Mississippi

Statewide **Implementation** of a Family Centered **Practice Model:** Increasing Readiness and Managing Change

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Project Overview

The Mississippi Change Management Implementation Project is a project geared toward the full and ongoing institutionalization of a family-centered practice culture in the Mississippi Department of Human Services, Division of Family and Children's Services, the public child welfare organization in the State of Mississippi.



MS Project Overview

Innovation Project Sites:

Forrest and Harrison counties

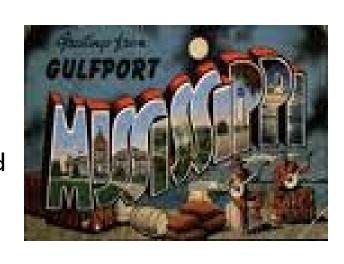
 Historical and current characteristics which are extremely unique and challenging





MS Project Innovation Sites

Harrison County is on the Mississippi Gulf Coast, is the second most populated county in the State (out of 82 counties), and was devastated by Hurricane Katrina. The major cities are Biloxi and Gulfport, with Gulfport being the county seat.





Forrest County is 60 miles due north of Harrison County with the county seat, Hattiesburg, the home of the University of Southern Mississippi. Forrest County was also significantly impacted by Hurricane Katrina and is the eighth most populated county in the state.



MS Project Goals

- Assessing system readiness
- Developing a model
- Establishing a supportive organizational culture
- Building capacity



MS Project Partnership





Promote Child Welfare Best Practices Support Implementati on of Family Centered Practice



Implement Organizational and Child Welfare Practice Change

Atlantic Coast Child Welfare Implementation Center

A member of the National Child Welfare Training and Technical Assistance Network, a service of the Children's Bureau, U.S. Department of Health and Human Services



Comprehensive Organizational Health Assessment

- □ Purpose of the COHA
 - Provide information about your organization's workforce strengths and needs
 - Guide areas of intervention focus
 - Assist in organizational strategic planning
 - Provide a way to look at improvements over time









MS Project Activities

- Statewide Activities
 - Develop peer to peer network and train regional administrators to conduct COHA.
 - Conduct COHAs and aggregate findings
 - Partner with Center for Support of Families to stage Family Centered Practice implementation timeline based on COHA results
- Regional Activities
 - Partner with USM and utilize Learning Labs to build change management capacity.
- Pilot County Activities (Harrison and Forrest Counties)
 - Implement Learning Circles with fidelity to Western Workforce Model
 - Utilize Learning Circles to develop grassroots solutions to organizational issues.

MS COHA Project Conceptual Model

Goal

- Improve organizational climate and culture
- Create/improve outcomes for children and families
- Create a learning organization
- Improve retention of quality child welfare staff

Outcomes

Individuals

- Increased:
- Job satisfaction
- Job efficacy
- Motivation
- Sense of belonging
- Decreased:
- •Feelings of burnout
- Feelings of disengagement

Supervisors

- Supervisors have increased skills in:
- Providing support
- Facilitation of change
- Communication regarding mission and values
- Problem solving
- Resolving conflict

Teams

- Teams have increased skills in:
- Collaboration
- Resolving conflict
- Problem solving
- Providing support to each other
- Commitment to organizational mission and values

Change Drivers

Índividual Staff and Teams understand importance of:

- Detecting and openly critique problems
- •Connecting practice to mission and values
- •Organizational dynamics
- Applying best practices change
- Building on individual, team and agency strengths.
- •Being self reflective

Supervisors, regional directors and leaders understand importance of:

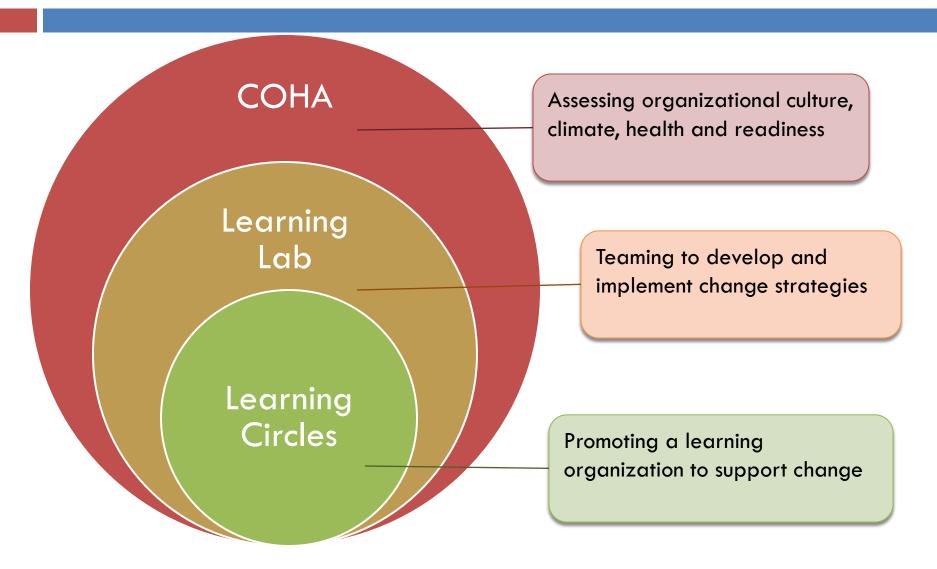
- Supporting positive systems change
- Staff engagement in positive change
- •Clearly articulated vision
- Commitment to agency mission & values
- Using of best practices
- Maximizing the use of line staff/teams and supervisors practice wisdom
- •The development of a learning culture

Agency

- Increased value and support for
- Inclusivity
- •Organizational learning
- Training
- Ongoing professional development
- Concrete solutions
- Workforce support
- Cultural responsiveness
- Creating better outcomes for children and families



Building Organizational Capacity





COHA Assessment Activities

Pre-assessment

COMPLETE!

- Gather information to begin to understand important organizational influences
- Review of important documents like strategic plans, recruitment policies/procedures and CFSR reports





COHA Assessment Activities

- On-site data collection
- COMPLETE!
 Forrest and Harrison County
- Gather employee reports of organizational health in a variety of areas
- On-site data collection includes:
 - A small team of assessment specialists will visit
 - Directors/supervisor, staff, family consumer and community partner <u>surveys</u> and <u>group interviews</u>
 - Key informant individual interviews
 - Meetings with human resources re: recruitment and retention information



COHA Assessment Activities

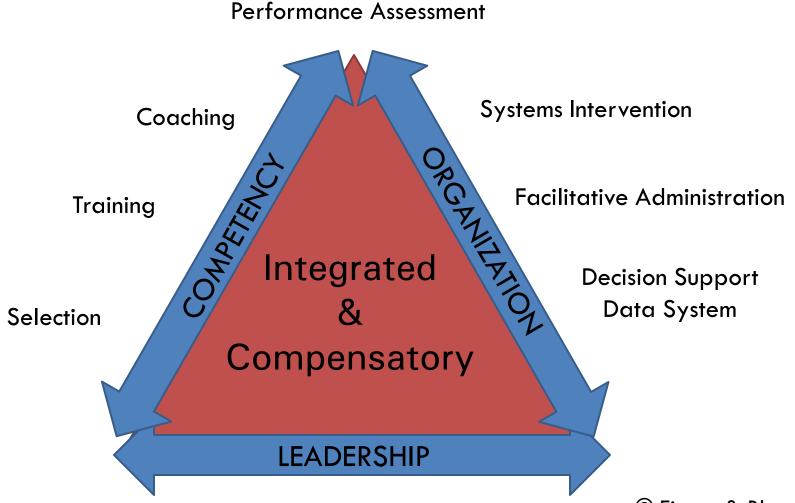
Data analysis



- Information will be summarized and strengths and challenge areas will be examined.
- A "Results Overview" report created with visually appealing, easy to understand graphics and tables to show results that will:
 - Increase understanding of strengths, barriers, challenges and how they fit together/interact.
 - Provide guidance in selecting organizational, learning circle and design team interventions.



National Implementation Research Network: Implementation Drivers





Practitioner Selection

Staff Recruitment, Selection, Allocation

COHA feedback

■ Start Teams



Stakeholder Involvement



Training

Information, instruction, skill development to obtain new knowledge, skills, abilities

- Training focused on building organizational readiness for Family Centered Practice.
- The COHA model includes several trainings and supports that will help assist staff with the new practice.





Supervision and Coaching

- Observation, Instruction, Feedback, Support
- Learning Circles
 - Intervention at the unit level
 - Focus on workforce and community best practice
 - Improve organizational climate





Supervision and Coaching

Observation, Instruction, Feedback, Support

- ACCWIC and USM staff will serve as coaches to supervisors as they lead their Learning Circles.
- Coaching supervisors at this early stage is intended to provide assistance and feedback when needed.
- Development of leadership skills in supervisors through ongoing coaching.



Performance Assessment

Appraisal of the Work Conducted by Practitioners

- Stakeholders
- Teams
- Regional leaders
- COHA lessons learned



System's Intervention

- The COHA Process
 - Web-based survey
 - Qualitative interviews and focus groups with external stakeholders, staff, families and youth.

■ Start Team - COHA model

Learning Circles



Facilitative Administration

Organization's Structure, Policies, Procedures

- In early stages
- Anticipated changes
- Leadership support



Data Decision Systems

- Data Collection and Reporting System
 - COHA Data
 - Organizational health data from staff, external stakeholders, families and others that participate in the COHA survey/interview process.
 - Data will support the necessary systems change initiatives.
 - Current CQI Process
 - Internal partners and others will review relevant data and make decisions related the information we learn.



Leadership

- Leadership involvement, change management, data use
 - Ongoing communication with all front line workers.
 - Moving from a more closed system to a learning culture.
 - Reinforced need for all staff at all levels to be transparent.
 - Transfer of trust laying the groundwork at the county level for the ACCWIC project staff to work in counties.
 - Reinforce importance of this project and its potential to have a positive impact on the MS DHS system.



Communication Strategies

- A Communications Team has been established with a cross section of staff from both Harrison and Forrest Counties and representatives from our community stakeholders and parents.
 - Monthly meetings
 - Developed the mission, vision and goals for our work in the two counties.





Communication Strategies

Vision Statement

Communication within the agency, with community partners and with the families that we serve will be accessible, understandable, transparent and consistent with <u>Family Centered Practice</u>



Communication Strategies

Mission Statement:

- To plan, coordinate and evaluate communication methods and strategies
- To support the implementation of Family Centered
 Practice
- Improving outcomes for children and families.



NDHS Integrating Research and Data

- Have you used data to determine your readiness for implementation?
 - COHA project is about determining our readiness to implement Family Centered Practice
 - All data gathered will be used for the purpose of creating readiness around
 - Family Centered Practice activities.



Accomplishments

- Aligning of the project with:
- ☐ MDHS strategic plan
- Terms of OLIVIA Y
- Implementation of Family Centered Practice
- USM practice work in Forrest and Harrison county
- Creating awareness through communication to build statewide support for improving the organization.
- Setting the stage to become a learning organization.
- Development of the capacity of Regional Leadership to champion our statewide organizational improvement efforts.



Next Steps

- Keep Communications flowing
- Conduct Learning Circle training with supervisors and program managers in Forrest and Harrison counties.
- Share COHA survey results with Key state leadership and Start teams in Forrest and Harrison County
- Orient new leadership in pilot counties
- Finalize curriculum on interpretation and application of COHA data to for Learning Labs with supervisors and program managers.
- Reinforce our staff for the changes they are making in their organization!