**Community Partnership Reporting / Evaluation Form**

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

Reporting Period: July 1, 2021- June 30, 2022 Coordinator(s): Sarah Gibson

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Check the Following: Proposed Plan  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 |  |  |  |  |  |  |  |  |  | Jacqueline Stubbers, Kate Roy, Kelly Brown, Chad Hargin, Briahnna Wood, Tricia Worrall & Angela Crees |
| Decat | 1 |  |  |  |  |  |  |  |  |  | Joe Burke, Teresa Burke |
| ECI | 1 |  |  |  |  |  |  |  |  |  | Deb Schrader |
| Neighborhood/Comm. Members\* |  |  |  |  |  | 3 |  |  |  |  | Dio Ayala (Community/American Legion) Chris Nolte (Community member) & Tisha Pleake (Foster Parent) |
| Domestic Violence | 2 |  |  |  |  |  |  |  |  |  | Katie Johnson & Sam Keith (Crisis Intervention Services) |
| Substance Abuse | 2 |  |  |  |  |  |  |  |  |  | Devon Leslie (EFR), Sarah Reiss (EFR) |
| Mental Health | 16 |  |  |  |  |  |  |  |  |  | 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 |  |  |  |  | Scott O’Conner (Winterset Community Church), Sam Fisher (Indianola Methodist Church) & Liz Hensley (Bring Love Ministry) |
| Health Care | 4 |  |  |  |  |  |  |  |  |  | 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 |  |  |  |  |  |  |  |  |  | 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 |  |  |  |  |  |  |  |  |  | Natalie Montross, Tonya King, Linda Colby & Kim Garrison (Juvenile Court) |
| Law Enforcement |  |  |  |  |  |  |  |  |  |  |  |
| Government (i.e. City, Co.) | 3 |  |  |  |  | 1 |  |  |  |  | Doug Shull (Warren County Supervisor), Aaron Price (Madison County Supervisor), Steve McCombs (Marion County Supervisor) & Kristin Brekelmans (City of Indianola) |
| Practice Partners\* | 13 |  |  |  |  | 1 |  |  |  |  | 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 |  |  |  |  |  |  |  |  |  | Roger Netsch (WeLift Job Search Center), Heather Brooks (Connect 2 Careers-CFI) & Karie Foster (FaDSS) |
| Prevention Councils | 1 |  |  |  |  |  |  |  |  |  | Val Cameron (Warren) |
| Youth |  |  |  |  |  |  |  |  |  |  |  |
| Former Clients of DHS\* |  |  |  |  |  |  |  |  |  |  |  |
| Parent Partners | 2 |  |  |  |  |  |  |  |  |  | Adam Andre & Tijana Mrvoljak |
| Other |  |  |  |  |  | 1 |  |  |  |  | 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 Board  Our 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 Team  Our 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 are given the opportunity to fill out the survey yearly. Our voting members are required to fill out the survey. Survey was distributed in July 2022. |
| 1-f | Develop plan for Ongoing comprehensive understanding of the four strategies for individuals involved in Shared Decision Making process |  |  | X | **Ongoing:**  **Proposed Plan:**  **Progress:** 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. Completed in FY22. |

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| 1-g | Establish and develop plan to meet membership recruitment goals for SDM, including diversity | X |  | 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: CPPC Coordinator and SDMT will continue to reach out to potential voting members. We will focus specifically on the categories (page 3) that we are lacking and community members.  Progress: In FY22, we experienced significantly lower attendance (some meetings had only 3 in attendance). As a result, we had to re-evaluate. For a period of time, we did not hold formal meetings. Instead, we piggy backed on other local provider meetings to distribute information and kept our voting member committee intact. In F Y23, we will again meet and begin rebuilding our group to address diversity and include many of the aforementioned categories. |
| 1-h | Provide oversight for the planning and implementation of the four CPPC strategies |  |  | 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:** Updates provided to both the SDMT and local provider groups, were submitted broken down into the four strategies. In FY22 we were able to follow the plan and discuss ideas for implementation and/or adjustments to the plan. |
| 1-i | Develop orientation plan for new members |  |  | X | **Ongoing:** CPPC Coordinator meets with new members after their first meeting and provides them with an orientation packet. An orientation packet was developed by CPPC Coordinator and DCAT Coordinator in FY16. Packet was updated in FY19.  **Proposed Plan:**  **Progress:**  We added one new voting member this year. We held and orientation with her via Zoom. The orientation packet can be found at https://www.cppconline1.com/new-member-orientation-information.html. |

| 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:** Indianola DCAT Cluster SDMT has representation from domestic violence, substance abuse and mental health.  **Proposed Plan:**  **Progress:** Representation in these categories continued in FY22. |
| 2-b | Implement plan for Ongoing comprehensive understanding of all four strategies |  |  | 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.  **Proposed Plan:**  **Progress:** Above mentioned items were completed. Plans were made for the CPPC Coordinator to do a formal presentation at the August 2022 SDMT meeting. |
| 2-c | Implement orientation plan for all new members |  |  | X | **Ongoing:** An orientation packet was developed by CPPC Coordinator and DCAT Coordinator in FY16. All new attendees 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.  **Proposed Plan:**  **Progress:**  Above mentioned items were completed in FY22. |
| 2-d | Conduct Parent Partner orientation for all Shared Decision Making Team members |  |  | 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 coordinators were made aware of our meetings and given the opportunity to present. No presentations were given, but a coordinator did attend fairly regularly. |
| 2-e | Share information and progress of the local Parent Partner program regularly |  |  | X | **Ongoing:** If present, Parent Partner(s) share information and progress at monthly SDMT meetings. Parent Partner Coordinator(s) also give progress reports.  **Proposed Plan:**  **Progress:** Parent Partner Coordinator attended fairly regularly and provided updates a few times. |
| 2-f | A Parent Partner is added to the membership of the SDM Team | X |  | X | **Ongoing:** A Parent Partner and Parent Partner Coordinator attend our SDMT meetings fairly regularly and provide valuable input.  **Proposed Plan:**  **Progress:** Parent Partner Coordinator, Adam Andre, is part of our SDMT and has been in attendance fairly regularly. We have not had regular attendance from Parent Partners. |
| 2-g | Membership recruitment plans that address diversity according to the demographics of your community | X |  |  | **Ongoing:** SDMT is continuing to work together to recruit members that address the diversity in our counties.  **Proposed Plan:**  **Progress:** We tabled this topic about half way through FY22 due to lack of attendance at SDMT meetings. We instead focused on increasing attendance and maintaining those that were attending. |
| 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 FY22.  **Progress:** CPPC Coordinator gathered consensus data in FY 22. Began looking at the new Family First dashboard to gather information on diversity and disparity. We’ve also made several attempts to connect with DHS regarding this matter. Thus far, it has been unsuccessful. |
| 2-i | Host a CPPC Immersion 101 event in CPPC area at least once every three years | X |  |  | **Ongoing:** Immersion 101 will be hosted every 3 years. Hosted an Immersion 101 training in FY16 and FY19.  **Proposed Plan:**  **Progress:** We tabled this item in FY22 due to lack of budget, lack of SDMT attendance and COVID regulations. We will re-evaluate in FY23. |
| 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:** We were able to add one new community member to our efforts. Again, attendance and participation was a struggle for us this year. |

| 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:** We have met all items in level 2.. We do have two representatives from the domestic violence, substance abuse and/or mental health categories.  **Proposed Plan:**  **Progress:** Above mentioned items were completed in FY22. |
| 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:** Within our SDMT, we have members representing health care, education, legal system (courts), government, economic supports, practice partners and prevention councils.  **Proposed Plan:**  **Progress:** We have representation from the aforementioned categories at the end of FY22. |
| 3-c | SDM develop avenue for youth voice (youth in foster care or foster care alumni) |  |  | 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:** Identified youth to fulfill this role in FY22. He will begin in FY23. |
| 3-d | Develop linkages and partnerships with other groups into SDM team |  |  | X | **Ongoing:** CPPC Coordinator continuously works with local provider groups to pull in new members/voices and partnerships to the SDMT.  **Proposed Plan:**  **Progress:**  CPPC Coordinator continuously worked this year to tie new members of provider groups into CPPC. Many (if not all) were added to our mailing lists and some attended our SDMT meeting. Connections were also made with new staff replacing existing staff we had an established partnership with. |
| 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:** This item will be ongoing into FY23. Again, lack of attendance/participation in our SDMT made this difficult to achieve this year. |
| 3-f | Role of the SDM group expands to include identifying, and developing a plan to meet unmet needs within the community |  |  | 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:** We were able to meet all unmet needs that came to the CPPC Coordinator’s attention through informal and formal supports on our CPPC mailing list in FY23. |
| 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 did not have a budget to host RPI this fiscal year. We will look at hosting again in FY23. |
| 3-h | Shared decision making survey scores used as a tool to guide quality improvement of strategy implementation |  |  | 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:** The survey was administered in FY22. CPPC Coordinator will now go over the results, share them with the SDMT and discuss steps going forward in FY23. |
| 3-i | SDM goals for community members are met (see CPPC Community Involvement and Instructions for definition, page 2) | 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:** Lack of participation/attendance in our SDMT this year has prevented us from continuing to grow our number of community members. Goals for growth have been identified for FY23. |

| 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:** Not all items were met in level 3. See above. |
| 4-b | Have ongoing implementation of new member orientation |  |  | X | **Ongoing:** New member orientation (orientation packet and orientation session with coordinator) is utilized as new members attend the SDMT.  **Proposed Plan:**  **Progress:** We added one new voting member this year. Our voting members held a virtual orientation with her and provided her with the orientation packet. CPPC Coordinator provided all other new attendees with the orientation packet, discussed CPPC and answered any questions new attendees had. |
| 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:** FY22 was spent attempting to identify a youth voice to be represented on our SDMT. In FY23, the identified youth will begin attending our SDMT 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 | **Ongoing:** SDMT regularly discusses unmet needs in the community at monthly meetings. Plans are developed to address unmet needs as needed.  **Proposed Plan:**  **Progress:** As needs were brought to the DCAT and CPPC Coordinators’ attention, we were able to meet them through our network and mailing lists in FY22. |
| 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 | **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 regional and statewide planning committees. CPPC Coordinator also served on the Executive Committee. CPPC Coordinator attended all statewide and regional meetings. |

**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**: 3

**\*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 |
| 2. Understanding and Agreement Goals: | Members understand and agree on goals and proposed outcomes/objectives. | 4.13 | 4.5 | 4.14 |
| 3. Clear Roles & Responsibilities: | Roles & responsibilities of members are clear. | 3.88 | 4.33 | 3.86 |
| 4. Shared Decision Making: | All members have a voice and are engaged in the decision making process. | 4.38 | 4.5 | 4.14 |
| 5. Conflict Management: | We are able to successfully manage conflict. | 4.25 | 4.67 | 4.14 |
| 6. Shared Leadership: | Leadership is effective and shared when appropriate. | 4.5 | 4.5 | 3.86 |
| 7. Well Developed Work Plans: | Work Plans are well developed and followed. | 4 | 4.17 | 3.86 |
| 8. Relationships/Trust: | Members trust each other. | 2.88 | 4.83 | 4.14 |
| 9. Internal Communication: | Members communicate well with each other. | 3.88 | 4.67 | 3.86 |
| 10. External Communication: | Our external communication is open and timely within the broader community and partners. | 4 | 4.67 | 4.29 |
| 11. Evaluation: | We have built evaluation performance into our activities. | 2.5 | 4.0 | 3.71 |
| 12. Understanding of CPPC: | Members have a clear understanding of the Community Partnerships Four Strategies. | 3.13 | 4.33 | 3.71 |
| **Average Response Score:** | This is an average score for all of the responses, the number should be between 1-5 | **3.83** | **4.47** | **3.98** |

| Community/Neighborhood Networking-Level 1 | | | | | |
| --- | --- | --- | --- | --- | --- |
| 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 | **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:** Community events/activities were still on hold in FY22. CPPC Coordinator did attend 21 local provider meetings and discussed CPPC and the need for new members. We were able to add numerous people to our network as a result. |
| 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 | **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:** Attended many community meetings as stated above. Community events and activities were on hold this year. Any meeting the CPPC Coordinator attended, she worked to build awareness of CPPC through presentations, introductions and summaries of work being done by 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 | **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:** We gained a new voting member this year. CPPC Coordinator and existing voting members worked with her to educate her on CPPC and answer questions she had at the time. Moving forward, we will continue to work with her so that she can become comfortable with the information and serve as a spokesperson for CPPC as our other voting members do. |
| 1-d | Establish performance and outcome measures and evaluate these to ensure the goals (from the planning stage) are obtained | 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:** We added numerous network members to our mailing lists this year. Through our network, we are able to touch on each of the categories outlined in the beginning of this document. Local trainings and events were on hold this year. |

| 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 | **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:** Completed in FY22 through community meetings, our website and mailing lists. |
| 2-b | Develop Neighborhood/Community Networking Plan that includes goals for linkages, collaborations, strategies and planned activities |  |  | 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:** Completed in FY22. These networks were already in place, but CPPC Coordinator/SDMT worked to create deeper linkages within these networks through thorough CPPC updates at provider meetings and expanding our mailing lists. |
| 2-c | Develop/promote a plan to increase linkages between informal and professional supports and resources |  |  | 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:** Plan was developed years ago and has been successful since. Our mailing list does a great job of linking informal and formal supports. As word has spread about our mailing lists and its success in linking families in need with community members willing to donate, it has continued to grow on its own. Individuals hear about it at provider meetings, from those that have utilized it, from community members that have donated and from professionals who connect families and reach out to the CPPC Coordinator to get added to the list. The mailing list is also tied back to our website which has countless lists of resources for our three county area. |
| 2-d | Develop a plan to increase collaboration among economic supports, domestic violence, mental health, substance abuse and other child welfare professional partners |  |  | 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:** We’ve had success in FY22 prior to suspending meetings in this area. Giving providers an opportunity to share information and network has created organic collaboration in our area. We will continue this in FY23. Again, our website and mailing lists have also tied these groups together in our communities. |
| 2-e | Involve Parent Partners in collaborative programs in the community | X |  |  | **Ongoing:**  Parent Partners are made aware of local meetings, activities and events through the CPPC Coordinator and/or the SDMT.  **Proposed Plan:**  **Progress:** As stated above, getting consistent attendance from Parent Partners was difficult this year. Through our mailing lists and meeting minutes, they are made aware of opportunities to collaborate in our communities, though. |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 2-f | Involve Foster Parents in collaborative programs in the community |  |  | 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: We have several foster parents serving in a professional role on our SDMT. Additionally, we have several more foster parents in our network through our mailing list. |

| 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 |  |  | **Ongoing:** Met all areas of level 1 and 2.  **Proposed Plan:**  **Progress:** Gaining consistent Parent Partner involvement has been difficult. |
| 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 | **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:** Continued in FY22. |
|  | * **Implement** plan to increase collaboration among economic supports, domestic violence, mental health, substance abuse and other child welfare professional partners |  |  | 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:** We do have an open dialogue established with DHS in FY22. They utilize our mailing list, resource lists, food access lists, etc. Collaboration among the other groups have happened as a result of our SDMT, provider groups, mailing lists and website. |
|  | * The development of **hubbing** resources and activities that enhance the accessibility of services and supports |  |  | 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:** Completed in FY22. |
|  | * Increase awareness and develop plans to address **diversity** and disparity locally | X |  |  | **Ongoing:**  **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:** This item was tabled due to lack of participation/attendance at our SDMT meetings in FY22. |
| 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 |  |  | **Ongoing:**  **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:** Did not address in FY22 due to lack of attendance at our SDMT. Will discuss in FY23. |
| 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:** Informal supports continue to be part of our mailing lists which are used to help identify and meet needs. They were not utilized for CBFTMs this year as they were tabled pending the roll out of the new Family and Youth Centered Engagement strategy. |
| 4-c | Implementation of all programs and activities consistently address Diversity and Disparity issues |  |  |  | **Ongoing:**  **Proposed Plan:**  **Progress:** |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Level # | Network Activity | Description goal and what was invested | # of Participants | Outcome(s) |
|  | 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. | 320+on the mailing list. 2,000+hits per week on the website. | 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. |
|  | 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. | 300+ | CPPC Coordinator worked with centers/schools to engage them via email or phone. All participating schools/centers in our three-county area were provided their supplies free of charge. |
|  | 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. | 10 | 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. |
|  | 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. | 150+ | 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, engaging new members, etc. |
|  | New employee introductions | 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. | 3 | CPPC Coordinator met with Emily from Madison County Health Care System and Tempestt Aldrich from EFR.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. |
|  | Meeting basic family needs | 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. | 100+ | CPPC Coordinator worked with providers to send out need lists to CPPC Coordinator’s mailing lists and coordinate donation and pick up of needed items. As a result, many families’ needs were met. |
|  | Marion County Cares | To attend Marion County Provider meeting to learn of needs in the community.CPPC Coordinator attended 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. |
|  | Madison County Cares | To attend Madison County Cares meeting to assist in planning community events and learn of community needs.CPPC Coordinator attended 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. |
|  | Warren County Cares Coalition | 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 monthly meetings. | 25+ | CPPC Coordinator learned of needs and reported back to Shared Decision-Making Team/Steering Committee.Providers had a better understanding of CPPC/DCAT. |
|  | CPPC 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 FY22. The convenings was held virtually. CPPC Coordinator was able to share ideas to improve awareness of CPPC as well as gain information of potential presenters/speakers at our own local events. |
|  | Parent Café Training | To train Parent Café facilitators to serve the communities in our counties and grow our Parent Café program. DCAT and CPPC Coordinators’ time to collaborate with Polk County in planning the training. Funding of about $2,500 to pay for trainers and food. | 35 | We were able to train 3 new facilitators for our area. |
|  | Madison County Cares Future Planning Committee | 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. | 10 | CPPC Coordinator attended a second subcommittee meeting and exchanged many emails discussing options to revive the MCC group. The subcommittee developed and distributed a survey to attendees in order to gain information on what they’d like to see from this group moving forward. Survey results pushed us to have educational presentations on specific subjects moving forward. We began this in FY22 and will continue this format into FY23. |
|  | CPPC Report Workgroup | To rework the current CPPC planning and reporting form. CPPC Coordinator’s time to meet with the workgroup and subcommittee. SDMT/DCAT Coordinator’s time to provide feedback. | 15 | A completed planning/reporting form was distributed to CPPC Coordinators for completion of their FY23 plan.Input from several different individuals was considered when creating the form. |
|  | Madison County KIDS Coalition | To share information on CPPC with a new network. CPPC Coordinator’s time to participate in the meeting. | 15 | Attendees were educated about CPPC, how they can get involved and what services we can offer them. |
|  | Meeting with Teaching Strategies | To discuss how Al’s Pals has functioned within CPPC/DCAT for the last number of years while Wingspan owned it and how we can partner with the new owner, Teaching Strategies moving forward. CPPC Coordinator’s time to meet with Teaching Strategies’ employees. | 4 | CPPC Coordinator and Teaching Strategies employees were able to learn from each other and how they can best serve each other.Teaching Strategies employees learned more about how CPPC and DCAT work in our area and how Al’s Pals fits into our goals. |
|  | CPPC Executive Committee | To work with other CPPC and DCAT Coordinators from around the state to better CPPC, discuss initiatives, ideas, etc. CPPC Coordinator’s time to participate in meetings. | 45 | CPPC Coordinator was able to network with other professionals around the state to share ideas, progress, programs, etc. CPPC Coordinator was also able to share this information with her SDMT and DCAT Board. |
|  | Resilient Iowa Workshop | To network with area agencies to better serve our counties and to learn more about the impact of trauma on health and well-being. CPPC Coordinator’s time to attend the two-day workshop. | Unsure of how many attended. | CPPC Coordinator was able to gain knowledge that will be utilized in future presentations and work with families. |
|  | Total # of Activities: 17 |  | Total # of Participants: 1,082+ |  |

# 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**: 2

**\*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 |  |  | **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:** Tabled in FY22 due to restructuring of the ICA strategy. |
| 1-b | Promoting the understanding, the use, and the importance of informal supports in the FTDM and YTDM processes | 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:** Tabled in FY22 due to restructuring of the ICA strategy. |
| 1-c | Promoting FTDM and YTDM trainings, and coaching and mentoring if needed | X |  |  | **Ongoing:** As trainings are available, CPPC Coordinator is promoting them at local meetings and events.  **Proposed Plan:**  **Progress:** Tabled in FY22 due to restructuring of the ICA strategy. |
| 1-d | Understand how FTDMs and YTDMs are available and accessed for families involved in the child welfare system | 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:** Tabled in FY22 due to restructuring of the ICA strategy. |
| 1-e | Explore and understand FTDM and YTDM Iowa standards and how they are implemented | 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:** Tabled in FY22 due to restructuring of the ICA strategy. |
| 1-f | Promote collaboration between FTDM and YTDM facilitators from different organizations and agencies | X |  |  | **Ongoing:** 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.  **Proposed Plan:**  **Progress:** Tabled in FY22 due to restructuring of the ICA strategy. |

| 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:** Tabled in FY22 due to restructuring of the ICA strategy. |
| 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 |  |  | **Ongoing:** CPPC Coordinator is currently implementing CBFTMs.  **Proposed Plan:**  **Progress:** Tabled in FY22 due to restructuring of the ICA strategy. |

| 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 |  |  | **Ongoing:** Continuing to work to spread awareness about FTDMs and YTDMs. No current plan to implement CBYTDMs  **Proposed Plan:**  **Progress:** Tabled in FY22 due to restructuring of the ICA strategy. |
| 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:** Tabled in FY22 due to restructuring of the ICA strategy. |
|  | Number of CBFTDM held |  | 3 |  | **Ongoing:**  **Proposed Plan:** CPPC Coordinator hopes to hold three (3) CBFTMs this year.  **Progress:** None were held in FY22 due to the restructuring of the ICA strategy. |

| 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:** Tabled in FY22 due to restructuring of the ICA strategy. |
| 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**: 1

**\*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 | **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:** Completed in FY22. |
| 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 | **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:** Due to lack of attendance/participation, we were unable to gather much input from Parent Partners this fiscal year. However, our SDMT was able to identify a youth with lived experience to begin participating in our SDMT/CPPC network in FY23. |

| 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 |  |  | **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 were able to identify a youth formerly involved in FY22. He will begin attending SDMT meetings in FY23. |
| 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 |  |  | **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:** We didn’t have any needs/gaps in services of this magnitude this year. Our focus was mainly on trying to maintain current projects and services. Due to existing infrastructure, we were able to meet individual needs. |

| 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:** Youth with former involvement will begin serving on our SDMT in FY23. |
| 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: See 2-b.** |

| 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 |  |  | **Ongoing:**  **Proposed Plan:** See 1-b.  **Progress:** See Levels 1-3. |
| 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:** Several provider groups had discussions pertaining to policies and practices within various agencies of which SDMT members were a part of. All were in the beginning stages of discussions to potentially make adjustments to better serve families/individuals. |
| 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:** To CPPC Coordinator’s knowledge, all agencies who planned to survey consumers/partners did. An example of this would be when EFR gives an educational presentation, they surveyed those in attendance on the presentation’s effectiveness. |
| 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:** SDMT did not solicit feedback from families/community members. |
| 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:

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

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

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