
Coordination of Tribal TANF and Child Welfare Services

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Federated Indians of Graton Rancheria

Building Partnerships to Restore Self Reliant Indian Families

Project Director: Scott Boyle, TANF Director

Project Location: Rohnert Park, CA

Federated Indians of Graton Rancheria

Building Partnerships to Restore Self Reliant Indian Families

The Graton Rancheria community is a federation of Coast Miwok and Southern Pomo groups recognized as a tribe by the US Congress.

The Coast Miwok are from the areas of Novato, Marshall, Tomales, San Rafael, Petaluma and Bodega. The Southern Pomo people are from the Sebastopol area. Many of the Coast Miwok and Southern Pomo people still live within their ancestral territories.

The Southern Pomo were the first inhabitants of what is now the town of Sebastopol. The territorial lands of the Southern Pomo of Sebastopol is in Sonoma County south of the Russian River to the southern Santa Rosa area. Although the Southern Pomo were the original people of Sebastopol they were considered "landless", unlike the rest of the Southern Pomo northward that had reservations. Many of the Southern Pomo also lived in the town of Graton.

Federated Indians of Graton Rancheria

Building Partnerships to Restore Self Reliant Indian Families

Our Project: To address the needs of the at-risk tribal service population, the Tribe has developed a comprehensive strategy to achieve better outcomes for tribal children, youth and families in the child welfare system.

The strategy has three components:

- 1) Case Management with an improved Home Visiting component
- 2) Increasing services and supports for children and youth in out of home placements, along with their families and
- 3) An improved youth prevention program which includes an intensive case management approach with a focus on employment training, leadership skill development, and cultural enrichment.

Federated Indians of Graton Rancheria

Building Partnerships to Restore Self Reliant Indian Families

Goal 1: Improve the Tribal TANF of Sonoma & Marin (TTSM) Child Welfare Systems Program's with implementation of a cross-system collaboration, strengthening case management practices and using evidence based home visiting curriculum.

Principle Objective: During the 60 month project period FIGR will improve TTSM case management for 100 clients (per year) using a Child Welfare System of Care (SOC) approach, working collaboratively with Tribal Child Welfare Services staff, and integrating a wrap-around approach into case management.

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Building Partnerships to Restore Self Reliant Indian Families

Goal 2: Improve the TTSM Supportive Services component by increasing service delivery and supports to out-of-home placements (adoptions) and their families, such as access to childcare, subsidized employment and training to transitional youth, subsidized employment and training for adult caregivers.

Principle Objective: During the sixty month project period FIGR TTSM/Tribal Families will receive additional services and supports from FIGR TTSM that will improve individuals/families abilities to seek and maintain employment, and stabilize home environments.

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Building Partnerships to Restore Self Reliant Indian Families

Goal 3: Improve prevention services to tribal children, youth and families at risk of child abuse and neglect.

Principle Objective: During the sixty month project period FIGR TTSM will improve program services by 80% with the use of evidence and culturally based practices in the area of employment and leadership skill development and family/community wellness.

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Building Partnerships to Restore Self Reliant Indian Families

Theory of Change:

- Coordinated TANF and Child Welfare Services will enable tribal participants to achieve long-term stability and self-sufficiency.
- Trained Staff, TANF Participants and Community Members are willing to problem solve, help one another and continue strengthening the tribal community.
- Educated and Trained At-Risk Tribal Youth will transition from high school to college to career.

Logic Model

2. Inputs

TANF/FIGR Staff
Child Welfare Agencies
County Agencies
Community Members
Financial Resources
Materials
Supplies
Equipment
Technology

3. Activities

Cross System Collaboration
Training Staff, Participants and Community
Improved Case Management Practices
Evidence Based Approaches (wraparound, SOC, Strengthening Families, Trauma Informed Care)
Improved Services

4. Outputs

Sonoma County MOU
Staff Trainings conducted; Trauma Informed Care, Systems of Care, Wrap Around Services, Home Visiting, Decolonizing Social Work
Database upgraded and built
Service Team Meetings, and Wrap Around Team Meetings held
Family Nights, NAYAT, ASP, Summer Programs, Credit Recovery Programs provided
Subsidized Employment provided
ICWA Family Meetings/Verifications

5. Outcome

Ongoing system wide collaboration

- Referral Process
- Database upgrade
- Team Meetings

All TTSM/CWS students are prepared to enter college and the workforce

Increased cultural identification, connection for every student and family

- Positive Indian Parenting
- Native Wellness
- GONA
- Family Nights

Self Sufficient and strengthened Native Families

1. Assumptions

- Coordinated TANF and Child Welfare Services will enable tribal participants to achieve long-term stability and self-sufficiency
- Trained Staff, TANF Participants, Community Members are willing to problem solve, help one another and continue strengthening the tribal community
- Educated and Trained At-Risk Tribal Youth will transition from high school to college to career.

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Building Partnerships to Restore Self Reliant Indian Families

RESULTS:

Family Nights Average Attendance 326

After School Programs Average Attendance 53

Other (college tours, parenting, advocacy, wellness, etc.) Activities Average Monthly Attendance 33

ICWA Roundtable 1 per month

Youth WIP 14 Students

Service Team Meetings 3 per month

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Building Partnerships to Restore Self Reliant Indian Families

Challenges:

- County Collaboration and information sharing. We have an MOU with Sonoma County, but are still not seen as equal partners at the table.
- Marin County is mostly non-responsive to engagement in an MOU
- Lack of communication at the county level hinders our ability to truly engage in wrap-around services with our families.

Discussion

Share comments!

Pose questions!

Thoughts?

Reactions?

Surprises?





Tribal Child Welfare & TANF Collaboration

Amalia Monreal, LCSW

Tribal Child & Family Clinician / Program Supervisor



Our Service Area:





SOUTHEAST TRADITIONAL TRIBAL VALUES

“OUR WAY OF LIFE”

- ◆ Discipline and Obedience to the Traditions of our Ancestors
- ◆ Respect for Self, Elders and Others
- ◆ Respect for Nature and Property
- ◆ Patience
- ◆ Pride in Family, Clan and Traditions is found in Love, Loyalty and Generosity
- ◆ Be Strong in Mind, Body and Spirit
- ◆ Humor
- ◆ Hold Each Other Up
- ◆ Listen Well and with Respect
- ◆ Speak with Care
- ◆ We are Stewards of the Air, Land and Sea
- ◆ Reverence for Our Creator
- ◆ Live in Peace and Harmony
- ◆ Be Strong and Have Courage

Developed, Adapted, and Approved at the 2004 Elders Forum on Traditional Values

Sponsored by Central Council Tlingit and Haida Indian Tribes of Alaska, Circles of Care, SAMHSA Substance Abuse Planning Project, Elderly Nutrition Program, Johnson O'Malley Program and Alaska Rural Systemic Initiative, Alaska Association of School Boards, B.L.T.A.S. Program

Tribal Family & Youth Services (TFYS)

Services We Offer:

- Youth & Family Wellness
- **Preserving Native Families Program**
- Child Abuse Intervention
- **Indian Child Welfare Advocacy & Case management**
- Foster Care Services
- Clinical Therapies
- Education & Support Groups
- Elders Health & Wellness
- Domestic Violence Interventions
- Partnership with Tribal Court



Our Mission:

"To provide culturally sensitive services to promote economic self-sufficiency and the social well-being of Tribal citizens and Tribal communities."

TFYS Involvement in a Child Welfare Case



Preserving Native Families (PNF) Program



What is it?

Intensive in-home services to prevent and/or expedite State Office of Children's Services (OCS) involvement.

How does it work?

- Tribal Temporary Aid for Needy Families (TANF) (*Prevention Services*) or
- We receive referrals from OCS (*Intervention Services*)
- Our caseworkers begin in-home services and create a case plan with the family to address concerns regarding child safety

Temporary Assistance for Needy Families (TANF)



What is it?

A financial assistance program designed to assist families with dependent children to become self-sufficient.

How does it work?

- TANF provides financial assistance to families while emphasizing work participation, education, family stability and responsibility.
- Case workers monitor families as they move through their Tribal Service Plan toward their ultimate goal of self sufficiency.
- Eligible families have a 60 month lifetime limit.

Structured Decision Making[®]

Prevention Services Model

The screenshot displays the SDM (Structured Decision Making) software interface. At the top, there is a 'Main Menu' with options: My Caseload, Search, Reports, Change Password, and User Management. The user is identified as Krista Maynard (Krista). Below the menu is a 'New Assessment Menu' with three categories: Family Prevention Services Screening Assessment, Family Strengths & Needs Assessment / Reassessment, and Family Prevention Services Reassessment. The central part of the interface is a table titled 'My Assessments' with the following data:

Case ID	Case Name	Assessment Type	Date	Result
654879843513	testing, two	Family Prevention Services Reassessment	12/1/2013	High
6548786431	Johnson, Sweete	Family Prevention Services Reassessment	12/1/2013	Low
6498786146	Johnson, Sweete	Family Strengths & Needs Assessment / Reassessment	8/15/2013	Complete
28546513	testing, three	Family Prevention Services Screening Assessment	11/3/2013	Screen Out
068421324	testing, four	Family Prevention Services Screening Assessment	11/4/2013	Very High
315649873134	Smith, Frontier	Family Strengths & Needs Assessment / Reassessment	11/29/2013	Complete
654801316	Johnson, South	Family Strengths & Needs Assessment / Reassessment	6/6/2013	Complete
7438473847832482387492837	test, two	Family Prevention Services Screening Assessment	11/2/2013	Very High
09348209384029384	test, one	Family Prevention Services Screening Assessment	11/1/2013	Low

At the bottom of the table are buttons for 'View', 'Edit', and 'Delete'. The NCCD logo is visible in the bottom right corner of the interface.

Why Prevention Services for TANF Families?

- TANF applicants are at high risk for likelihood of future involvement with child protection
- Providing additional supports and services can strengthen families before problems become severe
- Prevention services are limited and need to be targeted to families at greatest risk



SDM Prevention Services Assessments

- Use research to inform assessment process
- Provide workers with reliable, valid, equitable and useful assessment tools
- Provide managers with data to improve planning, evaluation and resource allocation





SDM Assessments

Initial Screening Assessment

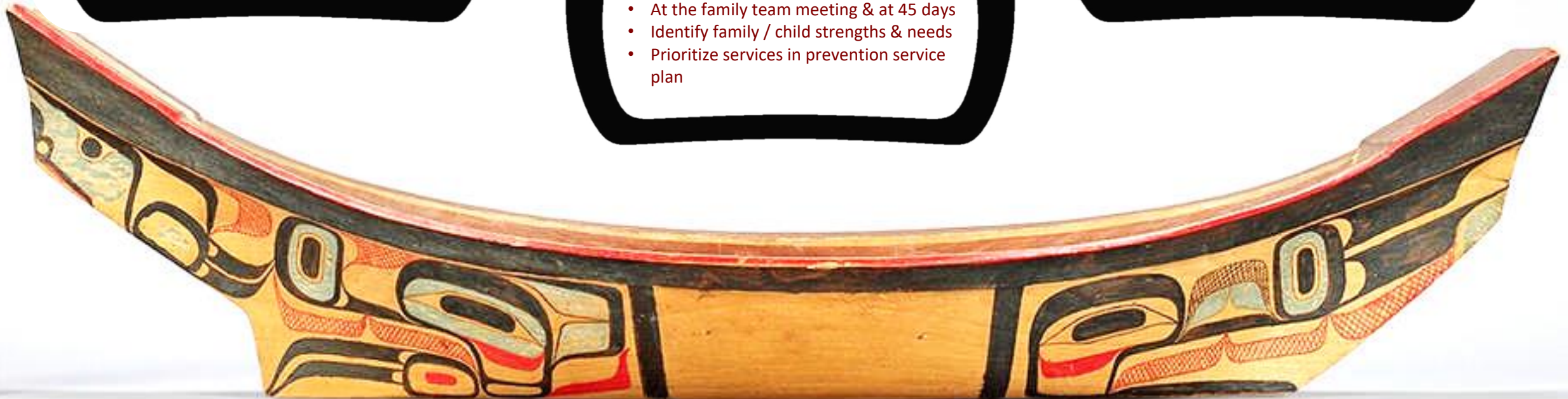
- At initial in-person contact with TANF worker
- Assesses likelihood of future involvement with child protection
- Open prevention services case

Family / Child Strengths & Needs Assessment

- At the family team meeting & at 45 days
- Identify family / child strengths & needs
- Prioritize services in prevention service plan

Family Prevention Services Reassessment

- Conducted every 90 days
- Assesses likelihood of future involvement with child protection
- Continue with services or close the prevention services component





Initial Screening Assessment

“Family Prevention Services Screening Assessment (FPSSA)”

Components of the Assessment:

- Child neglect risk factors
- Child abuse risk factors
- Overall scored risk level

Helps Caseworkers to Assess:

- Assess likelihood of future involvement with child protection?
- Should Prevention Services be provided?
- What intensity of services is required?

Sample of FPSSA – Neglect Section:

NEGLECT

		SCORE
<input type="checkbox"/>	N1. Prior OCS Initial Assessments or Other Child Protective Services Investigations (assign the highest score that applies)	
<input type="radio"/>	a. None	-1
<input type="radio"/>	b. One or more, ABUSE only	1
<input type="radio"/>	c. One or two for NEGLECT	2
<input type="radio"/>	d. Three or more for NEGLECT	3
<input type="checkbox"/>	N2. Household Has Had a Prior Open Child Protective Services Case	
<input type="radio"/>	a. No	0
<input type="radio"/>	b. Yes	3
<input type="checkbox"/>	N3. Number of Children in the Home	
	Number: <input type="text"/>	
<input type="radio"/>	a. One, two, or three	0
<input type="radio"/>	b. Four or more	2
<input type="checkbox"/>	N4. Age of Youngest Child in the Home	
	Age of child: <input type="text"/> (years)	
<input type="radio"/>	a. Two or older	0
<input type="radio"/>	b. Under two	1
<input type="checkbox"/>	N5. Primary Caregiver Provides Physical Care of the Child That Is	
<input type="radio"/>	a. Consistent with child needs	0
<input type="radio"/>	b. Not consistent with child needs	1
<input type="checkbox"/>	N6. Primary Caregiver Has a History of Abuse or Neglect as a Child	
<input type="radio"/>	a. No	0
<input type="radio"/>	b. Yes	2
<input type="checkbox"/>	N7. Primary Caregiver Characteristics (mark all that apply and add for score)	
<input type="checkbox"/>	a. Not applicable	0
<input type="checkbox"/>	b. Mental health problem	1
	<input type="checkbox"/> Past <input type="checkbox"/> Current	
<input type="checkbox"/>	c. Drug or alcohol problem	2
	<input type="checkbox"/> Past <input type="checkbox"/> Current	
<input type="checkbox"/>	N8. Primary Caregiver Has a Criminal History	
<input type="radio"/>	a. No	0
<input type="radio"/>	b. Yes	1
	Convicted? <input type="radio"/> Yes <input type="radio"/> No	

FPSSA - Abuse Section:

ABUSE

	SCORE
<p>7 A1. Number of Prior OCS Initial Assessments or Other Child Protective Services ABUSE Investigations (physical, emotional, or sexual abuse/sexual exploitation)</p> <p>Number: <input type="text"/></p> <p><input type="radio"/> a. None 0</p> <p><input type="radio"/> b. One 1</p> <p><input type="radio"/> c. Two or more 2</p>	
<p>7 A2. Household Has Had a Prior Open Child Protective Services Case</p> <p><input type="radio"/> a. No 0</p> <p><input type="radio"/> b. Yes 2</p>	
<p>7 A3. Prior Substantiated Physical Abuse</p> <p><input type="radio"/> a. No 0</p> <p><input type="radio"/> b. Yes 2</p>	
<p>7 A4. Two or More Incidents of Domestic Violence in the Household in the Past Year</p> <p><input type="radio"/> a. No 0</p> <p><input type="radio"/> b. Yes 1</p>	
<p>7 A5. Primary Caregiver Characteristics</p> <p><input type="radio"/> a. Not applicable 0</p> <p><input type="radio"/> b. One or more present (mark all that apply) 1</p> <p style="margin-left: 20px;"><input type="checkbox"/> Provides insufficient emotional/psychological support</p> <p style="margin-left: 20px;"><input type="checkbox"/> Employs excessive/inappropriate discipline</p> <p style="margin-left: 20px;"><input type="checkbox"/> Domineering caregiver</p>	
<p>7 A6. Primary Caregiver Has a History of Abuse or Neglect as a Child</p> <p><input type="radio"/> a. No 0</p> <p><input type="radio"/> b. Yes 1</p>	
<p>7 A7. Either Primary or Secondary Caregiver Has Past or Current Alcohol/Drug Problem (score 1 if any present)</p> <p><input type="radio"/> a. No 0</p> <p><input type="radio"/> b. Yes, alcohol and/or drug (mark all that apply) 1</p> <p style="margin-left: 20px;"><input type="checkbox"/> Primary current problem</p> <p style="margin-left: 20px;"><input type="checkbox"/> Primary past problem</p> <p style="margin-left: 20px;"><input type="checkbox"/> Secondary current problem</p> <p style="margin-left: 20px;"><input type="checkbox"/> Secondary past problem</p>	



SDM Assessments

Initial Screening Assessment

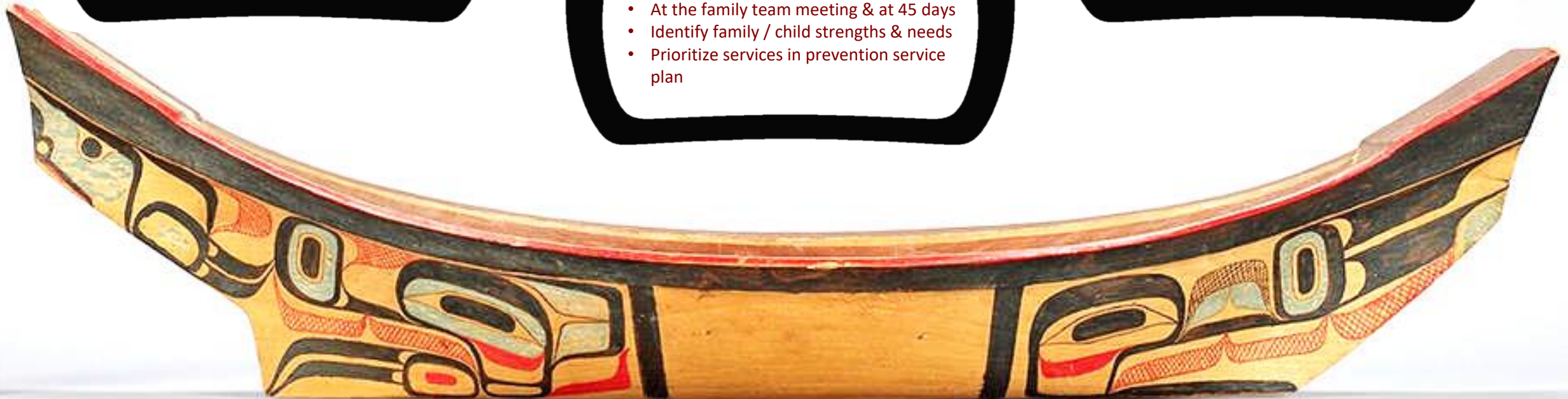
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Family / Child Strengths & Needs Assessment

- At the family team meeting & at 45 days
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Family Prevention Services Reassessment

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Family Strengths & Needs Assessment (FSNA)

Components of the Assessment:

- Caregiver Domains
- Child Domain
- Prioritization of Needs and Strengths

Helps Caseworkers to Assess:

- What are the priority needs that should be addressed in family service plan?
- What existing strengths can be used to address identified needs?

Sample of FSNA

ASSESSMENT OF STRENGTHS AND NEEDS

		Primary Caregiver	Secondary Caregiver
7 SN1. Substance Abuse/Sobriety (Substances: alcohol, illegal drugs, inhalants, prescription/over-the-counter drugs)			
a. Teaches and demonstrates a healthy understanding of alcohol and drugs	+3	<input type="radio"/>	<input type="radio"/>
b. Alcohol or prescribed drug use/no use	0	<input type="radio"/>	<input type="radio"/>
c. Alcohol or drug misuse/abuse	-3	<input type="radio"/>	<input type="radio"/>
7 SN2. Household Relationships/Domestic Violence			
a. Supportive	+3	<input type="radio"/>	<input type="radio"/>
b. Minor or occasional household conflict	0	<input type="radio"/>	<input type="radio"/>
c. Household conflict or domestic violence	-3	<input type="radio"/>	<input type="radio"/>
7 SN3. Social Support System			
a. Strong support system	+2	<input type="radio"/>	<input type="radio"/>
b. Adequate support system	0	<input type="radio"/>	<input type="radio"/>
c. Limited or no support system	-2	<input type="radio"/>	<input type="radio"/>
7 SN4. Parenting Skills and Support			
a. Strong skills	+2	<input type="radio"/>	<input type="radio"/>
b. Adequately parents and protects child	0	<input type="radio"/>	<input type="radio"/>
c. Insufficient parenting skills/knowledge	-2	<input type="radio"/>	<input type="radio"/>
7 SN5. Mental Health/Coping Skills			
a. Strong coping skills	+2	<input type="radio"/>	<input type="radio"/>
b. Adequate coping skills	0	<input type="radio"/>	<input type="radio"/>
c. Mental health concerns/lack of coping skills	-2	<input type="radio"/>	<input type="radio"/>
7 SN6. Basic Needs and Life Skills			
a. Strong life skills and ability to meet basic needs	+1	<input type="radio"/>	<input type="radio"/>
b. Adequate life skills and ability to meet basic needs	0	<input type="radio"/>	<input type="radio"/>
c. Insufficient life skills and inability to meet basic needs	-1	<input type="radio"/>	<input type="radio"/>
7 SN7. Cultural Identity			
a. Cultural component is supportive and no conflict present	+1	<input type="radio"/>	<input type="radio"/>
b. No cultural component that supports or causes conflict	0	<input type="radio"/>	<input type="radio"/>
c. Cultural component that causes conflict	-1	<input type="radio"/>	<input type="radio"/>

Example of Identified Strengths & Needs

PRIORITY NEEDS AND STRENGTHS

Caregiver Priority Needs		Caregiver Priority Strengths	
<input type="checkbox"/> Substance Abuse/Use	-3 P	<input type="checkbox"/> Cultural Identity	1 P
<input type="checkbox"/> Household Relationships/Domestic Violence	-3 P	<input type="checkbox"/> Physical Health	1 P
<input type="checkbox"/> Mental Health/Coping Skills	-2 P	<input type="checkbox"/> Social Support System	0 P
		<input type="checkbox"/> Parenting Skills	0 P
		<input type="checkbox"/> Resource Management/Basic Needs	0 P
		<input type="checkbox"/> Family Identified	0 F

CASE ACTION

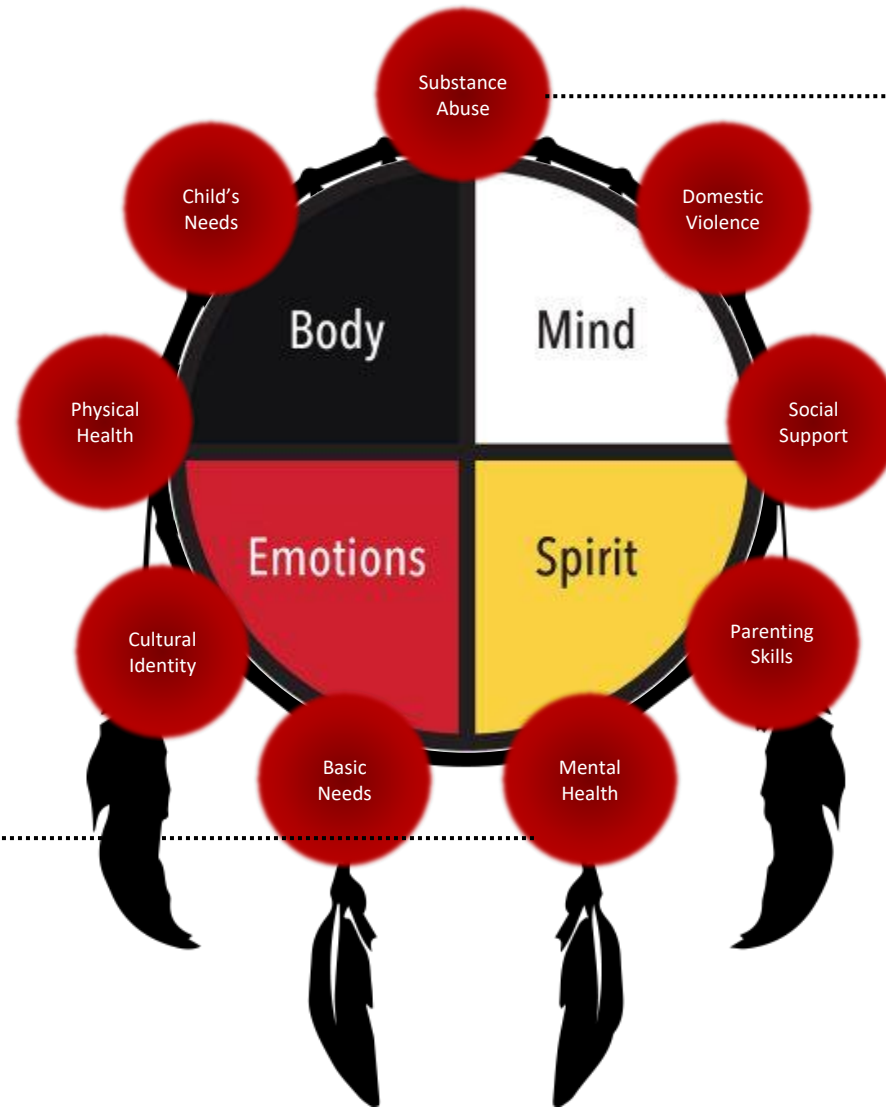
- Yes No Was a team meeting held?
- Yes No Did the client participate in the team meeting?
- Yes No Did the client agree to participate in the prevention services plan?

NOTES

Staff Person Notes:



In-Home Services Model



- Counseling Services
- TFYS Groups
- Medical Doctor
- NAMI
- Trauma Focused Inventory

- Local AA Meetings
- Tribal Wellbriety
- Treatment
- Counselors
- Integrated Assessments

PNF Family Case Plan



Haa Kusteeyix Sitee
Preserving Native Families
Family Case Plan

Primary Caregiver Name:	DOB:
Secondary Caregiver Name:	DOB:
Address:	Phone Number:

Name of Child	Sex	DOB	Tribe

Name of PNF worker:	
Name of TANF worker:	
Date of FSNA:	
Date of 45 day review:	
Date of 90 day review:	

Areas of Strength	Areas of Need
<i>Additions at 45 day review:</i>	<i>Additions at 45 day review:</i>

Day 1 - 45	Area of Need:	
Goal:		
Objectives:		
Start Date:	Expected End Date:	Frequency:
Day 45 - 90	Area of Need:	
Goal:		
Objectives:		
Start Date:	Expected End Date:	Frequency:



SDM Assessments

Initial Screening Assessment

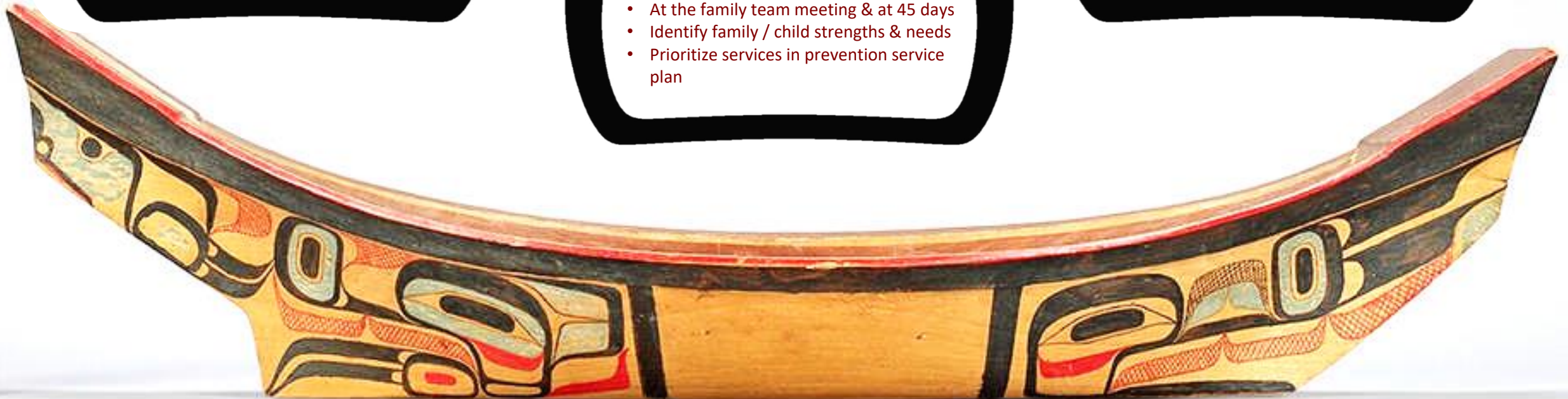
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Family Prevention Services Reassessment

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- Continue with services or close the prevention services component



Family Prevention Services Reassessment

Components of the Assessment:

- **Static Risk Factors**
- **Current Conditions**
- **Progress Toward Case Plan**

Helps Caseworkers to Assess:

- **Assess likelihood of future involvement with child protection?**
- **Should prevention services be closed or extended?**
- **If extended, what intensity of service is required?**

Sample of Reassessment

THE ITEMS BELOW (R5-R9) PERTAIN TO THE PERIOD SINCE THE LAST ASSESSMENT/REASSESSMENT.

7 R5. An OCS Initial Assessment or Other Child Protective Services Investigation Since the Initial Screening or Last Reassessment	
<input type="radio"/> a. No	0
<input type="radio"/> b. Yes	2
7 R6. Caregiver(s) Has Addressed an Alcohol or Drug Abuse Problem Since Initial Screening or Last Reassessment	
<input type="radio"/> a. No history of alcohol or drug abuse problem	0
<input type="radio"/> b. No current alcohol or drug abuse problem; no intervention needed	0
<input type="radio"/> c. Yes, alcohol or drug abuse problem; problem is being addressed	0
<input type="radio"/> d. Yes, alcohol or drug abuse problem; problem is NOT being addressed	1
7 R7. Problems With Adult Relationships	
<input type="radio"/> a. None applicable	0
<input type="radio"/> b. Yes, harmful/tumultuous relationships with adults	1
<input type="radio"/> c. Yes, domestic violence	2
7 R8. Primary Caregiver Provides Physical Care of the Child That Is:	
<input type="radio"/> a. Consistent with child needs	0
<input type="radio"/> b. Not consistent with child needs	1
7 R9. Caregiver Progress With Prevention Services	
<input type="radio"/> a. Not applicable; all services unavailable	0
<input type="radio"/> b. Caregiver successfully completed all prevention services recommended or is actively participating in prevention services	0
<input type="radio"/> c. Caregiver has demonstrated minimal progress in meeting objectives of the prevention services	2
<input type="radio"/> d. Caregiver has participated but is not making progress, refuses involvement in services, or failed to comply/participate in prevention services	4
TOTAL RISK SCORE	

SCORING AND OVERRIDES

SCORED RISK LEVEL

7 Risk Level:

DISCRETIONARY OVERRIDE

Apply discretionary override? Yes No

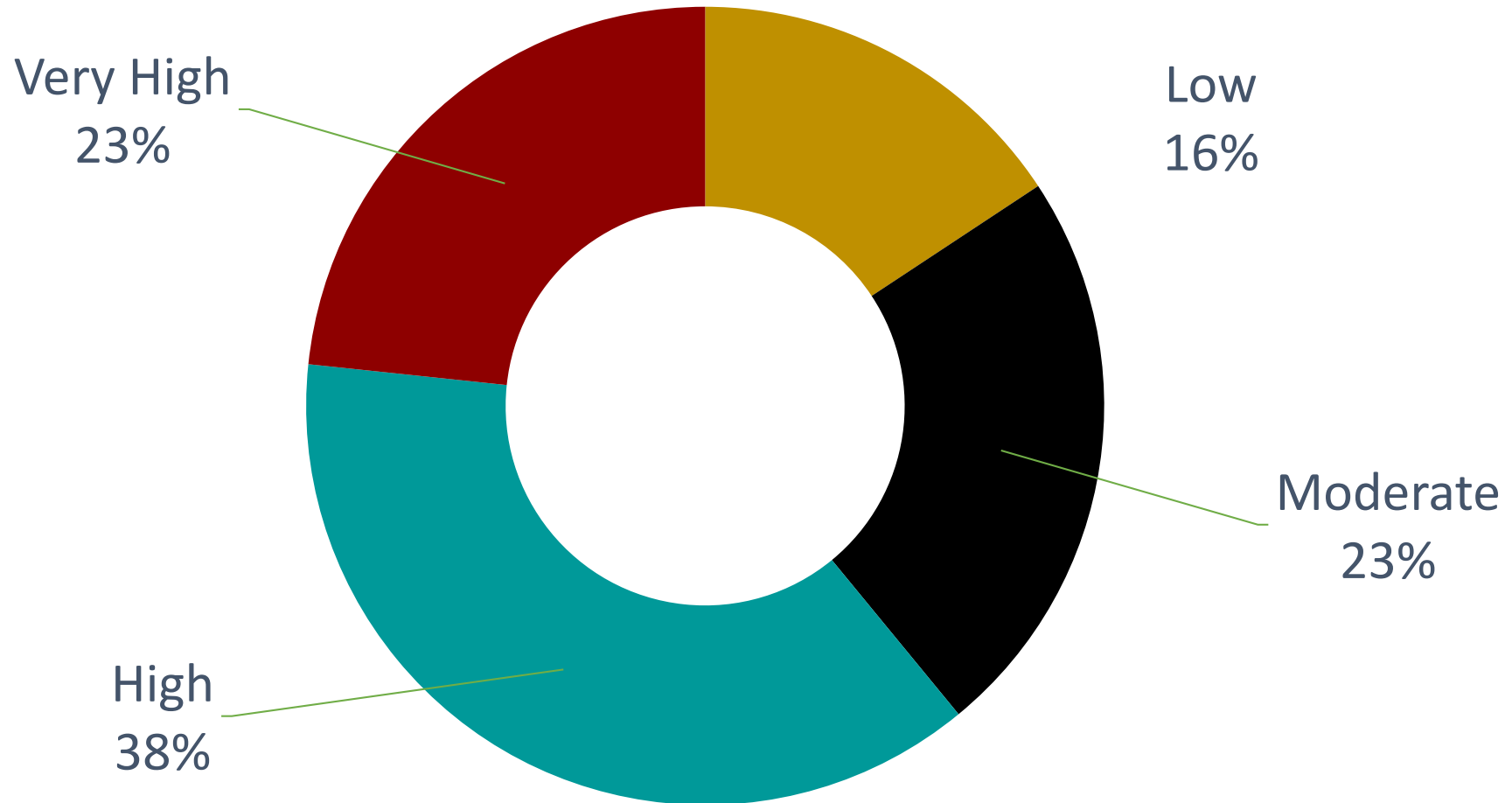
Select Override Level: Low Moderate High Very High

SDM[®] Prevention Services Model Summary

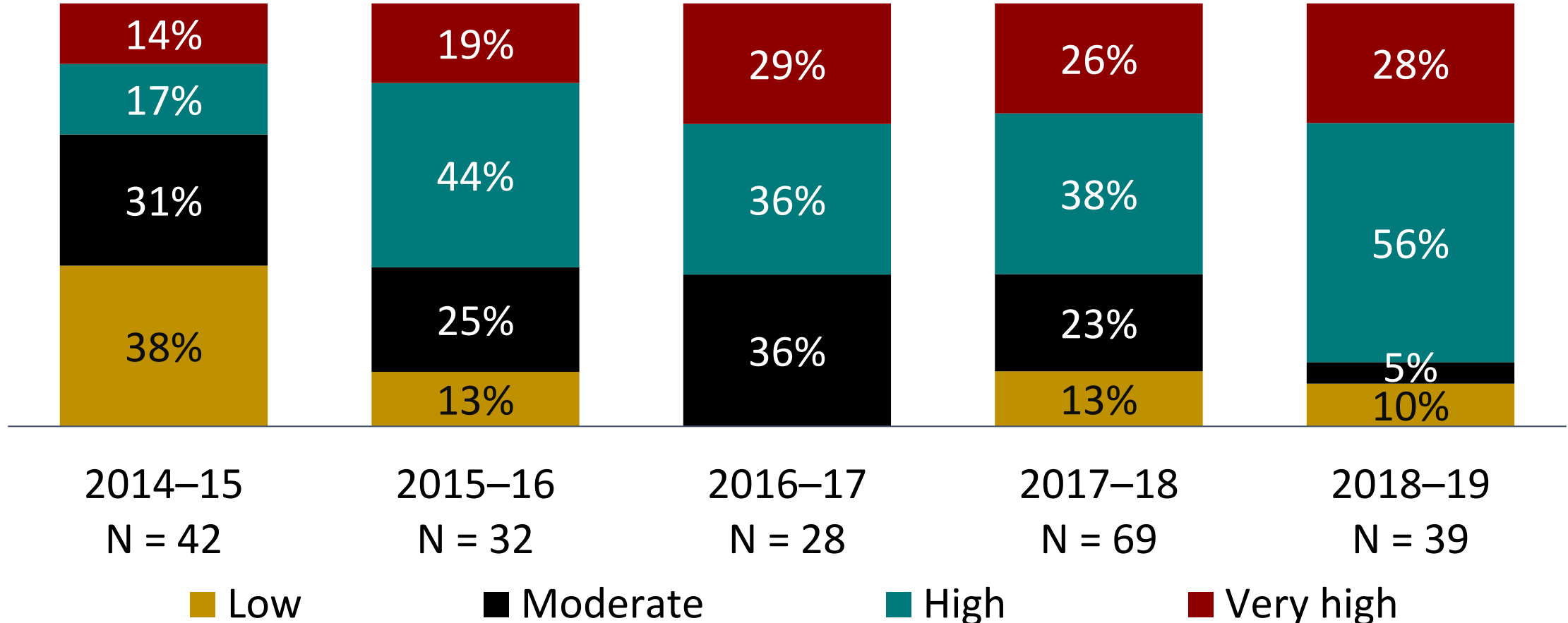
- Screen families who are applying for TANF services
- Offer prevention services to those who will benefit (“High” or “Very High” risk families)
- Assess strengths and needs of families to identify appropriate services
- Develop a prevention services case plan with the family to address priority needs



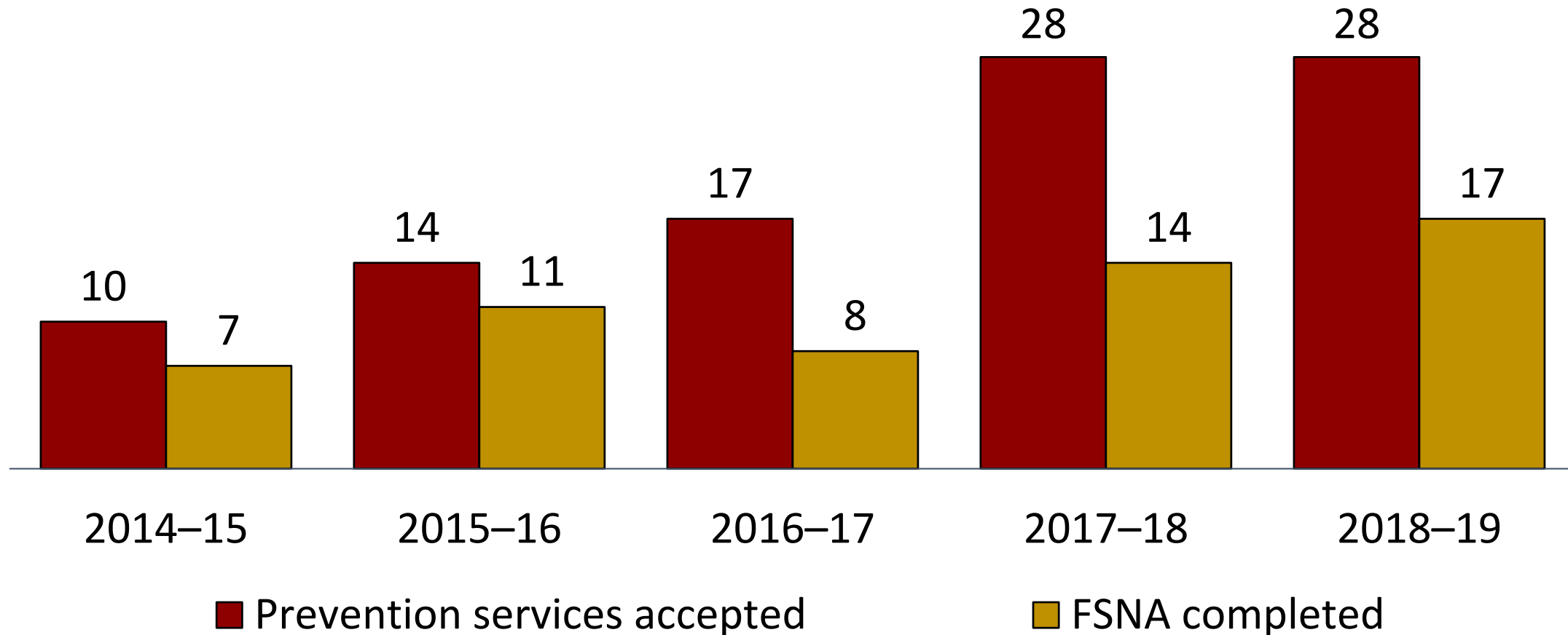
SDM[®] Family Prevention Services Screening Assessment: Scored Risk Level



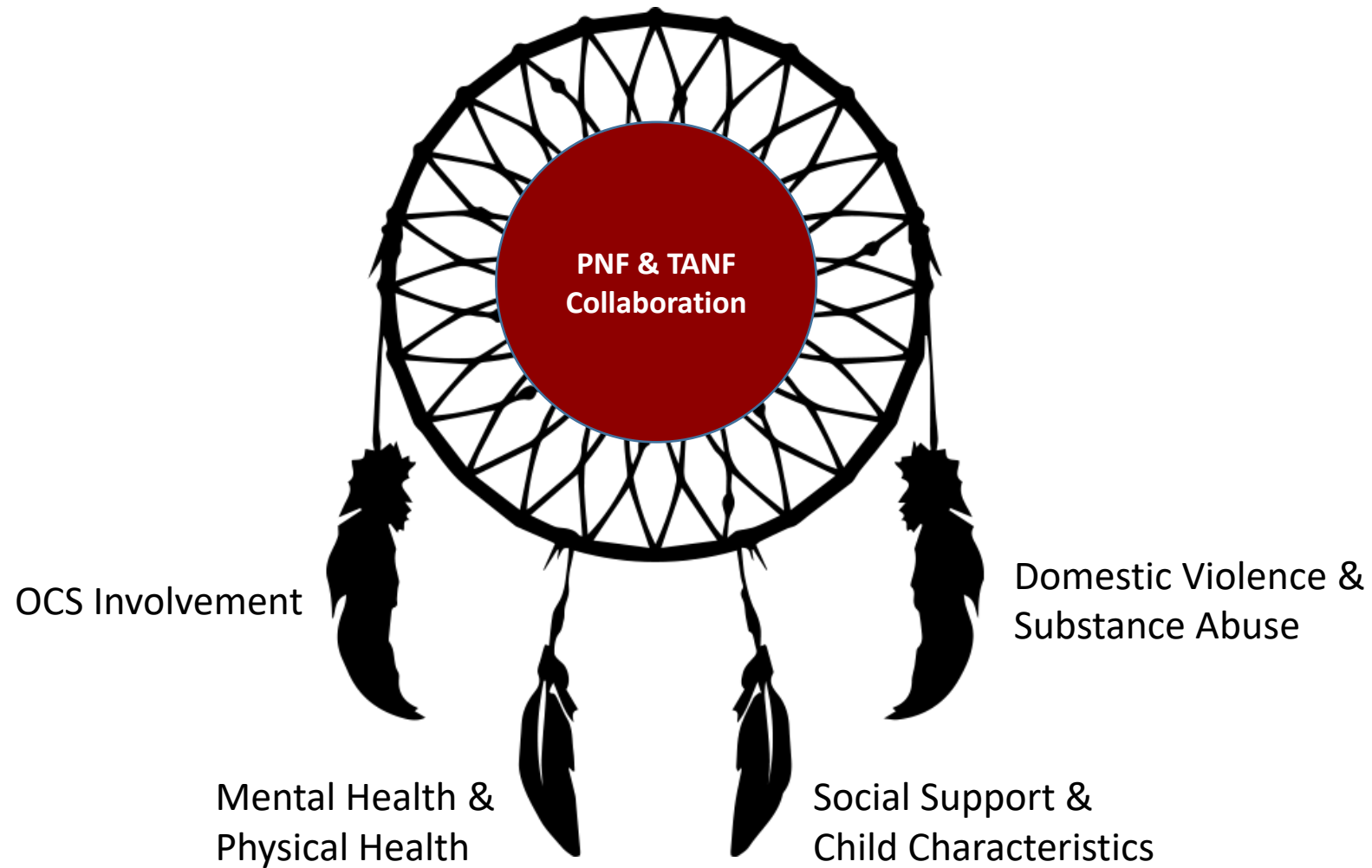
SDM[®] Family Prevention Services Screening: Scored Risk Level



Families Accepting Prevention Services and Associated FSNA Completion by Year



Client Success Stories





Discussion

Share comments!

Pose questions!

Thoughts?

Reactions?

Surprises?

For More Information:

PNF

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Tribal Child & Family Clinician
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TANF

Adam Arca
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SDM

Kate Beier
NCCD – Children’s Research Center
kbeier@nccdglobal.org

Tribal TANF-Child Welfare Coordination Data Capacity Building



Kirsten Keene
James Bell Associates, Inc.



collaboration
is **everything**

TTCW Data Capacity Building

- In 2016 ACF awarded a contract to James Bell Associates (JBA) to provide data capacity building support to the 2015 cohort of TTCW grantees
- What JBA does –
Grantees: individual and universal guidance (webinars, peer calls), grantee meeting workshops; site visits to selected grantee communities; PPR guidance; products/resources related to data collection and program evaluation.

JBA team's role with the grantees:

SUPPORT GRANTEES' DATA CAPACITY by

Universal guidance

Webinars

Peer learning calls

Workshops

PPR support

Products/resources

Etc.

TTCW grants

- Tribal TANF
- Child Welfare
- Cross-agency coordination
- Coordination can increase effectiveness and efficiency of both systems
- An underlying premise of the emphasis on cross-agency service coordination is that the needs of families, rather than funding streams or organizational structures, should drive the provision of services



TTCW grantees

- Demonstration grants to American Indian and Alaska Native tribes and tribal organizations that administer Tribal TANF programs

10 grants awarded in 2006 (2006 to 2011)

14 grants awarded in 2011 (2011 to 2015)

8 grants awarded in 2015 (2015 to 2020)



All grantees engage in activities to enhance collaboration and coordination

- Increased cross-agency communication
- Information sharing
- Shared organizational resources
- Joint trainings for Tribal TANF and child welfare staff
- Development of shared data systems
- Coordinated or joint service delivery for clients (e.g., joint case planning and management, wraparound, parenting classes, etc.).



TTCW Grantees' Successes



Improved child and family well-being: educational achievement, college acceptance, mental health services, parent and child interactions



Improvements in Child Safety and Permanency: family has stable housing, parental employment, substance use treatment, maintained sobriety, placement with kin, reunification.



Improvements in Tribal TANF-CW coordination: staff better understand TT and CW systems from cross-trainings, communication has improved, successful use of wraparound and multi-disciplinary teams.

Performance Measurement

- All TTCW grantees have a relevant theory of change and logic model
- Regular participation in data capacity building events
- Grantees continue to progress on their program activities in alignment with their goals, theories of change, and logic models



Discussion

Share comments!

Pose questions!

Thoughts?

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Learn more about the Tribal TANF- Child Welfare Coordination projects

Current Tribal TANF-Child Welfare Coordination grants:

<https://www.acf.hhs.gov/ofa/programs/tribal/cwcg>

Coordination of Tribal TANF and Child Welfare Services: Early Implementation (2014): <https://www.acf.hhs.gov/opre/resource/coordination-of-tribal-tanf-and-child-welfare-services-early>

Study of Coordination of Tribal TANF and Child Welfare Services: Interim Report (2015): <https://www.acf.hhs.gov/opre/resource/study-of-coordination-of-tribal-tanf-and-child-welfare-interim-findings-report>

Study of Coordination of Tribal TANF and Child Welfare Services: Final Report (2016): <https://www.acf.hhs.gov/opre/resource/study-of-coordination-of-tribal-tanf-and-child-welfare-services-final-report>



Thank you!



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