeks out household items and stores them in a local storage unit until they are needed. Community members also volunteer time to deliver needed items to families. |
|  | * **Implement** plan to increase collaboration among economic supports, domestic violence, mental health, substance abuse and other child welfare professional partners
 | X |  | X | **Ongoing:** Continue to build a relationship that encourages an open dialogue with child welfare professional partners. Connect them with professionals deeply connected with CPPC.**Proposed Plan:** **Progress:** This year, increasing collaboration among these groups was essential to continuing to meet needs in our community in the midst of the pandemic. Working together to identify and meet needs took innovative thinking and teamwork during this “virtual” year. Our website and mailing list allowed for a fairly seamless transition into “virtual” networking. |
|  | * The development of **hubbing** resources and activities that enhance the accessibility of services and supports
 | X |  | X | **Ongoing:** CPPC Coordinator is able to “hub” resources, events, trainings and job postings through our website ([www.cppconline1.com](http://www.cppconline1.com)) and our mailing lists. We also create and print hard copies of resource directories for each county every couple of years, as funding is available.**Proposed Plan:****Progress:** Our website continued to be the hub for our area. We are able to add and promote resources, events, trainings, job postings, etc. on our website and mailing lists. The website was updated daily in FY21 and was integral in allowing us to communicate with our service area this year. |
|  | * Increase awareness and develop plans to address **diversity** and disparity locally
 | X | X | X | **Ongoing:** While our SDMT didn’t look at this issue specifically this year due to other priorities, CPPC Coordinator did work in this area.**Proposed Plan:** To increase awareness and develop a plan to address diversity and disparity. CPPC Coordinator will look to SDMT to help research and develop a plan.**Progress:** CPPC Coordinator contacted others within the statewide CPPC network to gather information on the best ways to learn about diversity and disparity in our communities. Several people recommended Ana Clymer. CPPC Coordinator will be reaching out to her in FY22 to discuss steps moving forward. |
| Community/Neighborhood Networking-Level 4 |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 4-a | **Must meet all Levels 1, 2 and 3 items and also** the implementation of at least 2 or more level 3 type programs | X | X | X | **Ongoing:**  See 3b.**Proposed Plan:** To increase awareness and develop a plan to address diversity and disparity. CPPC Coordinator will look to SDMT to help research and develop a plan.**Progress:** See 3b. |
| 4-b | The use of informal supports is standard practice for families involved with DHS (including involvement with family team meetings) | X |  | X | **Ongoing:** Informal supports are utilized for CBFTMs in our area. Additionally, informal supports are a part of our email distribution list which help identify and meet needs.**Proposed Plan:****Progress:** CBFTMs were not held due to the pandemic and impending changes to ICA this year. Typically, informal supports are utilized. DHS utilizes informal supports through CPPC by contacting the CPPC Coordinator for tangible needs for families involved with DHS. The CPPC Coordinator then sends the request to the mailing list (without any identifying information). Once the need can be met, the CPPC Coordinator coordinates the delivery of the item(s).  |
| 4-c | Implementation of all programs and activities consistently address Diversity and Disparity issues |  |  |  | **Ongoing:** **Proposed Plan:****Progress:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Level # | Network Activity | Descriptiongoal and what was invested | # of Participants | Outcome(s) |
| 2 | Parent Partner Involvement in CPPC SDMT | To have active participation from Parent Partners at our SDMT.Parent Partner’s time and commitment to attend and participate in meeting. CPPC Coordinator’s time to reach out to Parent Partner Coordinator to arrange for Parent Partners to attend.  | 2 | Adam and Lacy Andre attended our SDMT in FY21.Parent Partner Coordinator and CPPC Coordinator collaborated to ensure Parent Partner participation in meetings. |
| 3 | CPPC Website | To distribute resources, job postings, events, etc. happening in the Indianola DCAT Cluster to local providers and families.CPPC Coordinator’s time to maintain and update the website and distribute information.  | 300+ get the weekly updateThe website averages 4,000 hits per week | Weekly emails containing new information to the website and events happening that week were sent. Mailing lists for the website updates were updated weekly. Events, trainings, job postings, etc. happening in the three-county area were posted within 24 hours. |
| 3 | Al’s Pals | To provide the evidence-based Al’s Pals curriculum to all interested schools/daycare centers in Madison, Marion and Warren Counties. CPPC Coordinator made connections with area schools/centers to promote Al’s Pals and work with those who were interested in becoming or remaining a DCAT/CPPC sponsored Al’s Pals school/center. | 850+ |  CPPC Coordinator worked with centers/schools to engage them via email or phone this year due to COVID. No in person visits were conducted. However, all participating schools/centers in our three-county area were provided their supplies free of charge. |
| 3 | CPPC Regional Meetings | To learn about changes within CPPC and network with other coordinators, DHS staff, etc. to learn of events and programming happening across the state.CPPC Coordinator’s time to attend meetings. | 15+ | CPPC Coordinator networked with CPPC Coordinators, DCAT Coordinators, and DHS staff from across the state and received information on a variety of topics pertaining to our work. |
| 3 | CPPC Statewide Learning Exchange | To learn about changes within CPPC and network with other coordinators, DHS staff, etc. to learn of events and programming happening across the state.CPPC and DCAT Coordinators’ time to attend meetings. | 200+ | DCAT and CPPC Coordinator networked with CPPC Coordinators, DCAT Coordinators, and DHS staff from across the state. Gained useful information related to topics such as mental health. |
| 3 | Introduce new employees to CPPC | To educate new employees at various agencies about CPPC, the four strategies, the goals, etc. CPPC Coordinator’s time to prepare for meetings and meet with individuals. | 5 | CPPC Coordinator met with Devin from Single Parent Provision, Darren from Warren County Board of Supervisors, Johnathan from a MCO, Dylan from Opportunity on Deck and Alyssa with Bethany Christian Services. Each party learned information about what each agency does and worked to develop a plan to work together to serve Madison, Marion and Warren County families. Since these meetings, the agencies and CPPC have worked together on several initiatives.  |
| 3 | Basic needs met for families | To meet the basic needs of families in our three-county area by networking with other local agencies and community members. CPPC Coordinator worked with local providers and community members to help families obtain needed supplies such as: dressers, beds, washing machines, etc. | 150+ | CPPC Coordinator worked with providers to send out needs lists to CPPC Coordinator’s mailing lists and coordinate donation and pick up of needed items. As a result, many families’ needs were met. |
| 3 | Marion County Providers | To attend Marion County Provider meeting to learn of needs in the community.CPPC Coordinator attended 8, one to one and a half hour monthly meetings. | 20+ | CPPC Coordinator learned of needs and reported back to Shared Decision-Making Team/Steering Committee.Providers had a better understanding of CPPC/DCAT. |
| 3 | Madison County Cares | To attend Madison County Cares meeting to assist in planning community events and learn of community needs. CPPC Coordinator attended 9, one to one and a half hour monthly meetings. | 25+ | Community events were postponed due to COVID.CPPC Coordinator learned of needs and reported back to Shared Decision-Making Team/Steering Committee.Providers had a better understanding of CPPC/DCAT. |
| 3 | Warren County Cares  | To attend Warren County Cares meeting to learn of needs in the community and help address needs within the schools in Warren County.CPPC Coordinator attended 6, one and a half monthly meetings. | 20+ | CPPC Coordinator learned of needs and reported back to Shared Decision-Making Team/Steering Committee.Providers had a better understanding of CPPC/DCAT.The Warren County Family Care Team group was restructured and merged with 4R Kids and 1st Five. |
| 3 | Resource meeting | To address community needs within ICA while FTDM transitions to solution-based casework.CPPC Coordinator and provider’s time to meet, gather resources and create a plan to address barriers for families. | 10 | One resource meeting was held in FY21. CPPC Coordinator and providers were able to come up with a list of resources and a plan to address the family’s needs. |
| 3 | ICA Work Group | To discuss new and innovative ways to allow ICA to better serve families across Iowa under the new Solution Based Casework.CPPC Coordinator’s time to attend meetings. | 10 | The work group is continuing to brainstorm ideas going into FY22. They were able to meet a few times in FY21 to discuss plans moving forward including new programming that might fit under ICA. |
| 3 | Statewide planning committee | To assist in the planning of the CPPC Statewide Learning Convenings.CPPC Coordinator’s time to attend meetings. | 10 | Two statewide convenings were successfully held in FY21. The convenings was held virtually. |
| 3 | CAPC Community Coalition (Warren) | To learn of activities happing in Warren County around Child Abuse Prevention Month and promote those activities through the CPPC website, word of mouth, etc.CPPC Coordinator’s time to attend the meeting and promote materials through CPPC. | 20+ | CPPC Coordinator attended the meeting and promoted CAP month activities on the CPPC website and through our mailing lists. |
| 3 | Polk DCAT-Al’s Pals and website | To share information with Polk County regarding our Al’s Pals program and CPPC website network.CPPC Coordinator’s time to meet with Cassie Kilgore, Polk County CPPC. | 2 | CPPC Coordinator was able to share resources and brainstorm ideas with the Polk CPPC Coordinator. |
| 2 | Planning for the future of Madison County Cares | To discuss future plans and potential restructuring for the Madison County Cares group and how we can best support and serve Madison County communities.CPPC Coordinator’s time to attend meetings and exchange emails with committee members. | 6 | CPPC Coordinator attended a subcommittee meeting and exchanged many emails discussing options to revive the MCC group.In FY22, a survey will be developed to better gage what attendees would like to see from this group. |
| 3 | Connections Matter Host | To host Connections Matter locally.CPPC Coordinator’s time to coordinate with local Child Abuse Prevention Council and SDMT. | 15 | Our CPPC successfully hosted Connections Matter virtually following one of our SDMT meetings. |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  | Total # of Activities: 17 |  | Total # of Participants:1,660 |  |

# At the writing of this proposed report, select the level\* for Community/Neighborhood Networking that best fits your site: 3

**Based on your completed activities, select the level\* for Community/Neighborhood Networking that best fits your site**: **3**

**\*For more detailed information on the levels, please see the CPPC Practice Guide**

| Individualized Course of Action CBFTDM/CBYTDM-Level 1 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 1-a | Educate SDM and community about strength-based engagement/assessment skills and the Family Team Decision Making (FTDM) and Youth Transition Decision Making (YTDM) processes within the child welfare system | X |  | X | **Ongoing:** CPPC Coordinator is continuously educating new SDMT members about FTDMs and YTDMs. The meetings are discussed at monthly SDMT meetings and at local provider meetings.**Proposed Plan:****Progress:** Referral sources and the communities were also kept update date on upcoming changes to ICA. |
| 1-b | Promoting the understanding, the use, and the importance of informal supports in the FTDM and YTDM processes | X |  | X | **Ongoing:** Informal supports are often discussed in conjunction with FTDMs at our SDMT, local meetings, local trainings, etc. We are constantly striving to improve our network of informal supports.**Proposed Plan:****Progress:** With the upcoming changes to ICA and the lack of FTDMs due to the pandemic, informal supports within the FTDM process were not discussed as much as in years past.  |
| 1-c | Promoting FTDM and YTDM trainings, and coaching and mentoring if needed | X |  | X | **Ongoing:** As trainings are available, CPPC Coordinator is promoting them at local meetings and events.**Proposed Plan:****Progress:** Trainings are not currently offered as FTDMs transition to solution focused. |
| 1-d | Understand how FTDMs and YTDMs are available and accessed for families involved in the child welfare system | X |  | X | **Ongoing:** In our service area, subcontracted agencies provide these services for DHS involved families. This information has been shared with our SDMT, DCAT Board and local provider groups.**Proposed Plan:****Progress:** In our service area, subcontracted agencies provide these services for DHS involved families. This information has been shared with our SDMT, DCAT Board and local provider groups. |
| 1-e | Explore and understand FTDM and YTDM Iowa standards and how they are implemented | X |  | X | **Ongoing:** CPPC Coordinator was educated on the standards at FTDM training and again when FTDM became a statewide contract through DHS. CPPC Coordinator shared this information with our DCAT Board.**Proposed Plan:****Progress:** CPPC Coordinator is aware of standards and implementation for FTDM process. |
| 1-f | Promote collaboration between FTDM and YTDM facilitators from different organizations and agencies |  |  | X | **Ongoing:** **Proposed Plan:****Progress:** Other than those trained with the subcontracted agencies, we have one trained FTDM facilitator in our service area. Both have great working relationships with local agencies. |

| Individualized Course of Action CBFTDM/CBYTDM-Level 2 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 2-a | **Must meet all Level 1 items** | X |  |  | **Ongoing:** Continuing to work to spread awareness about FTDMs and YTDMs.**Proposed Plan:****Progress:** Met all goals in level 1. |
| 2-b | Develop plan to implement Community Based Family Team Meetings (CBFTDM) and Community Based Youth Transition Decision Making (CBYTDM)Plans need to include:* **Assessing** the need for state-approved facilitators
* **Recruitment** of state-approved facilitators
* **Maintain** or have access to a list of state approved facilitators
* **Educating** Community about CBFTDM and CBYTDM
* **Marketing** Strategies
* **Building** relationships with potential referral resources
* **Funding** resources and sustainability
* **Tracking**, evaluation and Quality Assurance
 | X |  | X | **Ongoing:** CPPC Coordinator is currently implementing CBFTMs.**Proposed Plan:** **Progress:** A plan is in place to implement CBFTMs. Due to the pandemic and upcoming changes to ICA, we did not hold any meetings this year. Meetings have been held in previous years. |

| Individualized Course of Action CBFTDM/CBYTDM-Level 3 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 3-a | **Must meet all Level 1 and 2 items** | X |  | X | **Ongoing:** Continuing to work to spread awareness about FTDMs and YTDMs. No current plan to implement CBYTDMs**Proposed Plan:****Progress:** Met level 1 and 2 with some adjustments due to the upcoming changes with ICA. |
| 3-b | Implement plan for CBFTDM-Community-Based Family Team Decision Making | X |  |  | **Ongoing:** CBFTDMs are being implemented in Madison, Marion and Warren Counties by the CPPC Coordinator.**Proposed Plan:** **Progress:** CBFTMs have been implemented in years past. This year, they were put on hold due to the pandemic and the upcoming transition to solution based casework. |
|  | Number of CBFTDM held |  | 3 | 0 | **Ongoing:** **Proposed Plan:** CPPC Coordinator hopes to hold three (3) CBFTMs this year.**Progress:** CBFTMs were not held due to the pandemic and upcoming transition/changes to ICA. |

| Individualized Course of Action CBFTDM/CBYTDM-Level 4 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 4-a | **Must meet all Level 1, 2, and 3 items** | X |  |  | **Ongoing:** Continuing to work to spread awareness about FTDMs, YTDMs and CBFTDMs.**Proposed Plan:****Progress:** CBFTMs were not held due to the pandemic and upcoming changes to ICA. |
| 4-b | Implement plan for CBYTDM-Community-Based Youth Transition Decision Making |  |  |  | **Ongoing:** **Proposed Plan:** **Progress:** |
|  | Number of CBYTDM held |  |  |  | **Ongoing:** **Proposed Plan:****Progress:** |

# At the writing of this proposed report, select the level\* for Individualized Course of Action that best fits your site: 2

**Based on your completed activities, select the level\* for Individualized Course of Action that best fits your site**: **3**

**\*For more detailed information on the levels, please see the CPPC Practice Guide**

| Policy and Practice Change-Level 1 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 1-a | **Identify need(s)** for policy and practice change:discussion about policy and practices with various agencies | X |  | X | **Ongoing:** Our site is constantly doing this as new agencies and individuals are consistently being added to our local network. CPPC Coordinator discusses policy and practices with each new agency/SDMT member. Additionally, at SDMT meetings we often discuss the services that are needed, but difficult to obtain for families. Low income housing and transportation tend to be reoccurring needs.**Proposed Plan:** **Progress:** This continues to be an area of growth in our area, especially during the pandemic. It seemed that we were forever adapting to new circumstances and adjusting services/resources to fit family needs. |
| 1-b | Identify youth and/or parents who have been involved in the child welfare system and ask for their input about what works and what does not, from their perspective | X | X | X | **Ongoing:** Continuing to work with Parent Partners to identify families that may want to participate in our SDMT and share their input.**Proposed Plan:** Work with Parent Partners to gather their input on the successes and needs of families. Open discussion with SDMT of avenues to pursue in acquiring a youth voice within our CPPC.**Progress:** Parent Partner participation at our SDMT meetings was low this year likely due to the pandemic and all of the changes that came with it. CPPC Coordinator worked with JCSL to discuss ways we could involve a youth voice in FY22. As a result, we will be continuing the option of attending SDMT meetings virtually. |

| Policy and Practice Change-Level 2 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 2-a | **Must meet all Level 1 items** | X | X |  | **Ongoing:** CPPC Coordinator is still working to get input from those formerly involved in the child welfare system.**Proposed Plan:** See 1-b.**Progress:** We are still working to get a youth voice around the table. We do have a plan in place for FY22. |
| 2-b | **Develop a plan** to address identified needs:* **Gather** data about policy and practice changes-needs/gaps in services
* **Document** information gathered (using sources such as APSR, surveys, focus groups) to prioritize practices and/or procedures needing to be changed or improved
* **Ensure** that frontline staff from child protection system and partner agencies are included in development and implementation of practice change planning
* Within the planning process **identify** cultural disproportionality and disparity issues related it policy and practice change
 | X |  | X | **Ongoing:** Needs and gaps in services are identified through our SDMT and DCAT Board. Plans are developed as needed to address the identified needs and gaps. The format outlined is followed.**Proposed Plan:****Progress:** This year presented a new set of needs. With most things going digital/virtual, we were able to develop plans to continue to meet needs from a distance. Our website and mailing lists were beefed up. We were able to offer virtual “resource meetings” to work with professionals to meet the needs of families formerly met by CBFTMs for example. |

| Policy and Practice Change-Level 3 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress.  |
| 3-a | **Must meet all Level 1 and 2 items** | X |  |  | **Ongoing:** CPPC Coordinator is still working to get input from those formerly involved in the child welfare system.**Proposed Plan:** See 1-b.**Progress:** See 1-b. |
| 3-b | **Implement plan** for changes and re-evaluate using Plan Do Study Act (PDSA) or similar process* Develop communication strategies for implementing the change
* Develop and implement monitoring to ensure change is successful
* Develop specific methods for ensuring quality changes are maintained
 | X |  |  | **Ongoing:** Plans are implemented as they are developed based on the needs and gaps in services. Our site follows this outline.**Proposed Plan:****Progress:** Many adjustments were implemented to meet varying changes and needs during the pandemic. An example of one would be the creation of “resource meetings” to bring professionals together to help address family needs when CBFTMs could not be held. |

| Policy and Practice Change-Level 4 |
| --- |
| No. | Description | Ongoing | Proposed (NEW) | Met | Describe current goal in your proposed plan and progress. |
| 4-a | **Must meet all Level 1, 2, and 3 items** and add the implementation of 2 or more policy and practice changes | X | X |  | **Ongoing:** **Proposed Plan:** See 1-b.**Progress:** See 1-b. |
| 4-b | Community agencies routinely involve SDM in developing and reviewing policies and practices | X |  |  | **Ongoing:** CPPC Coordinator is involved with community provider groups, which include several SDMT members. These groups often discuss agency policies and practices and ask for input from meeting attendees.**Proposed Plan:****Progress:** CPPC Coordinator and SDMT members continued to attend and participate in community meetings. Two of the provider groups have gone under or are currently undergoing restructuring to better serve the needs of the community. |
| 4-c | Agencies involved in CPPC routinely survey consumers and partners about their programs and make changes in response to feedback including diversity and disparity issues | X |  |  | **Ongoing:** Agencies involved in CPPC have developed their own way to survey consumers/partners regarding their services. Based on the results of the survey, they are making changes and responding to feedback as needed.**Proposed Plan:****Progress:** Agencies involved in CPPC have developed their own way to survey consumers/partners regarding their services. Based on the results of the survey, they made changes and responded to feedback as needed. |
| 4-d | SDM group solicits ongoing feedback from families and community members and makes changes in response to feedback | X |  |  | **Ongoing:** Agencies described in 4c such as ECI and county health departments, utilize various community needs assessments. Many of these agencies are involved in our SDMT and report out to that group. SDMT then takes that information and makes changes on an as needed basis.**Proposed Plan:****Progress:** Agencies described in 4c such as ECI and county health departments, utilized various community needs assessments. Many of these agencies were involved in our SDMT and reported out to that group.  |
| 4-e | Ensure that all neighborhood network members and DHS-contracted agencies require specific “best practice” standards for delivering human services |  |  |  | **Ongoing:** **Proposed Plan:****Progress:** |
| 4-f | Ensure that the SDM group, agency administrators and service recipients evaluate service delivery on a regular basis |  |  |  | **Ongoing:** **Proposed Plan:****Progress:** |
| 4-g | Implement recommendations of various state and federal reviews |  |  |  | **Ongoing:** **Proposed Plan:****Progress**: |

#  At the writing of this proposed report, select the level\* for Policy and Practice Change that best fits your site: 1

# Based on your completed activities, select the level\* for Policy and Practice Change that best fits your site: 1

# \*For more detailed information on the levels, please see the CPPC Practice Guide

#### Name: Sarah Gibson Title: CPPC Coordinator

## *Site:* Indianola DCAT Cluster *Address:* 200 S Howard Street, Indianola, Iowa 50125 *Phone:* 515.468.8181

**Please return this completed form to both Sandy Lint *and* Julie Clark-Albrecht:**

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