Reflections from the Integrating Family Services Management Team

In honor of Lara Sobel, Barre District Office Social Worker, DCF-Family Services

It’s hard to know how to express in words our thoughts and feelings about Lara’s death. She was well known as a dedicated, kind, and committed social worker. Following her death, at the hands of a client, a colleague shared the following statement, “Social workers always have safety concerns for themselves in the periphery; this brings it into direct view.”

Every day social workers go to work knowing they face risks, and they continue showing up because they believe that as a community we can make life better for Vermont’s children, youth and families. When we are faced with a tragedy that impacts so many people in so many ways, we must consciously choose how we will move forward. What we have seen already is our communities and colleagues have made a choice to reach out, to come together, and to offer support and care for one other. We are deeply moved by the expressions of love and support.

As with all life events that are accompanied by grief’s emotional rollercoaster, this one causes us to carefully assess the metaphorical fork in the road that policy makers and leaders in state government and in our community based organizations are facing. We can respond to the challenges Lara’s senseless death presents by tinkering around the edges of our work practices and behaviors. We might do this by increasing training related to personal safety and call it good. Or we can take another approach. We can look at the situation our social workers face every day and the ever-increasing caseloads and stressors on their time, and seek new ways of working together and invent new strategies to help families build the skills, knowledge and social capital they need to be successful. Working harder is not a reasonable response. Working smarter, and working together, is the best path forward.

We have already begun discussing at IFS what we can do to encourage our communities to find ways to increase the interdependence of everyone working in a community to improve the lives of children, youth and families. We welcome your thoughts and ideas about how to leverage the flexibility and the commitment to team work that IFS helps create.
Reflections on the tragedy involving Lara Sobel, Social Worker in Barre district office

By Donna Bailey, Co-Director, Addison County Parent Child Center

As I reflect on the horrifying events that left several family members and a DCF family services social worker dead recently, I feel the need to talk about prevention.

Many in the state, the Governor included, have made statements about safety concerns for workers - rightly so. However, we cannot necessarily stop gun violence in the moment it is happening. What I like to think is that we can help prevent mental illness from overcoming someone’s ability to make rational decisions. Our state has amazing people working to keep children safe and Vermonters healthy. We are, however, stymied by the lack of adequate funding and resources to do our jobs well.

When tragedies occur, we think about safety being security and police presence, instead of thinking about long-term solutions. There is a need for more drug and alcohol services as well as mental health services to stabilize people who are unhealthy so that violent acts do not happen as frequently. We need to support social worker by assuring they have workloads that reasonable so they can build relationships and support the children and families they are serving.

There is no way to stop every act of violence – but there are ways to teach our children healthy ways to resolve conflict and to help those who are mentally ill through de-escalating the person in crisis. We can do this by making sure that everyone has the health care, housing and economic supports needed to live a healthy life with dignity.

This is what, I assume, Lara Sobel wanted. I believe she worked for that. Maybe a smaller caseload and more resources being available to the hurting mother would not have changed the outcome in this case. We'll never know for sure.

What we do know for sure is high quality child care can make a measurable difference for children, yet we fail to adequately fund it. Our child care rates are firmly rooted in 2008 – and only at the 75% percentile of the market seven years ago. And, while it is good that we worked on Pre-K funding, it does not help full time availability of child care nor does it help with the crisis that exists in infant toddler care.

We know that a trusting relationship is the single biggest factor in enabling and supporting change. Integrating Family Services (IFS) aims to allow relationship building and avoiding movement from agency to agency and worker to worker. Through integrated services, we meet people where they are and support them, as needed, not by what eligibility box they fit in. Parent Child Centers can provide services to young families before DCF is involved, which often prevents those families from going into custody. And if a child does go into custody, there are people to support the parents outside of the DCF system. Local mental Health Agencies can help parents and children with their needs, again, possible preventing the need for DCF involvement. But these programs need support and funding.
My fear is that we will lose an opportunity to talk about prevention in our hasty reaction to another horrifying incident within DCF. Long-term supports can and do make a difference. We can keep Vermont a safer and better place to live by living up to what we all promote – a kind and open community, a place where we care for our less fortunate and have compassion for all. We need to support our direct service workers in our communities and listen to their needs while they care for our most vulnerable – every day, not just during a crisis.

IFS Milestones

Guidance for Governance Teams: Guidance for Regional Governance Groups is up on our website as a DRAFT, click here to view. Please check it out and give us feedback. Part of translating the leadership and governance element of the Integrating Family Services (IFS) model into practice includes the adoption by all IFS teams of a governance agreement. Like with all other elements of the IFS model, we are striving to strike a balance between ensuring statewide consistency and regional flexibility. This aim, coupled with research concerning human services integration efforts in other states, input from community partners and the experience of Children’s Integrated Services (CIS), informed the contents of this document. While it is up to each governance team to establish its own governance agreement, this document is intended to provide guidance to IFS regional governance teams in that process.

Learning Community Call

On June 30 IFS did a Learning Community call with Al Gobeille, the chair of the Green Mountain Care Board. The call was to talk about the changing relationship between traditional medicine and human services. Al spoke about the ways in which traditional medicine understands that if the human service side of an individual’s or a family’s life is not healthy, there is only so much they can to in the area of reducing medical costs. He talked about the Blueprint and the work they are doing in communities to bring traditional medicine and human services together to work together to develop comprehensive community plans to insure a holistic approach to health.

Turning the Curve on the Number of Children and Youth in Residential Placements

On June 24th the Agency of Human Services held an initial dialogue to discuss our increased concern about the number of children and youth in residential placements. We intentionally began with an internal meeting so we could gain a common understanding of the issue and determine if we had enough capacity and resources to commit to moving this discussion forward. This afternoon meeting was attended by folks from all areas of AHS and a representative from the Agency of Education joined. We had three main points that we addressed during our time together:

We have a shared concern about the increasing number of Vermont children and youth who are placed in residential programs, including out-of-state placements.

1. We have identified a problem that needs to be resolved: our trend lines for residential and out-of-state residential are going in the wrong direction.

2. We want to see if we can do better than we are doing now.

The afternoon was dedicated to reviewing the trend lines for residential placement, the current system of
care in Vermont and we had small group discussions to begin brainstorming where we see opportunities to turn the curve by addressing the issue from all levels of the system of care. You can find the full PowerPoint we used for the meeting [here](#). The last few slides include the notes from the small group sessions.

At the end of our meeting, there was resounding energy and commitment to moving this dialogue forward. We are creating concrete next steps to include our partners in this important discussion. IFS regions, Addison and Franklin/Grand Isle, are already engaging in spirited discussions about how they can creatively think about bringing children and youth in residential placements back to their regions.

Please feel free to reach out to any of us with ideas, suggestions or thoughts as we move forward to ensure that we are doing what is best for all of Vermont’s children and youth.

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**Work Groups Are Moving Ahead!**

In May the work groups launched to move forward the work goals from the Strategic/Plan Work. Updates on the progress being made can be found on the IFS website listed by work group. The four work groups are:

1. **Accountability and Oversight**
2. **Community-Based Prevention and Promotion**
3. **Leadership and Governance**
4. **State and Local Service Delivery**

As well in July the **Finance and Payment Reform** re-kicked off with an interesting discussion about where Finance and Payment Reform is headed in Vermont. This work group is being chaired by Susan Bartlett (AHS Special Projects) and Heather McLain (Revenue Enhancement Director, DCF-Family Services). The work group started with a thought-provoking activity related to how one thinks about money both personally and professionally. We hope to harness that energy in a positive way to move us forward so Vermont can provide the right services at the right time to children, youth and families eliminating the funding barriers that can get in the way. View the PHPG Crosswalk [here](#).

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**IFS Says Goodbye to Sarah Merrill**

Sarah Merrill, Quality Director for the Children, Adolescent and Family Unit for the Department of Mental Health, will be leaving her position in early October. Sarah has been very involved with many IFS efforts including the Quality Review Team, tri-chair of the Accountability and Oversight work group and is always willing to provide input and thoughtful reflection about the best way to ensure quality is provided to children, youth and families. We will miss her thoughtfulness and team approach. We wish her all the best in her future!

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**Welcome Kate Dearth to IFS!**

IFS is incredibly lucky to have a Master’s in Social Work intern who will be joining our team on September 2nd and staying through next May. Kate comes to us with incredible energy and excitement about the work we are doing—she specifically reached out to IFS about doing her placement here because of the systems
level work she heard was occurring. Kate has tremendous knowledge and experience working with children aged 6 and up through adolescence. Kate has worked for CenterPoint Adolescent Treatment Services for the past few years. Kate will be here two full days a week and we hope you will stop in and introduce yourself to her and share with her your role at IFS. I’m sure many others will meet her as she “integrates” in to her role and starts joining work groups and other planning efforts occurring.

Vermont Collective Impact Conference: Moving Beyond Collaboration to Transform Our Communities
October 20, 2015 • Lake Morey Resort, Fairlee, Vermont

Collective Impact is a powerful approach for engaging cross-sectoral participation in collaborative efforts to achieve substantial impact on large-scale social issues. As outlined in Kania & Kramer’s 2011 in the Stanford Social Innovation Review, successful collective impact initiatives typically have five conditions that together produce alignment and lead to powerful results: a common agenda, shared measurement systems, mutually reinforcing activities, continuous communication, and backbone support organizations.

On October 20, United Way of Chittenden County, UVM Medical Center, Vermont Community Foundation and Chittenden County Regional Planning Commission will host the Vermont Collective Impact Conference. At this statewide, one-day conference, we will convene community partners, business leaders, nonprofits, government at all levels, funders, policy makers, advocates and other stakeholders to explore how we can build our communities through Collective Impact. This conference will feature keynote presentations and sessions led by Greg Hills, Managing Director of the Leadership Team at FSG, and will focus on understanding the essential elements of the Collective Impact approach and how Collective Impact strategies align with the Results-Based Accountability framework. Participants will learn about successful uses of the Collective Impact approach in communities across the country, and how these strategies are being applied in Vermont. Participants will leave with a better understanding of essential concepts and factors of success, as well as information and tools to help them assess the readiness of their own communities to engage in a Collective Impact approach. Details and registration information can be accessed by clicking here.

Links to Articles of Interest

The following article was discussed in a recent State and Local Service Work Group.

1. Toward An Understanding of Traumatized Organizations and How to Intervene in Them. The thesis of this paper is that organizations, just as individuals, can suffer from trauma. The nature of an organization’s work directly impacts the culture of the organization: organizations that provide services to traumatized individuals, families and/or communities are susceptible to becoming traumatized systems. The effects of trauma influence an organization’s identity and worldview in the same way that an individual is influenced by her/his trauma experience. This article explores the phenomena of organizational trauma. Recommendations are proposed for assisting traumatized organizations to recover and for intervening in a preventive way with organizations at risk for becoming traumatized. This framework of organizational trauma makes it easier to identify the systemic and inherited aspects of trauma, improve organizational
functioning, and enhance resilience. Ultimately understanding organizational trauma and helping traumatized systems to heal offer hope for the future. Click on this link to view the full article.

- "The Biggest Mistakes in Managing Change" by, Carol Kinsey Goman, Ph.D. The following article briefly and powerfully articulates the lessons learned when organizations and individuals are managing change. Check out the 9 Most Common Mistakes AND what you can do to avoid them! Click on this link to view the full article.

For general questions about IFS, contact any of the IFS Management Team members:

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OR

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