WELCOME & CHECK-IN

MEETING RESULTS

1 Results-Based Accountability skills are strengthened to further embed them in the work.

2 Concrete ideas for advancing the From/To Culture Shift.

3 The VC is updated on each of the Work Groups and knows what is needed to support the work.

4 Work Group efforts are informed by broader Vision Council input to specific inquiries.

CHANGE LEADERSHIP: Engaging Thought Leaders and Leadership Teams
Sponsored by Mid-Iowa Health Foundation

AGENDA
October 28, 2020

VISION COUNCIL MEETING

9:30 AM

Welcome, Check-in, Skill Practice, & Culture Work (via Zoom Rooms)

10:30 AM

Break

10:35 AM

Report Outs: Brief Syntheses of Mtg-in-Mtg

10:45 AM

Strategy Discussions & Work Group Updates

11:50 AM

Overview of Next Steps/Opportunities & Check Out

12:00 PM

Adjourn

Real-Time Skill Practice
BART for today's Meeting-in-Meeting

Boundary (45 minutes)	**Authority** (self-facilitated; manage the time)	**Roles** (VC member *and* role-play enactor)	**Task** (achieve the Mtg-in-Mtg results)

Primary Task: Refresh the work of the Culture Shift; generate concrete ideas for advancing the culture shift effort

Process Task: Practice Results-Based Facilitation Skills and provide feedback to each other on your practice to help further develop skills

Real-Time Skill Practice
Results-Based Meeting Elements

Focus on Achieving Meeting Results	Check-In Exercise and Synthesis	Results-Based Meeting	Action Commitment Tracking

Meeting Materials: Mtg-in-Mtg Instructions and Guide, pages 1-11
- Assigning roles for skill practice and preparing for roles (p. 1-2; 5 min.)
- Begin the meeting (p. 2; 10 min., including Check In)
  - PPT slide images for the Meeting Purpose, Results, Agenda and Check In (p. 3-6)
- Group discussion questions and From/To Culture Shift slide (p. 7-8; 15 min.)
- Mtg-in-Mtg Wrap Up; reflection on skill practice (p. 9; 5 min.)
- Forms to use in the meeting (p. 10-11; 10 min.)

Change Leadership Vision Council
System Culture Shift

FROM ⬇ *Defensive Style* ⬇	TO ⬆ *Constructive Style* ⬆
Current Assessed State: Compliance Mindset	Overall Goal for the System: Move to a Value-Based Mindset
Current Assessed Behaviors:	**Ideal Behaviors:**
1. Communicating only "What"	1. Communicating "What and Why"
2. Fix-it Mindset	2. Progress Mindset
3. Fear of risk and change	3. Be an agent of change, be proactive and increase advocacy
4. Geographic Alignment	4. Goal Alignment
5. Outcomes measured by negative indicators	5. Outcomes measured by positive indicators

The Coalition
Coalition for Family and
Children's Services in Iowa

MTG-in-MTG PURPOSE

Check In

Strengthen Results-Based Accountability Skills

Rejoin to the Culture Shift Effort

Generate ideas for advancing the Culture Shift

MTG-IN-MTG RESULTS

1 VC members are joined to the purpose and content of today's meeting.

2 Results-Based Accountability skills are strengthened to further embed them in the work.

3 Concrete ideas for advancing the From/To Culture Shift are generated.

CHANGE LEADERSHIP: Engaging Thought Leaders and Leadership Teams
Sponsored by Mid-Iowa Health Foundation

AGENDA Mtg-in-Mtg

VISION COUNCIL MTG-IN-MTG

9:45 AM
Assign and Review Skill Practice Roles
(See handout)

9:50 AM
Begin Mtg-in-Mtg:
Review Meeting Purpose, Meeting Results and Agenda
(Role: Meeting Leader)

9:55 AM
Conduct and Synthesize Check In
(Roles: Meeting Leader, then Meeting Co-Leader)

10:00 AM
Cover Agenda Items
(Roles: Meeting Leader and Meeting Co-Leader)

10:15 AM
Synthesize Discussion, Review Action Commitments and "Adjourn"
(Role: Meeting Co-Leader)

10:20 – 10:30 AM
Reflection and Feedback on the Skill Practice
(Role: Participant Observer)

1

In your Zoom Room:

NAME | WORKPLACE | TITLE | ROLE

2

BRIEFLY SHARE

How are you?

What is one way you have seen the Vision Council's (VC) Culture Shift work in action, whether in your own work, in a public meeting, in a VC Work Group meeting, etc.

BREAK

DEBRIEF THE CHECK-IN AND SKILL PRACTICE

UPDATES
Vision Council Work Groups

SUBSTANCE USE DISORDERS	OLDER YOUTH	FFPSA	NORTH STAR

Elements of the Results-Based Strategic Plan

Whole Population Focus – All Iowa Children and Families

- Demographic information – key data points that are disaggregated by age, race, rural/urban, etc.
- Data target – statement on *by when* Iowa children and families will be *how much better off*
- Success measures – data points and/or trend lines that indicate achievement of the target
- Progress measures – data points that indicate the VC's strategies are moving toward the target
- Population-level strategies
    - So far, for the Vision Council: System culture shift; working through the lenses of race equity and trauma; amplifying and catalyzing existing, cross-system visions for serving children & families in Iowa.

System Population Focus – All Iowa Children and Families in the Child Welfare System

- Demographic information
- Data target(s), Success measures, Progress measures
- System Population, Strategic Populations, Program Population(s), and Strategies
    - Strategic Population Focus #1: Older youth and their families
    - Strategic Population Focus #2: Children and their families who are living with Substance Use Disorders
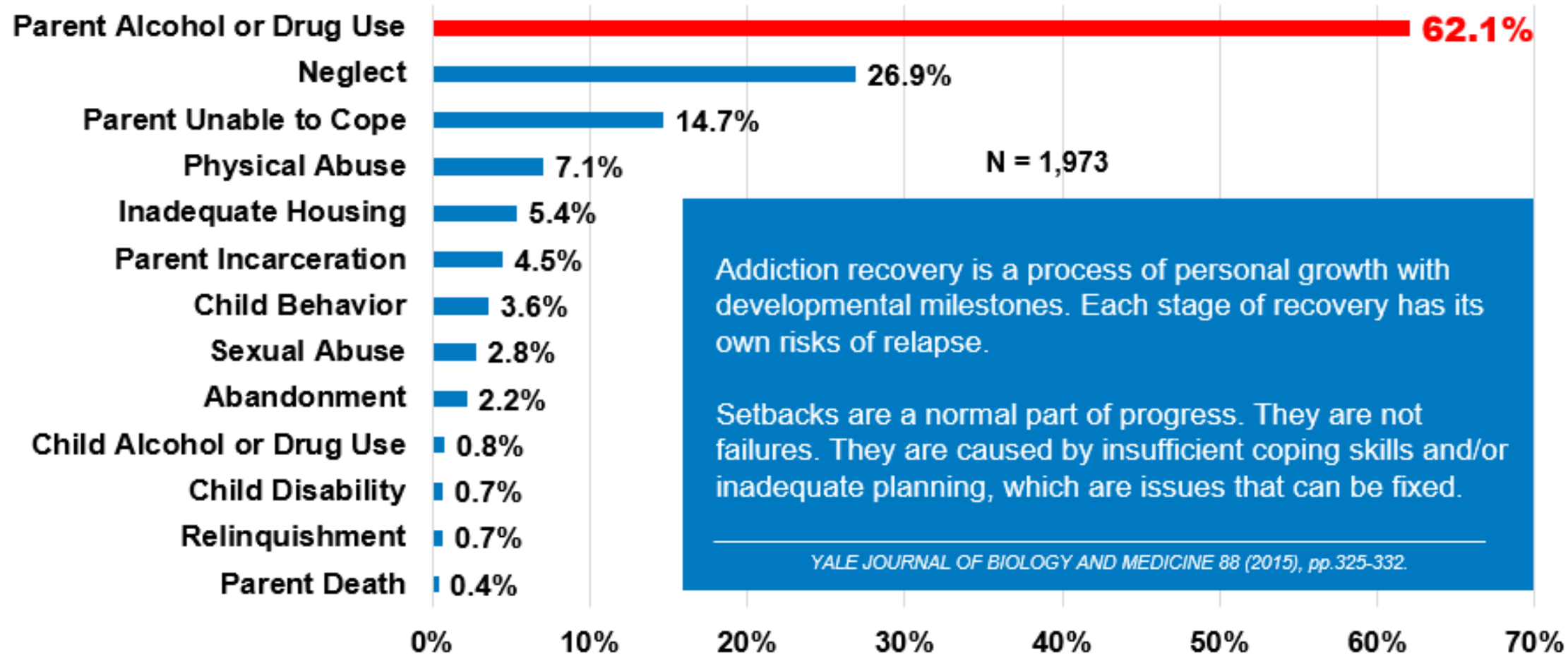
Substance Abuse Disorder (SUD) Work Group

Update

- Near-final draft vision relevant to this Strategic Population:

  Iowa families living with SUDs are in recovery and become healthier and more resilient through a family-centered, recovery-oriented, integrated systems of care approach.

- Shared beliefs drafted:

  - Recovery from SUDs is possible. When families have access to appropriate services that meet their needs, they can thrive.

  - Children and parents experience better outcomes when treated together. Therefore, a family-centered approach – where the individual and family receives prevention, treatment and recovery support – is necessary.

  - Families are the experts of their own family units.

  - A multi-systems approach is necessary to meet the full range of families' needs. All systems must operate from a shared understanding of the science and process of recovery.

- Seeking a partner and/or resources for completing two mapping projects for mental health and substance use disorder treatment for families:

  - Financing – all federal and state financing and funding

  - Programs and providers across the state, including but not limited to FFPSA EBPs

Substance Abuse Disorder (SUD) Work Group

Next Steps

- Selecting a partner for the mapping projects

  - Inquiring with Director Garcia of the fit with the planned work for the consultant working on the IDPH/DHS merger

- Conduct Factor Analysis

- Continue RBA planning process (Factor Analysis; identify a Data Target and Success Measures; create a Strategic Population Strategy with identified Progress Measures)

  - This may include selecting a Program Population, i.e. a specific sub-group of "children and their families living with SUDs"

- Consider a possible role for the Vision Council in aligning with the judicial districts who have prioritized "SUDs is a treatable disease" and have committed to raising awareness and exploring possible changes

  (Note: This is an example of an activity that could be included in the Population-Level Strategy)

Percent of Children with Terminated Parental Rights by Reason for Removal in Iowa, 2018
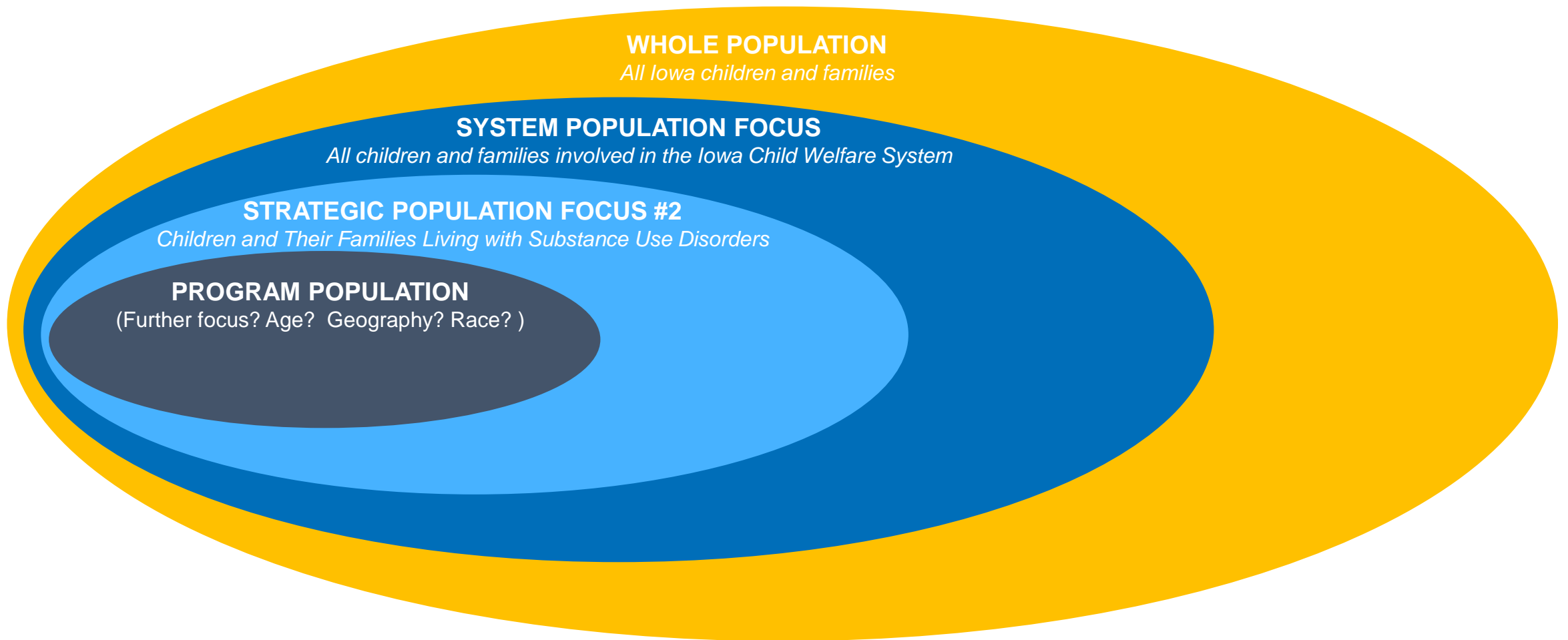
Reason for Removal	Percent
Parent Alcohol or Drug Use	62.1%
Neglect	26.9%
Parent Unable to Cope	14.7%
Physical Abuse	7.1%
Inadequate Housing	5.4%
Parent Incarceration	4.5%
Child Behavior	3.6%
Sexual Abuse	2.8%
Abandonment	2.2%
Child Alcohol or Drug Use	0.8%
Child Disability	0.7%
Relinquishment	0.7%
Parent Death	0.4%

N = 1,973

Addiction recovery is a process of personal growth with developmental milestones. Each stage of recovery has its own risks of relapse.

Setbacks are a normal part of progress. They are not failures. They are caused by insufficient coping skills and/or inadequate planning, which are issues that can be fixed.

YALE JOURNAL OF BIOLOGY AND MEDICINE 88 (2015), pp.325-332.

Note: Estimates based on **all children in out of home care at some point** during Fiscal Year

Source: AFCARS Data, 2018 v1

Saint Francis
MINISTRIES

Whole Population to System Population [1]

Children and Families in Iowa will be safe, secure, healthy and well in their communities.

STRATEGIC POPULATION FOCUS #2: Children and Their Families Living with Substance Use Disorders

WHOLE POPULATION
All Iowa children and families

SYSTEM POPULATION FOCUS
All children and families involved in the Iowa Child Welfare System

STRATEGIC POPULATION FOCUS #2
Children and Their Families Living with Substance Use Disorders

PROGRAM POPULATION
(Further focus? Age? Geography? Race?)

[1] **Trying Hard is Not Good Enough**, Friedman, Trafford Publishing, 2005

Substance Abuse Disorder (SUD) Work Group

Input Requested from Vision Council
(See pages 12-15 in the Meeting Materials Packet)

- What do you want the Work Group to consider as it conducts further inquiry, analysis and planning for "*a family-centered, recovery-oriented, integrated systems of care approach*?"

  - What insights(s) do you have about "*children and their families living with SUDs*" and/or ""*a family-centered, recovery-oriented, integrated systems of care approach*" that you think is important for the Work Group to consider?

  - Do you have thoughts about a further-focused Program Population within the Strategic Population of "*children and their families living with SUDs*?"

Older Youth

Update

Goal: *All youth ages 12 and older who enter the child welfare and juvenile justice systems stay connected to family to heal and thrive.*

- Selected **crossover youth** as the Program Population

- Identified the challenge of accessing data in the system, especially data that is disaggregated by age/race
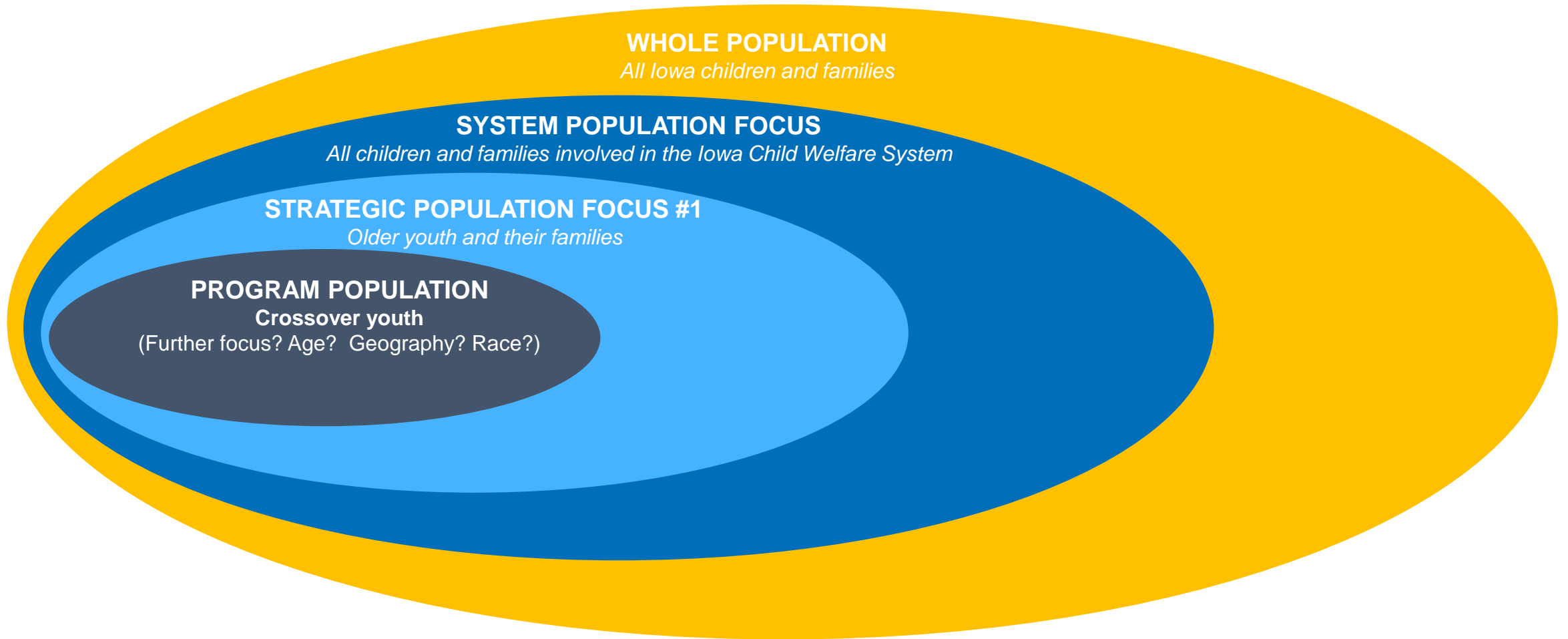
Next Steps

- Inviting a data "point person" from CJJP and DHS to meet with the Work Group to learn what data is available for crossover youth

- Inquire with other groups to see if they have data or have experienced a lack of data or barriers to data

- If deemed necessary, pursue an aligned, coordinated plan of action to remove barriers to accessing necessary data elements

- Continue RBA planning process (Factor Analysis; identify a Data Target and Success Measures; create a Program Population Strategy with identified Progress Measures)

  - One of the strategies will be to identify relevant evidence-based practices to include in the FFPSA Prevention Plan

Whole Population to System Population [1]

Children and Families in Iowa will be safe, secure, healthy and well in their communities.

STRATEGIC POPULATION FOCUS #1: Older Youth and Their Families

WHOLE POPULATION
All Iowa children and families

SYSTEM POPULATION FOCUS
All children and families involved in the Iowa Child Welfare System

STRATEGIC POPULATION FOCUS #1
Older youth and their families

PROGRAM POPULATION
Crossover youth
(Further focus? Age? Geography? Race?)

[1] **Trying Hard is Not Good Enough**, Friedman, Trafford Publishing, 2005

Older Youth

Input Requested from Vision Council
(See pages 16-17 in the Meeting Materials Packet)

- What would you want the Work Group to consider as it conducts further inquiry, analysis and planning on crossover youth as one of the Vision Council's Program Populations?
  - Are you aware of *any* available data, or data sources, on crossover youth?
  - What insights do you have about crossover youth?

SMALL GROUP DISCUSSION (SUD AND OLDER YOUTH WORK GROUPS)
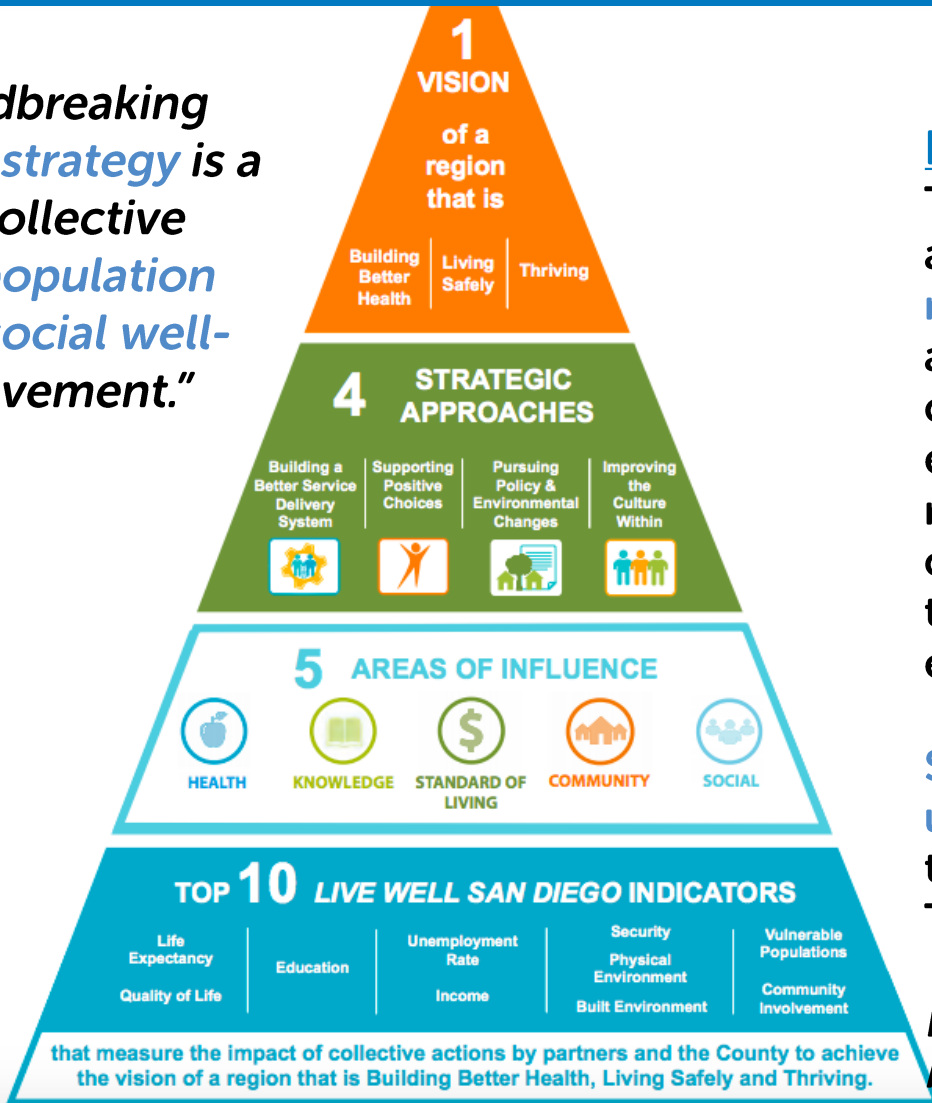
North Star Outcome

Update

- Working with Andrea Denkclau and Mary Nelle Trefz on a set of data indicators for "safe, secure, healthy and well" for the Results-Based Accountability (RBA) Plan
  - Embed the lenses of race equity and trauma and resiliency science into the Vision Council's RBA Plan's set of data indicators (e.g. select indicators that can be disaggregated by race)
  - Include indicators that "map up" from the Vision Council's chosen Program Populations to the Whole Population level

Next Steps

- Finalize the set of data indicators for "safe, secure, healthy and well" for the RBA Plan

North Star Outcome – example from San Diego

"This groundbreaking data-driven strategy is a high level, collective impact for population health and social well-being improvement."

1 VISION of a region that is
Building Better Health | Living Safely | Thriving

4 STRATEGIC APPROACHES
Building a Better Service Delivery System | Supporting Positive Choices | Pursuing Policy & Environmental Changes | Improving the Culture Within

5 AREAS OF INFLUENCE
HEALTH | KNOWLEDGE | STANDARD OF LIVING | COMMUNITY | SOCIAL

TOP 10 LIVE WELL SAN DIEGO INDICATORS
Life Expectancy | Education | Unemployment Rate | Security | Vulnerable Populations
Quality of Life | | Income | Physical Environment | Community Involvement
| | | Built Environment |

that measure the impact of collective actions by partners and the County to achieve the vision of a region that is Building Better Health, Living Safely and Thriving.

Live Well San Diego
The *Live Well San Diego* vision began nine years ago with the goal of improving wellness for all 3.3 million residents living in San Diego County. An audacious goal, but one that eagerly brought, and continues to bring, organizational partners from every sector together to share knowledge, resources and ideas that address a broad spectrum of community concerns, from access to health care to crime prevention to improving the natural environment.

Since 2010, over 451 Recognized Partners have united together under this vision to create a region that is Building Better Health, Living Safely and Thriving.

Live Well San Diego is founded and led by Nick Macchione, Director of Health and Human Services.

North Star Outcome – Draft Data Framework for "…safe, secure, healthy and well in their communities"

Measuring Iowa: How do we know if Iowa's children are safe, secure, healthy and well?

The table below presents a working set of indicators based on an expanded protective factors framework to ensure all *Iowa children are safe, secure, healthy, and well*. "Protective factors are characteristics or strengths of individuals, families, communities or societies that act to mitigate risks and promote positive well-being and healthy development." (Center for the Study of Social Policy)

Safe	Secure	Healthy	Well
Stable family relationships • Domestic Violence in IOWA • State of Iowa Substance Use Epidemiological Profile **Household rules and child monitoring** **Paid leave** • FMLA is inaccessible for 61% of working people in IA. Paid Leave Means a Stronger Iowa **Community/neighborhood safety** • Does this child live in a supportive neighborhood? • community policing – reduce fear of law enforcement and services coming into certain neighborhoods	**Economic stability: Concrete support for basic needs** • Child poverty rate Children Living Below 200 Percent FPL **Parental employment: safe work with a liveable wage** • Race and gender wage gaps.https://stateofworkingiowa.org/wages-2/ **Adequate affordable housing** • Children Living In Households with a High Housing Cost Burden by Race in Iowa **Access to quality and affordable child care** • IWF Child Care for Businesses Infographic • Child Care Deserts p. 27	**Access to health care** • Did the child receive coordinated, ongoing, comprehensive care within a medical home? • Access to prenatal care IDPH Prenatal Data • Maternal mortality rate Iowa's pregnancy-related maternal mortality • State Summaries Iowa	2018 Health Of Women And Children Report **Food security** • Children living in households that were food insecure at some point during the year **Access to mental health care** • During past 12 months, has child received any treatment or counseling from a mental health professional?	**Supportive family environment and social networks** • Iowa Youth Survey **Nurturing parenting skills** • culturally appropriate parenting classes and groups • home visiting (very limited access) **Parental Resilience** • Does this child live in a home where the family demonstrates resilience during difficult times? **Social Emotional Competence of Children**

North Star Outcome

- As you review the indicators that the North Star Work Group is considering for the "data framework"* for the Vision Council's Results-Base Accountability Plan:

  - Do you notice any gaps?

  - Is there information/indicator(s) that you think could be included that is not shown here?

  - Do you see where the Vision Council's focus on "children and families living with SUDs" and/or "older youth in the juvenile justice and child welfare systems" fit in?

    - If you don't already see it in this draft framework, do you have suggestions for an indicator(s) for the Work Group to consider for connecting this Strategic/Program Population Level effort to this Whole Population data framework?

*The purpose of the data framework is to: 1) identify the baseline data for this project, i.e. "How are Iowa children and families doing today?"; 2) establish a narrative, i.e. "Here are the needs and opportunities we see for improving child and family well-being."; 3) Here is the success indicator(s) that the Vision Council will use to track the impact of our efforts (may be one or a small number of indicators from the "data framework."

FFPSA Implementation

Update

- Acknowledges that Work Groups are beginning to identify coalitions/organizations to align and/or coordinate with specific to their Work Group topic

- Proposes to align the Vision Council work with the Governor's Economic Recovery Advisory Board's recommendations

Next Steps

- Inquiring with Director Garcia re: aligning with the Governor's Advisory Board

- Review finalized report when released (November 2020)

- Seeking ways to align with the Governor's Advisory Board

- Informing the development of a set of materials for Vision Council members to use to share about the work and recruit partners

FFPSA Implementation

Input Requested from Vision Council

(See pages 22-25 in the Meeting Materials Packet)

- What are your initial ideas or insights about the role of the Vision Council relative to the Governor's Economic Recovery Advisory Board's recommendations and work?

- How do you see the Vision Council's North Star Goal and correlating work aligning with the Governor's Advisory Board's goal?

"…the recent rise in unemployment due to COVID-19 is increasing the risk of child maltreatment, and that additional community-based supports might be needed to address concrete economic needs."

COVID-19 and Child Welfare: Using Data to Understand Trends in Maltreatment and Response,

Chapin Hall Issue Brief, September 2020

Iowa's unemployment rate was 4.7 percent in September, up from 2.8 percent one year ago.

Iowa Workforce Development, October 2020

FFPSA Implementation

The 18 Approved Recommendations

Working Group	Recommendation	Average
Workforce	Reduce the Childcare Barrier by Developing a Comprehensive Strategy to Address Longstanding and Persistent Issues Affecting Childcare Availability in Iowa	6.79
Connectivity	Universal broadband access for Iowans	6.67
Economic Growth	Increase Supply of Housing Options for all Iowans	6.53
Public Health and Healthcare	Support Virtual Care and Telehealth Services	6.47
Education	Expand Work-Based Learning Initiatives that Forge School-Business Partnerships	6.36
Public Health and Healthcare	Improve Access to Care in Rural Iowa: Build Regional Models for Partnerships	6.33
Agriculture	Long-Term Water Quality Funding	6.27
Connectivity	Adequate access to broadband as it impacts health, learning, working, as well as the agriculture and manufacturing sectors	6.27
Education	Add and Support Supplementary Preschool Supports	6.20
Economic Growth	Protect and Expand Housing Opportunities for Iowans	6.14
Connectivity	Subsidize low-to-no-cost broadband access to negate the financial barriers to adoption.	6.13
Economic Growth	Support manufacturing modernization	6.08
Economic Growth	Transform Iowa's communities through creative placemaking	6.08
Economic Growth	Grow Iowa's leadership in the Biosciences and Advanced Manufacturing sectors	6.07
Government	Emphasize Continuous Improvement in Government, including Incorporating Lean Processes	6.07
Education	Reduce barriers to meeting the needs for Iowa children by increasing educational choices for families	6.00
Government	Standardize Regions for Service Delivery	6.00
Public Health and Healthcare	Enhance and Transform the Health Care Workforce	5.87

FFPSA Implementation

These Recommendations Suggest Some Possible Themes:

- **Empower Current and Future Workforce Through Caring for our Youngest Iowans**
  - Comprehensive Childcare Strategy (1)
  - Supplementary Preschool Supports (9)

- **Make Iowa a Global Leader in Broadband Access**
  - Universal Broadband access for Iowans (2)
  - Provide broadband access to support health, learning, working, and the agriculture and manufacturing sectors. (8)
  - Subsidize broadband access to negate barriers to adoption (11)

- **Attract and Retain Iowans**
  - Increase Housing Supply (3)
  - Protect and Expand Housing Opportunities (10)
  - ⬡⬡⬡ ⬡⬡⬡ ⬡ ⬡⬡ ⬡ ⬡⬡⬡⬡⬡⬡ ⬡⬡⬡⬡⬡⬡⬡⬡⬡ placemaking (13)
  - Long-term water quality funding (7)

- **Innovate Healthcare Access and Design**
  - Support Virtual Care and Telehealth Services (4)
  - Build Regional Models for Partnerships / Improve Rural Care (6)
  - Enhance and Transform the Health Care Workforce (18)

- **Improve K-12 Outcomes and Career Readiness**
  - Expand Work-Based Learning (5)
  - Increase Educational Choices for Parents and Students (16)

- **Promote Manufacturing Innovation and Modernization**
  - Support Manufacturing Modernization (12)
  - ⬡ ⬡⬡ ⬡⬡ ⬡⬡ ⬡⬡⬡⬡⬡⬡⬡⬡ ⬡⬡ ⬡⬡⬡⬡ ⬡⬡⬡ ⬡⬡⬡ Manufacturing (14)

- **Create an Environment for Innovations in Government Efficiency**
  - Re-invigorate and Elevate Continuous Improvement and Lean in Government (15)
  - Standardize Regions for Service Delivery (17)

FFPSA Implementation

The 15 Approved Recommendations with a High Number of JDIs:

Rank	Working Group	Recommendation	# JDIs
1	Government	Survey of Government-Owned Real Estate	9
2	Government	Emphasize Continuous Improvement in Government, including Incorporating Lean Processes	8
3	Government	Standardized Accounting Practices	8
4	Agriculture	Carbon Sequestration Task Force	8
5	Education	Improve skills, governance, effectiveness, and accountability of public school boards regarding student achievement.	7
6	Workforce	Provide Opportunities to Dislocated Workers Affected by the Pandemic	7
7	Workforce	Leverage Non-Profits to Expand Iowa's Workforce	7
8	Workforce	Increase Access to Training for All Iowans After the Pandemic	7
9	Government	Expand Remote Working Opportunities for Government Employees	6
10	Government	Consolidate Redundant or Superfluous Government Entities	6
11	Government	Business Portal	6
12	Government	Citizen Portal	6
13	Government	Statewide Master Data Management Plan	6
14	Government	Public-Private Partnerships	6
15	Agriculture	Ag Innovation Council	6

JDIs = "Just Do Its"

SMALL GROUP DISCUSSION (NORTH STAR AND FFPSA WORK GROUPS)

Overview of Next Steps and Opportunities

Next Steps and Opportunities

Meeting with Director Garcia on November 20

- Vision Council's work

- Alignment with IDPH and DHS merger

- Alignment with Governor's Economic Recovery Advisory Board

Vision Council Work Groups' ongoing efforts (Please complete Doodle polls.)

- Meetings in November, January (maybe February)

Embedding skill strengthening into Work Group meetings

- Leading the Check In

- Action Commitment Tracking

Vision Council Meeting in February/March 2021

- Goal: Review of a Draft Results-Based Accountability Plan

Vision Council Artifacts & Tools

Located on The Coalition's website at iachild.org/vision-council

- ❖ From-To Shift
- ❖ VC Overview Slide Deck
- ❖ Accountability Pathway
- ❖ BART
- ❖ Levels of Action and Alignment
- ❖ Acknowledge, Rephrase, Explore (ARE)

- ❖ Theory of Aligned Contributions
- ❖ Person/Role/System Framework
- ❖ National Foster Youth and Alumni Coordinating Council's Guiding Priorities
- ❖ Making a Powerful Request

- ❖ Data set
- ❖ Ten Conversations
- ❖ Proposal-Based Decision Making
- ❖ Countering Work Avoidance
- ❖ VC Meeting PPT slide decks
- ❖ VC Membership Listing

CHECK OUT QUESTION

In one word, how are you feeling?

THANK YOU