

# Iowa Change Leadership Vision Council

funded by the Mid-Iowa Health Foundation FOR A YEAR 3!!



**WELCOME &  
CHECK-IN**

# MEETING PURPOSE

Reconvene the Vision Council for a progress update, plan for American Rescue Plan funds, and to gather input to shape the third year.

# MEETING RESULTS

**1** Benefits of the recent VC Leadership Development Program are shared.

**2** The VC is updated on each of the Work Groups.

**3** Next steps are identified for the VC to influence the use of the ARPA.

**4** Input is collected to guide Year 3 of the VC's work together.

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

**AGENDA**

June 29, 2021

**VISION COUNCIL MEETING**

**9:00 AM**

Welcome & Meeting  
Overview; Introductions  
and Check-in

**9:15 AM**

Reflections on the VC  
Leadership Development  
Program

**9:25 AM**

Work Group Updates:  
North Star, Older Youth,  
SUD, FFPSA

**9:40 AM**

Overview, Update, and  
Opportunities: The  
American Rescue Plan  
Act in Iowa  
(Zoom Rooms)

**10:15 AM**

Overview, Update and  
Input: Mid-Iowa Foundation  
Grant to the Vision Council  
for Year 3 (Zoom Rooms)

**10:50 AM**

Check Out  
Adjourn at 11:00

**1**

# **In your Zoom Room:**

**NAME | WORKPLACE | TITLE | VC WORK GROUP**

**2**

## **Very Briefly Share**

How are you?

One word that comes to mind when you think of the Vision Council or its work.

# **Reflections on the Vision Council Leadership Development Program**

## **Program Participants**

**Greg Bellville**

**Emily Blomme**

**Julie Clark-Albrecht**

**Ana Clymer**

**Stephanie Hernandez**

**Kristie Oliver**

**Josh Pedretti**

**Kayla Powell**

**Kelli Soyer**

**Kathy Thompson**

**Susan Walkup**

# UPDATES

## Vision Council Work Groups

NORTH STAR

OLDER YOUTH

SUBSTANCE  
USE  
DISORDERS

FFPSA

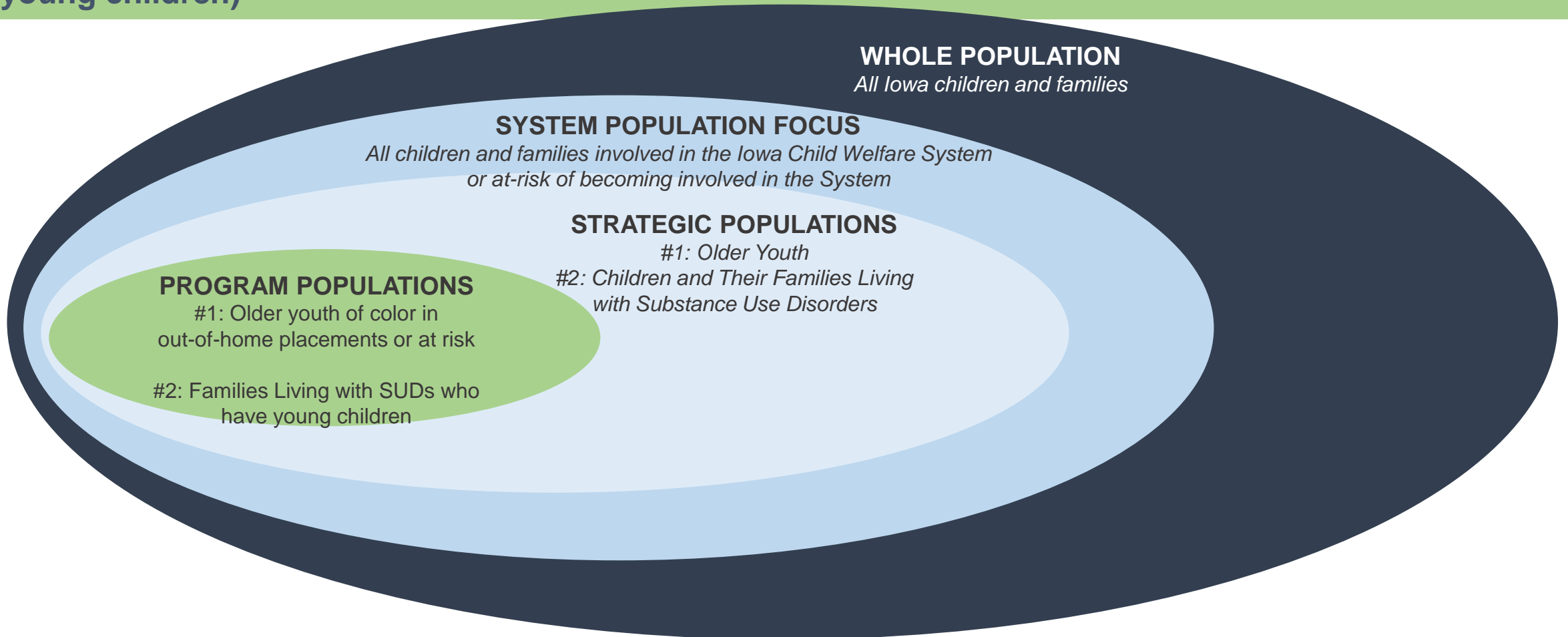


# Whole Population to System Population to Strategic Populations to Program Populations <sup>[1]</sup>

## STRATEGIC POPULATIONS

**#1: Older Youth (Program Population: Older youth of color in out-of-home placements or at risk)**

**#2: Children and Their Families Living with Substance Use Disorders (Program Population: Families with young children)**



<sup>1]</sup> **Trying Hard is Not Good Enough**, Friedman, Trafford Publishing, 2005

# Workgroup Updates

## North Star

- Prioritizing housing stability and financial security for Vision Council's System, Strategic, and Program Populations
- Indicators:
  - [Severe Housing Problems](#) (Severe Housing Cost Burden), and
  - [Children in Poverty](#) (both measured county-by-county through County Health Rankings)
- Draft target for housing: **By 2026, 94% of Iowa families with children are living in safe, affordable housing.**
- Reaching out to leaders/groups working on housing
- Establishing a target for financial security
- Developing strategies to work toward both targets

## Older Youth

- Identified focus: Safely keep children/youth of color, ages 12 years and older connected to family, kin or fictive kin.
- Identified the need for two targets.
- Draft target 1: **By 20XX, reduce entries into out-of-home placements for children/youth of color, ages 12 years and older by X% or #**
- Draft target 2: **TBD, but will focus on reducing entries into the Child Welfare System**
- Factor analysis
- Recommendations for use of ARPA funds
- Developing strategies to work toward both targets

# Workgroup Updates

## SUDs

- Conducting a survey of the adult behavioral health providers in the state to: 1) gather information in support of creating a “family-centered, recovery oriented, integrated systems of care approach to treating substance use disorders.” and; 2) identify Evidence-Based Practices that are already in use in the state that crossover with the federal IV-E Prevention Clearinghouse  
From survey, Top Five Prevalent Conditions/Situations Facing Clients:
  1. Mental Health
  2. Traumatic Life Experiences
  3. Financial Strain
  4. Housing
  5. Disconnection from a supportive community
- Presented on the VC’s work to the Cross-System Collaboration Committee (CSCC - convened by the Coalition for Family and Children’s Agencies) to demonstrate intersections, not just with the SUD Workgroup, but between the VC and CCC, generally
- Next steps:
  - Increase number of respondents to survey
  - Present survey results and increase awareness of VC, FFPSA, and CCC in the adult behavioral health community
  - Contribute to the IDPH/DHS alignment
  - Develop strategies

## FFPSA

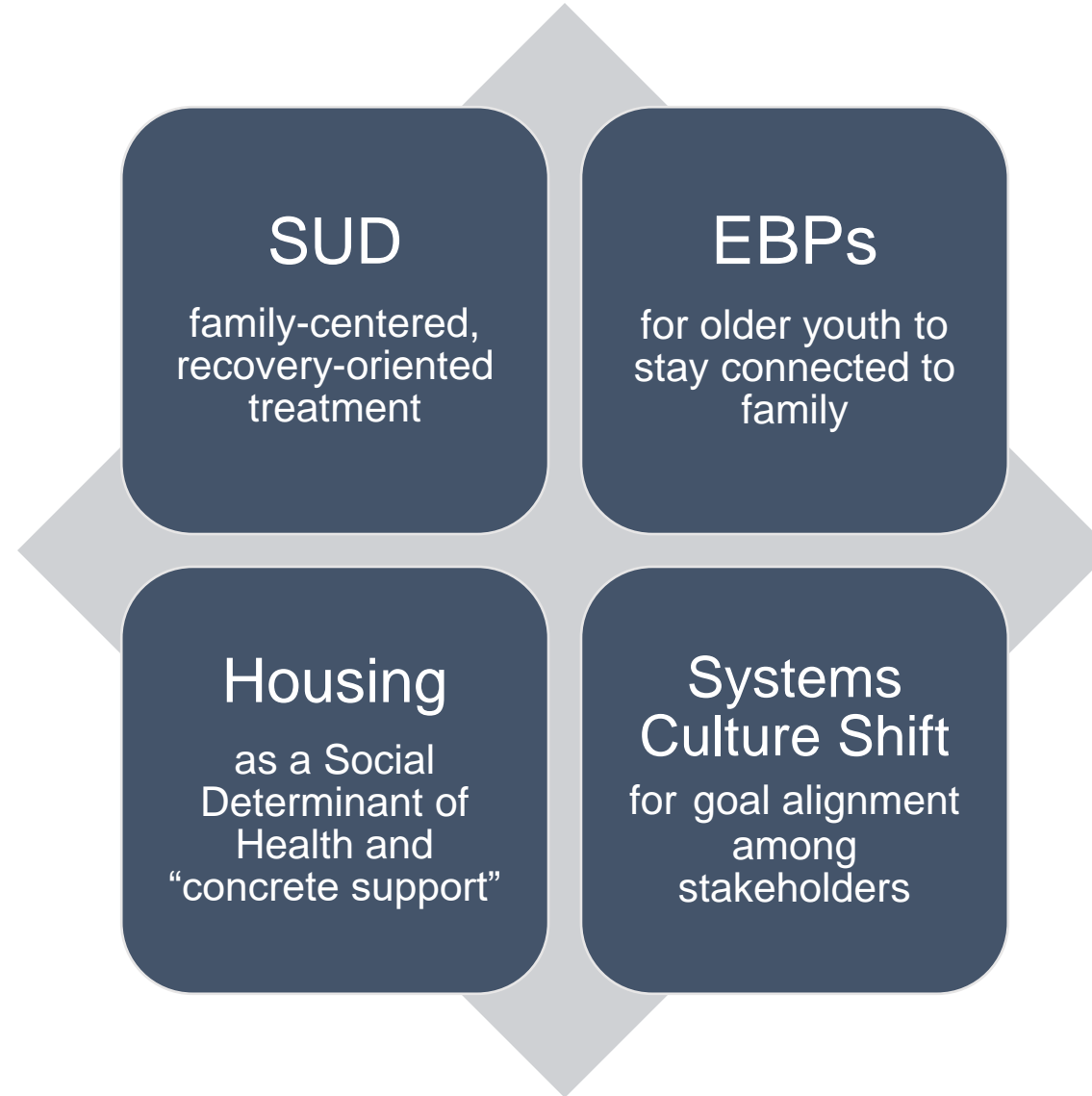
- This Workgroup’s charge is dependent on other Workgroups’ plans. So, it was on hiatus during the fourth quarter while plans were being developed.

# Topline Findings of Adult BH Services Survey, cont.

The Vision Council's Substance Use Disorder Work Group is conducting a survey of the 100+ adult behavior health providers.

Substance Use	Mental Health:	Parent Skill-Based Training:
<ul style="list-style-type: none"> <li>• Motivational Interviewing (19)</li> <li>• Cognitive Behavioral Therapy (CBT) (19)</li> <li>• Living in Balance (6)</li> <li>• Pharmacotherapy (MAT) w/Buprenorphine (6)</li> <li>• Seeking Safety (5)</li> <li>• Love and Logic (4)</li> <li>• Multidimensional Family Therapy (4)</li> <li>• Contingency Management (4)</li> <li>• Brief Strategic Family Therapy (3)</li> <li>• Multisystemic Therapy (3)</li> <li>• Methadone Maintenance Therapy (2)</li>   <li>• Adolescent Community Reinforcement Approach (A-CRA)</li> <li>• Families Facing the Future</li> <li>• Sobriety Treatment and Recovery Teams (START)</li> <li>• Iowa Parent Partner Approach</li> </ul>	<ul style="list-style-type: none"> <li>• Trauma-Focused Cognitive Behavioral Therapy (11)</li> <li>• Parent-Child Interaction therapy (8)</li> <li>• Functional Family Therapy (2)</li> <li>• Triple P – Positive Parenting Program (1)</li> <li>• Incredible Years (1)</li>   <li>• CBITS/BounceBack</li> </ul>	<ul style="list-style-type: none"> <li>• Parents as Teachers (1)</li>   <li>• Nurse-Family Partnership</li> <li>• Healthy Families America</li> <li>• Family Check-Up</li> <li>• Homebuilders – Intensive Family Preservation and Reunification</li> <li>• Intercept</li> <li>• SafeCare</li> </ul>

# Cross-System Collaboration and Vision Council Intersections



## Goal Alignment

- Multi-generational (including kin caregivers)
- Family-centered
- Trauma-informed and Healing-centered
- Systems and structural change

# American Rescue Plan Act (ARPA)

## Backdrop/Context

- Passed in March 2021
- Offers:
  - direct relief (e.g. Child Tax Credit, Stimulus Payments, child care assistance for essential workers)
  - programs that address issues (e.g. housing, hunger, child care, unemployment, child maltreatment)
  - historic financing wins (e.g. cutting child poverty in half, largest investment in child care)
- Funds flow in different ways and have varying deadlines for expenditure:
  - federal to state
  - federal to state to local
  - federal to local
- Technical problems are easier to fund/tackle than adaptive problems BUT human needs and human services sector needs are often in the adaptive space, e.g. workforce

# American Rescue Plan Act (ARPA)

## Partial List of Resources to Iowa

- [Coronavirus State and Local Fiscal Recovery Funds](#)
  - Can be spent on root causes of child maltreatment
  - Can also be spent on a number of other recovery needs
  - Same federal guidance for all levels of government means alignment is possible
  - Amounts:
    - State: \$1.5 billion
    - Counties: Adams County \$700,000; Polk County \$95 million
    - Municipalities: 12 Metropolitan areas, range is \$6 - \$95 million
- Child Care: \$370 million
- Education: \$775 million
- Community-Based Child Abuse Prevention (CB-CAP): \$2.4 million
- Housing: approx. \$40 million in HOME Program
- Mental Health Block Grant \$11 million
- Substance Abuse Block Grant: \$10.6 million
- Community Mobile Crisis Intervention Services: 85% enhanced federal match rate

# American Rescue Plan Act (ARPA)

## Opportunity for Vision Council Leadership

- So far
  - Interviews conducted to identify needs, opportunities, timing, and concrete strategies to recommend
  - Outreach to Director Garcia
  - High-level draft document
- Vision Council opportunity, gap, and options
  - Opportunity: leadership on intersectional focal points (VC's overarching priorities, Program Populations, and goals)
  - Gap: specific strategies are not yet developed and approved



# American Rescue Plan Act (ARPA)

## Opportunity for Vision Council Leadership

### Small Group Discussions – 15 minutes

1. Identify a discussion facilitator and a reporter
2. Landscape review: - 5 minutes
  - Round Robin (each person briefly shares):  
What information do you have about the application of ARPA funds in Iowa, e.g. are decisions already made? Have plans been submitted to the federal government? Are you involved in spending the county/municipal funds in your area?
3. Next steps for Vision Council: - 10 minutes
  - What are the key considerations for the Vision Council regarding ARPA funds?
  - What level of information does that VC want to put forward to ARPA decision makers (pick one):
    - Main ideas with a promise of details;
    - Detailed plan before submitting, i.e. quickly develop and approve strategies according to ARPA guidelines and opportunities;
    - Main ideas with a request for opportunity to work through details in partnership;
    - Other, please explain

# **Small Group Report Out**

Total time: 10 minutes

# Mid-Iowa Foundation Grant to VC – Year 3

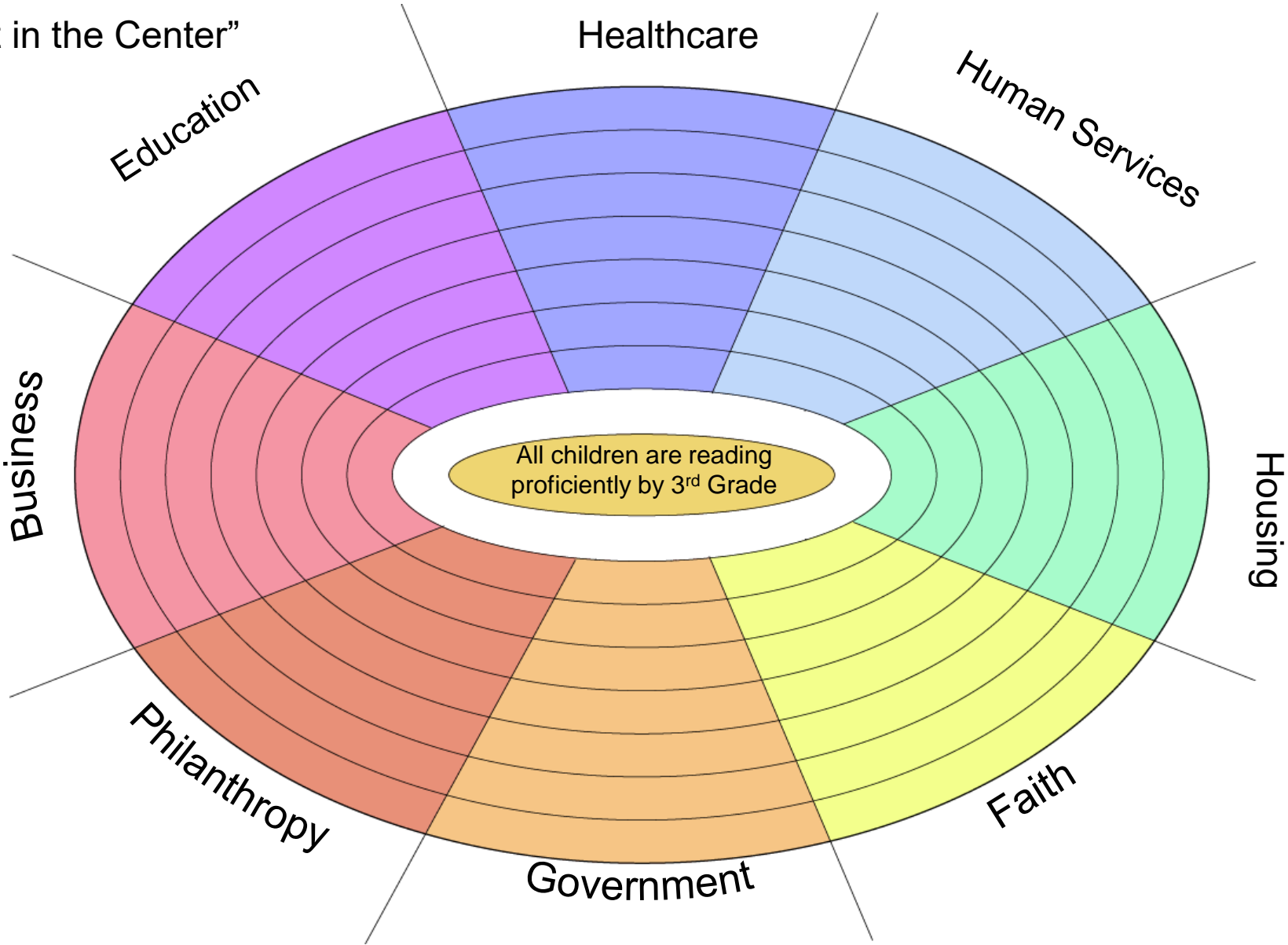
## Context

- Year 3 grant was awarded covering a portion of requested funds
- Activities include:
  - Continue the plan development process (strategies, actionable steps, measurement plan, etc.)
  - Continue culture shift effort
  - Explore the role of advocacy to build and support a system to achieve the VC's North Star Outcome
  - Influence ARPA funds toward North Star Outcome and VC Framework
  - Increase alignment through outreach and partnership development

## Small Group Discussions – 15 minutes

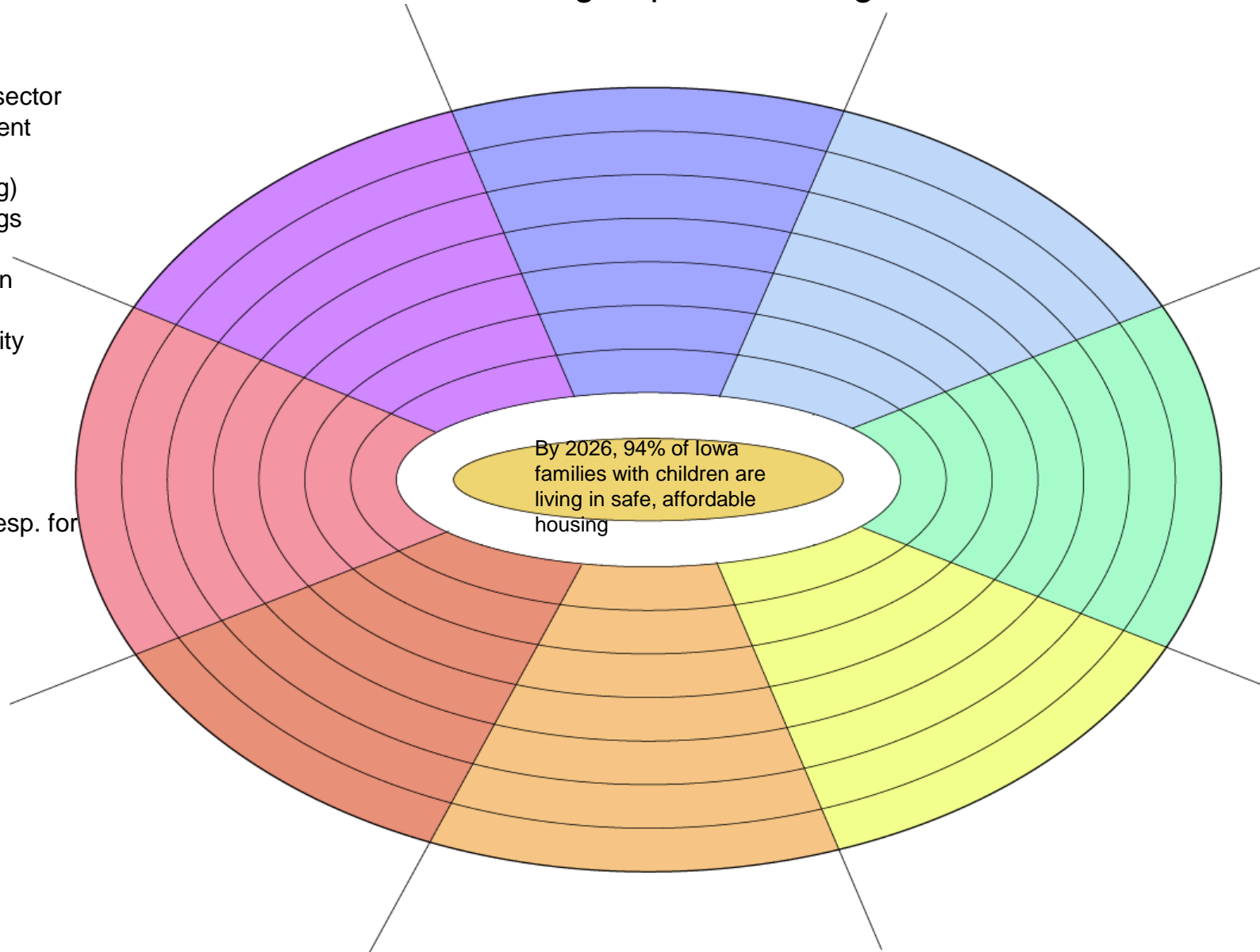
1. Identify a discussion facilitator and reporter
2. Place the “result in the center” to brainstorm: 1) sectors; 2) stakeholders; 3) specific partners - ~7 minutes
3. Discuss the question, “What must the Vision Council accomplish in Year 3?” ~ 7 minutes

Example "Result in the Center"



# Result in the Center: Vision Council's North Star Workgroup on Housing

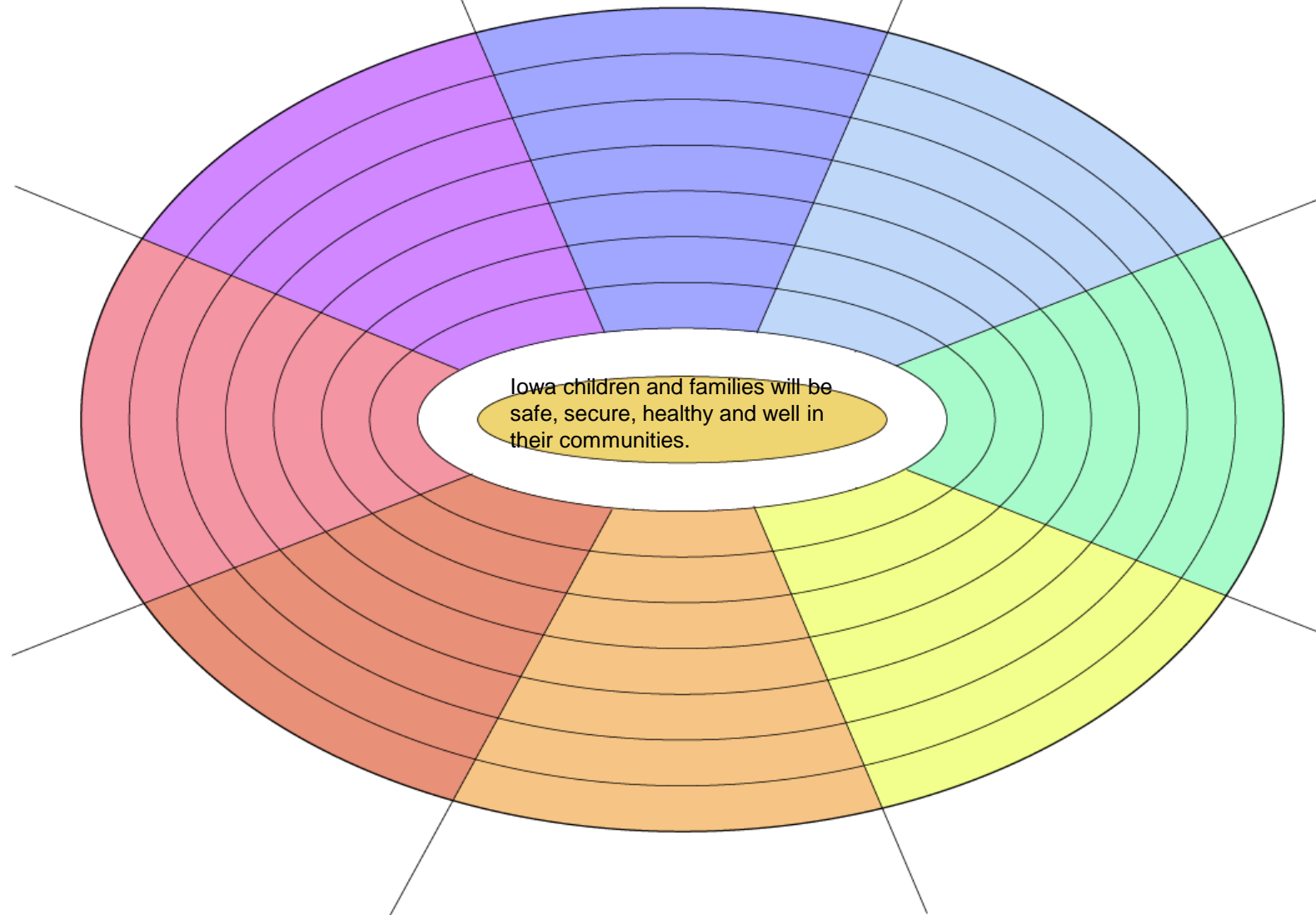
- What sectors?
  - Construction
  - Public health/public sector
  - Economic development
  - County govts
  - municipalities (zoning)
  - Nonprofit housing orgs
- What stakeholders?
  - Landlords association
  - Families
  - Iowa Finance Authority (public?)
  - Employers
  - Nonprofit leaders
  - Child welfare
  - Behavioral survey
  - Law enforcement (resp. for evictions)
  - Schools?
- Who are the partners?



## Result in the Center: Vision Council's North Star Outcome

*Note: Your small group can choose to work on one of the specific Workgroup priorities/populations, if you prefer.*

- What sectors?
  - xxx
- What stakeholders?
  - xxx
- Who are the partners?
  - xxx



# **Small Group Report Out**

Total time: 10 minutes

# **CHECK OUT QUESTION**

**What is one priority you have for the Vision Council in Year 3 of our work together (July 2021 – June 2022)?**



# Thank You



# | RESOURCES

## The Iowa Change Leadership Vision Council

Iowans are supportive of strong families and communities. It shows in data about our state. Iowa's rank as #3 in a national Opportunity Index suggests that most Iowans can rely on the foundational building blocks of employment, education and learning opportunities, physical, mental and behavioral health care, homes in thriving neighborhoods, enough food for an active, healthy life, and vibrant communities.

The Iowa Change Leadership Vision Council, sponsored by the Mid-Iowa Health Foundation as a project of the Coalition of Family and Children's Services in Iowa, seeks to align the collective efforts of organizations, government, and communities to help Iowa do even better for families and children. A public-private partnership of leaders working every day with the families who collide with structural inequities in their lives and where they live, the Vision Council studied how to build up the right kinds of supports so that more of our children and families thrive. Our vision is that "all Iowa children and families are safe, secure, healthy and well in their communities."

We know that when a foundational building block is missing or crumbling out from under a family, stress levels rise. Most families live with supports that equip them to recover from mild pressures, like temporary job loss or a recoverable illness. But overwhelming stress from limited access to an adequate array and availability of jobs, insufficient or incomplete education, unsafe living conditions, disconnection from health care coverage and access, and weakened neighborhoods, can keep children and families from achieving their full potential.

Because we are a community of leaders interacting daily with Iowa's children and families who are living with shaky foundations, we can see that there are pressures that cause stressful situations, which can lead to child maltreatment. In most cases, we observe that children who have experienced maltreatment are in situations where multiple pressures are co-occurring. After a deep review of data and research, the Vision Council believes that too many Iowa families are living and working within structural inequities that actively build up pressure in their homes. When it builds too high, children can become the victims of harm that will impact their development and opportunities for the rest of their lives. These high-pressure situations, and the harm that can result, are often preventable by ensuring families have the building blocks needed to achieve their full potential.

Structural inequities occur when situations and systems, and the decisions and policies that impact them, are not designed to ensure success. The Vision Council is focusing our strategies and advocacy on addressing structural inequities, ensuring instrumental supports are there when families need them to rebuild their strength, and cultivating protective factors in individuals, families, communities and systems. We know our work builds on Iowa's strong commitment to child, family and community well-being.

## Indicators relevant to the Vision Council’s North Star Outcome (Structural Inequities)

“Iowa families and children are safe, secure, healthy and well in their communities.”

Indicators	Measure/Source	Note
Principal Issue: Concentrated Community Disadvantage (CCD)		
Financial Security	Child poverty or Children in Poverty Unemployment	Concentrated Community Disadvantage (CCD); correlated with child maltreatment
Housing instability	Severe housing problems (county level)	CCD; Correlated with child maltreatment
Parental education attainment	Adults with a high school diploma (county level)	Correlated with child maltreatment
Food insecurity	Free/Reduced Lunch	Somewhat correlated with child maltreatment
Uninsurance	Uninsured under age 65 (CHR) Uninsured under age 19 (CHR)	Somewhat correlated with child maltreatment
Social Disorder	Excessive drinking (County Health Rankings) Substance Use in child maltreatment cases (Iowa DHS)	CCD; indicator of fewer resources overall; Social disorder is linked to child maltreatment

# Measuring Progress - Moving Toward the North Star Outcome: “Iowa children and families are safe, secure, healthy and well in their communities”

Key:  
 Red = correlates w/ child maltreatment  
 Blue = Family First Prevention Services Act helps with  
 Purple = financial strategies proven to reduce entries into CWS

	Building Blocks All Families Need	Progress Measures/Want to Measure	Notes
<b>Safe</b> - Feeling nurtured and protected.	Housing with concrete supports	Safe, affordable, available housing	Family Protective Factor (FPF)
<b>Secure</b> - Having enough resources for a quality of life.	Employment Financial assistance	Access to robust EITC Wage increases, e.g. minimum wage increase	FPF
	Transportation		
<b>Healthy</b> - Enjoying good health and expecting to live a full life.	Health care access	Uninsured (CHR – under age 65) Uninsured children (CHR - % under age 19) Medicaid coverage	FPF
	Food security SUD and MH treatment	Food Environment Index (CHR) Access to MH Care (CHR)	
<b>Well</b> - Thriving and resilient with a strong economy and opportunities to learn.	Parental education Child care Services to address special needs		
<b>In their communities</b> - Living among family and social networks who help each other live well.	Parent skill building	Availability to home visiting that includes concrete supports	FPF
	Supportive communities and relationships		FPF
	Caring adults outside of the home		FPF

DRAFT

# Change Leadership Vision Council

## System Culture Shift

<b>FROM</b> <b>Defensive Style</b>	<b>TO</b> <b>Constructive Style</b>
Current Assessed State: Compliance Mindset	Overall Goal for the System: Move to a Value-Based Mindset
<b>Current Assessed Behaviors:</b> <ol style="list-style-type: none"><li>1. Communicating only “What”</li><li>2. Fix-it Mindset</li><li>3. Fear of risk and change</li><li>4. Geographic Alignment</li><li>5. Outcomes measured by negative indicators</li></ol>	<b>Ideal Behaviors:</b> <ol style="list-style-type: none"><li>1. Communicating “What and Why”</li><li>2. Progress Mindset</li><li>3. Be an agent of change, be proactive and increase advocacy</li><li>4. Goal Alignment</li><li>5. Outcomes measured by positive indicators</li></ol>

*This System Culture Shift proposal was drafted by the Change Leadership Vision Council, a public-private initiative convened by The Coalition for Family and Children Services in Iowa, funded by the Mid-Iowa Health Foundation.*

**CONTACT: Kelli Soyer, MSW, LMSW, Associate Director, at [kelli@iachild.org](mailto:kelli@iachild.org)**



**The Coalition**

Coalition for Family and Children's Services in Iowa

# Vision Council Data Observations

*Note: Observations were made as part of a data walk and analysis conducted in August 2019. Since that time, the Vision Council has been working on addressing the issues identified through the data walk.*

Iowa child welfare system stakeholders need to use data to **drive decision making** and **change practices**.

Data illustrates **racial bias** in Iowa systems that needs to be addressed.

There are **root causes** to families becoming involved in the child welfare system.

**Systems need to be trauma-informed** because children and families are living with the trauma of root causes, ACEs and toxic stressors.

**Substance use disorders** show up at a high-level in the data but are not a major focus of FFPSA implementation. (Note: This has since been remedied by the Vision Council with the start up of the Substance Use Disorders Work Group.)

System stakeholders need to **work together to** address root causes, prevent child maltreatment and prevent trauma.