

# **FAMILY-CENTERED PRACTICE PROJECT**

**ANNUAL REPORT TO THE NORTH CAROLINA**

**DIVISION OF SOCIAL SERVICES**

**FISCAL YEAR 2012 – 2013**

**SUMMARY REPORT**

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# **1 FAMILY-CENTERED PRACTICE**

## **1.1 Introduction**

In July 2012, the Family-Centered Practice Project was initiated by the Center for Family and Community Engagement (CFFACE) at North Carolina State University. This project built upon and extended the work of the center's preceding 10-year Family-Centered Meetings Project and the earlier 4-year North Carolina Family Group Conferencing Project. The three projects, spanning over a decade and a half, demonstrated a long-term commitment of the North Carolina Division of Social Services (NCDSS) to supporting families in caring for their children. The first two projects focused on family engagement in decision making. The third and most recent project incorporated and extended this prior focus.

*The Family-Centered Practice Project commenced in July 2012 and built upon the preceding 14 years of family-engagement training at North Carolina State University.*

The primary goal of the current project was to improve practice by offering statewide training to assist Social Services and their partners in applying a family-centered approach. Family was broadly defined to encompass the immediate family, relatives, and other close supports. Family-centered practice referred to engaging families in making and carrying out plans that respected their culture and tapped into their strengths. The underlying assumption was that children and youth thrive in safe, stable, and caring homes, schools, and neighborhoods that offer them opportunities to grow, learn, and contribute. This promotes their sense of self-efficacy and protects them from risk.

Under the umbrella of family-centered practice, the Center for Family and Community Engagement continued to provide training on child and family teams (CFTs), which engage the family in making plans for the care and protection of their children. In keeping with family-centered practice, the center also began offering training workshops on cultural competency, family preservation, and family reunification. The center's technical assistance and learning support permitted flexibly responding to emerging needs in counties and supporting the state-level continuous quality improvement initiative.

## **1.2 Strengthening Families Protective Factors Framework**

During the year, the Center for the Study of Social Policy in Washington, DC, provided consultation on the Strengthening Families Protective Factors Framework to NCDSS and its partners, including the center at NC State University. This framework did not prescribe specific steps and instead encouraged shaping five protective factors to local contexts in order to strengthen families. These five factors were parental resilience or the capacity to resolve the challenges of family life; social connections to address issues; concrete support in times of need; knowledge of parenting and child development; and social and emotional competence of children

(CSSP, 2012, p. 1). The center used this framework in structuring its trainings on family-centered practice. Congruent with and supportive of the Strengthening Families Protective Factors Framework is Social Services' continuous quality improvement effort called "REAP."

***Social Services adopted the Strengthening Families Protective Factors Framework which is strengths based and solutions focused. The center used this framework to structure its training.***

### **1.3 Continuous Quality Improvement**

REAP (Reaching for Excellence and Accountability in Practice) was a continuous quality improvement initiative of NCDSS (2011a) to strengthen practice through self-assessment. This approach was intended to replace the state's Child and Family Services Review with technical assistance from NCDSS. Just as the Strengthening Families Protective Factors Framework started from the assumption of strengths and good intent of families, REAP asked counties to set their own goals and to use data to measure their achievement. Supporting this solution-focused approach was a coaching model. Coaching in this context referred to empowering organizations and staff to figure out their own strategies in partnership with "coaches" who listen, encourage reflection, and refrain from advising (NCDSS, 2011b). The center supported this effort by interviewing Social Services Directors about their perspectives on REAP and more generally by encouraging a coaching model by supervisors and front-line workers.

***Supporting Social Services continuous-quality-improvement initiative called "REAP," the center encouraged a coaching model to help supervisors and workers to listen and encourage reflection rather than to dictate solutions.***

### **1.4 Summary Report**

This report summarizes the work carried out through the Family-Centered Practice Project in 2012-2013. It documents how the center carried out its training, technical assistance and learning support, curricular development, training evaluation, collaboration with other groups, and dissemination of learning.

Section 2 is devoted to describing and evaluating the core curricula. The third section focuses on the technical assistance and learning support (TALS), which was responsive to emerging trends and needs in the field. TALS included in-person, telephonic, and online support. In the fourth section, an overview of the philosophy, development, and expansion of the family trainer program is provided. The center valued and sought to refine its co-training model which partnered trainers who had received services with trainers who had delivered services. Accordingly, the co-training approach was selected for more in-depth study, and its results are reported in the sixth section. The center's collaborative approach extended beyond the training team to partnerships with state, national, and international groups. The seventh section identifies

these mutually supportive partnerships. The center ensured that its learning was disseminated in ways that would be accessible to different groups. The eighth and final chapter lists the center's publications and presentations.

## **References**

Center for the Study of Social Policy. (2012). The protective factors framework. Washington, DC: Author. Retrieved from <http://www.cssp.org/reform/strengthening-families/basic-onepagers/Strengthening-Families-Protective-Factors.pdf>

North Carolina Division of Social Services (2011a, May). REAP: NC's new approach to delivering technical assistance. MRS!, 6(2). Retrieved from [http://www.trainingmatters-nc.org/tm\\_v12n3/MRS\\_v6n2.pdf](http://www.trainingmatters-nc.org/tm_v12n3/MRS_v6n2.pdf)

North Carolina Division of Social Services (2011b, July). REAP, coaching, and you. Training Matters, 12(3). Retrieved from [http://www.trainingmatters-nc.org/tm\\_v12n3/tmv12n3.pdf](http://www.trainingmatters-nc.org/tm_v12n3/tmv12n3.pdf)



## **2 TRAINING PROGRAM**

### **2.1 Introduction**

This section summarizes how the center carried out the training program and the results of the evaluation of the core curricula. The section begins by examining the center's emphasis on accountability and collaboration in its curricular design. Next is provided an overview of the core curricula, and participant feedback on these curricula is summarized. In delivering the curricula, the training team identified issues emerging in the field and used this awareness along with participant feedback to revise existing curricula and to develop technical assistance and learning support (TALS).

### **2.2 Accountability and Collaboration**

The curricular development and training delivery were in keeping with the values of family-centered practice and cultural respect. In particular, the training program was designed to promote accountability to children and their families and cultural communities and to encourage collaboration among families, community programs, and public agencies. Key methods for achieving accountability and collaboration included the following:

- Cross-system training to encourage dialogue and skill-building by social services, family and youth advocacy groups, schools, juvenile justice, mental health, and social work education;
- Co-training by service-experienced trainers (family and youth partner trainers) and service-delivery trainers (agency trainers) to model collaboration and to facilitate understanding of family-centered practice and CFTs from the perspectives of families and workers;
- Co-training by culturally informed trainers to facilitate increased cultural awareness of workers to the strengths and needs of families, children, and youth in child welfare;
- Technical assistance and learning support to respond to the emerging directions and needs of county and state Social Services;
- Online forums to inform and connect participants across the state to promote specialized learning opportunities, regional sharing, and skills building;
- Marketing of training events to reach a broad spectrum of participants; and
- Training evaluation to improve training delivery and to identify further areas for training.

*The training program was designed to promote accountability to children and their families and encourage collaboration with and around families.*

### **2.3 Delivery of Training Program**

This year the center added training on cultural awareness, family preservation, and family support to its historical focus on CFTs and expanded its technical assistance and learning support (TALS) to respond to emerging needs. The training program was designed to meet the learning needs of 100 county social services and their community partners. These community partners

included mental health, juvenile justice, family and youth partners, social work students, mediators, and other private agencies.

The nine core curricula and the technical assistance & learning support (TALS) offered were as follows:

- *Step by Step: An Introduction to Child and Family Teams*—a 2-day CFT orientation;
- *Navigating Child and Family Teams: The Role of the Facilitator*—a 3-day skill-building workshop on facilitating CFTs;
- *The ABCs of Including Children in Child and Family Teams*—a 1-day advanced workshop on amplifying the voice of children at CFTs;
- *Widening the Circle: Child and Family Teams and Safety Considerations* – a 2-day advanced workshop on effecting safe meetings in the context of domestic violence, family violence;
- *Keeping It Real: Child and Family Teams with Youth in Transition*— a 1-day advanced workshop on using CFTs in preparation for youth leaving care;
- *Introduction to Child and Family Teams-Cross System Training from the Family's Perspective*— a 2-day workshop designed to encourage a system-of-care approach from the perspective of children and their families;
- *Connecting with Families: Family Support in Practice*—a 6-day specialized workshop for family support and family resource center workers on working successfully with families in center-based programs, in support groups, and through home visiting;
- *Family-Centered Practice in Family Preservation Programs*—a 6-day specialized workshop for family preservation and other home-based services workers on skills necessary for successful in-home interventions; follows intervention process from screening and intake through termination and follow-up;
- *Building Awareness and Cultural Competency*—a 3-day interactive, foundational training to enhance the cultural knowledge and sensitivity of child welfare workers and supervisors working with culturally diverse individuals and families; and
- *Technical Assistance and Learning Support (TALS)*—variable length events providing tailored training and technical assistance on family-centered practice.

***During the year, the center's efforts were focused on the delivery of curricula designed to support learning on CFTs as well as curricula focused on enhancing family-centered engagement, cultural awareness of workers, and family preservation services.***

The center reached out to provide specialized support for CFT implementation and learning through its technical assistance and learning support program (TALS). The strength of the TALS program remained rooted in the flexibility the program had to respond to individual county requests regarding CFT implementation, practice improvement, and engagement of families.

### 2.3.1 Core Curricula Participation Rates

Table 2.1 below gives a breakdown of each of the center’s core curricula showing how many events were held per curriculum, how many participants statewide participated, and how many counties were represented by that participation. Overall, 80 counties across North Carolina accessed the center’s core training, sending a total of 753 workers to 69 core training events during the year. These figures do not include the TALS, which delivered training to 540 participants (see Section 3).

***Overall, 80 counties across North Carolina accessed the center’s core training, sending a total of 753 workers to 69 core training events during the year. In addition, the center provided TALS training to 540 participants.***

**Table 2.1: Number of Events, Participants, and Counties Represented for Each Core Training Deliverable, July 2012 – June 2013**

<b>Curriculum</b>	<b>Events</b>	<b>Participants</b>	<b>Counties</b>
Step by Step	25	294	66
ABCs	5	45	16
Cultural Competency	11	167	46
Family Preservation	4	29	13
Family Support	4	36	4
Introduction to CFTs	0	0	0
Keeping It Real	6	54	24
Navigating CFTs	11	107	40
Widening the Circle	3	21	11
<b>Total Events</b>	<b>69</b>	<b>753</b>	<b>80</b>

\* Data for this report were pulled June 2013. Participants’ counties reflect where they were working at that point in time. \*\* The project provides additional informal support through the TALS program in the form of consultation, coaching, and tailored workshops. These are not included in this table. The total for counties is the unduplicated count of participants’ counties.

### 2.3.2 Core Curricula Participant Feedback

All core NCDSS curricula trained by the center were evaluated through electronic participant satisfaction feedback (ePSF) surveys completed by participants following each training event. The surveys asked about training content, trainer delivery, training length, perceived learning and relevance to job function, transfer of learning, transfer environment, and overall satisfaction with the training event. Center staff used the data collected to inform curricular revisions and training delivery.

In previous years, PSF surveys were distributed on site at the end of in-person training events. Trainers collected these completed surveys to be scanned into NCSWLearn. Beginning in 2011, the PSF survey distribution and collection process changed. A link to the ePSF survey was

included in the e-mail to participants; this link also provided them access to their Certificate of Completion for that training event.

Last year, with the move to ePSFs, the survey return rate (the number of participants completing training divided into the number of surveys returned) dipped below 25%, which was too low to give an accurate depiction of participant experiences in the training room for the 2011-2012 contract year. In 2012-2013, the return rate for ePSFs increased to 64% for center events, thus making it feasible to draw conclusions from the findings.

***In 2011-2012, NCDSS switched from distributing a paper Participant Satisfaction Form (PSF) to an electronic version (ePSF). That year the ePSF return rate dipped below 25%. For 2012-2013, the ePSF increased to 64% for core events, thus making it possible to draw conclusions from the data.***

Of the 753 participants who attended the core curricula events, 465-466 responded to the items on the curricular content. As seen in Table 2.2, most responded favorably. On a four-point Likert scale of 1 *strongly disagree*, 2 *disagree*, 3 *agree*, and 4 *strongly agree*, the average scores were all 3.55 or higher and the median scores were all 4, demonstrating solid satisfaction with the content of the curricula.

***Most responded favorably to the items on curricular content. On a four-point Likert scale of 1 strongly disagree, 2 disagree, 3 agree, and 4 strongly agree, the average scores were all 3.55 or higher and the median scores were all 4, demonstrating solid satisfaction with the content of the curricula.***

The category with the greatest number of participants stating *disagree* or *strongly disagree* is content of training reflected issues of diversity. This modestly lower average may reflect struggles in some curricula that particularly focused on challenging topics including safety considerations (*Widening the Circle*), cultural understanding (*Building Awareness and Cultural Competency*), and involving children in CFTs (*ABCs*). In *Step by Step*, the average score on family diversity increased from prior years and may be a function of having family partners as co-trainers.

***The average for the item on issues of diversity was slightly lower than for the other items. This lower average may reflect struggles in some curricula that particularly focused on challenging topics including safety considerations (Widening the Circle), cultural understanding (Building Awareness and Cultural Competency), and involving children in CFTs (ABCs). In Step by Step, the average score on family diversity increased from prior years and may be a function of having family partners as co-trainers.***

**Table 2.2: Total of All Core Curricula Content of Training Feedback, July 2012 to June 2013\***

	<i>n</i>	Strongly Disagree	Disagree	Agree	Strongly Agree	N/A	Mean	Median
Training had a good mix of learning activities.	466	2 0.4%	9 1.9%	161 34.5%	294 63.1%	0 0.0%	3.60	4.00
Content of training reflect issues of diversity.	466	5 1.1%	13 2.8%	182 39.1%	263 56.4%	0 0.0%	3.55	4.00
Content of training was well organized.	466	3 0.6%	9 1.9%	158 33.9%	296 63.5%	0 0.0%	3.60	4.00
Content was appropriate to my job.	465	3 0.7%	9 2.0%	147 32.3%	296 65.1%	0 0.0%	3.62	4.00

\*Note: Question response options include: 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree. Nine curricula were offered during the year, however, of the nine curricula, CFT 1 had no participants attend during the year, so none of the feedback for this table or other tables is related to that curriculum.

Table 2.3 summarizes the participant feedback regarding the length of time of training events. Among the 464 respondents, 80% thought the length of the trainings were *just right*. According to the feedback, 16% of participants felt the trainings overall were *too long*, and 4% thought they were *too short*. All the three or six-day curricula had between 18% to 26% of participants stating that the event was *too long*. In addition, the two-day *Widening the Circle* had 25% indicating that the training was overly lengthy.

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**Table 2.3: Total of All Core Curricula Length of Training Feedback, July 2012 to June 2013\***

Item	<i>n</i>	Too Long	Too Short	Just Right
Length of time appropriate for amount of content covered	464	75	17	372
		16.2%	3.7%	80.2%

\*Note: Question response options include: 1 = Too Long, 2 = Too Short, 3 = Just Right.

Table 2.4 below summarizes the respondents' views on the trainers. The feedback shows nearly 100% positive ratings across all survey items with the average scores at 3.75 or higher. The ratings show that the individuals taking the training viewed the trainers as competent, knowledgeable, and respectful teams, who are able to present and share information in a way that supports participants and promotes a healthy learning environment.

*The training team received high marks for their training competency, knowledge of the subject matter, and respectful manner. The feedback shows nearly 100% positive ratings across all survey items with the average scores at 3.75 or higher.*

**Table 2.4: Total of All Core Curricula Participant Feedback on Trainer, July 2012 to June 2013\***

	<i>n</i>	Strongly Disagree	Disagree	Agree	Strongly Agree	N/A	Mean	Median
Was respectful to training participants.	452	2 0.4%	1 0.2%	95 21.0%	354 78.3%	0 0.0%	3.77	4.00
Knew subject matter well.	453	2 0.4%	3 0.7%	92 20.3%	356 78.6%	0 0.0%	3.77	4.00
Effectively presented the material.	450	2 0.4%	4 0.9%	95 21.1%	349 77.6%	0 0.0%	3.76	4.00
Was responsive to trainee questions and feedback.	450	2 0.4%	1 0.2%	91 20.2%	356 79.1%	0 0.0%	3.78	4.00
Managed group well.	449	2 0.4%	3 0.7%	99 22.0%	345 76.8%	0 0.0%	3.75	4.00
Worked well with others.	428	1 0.2%	3 0.7%	82 19.2%	342 79.9%	0 0.0%	3.79	4.00

\*Note: Question response options include: 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

Table 2.5 below provides aggregated findings on the respondents' perceptions of the core curricula. The perception items relate to the participants' view of the impact of the training on their capacity to carry out their jobs. It is clear that the majority of the feedback indicates that participants had a

favorable opinion of the trainings with mean scores hovering just below or around the mid-point between 3 (agree) and 4 (strongly agree). The one exception is whether the attendees were eager to come to the workshop for which the mean score was lower at 3.23. In contrast, by the end of the training, the average score about being glad to have attended was 3.52, one of the higher mean scores. The other higher mean scores were for the items on planning to use the training on the job (3.54) and recommending the training to colleagues (3.52). The generally positive responses on all these survey items point to the likelihood of transfer of learning to the workplace.

***The aggregated findings on the respondents' perceptions of the eight core curricula all relate to the participants' view of the impact of the training on their capacity to carry out their jobs. It is clear that the majority of the feedback indicates that participants had a favorable opinion of the trainings with mean scores hovering just below or around the mid-point between 3 (agree) and 4 (strongly agree). The generally positive responses on all these survey items point to the likelihood of transfer of learning to the workplace.***

**Table 2.5: Total of All Core Curricula Participant Perception of Training, July 2012 to June 2013\***

	<i>n</i>	Strongly Disagree	Disagree	Agree	Strongly Agree	N/A	Mean	Median
My understanding of the topics has significantly increased.	465	5 1.1%	23 4.9%	205 44.1%	232 49.9%	0 0.0%	3.43	3.00
As a result of this training I have developed skills to improve my practice.	467	5 1.1%	16 3.4%	215 46.0%	231 49.5%	0 0.0%	3.44	3.00
As a result of this training I am more capable of performing my job.	465	6 1.3%	22 4.7%	230 49.5%	202 43.4%	5 1.1%	3.43	3.00
I intend to use what I learned in training on my job.	459	5 1.1%	2 0.4%	193 42.0%	259 56.4%	0 0.0%	3.54	4.00
At work, I will be supported as I use what I learned in training on my job.	450	5 1.1%	9 2.0%	208 46.2%	228 50.7%	0 0.0%	3.46	4.00
Prior to attending this training, I was eager to come.	452	12 2.7%	46 10.2%	219 48.5%	175 38.7%	0 0.0%	3.23	3.00
Now that the training is over, I'm glad I attended.	456	6 1.3%	15 3.3%	173 37.9%	262 57.5%	0 0.0%	3.52	4.00
I would recommend this training to a colleague.	452	7 1.5%	13 2.9%	170 37.6%	262 58.0%	0 0.0%	3.52	4.00

\*Note: Question response options include: 1 = Strongly Disagree, 2 = Disagree, 3 = Agree, 4 = Strongly Agree.

According to Table 2.6 nearly 90% of the 461 participants who responded, rated their overall training experiences in the *high* and *very high* categories, with less than 3% expressing *very low* or *low* responses. On the five-point Likert scale from 1 *very low* to 5 *very high*, the mean score was 4.40 and the median score was 5.00. These findings indicate a generally strong level of satisfaction with all facets of the trainings.



*Nearly 90% respondents rated their overall training experiences in the high and very high categories, with less than 3% expressing very low or low responses. On the five-point Likert scale from 1 very low to 5 very high, the mean score was 4.40 and the median score was 5.00. These findings indicate a generally strong level of satisfaction with all facets of the trainings.*

**Table 2.6: Total of All Courses Overall Perception of Training, July 2012 to June 2013\***

	<i>N</i>	Very Low	Low	Moderate	High	Very High	Mean	Median
Overall rating of training experience	461	4	7	39	163	248	4.40	5.00
		0.9%	1.5%	8.5%	35.4%	53.8%		

\*Note: Question response options include: 1 = Very Low, 2 = Low, 3 = Moderate, 4 = High, 5 = Very High.

### **2.3.3 Trainer Feedback on CFT Workshops**

After each workshop, the trainers recorded their perspectives of the process on the Trainer Feedback Form. They gave feedback about the relevance and success of curricula materials, challenges faced by participants and counties, and questions raised by participants. This feedback was used to identify barriers to CFT implementation and to support partnerships with Social Services.

*After each workshop, the trainers recorded their perspectives of the process. They gave feedback about the relevance and success of curricula materials, challenges faced by participants and counties, and questions raised by participants. This feedback was used to identify barriers to CFT implementation and to support partnerships with Social Services.*

For the core CFT curricula, the trainers rated the participant group’s knowledge of family-centered meetings at the start of the training and at its conclusion. They used a 10-point Likert scale with 1 *low* and 10 *high*. Table 2.7 below summarizes the pre and post-results. The table shows positive average percentage changes for all core CFT curricula. As would be expected, the greatest change occurred for the introductory training, *Step by Step*, for which trainers reported a positive increase of 24%. The pre-averages for the curricula that built upon *Step by Step* were higher than the pre-average for this orientation training. These findings indicate that participants maintained a level of proficiency with CFTs after taking the *Step by Step* training and that they were able to build on this learning as they moved into advanced-level trainings on CFTs.

**Table 2.7: Trainer Feedback Form Assessment of Participant Learning of Family-Centered Meetings in Core Child and Family Team Curriculum Events, , N=50, July 2012 – June 2013**

Curriculum	n (TFF)	n (Participants)	Pre-training Average*	Post-training Average*	Average Percent Change
ABC	5	47	6.60	8.20	16.00%
KIR	6	55	6.17	7.17	10.00%
NAV	11	95	5.55	7.73	21.80%
SBS	25	300	4.56	6.94	23.75%
WTC	3	22	6.67	7.83	11.67%
<b>TOTALS</b>	<b>50</b>	<b>519</b>	<b>5.91</b>	<b>7.57</b>	<b>16.64%</b>

\* Pre and Post values were assigned by trainers based on in-class exercises, using a 10-point Likert scale rating participants' knowledge with 1=low and 10=high.

*For the core CFT curricula, the trainers rated the participant group's knowledge of family-centered meetings at the start of the training and at its conclusion. They used a 10-point Likert scale with 1 low and 10 high. The trainers reported positive average percentage changes for all core CFT curricula. As would be expected, the greatest change occurred for the introductory training, Step by Step, for which trainers reported a positive increase of 24%.*

## **2.4 CFTs and County Trends**

In their comments on the Trainer Feedback Form, the trainers noted wide variability in participants' familiarity with CFTs, depending on their agency roles and their length of tenure. In understanding this variability, the trainers pointed to the organization-level concerns identified by Social Services staff and their community partners in the training room.

### **2.4.1 Limited County Resources**

With funding and staffing cutbacks, agencies combined previously separate roles and used non-child welfare staff for facilitating CFTs. The multiplicity of responsibilities pulled workers in different directions. Participants found it helpful to discuss these challenges in the training room when there was a mixture of attendees from different counties. The cross-county exchange helped to generate creative ideas, supported understanding of child welfare perspectives in the CFT process, and helped workers to recognize that many of their colleagues experienced similar difficulties.

*With funding and staffing cutbacks, agencies combined previously separate roles and used non-child welfare staff for facilitating CFTs. The cross-county exchange helped to generate creative ideas, supported understanding of child welfare perspectives in the CFT process, and helped workers to recognize that many of their colleagues experienced similar difficulties.*

### **2.4.2 Issues Related to CFT Facilitation**

Workers struggled with differentiating between roles of social worker and facilitator at CFTs. This was especially the situation of those workers who facilitated meetings for which they were the case manager. This posed the risk that the integrity of the CFT model would be compromised. Providing tools in training, leaning into the finer points of what it takes to facilitate a group process, and offering technical assistance to new facilitators all created opportunities for workers to explore this role as separate from their primary job duties.

***Workers who facilitated meetings for which they were the case manager struggled to keep their focus on the CFT process as opposed to the case decision.***

### **2.4.3 Inconsistency in CFT Practices**

Throughout the trainings, participants shared contrasting accounts of how CFTs were rolling out in the field. These accounts covered lack of clarity about the basic elements of a CFT meeting, involvement of children and youth, the role of agency staff and community partners, the responsibilities of facilitators, and working with diverse cultural populations in a meeting. Other specific examples included the lack of referral processes and CFT follow up. Counties also struggled with holding meetings and documenting them as CFTs, only to find out in training that the meeting being held was more agency driven and may not have met the requirements of a CFT meeting.

***Training participants shared contrasting accounts of how CFTs were rolling out in the field. These accounts covered lack of clarity about the basic elements of a CFT meeting, involvement of children and youth, the role of agency staff and community partners, the responsibilities of facilitators, and working with diverse cultural populations in a meeting.***

### **2.4.4 Children and Youth in CFT Meetings**

An area which remained challenging to workers was engaging children and youth in the CFT process in a meaningful manner. Workers understood that children and youth needed to be part of the meeting but were unable to move past very basic methods of including their voice. Participants shared that children and youth would be in the meeting room, playing in the corner of the room with toys, running around the room, but that often their ideas were not shared at all in the deliberations. Trainers focused discussions on how to manage outside factors not in their control such as limited lead time in convening a CFT meeting, lack of resources to help workers prepare children and youth, and differences among agencies as to whether children of certain ages should be a part of CFTs.

***Workers were challenged in engaging children and youth in the CFT process in a meaningful manner. Trainers focused discussions on how to manage outside factors not in their control such as limited lead time in convening a CFT meeting, lack of resources to help workers prepare children and youth, and differences among agencies as to whether children of certain***

*ages should be a part of CFTs.*

## **2.5 Curriculum Revisions**

Two of the core curricula were updated to acknowledge changes in policy and to increase the focus on practice skills. These two curricula were *Widening the Circle: Child and Family Teams and Safety Considerations* and *The ABCS of Child Inclusion*. Revisions were completed by center team members and piloted throughout the year. Both revision teams included participation by agency and family partner trainers. Emphasis was on bringing forward practice and policy that honors both family and agency perspectives.

The curriculum *Widening the Circle: CFTs and Safety Considerations* was reworked to focus on family violence and incorporate NCDSS policy on domestic violence. This curriculum was renamed *The Path Less Travelled* because too often partners who abuse are excluded from CFTs. Training materials and activities were created to parallel existing components of the culture of domestic violence to help workers understand from a personal standpoint what family members experience in these situations. During the pilots, participants responded positively to these experiential exercises.

***The curriculum *Widening the Circle: CFTs and Safety Considerations* was reworked to focus on family violence and incorporate NCDSS policy on domestic violence. This curriculum was renamed *The Path Less Travelled* because too often partners who abuse are excluded from CFTs.***

*The ABCs of Including Children in CFTs (ABCs)* was developed in 2004 prior to policy clarifications that indicated “it is not if, but how children are included in child and family teams.” Although center trainers have consistently incorporated child inclusion mandates in their delivery of the curriculum, practice conversations in counties indicated a need for a greater level of skills development on how to engage children in CFTs. A revision of *ABCs* was completed and piloted. The revised curriculum explores the rationale for including children, strategies for engaging children of various ages, research feedback from youth regarding their inclusion in family meetings, and practices for identifying support persons for youth participating in CFTs.

***Revisions to the *ABCs of Including Children in CFTs (ABCs)* were piloted this year. The revised curriculum explores the rationale for including children, strategies for engaging children of various ages, research feedback from youth regarding their inclusion in family meetings, and practices for identifying support persons for youth participating in CFTs.***

### **3 TECHNICAL ASSISTANCE AND LEARNING SUPPORT (TALS)**

#### **3.1 Introduction**

Technical Assistance and Learning Support (TALS) refers to training and transfer-of-learning events that are not prescheduled on the NCDSS training calendar. TALS was designed to meet the needs of individual workers and counties. In addition, the center used the TALS program to support state-level initiatives. The program was intended to assist with transfer of learning, improve the transfer climate, and respond to emerging areas of need.

*Technical Assistance and Learning Support (TALS) refers to training and transfer-of-learning events designed to meet emerging trends in the field and the specific needs of individual workers and counties.*

TALS took multiple forms and was of variable length depending upon topic and format. The frequency of TALS delivery was planned according to the level of DSS priority, community interest, and available project staffing. Technical assistance was offered in classroom and online workshops and informally via e-mail and phone calls. As noted in Section 2, the center provided TALS to an estimated 540 social workers, supervisors, and community partners.

*This year, the center provided TALS to an estimated 540 social workers, supervisors, and community partners.*

#### **3.2 TALS Curricula**

This year, center trainers developed a total of six training modules (see Table 3.1 below) and seven presentations to support the TALS program. Communication with host sites allowed center trainers to gain a better understanding of the training audience and their specific needs for the event.

*This year, center trainers developed a total of six training modules and seven presentations to support the TALS program.*

**Table 3.1: Technical Assistance and Learning Support Curricula, July 2012 - June 2013**

Curriculum	Focus	Audience	In-	
			Person	Online
Believe and Achieve: Bridging the Gap	Foster Youth Education	Workers	x	x
CFTs: What’s in it for me?	Foster Youth Participation in CFTs	Youth in Transition	x	
Charting the Fatherhood Frontier	Engaging Fathers in CFTs	Workers		x
Let’s Talk Support	Family Supports in CFTs	Workers		x
The 3rd Dimension of Supervision	CFTs in Supervision Protective Factors	Supervisors		x
The Journey is the Destination	and Youth in Transition	Workers		x

### 3.3 Online Training

The online training program grew in this contract year from a few offerings delivered one or two times per year to the development of a number of robust curricula delivered with greater frequency. The development of the center’s online training program began in December 2008. Early efforts were intended to continue regional in-person CFT facilitator forum events, which were affected by county budget cuts and travel restrictions. In July 2009, center trainers expanded online events to a more general audience with events specifically examining DSS practice and policy issues. The 2011-2012 contract year saw a shift that favored outreach to broader audiences over events specifically focused to support CFT facilitation practice. In 2012-2013, center online trainers responded to the decreasing participation in facilitator-only events by including facilitators in online events focusing on CFT practice and its connection to good policy and current practice trends.

*The online training program grew in this contract year from a few offerings delivered one or two times per year to the development of a number of robust curricula delivered with greater frequency.*

As highlighted in Table 3.2, participation numbers fluctuated over the years. It is difficult to pinpoint the exact reason for the fluctuation in online participation but variations in the online platform, county firewalls, shifts in county personnel, and differences in audience outreach may be contributing factors. The uptick in 2011 – 2012 can be attributed directly to the highly popular *American Indian children: Guidance for implementation of tribal notification forms*. This event,

in particular, was developed in collaboration with NCDSS and aligned with the roll-out of two new NCDSS forms and associated procedures. Center trainers continued to adapt online events to meet the needs of DSS state and county representatives. Outreach and technical support were tailored to address shifts in participant make-up and technological access. It is expected that these variables will continue to fluctuate and thus affect participation in online events annually. The center saw the online venue as an opportunity to respond to the dynamic nature of child welfare practice and community partnerships. The online format provided opportunities to partner with community and family trainers, to support connections between DSS initiatives and CFT/MRS practice, to connect systems involved with families and youth, and to share resources from state, national, and international research.

**Table 3.2: Online Participants December 2008 to June 2013**

<b>Dates</b>	<b>Facilitator Forums</b>	<b>Policy Events</b>	<b>Total</b>
December 2008-June 2009	89	0	89
2009 - 2010	170	13	183
2010 - 2011	48	10	58
2011 - 2012	70	134	204
2012 - 2013	18	115	133
<b>Total for Online Events:</b>	<b>395</b>	<b>272</b>	<b>667</b>

Note: The first online event was held December 2008. Data for years 2009-2013 follow the state fiscal year from July to June.

All online training materials were developed to balance information sharing and interaction as supported by the synchronous learning management system (SLMS) platform. The visual presentation displays on the whiteboard allowed participants to draw, write, and use icons to increase interactivity. Communication between trainers and participants and among participants was enhanced through chat and breakout rooms for small group work. In general, online events were presented by a minimum of three trainers. This ensured engagement with different trainers and the necessary technical support, especially required for highly interactive sessions.

***All online training materials were developed to balance information sharing and interaction as supported by the synchronous learning management system (SLMS) platform.***

During the year, the center held 13 online events with 268 registrants and 133 actual participants. The average number of registrants and participants were respectively 21 and 10. No shows appeared to be the result of work demands and technological difficulties. When trainers were aware that technical issues had prevented participation, staff followed up to help address technology challenges. In spite of the drop in numbers from registration to participation, most online events this year filled to capacity in the registration process within two to three workdays.

This resulted in a sizeable enough audience to create a positive and effective learning environment. Many of the participants came back repeatedly and recruited others to attend with them in a group.

***During the year, the center held 13 online events with 268 registrants and 133 actual participants. The average number of registrants and participants were respectively 21 and 10. No shows appeared to be the result of work demands and technological difficulties. When trainers were aware that technical issues had prevented participation, staff followed up to help address technology challenges.***

The distance training capabilities of the online events opened the door for greater participation by county staff and allowed for workers to share ideas and information who would otherwise not have opportunity to do so. Workers from 42 counties participated in online events this contract year. Participation included staff who identified as supervisors, facilitators, assessment workers, LINKS program coordinators, mental health, foster care workers, and schools. Agencies represented included state and county social services, schools, and mental health.

In their feedback, the online participants reported that the sessions supported their family-centered programming. The participants especially appreciated the interaction with other workers. For example, on the feedback form, a participant wrote that the most helpful aspect of the workshop was “Getting input from other counties and hearing the strategies they use to engage dads.”

***Workers from 42 counties participated in online events this contract year. Participants especially appreciated the cross-county exchanges.***

Family and youth partners co-developed and co-delivered the online sessions. In their feedback, participants stated that they planned to improve how they included community partners, supported family leadership, and encouraged father engagement. Specifically with youth, they intended to increase time devoted to preparing them for CFTs and helping them set goals and make plans. For instance, one participant wrote, “[I’ll] ask the youth to include their friends if they would like [at CFTs]. Most of ours only have staff present and the foster parents.”



## 4 FAMILY TRAINER PROGRAM

Since 2006, the center gradually incorporated family and youth partnerships into its work on curriculum development, training, and evaluation. Progress has been gradual but consistent, as the inclusion of family and youth trainers required creative and committed efforts. To support the family trainer program, the center carried out the following:

- Offered 11 curricula co-trained with youth/family partner trainers, 10 of which were directly sponsored by NCDSS;
- Employed three staff who identified as family or youth partner trainers;
- Consulted with state and local family and youth agencies for input into programs, training, and research needs and efforts;
- Included youth/family roles in grant proposals for youth empowerment, curriculum development or delivery;
- Supported training on co-training by family and agency partners; and
- Co-chaired state-level conversations regarding family/youth and agency partnership training efforts through the Family Agency Collaborative Training Team (FACTT).

*Since 2006, the center gradually incorporated family and youth partnerships into its work on curriculum development, training, and evaluation.*

The Family and Agency Collaborative Training Team (FACTT), established formally in September 2007, was developed to provide leadership in the recruitment of family trainers and to support partnerships between agency and family partner trainers. Over the years, FACTT expanded its membership to include family, youth, and agency training representatives from across the state. A family trainer and an agency trainer at the center co-chaired FACTT.

In 2012-2013, FACTT members focused on *Co-Training Heart to Heart (H2H)* and *Co-Training Heart to Heart Training of the Trainer (H2H TOT)*. H2H was a two-day training offered to family, youth, and agency trainers. The goals of the training were the following:

- Develop the skills necessary to become effective co-training partners;
- Apply social styles characteristics in order to enhance co-training partnerships;
- Practice co-training partnership techniques;
- Communicate and demonstrate partnership principles; and
- Utilize and integrate the Partnership Planning Tool in support of co-training partnerships.

A grant provided by the North Carolina Collaborative for Children Youth and Families allotted scholarship stipends to support youth and family trainer participation. The events were attended by a combination of youth, family, and agency participants and were trained by a FACTT team that consisted of a family/youth trainer and an agency trainer. In addition, FACTT members began development of an asynchronous online training for family/youth trainers interested in contracting to provide family/agency partnership training events

## **5 EVALUATION OF THE CO-TRAINING MODEL**

### **5.1 Introduction**

The aim of the evaluation was to measure the impact of the co-training model on participants' sense of efficacy in family-centered practice. The co-training model referred to a team of agency trainers (with experience working in agencies) and family/youth trainers (with experience as service recipients).

*The evaluation measured the impact of the co-training model on participants' sense of efficacy in family-centered practice. The evaluation used an appreciative inquiry approach to learn what worked about the program and how to make it even better.*

Evaluation of this training model began in 2009 focusing on the new family trainer program. In 2011, the focus shifted from the family trainer to the co-training partnership. Since 2009, the results have shown that participant reception of the co-training with family-agency partnerships was overwhelmingly positive; that participants applied what they learned in training; and that the co-trainers saw the program as a positive addition to the training experience. This year followed these same trends.

The evaluation used an appreciative inquiry approach to learn what worked about the program and how to make it even better. Appreciative inquiry focuses on the strengths of a program and draws on these positive aspects to improve the program. The co-training evaluation used two methods: online surveys of participants and review of trainer feedback forms. The online surveys were sent to training participants who attended workshops co-facilitated by at least one family trainer. The review of trainer feedback forms was conducted for the co-trained workshops.

### **5.2 Inclusion of Family and Youth Trainers**

Family and youth trainers co-developed and co-trained curricula with agency trainers, participated in family and youth partner networks, and disseminated learning through presentations. This evaluation is limited to the training events and is not inclusive of collaborations or curriculum development; however, the family trainer involvement in these aspects of the process helped to inform the training events by increasing the family-centered focus.

This contract year, the co-training program reached 524 participants through 47 events (see Table 5.1 below). The number of co-trained events increased from the prior year by 27% and the number of participants increased by 20%.

*This contract year, the co-training program reached 524 participants through 47 events. The number of co-trained events increased from the prior year by 27% and the number of participants increased by 20%.*

**Table 5.1: Events Using the Family-Agency Co-training Model, 2011-13**

Curricula Co-Trained with Family Trainer	2011-12		2012-13	
	Events	Participants	Events	Participants
ABCs of Including Children in CFTs	1	10	4	28
An Introduction to Child and Family Teams: A Cross-Systems Training from the Family's Perspective	2	24	0	0
Keeping it Real: Child and Family Teams with Youth in Transition	4	42	4	40
Navigating Child and Family Teams: The Role of the Facilitator	5	62	5	44
Step by Step: An Introduction to Child and Family Teams	11	121	16	197
Widening the Circle: Child and Family Teams and Safety Considerations	1	18	2	15
In Person TALS Events * **	10	105	5	112
Online TALS Events *	3	54	11	88
	37	436	47	524

\*Co-trainer surveys were not distributed for these events. \*\*Attendance was not tracked at all TALS events, such as conference presentations. In those instances, participant numbers were estimated by the trainers.

### 5.3 Methodology

The co-training model was assessed primarily through a follow-up evaluation of core training events using a participant e-survey. Employing Qualtrics (survey software provided by the university), researchers created and distributed an e-survey to participants an average of 43 days after the event to obtain impressions of the co-training experience and their transfer of learning experience. Secondly, data were collected from co-training team members after each training event. The trainers completed trainer feedback forms (TFFs) where they described their experiences and provided their perceptions of the training participants' learning experiences along with their understanding of transfer-of-learning facilitators and barriers.

*The co-training model was assessed primarily through a follow-up evaluation of core training events using a participant e-survey.*

### 5.3.1 Training Participant Sample

The request to take part in the e-survey was emailed to 324 training participants for core curriculum training events held from July 2012 to June 2013. The training participants consisted of two main groups: (a) facilitators, workers, and supervisors based in Social Services and (b) facilitators and other staff of child-and-family-serving organizations working in collaboration with Social Services (e.g., schools, child mental health, juvenile justice, public health). Among the 324 training participants, 126 completed the survey for a response rate of 40%.

***Among the 324 training participants, 126 completed the survey for a response rate of 40%.***

### 5.3.2 Instruments

They surveys included Likert-scale items on a 4-point Likert scale from 1 (*strongly disagree*) to 4 (*strong agree*) and open-ended questions framed in an appreciative inquiry approach. For example, they were asked to rate their level of agreement with the statements: “I found the information shared by the training team to be valuable” and “My agency will support my using what I learned from the trainers.” An open-ended question was “One example of how the training team helped me rethink how to partner with families is.” At the end of training events, co-trainers completed a trainer feedback form on which they gave their impressions of the training event, the participants, and their co-training experience as well as suggestions for changes to future events.

### 5.4 Results

Respondents completed the five Likert-scale items and the two open-ended questions. Only the first of these open-ended questions was related to family trainers. The second inquired about additional training desired. This evaluation only looked at the first of these two questions. The 65 answers to the first open-ended question contained 1,300 words. The average length of an answer was 20 words with the longest answer containing 60.

Survey results show that the large majority of the 126 respondents reported that they were able to use what they learned from the co-training team in their workplace (see Table 5.2). Most agreed or strongly agreed that they shared what they learned from the training team with their colleagues (94%) and perceived their agencies to have an environment supportive of the teachings of the co-training team (98%). A large majority (95%) responded that they had used what they learned in their job. Encouragingly, 90% of respondents found that their relationships with families were more positive as a result of changes they made after hearing from the trainers. Accordingly, 89% of respondents found their CFTs to be more successful as a result of changes they made after hearing from the trainers. The average responses were tilted somewhat more toward *agree* than *strongly agree*, with the means ranging from 3.23 to 3.46.

These averages in Table 5.2 are only somewhat lower than those reported earlier in Table 2.46 regarding the ePSF’s transfer-of-learning indicators from all core curricula. The findings for the

co-trained curricula are promising because a slight drop off is anticipated once participants go from stating their perceptions of the likely impact to identifying the actual impact on their work. This finding needs further testing because the data samples and evaluation procedures for the ePSFs and the co-training survey are not identical.

*Survey results show that the large majority of the 126 respondents reported that they were able to use what they learned from the co-training team in their workplace. The average responses were tilted somewhat more toward agree than strongly agree, with the means ranging from 3.23 to 3.46 on a four-point Likert scale. These averages are only somewhat lower than those reported earlier regarding the ePSF’s transfer-of-learning indicators from all core curricula. The results of the co-trained curricula are promising because a slight drop off is anticipated once participants go from stating their perceptions of the likely impact to identifying the actual impact on their work. This finding needs further testing because the data samples and evaluation procedures for the ePSF and the co-training survey are not identical.*

**Table 5.2: Participant Transfer of Learning, July 2012 to June 2013**

	N	Strongly Disagree	Disagree	Agree	Strongly Agree	Mean	Median
I shared what I learned from the training team with my colleagues.	126	1 0.80%	7 5.60%	64 50.80%	54 42.90%	3.36	3.00
My agency supported my using what I learned from the trainers.	126	1 0.80%	1 0.80%	63 50.00%	61 48.40%	3.46	3.00
I have used what I learned from the trainers in my job.	124	0 0.00%	6 4.80%	67 54.00%	51 41.10%	3.36	3.00
My relationships with families have been more positive as a result of changes I made after hearing from the trainers.	126	0 0.00%	14 11.10%	66 52.40%	46 36.50%	3.25	3.00
My CFTs have been more successful as a result of changes I made after hearing from the trainers.	118	1 0.80%	12 10.20%	64 54.20%	41 34.70%	3.23	3.00

In answer to the question, “Based on what I learned from the training team, I have already made the following change(s) to my practice with families,” participants noted that they worked to improve their communication with families, increase their preparation, and increase opportunities for youth and family members to have a voice. To help improve communication, participants were “encouraging families to provide feedback,” taking “more time to explain what

a CFT is to families,” and working to “be aware of how [they] talk to families and include them in the process.” Others were “not rushing the meetings” and thinking about how they “interact with the family before and after the CFTs.” Another said that s/he worked to be “clearer as to what is expected of parents/families.”

Increased preparation was a part of many respondents’ answers and took many forms including accessing resources for the meeting, ensuring family supports could be present, and asking families what they would like for location and time. Some were making an effort to form the meeting’s purpose with the family. One respondent said s/he was asking families “how they want the CFT to go, who they want there, and who they don’t want there,” and was “listening more.” In addition, a few had reshaped their thinking about preparing when domestic violence was involved. This took the form of asking “families . . . involved in domestic violence more about their history and family history with domestic violence and any other types of abuse or mental illness,” and taking precautions to support those families in the meetings.

Workers’ efforts to raise the family voice included several responses about helping the family bring supports to the meeting, repeating or clarifying what family members said at the meetings, ensuring family members understood the meeting’s purpose, and involving them more in the planning. One participant noted that s/he “develop[s] the purpose with the family to ensure their voice is heard.” Another said that s/he ensures the “family is the primary ‘voice’ in the CFTs.” For those meetings held with youth in care, there were a few respondents that said they are scheduling CFTs to “help them construct realistic goals for themselves,” “allowing them to have more input,” and having “more sensitivity in addressing issues of [the] teen during the meet[ing].”

***In answer to the question, “Based on what I learned from the training team, I have already made the following change(s) to my practice with families,” participants noted that they worked to improve their communication with families, strengthen CFT preparation, and increase opportunities for youth and family members to have a voice. Increased empathy appeared as a theme in many responses. A few noted it more directly. One said s/he would “keep in mind what the families and youth are going through.”***

Increased empathy appeared as a theme in many responses. A few noted it more directly. One said s/he would “keep in mind what the families and youth are going through.” Another was thinking “about putting [him or her] self in their place to better empathize what they may be feeling.” In regards to domestic violence, some gained a more nuanced understanding, “distinguishing DV as an issue of coercive control, and other forms of violence within a family as anger issues, drugs, etc.”

#### **5.4.1 Trainer Feedback Forms**

Trainers completed feedback forms after each training event. These forms provided an avenue to share what worked well during the training event and to identify areas needing improvement.

They also provided a means to capture other information including participant demographics and the perceived change in the topic knowledge of the participants. For the purposes of this evaluation, the information from these feedback forms focused on comments made about the family-agency training partnership.

The training staff consisted this year of a mix of agency (6) and family (2 family; 1 youth) trainers. A review of the trainer feedback forms (TFFs) found several remarks by family trainers expressing appreciation of the partnership with the agency trainer. There were even more comments about the positive impact of the family partner on the training participants' learning. Noted too was the need for both the agency and family trainers to find and hone their voice in regards to the needs of each curriculum or learning point. Several of these comments have been included in Table 3.4 below.

*On the trainer feedback forms, the agency and family trainers identified what worked well during the training and areas for improvement. Family trainers expressed appreciation for the partnership with the agency trainers, and even more positive comments were made about the favorable impact of the family trainer on the participants' learning. For example, one trainer wrote, "[The family trainer] did a great job of helping participants work through their limited frame of reference in working with families and really contributed to one participant actually recognizing that "her" way wasn't as effective as she thought.*

**Table 5.3: Trainer Feedback from Comments about Family Partner and Co-Training, July 2012 – June 2013**

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[The family trainer] did a great job of helping participants work through their limited frame of reference in working with families and really contributed to one participant actually recognizing that "her" way wasn't as effective as she thought.
Family trainer voice was well placed in this event (usually stories and examples illustrated the skills shared and practice AFTER the practice piece). This really reinforced their value as a skill and placed a personal face to the need for facilitation. [The family trainer] did a great job with this and shared stories that were right on target with the skills.
Enjoyed training and partnering with [the family trainer] – Thank you for your support in getting my voice in delivery of this curriculum... I am looking forward to continued delivery of this training...
This curriculum has a nice slant on DV language, helping participants to view their situations in a perspective which is supportive to families who are experiencing DV and violence and reinforces the need for intentional, thoughtful preparation on CFTs when DV is suspected, noted and an issue. Trainers having basis and understanding of DV helpful in delivery – taking NCDSS DV training could support their delivery. Voice of [the family trainer] very helpful – given extensive knowledge and work in DV
[The family trainer] shared children and youth stories from her advocacy work and the room enjoyed them to prove the learning points.

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Trainers shared first-hand knowledge from their experience as a Social Worker in the field and as a former foster youth. (partnership training model is very effective in this curriculum)

The group appreciated her insights and application to CPS/CFT practice.

It was wonderful to see how the group really connected to her sharing and worked hard to apply what they learned from her to their practice.

Thank you, [family trainer], for sharing your stories with the learning points well, and for knowing how to move the training forward when the group wants to know more than you want to share. They shared how grateful they were that you were one of their trainers.

In this case, I think having the family perspective in the room really supported the learning because much of the work really focused on engaging families in a way that supported partnership (something that both Work First and CPS strive to do).

Family partner voice was VERY EFFECTIVE with this group. It provided a unifying goal for the training (partnering with families to provide appropriate services and improve family situations)

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#### **5.4.2 Conclusions**

Building on the positive findings from the 2009-2012 evaluations, this year's findings demonstrate that survey respondents continued to transfer key learning points from the curriculum as presented by the family-agency co-training teams and applied it in their work environment, and that the work environment was supportive of their doing so. Participants increased their efforts to improve communication with families and the amount and quality of preparation for child and family team meetings; they helped families bring supports and took other measures to increase family and youth voices in the meetings; and they found higher levels of empathy.



## 6 COLLABORATIONS

Collaboration with other organizations was pivotal to how the center accomplished its mission. These collaborations certainly informed and strengthened the center's training, technical assistance, and evaluation. With the expanded Family-Centered Practice Project team, the center was able to grow its networks of partners within the state, nationally, and internationally. This project and related projects of the center were mutually supportive.

***Collaboration with other organizations informed and strengthened the center's training, technical assistance, and evaluation.***

Two of these related projects were within North Carolina. One of these projects was the Strong Fathers Project, a fathering program for men who abuse in Winston-Salem and Durham, which was funded by NCDSS through the Family Violence Prevention Services Act. Another funded by the US DHHS, Children's Bureau was called Fostering Youth Educational Success, an infrastructure-building project to increase the educational stability of foster youth in Cumberland County.

Nationally and internationally, the center director provided guidance on practicing and evaluating family group decision making. In Guatemala, the center director delivered training on family group conferencing as a means of reducing the country's reliance on large institutions for children placed outside of their homes. Participation in these collaborations allowed the center team to remain connected to wider practice and policy discussions. These efforts supported the center in disseminating its work. In addition, it allowed for a better understanding of current issues affecting family-engagement theory, programming, training, and evaluation.

Statewide, the center was invested in building partnerships with others involved in family-centered practice. To support the capacity for collaborative training efforts, the center team participated in workgroups, committees, and training partnerships. One of these important collaborative efforts, the Family and Agency Collaborative Training Team (FACTT), was previously described in Section 4. Other significant collaborations are described next.

***Within the state, the center was invested in building partnerships with others involved in family-centered practice. Nationally and internationally, the center director provided guidance on practicing and evaluating family group decision making.***

## **6.1 North Carolina Collaborative for Children, Youth and Families**

The North Carolina State Collaborative for Children, Youth and Families provided a forum for collaboration among families, community organizations, public and private child- and family-serving agencies, and universities. Center staff participated in discussions and grant requests generated by the training and technical assistance sub-committee.

## **6.2 Fostering Perspectives Advisory Board**

The Fostering Perspectives Advisory Board was a North Carolina Division of Social Services (NCDSS) group comprised of members from Social Services, SAYSO, foster and adoptive parents, mental health, domestic violence, other community partners, and universities. Center team members contributed articles to *Fostering Perspectives*; provided information on family and youth engagement; outlined methods to enhance the safety of children/youth/families through CFTs; and shared family/youth perspectives.

## **6.3 Project Broadcast**

Project Broadcast coordinated change across a system of care in nine demonstration counties. The goals of this project included the development of a trauma-informed child welfare workforce and an increased capacity to access trauma-specific and evidence-based mental health treatments for children in the demonstration counties. The center took part in a workgroup designed to update, refine, and disseminate project findings. Center participation aligned Project Broadcast trauma informed training concepts with CFT practices across North Carolina.

## **6.4 REAP Coaching Sustainability Core Team**

One team member took part in the Coaching Sustainability Core Team in the eastern part of North Carolina. She worked directly with Wave I counties and interviewed four Wave I County Directors on their REAP experiences related to Dashboard Data and Coaching Skills implementation. Another center member co-trained Coaching Skills with NCDSS state trainers and helped to engage western counties in the state's REAP efforts.

## **6.5 Standing Committee on American Indian Child Welfare**

The American Indian Standing Committee on Indian Child Welfare of the Commission of Indian Affairs, formerly known as the Indian Child Welfare Task Force, was charged with furthering the legal mandates of the 2001 North Carolina General Statute 143-139.5A. This committee focused on the establishment of a relationship between the NC Division of Social Services and State Indian tribes such that tribes are able to receive notice of Indian children being placed in foster care, adoption, or involved in child protective services. Center staff participated on the Standing Committee for Indian Child Welfare to support DSS practice recommendations and policy dissemination.

## **6.6 North Carolina Educational Stability Task Force**

The North Carolina Educational Stability Task Force coordinated efforts to establish a cross-system assessment of foster youth's education and served as a platform for policy development to orient judges to ways of stabilizing the education of foster youth. This task force was chaired by the Manager of the Court Improvement Program, North Carolina Administrative Office of the Courts, and the members came from the judiciary, public instruction, social services, mental health, youth organizations, community groups, and universities. Center team members participated on this committee and shared evaluation findings from the Fostering Youth Educational Success Project in Cumberland County.

## **6.7 Chatham County Well-Being Collaborative**

The Chatham Child Well-Being Collaborative was a cross-agency group that focused on the state of children's services in Chatham County, North Carolina. The group included representatives from mental health, families, social services, juvenile justice, non-profits, and the Chatham County school system. The center staff participated in this group as a family member and co-chair for Chatham County.

## **6.8 Chatham Drug Free**

Chatham Drug Free was a county-wide coalition whose mission was to prevent and reduce underage drinking as well as tobacco and drug use. The primary objective of this group was to increase community awareness of youth substance abuse problems and create partnerships that work towards positive change. Center staff participated in this organization as Parent Committee Coordinator and trainer for the Parent 360 training events for parents and foster parents to raise awareness of substance abuse in youth populations.

## **6.9 Governor's Commission on Children with Special Health Care Needs**

The purpose of the Commission on Children with Special Health Care Needs was to monitor and evaluate the availability and provision of health services to special-needs children in this state and to monitor and evaluate services provided to special-needs children under the Health Insurance Program for Children. The commission reported a summary of its work and recommendations to the General Assembly and the Office of the Governor. A center staff member, serving on the commission, participated in this workgroup as a parent representative.

## **6.10 UNC Maternal Child Health Leadership Consortium**

The overall mission of the UNC-Maternal and Child Health(MCH) Leadership Consortium was to work in partnership with the Maternal and Child Health Bureau, its National MCH Training Network, and state and local Title V programs to train the next generation of leaders and to better serve the MCH population. A center staff member participated in this workgroup as a parent representative.

## 7 DISSEMINATION

### 7.1 Publications

The center publications this year included journal articles, book chapters, and newsletter contributions. Topics included family-centered practice and meetings, restorative justice, and family violence and fatherhood.

***The center publications this year included journal articles, book chapters, and newsletter contributions. Topics included family-centered practice and meetings, restorative justice, and family violence and fatherhood.***

Beck, E., & Pennell, J. (2012). Decentralization and privatization: The promise and challenges of restorative justice in the United States. In E. Zinsstag & I. Vanfraechem (Eds.), *Conferencing and restorative justice: International practices and perspectives* (pp. 137-151). Oxford, United Kingdom: Oxford University Press.

Kearney, C. (2012). Child and family team meetings can add to the success of court-ordered plans. *Fostering Perspectives*, 17(1), 10.

Parcel, T., & Pennell, J. (2012). Child and family teams building social capital for at-risk students. *Journal of Sociology and Social Welfare*, 39(2), 75-91.

Pennell, J., Maxwell, G. M., & Nash, J. (2012). Restorative justice and youth offending. In M. Weil, M. S. Reisch, & M. L. Ohmer (Eds.), *Handbook of community practice* (2nd ed., pp. 567-583). Thousand Oaks, CA: Sage.

Poindexter, B. (2013, May). CFTs the vehicle of connection. *Fostering Perspectives*.

Rauktis, M.E., Fitzpatrick, L.B., Jung, N., & Pennell, J. (2012). Family group decision making: Measuring fidelity to practice principles in public child welfare. *Children and Youth Services Review*, 35, 287-295. doi: 10.1016/j.chilyouth.2012.11.001

Rotabi, K. S., Pennell, J., Roby, J. L., & Bunkers, K. M. (2012). Family group conferencing as a culturally adaptable intervention: Reforming intercountry adoption in Guatemala. *International Social Work*, 55(3), 402-416. doi: 10.1177/0020872812437229

### 7.2 Presentations and Workshops

In 2012-2013, center team presented in international, national, state, and local forums. These included presentations and workshops. Topics included family-centered meetings and practice, foster care education, negotiation, restorative justice, and family violence.

***The center team presented in international, national, state, and local forums. Topics included family-centered meetings and practice, foster care education, negotiation, restorative justice, and family violence.***

### 7.2.1 National or International Forums

Burford, G., Pennell, J., & Morris, K. (2013, June). Engaging family for positive child and youth connections and outcomes. Presentation at Child and Youth in Care World Conference, St. John's, Newfoundland, Canada.

Rauktis, M. E., Pennell, J., & Casillas, K. (2013, April). Keeping on track with FGC principles—The role that evaluation can play [webinar]. Kempe Center for the Prevention and Treatment of Child Abuse & Neglect, School of Medicine, University of Colorado.

Rikard, RV, & Pennell, J. (2012, October). Integrating GIS & cost analyses: Mapping school transportation for foster youth. In N. Persaud (Chair), multipaper session, *An examination of cost analysis from different perspectives, sectors, and programmes*, at the 26th Annual Conference of the American Evaluation Association, Minneapolis, MN.

Roby, J., Pennell, J., Rotabi, K., de Uclés, S., & Bunkers, K. (2012, July). *Reuniones de grupo familiar en Guatemala: Orientación para coordinadores y comunidades*. Training for Practitioners, Guatemala City, Guatemala.

Roby, J., Pennell, J., Rotabi, K., de Uclés, S., & Bunkers, K. (2012, July). *Reuniones de grupo familiar en Guatemala: Introducción para altos funcionarios*. Presentation to High Officials, Guatemala City, Guatemala.

Rotabi, K. S., Roby, J. L., & Pennell, J. (2013, June). Pilot training and contextual adaptation of family group conferencing model: Early evidence from Guatemala and implications for Cambodia. International Social Work Conference on Children and Youth, Phnom Penh, Cambodia.

### 7.2.2 State or Local Forums

Allen-Eckard, K., Farmer, G., Jones, B., & Lambert, A. (2013, March). *Become involved in Indian child welfare in your community*. Panel to 2013 Annual North Carolina Indian Unity Conference.

Allen-Eckard, K., & Stokes, C. (2013, June). *Believe and achieve*. Presentation to 2013 Student Services Institute, Cumberland County Schools.

Pennell, J. (2012, November). *FGDM introduction*. Presentation to Restorative Justice Studio, Duke Divinity School, Duke University, Durham, NC.

Poindexter, B. (2012, October). *The YOU in negotiation*. 2012 NCDSS Social Services Institute, Raleigh, NC.

Sanders, T., & Pennell, J. (2012, November). *Family violence: Engaging fathers in peacemaking*. Presentation to Peace Studies Seminar, North Carolina State University, Raleigh, NC.

Volkel, J. (2012, October). *Fostering YES*. Presentation at 1st Annual Research and Underrepresented Populations Panel, North Carolina State University, Raleigh, NC.

Volkel, J. (2013, March). *In their own words: Fostering youth educational success(YES!)*. 8<sup>th</sup> Annual Graduate Student Research Symposium, North Carolina State University, Raleigh, NC.

Volkel, J., & Meyers, L. (2012, July). *Believe and achieve: Bridging the gap!* Curriculum presented to master of social work students, North Carolina State University, Raleigh, NC.

## **8 ACKNOWLEDGMENTS**

The newly initiated project built upon the preceding 10-year Family-Centered Meetings Project and extended this work into a larger framework of family-centered practice. This extension was in keeping with the basic tenets of partnering with families and was guided by our collaborators in the community and on campus.

This year the center and its community partners were awarded the Opal Mann Green Engagement and Scholarship Award. The award reflects the essential contributions of the center's partners in all of our endeavors and in enriching our understanding and support of family-centered practice.

The length of the acknowledgments below is a tribute to the importance of partnerships to fulfilling the mission of our center. I apologize in advance for the worthwhile partners who are not cited.

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