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FCNBcps CLIFF NOTES

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This publication is part of a series created to assist counties with the implementation of family-centered, neighborhood-based child protection services. The tools and helpful hints produced herein are a by-product of the materials and documents provided to PCSAO by staff at the Cuyahoga County Department of Children Services; the Hamilton County Department of Human Services; the Annie E. Casey Foundation and the Institute For Human Services. In some instances these materials have simply been reproduced. In other instances we have taken the liberty of interpreting and reformatting the information to enhance its usefulness.

This issue focuses on:

BUILDING PARTNERSHIPS WITH PUBLIC AND PRIVATE PROVIDERS

The Standards For Effective Practice that link to this topic include:
1.1 Management of the PCSA; 1.2 Policies and Procedures Manual; Staff Orientation and Training; 1.8 Confidentiality; 1.10 Child Fatality Reviews; 1.11 Program Evaluation; 1.14 Request For Proposals; 1.15 Contract Development; 1.16 Provider Relations; 1.17 Evaluation of Services; 1.18 Managing Systems of Care; 2.3 Case Staffings; 4.1 The Child and Family Assessment; 4.2 Developing the Case Plan; 4.4 Reasonable Efforts and Removals from the Home; 4.7 Case Closure; 6.3 Supportive Services For Foster Care Givers; 8.12 Post Finalization Services.

I. RELATIONSHIPS ARE PRIMARY: Summary

Whenever the topic of partnering with local child and family serving providers is brought up some of us see bursting opportunity; others react as if the notion is a must do, necessary evil; and others want to run and hide. The fact of the matter is that, as with most things, what we attend to gets accomplished and what we curse becomes the bane of our existence. On a daily basis we are either forging new partnerships; maintaining and/or enjoying healthy partnerships or licking wounds from partnerships gone awry. Often times, we are guilty of taking our relationships with other providers for granted or have ascribed a value [good or bad] to them and treat them accordingly. Our perceptions of other providers [accurate or not] have long lasting implications and sometimes dire outcomes for our consumer population. While we know that our perceptions can get in the way of effective service, we sometimes attach labels and judgements rather then finding the commonalities and moving forward from there. We need to remember that *RELATIONSHIPS ARE PRIMARY AND EVERYTHING ELSE IS A DERIVATIVE.* We cannot afford to write-off our more challenging partners and only cling to our partners who are in sync with our way of thinking. If it is only, and always about the children and families we serve, then we must rise above the baggage and unsatisfying histories; seek out new and innovative partners in places we have failed to look before; and begin to attend to, and forge new ways of partnering with those who serve the same population as we do. However, before we can begin to build new partnerships and improve our current partnerships, we must understand, agree to and be willing to introduce our partners to the concept and ingredients of successful collaboration.

II. COLLABORATION: Where to Begin?

A. THINGS TO CONSIDER:

- To begin, all partners must be clear on the terminology, what they are trying to accomplish and how. Lets start by defining three terms that are similar but very different in intent and outcome: Cooperation, Coordination and Collaboration.

Cooperation:

Cooperation is short term and informal without clearly defined mission, structure or planning. Organizations share information only about the subject at hand. Each organization retains authority and keeps resources separate, there is no risk taking by involved organizations.

Coordination:

Coordination is more enduring than cooperation, relationships between the involved organizations are more formal and there is an understanding of each other's missions. There is longer-term interaction focused around a specific effort or program. Planning is needed and the roles are divided. Communication is open. There is <u>some</u> sharing of leadership, control, and risk <u>but authority still rests in the hands of the individual organizations. Resources are made available and rewards are shared</u>.

Collaboration:

Collaboration is a mutually beneficial and well-defined relationship entered into by two or more organizations to achieve results [improved services and client outcomes] they are more likely to achieve together than alone. There is long-term interaction focused around specific goals with objectives that are established by the group with new objectives developed as others are achieved. Planning is an accepted part of the relationship and is seen as positive. Communication is open. There is open sharing of leadership and control, and risk taking is shared by all members of the collaborative. Authority is shared as are resources and rewards.

We often intermix and co-mingle the above terms. Perhaps in the past cooperation was enough and even up until the past few years coordination would suffice. In today's environment however, we must build lasting and healthy collaborative partnerships if we, through our individual mission-driven organizations, are to effectively and efficiently address the ever-increasing complex issues and needs facing vulnerable children and families as a collective whole!

- To collaborate successfully, we should approach [and educate] our partners with the understanding that none of us can remotely meet all of the needs of the children and families we serve in isolation of one another. If that were the case, there would be one huge agency that addressed all of the needs of children at-risk and of vulnerable families [we have traditionally been seen as such at it is faulty thinking]. As a highly interdependent society of individuals and organizations, we need to work together to collectively address the challenges and problems facing children, families and our communities today.

- Collaboration requires that we recognize that local providers who also serve children and families probably have similar missions to that of the local public child protection and OWF [Ohio Works First] agency. While the laws, regulations, rules and policies may differ and even contradict one another at times, most child and family service organizations have a similar focus and want similar outcomes: child safety, child permanency, family stability. If we focus on what we have in common rather than our differences, we can lay a strong foundation that will allow us to forge the difficult passes later on.

- Collaboration with local providers is critical, as is collaboration among public agencies. Since approximately 80% of PCSA families are TANF families, both the local PCSA and OWF agency need much of the same information to do their work and need to access similar agencies to link children and families to appropriate service interventions.

There is a set of basic ingredients we can look to when striving to have successful collaborations. If we are to build partnerships with both public and private providers, we would do well to embrace and apply these both with our external partners and within our organizations [amongst and between our program departments].

*B. INGREDIENTS TO SUCCESSFUL COLLABORATION**

Before starting out on the road to partnering with new providers, or when trying to make sense of a partnership that has gone awry, consider the following nine basic ingredients needed to forge a successful collaborative partnership.

The nine basic ingredients needed for successful collaboration.*

1. The collaborating parties share a vision for their clients
2. The purpose of the collaboration is clearly understood by the collaborating parties
3. The respective missions are clearly understood by the collaborating parties
4. The procedures for collaboration are delineated
5. Communication is high at all phases of work including feedback [on what happens before, during and after the assignment, activity, project, case, etc.]
6. There is agency and community support for collaboration
7. The collaborating parties trust one another and believe that the parties will follow through
8. The collaborating parties are committed to working together
9. Cross system training is provided

*C. FACTORS INFLUENCING SUCCESSFUL COLLABORATIONS***

While the above ingredients must be available and attended to, to increase the likelihood that the collaborative effort will be successful, there are six factors that can increase the odds that the effort will be successful. However, if some of the following factors are unavailable at the time the collaborative effort is initiated, they can be developed over time. The challenge for collaborating groups is to be conscious of these and work to build them into the partnership. The more factors available, the greater the likelihood of long term success.

* The Institute for Human Services, 1997.
** Mattessich and Money, 1994.

FACTORS THAT CAN IMPACT THE COLLABORATIVE'S SUCCESS

Environmental Factors

a. history of cooperation or collaboration in the community
b. collaborative group seen as a leader in the community
c. political and social climate is favorable

Process/Structure

a. members share a stake in both process and outcome
b. there exists multiple layers of decision making
c. there is flexibility and adaptability amongst members
d. the parties develop clear roles and policy guidelines

Purpose

a. shared vision statement *[crafted by a cross section of individuals stating what the citizens want for all children, all families and all communities in the county]*
b. unique purpose is identified *[the unique contribution the collaborative can make to the county's vision for children, families and communities]*
c. concrete, attainable goals and objectives are agreed to

Membership Characteristics

a. mutual respect, understanding and trust is developed and maintained
b. there is an appropriate cross-section of members *[culturally diverse membership is critical: members should represent the cultural backgrounds of the client population served]*
c. members see collaboration as in their self-interest
d. there is an ability to compromise

Communication

a. there is open and frequent communication
b. the parties establish informal and formal communication links

Resources

a. there are sufficient funds *[hard and soft resources]*
b. the parties have a skilled convener

D. WHY COLLABORATIVE EFFORTS FAIL

We have addressed the definition of collaboration, have reviewed the nine ingredients of successful collaboration and have looked at factors that influence the likelihood that a collaborative effort will be successful. Knowing why collaborative efforts fail can give us further insight as to what we can do to create and enhance our efforts locally.

Collaborative efforts most often fail because there is:*

1. Role confusion
2. Power and control issues
3. Lack of mutual respect
4. Lack of participation
5. Lack of flexibility
6. Scheduling problems
7. Lack of leadership
8. Lack of cooperation
9. Lack of direct communication
10. Lack of sense of humor

III. HOW TO GET STARTED?

Whether you are currently experiencing a high-functioning, healthy collaborative partnership, are in the throes of the partnership from hell; or are considering approaching local providers to initiate the conversation regarding the need to provide county-wide [or targeted] family-centered, neighborhood-based services, there are things your staff can do to:

- stay [reaffirm that you are on] on the same page;
- get on the same page [when intractable conflict appears to exist];
- create one page [that you can all comfortably fit on].

Based on the experiences of staff from Ohio's Cuyahoga and Hamilton counties and the Georgian counties of Screven and Jenkins, the following plans, activities, and approaches can and will support your efforts at building and sustaining successful partnerships with local public and private providers.

* Adapted by the Institute for Human Services from the work by the Rapid Response Team, Children's Protection Section, Attorney General's Office, 1994.

A. COLLABORATIVE MEETINGS:

1. By phone or e-mail contact the core providers you work with/want to work with around family-centered, neighborhood-based services [avoid letters at this point - people overlook paper whenever possible!]. Contact folk who are culturally diverse and represent the client population served.

   Don't overlook or exclude the "small" providers who provide important services in the target neighborhood [even if you perceive them as radical and non-conforming]. Remember, it is important to refrain from judging potentially <u>great</u> collaborative partners.

2. Briefly explain what family-centered, neighborhood-based services are, quoting statistics on the selected neighborhood [number of children removed, % of these families in need of alcohol/drug treatment; % in need of/accessing child care; % accessing TANF; potential $ cost to schools if children have to be removed, etc.]

   Ask the provider if they would be willing to join you and other concerned service providers at a meeting to discuss the target neighborhood and what can be done to collectively address the needs of children at-risk and their vulnerable families. Tell them you will follow-up with a letter and the date of the meeting. If you have a Family and Children First Council, this process can [and should likely] involve the Council too.

3. If the agency has established a neighborhood collaborative comprised of neighborhood folk [informal and formal leaders], meet with them to discuss their interest in meeting with service providers who do not regularly attend their collaborative meetings. To get started, identify one to three collaborative members who can attend the provider session. ***You might select not to do this based on the make-up of you county. However, if you decide not to invite members of the collaborative, you will still need to discuss the need for local services, what the neighborhood thinks the needs are, and plan to present these at the provider meeting*** [in building provider partnerships, the agency must be careful to preserve, and not unconsciously undermine, its partnership with the target neighborhood].

4. *Meetings in the target neighborhood should be scheduled there whenever possible, meetings with the neighborhood and provider collaboratives should be frequent* ***[collapsing these two groups would be ideal if the providers and neighborhood collaborative are willing and developmentally ready]****.*

5. At the initial provider meeting, depending on where you are developmentally [already high functioning group; conflict-laden group, newly formed group] you may use the following agenda.

   Agenda - 3 hour meeting

10 minutes	A.	welcome and introductions
30 minutes	B.	family-centered, neighborhood-based services, why the agency selected neighborhood x to target, statistics regarding the neighborhood, profile of services planned, etc.
20 minutes	C.	purpose of meeting, desired outcomes [establish provider collaborative to look at neighborhood needs, work with the neighborhood collaborative, address service gaps in neighborhood; advocate for state and federal funding and private sponsorship].
60 minutes	D.	Mission check: Have providers post their mission statements on flip chart paper [have them do this prior to the meeting, ask that they bring it with them]. Have each provider present their mission and discuss their services; clients they serve, eligibility and eligibility restrictions, etc. Don't assume each knows what the others do, don't do, etc. Make assumptions explicit through discussion in order to break down misconceptions and faulty thinking.
60 minutes	E.	Have providers post perceptions of the other providers represented, post and review.
10 minutes	F.	Set next meeting.

6. At the second meeting, the agenda may include (1) the flip chart of the provider perceptions will be used to continue the dialogue. By discussing why we do what we do [rules, policies, regulations] we can begin to break down misconceptions and gain a better understanding as to the "workings" of each others agencies. Providers should be prepared to discuss what and how they do what they do as a way of breaking down the misconceptions; (2) drafting a mission statement and goals for the collaborative [if none exists]; (3) draft ground rules for communicating [e.g. be on time, come prepared, send an alternative if you cannot attend, one person speaks at a time, no side conversations, disagree with the idea not the person] .

7. At the subsequent meeting, the agenda may include (1) a review of client data for the target neighborhood: providers should be asked to bring data they collect regarding services provided to individuals residing in the target neighborhood; (2) a review by the PCSA/OWF agency of the service needs identified by the neighborhood collaborative and initiation of the brainstorming, etc. to begin to identify strategies for joint problem solving around closing the service gaps in the target neighborhood.

8. Issues that tend to surface around provider collaboration include, but are not limited to the following:
   - provide funds for day care at drug treatment sites and other service locations
   - provide support for clients during and after treatment
   - pool resources [hard and soft]
   - heighten interagency collaboration regarding shared client caseload
   - identify interagency liaisons for continuity of service

- schedule client appointments in concert with bus schedule
- decentralize services, making them closer to the clients [within 20 minutes from bus line]
- centralize the transportation system to assist clients to get to services
- utilize cultural change agents in community
- develop inter-agency training program
    - develop inter-agency quarterly brown bag luncheon program

Once areas of need are surfaced [as identified by the neighborhood collaborative], prioritize with the provider collaborative group and begin addressing them by establishing a plan.

B. PLANNING:

a. Once your collaborative group has a mission statement; ground rules for communicating; and has started drafting broad-based outcomes, meet to develop a strategic plan for strengthening the overall well-being of children and families in the selected neighborhood, identifying and targeting the most pervasive service gaps.

b. The collaborative could map the services available in relation to health; education; employment training; child placement; recreation, etc.

c. The collaborative could develop a neighborhood profile: population distribution according to age; income levels; ethnicity; economic features; structural aspects; [housing, parks, industry; space availability for local activities, etc.].

d. The collaborative could map interest groups and power centers, sources of decision-making and control [government and private].

IV. WHAT TO DO WHEN "IT'S THEIR WAY OR THE HIGHWAY"

We have all worked, and will always come in contact with providers who have lots of power and simply will not cooperate or collaborate. These individuals often are threatened by sharing power and control and perceive their way as the only right way. While we might fantasize about the unfortunate demise of these folk, the fact is that we must find creative, positive and useful strategize to work with the "non-bending, inflexible and mostly intractable individual - especially if they wield power and authority.

So, how do we go about doing this? What methods of madness might we try to influence their behavior for positive client results? Chances are we will never get our way 100% [or should we] but we do have an obligation to the children and families we serve to advocate for what we believe to be in our client's best interest. So, here are some strategies you might want to consider.

A. KNOW THYSELF AND KNOW THY PROVIDERS:

If your agency has been butting its proverbial head against the wall because it cannot garner cooperation from a local power broker or s/he is unwilling to collaborate, the agency must challenge itself by asking if it is maximizing its ability to influence the providers behavior or the situation.

One way to influence others is to know their style and the style of your agency's point person. What is the work style of your agency's executive director/program director [or person largely responsible for dealing with the provider]? What is the work style of the person you seek to influence, is the organization maximizing what they know about the individual's work style to increase the agency's influence?*

DOMINANCE Work Style

- They tend to influence the world through the force of will-their will.
- They often say "We have a crisis; we must do something about it immediately."
- They are interested in trying out new ideas, theories and techniques to see if they work in practice.
- They positively search out new ideas and take the first opportunity to experiment with applications.
- They like to get on with things and act quickly and confidently on ideas that attract them.
- They tend to be impatient with open-ended conversations.
- They are essentially practical, down-to-earth people who like to make practical decisions and solve problems.
- They respond to challenges as opportunities.

* Learning Diagnostic Questionnaire, Peter Honey and Alan Mumford, adapted by the Institute For Human Services for the Ohio Child Welfare Training Program, 1995.

To influence this person you should:

- Allow the person to be in charge, don't challenge their authority openly
- Provide challenges, refer to their expertise for assistance and direction
- Approach should be logical not emotional
- Be direct when providing answers; brief; and to the point;
- Ask "what " questions not "how questions; stick to business; outline possibilities for the person to get results, solve problems, be in charge;
- Stress logic of ideas or approaches; when in agreement, agree with the facts and ideas not the
- person;
- If time lines or sanctions exist, get them out in the open but relate them to the end results or goal.

INDUCEMENT Work Style

- Influence the world through the power of ideas and the opportunities of the moment.
- Involve themselves fully and without bias in new experiences.
- Enjoy the here and now and are happy to be dominated by immediate experiences.
- Open-minded and not skeptical, and this tends to make them enthusiastic about anything new.
- Often say "things look good...let's make them better".
- Tackle problems by brainstorming. As soon as the excitement of the activity dies down, they are busy looking for the next. Tend to strive on the challenge of new experiences but are bored with implementation and longer term consolidation.
- Are gregarious people, constantly involving themselves with other but in doing so, they tend to seek to enter activities around themselves.

To Influence this person you should:

- Provide opportunities for the individual to enjoy social recognition and to be the center of attention
- Allow the person to take center stage; do most of the talking; verbalize about ideas, people and their intuition; identify strategies for transferring talk into action
- Find ways to recognize his/her abilities, contribution

- Provide a favorable atmosphere when meeting
- Build in time for stimulation and fun, socializing
- Put details in writing but don't dwell on them
- Provide incentives, recognition for his/her help and support

STEADINESS Work Style

- Influence the world through steady, solid team effort.
- Often say "Things look good, don't rock the boat".
- Tend to stand back to ponder experiences and observe them from many different perspectives.
- Collect data, both first hand and from others, and prefer to think about it thoroughly before coming to any conclusions. The collection of thorough data about experiences and events are what count, so they tend to postpone reaching definitive conclusions until all the data has been collected - however long it takes.
- Their philosophy is to be cautious.
- They are thoughtful people who like to consider all possible angles and implications before making a move.
- They prefer to take a back seat in meetings and discussions. They enjoy observing other people in action.
- When they act, it is part of a larger picture which includes the past as well as the present and includes others' observations as well as their own.

To influence this person you should:

- Provide opportunity for the person to have time to adjust to the requested change
- Provide security of situation
- Show appreciation
- Be sincere, personal and provide an agreeable meeting environment
- Ask "how" questions to get their opinion; be patient in drawing out their goals;
- Present ideas or departures from the status quo in a non-threatening manner; provide opportunities to adjust and describe the benefit of the changes to the group the person is affiliated with
- Clearly define roles or goals and his/her place in the plan; provide personal assurances and support; emphasize how their actions will minimize their risk;

COMPLIANCE Work Style

- Influence their world through tradition, protocol and the use of formal policies and procedures.
- Adapt and integrate observations into complex but logically sound theories.
- Think problems through in a vertical, step-by-step, logical way.
- Assimilate disparate facts into coherent theories.
- Tend to be perfectionists who will not rest easily until things are tidy and fit into a rational scheme.
- Analyze and synthesize. Their philosophy values rationality and logic. Frequently ask "Does this make sense? "What are the basic assumptions?"
- Tend to be detached, analytical and dedicated to objectivity rather than anything subjective or ambiguous. Their approach to problems is consistently logical.
- Rigidly reject anything that does not fit with it. They prefer maximum certainty and feel uncomfortable with subjective judgements, lateral thinking and anything said in a joking manner.

To influence this person you should:

- Provide security, no sudden changes, personal attention; limited responsibility to independent decision-making; reassure that the request is important and how
- Provide straight pros/cons; prepare your case in advance
- Support your ideas with accurate data; provide reassurances that no surprises will occur; provide exacting detail
- Provide precise explanation of how the request fits into the big picture [preferably the "traditional" view when possible]
- Provide step-by-step approach to a goal; if agreeing-be specific; if disagreeing-disagree with the facts not the person;
- Be prepared to provide many explanations in a patient, persistent manner;
- Provide a written statement prior to any meeting

*B. UNDERSTAND THE POLITICAL NATURE OF YOUR RELATIONSHIP WITH PROVIDERS AND THOSE YOU SEEK TO INFLUENCE**

To build your capacity to influence an individual, it is helpful to analyze the extent to which there is trust and agreement between the two of you. **Trust** can be defined as "our capacity to believe the person will follow through on the commitments s/he makes". **Agreement** can be defined as "our belief that the person shares a common commitment to important outcomes". Taken together, there are five political labels that can assist us in evaluating how and what we need to do to influence the behavior of those important to our work with children and families. Each label describes a different blend of trust and agreement.

Allies **[high trust/high agreement]**

Allies are people we agree with regarding the important issues and trust to follow through on their commitments.

Bedfellows **[low trust/high agreement]**

Bedfellows are people who agree with us but who we do not trust to follow through on their agreements. They may be afraid to rock the boat or have different priorities than we do.

Opponents **[high trust/low agreement]**

Opponents are people we trust but disagree with. We know they will be honest with us and may be willing to negotiate, they will be up front and honest.

Adversaries **[low trust/low agreement]**

Adversaries are people we don't trust and don't agree with on important issues. They withhold information, lie and go behind our backs and we tend to want to behave in kind. Others who observe this type of behavior learn that we are capable of behaving as un worthy of trust and as a result we can lose the trust of our colleagues and important stakeholders.

Fence-Sitters **[fluctuating trust and agreement]**

Fence-Sitters are people whose positions, goals, values, etc. are unclear, who are not convincing when they express support, their agreement and follow-through can change even with us and as a result we do not trust them when they agree that our position is important.

* Borrowed from the Institute for Human Services: Executive Training: Transforming Child, Adult and Family Services- A Series of Readings, 1997.

To influence the behavior of those whose support we must have, it is important to know who we can rely on and who we can turn to garner support and close ranks on the individual who refuses to negotiate, compromise or even discuss. **Who are your allies, bedfellows, opponents, adversaries and fence-sitters? Who have you not approached that you can align, what stakeholders in the community can you begin to build allied relationships with to move the agency in the direction that will "power-up" your staff's ability to carry out the agency's mission?**

*C. KNOW THY POWER AND WHERE TO GET THE POWER YOU NEED**

Having the appropriate source of power also plays a critical role in influencing behavior. In fact, we can define power as the ability to influence behavior. The following are seven sources of power that, if not available currently, can be developed. If you do not have power, you do not have the ability to influence behavior. Remember, power in and of itself is not good or bad, why and how it's used is what makes it so.

1. **Coercive power** is based on fear. It should be limited to only those situations that can best be described as life threatening.
2. **Connection power** is based on the leader's "connections" with influential or important persons insider or outside of the agency, community [individual's will do what is asked of them by a person with connection power because of the consequences that may follow if they don't].
3. **Reward power** is based on the individual's ability to provide rewards for other people.
4. **Legitimate power** is based on the position held by the individual [the higher the position, the higher the legitimate power tends to be].
5. **Referent power** is based on the individual's personality traits [an individual with high referent power is generally well-liked and admired by others so, others will do what they are asked to do by the individual with referent power].

* Borrowed from the Institute for Human Services: Executive Training: Transforming Child, Adult and Family Services- A Series of Readings, 1997.

6. **Information power** is based on the individual's possession of, or access to information that is perceived as valuable to others. This power base influences others because they need this information or want to be "in on things".
7. **Expert power** is based on the individual's possession of expertise, skill and knowledge which through respect, influences others. People tend to comply because they respect the person's expertise.

We should only use power to advance the agency's mission and strategic goals. *So, the question becomes "what sources of power are currently available to you and what can you do to garner additional power to influence behavior for increased child safety, child permanency and family stability?*

D. BUILD COMMUNITY VALUE AND AUTHORIZING POWER BY DEVELOPING POLITICAL STRATEGIES TO ACHIEVE YOUR DESIRED OUTCOMES

Another strategy to consider when seeking to influence your local stakeholders is to develop a stakeholder map. By doing so you are creating a visual lay-out of the: (1) curent political relationships; and (2) power base that currently exists. Identfiying current political relationships and the existing power base will assist the agency or collaborative in identifying where it needs to build strength to advance its work on behalf of children and families [similar to the concept of family genograms].

To begin with, let's start by defining some basic terms:

Value: the level of value/meaning the stakeholders [internal to the agency/collaborative and the external community] attach to the issue, outcome, goal or venture.

Capacity: the agency/collaborative's capacity to undertake, implement, actualize the desired ends.

Authorization: The authority [political and/or financial] the agency/collaborative requires to move forward towards the desired ends . <u>You can gain authorization</u> by building a valuing of the issue by the stakeholders in the environment.

To develop the actual map, a series of five questions must be answered to determine the most effective course of action [intervention] to **influence behavior for the desired outcome**:

1. What is the exact issue or goal you seek to collaborate on? If you cannot define the issue, chances are good that the effort will not succeed in improving the situation or the collaborative relationship with those who are not on board.

   The response to this question gets placed under: ***<u>Issue</u>*** *on the Map.*

2. Who are the stakeholders - all of them? Make sure you include stakeholders such as the commissioners; legislators; informal yet powerful local groups [such as the PTA, Mother against Drunk Drivers, etc.], other formal stakeholders. You might not see them as important to your agenda right now, but as you build your map, they might become more important to supporting your cause so include them.

   Each stakeholder identified gets placed in one of the ***<u>Outer Small circles</u>*** *connected to the large circle on the Map.*

3. How does each stakeholder VALUE the issue you've defined? If the stakeholders do not VALUE the issue you are trying to move, chances are good that you will not receive authorization to move forward from them and that will compromise your capacity to influence behavior in the "right" direction.

Place a V+ next to the stakeholder's name if s/he agrees with you on the issue. Place a V- next to the stakeholder's name if s/he disagrees with you on the issue. If the stakeholder is neither for or against the issue place a V-0 next to the stakeholder's circle on the Map. If you are unsure, place a V-? next to their circle on the Map.

4. Who has "Authorizing Authority" to support or impede implementation of the interventions for successful results? Depending on what outcome you seek, the level of authorization will shift. You might not need support from the PTA on an issue such as recruitment of foster caregivers [although you might!] but you might need authorization from the PTA to conduct C/AN prevention classes for students in the school gym.

   Place an A+ next to the stakeholder if you need authorization from him/her and it is currently positive. Place an A- next to the stakeholder if you need authorization from him/her and it is currently negative. If the agency/collaborative does not need authorization from the stakeholder place an A-o next to the stakeholder's circle. If you need his/her authorization but are unsure if you have the support, place an A-? next to their name on the Map.

5. Does the agency/collaborative [and other stakeholders] have the Capacity to undertake the work necessary to accomplish the desired outcome.
   - Identify whether the agency has the capacity to take the necessary steps to accomplish its desired outcome.
   - Identify who can contribute what to the cause.
   - If one stakeholder has financial resources but the others do not, what can the others contribute, what implications does lack of capacity have on your answer to number 3 - Building Value?
   - What strategies might need to be developed to build Value amongst the stakeholders in order to build Authorization and Capacity to move forward?

Place an C+ next to the stakeholder if the stakeholder group has the capacity to contribute to implementation of the Action Plan for the Desired Outcomes. Place a C- next to the stakeholder group if they have the capacity but will not contribute at this time. Place a C-0 next to the stakeholder group if it does not matter whether they have the capacity to contribute and place a C=? if you are unsure.

The following is an example of how you complete the Map for Political Mgt. strategic planning.

Smithe county has a combined PCSA/OWF agency. Sigmond Dasher is the director. Sigmond has a problem. His juvenile court judge has, and continues to unilaterally sends juvenile delinquents and unrulies to Sigmond's agency for service. Sigmond doesn't have the financial resources nor sufficient local foster homes to address the needs of this population. Yet, every time Sigmond meets with the judge, the Judge will not even discuss the issue let alone negotiate a compromise. The current and desired state are as follows:

#1: Issue:

Current State:	PCSA is serving children it is not mandated nor adequately skilled to serve as is needed and required.
Desired State:	Redirect local plans for juvenile delinquents to more appropriate local services. Reduce flow into PCSA by 75% during next 16 months.

#2. Stakeholders and Current Political Relationships:

County at large: The agency and Sigmond enjoy relative support from the citizens of Smithe county. Although it does not enjoy GREAT support, the agency works hard to maintain this luke-warm standing in the county. **The citizens are Bedfellows.**

Media: The media are supportive and unsupportive on any given day. **The media are Fence Sitters.**

Judge: The Judge will not even discuss the issue let alone negotiate a compromise regarding the delinquent youth problem in the county. Sigmond and the judge have a difficult relationship at best. Sigmond has tried his best to advocate for his staff, the children and the families of the county but the judge wants it "her way or the highway". **The Judge is an Adversary.**

Court Administrator: Understands and is sympathetic to Sigmond's issue and in theory agrees. The C.A. is unwilling to take up Sigmond's fight. The C.A. has insinuated that if Sigmond could get hard data counties, the implications of serving this population through the PCSA/OWF agency, etc. he would present the facts to the judge. **The C.A. is an Ally.**

MRDD: Great relationship, is empathetic. **The MRDD Director is an Ally.**

ADAMHSB: Great relationship, is empathetic. **The ADAMHSB Director is an Ally.**

County Commissioners: Two are favorable towards Sigmond and his position but will not interfere with the judge's decision. **These two are Bedfellows.**

One is ambivalent regarding Sigmond's leadership and cannot be counted on for support - ever. **This one is an Adversary.**

Sheriff's Department: The sheriff and his deputy think Sigmond is an incompetent loaf and would do anything to unseat him. **The Sheriff and the Deptartment are Adversaries.**

PTA Schools: The school systems and PTAs value the need to respond more effectively to this population of youth and support the PCSA in trying to do something about the situation in the county. Although they have had disagreements with the PCSA in the past, they are sympathetic to Sigmond's difficulties with the judge. **The School systems and PTA are Allies.**

Family and Children First Council: The Family and Children First Council would probably support Sigmond and the PCSA if Sigmond would give them half the chance. He doesn't show up at meetings or send an alternate and has "little use" for the Council. However, his staff have great relationships with the agencies and have been told that the Council would be supportive of the PCSA on this issue is given the opportunity. **The Council, as a collective, is a Bedfellow but could quickly become an Ally if Sigmond does the "right thing".**

#3. Public Value:

Sigmond must begin by asking whether the stakeholders in his county **Value** the issue regarding the dilemma the county faces with regards to delinquent youth, the cost of effectively responding to this population's needs and whether the PCSA should/should not manage the issue by itself.

Each stakeholder has been mapped as to their current VALUING of the issue of delinquent youth in the county and those specifically served by the PCSA [see map on page 20].

#4 Authorizing "Authority":

Sigmond must analyze the extent to which the stakeholders have Authorizing Authority [legal, political, resource clout?] -to **"Authorize"** the Desired State.

Each stakeholder has been mapped as to whether they have Authorizing Authority on the issue of delinquent youth in the county and those specifically served by the PCSA [see map on page 20].

#5 Organizational Capacity:

Sigmond must analyze the extent to which the stakeholder groups have the **Capacity** to contribute to the desired state [if they Value it and have Authorizing Authority].

Each stakeholder has been mapped as to whether they have the Capacity to contribute to the Desired State [see map on page 20]. In addition, Sigmond should:

Identify who can contribute what to the cause. For example:

o The Court Administrator...
Could contribute if the agency can contact its state dept. and trade association to get data to build a case to present to the Court Administrator.

o The Media...
Could contribute if the agency can feed the data to the media regarding this population of children, mandates, PCSA support provided in the past, their commitment to work as a partner on the issue and to do their part in the future, what the agency needs from the community...

o The Citizens...
Could contribute if the agency can increase their awareness of the problem, educate the public at large on the importance of shared responsibility...

o The Family and Children First Council...
Could contribute if Sigmond's ADAMHSB and Mental Health colleagues support his position on the Council when Sigmond conducts presentations, presents data, etc. on the issue.

o County Commissioners…
Could contribute if Sigmond can huddle up with those who have a better relationship with the Commissioners and garner their support in informally chatting about the issue [especially the one that is out to get Sigmond].

MAP

Sheriff's Dept.
V = -
A = -
C = +

Court Administrator
V = +
A = +
C = +

MRDD
V = +
A = 0
C = ?

County Citizens
V = 0
A = -
C = +

Schools
V = +
A = ?
C = -

CURRENT: PCSA is serving children it is not mandated nor adequately skilled to serve as is needed and required.

DESIRED: Redirect local plans for juvenile delinquents to more appropriate local services. Reduce flow into PCSA by 75% during next 12 months.

Mental Health
V = +
A = 0
C = ?

ADAMHSB
V = +
A = 0
C = +

Court System/Judge
V = -
A = -
C = +

Early Intervention
V = +
A = 0
C = 0

Media
V = ?
A = ?
C = 0

County Commissioners
V = +/-
A = +/-
C = +

Family & Children First Council
V = ?
A = ?
C = +

To assist your efforts in identifying who "owns" what, and in preparing to develop a platform for your message with the key stakeholders, map the traits of the entire foster care population as well:

a. What are the ages of the children/youth in care?
b. Why are these children in care [presenting problems]?
c. How long have they been in care - what type of care?
d. What is the cost of each child who is in care?

Then, cluster these children/youth by age; costs; length of stay; and reasons for placement. Doing so identifies who owns what part of this dilemma and removes the direct conflict from between the agency and juvenile court system - broadening it across all systems.
After you have created your Map, review and analyze it with staff and trusting colleagues to brainstorm strategies for **Building Value, Authorization and Capacity amongst stakeholders to move your plan for the desired results.** In this case, we might consider:

- ## Potential Strategies:

o As a result of you Mapping the traits of the children/youth in care, can you develop strategies for communicating and educating the stakeholders on your findings? The public and the media might begin to question why the Court routinely refers this population to the PCSA. The Commissioners and others would likely begin discussing cost and how others in the child and family serving systems are/not contributing to the solution.

Can you present an array of data to the Commissioners and Family and Children First Council on a monthly basis? Agency's have a duty [as does Sigmond] to present data to the Commissioners and other stakeholders on a regular basis. In our example, the Commissioners need to know the liability risks of under funding the system and the impact of their informal "hands-off" policy when dealing with delinquent youth.

o Meet with staff to develop a data gathering and presentation plan [cost, recidivism, implications for youth, for community, etc.]

o Schedule a series of public meetings to present information [Family and Children First Council, PTA, local advisory committees, etc.]

o Schedule meetings with opponents, fense sitters, bedfellows and adversaries to communicate the issue and needs [even if you don't agree and can't trust them - you need to be open and continually seek to gain their support]. What is their work style? Do you have appropriate power - where can you get it?

o Invite experts from the surrounding counties that have dealt with the issue more successfully to present to county stakeholders, invite the state in to do the same.

In short, to build Public Value, Authorizing Authority and Capacity, Sigmond will have to (1) know his stakeholder groups; (2) develop strategies based on their work styles, agendas, affiliations, etc.; (3) execute the strategies to build Value and "move" to the desired state; (4) hang tight while he builds the foundation to achieve the desired results. Sigmond must take the higher ground, avoid a spitting match and involve the press without necessarily involving them directly.*

*If you would like assistance when developing your first Political Map, please contact Dan Schneider or Stacey Saunders at (614) 221-1042.

The Cliff Notes series was originally developed to provide phase 2 counties with information from the Cuyahoga and Hamilton county pilots, the Casey Foundation and the national family-centered, neighborhood-based services experience. The purpose was to support agencies in their effort to integrate family-centered, neighborhood-based services [FCNB] locally.

THE CLIFF NOTES SERIES FOCUSED ON THE FOUR PRIMARY FCNB AREAS:	
ISSUE 1: *Produced August 1997*	BUILDING THE AGENCY'S SELF EVALUATION TEAM
ISSUE 2: *Produced October 1997*	BUILDING RELATIONS WITH THE AGENCY'S FOSTER CARE GIVERS [RETENTION AND RECRUITMENT]
ISSUE 3: *Produced December 199*	BUILDING RELATIONS WITH TARGETED NEIGHBORHOODS
ISSUE 4: *Produced May 1998*	BUILDING RELATIONS WITH PUBLIC AND PRIVATE PROVIDERS

THIS ISSUE IS THE FOURTH AND <u>FINAL PLANNED</u> ISSUE OF FCNBcps CLIFF NOTES PUBLICATION

UNLESS...YOU WANT MORE!

WE WOULD BE MORE THAN INTERESTED IN PRODUCING ADDITIONAL CLIFF NOTES BASED ON YOUR FEEDBACK. PLEASE LET US KNOW, USING THE ENCLOSED FORM, WHAT OTHER TOPICS YOU WOULD LIKE US TO RESEARCH. Thank you and good luck in your efforts to integrate FCNB services locally!

♥♥♥♥♥ PCSAO ♥♥♥♥♥
FCNBcps CLIFF NOTES

Issue No. 4 - May 1998

FEEDBACK FORM

PLEASE COMPLETE THE FOLLOWING AND RETURN IT TO PCSAO: [ATT. S.A. SAUNDERS] W/IN 3 WEEKS OF RECEIVING THIS PUBLICATION. WE HOPE IT IS USEFUL - LET US KNOW WHAT YOU THINK.

County Agency: ______________________________

Person Completing this Form: ______________________________

Date: ______________________________

	Absolutely	**Somewhat**	**It's OK But...**	**Not at all**
1. This publication has answered some questions we had about getting started with public/private providers	_____	_____	_____	_____
2. We would like this publication to continue	_____	_____	_____	_____

3. Topics we are interested in for future issues include:

4. Suggestions we would like to make include: