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BUILDING AN UNSYSTEM:
A Child Welfare Leader's Guide
to Transformation

Alia UnSystem Innovation Cohort
**YEAR ONE**

January 2020

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A. Preface of gratitude

Always first and foremost: *Thank you.*

The toughest work of the Alia UnSystem Innovation Cohort falls on the five pairs of **agency leaders and their teams.** Maintaining the persistence it requires to repeatedly communicate a vision, deeply listen to others, challenge fixed mindsets, dust off assumptions, and do so with both strength and humility – all while maintaining ongoing operations! – is what **Linda, Beth, Chuck, Shannon, Janée, Lori, Mike, Tiffany, Diane,** and **Tom** do week in and week out. It is humbling and exciting.

The lived experience and professional guides (often these perspectives overlap), bring a groundedness to this process that keeps us from hovering around in theory and delves us into what *would actually work for kids and families.* Thank you.

Dr. Laurel Bidwell has helped us identify, plan, and record the change process in a way we wouldn't have been able to without her. Thank you for your travel, research expertise, and deep commitment to nurturing a messy process until the gems emerge. Thank you for loving and living in the gray!
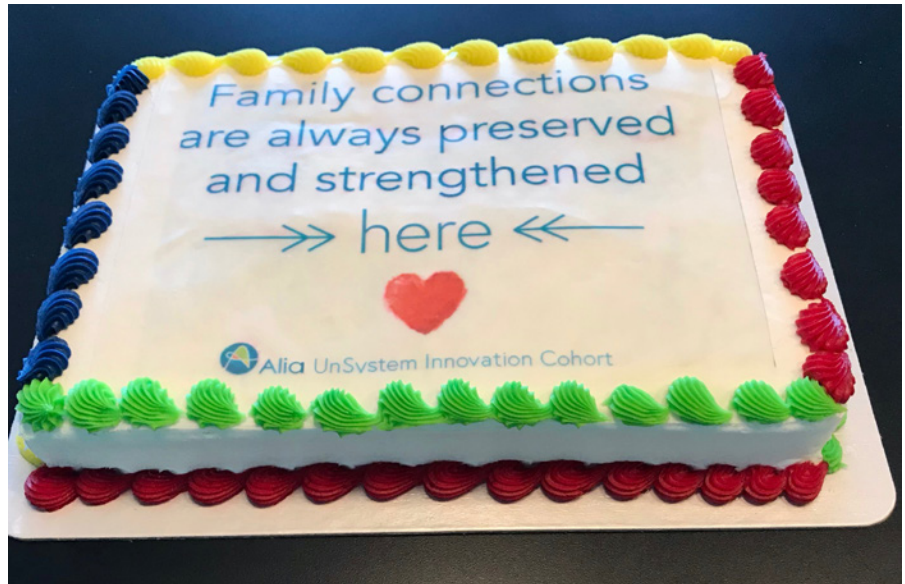
The Sauer Family Foundation of Minnesota have been long-time friends of the organization and long-time supporters of working *smart* on behalf of vulnerable kids and families in Minnesota. They have supported this publication and its dissemination to every county human services leader in the state and are serious about learning and sharing among the child welfare community. Thank you.

The Carlson Foundation and Wendy Nelson were early supporters of Alia's work and are committed to systems change with their ongoing support. Building capacity is a big challenge, as not everyone understands what it takes to transform a system. Thank you for believing in Alia and providing your encouragement and resources every step of the way.

The Margaret A. Cargill Philanthropies (MAC-P) have committed to the Cohort with support for convening costs, flexible funding for agencies to test in UnSystem-like ways. Our program officer from MAC-P visited and said things like, "I'm here to learn, not to monitor," and "Whatever it takes to support families and children, go for it." Where others said no, they said yes, and we are so grateful for their partnership.

Throughout 2019 we had several special guests join for in-person Cohort meetings. In March 2019, **Dr. Jerry Milner,** Acting Commissioner of the Administration for Children and Families of the U.S. government, and **finance professionals from each Cohort agency** attended, and in September 2019, **mid-level managers** joined the in-person meeting. For shifting from secondary to primary prevention and moving toward UnSystem values to occur, there must be alignment top-down and inside out. Finance partners, child welfare at the federal level, every mid-level manager and front-line worker: it takes a special alignment of vision and grit to make the change. **Thank you.**

Leaders in child welfare: This case study is for YOU.

Here you will read a summary of the Alia UnSystem Innovation Cohort initiative that kicked off in March 2018. The Cohort is a group of leaders from five child welfare agencies across the country, plus volunteer professional and lived experience guides, facilitated by Team Alia. We meet in person together in Minnesota at the Alia office nearly every month for two half-days to learn, strategize, keep each other accountable to action, and to build our stamina for systems change.

It is our shared value and goal that *family connections are always preserved and strengthened.* This means we emphasize, prioritize, and resource keeping children with their own families. To do this we shift focus, expand what it means to be "family," recognize the trauma of removal, and put psychological safety on par with physical safety.

Our goal is to demonstrate that a child welfare system can indeed transition from a secondary prevention to primary prevention approach, and how. We believe it's possible and this process is our work to realize it, with five variations in developing in five different locations simultaneously.

Since 2018, we have lovingly built relationships with each other, with our agency staff members, and others in our communities who care about and influence the wellbeing of children and families to create change. Now, we lovingly invite you to share in this process by offering you the story about what we've done so far, what we've learned, and what we've accomplished together.

If you want to know more about what you've read here, or be involved in Cohort work, or are doing similar work in your area, let's talk. We love exploring potential for more, faster, and better ways of moving the child welfare system toward keeping kids safely *with* and not *from* their families.

YEAR ONE COHORT AT A GLANCE
Alia UnSystem Innovation Cohort
March 2018 – October 2019

Waupaca County WI
Population: 52,000

Chuck Price Director
Shannon Kelly Deputy Director
Corey Best Prof. Guide | FL

Cass County ND
Population: 178,000

Linda Dorff Division Manager
Beth Desotel Supervisor
Marge Gildner Prof. Guide | GA
Shen Chefalo LE Guide | MI

Washington County MD
Population: 150,000

Mike Piercy Director
Tiffany Rexrode Assistant Director
Cody Rivera LE Guide | NY
Jessica Pryce Prof. Guide | FL

Eastern IA Service Area
Population: 500,000

Janee Harvey Bureau Chief
Lori Frick Area Manager
Mandy Brown LE Guide | IA

Eau Claire County WI
Population: 104,000

Diane Cable Director
Tom Wirth Deputy Director
Rob Scheer LE Guide | MD
Tracy Malone Prof. Guide | MS

Special thanks to our former Cohort guides: Margo Kemp Johnson, Franco Vega, Ashley McCullough, Lien Bragg, China Darrington & Brian Clapier.

LE Guide *= Lived Experience Guide*   **Prof. Guide** *= Professional Child Welfare Guide*
★ *= Guide locations*

Top Five Key Insights for Systems Change
» Prepare and take care of yourself and your team
» Think differently about the work
» Make the old way harder
» Take a bet on families
» Expand the group of helpers

Cohort Outcomes
» 12% total decrease of youth in foster care
» 37% decrease of youth in residential care

CASS COUNTY
The number of youth in stranger foster care decreased by 43% in the past year.

EAU CLAIRE COUNTY
The number of youth in residential care dropped 40%.

EASTERN IOWA SERVICE AREA
Child Safety Conferences avoid removal for 94% of the youth involved.

WAUPACA COUNTY
3 full-time prevention social workers were hired through decreasing deep-end services, focusing on permanency, and shifting funds toward up-front work.

WASHINGTON COUNTY
Compared to FY18, in FY19 the number of children removed dropped 61% - from 96 to 37.

B. Summary: What did we accomplish and how?

At Alia we are often asked this about the Cohort: What are you *doing***? Is it working? How?**

Here we will answer these questions by providing specific examples (by theme) of what we've done and the results we're seeing, both quantitative and qualitative. (*In March 2019 an **early release case study** was published with more detailed descriptions of the Cohort members and the Cohort communities. Check that out for more context.*)

To achieve our shared aspiration where, "Family connections are always preserved and strengthened," we activate change by adjusting these 8 levers within our Change Framework (Appendix 1): communication, role shifts, events, incentives, schedule change, finance, processes, rituals, and space. All five of the Cohort agency leaders say that change happened (and continues to happen) through a variety of interventions, yet the most potent changes occur when these interventions create a *mindset shift*.

The persistence over time in focused communication is a technique used often by every Cohort agency to advance the shift. You will see "training" mentioned often; this is what we mean by giving staff consistent opportunities to engage with a vision of a new way of work. Cohort leaders introduced ideas and changes in language in ongoing meetings, all-staff trainings, and community cafés. They encouraged and challenged their staff to see families differently, see themselves differently, and see the role of the system differently.

While we see the Cohort as five simultaneous experiments toward building UnSystems, there are insights and phases we have seen across all five jurisdictions. If mindset shift lays a foundation for the change and the eight levers are where we implement change, what we've learned about the process of change since March 2018 falls roughly into these five categories:

1. *Prepare and take care of yourself and your team*
2. *Think differently about the work*
3. *Take a bet on families*
4. *Make the old way harder*
5. *Expand the group of helpers*

Through our efforts we have seen movement in the right direction with promising outcomes. Across the Cohort we saw a 12% decrease of total youth in foster care and a 37% decrease of youth in residential care. Specific metrics by agency are also remarkable. For example, Child Safety Conferences in the Eastern Iowa Service Area have been so successful in keeping youth involved at home or with loved ones (94% of those involved), that Iowa is rolling the service out statewide. (see page 15) Washington County's child removal rates dropped 61%, Eau Claire County residential treatment placements dropped 67% (from 24 to 9), and the total number of youth in care in Cass County care dropped 45%. Waupaca County has strategically and generously invested in the small number of families and youth in their care and have seen a return on investment great enough to create three new positions: *prevention social workers.*

We've met obstacles and struggled to gain traction in areas like race equity, authentically engaging parents and youth, and the lack of community resources. These and other challenges are part of Cohort 2020 plans and beyond. We're in this together for the long haul.

C. Introducing Alia and the UnSystem Innovation Cohort

About Alia

Alia is a national nonprofit with roots in direct practice child welfare innovation, located in Minnesota. Alongside convening the Cohort, we publish materials, offer training and coaching, and facilitate systems change projects addressing trauma, leadership fortitude, permanency, and workforce wellbeing. Every convening effort, material produced, and project executed are all in support of one goal: to develop a proof of concept, demonstrating that a child welfare system built for primary prevention is just, necessary, and possible.

Proof of concept

Our mission to build a proof of concept is two-fold: one, we aim to prove that *it is possible* for public child welfare to be an agency of primary prevention, and two, we aim to demonstrate *how to make that shift.* We believe child welfare agencies can function primarily to prevent child abuse and neglect rather than intervening once child abuse and neglect has occurred. Through practice, we are learning *what steps it will take* to get there.

Alia is gathering evidence to demonstrate what many already see and experience: children being taken from what is known and placed into the unknown *is not working*. It is a poor financial investment, as shown in the **social return on investment (SROI) study Alia commissioned by Ecotone Analytics.** It also results in marginal to negative social outcomes as shown in the current academic research – outlined here in a **research brief also commissioned by Alia.**

Through our work with this group of deeply caring and tenacious people, we have learned about the process of going from business-as-usual in child welfare (classic case management, investigation, removals, court hearing, paperwork, etc.), to a new way (harnessing resources to support families, asking new questions, slamming the brakes on removals, creative placement, etc.).

It is Alia's goal – with humility and a pioneering spirit – to support leaders with everything we have and all that we can leverage, in order to prove that in a vast majority of situations, children can stay safely with their loved ones. We are building our systems around this evidence-informed belief and also believe it is a more sustainable model of business. It is our charge and deep responsibility to ensure to the extent humanly and system-ly possible that every child is safe in their home and safe in their heart.

Alia's role in Systems Change

There are many roles to play, and Alia is here not only to shine a light on what isn't working, but to connect and equip pioneers to help build the new way. We know more about attachment, trauma, development, and are clearer on the role that racism plays and has played in building our current system. Because we know this, we can take an active role on ushering it out by building something new. We have a lead-off in the relay, ready to take the baton from those who have run legs of this race before us, and move forward with connecting, fortifying, learning, and sharing so that we can build a thoughtful and wholehearted approach to families. The current way of practice in child welfare is becoming the old way. Alia is helping to build something new by convening the Alia UnSystem Innovation Cohort, sharing what we learn together, and charting the course for a new way.

Evolution of a System

Current Child Welfare System

Beginning Assumptions

Birth of a System

System Protects Status Quo

Innovators

Pioneers

Trailblazers

INNOVATION COHORT

System in Hospice

Death of a System

Connect Network of Innovators

Transition to New System

Birth of a New Way

Nourish

Community of New Practice

Resource Community

An Unsystem

*Adapted from M. Wheatley & Berkana Institute

The graphic above illustrates a theory of system evolution as described by Dr. Margaret Wheatley: a system is created, upheld by its members, expires, and a new system is formed by innovators and pioneers who build a bridge toward the new way. Our current child welfare system was implicitly and explicitly built on racist ideology and other unjust and dangerous false assumptions. We see our role at Alia as supporting and connecting the current changemakers in child welfare to help build a new just and equitable system. The UnSystem Innovation Cohort is part of this work.

How did the Cohort come to be?

Based on Ten of Ten for Kids, a 3 ½-day human centered design event we held in May 2017, a broad and deep cross-section of those who care about and are affected by the child welfare system, in all their wisdom, were able to come up with an answer to the question we should have asked in the first place. Rather than, "How might we build a child welfare system that actually works for children and families?" they answered this more poignant query: "When families struggle, how can we best help keep them safe and together?" Families are the perfect design of a "child welfare system," and we see now that our job as a community is to support the system that every child is already born into! No need to spend time creating something new, we only need to find ways to redesign the machine we've created to do healing and connecting and supporting work, not separating and punishing.

From the Ten of Ten for Kids' resounding theme of strengthening families rather than current systems, the concept of an UnSystem was developed with these Guiding Principles.

UnSystem Guiding Principles

PROTECT RELATIONAL CONNECTIONS AS SACRED

NUTURE THE CAPACITY FOR JOY
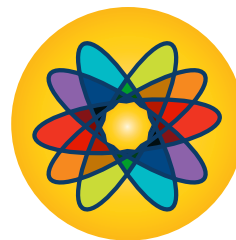
INSIST ON RACIAL EQUITY AND RADICAL INCLUSION

DARE TO SHARE POWER

COMMIT TO INTERGENERATIONAL WELLBEING

TRUST THE WISDOM OF CHILDREN AND FAMILIES TO DESIGN THEIR OWN FUTURES
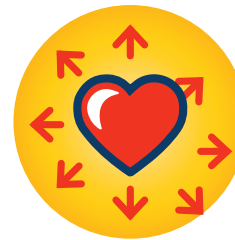
DO WHAT LOVE WOULD DO

Full description of Guiding Principles in appendix

Because the Guiding Principles are signals we are headed in the right direction and not a prescriptive practice model, we planned to test each idea separately in partnering agencies across the country, developing practice approaches and sharing our learnings bit by bit.

Instead, pilot-weary leaders said to Alia, "If you lead it, we will come!" There were enough people with enough momentum to take it on all the way. We gathered a group of leaders, child welfare professional guides, those with personal system experience, and off we went.

Ten of Ten for Kids reminded us of the magic of bringing people together, in real life, to build the trust needed for solving big problems. Relying on shared learning and a variety of perspectives, we began building the idea of an UnSystem Cohort. Unable to secure funding in the beginning (this is a whole other case study!), Alia supported the travel and accommodation of all Cohort members for our monthly, in-person gatherings. In November 2017 we began inviting the leaders and guides who now make up the Alia UnSystem Innovation Cohort.

Change Framework: Levers of Change

A Change Framework was gifted to us (and to the world – find it here in the appendix), created by our friends and human design pioneers at IDEO for educators. In it, a shared aspiration is first developed. Next we imagine what it would look like if that aspiration were true: How do people behave? Then we generate and implement big ideas we could implement to encourage these behaviors. Last, we learn the best way to get there by testing small hacks. In this framework, there are nine areas we can adjust to leverage the changes to which we aspire. They are space, event, schedule, finance, process, role, ritual, incentive, and communication.

Our aspiration: Family Connections are Always Preserved and Strengthened

In May 2018, after splitting into small groups using the storage space of the old Alia office to accommodate us, we pieced together what we saw were the most important elements of the work. On the white board was: families (broadly defined, biological or chosen), connections (not placements), and preserved and strengthened (building, never tearing down). Then we added "always" to not only reflect what we believe but to push ourselves to do in practice. Yes, in every situation with every family, with the belief that it is possible to do so, the goal of every Cohort member is not only to preserve what fragile connections there are among families, but to strengthen those connections.

D. Outcomes: What we accomplished and how we measured it

Defining Success

In July 2018, we wrote a document called, "How will we know if the Cohort is successful?" Even only weeks in, we already knew it was and would continue to be a "success." Acting on the momentum and vision of people who are eager to make broad systems change for the goal of keeping children safely with their own families was already a win.

With ever-evolving transformation efforts in five jurisdictions (covering 14 counties), the Cohort utilizes multiple evaluation methods to capture different portions of the Cohort story at selected points in time. This is an emerging, semi-funded practice which requires more than traditional, academic-style evaluation, so we are measuring progress through a mix of quantitative and qualitative data. For the Cohort to be a success, real shifts must occur in the lives of children and families as demonstrated by outcome data, and internal agency shifts are indicators toward change in this direction.

We cannot fully attribute change in outcomes to any one part of the Cohort, or to the Cohort influence exclusively. We can, however, make strong correlations between Cohort efforts and outcome data, and find signals as to where our work is impacting children and families.

Child and family outcome data: Quantitative

It is a challenge to collect data that mean the same thing across jurisdictions and determine which of these data are most reflective of the changes we've implemented. Comparing apples to apples is important in determining which interventions or parts of an intervention achieved specific results. We look for aggregate outcome data to identify indicators of progress as a collective, as well as the story each agency has to tell.

For the first time since 2011, the US government recorded the number of youth in foster care decreasing from the year prior,* falling by .08%. Aggregate data show that in the Cohort regions collectively there was a decrease in the number of youth in care by 12%. Further, while the number of youth in congregate care decreased by 12% in the past year**, the Cohort experienced a 37% decrease in the number of youth in congregate care settings.

* https://www.acf.hhs.gov/media/press/2019/new-data-show-1st-foster-care-decrease-since-2011-record-number-of-adoptions
** 2017 AFCARS: https://www.acf.hhs.gov/sites/default/files/cb/afcarsreport25.pdf and 2018 AFCARS: https://www.acf.hhs.gov/sites/default/files/cb/afcarsreport26.pdf

Cohort-wide Foster Care Data TOTAL

DATE	# total of youth in foster care	# of youth in residential
3/31/18	1681	142
9/30/19	1477 (12% ↓)	93 (37% ↓)

These aggregate data do NOT specifically reflect movement in other metrics such as:

- The number of removals
- The number of youth who are prevented from entering foster care and remain safely at home
- Informal kin placements
- Change in the number of hotline calls
- Supports provided to keep youth and families together *safely* at home

Cass County, ND

The State of North Dakota is in the middle of a statewide human services redesign, and even in the midst of this massive transition, Cass County managed to decrease the number of youth in stranger foster care by 43%. In Q3 of 2018, reports increased by 21% and still, out-of-home placements *decreased* by 8%.

Eau Claire County, WI

Eau Claire leadership hired 28 new human services staff members over the past year and went from 24 to 9 youth in residential care from November 2018 to present. The number of removals increased by 6%, yet the number of youth in foster care decreased by 10%.

Eastern Iowa Service Area (EISA)

In Q3 of 2018, the length of stay for youth in group care went from 208 to 112 days – a 46% decrease. From June 2018 to November 2018, the EISA reported a decrease of youth in residential care from 45 to 25, or 44%. Encouraging outcomes have emerged from the Child Safety Conference initiative implemented specifically to support families in keeping their children safely at home (see below). Of the 87 Safety Conferences held, 94% of youth represented were able to remain at home or with loved ones.

CHILD SAFETY CONFERENCES:
Practice highlight

One highly successful intervention for keeping children safely within their families has been implemented in the Eastern Iowa Service Area – pre-removal meetings with families and support teams for the purpose of avoiding separation of children from their families.

Within 72 hours, families are invited to a meeting where the shared goal is to do whatever possible to keep the children safely at home or with loved ones. Families can invite whomever they choose to support them personally, and the social worker and other professional supports to the family attend as well. One key ingredient is the presence of a high-level administrator at every single Safety Conference. The senior level administrator offers support to the staff in offering resources and sharing risk of placement OR removal. The team works diligently to identify barriers that hinder children remaining at home or with loved ones. They have paid for expenses such as cribs, clothing, rent, car repair, etc, which have often reduced the stress of daily life enough for a family to achieve the stability needed for children to remain home.

The Iowa team implemented Safety Conferences in the Eastern Area in October 2018. From this point through September 2019, 111 cases representing 147 children were referred for Safety Conferences, and 87 Safety Conferences were held. (Fifteen of the 111 canceled or opted not to participate and 9 were held as Family Team Decision-Making meetings.) **Out of these 147 total youth involved in Child Safety Conferences, 138 or 94% remained immediately at home or with loved ones.**

Of the Safety Conferences that occurred from October 2018 through January 2019, **74% of those children remained at home, with family, or with fictive kin (read: loved ones) <u>for the next 6 months.</u>**

Because this intervention has been so successful in keeping children safely at home or with loved ones, the state of Iowa issued an RFP for Safety Conference providers and will be rolling this service out statewide starting July 1, 2020.

To ensure fidelity, they are currently developing a Child Safety Conference toolkit with scripts, how-tos on scheduling and other logistical details, and specific descriptions of the roles of supervisors.

NOTE: Most of these youth are not removed, therefore this effective prevention strategy is not recorded in foster care data.

Washington County, MD

Leaders at the State of Maryland (especially in data) were eager to hear from Washington County how they achieved the dramatic 61% decrease in child removals. From FY18 to FY19, they went from removing 96 to 37 youth.

Waupaca County, WI

Waupaca County represents the smallest jurisdiction in the Cohort, population-wise. They have been working with Alia since 2015 and began in 2012 on a journey towards becoming trauma informed. Their size and prior efforts mean they already have very few youth in care (24) and even fewer in residential care (4). Their biggest data accomplishments are finding permanent placements for 10 youth in the past year (a 29% reduction), and reinvesting the savings to hire three new positions dedicated to prevention. (See insert on page 31 for how they did it.)

Evaluation practice maps: Change Framework by agency

Through attendance at every in-person meeting and in ongoing conversation with each jurisdiction, Cohort evaluator Dr. Bidwell helped each agency construct a map for how they specifically will measure the impact of the change *they set out to make*. These evaluation maps began the evaluation process and reflect the Change Framework **(see Appendix)** we use as a guide for implementation. Under the umbrella of our shared aspiration ("family connections are always preserved and strengthened"), each agency outlined behaviors that would reflect the aspiration, and implemented big ideas to drive the behaviors they wanted to see. Big ideas are made up of small hacks that help guide us in the right direction by gaining insights along the way.

Getting clear on the where we are going and how we plan to get there has been an ongoing challenge, and each agency has a *working draft* of their evaluation map. The practice and measurement of shifting from secondary to primary prevention is the big-picture work of the Cohort, therefore, the evaluation maps will be a fluid and ongoing guide.

Staff focus groups: Qualitative data

Outcome data and the family preservation that they represent only tell part of the story. Especially this early on in the process, changes experienced within each agency offer signals to what is to come. The qualitative evaluation portion began with the evaluation map development in 2018 and culminated in late Spring 2019 with onsite qualitative staff interviews. These were conducted to capture the impressions of agency staff (and in a few cases also providers and partners) as to how they experienced the change efforts. As expected, alignment in philosophy and practice of a new way of work was generally less internalized by staff the farther away from leadership they work.

Cohort Evaluator, Dr. Laurel Bidwell, Assistant Professor of Social Work at St. Catherine University in Minnesota, received a research grant from the institution which allowed her to travel to all five sites and interview a total of 173 people who were integral to the process of change. Questions to the participants included observations about the changes they have observed, mindset shifts, impact, challenges and changes they anticipate happening.

After de-identifying the data and having the transcripts read by an independent researcher, six themes emerged that captured the interviewees' experiences. These six themes were then presented to agency leaders as a way to check the validity of the themes. **Here's how staff members are experiencing the changes so far:**

1. **The *process* of change – yes, but how?**
All groups spoke about the change process and the challenges with understanding how to embrace and implement the vision of an UnSystem. Time and time again, interviewees wished for more specifics – a road map – although the work itself is to create that map. Also, change efforts were often seen as Alia's idea with varying degrees of agency ownership of the vision, and others questioned whether the change is just the "flavor of the week" that will fade away as other initiatives have.

2. Communication – be honest and consistent

Staff members are craving information – wanting to know more about what happens at the Cohort meetings, desiring "concrete evidence" about initiatives and their results, and again, wanting that road map to illustrate where they fit in and what is expected of them. Open communication requires a high level of trust on all levels – leaders need to be able to push staff to think outside-the-box and workers need to feel safe to challenge ideas.

3. Core concepts/philosophy – clear, yet possible?

Most interviewees had grasped the concepts of "strengthening families" and wanting to keep kids out of foster care or with kin if that's not possible, but every system had outliers that were skeptical. The greater challenge comes in operationalizing the vision. How is the UnSystem work different from what they have been doing? What does success look like?

4. Operationalizing into practice – changing the work

While some may still have questions about the vision, there was no doubt that the Cohort was making an impact. Interviewees gave many examples of increased out-of-the-box thinking and creative problem solving, ways agencies were becoming more trusting and engaged with families, workers feeling more empowered, more cross-functional groups putting their heads together to help families, and slowing down the process of removal.

5. Barriers and challenges – external pushback

Of course, there are barriers and challenges to system-change! Some of these are internal: the time and energy it takes on the front end to do relationship building and creative problem solving – especially when caseloads are so high and there are varying degrees of universal buy-in amongst staff. External challenges arise when tradition meets new ways of thinking in the courts and judicial system; a lack of support services in the community to fill service gaps to meet family needs and policy, or spending restrictions that inhibit the agency's ability to deliver to families what it takes to keep kids safely at home.

6. Worker wellbeing – reduce shame and guilt

Child welfare work is hard to begin with and change increases that stress. UnSystem initiatives require additional time to build relationships and explore options, adding to higher stakes, guilt and angst when a removal needs to occur. After learning about new ways of work and the trauma that removal causes, workers reported feelings of "not-enoughness" or guilt that they had been doing it "wrong" for years. Workers themselves have often experienced trauma, and the health of employees and the culture of the agency must be important considerations in change efforts.

Researcher reflection – agency readiness

The above six themes emerged directly from participant quotes, but a seventh underlying theme was inferred by the researchers – that of agency readiness. Many of the challenges, struggles with leadership or low risk tolerance that were observed came from what was playing out in the agency before the work of the Cohort began. There *first* needs to be a healthy culture with trust, strong leadership, open communication, and high risk tolerance for change efforts to endure.

In interviews approximately six months after focused Cohort work began, most staff members believed in the aspiration of the Cohort and are working hard to create ways for kids to remain with someone they know and love. And while they "get it" and want to get it done, they want more information – more specifics – on how to do that and what it means for *them* (especially the ancillary areas within the agency such as economic support). Challenges in implementing an UnSystem relate to the change process as much as to the work itself and all that is necessary for change isn't within agency control. Leaders are urged to start with creating a healthy organizational culture, knowing that strong relationships with partners are the next frontiers that must be addressed for system-wide change.

Asset collection: Documenting the process

Another way we are collecting data is by documenting our work as we go. We have physical and electronic documents of every meeting we've had – the handouts created, agendas followed, commitments made, and photos of the process. We made videos of leader and guide interviews with their impressions and thoughts. In 2019 we have kept an every-other-month schedule of in-person meetings and a 2-hour virtual call on the off months. These video calls are all recorded.

E. What we learned and how we did it

If only we could bring you along to every in-person meeting and share every eureka moment and every breakthrough story! Instead, we gathered what we did and learned from the Cohort and placed the take-aways into five categories, with examples of how we got to those insights:

1) **Prepare and take care (of yourself and your team)**

2) **Think differently about the work**

3) **Take a bet on families**

4) **Make the old way harder**

5) **Expand the group of helpers**

You'll find this symbol 🔆 near the "Advice for Leaders" sections. Take note! These are things you can do in your agency, too. No secrets or proprietary models here!

TAKE CARE AND PREPARE *(of Yourself and Your Team)*
Build your own leadership fortitude and risk tolerance.

This is, in fact, the starting point of it all. On many days, in many different ways, we have spent time doing what it takes to help the Cohort agency leaders build the capacity to do the change. They are the drivers and the keepers of hope; they must be well enough to persevere. We have helped them identify and lean on their allies (their "personal Board of Directors") for support and built trust among the Cohort. Systems change is tiring work and when they are with us in person, Alia helps create an atmosphere where the leaders and guides are nurtured – with ongoing encouragement, healthy food, and time away to reflect.

We have experienced NO leader turnover in the Cohort to date. This is likely in part due to the support they have received via the Cohort to keep mission-focused and connected to the humanity in human services. When asked how Cohort leaders find time to spend 2 days in Minnesota every or every other month and still get their work done, they said things like, "This IS the work. It's creating the change, not signing papers. If I wasn't here on a monthly basis making changes in our department, know what I'd be doing? The answer is, 'what we've always done.'"

Cohort meetings also instill two crucial skills for changemakers: leadership fortitude and risk tolerance. Leadership fortitude is the inner strength you call upon in the face of pain or adversity so that you choose to maintain integrity of mission and character. It is the reservoir of energy and focus you build to help you do what is right, even in the pain of criticism. Leaders report that the Cohort is where they can "fill their buckets" to keep at this difficult work.

Risk tolerance is the degree of uncertainty that is acceptable to your organization. Roles and assumptions are challenged in systems change and there is uncertainty in trying things that haven't yet been done in your agency. How far are you willing to go out on a limb to do what you know is best for kids and families?

The Cohort is also a safe space to share struggles, celebrate successes, and normalize the pain and joy of leading change. Cohort leaders have been threatened with being fired, going to jail, and with losing credibility as a professional and/or leader. Not if, but *when* the going gets tough, the leader must have the ability to weather the storms.

To be clear, this is not a 1-, 2-, or even 5-year implementation project. This is leaders showing up, day after day, building loving relationships using the recipe we know works for building trust among humans: consistent, reliable interactions that are generous, positive, and honest.

Whatever it costs to build a new way of work in child welfare, relationships are the currency. These relationships are those among your leadership team, the personal relationships that support your wellbeing, and relationships with the folks in and outside your agency you need in order to do your job in alignment with your vision (judges, school administrators, HR directors, sheriffs, foster parents, teachers…). THIS is where and how all of the work is done.

What we've observed is the particular need to develop deep trust, respect, and understanding with your closest colleague – your Director or Deputy Director. Every set of leaders on the Cohort share this – they would go to bat for the other, are generous with their assumptions, and trust their decision-making. The pair do not have to be alike (in fact, It helps to have a visionary and an implementer), but the bond must be there, and we see that across all five Cohort agencies.

This is a full-on system transformation that includes every department and stakeholder (stakeholder being anyone who cares about and/or has influence on the change). With so many people looking at the challenge from so many directions with so much to lose or gain, the only way to do this is with consistency and love (yes, love!). While some shifts or interventions show progress early, there is no quick and easy way to do this. And if you try to do it from a place other than love and compassion, the change either won't happen or won't last; or both.

STAFF experience:

"I don't think anybody here feels like, "I'm doing it! I'm there!" And to have that message constantly sent, though, too, of you need to grow, you need to grow, you need to grow, there's that missing piece of – and when, even the smallest things. When they do the smallest things. Whether it be getting someone housing or showing up when you didn't have to, whatever that might be. To get the applause at those moments I think is really important, beyond what was done when you showed up. Man, you showed up. Awesome."

"I think it comes down to something very simple. As the workers have heard, the workers that are buying into this have heard from administration that it's okay, that we're going to be there to back you. I think some workers have had these ideas in their heads for years, as a social worker, but they've always had that safety versus risk and, "How far can I go, and I'm not going to go too far because there's liability associated with that." And so, I think knowing it's okay, knowing it's okay to step way outside of the box now, I think that gives them confidence."

GUIDE reflections:

"Leadership is a set of behaviors that people want to follow – you need to figure out how to engage and build relationships with staff to give them the sense of co-creating something new. Simply having inspiration without buy-in will not get us to creating something new."

"I learned that it is more challenging for people in the system to change than I thought – I was surprised by that. It's not the rule/law – it's the other way around. The people themselves stop the change. My instinct is that we need a policy to change our state legislature or Congress – but it's not that. It's really getting people to change. Leaders ask me: 'How do I get my people on board?'"

Nestled within the lessons learned section of this case study you will see direct quotes from the focus groups that demonstrate the frontline staff experience. These are indicated as, "STAFF experience."

EXAMPLES of actions:

- During in-person meetings, we learned about what change looks and feels like (relying heavily on Heifetz and Linsky's *Leadership on the Line* insights), so that leaders were as prepared as they could be for what lies ahead.

- We consistently re-aligned with the end goal of keeping children safely connected to their own families – this fuels motivation and perseverance.

- At every in-person meeting, we offer a 15-minute inspiration demonstrating other successes in systems change.

- The longer we work together, the more honest we can be. We've built in time in our meeting agendas for critical feedback. Practice of saying and hearing challenging questions to one another in our safe space prepares leaders to answer these questions when they come up at work.

Advice for LEADERS:

- Do a quick self-evaluation and be honest with yourself. Are you *absolutely committed* to doing what it takes to shift your agency culture? If you are not willing to step in and get your hands dirty, you will not get buy-in from your staff or partners.

- Start with assessing your own values and do your internal work first. When you push the system, you'll come up against risk tolerance and values – it's so much deeper than child safety and tolerance. The more clear you are about your values, the faster you'll be able to move.

- Direct leadership involvement IS what makes change happen. It says you really mean it and are willing to try new ways to support parents. It takes a lot of time to explicitly and consistently offer your support to staff and build relationships, and you *must* make the time to do it.

- Leaders often don't understand the environmental and *cultural* change that needs to happen. You *will* get pushback and you must understand the gravity and impact it will really have on you. Ask yourself if you are ready for the whole barrage of what this entails. It is ever-changing and if your culture and environment don't allow for that, don't even start.

- The amount of personal work that must occur here cannot be underestimated. You must pause and reflect on your own assumptions of your role and of this practice, and what brought you to where you are.

- Radical change stresses the entire culture. Once leaders are ready personally, they must then assess or "take the temperature" of the starting place and conduct any "pre-work" to build the capacity of their team or it will slow the change efforts.

- We can't emphasize enough risk tolerance and understanding the full picture of what is at stake; child removal is not risk-free and in fact causes lifelong harm. You must *continually* work to build it in yourself, your staff, and your partners, or your efforts will stall when you hit the inevitable pushback. It's your most important muscle to train for the change marathon.

- It's essential to get with peers and form strategic alliances with those who are aligned with your values and vision – for resources, bouncing ideas off of, and creating a culture of innovation.

Prioritize workforce capacity and wellbeing.

Do not – we repeat – do NOT move forward with major practice changes, new initiatives, or shifts in mindset or responsibility without being certain that your team has the trust and positive regard to withstand the uncertainty and pushback. You can choose to address it now and build a foundation for change, or you will be forced to address it later, when your team is buckling under the weight of fear and confusion. The major shifts we are talking about here will activate criticism and constrict tolerance for risk. Only a leader and a team of curious, open, self-aware, generous, and trauma competent individuals can recognize their natural, human reactions to fear, make adjustments, recommit to the vision, and continue to progress.

What to expect

Old way | Scaling down

Crazy Town

New way | Scaling up
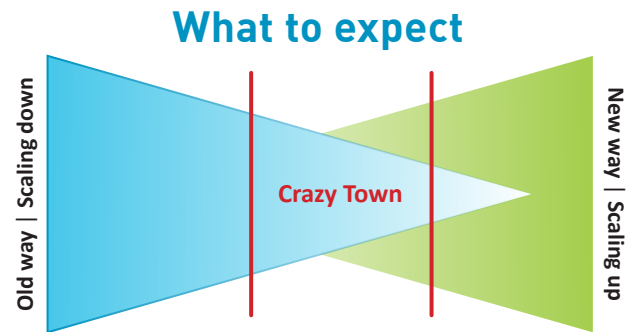
When you begin making shifts in agency culture, people get nervous. Rules and roles change, behavior that was acceptable is no longer accepted, and it doesn't look or feel the same as it did before. It feels crazy, so we call it "Crazy Town." To protect against reverting back to the familiar, old way of practice, your managers, supervisors, and agency staff must be prepared and supported so that they can take values-based risks in decision-making to move toward a vision of new practice. Here again, building loving relationships with those on your leadership team and those in your organization is *essential*.

Every jurisdiction spent a TON of time on this. They work(ed) to build a sense of safety by giving managers and staff opportunities to connect with one another in an honest and positive way, AND opportunities to engage with ideas about why changes are coming and what it might look like.

EXAMPLES of actions:

- Management retreats

- Gratitude cards

- Alia Workforce Wellbeing groups

- All-staff meetings

- Putting "Family connections are always preserved and strengthened HERE" magnets on every staff door

- Offering hot beverages in the lobby

- Starting a spirit committee

- Starting a trauma informed care committee

- Adding new positions and adjusted org chart to ensure proper supervision was offered, contributing to more sound decision-making and social workers feeling supported

- Offering more consistent supervision to give workers more opportunity to reflect on change

- Inviting every staff member in every agency to participate in an idea crowdsourcing challenge

- Implementing agency-wide "High Five Friday" emails highlighting their personal and professional "wins" from the week

- Inviting leadership at the state and regional levels to visit local offices who are openly enthusiastic about the direction they are going and are willing to support them when frontline staff receive pushback or criticism from the community

ADVICE for LEADERS:

- Give staff the information they need about the change process – everything you have – so they know as much as you do. Realize, this won't be enough for some and others will think you are withholding details, however, being stingy with the details and low on vulnerability will not help them trust your leadership. They will know you are being selective and feel that you don't think they can handle it. You must build trust by *actually trusting them* to learn alongside you. Share freely what you know, and what you don't know. (Maintaining ethical, data-sharing practice, of course.)

- The level of intense relational work is constant and it's difficult to measure progress. If you have in the past, you can no longer avoid having courageous conversations with your stakeholders. Neglecting and/or failing to repair these connections can do serious damage. This is a constant demand of the work.

- Beware of the shame narrative. Getting a directive for a new way of work, especially after years of practicing in a certain way, can garner guilt and shame for how workers or leaders approached families in the past. This shame can lead to backlash and disruption. If this occurs, go back to trust-building basics: transparent communication, deep listening, encouragement (never blame), and hope for the future.

- Leaders need to embrace ambiguity and teach the *process* of change – help employees understand that there is no road map. We are building it as we go: we *are* the UnSystem.

- Leaders need to cultivate an environment of trust that allows for safe questioning and pushback – without repercussions if workers fail or don't initially buy in to the vision.

- Follow through is essential. For example, the Cohort-wide, online idea crowdsourcing challenge we held actually set some agencies back by having a focus on *gathering* ideas without a plan to follow through to *implement* them.

- Direct supervisor and leadership involvement is what makes change happen. Leaders must play a hands-on role in new initiatives and demonstrate explicit support.

- Agencies need to intentionally promote worker wellbeing as parallel to what the desire is for family wellbeing and offer ongoing initiatives to address worker and organizational health.

THINK DIFFERENTLY ABOUT THE WORK
Shift mindset.

As people who make up systems, we run on autopilot a lot of the time. Part of the value and effectiveness of the Cohort is the dedicated time to move away from your space, with others who are dedicated to making the same changes you are. Even those of us fed up with the current system and impatient to make changes can have a tendency to play within the rules. We must help each other to see what is possible and what barriers are only imagined.

Start thinking differently about your role and purpose as an organization – is it to rescue children from abuse and neglect? Or could it be to support caregivers' capacity to parent, before abuse and neglect occur? Are we here to keep kids safe, or help parents *keep their children safe*? Are we here to heal or punish? Demand or facilitate? What is our role in the lives of families and kids? What roles do community members play?

Further, what if we recognized removal as an ACE (adverse childhood experience) and used it only with the utmost of care as a last resort? What if "cases" were just people? What if social workers were healers rather than investigators?

Leaders, staff, and partners must, *over and over*, be introduced to a new way of thinking and be encouraged to think differently themselves. Thinking about why you are here, what exactly you are trying to accomplish, with who, and for who: these are what make up the DNA or the design of a system, and it is in answering these questions that a system *redesign* can occur.

- Why do we do it this way?
- If we stopped doing _____, what would happen?
- What is keeping us from doing what we know we need to do for families?
- What would it take to keep kids safely at home?
- Who are we trying to protect? From who?
- What does it mean for a child to be safe?

"I think instead of being so black and white and kinda concrete like we've been in the past, we're just a lot more colorful in thinking out of the box and trying to be more creative with – Yeah, the different ways we can help these families."

"I wish there was a roadmap that we could see. And that roadmap needs to include – if this is truly a vision for the entire department and crosses units and divisions – 'how does everybody do it?'"

"Maybe we need somebody to tell us what it's going to look like because I don't know what to ask for if I don't know what the outcome is going to look like. Like are we just trying this or is this how it's going to be?"

"As a whole, there's a collective mindset change that we want to empower families to somehow figure this out, so kids can be safe in their care. "

"Well, a lot of it has to do with finding different ways to help families, a lot to do with keeping families together, and looking at different ways to create a system that can assist people to get what they need. And, like here, it's caused a lot of people to think and look at things differently. Instead of this is the box that these cases have always been in; let's just keep doing that, they're starting to look at – okay, well, what if I did this? And that leads to this. And then it gets led to other people to be more enthusiastic about – oh, well, I don't have to follow this exact path. I can actually have an idea and we can work on that. And I think that people buy into it more, and then they kind of become more involved in it; I think that's helped."

GUIDE reflections:

"Being involved with the Cohort has restored my faith in the system and in humanity. I could see so many ways that the system was broken and I didn't know how to fix it or whether it could even be fixed – now I see people with forward thinking get out-of-the-box to fix things."

"The biggest learning moments were around the fact that we want to do such creative and innovative work – the will is there and we know what we should do, but there is also fear. It is really hard to unlearn old ways and learn new ways."

EXAMPLES of actions:

- Provide LOTS of trainings. Cohort agencies brought in their guides, Alia's CEO, and other providers to offer opportunities for staff to engage with ideas like implicit (racial) bias, protective factors, restorative justice, trauma (of removals), and the StrengthsFinder.

- As a support to a Cohort agency leader, Alia CEO, Amelia, presented to an agency's county board about changes in child welfare, what we know about attachment and trauma, and how to shift policies to support that.

- Many of the myriad trainings that each Cohort agency offered had a dual effect – building their team's cohesiveness *and* shifting their thinking.

- Several lived experience guides presented on trauma and prevention from their personal perspectives.

- In March 2019, every agency brought state and/or finance colleagues to an in-person Cohort to learn about the why and the how of keeping kids safely with their own families. Our finance guests were happy to be considered part of the team and see that other agencies were on the same journey.

- Human-centered design principles (like "safe and uncomfortable," and "yes, and…" etc.) were posted in an office to reinforce a creative and open way of thinking about change and problem-solving.

- Several agencies posted the aspiration in large letters in the office reminding them to always *preserve and strengthen family connections.*

- Starting a book club is an inexpensive way to introduce new ideas and provide a space for staff to engage with the ideas in an informal way. One Cohort agency started with Margaret Wheatley's *Finding our Way.*

Advice for LEADERS:

- Having county board support is important, but honestly, not necessary in the beginning. You can start off on a trauma informed care journey without asking the board, but you must educate and bring them in along the way.

- Start with those closest to you, like your leadership team. Talk through the philosophical changes and what it would take to move from a secondary to a primary prevention system. Your leadership team will carry out the work so it is imperative you are all aligned with where you are going.

- You don't always question values when the system is risk-adverse, but you'll certainly be making value judgments and encountering others' values when pushing the system. The more work you do upfront to clarify values, the easier it will be later on.

Change your language.

Every Cohort agency describes speaking differently about every aspect of the work, and in every space of the work. Supervision meetings, board meetings, staff trainings, with families – all are opportunities to shift practice and focus by the powerful intentionality of choosing different words.

EXAMPLES of actions:

- Start by asking different questions, like, "What would it take to keep this family safely together?" rather than, "Does this child need to be removed from the home?"

- Start with magic wand thinking – if you could do anything to support this family, what would it be? Then, start playing out the "whys" – "Why can't we…?"

- Talk about accountability. Asking: "What if we held the system accountable for supporting parents instead of parents accountable to the demands of the system? Also, "How can we help parents be accountable to the needs of the children rather than the demands of the system?"

- Redefine "family" to include those the child and family know and love. This helps keep them more focused on maintaining loving connections.

- One county uses TPR now to mean, "total prevention response," rather than "termination of parental rights."

- Use the language of "assessing safety" or "assessing with" families rather than "investigating" families.

Advice for LEADERS:

- *Love*. Yes, it's okay to say the word "love" and to expect your staff to act lovingly! In fact, we think it's necessary. How can you keep up this difficult work without loving the families you support and loving your colleagues who are in it with you, day in and day out. Spread the (professional) LOVE.

- Speaking differently to potential foster parents created a shift in practice, positioning foster parents as support towards reunification.

- You need to have continual education and language changes. Even with an accelerated process, it is difficult to come up with common language that people want to follow. Be clear what you mean by "prevention" or "a new way of work" or "an UnSystem." Talk about keeping children safe *with* their families, not *from* their families.

- People most closely connected with the work need to be most closely connected to the changes.

Gain clarity and communicate, communicate, communicate.

We have spent hours on clarifying our vision and further, clarifying the message. It is impossible for board, staff, or community members to align with these fundamental shifts in mindset and practice without understanding why it is important to do so. The entire leadership staff must be aligned in these efforts. Every agency spent tremendous effort on communicating and still, every agency would say they could have done more.

EXAMPLES of actions:

- We spent several meetings working on agency-specific theories of change to help distill down what it is we are trying to do. (see Theory of Change pull-out box)

- In September 2018 the agencies completed a Theory of Change workbook, with written exercises identifying their outcome goals, allies and challengers, evidence base for change, stakeholder talking points, and lessons learned so far.

- One agency leader spent a Breakthrough Day with Alia and trusted consultants crunching budget numbers and developing a blueprint strategy to share with the board how they will deal with budget constraints and *how* they will move toward primary prevention (read: it will be expensive in the transition). Working toward clarity helped the leader be prepared for questions the board asked of her.

- At one Cohort meeting, every leader participated in a series of role plays. Guides dressed up and played the parts of a judge, a philanthropist, a parent, a board member, and service provider. Cohort leaders got to sharpen their elevator speeches, adjusting the conversation for each stakeholder. One leader called this an "eating your broccoli" exercise – you know it's good for you, but it's not pleasant!

- A marketing intern was used in one agency to support staff participation in the idea crowdsourcing challenge, with excellent results. She went door-to-door in the offices to drum up excitement and remind them that their voice was important.

Theory of Change

Because we believe children fare better with protective connections in family, and _____ # children in _____ are not living safely within their families, we are
your county/region

_____, so that
thing you're changing

_____.
change you expect to see

We believe this will work because

_____.
evidence

What is the problem you are trying to solve?
What is your big idea to solve the problem?
What would be fundamentally different for kids & families if you were successful?
What evidence do you have to expect this will work?

Advice for LEADERS:

- You CANNOT over-communicate. You will think you've said the same thing over and over, yet it will not be enough. Like all of us, we can hear the same message time and time again but somehow one magic time it hits us just right and we "get it." Managers and staff must be afforded this process as well, by getting the message in many different ways in many different places.

- For one agency, the aspiration was the single most effective thing. *"At the very beginning, clarifying our 'why' was worth its weight in gold. From there, we developed a blueprint around it and it is at the center of our work."*

- Leaders should strengthen the connection between philosophy and practice ("living into it", "connecting the dots"). Help employees see the link between the vision and the work.

- The work doesn't always flow in a linear path. One leader said: *"We didn't know what we were doing in the beginning. We would start, then backtrack. Every meeting we had a new idea. It was complicated in the beginning. I felt lost for awhile. Then we narrowed the focus; got good ideas and resources; we're trying things and feel on the right track."*

Creative problem-solving.

Once your team is well-functioning, well-supported and has had opportunities to make shifts in their thinking about the work, then they are ready to make shifts in practice. Unlearning check-the-box social work takes time. If it is desirable for social workers to think on the fringes of current practice, they must be supported to do so. This means leaders must be clear and repetitive about their unconditional support of taking smart risks on the side of keeping families together.

EXAMPLES of actions:

- The kinship caregiver was blocking a child's contact from her imprisoned dad, so the agency bought a cell phone for the child so dad could call directly.

- One agency weighed the option of buying a family a trailer home to support their family stability.

- Relatives were encouraged to participate in Family to Family events so the extended family could get to know the child better and make contact with the child's resource parents.

- Since it was determined that the agency could not "buy" housing, instead it paid the rent for the family for nine months to support stable housing to facilitate reunification from foster care.

- An agency used prevention funds to pay one caregiver's lost wages for taking extended time off of work to care for her medically fragile child.

- A teen was blowing placements and wanting to be with her sister. Her sister was willing to be a resource, but was struggling to find housing and needed some help financially. The agency helped pay the security deposit and first month's rent to help her secure housing. The child is no longer running away because she is home with her sister, where she wanted to be.

- One agency stopped allocating funds to provide shelter care – it is no longer a placement option in that county.

- A child moved to reside temporarily with relatives and subsequently reconnected with a cousin. The child then refused to attend summer camp (which he greatly needed for many reasons) for fear of missing out on time with the cousin so the agency paid for the cousin to attend as well. This provided an opportunity for both children to have a positive camp experience as well as reinforce their family connection.

- A youth was in a group placement that did not allow her to have normal teenage experiences, so she was brought to a therapeutic foster care home and given the support to obtain a part-time job and attend her home school where she was able to connect with old friends.

- An agency was able to provide housing support for a dad using a 2-year reverse funding plan.

Advice for LEADERS:

- There is a paradox between compliance or a "right" way to do things (which is how many have operated) and embracing experimentation where things may change and/or fail (which is what is required for transformation). Leaders need to help employees become comfortable with *both*.

- Be prepared for fluctuations in the work and your emotions. As one leader described it: *"You have a period of time when you make some quick changes, some quick wins, some low hanging fruit. You do the mind shift piece. You change the culture. This is really great. It's great to work here. We're doing good work. I know so much more. How could I have done the work the way I did for so many years? And then, all of a sudden, when it becomes so ingrained, so a part of your core of who you are, and you run into those societal and system barriers, then it becomes a new – it's a new trauma or new wound of I didn't know before, the negative impacts that I was having as I went about doing the system cogs, as the system just did its system thing. And now I'm part of it."*

- Follow the wise advice of one staff member: *"Let's give a little more grace, be a little kinder. Everybody is dealing with trauma and trauma has many different definitions. One person's trauma to us might feel insignificant, but it – don't devalue their trauma and things that have affected them."*

MAKE THE OLD WAY HARDER

One trick to breaking any habit is making a desired behavior easier to achieve and an undesirable behavior more difficult. If we are trying to avoid hasty removals, we make them more difficult. By moving the removal process up (out of the hands of frontline workers alone) and out (to include more family support), removals decreased.

STAFF experience:

"You put a roadblock where a roadblock needs to be, and you get rid of the ones you don't need to have."

"Now I think having a bunch of different individuals with different thinking come together and come up with the best plan for that family – and the family gets a plan right away, rather than waiting 30, 60 days."

"Things are a lot harder to move through than I think people think. So, every time you say no, or every time it's "let's do some creative thinking" and then it goes back to the not-really-creative-thinking, but fire-putting-out mode and you say "let's go beyond that", and they get upset because it's the not-enoughness again."

GUIDE reflections:

"Leadership is more confident in their vision – decided they don't have to go out and force the vision to resistant external partners. Risk experimenting and prove later that it was successful."

"It is a lot of work – easy to come to cohort meetings and create/dream/wish/hope/get great ideas – and it's darn hard to be the person on the ground day-in and day-out."

EXAMPLES of actions:

- Pre-removal safety conferences were implemented in two Cohort jurisdictions, and one is now developing protocols, scripts, and fidelity measures and rolling this out to the whole state.

- Require a high(er)-level administrator to become involved before a removal takes place. This by nature slows down the process, making space for other options to emerge.

- Case reviews are conducted in one county every 90 days for every youth in care. This reduces the chances of a youth being forgotten about and the urgency of returning home remains high.

- Removal rates by staff were analyzed so training and support could be offered to particular staff who remove children at higher rates.

- Budget development was analyzed against the Cohort aspiration where, "family connections are always preserved and strengthened."

- Front line staff no longer have the ability to remove kids in one county.

Advice for LEADERS:

- Making their work harder is not a popular staff choice! You have to make unpopular decisions, so be prepared for pushback.

- You (leaders) need to get your feet dirty to get buy-in.

- The challenge is finding the time to actually do the work. You need to make times for calls and travel (e.g. to Child Safety Conferences) – you need to sustain the practice and make time for UnSystem work. It takes time to do it right.

- People naturally shift to the philosophy of "it's good enough -- why change?" – you need *constant* endurance, constant educating.

Slow down.

Poor decision-making happens in crisis mode – we make hasty decisions and fall back into what's known. Interdisciplinary, in-depth reviews of casework can bring new ideas for creative solutions or reveal an overlooked potential caregiver solution for a child. Making time for positive interactions with staff and deep listening to those directly affected by your decisions yields new ideas and again, builds the currency to do the work: trusting relationships.

EXAMPLES of actions:

- One county was really struggling with law enforcement (guns drawn, literally). To make headway they pulled out a protocol (drug endangered child – DEC) and suggested they revisit this procedure line by line to understand each other. This brought much greater understanding of both sides' point of view of this particular, very sensitive process in a family's life...and built trust between DHHS and the police department. Now they do "knock-and-talks" which is police officer plus social worker where the agreement is "no one goes to jail from this visit."

- For several years one county moved toward generalist practice, where families stayed with one worker who was meant to be able to guide them throughout the process. During that time, staff felt overwhelmed with having to know everything and felt like they were missing opportunities to be experts. They have shifted back to more specialized social worker roles, yet now rely on consistent interdisciplinary team meetings to find prevention and support solutions.

- A list of internal staff (name, contact, and knowledge base) who can consult as a subject matter expert is made available to all staff should they get stuck.

- Child Safety Conferences *always* include additional people known and trusted by the family to step in and lend support. They do not convene until they find people to join the family's "team."

- CPS workers in one county can no longer consult with the legal team directly without a supervisor. This slows down the process and eliminates a lot of unnecessary removals.

Advice for LEADERS:

- Since we know that trust-based, loving relationships are required for meaningful change, playing the slow game here is required. Building trust requires consistency over time – showing others that you keep your word, speak positively, take responsibility, and do what's right, even when it's hard.

- Move the decision-making process for removals high(er) up the chain of authority. This by nature slows down the process and allows more time and diligence to be spent by front line staff to prevent the removal, and for other alternatives to removal to arise. (It also shares risk of what may happen under a circumstance where a child remains at home.)

Invest in healing, then reinvest savings toward prevention.

Youth in high-level care who can safely, gently, with consideration *and* urgency, return to live with loved ones can utilize more inexpensive in-home support. Bit by bit, savings can then be reinvested toward prevention support. Staff will support families with the tools they have, and with a budget that supports more and varied prevention services, staff will utilize these more often.

EXAMPLES of actions:

- One county is working on streamlining in-county transportation services by using app-based technology to identify redundancies in needs for staff and other riders.

- The job duties of one social worker were changed specifically to find family-like placements with supports for long-stay youth in congregate care.

- To decrease the number of youth utilizing deep-end care, an Intensive Permanence Service approach was launched with 16 youth and 2 workers and one supervisor. This 18-24-month relationship addresses the grief, healing, and intensive family finding to secure connected, supportive, permanent placements with family.

- Beginning July 2020, one state will have new contracts in place for family-centered services requiring that all families are provided a foundational service of Solution-Based Casework. Families will also have eligibility for in-home intensive family preservation services.

Re-investing in Prevention: How Waupaca County is Doing it

For several years, Waupaca County has been intentionally realigning resources toward prevention work. Any cost reductions realized from a change in practice have been reinvested in preventative services. This is possible due to a combination of several intentional efforts. Here is what Chuck and Shannon had to say about their reinvestment strategy:

- It's not just about the budget. Human Services leadership has solid, trusting relationships with the county finance director and human resources director that provide a base of understanding about the goal of redirecting funds toward prevention.

- Leadership spends substantial time with management and staff talking through the *details* of all the funding sources – helping employees gain the knowledge that makes it easier to problem solve. Staff is able to exhaust and maximize all the resources to meet families' needs.

- The county "puts their money where their values are". Since trying to stop residential placements, the county has only budgeted for the children currently in residential care, no more. They declined an offer from another county to have a discounted rate on secured detention, as they have no plans to use it.

- The county is no longer using receiving homes, so realized a cost savings by discontinuing the monthly base rate they were paying to ensure availability – and redirected those funds to stipends for placements with less than a 24-hour notice.

Advice to leaders:

- Redirecting funds toward prevention is like walking on a balance beam – each step needs to be intentional. You must redirect the funding into a prevention activity every single time there is a savings; if you let it get absorbed it will go towards the status quo instead.

- It is easier to begin at the case level instead of becoming overwhelmed trying to address the big budget-level changes. Start with the expenditures on one case and ask: "What would it take to get this child home?" Work backwards from there to fund the interventions, realize the savings and redirect them into prevention work.

- You can pay now or you can pay later. You really can't afford *not* to focus on prevention. Let your practice drive the work and the funding will follow.

Advice for LEADERS:

- Remember it is always about serving the people walking through the door – even when you're wearing your fiscal hat.

- Agencies are not anywhere close to having the necessary financial support – but don't let that stop you. Do workarounds, shift positions, and apply for grants.

- Set parameters around requests. Budget questions come up more often because of the UnSystem -- in terms of resources needed – require specific requests from staff. (e.g. "Are you asking for one month's rent or ongoing?")

- Have the right people do budgeting with families – involve the economic support people to help.

TAKE A BET ON FAMILIES

Together we are deliberately shifting the risk of safety concerns *within* families, erring on the side of keeping children with those they know and love rather than placing with strangers. Stranger care placements can be with safe, skilled, and loving adults…yet are still unfamiliar and can be scary for a child. It is, therefore, a priority for us to focus on ways we can invest in first families. We honor the deep love that every parent has for his or her children, regardless of their capacity to parent at any given time, or our capacity to recognize it. We also recognize the right every child has to remain connected or attempt to reconnect with those who love that child, and be open to how that can look.

STAFF experience:

"The other shift was looking to families as being experts about their family, their resources. Starting with them and empowering them, rather than us coming in and saying we know best and we're going to tell you what you need to do to ensure safety in your family. Which I think is a very big shift, at least in my perception."

"We changed the way that we're making decisions around removal and again the placement process, and I think we're kinda myth-busting traditional thinking."

"I think just our conversations with families is different. I think that's one of the biggest things I've seen. And I think the families think it's pretty cool that all these people are coming. And we say, 'We all care about your family. Everyone around this table cares about you. And we're here because we don't want your children to have to be removed from you.' And I think that's pretty powerful for them to hear those words."

"Everybody's now looking at it differently. We don't have to remove. We can put other supports in place where these families weren't getting supports until after the child abuse assessment was done…So this time you're starting right away."

GUIDE reflections:

"We haven't laser-focused on a Cohort definition of what family engagement means. There is dissonance and ambiguity with the frontline – they define family engagement as providing families with a service vs. family engagement as relationships over service."

"They realized that they can't do anything unless they have the right people at the table: family voice on committees, etc. Last year, this was a foreign concept."

Increase constituent engagement.

While this was and continues to be one of our greatest challenges (see section F), each Cohort agency has increased meaningful engagement of those personally involved in system interventions. Most parents in the community (especially those who are familiar at all with child protection), do not view county intervention as helpful, much less healing. With a long track record of punishment and separation, it is very difficult for parents to trust any involvement with the child protection system.

EXAMPLES of actions:

- Held a series of community cafés with community parents

- Included youth voice in Family Involvement Meetings – a family inclusion model that allows families and youth to have an active role in the decision-making process, especially around placement decisions.

- Included foster parents in department trainings, helping them understand the trauma of removals and repositioned foster parents as support to birth parents and their families

- Removed glass between staff and community at front desk

- One agency is implementing foster parent to birth parent mentoring. Slow to gain traction, more resources and a community partnership is developing to focus on building this mentoring opportunity.

- Parents formerly engaged in the child welfare system in one agency were sent surveys assessing their experience. Very few responses were received, indicating opportunities to deeper connect and partner with parents throughout the process.

- One state has a robust, state-wide parent partner program for system-involved parents to have an advocate and support.

Advice for LEADERS:

- Work on risk tolerance of everyone at the table or parent involvement will be tokenism. Having parents on your committees isn't enough if the others are not ready to listen and value what they say.

- Help the staff walk in another direction. Even if they thought staff were doing trauma-informed care and a new way of work already, ask them to do it intentionally."

- Heed the advice of a staff member: *"We try to meet the family where they're at, and have them be as much in control of the plan, and just be more of a guide, and within our rules that we can do to keep the kids safe, and keep them at home, and the family's getting the breaks they might need so that the kids can stay there."*

Strengthen families rather than remove children.

Make it your goal and unwavering commitment to lovingly support healing and provide resources rather than punish families and strain relationships. It is our mandate and value to ensure children are safe from physical harm, meaning, an adult or adults are providing the basic, tangible resources for living. Just as important as *being* safe, is *feeling* safe. Avoiding the traumatic disruption of removal to ensure children experience an uninterrupted sense of feeling safe is critical. There is almost always a connected placement option if enough time is taken to look and the resources are allotted to make it successful. We must check our biases and reassess our own judgments, recognizing that there is a difference between unsafe and dysfunctional. It is more important for children to feel and be safe from harm than it is for the system (us!) to feel we are safe from criticism.

EXAMPLES of actions:

- Prevention journals were given to staff specifically to record thoughts on the definition and practice of prevention.

- Bringing agency finance staff to an in-person Cohort meeting helped teams consider how prevention can be funded, if it is not something they can currently reimburse for or have funding to support.

- Agencies are leveraging other financial assistance like child support to offer relief to stressed families. Child support workers can release debt owed which allows a non-custodial parent (often fathers) to become more involved.

- Economic Support teams are being brought in sooner and more often to ensure families are accessing all eligible financial support available.

- A list of preventive support services available in the surrounding areas was developed and shared among all staff.

- After mapping policies, best practices, and resources for unlicensed kin care to support them caring for youth, a kinship navigator program was launched last year. This program is available to relative and fictive kin when children are placed with them.

- One jurisdiction began offering a subsidized guardianship in July that allows for a financial payment to a legal guardian for youth who may not want to be adopted and/or TPR is not desirable.

- Every agency is considering ways to leverage housing as a resource by potentially purchasing properties or offering financial assistance for housing to stabilize families.

- Withholding family visits is no longer used as punishment for youth at an agency's congregate care site.

- An offer to operate a new, state-funded emergency shelter was turned down, as it directly opposed prioritizing family support.

- When new riders call for transportation, they are asked to identify at least one connection, "Who do you call when times are tough?" as part of the intake process.

- Family connections are recorded at intake, building a support team right away. Family genograms highlight the names and contact information of which connections provide support to the family.

- Calls are no longer screened out. Rather, the agency sees it as an opportunity to offer support to families.

Advice for LEADERS:

- Share specific challenges with your state human services department: situations where you were unable to find kin, or supports you knew would help were not available in your community, or there appeared to be no budget line item to bill to.

- When you become so focused on resourcing families to stay together, beware of the shame response that can happen when a circumstance does arise where a child is placed out of family. Workers may feel they have failed or be afraid of what you will do or say, so be sure to offer your understanding and support of a difficult situation.

- Leaders must celebrate even small successes to help staff know what success looks like. Even if a placement must be made, ensure the child's connection to loved ones remains.

- Leaders must help staff know that it's *not* about keeping kids home in unsafe environments just for the sake of reduced numbers.

EXPAND THE GROUP OF HELPERS

You as leaders need helpers, and families need helpers. Systems won't change without the support of interdependent systems, and families can't get through struggles alone. More people bring more ideas and more solutions. More helpers also means sharing the risk. If the team decides on a course of action and it fails, no one person takes the fall.

For agencies, getting board and other stakeholders on the same page is not necessarily a prerequisite to getting started toward mindset and practice shifts, however, getting buy-in from the Board of Directors and others with influence on your process early on is extremely beneficial. Developing alignment with key staff, community members, and governing bodies will be needed eventually, so the sooner you can build relationships with them and help them understand the WHY and HOW of what you're doing, the better. Without it, they have the potential to significantly derail your progress in the future. Nobody who has influence wants to be out of the know when big changes are happening, so include them as soon as possible.

STAFF experience:

"I can't emphasize enough the importance of the partnership that we have with our contractors…and their agencies, because if it wasn't for those two leading their charge in their agencies, there wouldn't be this table full of people aiming for the same thing."

"And I mean it's hard when all of your work, and support, and intervention, and knowing can be undermined in one decision from another system."

"We still have folks reaching out to us saying they want to be foster parents. How can we tap into those community volunteers and that community interest and utilize that service in a little bit different way?"

"What you're asking us to do is to go into there and do more with them [families]. And I'm fine with doing that, but I need more help, and I need some resources."

GUIDE reflections:

"In the beginning, I wasn't sure if I was contributing. Now I feel I have a more valued voice – as a parent, victim, now recovered. I can speak to the importance of peer mentoring and meeting people on their level."

"Relationships are important but there is a right time and place for all to join in eventually. May not be now for everybody."

"They realized they can't do anything unless they have the right people at the table – family voice on committees, etc. Last year, this was a foreign concept"

Build external allies.

Getting up front and moving toward prevention means connecting with others in the community who may spot a struggling family before you do. Honor the "yellow flags" and work with those in your community (like schools) to identify families and offer support before abuse and neglect has a chance to take place.

Strong, trusting partnerships with your colleagues in the judiciary are particularly critical to this work. As you know, judges can derail a delicately built family support plan if he or she is not aligned with the vision of keeping families safely together or educated on the traumatic effects of separation.

EXAMPLES of actions:

- After a tragedy in a neighboring community, one agency reached out to their law enforcement team. They brought pie and a note of encouragement, offering their help.

- One agency took the new sheriff out to lunch.

- A county held trainings on trauma for community partners.

- An agency focused on building relationships with the Department of Justice and worked very closely with the county supervisor, and state intake director. As a result of this crossover work, the agency has seen an increase in partnership, teaming and joint case management.

- A current school program began emphasizing families with even younger students (2nd grade and under), to offer help sooner, when needed.

Advice for LEADERS:

- Constantly evaluate who you can bring on board with this work. Who in the community can you have a cup of coffee with this week to talk about prevention? Being a phone call away from community partners who have your back can mean all the difference with reaching families before safety becomes a concern.

- Many judges want to know more – what are their other options for placement or services? They act on what information they are given, so be sure to keep them informed and updated.

- Find common ground with those not aligned with your approach. This takes advanced interpersonal skills, an inner zen, and a lot of investment of time -- and the reward is great.

- Have consistent meetings with schools and law enforcement *in a spirit of nonjudgment and support.* There are likely a lot of overlap in families on your radar.

- Kindergarten and Head Start sites can also help connect you to families with very young children who need support.

- Shift your time towards building relationships. Invest your time into the staff and community partners.

Leverage state support.

One of our Iowa jurisdiction Cohort leaders is the Bureau Chief of Policy for the State of Iowa. The DHS state leaders in Maryland, Wisconsin, and North Dakota are all supportive of system redesign efforts that preserve and strengthen family connections. Whether your state leadership is or isn't, be in touch with them often. Let them know what you are up to, why you think it's important, and share in any successes you have. Their trust in you means they are more likely to have your back when challenges arise in public opinion, financing, or other areas.

EXAMPLES of actions:

- There is currently a "perfect storm" in Wisconsin (where Eau Claire and Waupaca County are located). There is a new state DCF secretary and key finance position, both of whom are individuals who value a shift toward prevention. The Wisconsin County Human Service Association current and former presidents are agency leaders, and the former First Lady of Wisconsin was long-time trauma champion.

- In Iowa, a leadership group at the state level quickly aligned around the Cohort aspiration where "family connections are always preserved and strengthened." They call themselves the "G5" group.

- North Dakota is in the middle of a DHS redesign. Initially, Cass County joining the Cohort seemed like good timing to ask for and implement change. Currently, the redesign is more complicated than expected, and the unknowns and unpredictable nature of change are making moving through change difficult in Cass County.

- State leadership in Maryland was an early supporter of the UnSystem Innovation Cohort, and continued to offer support throughout.

Advice for LEADERS:

- Acknowledge the nuances of your system. Change looks different based on the dynamics of a system. In particular, state-led and county-led systems have different advantages and challenges.

- You need to make the new way of work important and clear to your board even though many of them are not social workers by profession.

Help fill gaps in services.

Assist your community in developing needed services that don't currently exist. In particular because Cohort jurisdictions represent largely rural areas, services are limited. There simply are not the services available that families need, like housing, (specialized) drug and alcohol treatment, or services to support highly traumatized children with complex behavior challenges (read: trauma responses).

EXAMPLES of actions:

- Performance-based contracts are used for group care providers and include terms prioritizing family connection. For example, contracted services include performance measures limiting the length of stay, prioritizing a child's discharge to a family-like setting, and trauma informed competency requirements.

- An Attorney General was hired to provide legal counsel to the Department of Human Services staff and to represent the department on cases in juvenile court.

- Leaders work with local county commissioners, department board members, and other agency partners to leverage support for families.

- One county is working to change their well-grooved role in the community as the "end all, be all" for people and partners and leaning on community partners to support families in other ways. (Note: some are not pleased about this changing relationship and feel like DHS isn't "doing their job," especially when they feel a removal is necessary.)

Advice for LEADERS:

- Leaders must promote change internally at first and help everyone understand the vision…but external relationships are key to long-term change. No agency can do this work in isolation.

- Have courageous conversations with your stakeholders – don't just ignore those who don't agree with you.

- You need to have some community support and engage others involved in prevention work: health care, day care, child care, housing – so it doesn't escalate to child welfare.

- Change in one system doesn't mean that other systems will accommodate the change – just because your system wants to be progressive doesn't mean other systems are going to remove those barriers – and other systems are closely tied to the same families.

Bring in family supports.

Begin to see your role more as convener than leader or judge. Let families involve their own "people" and share decision-making power with the team of informal supports. Include parents and (with permission) anyone who loves them into the circle, like friends, neighbors, therapists, and other healers to lift up parents to create safe spaces for kids at home.

EXAMPLES of actions:

- Child Safety Conferences (or Admin Safety Conferences) are so successful in keeping kids home in large part due to the expanded team – both in staff and informal support of parents.

- In order to build a broader team of support, one county's workers ask the question, "Who else cares about this family?" These individuals can be suggested supports when needed.

- Parent Partners is a state-run program in Iowa. A parent who has experienced the system is trained and supports a parent currently system-involved on how to navigate the demands and cope with grief.

Advice for LEADERS:

- Not all families are at the point of sharing this part of their life with others. You have to meet them where they are and do what is comfortable for them.

- Having a room full of people all working to help a family keep their children at home can send a very powerful statement – and can be overwhelming to the family as they walk in the room. Take steps to prepare families to understand the purpose and the process.

- Direct supervisor and leadership involvement are crucial.

- Parent Partners or other similar programs can allow for an intermediary to absorb some of the risk and act as a buffer to help the family navigate the system. Use them in this role. For example, a system-engaged parent may not want to report every situation update to a social worker for fear of what they may be obligated to do. A Parent Partner, however, can triage the information and help the family navigate the appropriate next steps.

F. Obstacles and challenges: Let's be honest

It's tough work to envision and build UnSystems – new ways of work with characteristics unlike any system that currently exists. Openness and generosity are hallmarks of an UnSystem, so sharing here the bumps and wrinkles is a must. Real talk, here are some of the ongoing challenges we face:

Race equity. We consider it extremely important and a real and compelling presenting issue...and have spent very little time on it. The disproportionality of black, brown, and Native families who are system-engaged has clear and direct roots in racist policies and practices. As a Cohort building a new way of work with families, we must do a better job at recognizing and dissolving the causes and effects of inequity in child welfare. The Cohort agencies exist largely in rural communities with few people of color, and part of our initial work is elevating conversations about how policies steeped in white supremacy have created these conditions.

Family voice. All five of the Cohort agencies have made advances here, but not near to the extent we know is necessary. Iowa has the most robust Parent Partner program and Wisconsin is at the beginning stages of implementing something similar, with baby steps. We *know* that involving birth parents more deeply in planning and decision-making at every level will lead us to better outcomes for *every*one. It's taking the time to plan events, make phone calls, organize meetings, determine which questions to ask, compensate for participation and have the commitment to follow-through that is a great (and worthy!) challenge.

Lack of community resources. Social workers in the Cohort agencies could work arm-in-arm with families and identify precisely the support needed to address a family's current needs. However, those resources or services don't always exist, especially in smaller, rural areas. Community services like trauma-focused alcohol and drug treatment, financial support for kin carers, housing, and intensive in-home behavioral support for highly traumatized youth are often not accessible.

Trickle down of vision and practice. Insights and visions of leadership take time and repetition to become absorbed in an organization. From the leader, to the leadership team, to the line staff, and then to families – the pace and lag can be surprising and frustrating. It can feel to leaders like they have been repeating themselves for months (and they probably have been!), and staff will still have reservations, misunderstandings, and pushback.

Capturing accurate and meaningful data. It turned out to be harder than we expected to quantify the data points that capture the changes happening as a result of the Cohort work – and then to collect numbers from five jurisdictions that measure the same things at the same point in time. How do you calculate the impact of prevention efforts that keep kids *out* of the system entirely? What are the relevant numbers to measure change? What data points should we start to collect as part of the new way of work? We acknowledge the importance of quantifiable data – and the current difficulty in obtaining it.

Cohort Guides: finding, changing, and defining their role. Finding professional and (especially) lived experience guides has been difficult. In our experience so far, they tend not to be able to roll the Cohort work into their professional work, which makes the time commitment particularly challenging for them. Several guides that started with the Cohort in the beginning had to transition off (in part for that reason), and getting to know a new guide is challenging for the leaders. It takes time for guides to get to know the agencies, and for the agencies to understand where guides can help; one leader likened the guide relationship to an arranged marriage. The guide perspective has been critical to our process, and leaders are thankful for the support, *and* it takes a while to figure out how to "be" together.

Resistance among staff. At times, morale has been low among some agency staff, shame responses have appeared, workers have resigned, and leaders have had to go back to trust-building and doubling down on workforce wellbeing. There is certainly not 100% buy-in of this change among staff, and sometimes the leaders are surprised by when and how pushback happens. Even though we knew there were growing pains coming (with more to come), it's still tough.

Values in prevention – there is not yet enough to go around. Shifts don't happen all at once, and resources are moved bit by bit. What this looks like in real life are a lot of families who need a lot of intervention and prevention support and leaders must choose who to invest in and to what extent. If, say, an agency hires a new in-home support specialist, does every family get one hour per month, or a few families get 10 hours a week? An analogy we use is a hypothetical dose of life-saving medical treatment. Do you give everyone part, or one person the whole dose? Giving everyone some may alleviate a moment's suffering, yet saves no one. Determining criteria for delivering support services and measures of success is a complex and emotional task, laden with values and risk tolerance.

Community pushback. "If you're not removing kids, you're doing nothing." Some community members can interpret (and have voiced loudly), the slow-down in child removal as being focused only on the bottom line as an organization. "It's cheaper not to have kids in care," and therefore may think an agency is not really concerned about the safety of children. This is, of course, not the case, and takes a lot communication and trust-building to undo.

Idea crowdsourcing challenge didn't work the way we hoped. In September 2018, with the support of ignite! Innovation at Optum Health, we hosted an idea crowdsourcing challenge open to *every* staff member at all five Cohort agencies. This crowdsourcing challenge was held on an online platform where staff were invited to submit ideas on how "family connections are always preserved and strengthened" could be realized in their agencies. Over 1000 unique visitors submitted nearly 200 ideas. Via agency-wide voting, top ideas were advanced, and several ideas were championed by staff members who volunteered to workshop the ideas toward implementation. However, there was not a clear enough mechanism built in to assess, advance, and follow through with top ideas, or to follow up with those who submitted ideas that were not taken up. Instead, staff initially felt excited about being asked to co-create solutions yet were disappointed with the lack of follow-through. Perhaps we did this too early on in the change process.

Not just building a kin-based foster care system. A focus of this year has been on ways to support families to keep their children safely at home, and on prioritizing kin care arrangements. We also caution ourselves against simply building a system that closely resembles our current system, just replacing kin with stranger foster parents. What we are actually trying to build is a *different way of work* where parents are supported by the community when family challenges arise rather than tweak foster care. Further, foster youth may experience the dissolution of a kin placement as more traumatizing than the initial removal. We must ensure that kin care placements are handled with ongoing care and supported for stability.

G. Going deep instead of broad

Alia has an indefinite commitment to the UnSystem Innovation Cohort! Supporting this group of people is a joy to us, and we will equip them to test and build new ways of supporting families on a systems level as long as they want to stick with it.

Cohort years 2 and 3.

As a collective, we plan to work with parents and community members in more focused and substantive ways. We are also constantly trying new ways to align with adjacent stakeholders like judges, juvenile justice, law enforcement, and schools. Nurturing workforce wellbeing is a consistent goal as is raising the resources necessary to strengthen families and make the shift toward prevention.

The next part of our focus group evaluation in each jurisdiction is with parents currently or formerly receiving services. To give us an indication of how and where the changes that are occurring among leadership are trickling down toward work with families, focus groups will be conducted.

Each agency also has a different focus area specific to their current challenges:

- **Cass County** will be working on fortifying their staff to withstand the changes and investing in workforce wellbeing and building trust among their team. Also, they are building community capacity to fill gaps in resources that don't exist in their area that are required for primary prevention like sufficient housing supply and employment support. They are putting time and resources into building deeper connections with specific cultural groups in their area and to support those serving parents with felony records.

- **Eastern Iowa Service Area** continues to focus on keeping all children with kin, and employing more incentives to their services community to leverage support. They are also proceeding with caution so as not to simply develop Foster Care 2.0 with kin, instead becoming truly focused on shifting toward preventing maltreatment by developing supports for families, not by administering foster care. They also will administer new contracts based on the aspiration where family connections are always preserved and strengthened.

- **Eau Claire County** will build on the training and encouragement they have offered to connect in a deeper way with their leadership team and entire staff. Many staff want to play a more active role in creating the change. By investing in the Intensive Permanence Services, they are goal-setting to achieve permanent, loving placements for youth who have been in care for an extended time.

- **Washington County** will identify barriers in procedure, policy, and culture that hinder a prevention approach and leverage support from their state leadership to make deeper up-front investments in families.

- **Waupaca County** has plans to get clear on the actionable and measurable change they are trying to make and include more members of the community in the process. They will continue to gather data on the success of their primary prevention efforts and continue to investment in prevention work with families.

Proof of Concept Alia is under no contract or agreement with the Cohort agencies, though informally we've all agreed to keep meeting through 2021. Because Alia is so focused on demonstrating that a shift to primary prevention is possible, we will focus more on this group rather than starting a new Cohort. What we do not want is to water down our and their efforts to the point of losing what is happening, missing what is working and what's not, and capturing the process diligently. Our goal is to work with partners to *prove the concept* that this shift is possible, and then offer ways of getting there. We're still learning and experimenting and don't feel ready to expand quite yet. (Though we're not ruling it out…)

UnSystem funding from Margaret A. Cargill

A generous grant from the Margaret A. Cargill Philanthropies (MAC-P) provides "UnSystem funds" to the three Cohort agencies that fall within the MAC-P service area. These funds are to build community capacity, partnerships, and/or needed support provided directly to families that might fall outside eligible reimbursement. Part-time Community Cultivators are also dispatched to the three agencies to support these UnSystem efforts. We will determine how to best evaluate the effectiveness of these funds and report accordingly.

Proof of concept/building the evidence: We are continuing to build the library of evidence to prove that there is a better alternative to stranger foster care. We strive to develop a new way of work that holds family bonds sacred and resource these connections and capacity up front so an interruption is never necessary. Foster parents will still be needed to support birth families and other members of the community will play new roles to strengthen family connections.

How can you be involved?

Please, utilize this case study as a conversation piece or to glean tips and strategies from those who have forged a path toward creating a prevention-based child welfare system. Access other resources on the Alia website like the social return on investment study demonstrating the significant negative return on the way we are currently doing foster care, and the research brief summarizing current academic literature on the effects of child removals. Reach out to others who are involved in creating a new way of work. Regardless of how you start, we hope you are inspired to join, learn from, and add to the momentum toward creating a *just* child welfare system that supports first families.

We don't want to blow up the foster care system! What we really mean to do, with so many other changemakers who know it's time, is to *obsolete the need for foster care* by supporting families, starting with child welfare leadership. Let's work together to help parents to safely parent and to prevent out-of-family placements.

What are we missing? We welcome any questions or comments about what you've read here. Please contact us at info@aliainnovations.org.

H. Appendices

a. Guiding Principles

b. Change Framework

c. An UnSystem Visual

Guiding Principles for an "UnSystem"

The following is a list of guiding principles for an "UnSystem," an idea born at the 10 of 10 for Kids national convening in May, 2017 that brought together 100 innovative thinkers from around the country and IDEO to redesign child welfare. When the four-day event ended, we had not identified a new design for child welfare, rather we had thirty prototypes for programs, services, and apps; thousands of post-it notes; hundreds of evaluations; and many new partners and friends. As we continued to analyze all the information before us, some clear themes began to emerge around locally delivered, family-driven, culturally specific community supports focused on building wellbeing and resilience.

Continued conversations and information gathering, including an additional listening session with the 10 of 10 designers, resulted in identifying the following guiding principles. Those who are committed to a new way of supporting children and families are challenged to uphold these Guiding Principles.

- ## Protect relational connections as sacred

    We regard trusting relationships and secure attachments to specific people (biological family members and self-identified "family") as the foundation of lifelong wellbeing. Connections to communities (geographic, faith, cultural, and other) and attachments to traditions should also be treated as necessary for survival.

- ## Trust the wisdom of children and families to design their own futures

    We view families as their own experts, whole, undamaged, and capable. We defer to families (to the extent safe and possible) to decide what they need, what services they receive, and who is involved - to be architects of their care. We support the personal journey of every individual and family to becoming as capable as possible in determining their futures.

- ## Commit to intergenerational wellbeing

    We know trauma that occurs in families must be healed within families. Targeting one young person or family member within the family unit is insufficient for long-term family and community wellbeing and resilience.

- ## Insist on racial equity and radical inclusion

    We challenge the individual bias and structural oppression present in the child welfare system as evidenced by the overrepresentation of people of color. Racism, ageism, homophobia, and all other forms of bias and systemic discrimination are vigorously identified, challenged, and rectified.

- ## Dare to share power

    We recognize that by working together we can come up with better solutions than we can alone. Agency leaders with agency workers, workers with families, workers with other workers, and agencies with other agencies: seeking other perspectives and employing shared decision-making will lead us more quickly to solutions that work.

- ## Nurture the capacity for joy

    We see the ability to experience and express joy as a measure of wellbeing, an expression of every person's birthright, and only accessible when other foundational safety needs are met. We vow to create space to nurture widespread wholeheartedness where young people, families, workers, and leaders are safe enough to express vulnerability, hope, bravery, and joy.
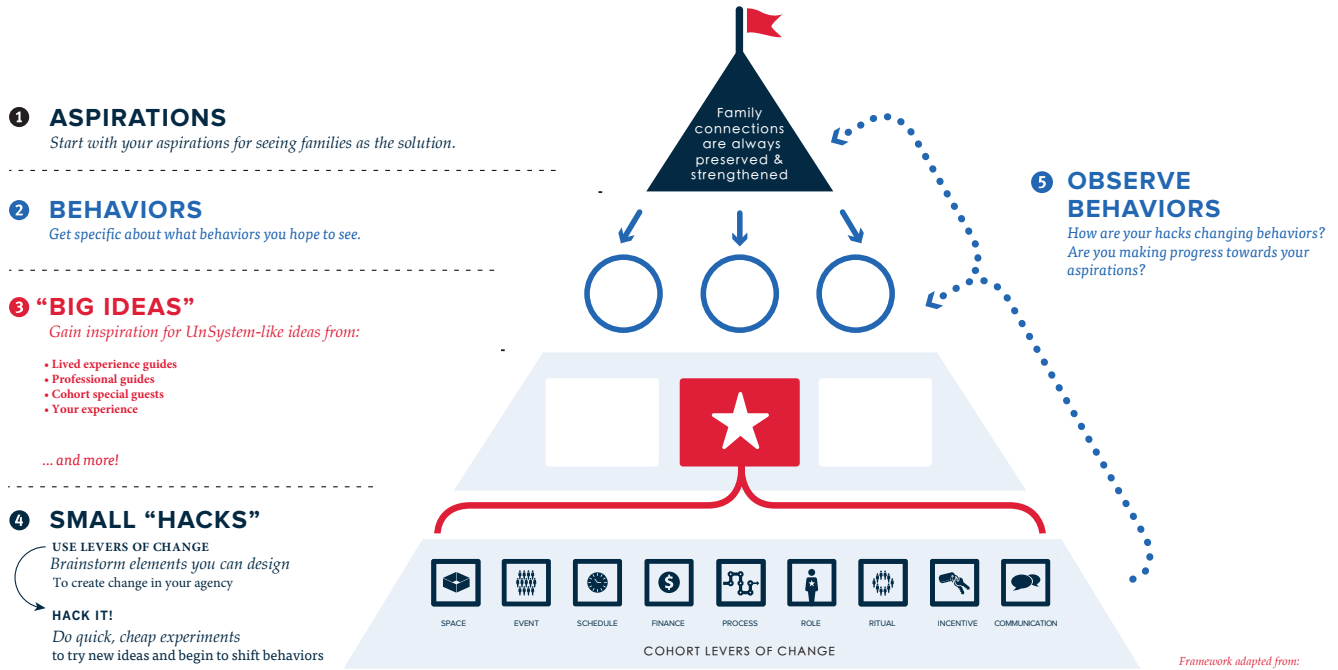
And when in doubt, *DO WHAT LOVE WOULD DO.*

Guiding principles compiled by the team at: Alia

Innovations for people and systems impacted by childhood trauma

CHANGE FRAMEWORK

Alia Innovation UnSystem Cohort

❶ **ASPIRATIONS**
Start with your aspirations for seeing families as the solution.

❷ **BEHAVIORS**
Get specific about what behaviors you hope to see.

❸ **"BIG IDEAS"**
Gain inspiration for UnSystem-like ideas from:

- Lived experience guides
- Professional guides
- Cohort special guests
- Your experience

... and more!

❹ **SMALL "HACKS"**

USE LEVERS OF CHANGE
Brainstorm elements you can design
To create change in your agency

HACK IT!
Do quick, cheap experiments
to try new ideas and begin to shift behaviors

Family connections are always preserved & strengthened

❺ **OBSERVE BEHAVIORS**
How are your hacks changing behaviors? Are you making progress towards your aspirations?

SPACE   EVENT   SCHEDULE   FINANCE   PROCESS   ROLE   RITUAL   INCENTIVE   COMMUNICATION

COHORT LEVERS OF CHANGE

Framework adapted from:

BIG IDEAS BY JURISDICTION

Cass County

- Mindset and language shift to align staff and community toward aspiration
- Increase family voice and involvement
- Developing community partners (sharing responsibility)

Eastern Iowa Service Area

- Provide incentives and resources for kin-care
- Align policy, practices and resources to prioritize kin-care
- Align and communicate efforts internally – especially with leadership

Eau Claire County

- Build internal capacity to serve people better
- Shift staff mindset – as a first step in shifting priorities
- Decrease number of clients utilizing deep-end care

Washington County

- Make the process of doing removals harder to do
- Take a multi-disciplinary approach to the work
- Educate and build relationships with community partners

Waupaca County

- Build external relationships and trust
- Invest in staff wellbeing and internal readiness
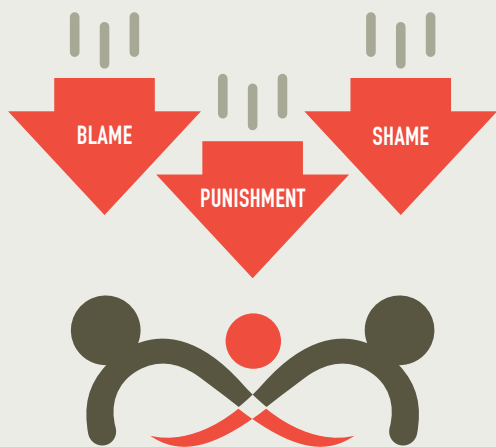- Shift processes to 1) preserve and strengthen family connections and 2) reinvest savings toward prevention

Traditional Child Welfare System

Current child welfare approaches often UNDERMINE the family system

BLAME

PUNISHMENT

SHAME

The current system adds more pressure on families in times of challenge, which undermines family wellbeing and healthy childhood development.

An UnSystem

UnSystem approaches BUILD family wellbeing and support healthy child development

Whole family at the center

Natural community supports

Focus on building resilience, joy, wellbeing, and health

Value and build rather than disconnect family ties

Local resources delivered immediately

Family-driven, culturally-specific supports

Supportive, consistent connection

Alia
www.aliainnovations.org

BUILDING AN UNSYSTEM:
A Child Welfare Leader's Guide to Transformation

Alia UnSystem Innovation Cohort
YEAR ONE
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