

Child Welfare

Building, Developing, and Leveraging Collaborations



Quality Improvement Center
for Research-Based
Infant-Toddler Court Teams



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Introduction

The Quality Improvement Center for Research-Based Infant-Toddler Court Teams (QIC-CT)¹ is building and disseminating knowledge of effective, collaborative court team interventions that seek to transform child welfare systems' interventions for infants and toddlers and their families. The QIC-CT supports work in 12 sites^{2,3} working to implement and institutionalize an innovative approach—based on the ZERO TO THREE [Safe Babies Court Team](#) (SBCT) approach—for improving child, family, and system outcomes. [The first in a series of issue briefs](#) about sustaining practice change beyond the demonstration introduced the [Framework for Sustainability](#)⁴ and discussed key elements that are necessary for sustainability—**collaboration, resources, data, financing, policy and legislation, and a common vision**. This is the second brief in the series and focuses on the importance of **collaboration** in sustaining practice change.

Case Studies

The QIC-CT sites have all developed and are continuing to create new collaborations to implement and sustain the SBCT approach in their local communities. These collaborations vary among sites but most often include the child welfare agency, court (including the judiciary and Court Improvement Program), community-based mental and behavioral health providers for both children and parents, parent partners,⁵ public agencies including the department of health and the office of early childhood, early intervention programs, attorneys for children, parents, and the state and local universities. The case studies included in this issue brief represent examples of how sites are using collaborations to advance their common vision and sustain practice change.

¹ The QIC-CT, funded by the U.S. Department of Health and Human Services Administration for Children and Families, Children's Bureau, is providing intensive training and technical assistance to fully develop and expand research-based infant-toddler court teams.

² The 12 demonstration sites are located in: Connecticut, Eastern Band of Cherokee Indians (located in North Carolina), Florida, Mississippi, Hawai'i, and Iowa.

³ Throughout this brief, "site" refers to the systems and jurisdictions working to sustain change.

⁴ The Framework for Sustainability was created by CSSP for the QIC for Research-Based Infant Toddler Court Teams.

⁵ Parent partners, also known as parent mentors or peer mentors, are parents who have themselves experienced involvement with child welfare systems and after successfully reunifying with their children, work with parents who are currently involved with child welfare systems. Parent partners are paid employees of organizations that support the important role parents who have successfully reunified with their children can play in empowering, providing guidance, and advocating with and for parents with open child welfare cases. One example of such a program is The Parent Partner program initiative funded by the Iowa Department of Human Services. The program trains and supports parents, who have experienced child welfare interventions with their own families and successfully reunified with their children, as mentors to parents who are currently involved with child welfare and are working toward reunification.

Collaboration Is Key

Collaboration may be the most fundamental ingredient to implementing and sustaining any intervention. An established collaboration is defined by multiple partners across systems and organizations working toward a common goal and shared outcomes—or the common vision.⁶ Fundamental partners for this work to be successful are the child welfare agency, the court—including the judge and Court Improvement Program—and community-based agencies⁷—who commit to work together to better meet the needs of children who are birth to 3 years old and their families. As noted in the Safe Babies Court Team Core Components, these partners are instrumental to achieving the mission of the approach and desired practice and policy change.

However, successful implementation and sustainability also require additional partners who understand their community and are willing to work together. Successfully implementing the approach demands engaging partners who have not always been involved closely with child welfare or court initiatives. This also includes individuals and organizations who may not always be considered—for example parents who themselves have experienced child welfare intervention and have successfully reunified with their children. In order to build strong collaborations that will support sustainability, all partners must be committed to the common vision. Building the common vision and establishing shared priorities is an ongoing process—if members of the team have drastically different ideas about the goals of the work or of what practice and systems change will look like as a result of the intervention, it will be extremely difficult to ensure a commitment both in the beginning and over time.

Tribal organizations and Tribal representatives are key collaborative partners in the Safe Baby Court Team (SBCT) approach to ensure that Indian Child Welfare Act (ICWA) requirements are followed for children who are identified as having American Indian tribal membership or are eligible for tribal membership and have a biological parent who is a tribal member. Many states have their own state ICWA laws, which add additional requirements, highlighting the importance of a strong collaboration between SBCTs and Tribal organizations and representatives.

A site's **common vision** drives system efforts and includes making and sustaining culture, behavior, policy, and practice changes in order to better meet the needs of infants, toddlers, and families involved with child welfare systems—including achieving permanency in a safe, stable, and nurturing home as quickly as possible.



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⁶ See *Sustaining New Approaches in Child Welfare: A Framework for Sustainability for Research-Based Infant Toddler Court Teams*.

⁷ Throughout this issue brief, "community-based agencies" refers to agencies providing a wide range of services and supports including but not limited to mental and behavioral health services, medical and dental health care, early intervention services, early learning centers, parent partners, mentoring, housing supports, and legal services.

Developing and building on long-standing and new relationships is critical for sustaining practice change down the road. Each site is driven by and has implemented the SBCT approach based on the community's common vision and has focused on the need for collaborative partnerships to ensure culture and practice changes are sustained. The following case studies highlight how QIC-CT sites are using their common vision to develop new collaborations and to leverage existing relationships to increase **resources** to children and families involved in the SBCT approach and secure **finances** to support continued practice change resulting from this approach.

Eastern Band of Cherokee Indians—Building Collaborations to Support the New Title IV-E Family Safety Program.

On October 1, 2015, supervision and oversight of all child welfare services were transitioned from the local counties in western North Carolina—including Jackson and Swain—to the Eastern Band of Cherokee Indians. This historic move positioned all tribal services under one umbrella, which provides the infrastructure to strengthen tribal community partnerships and more seamlessly provide support to families with very young children. The community coordinator has worked closely with stakeholders from the visiting nurses program, mental and behavioral health services, the local hospital, and the workforce training program to develop a network of services to support families and achieve the common vision, which values Cherokee culture and includes an important emphasis on empowering and supporting Cherokee parents.

Connecticut: Leveraging a Common Vision to Build Collaborations to Sustain Practice Change

In the two Connecticut sites, efforts of the New Haven and Milford SBCTs are led by the Department of Children and Families (DCF). Each site has its own SBCT that works closely together to improve practice at a system level, while continuing to develop collaborations and resources within the local communities. Key stakeholders on the SBCTs include the Office of Early Childhood, community-based mental health agencies, and partners from Project LAUNCH⁸—a federal initiative to promote the wellness of children ages birth to 8 by addressing the physical, social, emotional, cognitive, and behavioral aspects of their development.⁹

Connecticut Snapshot:

- Lead Agency: Department of Children and Families
- Sites: New Haven and Milford
- Team Name: New Haven Safe Babies Court Team, Milford Safe Babies Court Team
- Community Coordinators: ZERO TO THREE staff
- Community Coordinator Home-Base: Child Welfare Agency
- Number of QIC-CT cases: 60

⁸ Project LAUNCH is a federal initiative funded through a partnership among the Substance Abuse and Mental Health Services Administration, the Administration for Children and Families, the Health Resources and Services Administration, and the Centers for Disease Control and Prevention.

⁹ National Resource Center for Mental Health Promotion and youth Violence Prevention. <http://www.healthysafechildren.org/grantee/project-launch>

Through a commitment to the common vision, the New Haven SBCT has leveraged these important collaborations to develop and disseminate a new pocket guide¹⁰ for workers to use while in the field. This practice guide for the field—which was developed in response to worker feedback regarding the need to have easily accessible information about children birth to 3 and their development—provides information for child welfare practitioners working with infants and toddlers across the state in order to support improved practice during investigations and ongoing case work with young children and their families. The collaboration within the infant-toddler court team allowed experts in infant mental health and early childhood development to work together to create a practice guide that can be incorporated into daily use and can be reinforced across public and private agencies. Because of DCF’s lead role in the SBCT approach, local DCF managers are now working with their state-wide training academy to integrate this practice guide into statewide training—thereby creating a sustainable mechanism for promoting and broadly institutionalizing practice changes that were first developed through the local sites.

In addition to creating the guide for sustaining practice change, the New Haven and Milford SBCTs have leveraged the collaboration with Project LAUNCH and community-based providers, including the Connecticut Association of Infant Mental Health, to gain access to necessary financial and in-kind support to increase the availability of child-parent psychotherapy in the community.

Building New Collaborations and Maintaining Commitment

Across the QIC-CT sites, there is wide variation in which partner is taking the lead in implementing the approach—from the child welfare agency, to the court, to community-based agencies. Consequently, there is variation as to where the community coordinator is based.¹¹ Whatever organization the community coordinator calls “home,” the capacity to facilitate collaboration and relationship building is critical to the development and maintenance of the SBCT approach. Specifically, community coordinators are responsible for chairing and organizing the multi-system infant-toddler court team as the team works to implement and sustain practice change.

How collaborations are developed and engaged varies based on which system—child welfare, the court, or the community—is leading the initiative. There is no universal “right” lead in implementing the SBCT approach, as investment from all three core partners is essential. The lead system or agency, however, must engage and recognize the importance of the other stakeholders—child welfare agency, court, community-based agencies, and other public systems—in building the infant-toddler court team and creating buy-in for effective implementation and sustainability. Through understanding and taking action to facilitate cross-system and agency collaboration, the community coordinator and infant-toddler court team can

¹⁰ Full title for the pocket guide: *Department of Children and Families, Early Childhood Pocket Guide Promoting Informed, Collaborative and Reflective Practice in Early Childhood.*

¹¹ In some QIC-CT sites, while the community coordinator position is based within a certain agency within the state, the position is currently funded through the QIC-CT and the community coordinator is an employee of ZERO TO THREE. In other QIC-CT sites, the community coordinator is funded by the agency where they are located.

identify the key leaders, stakeholders, and agencies¹² that must be engaged from the beginning and can leverage their access to additional networks as the work develops. Infant-toddler court team members need to continuously scan the community beyond the standard child welfare partners to develop new collaborations that can support and contribute to the efforts of the infant-toddler court team. For example, adult servicing community-based agencies, members of the business community, and a variety of service clubs in a community such as Rotary, Kiwanis, and Lions Club can be engaged. Likewise, faith communities can also be encouraged to join and support the infant-toddler court team work.

Forrest and Rankin Counties, Mississippi: Building New Networks

The community coordinators in Mississippi build in time throughout their work weeks to build their relationships with existing partners and to continue to learn more about new resources available in their communities. Through recognizing the needs of parents and children involved with the SBCT approach, the Forrest County SBCT regularly scans the community for meetings and events related to family needs. The team recently connected with The Lighthouse, a housing program that provides holistic supports and services to parents and families including on-site therapy and GED and workforce support. As a result of connecting with the Forrest County SBCT, staff from The Lighthouse regularly attend court team meetings and participate in discussions with system leaders and community-based providers in order to create a more seamless system of supports for young children and their families.

Mississippi Snapshot:

- Lead Agency: Forrest County Youth Court and Rankin County Youth Court
- Sites: Forrest County and Rankin County
- Team Name: Forrest County Safe Babies Court Team, Rankin County Safe Babies Court Team
- Community Coordinators: ZERO TO THREE staff
- Community Coordinator Home-Base: Court
- Number of QIC-CT cases: 45

As the Rankin County SBCT has begun to implement the SBCT approach, they have formed a strong partnership with Mission First Legal Aid Office and the Mississippi College Law School Child Welfare and Family Justice Clinic. Through developing these relationships, many of the parents involved in Rankin County have a means of accessing representation (which is neither a guarantee nor an available resource in most parts of the state). The involvement of parent attorneys in the SBCT provides an opportunity to collaborate with community-based partners in identifying additional resources to support the shared common vision of better outcomes for children and families.



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¹² While the names of agencies differ across states, these agencies can include but are not limited to Department of Health, State Medicaid Office, Department of Mental Health, Department of Behavioral Health, Department of Disabilities, and Office of Early Childhood.

Cultivating Champions

The community coordinator has multiple responsibilities—both in facilitating the infant-toddler court team and working directly with families.¹³ A goal of collaboration is to identify and cultivate **champions**—key partners operating in different circles who believe in and are invested in the approach. These champions support the community coordinator in multiple ways including leading workgroups to address barriers related to their area of expertise, cultivating additional partners and advocating for families. For example, champions in the judiciary are important for garnering buy-in and investment in changing court practice for both implementation and sustainability. University professors, including those leading law clinics and supervising mental health clinics, have also been identified as champions—as they can direct and dedicate resources to the infant-toddler court team in areas that include child and parent representation and infant, parent, and family mental and behavioral health.

Circles of Champions



East Pasco County, Florida: Cultivating Community-Based Champions

Florida is dedicated to implementing Early Childhood Courts (ECC) based on the SBCT approach across the state in 17 different jurisdictions, 5 of which are participating in the QIC-CT evaluation. The state-wide coordinator position is funded through the QIC-CT, and technical assistance from the QIC-CT is provided to all sites in the state. However, each jurisdiction is responsible for building their ECC and supporting a local community coordinator. Through strong leadership, outreach, and engagement, the Pasco County juvenile court judge cultivated a champion in a local community-based behavioral health agency. Through engaging this agency not only as a provider of services for children and families but also as a key member of the ECC working to address

Pasco County, Florida Snapshot:

- Lead Agency: Florida Office of Court Improvement and Local Family Courts
- Statewide Coordinator: ZERO TO THREE staff
- Site: Florida Judicial Circuit 6
- Team Name: Pasco County Early Childhood Court
- Community Coordinators: Bay Care Behavioral Health
- Community Coordinator Home-Base: Court
- Number of QIC-CT cases: 8

¹³ The role of the community coordinator varies slightly across sites. Specifically, the balance between engaging the court team in system reform and supporting families involved in court can vary.

systemic barriers, this agency is now a champion in the community for this work. As a result of their role in the ECC and the outcomes the agency was seeing in their work with children and families, the agency decided to dedicate resources to support the local community coordinator position moving forward.

Data: An Effective Hook for Engaging New Partners

Collecting and sharing data can be an effective “hook” to cultivate new partners and champions in the SBCT approach and advancing the common vision. Data such as permanency rates and rates of reunification are effective for sustaining and engaging new partners in the SBCT approach. Through data, the impact of the approach can be shared with perspective partners across the spectrum—from child welfare leaders, to policymakers, community-based mental health agencies and foundations—and used to garner support and to encourage financial investment, administrative change, or policy modification to support those practices that lead to positive results and outcomes for children and families. When infant-toddler court teams use data to highlight the impact of their approach, it is an effective strategy to engage additional partners across the spectrum—from those who are regularly involved with child welfare initiatives to those who have less familiarity, or have not previously invested in child welfare.

Connecticut: Using Data to Engage Child Welfare Leadership

At the macro-level, data on who is served and the results achieved are important to engage leaders who need more than anecdotal information to inform their decisions regarding the allocation of resources and funding. An agency priority for the Department of Children and Families (DCF) in Connecticut is the placement of children with relative caregivers—a best practice for minimizing trauma and maintaining stability and relationships when children are removed from their parents. As part of their sustainability work, the local New Haven and Milford teams have been working to garner support from DCF leadership. Through reviewing SBCT data, the leadership team demonstrated that approximately 90 percent of all children involved with the SBCT were placed with relative caregivers. The team is now utilizing these data in quarterly presentations to leadership as a key component of their strategy for increasing the long-term commitment and investment from DCF.

Leveraging Collaborations to Gain Access to Resources and Financing Opportunities

Resources

Given the perennial budget shortages in most states and communities for human services, access to resources—for example, space for parent-child contact, transportation, mental health services, and residential substance abuse treatment programs for parents and children—are dependent on collaboration. By working with partners across systems and in the community, infant-toddler court teams can increase a family’s ability to access services that support their well-being and mitigate the concerns that led to their involvement with the child welfare system. In working to identify

collaborations that may be missing from the team or need to be engaged more intensely, infant-toddler court teams should practice continuous learning and use their data—both quantitative and qualitative—to both understand and communicate to others about gaps in existing resources—for example, a lack of community-based infant mental health providers.

Hawai'i: Leveraging Collaborations to Improve Children's Access to Developmental Screenings and Interventions

The Zero to Three Court in Hawai'i is led by the judiciary, court staff, and the Court Improvement Project. Other key partners include the Department of Health, the child welfare agency, and a range of community providers who are heavily involved and participate in regular leadership meetings. This diverse leadership team ensures champions exist in multiple agencies and sectors on Oahu, thereby providing extensive opportunities to leverage resources for children and families involved in the court model. For example, all of the court cases for the families involved in the Zero to Three Court are heard on the same day. As a result of the strong relationships among stakeholders, the local university partner who conducts early childhood developmental assessments attends court to ensure a faster and smoother referral process for child(ren). Thus, children who are involved with the Zero to Three Court have immediate access to developmental screenings and assessments and begin receiving appropriate services. Key to sustaining the availability of this resource is maintaining and nurturing the relationship with this identified champion and leveraging that relationship to ensure an ongoing partnership and commitment from university leadership.

Hawai'i Snapshot:

- Lead Agency: Judiciary and Hawaii Court Improvement Program
- Site: Oahu
- Team Name: Zero to Three Court
- Community Coordinators: Court staff supported by SAMHSA grant and QIC-CT
- Community Coordinator Home-Base: Court
- Number of QIC-CT cases: 14

Financing¹⁴

Most often, when those implementing innovations think about sustainability, they immediately focus on *financial sustainability*—how to cover costs associated with a pilot or demonstration effort once the specialized funding ends. However, attracting and gaining longer time commitments and financial investments require the collaboration and data described throughout this brief.

In addition, in today's financing environment, investors—both public and private—are much more likely to invest in an intervention where there is collaboration and support for the work across multiple systems and when the community can show results that can lead to positive outcomes at a greater scale.

¹⁴ In this Issue Brief Series, a future issue brief will examine various financing strategies for sustaining key components of the Research-Based Infant-Toddler Court Team approach.

Iowa: Leveraging Financing Streams to Increase Child-Parent Psychotherapy Providers

The SBCT in Polk County, Iowa, is led by Children and Families of Iowa, a local nonprofit agency that provides extensive services and supports to children and families involved with the child welfare system—including therapeutic interventions, family supports, domestic violence services, and the Parent Partner program.¹⁵ Through working with core SBCT members from community-based mental health agencies and understanding the need to increase the community's capacity to provide child-parent psychotherapy (CPP), the SBCT leveraged the collaboration with a community-based mental health agency to identify an existing and mainstream funding source—the state's Medicaid block grant—to fund training new CPP providers in the community. As a result of the ability to leverage this collaboration to finance the availability of additional therapeutic resources, there is currently no waitlist and children and parents referred by the Polk County SBCT can receive this service in a timely fashion.

Iowa Snapshot:

- Lead Agency: Children and Families of Iowa
- Site: Polk County
- Team Name: Polk County Safe Babies Court Team
- Community Coordinators: Children and Families of Iowa staff with support from the QIC-CT
- Community Coordinator Home-Base: Community-Based Agency
- Number of QIC-CT cases: 19

Hillsborough County, Florida: Leveraging Champions to Finance Investments in Early Childhood Court

The Children's Board of Hillsborough County is one of eight Children's Services Councils in the state of Florida established by county voters to help fund local initiatives that support children and families. Further, The Children's Board has been a champion in the community for promoting positive outcomes for children and families. Funded by local tax dollars, the Children's Board is responsible for allocating these dollars to local programs to advance their mission—which aligns with the common vision of the Early Childhood Court.¹⁶ Through leveraging this community champion, the state and local Early Childhood Court team were able

Florida Snapshot:

- Lead Agency: Florida Office of Court Improvement and Local Family Courts
- Statewide Coordinator: ZERO TO THREE staff
- Site: Florida Judicial Circuit 13
- Team Name: Hillsborough County Early Childhood Court
- Community Coordinators: Funded locally through Children's Board of Hillsborough County
- Community Coordinator Home-Base: Court
- Number of QIC-CT cases: 1

¹⁵ The Parent Partner program is an initiative funded by the Iowa Department of Human Services and the local Polk County program and is housed at Children and Families of Iowa. The program trains and supports parents, who have experienced child welfare interventions with their own families and successfully reunified with their children, as mentors to parents who are currently involved with child welfare and are working toward reunification.

¹⁶ This is the name for the statewide initiative implementing the Safe Babies Court Team Approach in Florida.

to access financing to support the local community coordinator position. In addition, through regular participation in team meetings, The Children's Board staff engage in conversations regarding services gaps in the community, which can inform their future funding decisions.

Contact Us

The Quality Improvement Center for Research-Based Infant-Toddler Court Teams (QIC-CT) began in 2014 and is funded by the United States Department of Health and Human Services, Administration on Children, Youth and Families, Children's Bureau. The QIC-CT is operated by ZERO TO THREE and its partners, the Center for the Study of Social Policy, the National Council of Juvenile and Family Court Judges, and RTI International. For inquiries on the QIC-CT, please visit our website at www.qicct.org or email: QIC-CT@zerotothree.org.

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