



CAPACITY BUILDING WORK PLAN

STATE/TERRITORY INTEGRATED CAPACITY BUILDING PLAN

State/Territory:	North Carolina
Date of Onsite work/service planning meeting:	June 24, 2016
Date of Update:	
Liaison:	Mona Davis

REAP/CQI Expansion	
Theory of Change/Rationale for Change:	
<p>To infuse CQI at all levels in order to create a data-driven, results oriented agency that will achieve the following goals:</p> <ul style="list-style-type: none"> • Adoption of a continuous quality improvement approach to child welfare that is data-driven and results oriented • Sharing accountability for reaching core achievements for children, youth, and families • Engaging community partners to assess needs and build on strengths of each community • Using evidence based best practices, technical assistance (TA), and training to continuously improve achievements <p>Implementation of REAP in all 100 counties</p>	
Strengths:	
<p>The utilization of REAP has permitted, and encouraged, on-going collaboration with state and local level stakeholders. REAP has supplemented and expanded the assessment of performance on the Child and Family Outcomes and the Systemic Factors that drive compliance with national performance expectations.</p>	
Stage in the Change Process:	
<p>Making decisions to further spread, adjust, or discontinue the intervention</p>	
Roles/Resources Allocated to Goal/Change:	
<p>North Carolina DSS works in partnership with the University of North Carolina – Chapel Hill regarding evaluation and data analysis of REAP.</p>	
Role of Center for States (if applicable):	
<p>No role identified at this time due to it not being a focus on the Program Improvement Plan (PIP)</p>	

North Carolina: October 2016-December 2017

Project Broadcast
Theory of Change/Rationale for Change:
Project Broadcast strives to improve the well-being of children and families through the development of a trauma-informed child welfare system by achieving the following goals: <ul style="list-style-type: none">• Develop a trauma-informed workforce• Increase the number of clinicians able to provide trauma-informed, evidence-based treatment• Increase the public's access to clinicians• Increase the ability of child-serving agencies to share data Ensure state and local policies are trauma-informed
Strengths:
In January 2013, Project Broadcast began piloting a trauma screening process with select staff from nine demonstration counties. Two one-page screening forms were created to capture possible trauma exposure and social/emotional/ behavioral issues often associated with trauma histories. One version was designed with children under the age of 6 in mind, and the other was designed for children ages 6 to 18. The older children were to be asked about their trauma histories directly. The goal was to begin screening all children who entered foster care as of October 2013, but counties were also free to implement screening in other programmatic areas.
Stage in the Change Process:
Piloting and/or staging implementation
Roles/Resources Allocated to Goal/Change:
Consultation and implementation planning is provided by the Center for Child and Family Health, a National Child Traumatic Stress Network and University of North Carolina at Chapel Hill
Role of Center for States (if applicable):
No role identified at this time

North Carolina: October 2016-December 2017

Exploration of a Child Welfare In-Home Services Practice Model
Theory of Change/Rationale for Change:
North Carolina has long recognized the value of children being raised with their families. Even in cases where concerns about child abuse and neglect are present, safe solutions can often be found within families and communities so that children can remain in their homes while their families are offered services that engage, involve, support and strengthen them. In-Home Services can be effective in reducing maltreatment when protective factors are recognized and strengthened; improving caretaking and coping skills; enhancing family resiliency; supporting healthy and nurturing relationships; and promoting children’s physical, mental, emotional, and educational well-being. North Carolina is dedicating resources to identify a practice model that will easily coalesce into the continuum of NC’s child welfare system.
Strengths:
Over the last year, a practice model work group has closely examined three practice models in particular—Solution Based Casework, Safety Organized Practice, and Signs of Safety. The exploration of these models has included direct conversations and presentations from the model developers themselves. It also includes not only investigating what the models have to offer but how they fit within North Carolina’s existing systems. The model developers remain in communication with NCDSS so as to provide ongoing support throughout the decision-making process.
Stage in the Change Process:
Using evidence to select from among possible solutions
Roles/Resources Allocated to Goal/Change:
DSS work group, including state and county stakeholders, are advising based on information collected and reviewed.
Role of Center for States (if applicable):
Capacity building supports would benefit DSS in further exploration and selection of a practice model. These supports and services would also assist DSS to ensure the identified practice model is supported, operationalized in the infrastructure (i.e. Training, policies, procedures, CQI, statewide information system), and incorporate sound implementation and sustainability strategies.
Recommendations that the State & Center for States will address together
Enhance statewide and county level CQI training
Develop and implement a state level parent leadership model
Improve the Consistency and Quality of Child Safety Practices for all Program Areas
“Parking Lot” Recommendations
Strengthen Workforce and Build Supervisors’ Capacities
Integrate Continuous Quality Improvement into the QA System
Improve court and agency relationships and interactions (Including efforts to improve timeliness to TPR, decrease delays/continuances)

North Carolina: October 2016-December 2017

Work Plan Participants		
Name:	Agency:	Title:
Kevin Kelley	DSS	Section Chief
Kristin O'Connor	DSS	Assistant Section Chief
Arlette Lambert	DSS	CFSR Coordinator
Betty Kelly	DSS	Policy Team Manager
Teresa Strom	DSS	Local Support Team Manager
Jeff Olson	DSS	Program Monitoring Manager
Lydia Duncan	DSS	Staff Development Manger
Paris Penny	DSS	Senior Policy Advisor
Kunle Baoku	ACF	Regional Office Specialist
Daron Jackson	ACF	Regional Office Specialist
Shalonda Cawthon	ACF	Regional Program Manager
Misty Carlyle	ACF	CFSR Lead
Myrrl McBride	ACG	CFSR
Kim Crowe	Center for States	Practice Improvement Consultant
Sherry Levesque	Center for States	Practice Improvement Consultant
Simon Pipkin	Center for States	Liaison



CENTER FOR STATE'S BRIEF SERVICES WORK PLAN
October 2016 – February 2017

Recommendation #1: Enhance statewide and county level CQI training	
State's Current Needs/Problem Statement	Center's Role in Addressing the Identified Needs
In order to further develop, implement, and sustain a CQI system, North Carolina DSS needs to tailor and integrate the CQI Training Academy modules into their state and county level training system.	The Center for States will provide capacity building supports through an identified CQI coach and assist North Carolina in the enhancement of their training system.
State's Rationale/Theory of Change	Center's Rationale for Its Service Strategies/Theory of Change
<input type="checkbox"/> State Developed Rationale/Theory of Change <input type="checkbox"/> Co-created Rationale/Theory of Change (State and Center) <input checked="" type="checkbox"/> Theory of Change to be created	
North Carolina DSS and counties have noted that the process of building a CQI/QA system requires in-depth training. In February 2016, roughly 80 staff members attended a CQI Webinar facilitated by the Center for States. This webinar described the components of the Center's CQI Training Academy, the value and benefit of the Academy, and strategies for how to successfully integrate the CQI Training Academy into existing training and tailor it to the specific needs of an agency. Since that time, several NCDSS staff have participated in the CQI Training Academy. As outlined in both the 2014-2019 CFSP and the CFSR Round 3 Program Improvement Plan, North Carolina DSS will improve the outcomes of safety, permanency, and well-being utilizing a statewide CQI/QA system and a functional technical assistance support model for the counties. In order to provide effective ongoing professional development in this area, North Carolina DSS would benefit from a thorough evaluation of their CQI training system and technical assistance model. The Center for States will use the tailored integration of the CQI Training Academy with the NCDSS training to system to explore other gaps and needs that may be needed to enhance their overall CQI system.	The Center for States will provide the CQI Academy and facilitate the integration of curriculum into North Carolina DSS' training system SO THAT The Center for States supports the North Carolina DSS in enhancing their ongoing professional development of all staff on CQI SO THAT North Carolina DSS Staff capacity to increase their knowledge and skills around CQI AND State staff build their ability to combine data from a variety of sources including administrative data, case reviews, and stakeholder feedback SO THAT North Carolina DSS staff increase their ability to make use of analyzed data to adjust programs and processes on a consistent and regular basis
State's Stage in Change/Implementation Process	Form teams to guide the change process, facilitate communication, and perform tasks
Type of Capacity Building To Be Addressed	<input type="checkbox"/> Deeper problem exploration <input checked="" type="checkbox"/> Foundational capacity development <input type="checkbox"/> Innovation-specific development

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

Issue Identified in Other Plan:	<input checked="" type="checkbox"/> CFSP <input checked="" type="checkbox"/> PIP <input type="checkbox"/> IV-E Waiver	<input type="checkbox"/> Settlement <input type="checkbox"/> Other (Specify): _____
State's Desired Outcome(s)	Increased knowledge and skills in the function and process of the CQI cycle	
State's Desired Change(s) in Child Welfare Practice to Affect Outcomes	Data-driven decision-making at all levels of the agency	Capacity Dimensions & Sub-Dimensions to be Addressed
		Infrastructure: Training System
Target Population**	Training Staff	

State's Desired Change #1: Data-driven decision-making at all levels of the agency						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
State's Stage in Change/Implementation Process for Desired Change #1: Build capacity to support implementation						
Identify staff members that will form a workgroup to enhance training on CQI	A team has been established to guide the change process, facilitate communication, and perform tasks	Provide a CQI Consultant to assist in the enhancement of NCDSS' CQI training and professional development Work with the DSS to discuss the expected purpose/goals/outcomes and who needs to be included to form a diverse team, including external stakeholders	A team has been formed to guide the work of CQI training integration	Short-Term Outcome Outcome: A team that will lead the integration of the CQI Training Academy curriculum into NCDSS' training system Intermediate Capacity Building Outcome: Outcome: Acquisition of knowledge and skills for effective team formation	<ul style="list-style-type: none"> • Consultation • Facilitation 10/3/16 – 10/14/16	State's Role/Resources: DSS Division Director Training Director Division HQ Staff County Leadership External Stakeholders Center's Role/Resources: Center Liaison <ul style="list-style-type: none"> • 8 hours offsite CQI Consultant <ul style="list-style-type: none"> • 24 hours offsite

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

State's Desired Change #1: Data-driven decision-making at all levels of the agency						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
				<p>Increased understanding and ability to conduct a needs/gap analysis</p> <p>Increased capacity to deliver effective CQI training</p> <p>North Carolina's CQI training system is enhanced through the integration of our CQI Academy</p>		

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

State's Desired Change #1: Data-driven decision-making at all levels of the agency						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
Identify staff from both State level and county level offices to complete the CQI Training Academy	Completion of the CQI Training Academy and identification of next steps needed to enhance North Carolina DSS' training system	CQI Consultant to help North Carolina DSS identify essential staff to complete the CQI Academy	Completion of the CQI Training Academy by North Carolina DSS staff	Short-Term Outcome Outcome: Understanding of the foundational components of a CQI system	<ul style="list-style-type: none"> • Coordination • Coaching 10/17/16 – 11/30/16	State's Role/Resources: DSS Division Director Training Director Division HQ Staff County Leadership External Stakeholders TBD DSS Staff Center's Role/Resources: Center Liaison <ul style="list-style-type: none"> • 8 hours offsite • 8 hours travel • 16 hours onsite CQI Consultant <ul style="list-style-type: none"> • 32 hours offsite • 8 hours travel • 16 hours onsite

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

State's Desired Change #1: <i>Data-driven decision-making at all levels of the agency</i>						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
<p>Provide current curricula, training platforms/delivery, and training schedules regarding CQI</p> <p>Determine and address gaps in the training system as a result of completing and reviewing training modules from the CQI Academy</p> <p>Explore other CQI needs that arise from the integration of the CQI Training Academy.</p>	<p>There is sufficient data and information to move forward to address the need</p>	<p>Assist in the review of current and missing foundational CQI training</p>	<p>Gaps and needs are identified in the current North Carolina training system</p>	<p>Short-Term Outcome Outcome: Increased understanding and skills in needs/gaps analysis</p>	<ul style="list-style-type: none"> • Coaching • Consultation • Dissemination of information <p>12/01/16 – 12/16/16</p>	<p>State's Role/Resources: DSS Division Director Training Director CQI Work Group Access to internal training materials, policies, procedures, forms, processes, and staff</p> <p>Center's Role/Resources: Center Liaison</p> <ul style="list-style-type: none"> • 8 hours offsite • 8 hours travel • 16 hours onsite <p>CQI Consultant</p> <ul style="list-style-type: none"> • 32 hours offsite • 8 hours travel • 16 hours onsite

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

State's Desired Change #1: Data-driven decision-making at all levels of the agency						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
Integrate CQI Training Academy curriculum into current training system	Resources sufficiently enhanced to support implementation of revised CQI training	Provide coaching and consultation on the integration of the CQI Training Academy	North Carolina DSS has increased knowledge and skills to identify and build capacities in order to successfully implement a change	Intermediate Capacity Building Outcome Outcome: DSS has the internal capacity/resources, or can access external resources to implement and sustain organizational changes	<ul style="list-style-type: none"> • Coaching • Consultation • Dissemination of Information 12/19/16 – 02/17/17	State's Role/Resources: CQI Work Group Access to internal training materials, policies, procedures, forms, processes, and staff Center's Role/Resources: Center Liaison <ul style="list-style-type: none"> • 8 hours offsite • 16 hours travel • 16 hours on site CQI Consultant <ul style="list-style-type: none"> • 32 hours offsite • 16 hours travel • 40 hours onsite

Capacity Sustainability Plan*

This service will model the approach for assessing needs and gaps as it relates to the ongoing CQI training needs of staff. North Carolina DSS will build their capacity in knowledge and skills related to the foundational components of CQI. This will lead to their ability to transfer that knowledge and skill into an enhanced training system.



CENTER FOR STATE'S BRIEF SERVICES WORK PLAN
October 2016 - March 2017

Recommendation #2: Develop a North Carolina Parent Advisory Council	
State's Current Needs/Problem Statement	Center's Role in Addressing the Identified Needs
North Carolina DSS has inconsistently included parent voice and decision-making regarding the development of strategic plans, policies, and best practice change initiatives.	The Center for States will provide capacity building supports and services to NCDSS in the development of a parent leadership model that will result in a North Carolina Parent Advisory Council. North Carolina wants to ensure that parent voice and decision-making is represented to inform and shape strategic plans, policies, procedures, and best practice initiatives.
State's Rationale/Theory of Change	Center's Rationale for Its Service Strategies/Theory of Change
<input type="checkbox"/> State Developed Rationale/Theory of Change <input type="checkbox"/> Co-created Rationale/Theory of Change (State and Center) <input checked="" type="checkbox"/> Theory of Change to be created	
To improve outcomes in safety, permanency, and well-being, NCDSS has identified the development of a North Carolina Parent Advisory Council in the 2016 Program Improvement Plan. Capacity building services will promote systematic mechanisms to develop a team of parent leaders ready to partner with the NCDSS in various roles and capacities. The goal is provide "parent voice" to positively impact practices and systems change. NCDSS recognizes that quality representation of parents in the child welfare system is essential, but has not always been achieved. This service strengthens representation of parents in the child welfare system at the state level through: training and technical assistance for potential parent members; networking opportunities; providing resources to improve parent role and responsibility; and supporting system reforms to ensure parents are given a voice in the child welfare system.	Center for States will partner with North Carolina DSS in the development of a North Carolina Parent Advisory Council SO THAT North Carolina DSS shifts their culture and climate that supports parents' voice and decision-making are a consistent part of child welfare business SO THAT Strategic plans, policies, processes, and best practice initiatives reflect the needs of families and children SO THAT North Carolina DSS builds capacities to operationalize the process for parent inclusion in state business
State's Stage in Change/Implementation Process	Form teams to guide the change process, facilitate communication, and perform tasks
Type of Capacity Building To Be Addressed	<input type="checkbox"/> Deeper problem exploration <input type="checkbox"/> Foundational capacity development <input checked="" type="checkbox"/> Innovation-specific development
Issue Identified in Other Plan:	<input type="checkbox"/> CFSP <input checked="" type="checkbox"/> PIP <input type="checkbox"/> IV-E Waiver <input type="checkbox"/> Settlement <input type="checkbox"/> Other (Specify): _____
State's Desired Outcome(s)	Improved outcomes in safety, permanency, and well-being
State's Desired Change(s) in Child Welfare Practice to Affect Outcomes	
Capacity Dimensions & Sub-Dimensions to be Addressed	

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

Consistent inclusion of parent voice and decision-making in strategic planning, policy development, and best practice initiatives	Organizational Engagement & Partnership: Family Engagement/Participation/Buy-in
Target Population**	Agency Leadership; Agency Stakeholders

State's Desired Change #1: Consistent inclusion of parent voice and decision-making in strategic planning, policy development, and best practice initiatives						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
State's Stage in Change/Implementation Process for Desired Change #1: Form teams to guide the change process, facilitate communication, and perform tasks						
Form a team to develop and implement a parent leadership model	A team has been established to guide the change process, facilitate communication, and perform tasks	Work with the DSS to discuss the expected purpose/goals/outcomes and who needs to be included to form a diverse team, including external stakeholders Facilitate engagement of team members and initial team meetings to include team building activities as needed	A team has been formed	Short-Term Outcome Outcome: DSS has the knowledge and skills to form teams	<ul style="list-style-type: none"> Coaching Facilitation 10/3/16-10/30/16	State's Role/Resources: Project Lead Division HQ Staff County Leadership External Stakeholders Meeting Space Center's Role/Resources: Liaison <ul style="list-style-type: none"> 8 hours Offsite Family Consultant 24 hours Offsite

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

State's Desired Change #1: Consistent inclusion of parent voice and decision-making in strategic planning, policy development, and best practice initiatives						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
Develop a theory of change	<p>There is sufficient data and information to move forward to address the need</p> <p>A theory of change is developed that articulates the pathway of change to reached the desired outcome</p>	<p>Facilitate a meeting or series of meetings to develop a theory of change</p> <p>Provide examples of theories of change</p> <p>Coach the core implementation team for them to develop a theory of change</p>	A theory of change has been developed to ensure consistency with North Carolina DSS' project	<p>Short-Term Outcome Outcome: DSS can identify the purpose, value, and components of a theory of change</p> <p>Intermediate Capacity Building Outcome Outcome: Increased skills and abilities to replicate process for future change initiatives</p>	<ul style="list-style-type: none"> • Coaching • Facilitation • Dissemination of information • Assessment <p>11/1/16-11/30/16</p>	<p>State's Role/Resources: Project Lead Work group Division HQ Staff County Leadership External Stakeholders Meeting Space</p> <p>Center's Role/Resources: Liaison <ul style="list-style-type: none"> • 8 hours offsite Family Consultant <ul style="list-style-type: none"> • 16 hours offsite Information/resources on theory of change</p>

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

State's Desired Change #1: Consistent inclusion of parent voice and decision-making in strategic planning, policy development, and best practice initiatives						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
Assess the current parent leadership efforts within North Carolina to determine gaps in the existing infrastructure	There is sufficient data and information to move forward to address the need	Assist to determine gaps in existing infrastructure	Matrix has been developed that displays the efforts and gaps	Short-Term Capacity Building Outcome Outcome: Ability to assess existing and needed capacities to implement change	<ul style="list-style-type: none"> • Assessment • Consultation 11/1/16-11/30/16	State's Role/Resources: Project Lead Work group Division HQ Staff County Leadership External Stakeholders Meeting Space Center's Role/Resources: Liaison <ul style="list-style-type: none"> • 8 hours offsite Family Consultant <ul style="list-style-type: none"> • 32 hours offsite • 8 hours travel • 16 hours onsite

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

State's Desired Change #1: Consistent inclusion of parent voice and decision-making in strategic planning, policy development, and best practice initiatives						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
Research and explore existing parent leadership and involvement strategies and models	<p>A solution has been selected</p> <p>The solution has been vetted by all stakeholders involved</p> <p>The solution aligns with principles and values as well as the target population, outcomes, and context</p>	<p>Provide peer-to-peer connections to jurisdictions and access to existing resources</p> <p>Provide consultation as to the elements of a parent leadership model</p>	Peer-to-peer connections have occurred and information that promotes the development of a leadership model has been collected	<p>Intermediate Capacity Building Outcome</p> <p>Outcome: Ability to research, select, adapt, or develop future solutions/interventions</p>	<ul style="list-style-type: none"> Peer-to-peer sharing Consultation <p>12/1/16-12/30/16</p>	<p>State's Role/Resources: Project Lead Work group Division HQ Staff County Leadership External Stakeholders Meeting Space</p> <p>Center's Role/Resources: Liaison</p> <ul style="list-style-type: none"> 16 hours offsite <p>Family Consultant</p> <ul style="list-style-type: none"> 24 hours offsite 8 hours travel 16 hours onsite <p>Coordination and access to peer states Scheduling and conference line for telephone interviews</p>

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

State's Desired Change #1: Consistent inclusion of parent voice and decision-making in strategic planning, policy development, and best practice initiatives						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
<p>Adopt, adapt, or develop a parent leadership model based on the review of other models and assessment of previous efforts to increase parent involvement</p> <p>Engage community partners and stakeholders to provide information on parent leadership model and to illicit ideas about model design</p>	<p>There has been a successful development or adaptation</p>	<p>Provide consultation and guidance in the development of a parent leadership model</p>	<p>Parent Leadership Mode has been developed and documented in a manual</p>	<p>Intermediate Capacity Building Outcome Outcome: Increased inclusion of community partners and stakeholders when exploring, designing, and implementing best practices</p>	<ul style="list-style-type: none"> • Consultation • Coaching <p>1/3/17-2/15/17</p>	<p>State's Role/Resources: Project Lead Work group Division HQ Staff County Leadership External Stakeholders Meeting Space</p> <p>Center's Role/Resources: Liaison</p> <ul style="list-style-type: none"> • 8 hours offsite • 8 hours travel • 8 hours on site <p>Family Consultant</p> <ul style="list-style-type: none"> • 48 hours offsite • 16 hours travel • 32 hours onsite

NORTH CAROLINA BRIEF/INTENSIVE SERVICES: October 2016-December 2017

State's Desired Change #1: Consistent inclusion of parent voice and decision-making in strategic planning, policy development, and best practice initiatives						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
<p>From the leadership model, develop the mechanisms to create and support a North Carolina Parent Advisory Council</p> <p>Recruit and train prospective parents/guardians to serve on the inaugural Parent Advisory Council</p>	<p>There has been a successful development or adaptation of a parent leadership model that directly relates to the theory of change</p> <p>Number of parents recruited and trained to serve on council</p>	<p>Provide coaching and consultation in the development of a Parent Advisory Council</p> <p>Provide consultation on recruitment and training of prospective parents to serve the Parent Advisory Council.</p>	<p>Recruitment and training plan for potential parents has been developed</p>	<p>Intermediate Capacity Building Outcome</p> <p>Outcome: DSS routinely engages parents in the development, design, implementation, and reviews of strategic plans, policies, and practice interventions/changes through the Parent Advisory Council</p>	<ul style="list-style-type: none"> • Coaching • Consultation <p>02/15/17 – 03/31/17</p>	<p>State's Role/Resources: Project Lead Work group Division HQ Staff County Leadership External Stakeholders Meeting Space</p> <p>Center's Role/Resources: Liaison</p> <ul style="list-style-type: none"> • 12 hours offsite • 8 hours travel • 16 hours on site <p>Family Consultant</p> <ul style="list-style-type: none"> • 24 hours offsite • 8 hours travel • 16 hours onsite

Capacity Sustainability Plan*

North Carolina DSS will develop the parent advisory council through a co-facilitated change and implementation process. North Carolina DSS will build capacities in their understanding of a systemic approach to developing and implementing a model, as well as, strategies to increase partnerships, both internally and externally, to sustain change.



CENTER FOR STATE'S INTENSIVE SERVICES WORK PLAN
October 2016 – December 2017

Recommendation #1: <i>Improve the Consistency and Quality of Child Safety Practices for all Program Areas</i>	
State's Current Needs/Problem Statement	Center's Role in Addressing the Identified Needs
<p>North Carolina was in substantial non-conformity in 7 out of 7 outcomes and 7 out of 7 systemic factors of round 3 of the Child and Family Service Review (CFSR), all of which are being addressed in the PIP. In regards to child safety, NC continues to fall below the national standards, as indicated in rounds 2 and 3 of the Child and Family Service Review. In order to improve the outcomes in Safety and Permanency, North Carolina needs to strengthen and implement risk and safety policies and practices including, but not limited to, the frequency, consistency, quality and documentation of: visits, risk assessments, safety plans, safety services, service agreements, family engagement, and case decision making. The need for practice change is for all program areas of service delivery in order to improve both safety and permanency for children and youth.</p>	<p>The Center will provide capacity building supports and services in the development and implementation of Child Safety Practice Expectations. The Center will guide and coach North Carolina DSS through a change and implementation process that will further identify root causes, articulate the pathway of change, design the components and elements of practice expectations, develop an implementation plan, pilot the practice expectations strategies in select areas, evaluate and adjust implementation, and develop a plan for implementing Child Safety expectations strategies in other areas of the state.</p>
State's Rationale/Theory of Change	Center's Rationale for Its Service Strategies/Theory of Change
<ul style="list-style-type: none"> <input type="checkbox"/> State Developed Rationale/Theory of Change <input type="checkbox"/> Co-created Rationale/Theory of Change (State and Center) <input checked="" type="checkbox"/> Theory of Change to be created 	

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<p>DSS recognizes that they have the foundational framework and interventions in place that defines their child safety practices. However, child safety assessments and planning have been inconsistent and of inadequate quality statewide. As documented in the round 2 Program Improvement Plan, a goal in the 2015-2019 CFSP, and a current strategy on the round 3 Program Improvement Plan, DSS has identified the need for clear policy, procedures, and supports for child safety practice expectations that are focused on child safety and permanency practices in all program areas.</p>	<p>The Center for States will partner with North Carolina DSS to co-develop child safety practice expectations for all program areas SO THAT All child safety and permanency policies, procedures, resources, and tools are packaged and implemented in a consistent approach SO THAT Child safety is both understood and accurately assessed and managed for all program areas from intake through case resolution SO THAT The quality and consistency of child safety and permanency practices are improved SO THAT Repeat maltreatment does not occur, in home or out-of- home Children remain safely in their own homes Children in out-of-home placement do not experience maltreatment in care Children are safely reunified a timely manner</p>
<p>State's Stage in Change/Implementation Process</p>	<p>Develop a theory about the causes of the need and how to address them</p>
<p>Type of Capacity Building To Be Addressed</p>	<p><input checked="" type="checkbox"/> Deeper problem exploration <input type="checkbox"/> Foundational capacity development <input type="checkbox"/> Innovation-specific development</p>
<p>Issue Identified in Other Plan:</p>	<p><input checked="" type="checkbox"/> CFSP <input checked="" type="checkbox"/> PIP <input type="checkbox"/> IV-E Waiver <input type="checkbox"/> Settlement <input type="checkbox"/> Other (Specify): _____</p>
<p>State's Desired Outcome(s)</p>	<p>1. Increased knowledge, skills, and capacities in the process of implementing change 2. Expand capacities to ensure parents have an active voice and serve as change agents for North Carolina's children and families</p>

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State's Desired Change(s) in Child Welfare Practice to Affect Outcomes		Capacity Dimensions & Sub-Dimensions to be Addressed
1. Consistent and quality child safety practices in all program areas		Infrastructure: Policies, Operating Procedures, Protocols Knowledge and Skills: Child Welfare Practice; Workforce Development Engagement and Partnership: Family and Youth Stakeholders
Target Population*	Agency Leadership; Supervisors/Middle Managers; Front line staff	

Brief Description of Previous Work The State Has Done To Address This Issue		
Type of Assistance Received*	List Internal and External Partners That Have Worked With State on This Issue	Briefly Describe State's Assessment of the Impact of Assistance Received
N/A		

State's Desired Change #1: <i>Consistent and quality child safety practices in all program areas</i>						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
State's Stage in Change/Implementation Process for Desired Change #1: <i>Develop a theory about the causes of the need and how to address them</i>						
Form a core leadership team to guide and manage the change and implementation process from its early planning stages through implementation	A team has been established to guide the change process, facilitate communication, and perform tasks. Team communication and decision making protocols have been established	Provide an Organizational/Implementation Consultant Explore the need for an additional consultant on child safety Work with the DSS to discuss the expected purpose/goals/outcomes and who needs	A team has been formed	Short-Term Outcome Outcome: Increased understanding of effective team building	<ul style="list-style-type: none"> Facilitation Coaching Consultation 10/3/16-10/14/16	State's Role/Resources: DSS Division Director Division HQ Staff County Leadership External Stakeholders Meeting Space Center's Role/Resources: Center Liaison <ul style="list-style-type: none"> 4 hours offsite Organizational Consultant (Serve as project manager)

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State's Desired Change #1: Consistent and quality child safety practices in all program areas						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
		to be included to form a diverse team, including external stakeholders Facilitate engagement of team members and initial team meetings to include team building activities as needed Facilitate development of communication plan				<ul style="list-style-type: none"> • 24 hours offsite

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State's Desired Change #1: <i>Consistent and quality child safety practices in all program areas</i>						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
Develop a theory of change	A theory of change is developed that articulates the pathway of change to reached the desired outcome	<p>Work with DSS to validate and verify root causes</p> <p>Facilitate a meeting or series of meetings to develop a theory of change</p> <p>Provide examples of theories of change</p> <p>Coach the core implementation team for them to develop a theory of change</p>	<p>Theory of change examples</p> <p>Theory of change tools, resources, and templates</p> <p>A theory of change has been developed to ensure consistency with North Carolina DSS' project</p>	<p>Short-Term Outcome Outcome: Awareness and understanding of the purpose and value of a theory of change</p> <p>Intermediate Capacity Building Outcome Outcome: Increased skills and abilities to replicate process for future change initiatives</p>	<ul style="list-style-type: none"> • Coaching • Facilitation • Training <p>10/14/16– 11/4/16</p>	<p>State's Role/Resources: DSS Division Director Division HQ Staff County Leadership External Stakeholders Meeting Space</p> <p>Center's Role/Resources: Capacity Building Coach (Evaluation)</p> <ul style="list-style-type: none"> • 16 hours offsite <p>Organizational Consultant</p> <ul style="list-style-type: none"> • 16 hours offsite

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State's Desired Change #1: Consistent and quality child safety practices in all program areas						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
Design and implement an evaluation that illustrates State progress towards project goals	<p>Ensure an evaluation staff member joins the implementation team</p> <p>Within 60 days of the project start, a Monitoring and Evaluation Plan is developed, including a plan for data collection and analysis by the jurisdiction, as applicable</p> <p>Evaluation plan is implemented</p>	Provide consultation and coaching in the development and implementation of the evaluation plan	<p>Within 60 days of the project start Intensive Project Evaluation Plan is developed, including a plan for data collection and analysis by the jurisdiction, as applicable</p> <p>Evaluation plan is implemented</p>	<p>Short-Term Outcome</p> <p>Outcome:</p> <p>The agency will develop understanding of the project progress and whether it is achieving planned milestones/goals</p> <p>Intermediate Capacity Building Outcome</p> <p>Outcome:</p> <p>The agency will build their knowledge and skills on how monitor and adapt project to reflect progress</p>	<ul style="list-style-type: none"> Coaching Facilitation <p>11/1/16-12/30/16</p>	<p>State's Role/Resources:</p> <p>Project Evaluation Lead Attendance at meetings Arrangement of meeting locations Staff Time Meeting space</p> <p>Center's Role/Resources:</p> <p>Evaluation Capacity Building Coach</p> <ul style="list-style-type: none"> 80 hours offsite 16 hours travel 32 hours onsite

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State's Desired Change #1: Consistent and quality child safety practices in all program areas						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
<p>Produce an inventory of all child safety practice policies, processes, and support tools, (both previous and current) that includes frequency, consistency, quality and documentation of visits, risk assessments, safety plans, safety services, service agreements, family engagement, and case decision making</p> <p>Determine effectiveness of all inventory items and assess the degree of use in practice</p>	<p>A single, coherent collection of applicable child safety practice policies, processes and supportive tools to enhance child safety decision-making</p>	<p>Review and synthesize inventory</p>	<p>Matrix has been developed that documents all child safety practice resources, their effectiveness, and gaps</p>	<p>Intermediate Outcome Outcome: An understanding of both the barriers to child safety practices and the positive supports that provide a consistent and quality approach that impact both safety and permanency outcomes</p>	<ul style="list-style-type: none"> • Coaching • Consultation • Problem Solving <p>11/1/16-12/30/16</p>	<p>State's Role/Resources: DSS Division Director Division HQ Staff County Leadership External Stakeholders Access to internal policies, procedures, forms, processes, and staff</p> <p>Center's Role/Resources: Center Liaison</p> <ul style="list-style-type: none"> • 4 hours offsite • 8 hours travel • 8 hours on site <p>Organizational Consultant</p> <ul style="list-style-type: none"> • 80 hours offsite • 16 hours travel • 32 hours onsite

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<p>Strengthen and implement a technical assistance model to provide support to county staff in the implementation and consistent application of the to be developed child safety practice</p> <p>Assess the current technical assistance model</p> <p>Gather information from other county-administered states regarding their technical assistance models</p> <p>Revised and manualized the technical assistance model</p>	<p>Needs/gaps analysis completed identifying areas to strengthen and develop</p> <p>Multiple solutions and strategies identified from peer States</p> <p>Technical assistance model is updated</p>	<p>Facilitate the assessment of the current technical assistance model</p> <p>Coordinate the acquisition of information and conversations with county-administered States</p> <p>Provide coaching regarding the refinement of the technical assistance model</p>	<p>Needs and gaps of the current technical assistance model have been identified and documented</p> <p>Multiple solutions and strategies identified</p>	<p>Short-term Outcome Outcome Increased awareness and knowledge of areas that need to be strengthened and developed in the technical assistance model</p> <p>Short-term Capacity Building Outcome Outcome Ability to engage with external stakeholders and peer States to gather information</p>	<ul style="list-style-type: none"> • Facilitation • Coaching <p>1/1/17-4/30/17</p>	<p>State's Role/Resources: DSS Division Director Division HQ Staff County Leadership External Stakeholders Arrangement of meeting times</p> <p>Center's Role/Resources: Center Liaison</p> <ul style="list-style-type: none"> • 28 hours offsite • 8 hours travel • 16 hours on site <p>Organizational Consultant</p> <ul style="list-style-type: none"> • 80 hours offsite • 32 hours travel • 80 hours onsite <p>Evaluation Coach</p> <ul style="list-style-type: none"> • 56 hours offsite • 16 hours travel • 32 hours onsite <p>**note – onsite days are in combination with other activities outlined in this plan</p> <p>Additional actions are documented later in this plan as to line up with due dates on the PIP**</p>
<p>Develop an agenda and guiding questions for peer States, national experts, and model purveyors</p>	<p>Successful development of a child safety practice expectations that directly relates to the theory of</p>	<p>Provide peer-to-peer, national experts, and model purveyor connections and access to existing child safety practice expectations</p>	<p>Applicable child safety practice expectations through literature, research, and online resources for North Carolina to review</p>	<p>Short-Term Outcome Outcome: Increased knowledge and skills in the development of topics and questions while</p>	<ul style="list-style-type: none"> • Facilitation • Coaching • Dissemination of information • Peer-to-Peer Sharing/Coordinating 	<p>State's Role/Resources: DSS Division Director Division HQ Staff County Leadership External Stakeholders Arrangement of meeting times</p> <p>Center's Role/Resources:</p>

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State's Desired Change #1: Consistent and quality child safety practices in all program areas						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
Develop child safety practice expectations in all program areas manual	change, including core components, fidelity standards, and practitioner requirements	Facilitate one to two calls/meetings with a peer-to-peer State or national expert to demonstrate the process for inquiring about a child safety practice expectations, its impact on the target population, successes, and challenges to implementation	Access to similar peer States that have implemented a child safety practice expectations	exploring child welfare practices nationwide Intermediate Capacity Building Outcome Outcome: Ability to research, select, adapt, or develop future solutions/interventions Ability to assess feasibility of implementing intervention and aligning it with the theory of change	<ul style="list-style-type: none"> Review and assessment of child safety practice expectations 3/1/17-6/28/17	Center Liaison <ul style="list-style-type: none"> 32 hours offsite 16 hours travel 32 hours onsite Organizational Consultant <ul style="list-style-type: none"> 56 hours offsite 16 hours travel 40 hours onsite Evaluation Coach <ul style="list-style-type: none"> 32 hours offsite

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State's Desired Change #1: Consistent and quality child safety practices in all program areas						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
<p>Assess the current training curricula to identify key competencies necessary for the risk and safety policies and practices</p> <p>Develop and execute a statewide communication plan regarding the library of competencies to ensure county staff are better able to assess and meet their training needs regarding the risk and safety policies and practices</p>	<p>There is sufficient data and information to understand the underlying nature of the problem</p> <p>Key child safety practice competencies are developed</p> <p>Communication of the competencies and the expectation of county staff to determine training needs</p>	<p>Assist with a crosswalk of necessary child safety policies and existing curricula to address them</p> <p>Explore and share competencies from other jurisdictions</p>	<p>Competencies and a communication plan have been developed</p>	<p>Short-term Outcome Outcome: Understanding of the importance of connecting training curricula to policies and procedures</p> <p>Intermediate Capacity Building Outcome Outcome: DSS has the internal capacity/resources, or can access external resources, to analyze/assign meaning and draw conclusions from a comparison review of policies and training curricula</p>	<ul style="list-style-type: none"> Dissemination of information Consultation <p>06/28/17– 08/31/17</p>	<p>State's Role/Resources: DSS Division Director Division HQ Staff County Leadership Training Manager External Stakeholders Access to training materials</p> <p>Center's Role/Resources: Center Liaison</p> <ul style="list-style-type: none"> 16 hours offsite 16 hours travel 32 hours onsite <p>Organizational Consultant</p> <ul style="list-style-type: none"> 40 hours offsite 16 hours travel 40 hours onsite <p>Evaluation Coach</p> <ul style="list-style-type: none"> 24 hours offsite 8 hours travel 16 hours onsite

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State's Desired Change #1: Consistent and quality child safety practices in all program areas						
State's Action Steps	State's Outputs (Milestones)	Center's Action Steps*	Center's Outputs (Milestones)	State's & Center's Outcomes (including capacity building outcomes)** (add additional outcomes as needed)	Strategy*** & Anticipated Start and Completion Dates	State's & Center's Role/Resources & Expected Estimated Number of Consultant Days to Complete (Onsite and Offsite)****
<p>Revise the training curricula as needed and include the competencies necessary for the risk and safety policies and practices</p> <p>Strengthen the utilization of the transfer of learning model for county staff to ensure competencies identified in the risk and safety policies and practices are implemented consistently after staff attend training</p>	<p>Core components of the child safety practice expectations have been clearly defined and incorporated in the training curricula</p>	<p>Provide consultation on curriculum development</p> <p>Explore strategies to improve the transfer of learning model</p>	<p>DSS has acquired the most current and effective means for curriculum development and adult learning</p> <p>DSS has a consistent approach across the counties for ongoing learning of child safety practices</p>	<p>Intermediate Outcome Outcome: Proficient knowledge and skills in developing curriculum that incorporates adult learning theory</p> <p>Intermediate Capacity Building Outcome Outcome: Capacity exists to ensure consistent learning approaches across counties</p>	<ul style="list-style-type: none"> • Consultation • Dissemination of information <p>9/1/17-9/29/17</p>	<p>State's Role/Resources: DSS Division Director Division HQ Staff County Leadership External Stakeholders Arrangement of meeting times</p> <p>Center's Role/Resources: Center Liaison</p> <ul style="list-style-type: none"> • 16 hours offsite • 8 hours travel • 16 hours onsite <p>Organizational Consultant</p> <ul style="list-style-type: none"> • 32 hours offsite • 8 hours travel • 16 hours onsite <p>Evaluation Coach</p> <ul style="list-style-type: none"> • 24 hours offsite

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<p>Review of work plan progress</p> <p>Identify and recruit sites for implementation</p> <p>Pilot implementation of the child safety practice expectations and technical assistance model in one or two counties prior to moving to all 10</p> <p>Conduct usability testing through a Plan, Do, Study, Act process to determine needed changes</p> <p>Determine when to expand pilot and/or stage in other sites</p>	<p>A pilot has been conducted for implementing the child safety practice expectations</p> <p>Data has been collected and analyzed to adjust the Child Safety expectations and/or implementation strategies</p> <p>The Child Safety Practice Expectation has been adjusted based on usability testing and is ready to be implemented widely</p>	<p>Facilitate review of work plan and update capacity building assessment</p> <p>Provide transfer of knowledge and support tools for usability testing</p> <p>Assist North Carolina with the review of data collected to determine implementation adjustments and/or refinements to the Child Safety Practice Expectations</p>	<p>State pilots Child Safety Practice Expectations in selected sites and develops plan for scaling up to the additional counties</p>	<p>Intermediate Outcome Outcome: Acquire foundational knowledge of usability testing</p> <p>Understanding and identification of data measures and/or indicators for assessing and monitoring implementation and the Child Safety Practice Expectations</p>	<ul style="list-style-type: none"> • Training • Coaching • Consultation • Dissemination of information <p>9/29/17– 11/17/17</p>	<p>State’s Role/Resources: DSS Division Director Division HQ Staff County Leadership External Stakeholders</p> <p>Center’s Role/Resources: Center Liaison</p> <ul style="list-style-type: none"> • 16 hours offsite • 16 hours travel • 16 hours onsite <p>Evaluation Coach</p> <ul style="list-style-type: none"> • 128 hours offsite • 16 hours travel • 40 hours onsite <p>Organizational Consultant</p> <ul style="list-style-type: none"> • 80 hours offsite • 16 hours travel • 32 hours onsite
<p>Make decisions to further spread the child safety practice expectations in all program areas and</p>	<p>A decision has been made as to whether this intervention will be implemented to a wider audience</p>	<p>Assist North Carolina in the development of a rollout plan to implement in additional sites</p>		<p>Intermediate Outcome Outcomes: Increased understanding of the importance and value</p>	<ul style="list-style-type: none"> • Training • Coaching • Consultation <p>11/17/17 – 12/29/17</p>	<p>State’s Role/Resources: DSS Division Director Division HQ Staff County Leadership External Stakeholders</p>

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<p>technical assistance model</p> <p>Assess readiness, supports, and implementation activities to prepare the next sites</p> <p>Develop a sustainability plan</p>		<p>Provide foundational knowledge on the importance and components of a sustainability plan</p>		<p>of sustainability planning</p> <p>Ability to identify the three categories for sustainability planning</p> <p>Ability to identify and incorporate the 10 key elements of sustainability planning</p> <p>Intermediate Capacity Building Outcome Outcome: Developed foundational understanding of the factors that influence sustainability and the process for a decision on spreading or discontinuing an intervention</p>		<p>Center's Role/Resources:</p> <p>Center Liaison</p> <ul style="list-style-type: none"> • 16 hours offsite • 8 hours travel • 16 hours onsite <p>Organizational Consultant</p> <ul style="list-style-type: none"> • 40 hours offsite • 8 hours travel • 16 hours onsite <p>Evaluation Coach</p> <ul style="list-style-type: none"> • 32 hours offsite • 8 hours travel • 16 hours on site

Capacity Sustainability Plan

North Carolina DSS will experience all phases of the change and implementation process that will lead to a sustainability plan. Center for States will provide consultants and an evaluation coach to model, coach, and, where necessary, train the essential skills needed to implement the Child Safety Practice Expectations that will improve outcomes in safety. North Carolina DSS will increase and build organizational capacities so that they can replicate this process for future initiatives.