

**State of Washington**  
**Blue Ribbon Commission on Children and Families**  
**Optimization Workgroup Status Report 1**

The Optimization Workgroup is chaired by Andi Smith, Senior Policy Advisor to the Governor and Cathy Fisher, member of the consulting team. The workgroup is completing assessments of both Option 1 and 2 using a Framework that examines agency structure, programs and service models that can promote the optimal outcomes for the target population. Additionally, the workgroup is exploring the impact on families/children, workforce, special population and providers. The framework also includes short and long term impact and essential elements for success

The workgroup's identified an initial set of considerations to guide their work.

- Families must be well served – quality, quantity, access.
- Entry door to services and handoffs between agencies must be clearly defined.
- Cross system capacity to assess family's needs and respond with a service array that addresses them in holistic way.
- Adaptations/accommodations for special populations impacted by program/service change.
- Ensuring equity with all tribes.
- Minimizing impact on current recipients when moving intervention services to the new agency.
- Defining Agency clearly (i.e. to move programs, share data, lead coordination, require data sharing; Any option must define the authority to move programs).
- Shifting existing programs to new agency may reduce the pool of available resources for intervention.
- Minimizing stigma of service recipients.
- Service Array should be inclusive of support/ assistance for communities to organize around prevention agendas.

The workgroup has completed their initial review of **Option 1**. To date the workgroup has discussed the following key considerations for **Option 1**

- Service Delivery Target: Children and youth ages 0 – 17 and their families who are at highest risk of adverse child and family experiences that could require system involvement. A further refining of this population includes:
  - *Families /Children will have identified risk using the six factors (Mental Health, Criminal Justice involvement, Chronic Illness, Homelessness, Substance Abuse, Domestic Violence)*
  - *The top three risk factors – substance use disorders, mental health and criminal justice involvement are the primary screening mechanisms*

- Data analytics will be essential to support the work of the new agency. Medicaid data can be a useful tool to help with identification of need.
- Agency leadership will need to bring together the current prevention programs/service including the authorization to move resources such as staff and budget.
- Criteria should be established to determine what existing Programs/Services will address the needs of the target population and therefore should be included in the new agency.
- The service array will need to be developed/funded (Medicaid first) to support the mission of the new agency.
- Providers will need to be engaged to expand services to rural and other special populations.
- A case management/collaborative model will need to be established to deliver effective services to the target population.
- Outreach strategies will be essential to engage families to participate.
  - Examine CA/Tribal outreach model for application in new department
  - Examine outreach through DEL Child Care Network.
- Evidenced based prevention programs that address the six risk factors should be the focus for development of any new services.
- The new agency will be expected to have the resources to support planning and rigorous evaluation of outcomes.

The workgroup has begun the assessment of **Option 2**. Our primary focus is to:

- Develop a more cohesive continuum of care: The current child welfare system waits to intervene until harm has occurred and has clear deadlines for ending services (e.g. FAR). Including all services in one agency, with intentional connections between programs, units, and case managers, has the potential to provide additional family support services.
- Develop a case flow process that creates a pathway from referral to assessment, service planning, and service delivery that maximize family connections/leverage resources.
- Design processes for early identification of the most at-risk families. Focused on connecting families to services in a more supportive, less adversarial manner.
- Leverage the impact that bringing together DEL, CA and Prevention into one agency will have on family /child wellbeing in the state of Washington.
- Explore key challenges to implementation of change including resource constraints and the merging of agency culture, processes, and practices.

Over the next several weeks, the workgroup will complete analysis of both Options, examining optimal agency structure, service delivery models and approaches to service integration. Additionally, the workgroup will look to align with the mission/vision and guiding principles established by the Commission.

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