



A BLUEPRINT FOR SUCCESS

**A PROVIDER PLAN FOR KING COUNTY'S CHILDREN,
YOUTH, YOUNG ADULTS & FAMILIES SYSTEM**

AUTHORED BY KING COUNTY YOUTH PROVIDERS AT THE BRAVE COMMITMENTS TABLE

Foreword

This plan was created by the youth providers at the Brave Commitments table. It describes our vision for a County where our children, youth and families have what they need to grow up healthy, safe and supported.

The plan is one of three actions undertaken by the Brave Commitments (BC) table. This group, comprised of over 30 youth serving agencies in King County, was convened in 2018 in response to the significant challenges facing the nonprofit youth sector; challenges that threaten the long term viability of our youth services system, the providers who support that system, and the children, youth and families that are served by the system.

The plan reflects our belief that we have an obligation:

- to place our children and youth and families at the center of our work
- to assure racial equity for every client we serve
- to use our expertise and knowledge to define the very best system to achieve our shared vision
- to look beyond our individual organizations to ensure that the system we describe is equitable, efficient, effective and excellent, and
- to be accountable to clients, funders, staff and volunteers, and
- to be outspoken advocates for children and youth, ensuring that the services we provide honor the recipients and give them what they need to thrive.

This plan is a call to action for providers, who must do more to achieve the system described, as well as a call to action to our funders, grantors, government and community. Ultimately, the health and wellbeing of our children, youth and families depend on making the changes described in this plan a reality.

There has been a great deal of work in our community over many decades on behalf of children and youth, and many individuals and organizations at the BC table have participated in these efforts. The two most recent and significant outcomes of this work and effort have been the Youth Action Plan (YAP) and Best Starts for Kids (BSK). The first was a plan created by providers, government, funders and youth; the second was a plan linked to a levy campaign to ensure that children got the best start possible in life and sustained those gains through adulthood. The Citizen & Youth Advisory Board (CYAB) is charged with ensuring that both BSK and the YAP are realized in King County.

These two efforts are described as follows:

Youth Action Plan

King County has long been a leader in supporting programs for children, youth and young adults – from developing sports field in local neighborhoods to providing public health visits for low-income infants and children, establishing a Youth & Family Services Network to help at-risk teens and families and assisting

youth who have become involved with the criminal justice system to take a fresh path. The Great Recession, however, reduced or eliminated support for many programs, and programs still receiving County funding are operated through many different agencies, often with little coordination between them.

In January of 2014, the County Council agreed a new approach is needed if we are to reach our countywide strategic plan goal of every youth being able to realize their full potential. Legislation calling for the creation of a Youth Action Plan by a task force of experts received unanimous support. The broad spectrum of participants from throughout the region will not only help the County develop a plan for an accountable, integrated delivery of social safety net services for children, youth, and young adults, but will also help us honor our obligations as adults to the next generation. <https://www.kingcounty.gov/council/issues/YouthActionPlan.aspx>

Best Starts for Kids

Best Starts invests an average of \$65 million per year to support King County families and children so that babies are born healthy, children thrive, and young people grow into happy, healthy adults. The funds are allocated in four 'buckets': The bulk of the funding, 50%, supports prenatal through age five to reach children and families where they are in those years—homes, child care settings, and communities—to support healthy child development and family well-being. Thirty five (35%) are invested from age 5 through 24, supporting positive development for children and young people as they progress to adulthood. Best Starts embraces a strengths-based approach, working to sustain the gain that is made by investing early while also responding to the realities of adversity and trauma across communities. The focus is on promoting and building resilience and protective factors, and preventing or intervening early to assure that King County youth have the supports they need to thrive. Ten (10%) sustains and expands the partnership between King County and The Seattle Foundation on Communities of Opportunity, which is based on the latest research regarding the impact of place on a child's success. It also supports local communities in building their own capacity to create positive change. The remaining 5% supports evaluation and measurement.

Why a System Plan?

With two such robust and comprehensive plans already in place in our community, why have we created a System Plan? The answer is simple—to describe the necessary provider system that is key to the realization of our shared vision for our children, youth and families, from the perspective of the organizations that serve the children, youth and families of our community. Neither BSK nor YAP describe or define the healthy provider system necessary for success.

The full realization of the YAP and BSK rests on many factors, including but not limited to:

- a bedrock commitment to racial equity,
- stable funding, government partnership,
- community engagement,
- youth and family voice, and
- a strong and sustained network of high quality providers.

It is the last factor that sparked this plan.

The bulk of the services, interventions, supports and connection funded through BSK or described in the YAP are 'delivered' by providers. Clearly the long term health and capacity of our providers is key to realizing our vision for our community—and is assumed by the plan.

However, that assumption is not warranted by the current landscape for youth providers. Indeed, the providers convened the BC table because we are deeply concerned about the sustainability, health and voice of our sector. We believe we must make changes to our work, our funding, our commitment to equity, our partnership with government, our support for our staff teams, and our engagement with our community to fully realize our shared vision for the children, youth and families of our community.

This plan has been written as a guide for a stronger, more robust youth sector and a coherent, thoughtful and more streamlined provider system.

It is a beginning point for a group of 30+ providers, with a small amount of funding and support, to start a conversation between providers, with our Boards of Directors, and with the broader community. We have not had the time, funding or ability to include direct service staff, youth or families, partners or government's input and voice but all of these are critical to the continued conversation and evolution of this plan.

We also claim the potential of the plan:

- By defining our vision we affirm our shared mission.
- By affirming our shared mission we create a system based on youth success rather than agency survival.
- By working collaboratively, with our boards, staff and partners, we can fundamentally shift the system that supports our children, youth and families to one that is more efficient, thoughtful, informed and effective.

*Effective work is about moving toward the desired destination, and not necessarily about ensuring that nothing gets spilled or knocked over in the process. Mistakes will happen. Missteps will occur. **It's momentum that matters**, and ensuring that time is not wasted obsessing over the little things that won't end up moving the needle anyway.*

~Deep Patel

As providers, we can become trapped in thinking that our agency is singular, better at achieving outcomes than our peers, more deserving than our partners because of size, longevity or charisma. Much of this mindset is a natural outgrowth of the funding model for human services—we compete for grants, contracts, philanthropy and donations and are continually asked to articulate why our agency is, well, singular. We are stuck in a race to the bottom, agreeing to accept funding that does not cover the cost of our work. In the process we underpay our staffs, invest too little in infrastructure, and starve our investments in training and innovation and burn out our leaders. At the same time, the collaboration and partnership that can lead to

best outcomes for our community's youth are made exponentially more difficult. We know that we must stop these practices and assumptions; this plan is a step toward that future.

A National Imperative: Joining Forces to Strengthen Human Services in America, a report and analysis of the importance of strong providers in ensuring robust and responsive human services, agrees with our conclusions.¹ Here are the key strengths of human service CBOs, as articulated in that report :

- **Ensuring children and youth are protected** and live in safe homes and neighborhoods so they succeed in school and have strong, nurturing, and economically secure families
- **Providing workforce supports** that help people obtain and retain employment at livable wages
- **Ensuring quality affordable housing**
- **Promoting improved health outcomes** and reduced health care costs
- **Providing crucial effective mental health and substance abuse services**, especially given the current opioid epidemic

The report notes:

While human services CBOs are providing clear value today, their potential value is much greater than what has been realized so far. As integral partners in the human services ecosystem, their ability to address the social determinants of health and improve outcomes must be fully appreciated and supported.

People who are recipients of human services, and society overall, face significant risks if the larger human services ecosystem is not financially strong, integrated, and delivering on its potential. The consequences can include negative physical health and behavioral health outcomes, poor education outcomes, chronic poverty, and elevated health and criminal justice expenses.

Further, they articulate five key efforts CBOs and their partners must take to achieve the needed transformation, including:

- Committing to Outcomes
- Increasing Innovation
- Creating Deeper and Disruptive Partnerships
- Adopting New Financial Strategies
- Ensuring that Government Modernizes and Updates the Regulatory Environment for CBOs

Independently, the BC table identified, in broad strokes, the same key strategies to strengthen the youth serving sector in King County.

¹ **A National Imperative: Joining Forces to Strengthen Human Services in America** is a report commissioned by the Alliance for Strong Families and Communities and the American Public Human Services Association (APHSA) and written by Oliver Wyman and SeaChange Capital Partners with lead funding from the Ballmer Group and The Kresge Foundation. <https://www.alliance1.org/web/resources/pubs/national-imperative-joining-forces-strengthen-human-services-america.aspx>

Our Plan...

Begins with Equity

We know that the youth, children and families we serve are disproportionately members of racial groups living in under-resourced and underserved communities. This inequity must be addressed and eliminated.

Accordingly, our plan rests on a bedrock commitment to equity and describes how we might continue our equity journey, challenging ourselves to do more to address and eliminate it in our work and in our communities. Our goal is to achieve racial equity in our organizations and community—where racial identity has no influence on individual lives.² This is a space where our learning constantly evolves and we expect that these beginning strategies will, indeed must, continue to change to better reflect and incorporate what we are learning about equity in our communities.

We begin with an aspirational definition of equity to guide our work. In this we have adopted the equity statement crafted by the CYAB to guide its work:

- Equity is an ardent journey toward well-being as defined by the affected
- Equity demands sacrifice and redistribution of power and resources in order to break systems of oppression, heal continuing wounds, and realize justice
- To achieve equity and social justice, we must first root out deeply entrenched systems of racism
- Equity proactively builds strong foundations of agency, is vigilant for unintended consequences, and boldly aspires to be restorative
- Equity is disruptive and uncomfortable and not voluntary
- Equity is fundamental to the community we want to build

Strategies:

1. Providers Must Apply an Equity Lens to Our Outcomes, Efforts, and Plans

Outcomes

We must continuously and rigorously analyze our outcomes by race, gender, sexual orientation, immigration status, etc. to ensure that our work is supporting all of our clients and meeting their needs.

We must fearlessly and humbly seek feedback from affected communities to assist in our evaluation of our outcomes and to elicit strategies that will allow us to better partners with them. Inherent in this relationship is demonstrating the value of such wisdom through adequate and respectful compensation for the time spent providing this consultation.

Efforts

To achieve more equitable organizations, each organization must have an equity committee in place to achieve organizational level commitments to equity (see #2, next page). We contemplate an analogous

² **Awake to Woke to Work: Building a Race Equity Culture**, Equity in the Center, A Project of ProInspire, (2018)

youth sector equity committee, made up of providers, that commits to educating and supporting the sector's DIE work. This group would support us in ensuring a system level commitment to equity. An example of their work could be education about

Plans—We recognize that most of the organizations at the table are white led and have evolved within the dominant culture. Bias is inherent in our current system. Recognizing this, we will seek outside perspectives that can help shine a light on where our plans and efforts do not advance our commitment to equity. In doing so, we commit to honoring the professional advice with commensurate compensation.

2. Providers Must Strengthen Equity within Our Organizations

Leadership—We recognize that the leadership of our organizations does not reflect the community served and accept responsibility, along with our Boards of Directors, to ensure that we are hiring more People of Color as CEOs and key leaders in our organizations. A recent survey identified the key barrier to increasing the number of people of color in the top leadership role are Boards of Directors and Recruiters.³ They articulate the path forward as follows:


3. Providers Must Elevate Equity in Our Partnerships with Funders, Including Government and Philanthropy

Learn Together How Equity Impacts Funding

Decision—We must work together to better understand how bringing an equity lens to funding decisions can result in more equity and better outcomes for the community served. An example of how this might play out is a funder's preference for, or insistence on, the use of Evidence Based Best Practices. Where this seemingly sound strategy fails to fulfill its promise is that most (EBBP) have not been evaluated within communities of color, or marginalized communities and their efficacy in those communities is not assured.

The problems facing people of color who are interested in becoming leaders are not issues that can be addressed by helping aspiring leaders of color to engage in continuous self-improvement and development. The barriers are based on structures within organizations and the sector as a whole. Investments made in developing leaders of color may offer needed support, but they must be accompanied by work that addresses assumptions and implicit biases deeply embedded in nonprofit policies, practices, and structures. In other words, training and preparation should be required for people in positions of power in order to raise awareness of the barriers facing aspiring leaders of color. This consciousness would need to continue once leaders of color land the job so they are not marginalized by boards and funders. Finally, none of this can be done alone. The sector itself must change its culture and norms, facing its own biases about who is qualified to lead and why.

² **Race to Lead: Confronting the Nonprofit Racial Leadership Gap**, by Sean Thomas Breitfield and Frances Kunreuther, a project of the Building Movement Project, www.buildingmovement.org or www.racetolead.org and the Annie E Casey Foundation (2017)



Reconsidering how to validate outcomes in diverse communities might require funders to assist in funding an analysis of current practices and interventions to ‘validate’ them for these communities.

Fund Equity Work—Providers must be realistic in budgeting the time, energy and funding needed to fulfill our equity commitments. To achieve our shared equity goals funders must in turn be willing to support this work through expansion of existing awards or specific funds to achieve equity strategies.

Our Plan...

Defines the Youth System

In the following pages we articulate an outline for an effective youth system. A strong and effective **system** is critical to the success of both the Youth Action Plan and Best Starts for Kids.

Our understanding of our work continues to evolve. Our work is to walk with youth and families as they confront the challenges and complexities of their lives. We affirm that our youth and families do not need to be ‘fixed’; they are not broken. We are not here to help, but to serve. Rachel Naomi Remen articulates this beautifully:

“Helping, fixing and serving represent three different ways of seeing life. When you help, you see life as weak. When you fix, you see life as broken. When you serve, you see life as whole.

The danger in helping is that we may inadvertently take away from people more than we could ever give them; we may diminish their self-esteem, their sense of worth, integrity or even wholeness. When we help, we become aware of own strength. But when we serve, we don’t serve with our strength; we serve with ourselves and we draw from all of our experiences.”⁴

Our work with our youth and families is grounded in relationship. We come to the work from different areas of expertise and with different tools at our disposal—healthcare, employment services, housing, after school activities, counseling, etc.—but we affirm that the youth and families that we serve do not need a single ‘solution’ or opportunity. Rather, they need a **relationship** with another caring human being who can walk alongside them to as they grapple with many differing and unique needs on their singular journey through life.

We seek to design a system that focuses first on that relationship. We recognize that our youth and families come first—and our work is to support them with the things they need to succeed. In practice, this would mean that a youth who seeks (as an example) employment services will create a relationship with a case manager at an agency providing employment support. This initial relationship then continues even as the youth’s needs change from employment to housing, education or counseling. The system wraps around that young person, rather than the young person creating a patchwork of relationships and services as they identify new needs. In practice, this would mean that all service providers would become **Youth Partners** who provide the key relationship with youth, regardless of the service that brought the youth into relationship with them or the services and supports they need in the future.

² **Race to Lead: Confronting the Nonprofit Racial Leadership Gap**, by Sean Thomas Breitfield and Frances Kunreuther, a project of the Building Movement Project, www.buildingmovement.org or www.racetolead.org and the Annie E Casey Foundation (2017)

In describing this new system, we used all of the following terms:

Interdisciplinary

Relationship Based

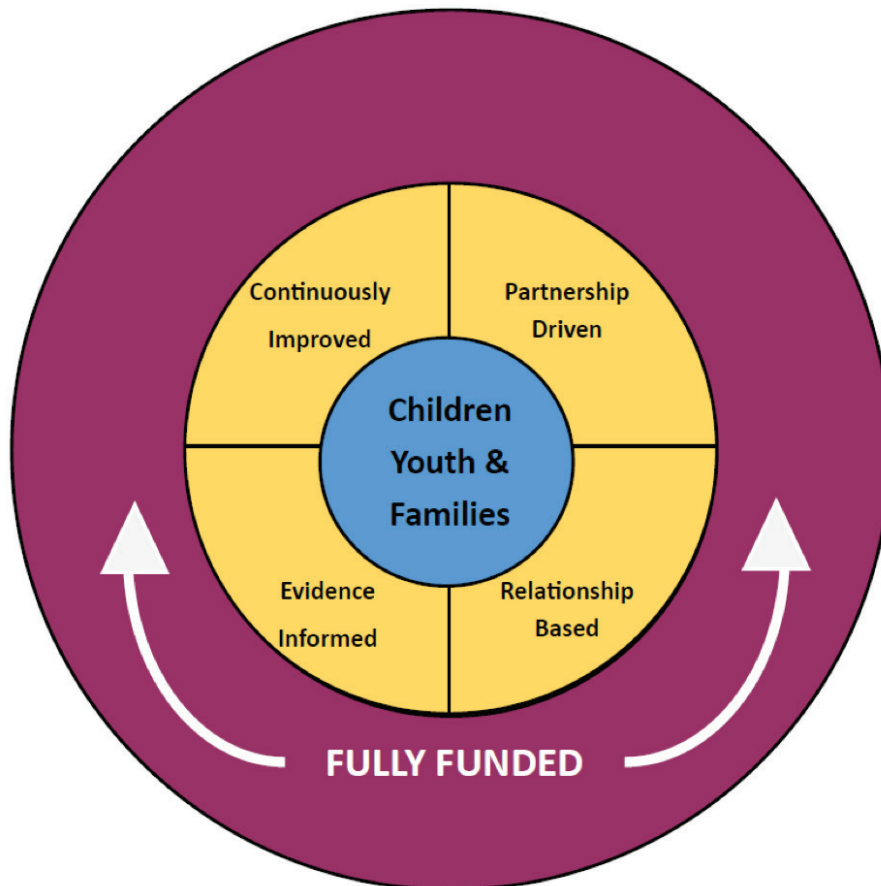
Prioritizing Approach Over Content

This requires that we see ourselves, not as subject matter or content experts, but as relationship experts who focus first on the youth or family we serve. As providers, it requires us to break down the siloes created when we define ourselves through our 'expertise' and instead center ourselves on our shared mission to walk with our youth and families on their journey, responding to needs and supports as they arise.

The key tenets of our youth system:

- 1. Youth & Family Centered**
- 2. Relationship Based**
- 3. Partnership Driven**
- 4. Fully Funded**
- 5. Evidence Informed**
- 6. Continuously Improved**

Each of these tenets is described in the following section. The strategies to shift our current system to align with our desired system are outlined in the Strategy Section of this report.



1. Youth & Family Centered

What it means to place youth at the center

Much work and study has been completed to better define and create patient centered care in the health care arena. Their articulations of the principles that underlie patient centered care are applicable and adaptable to the youth system we desire.

Research from Harvard Medical School, on behalf of the Picker Institute and The Commonwealth Fund,⁵ compiled data from interviews with patients, family members, physicians, hospital staff, and literature to describe what patients valued most in their experience with health care. This was categorized into eight principles. We have adapted these core principles, below, to define what we envision in a **youth centered** system:

1. Respect youths' values, preferences and needs
2. Coordinate and integrate services
3. Inform, educate and communicate transparently and thoroughly
4. Create and ensure physical comfort and safety
5. Ensure emotional and behavioral health needs are met
6. Involve family and friends (that youth identify)
7. Ensure continuity of care, including aftercare
8. Ensure equitable access to care

Why it matters

Responding to life's challenges requires knowledge and wisdom on the part of both the youth and the Youth Partner. The Youth Partner has knowledge of the resources, programs, financial supports, etc., that are available but it is the youth who has direct experience of the challenges and how they impact them. Youth centered care demands a partnership between both to be effective. Placing youth at the center, honoring their expertise in their lives, ensuring that they are 'in the driver seat' is in itself an experience that enhances their journey. Specific outcomes include:

Increases and Supports Self-Efficacy

Empowers Youth

Promotes and Sustains Engagement

Creates Better Outcomes

2. Relationship Based

What it means Relationship-noun, 'the state of being connected'. The Search Institute⁶ has spent many years analyzing and describing successful relationships and has distilled their research into the

⁵<https://leanforward.hms.harvard.edu/2018/04/27/transforming-the-patient-experience-of-health-care/>

⁶<https://www.search-institute.org/> Copyright © 2018 by Search Institute®, 3001 Broadway Street NE, Suite 310, Minneapolis MN 55413; 800-888-7828; www.search-institute.org. Used with permission.

The **Developmental Relationships** Framework

Express Care

Show me that I matter to you.



Challenge Growth

Push me to keep getting better.



Provide Support

Help me complete tasks and achieve goals.



Share Power

Treat me with respect and give me a say.



Expand Possibilities

Connect me with people and places.



Developmental Relationships Framework (see figure, below). This is a comprehensive and strong summary of the key ingredients in creating and sustaining meaningful and relevant relationships with young people, and families. Delving deeper, each of the five elements are more fully described as follows:

Express Care: Show me that I matter to you.

- Be dependable—Be someone I can trust.
- Listen—Really pay attention when we are together.
- Believe in me—Make me feel known and valued.
- Be warm—Show me you enjoy being with me.
- Encourage—Praise me for my efforts and achievements.

Challenge Growth: Push me to keep getting better.

- Expect my best—Expect me to live up to my potential.
- Stretch—Push me to go further.
- Hold me accountable—Insist I take responsibility for my actions.
- Reflect on failures—Help me learn from mistakes and setbacks.

Provide Support: Help me complete tasks and achieve goals.

Navigate—Guide me through hard situations and systems.

Empower—Build my confidence to take charge of my life.

Advocate—Stand up for me when I need it.

Set boundaries—Put in place limits that keep me on track.

Share Power: Treat me with respect and give me a say.

Respect me—Take me seriously and treat me fairly.

Include me—Involve me in decisions that affect me.

Collaborate—Work with me to solve problems and reach goals.

Let me lead—Create opportunities for me to take action and lead.

Expand Possibilities: Connect me with people and places that broaden my world.

Inspire—Inspire me to see possibilities for my future.

Broaden horizons—Expose me to new ideas, experiences, and places.

Connect—Introduce me to people who can help me grow.

Why it matters

Relationships are core to our experience as human beings, and crucial to our well-being. Professor Jon Talebreza-May, Ph.D., LCSW sums it up well:

The value of “the importance of human relationships” is so much a part of what we as social workers do that it often goes unnoticed, yet it is the foundation upon which everything else is built. In my own work as a social work practitioner and professor of social work, I know that when I focus on technique or facts and forget to connect with those around me, I fail. When I trust myself, relax, and enjoy the company I keep, the job gets done.⁷

In a Stanford Social Innovation Strategies article,⁸ author Kent Kevel recounts the following question from a funder:

“Given all of the grants you have written and the work you have done, what is the most important thing you would tell funders to look for when they review a proposal that involves young people?”

As I thought about his question, I realized that my answer has shifted over the years. In the first decade of my career, I would have recommended that funders review proposals for use of “best practices” and strategies that hold people accountable for using them. During the second decade, I would have said to invest in interventions that showed strong evidence of success and that used approaches such as “collective impact” and “improvement science” to scale those interventions.

Now in my third professional decade, however, I gave a simpler answer: “Invest in interventions that emphasize relationships.”

⁷ <https://www.socialworker.com/extras/social-work-month-2017/the-importance-of-human-relationships/>

⁸ https://ssir.org/articles/entry/the_recipe_for_youth_success

The research demonstrates the importance of relationship to well-being. Quoting Kewel again:

Our studies are showing that when young people experience strong relationships with parents, teachers, and others, they do better on a variety of indicators of psychological, social-emotional, academic, and behavioral well-being. Our data also suggest that the more such relationships young people have in their lives, the more likely they are to be in a position to succeed and contribute as adults. This is particularly true for young people who must overcome adverse childhood experiences such as the death, incarceration, or chronic illness of a family member. Unfortunately, we are also learning that the young people who most need these relationships are the least likely to have them.

We know that our work is accomplished only in the context of healthy relationships, and our youth system must similarly invest in interventions that succeed within relationship between a youth and a provider.

3. Partnership Driven

What it means

A youth system that wraps around youth and family requires increased collaboration, partnership and communication between providers.

Today we ask our youth to make the 'connections' for themselves, to find, contact and create the web of services that they need on their own. For example, a young person experiencing homelessness must locate overnight shelter, then a case manager who can assist with a housing placement, then a case manager who can assist in securing employment, then a counselor to address trauma, etc. leading to a multiplicity of relationships, meetings, advice and In the new system, which centers our work on our youth and families, it will instead be the community, government and providers who will wrap around each person to provide support.

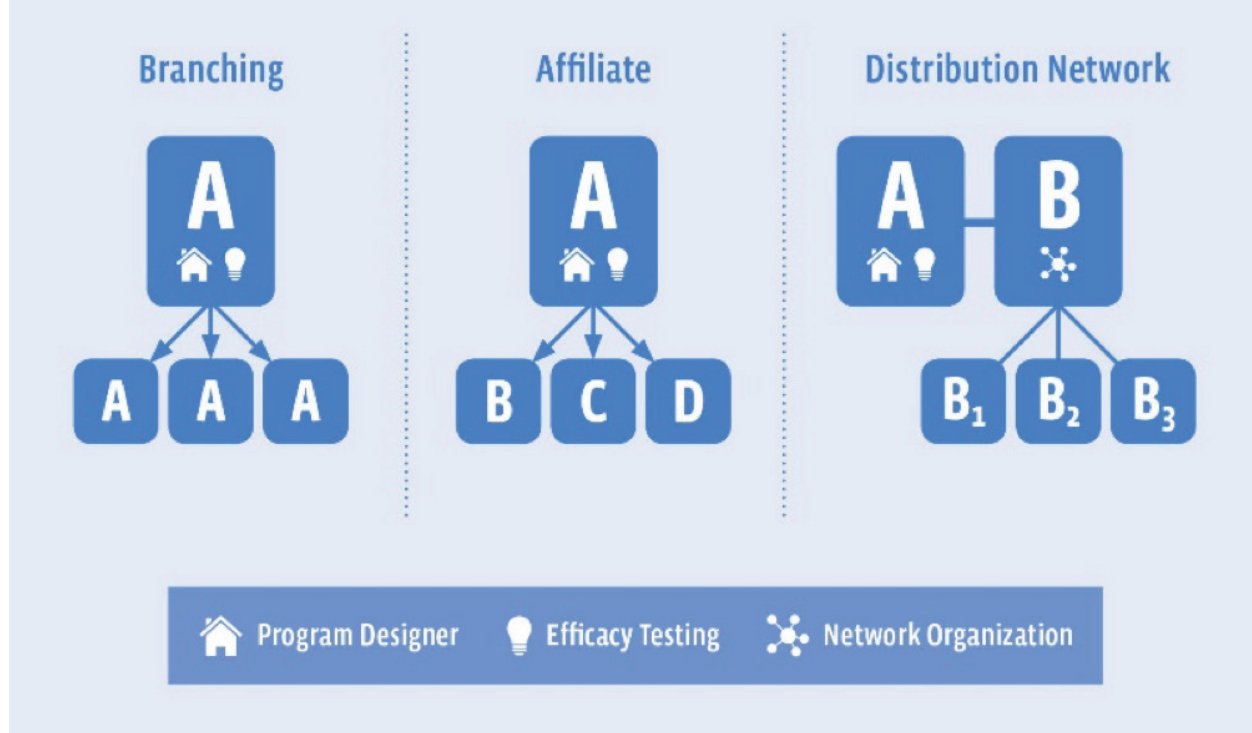
These partnerships anticipate that all of the places a young person or family 'touches' on their journey will be in partnership, including K-12 schools, early learning providers, post-secondary programs, juvenile justice system, higher education, workforce development, child welfare, healthcare, and others. It also means that there must be tighter and collaborative partnerships between providers.

All providers, when asked about their partnerships, list a host of organizations that they partner with in the community. By and large, these are referral relationships between themselves and other providers. But true partnerships, where providers strategize what the best solutions will be for a youth centered system, will look much different. The Wallace Foundation analyzed three types of partnership models between providers that are germane to strengthening the system.⁹ They are included here to illustrate potential different ways of working together that can strengthen collaboration and partnership to the benefit of the youth and families we serve. Regardless of which partnership model may be selected for any given situation, it is likely that to successfully implement a wraparound service model will require a more formal agreement among organizations, supported by funding that is flexible enough to support the system rather than constrain it.

⁹ <https://www.wallacefoundation.org/news-and-media/blog/pages/to-widen-their-reach-social-programs-enlist-partners.aspx>

Figure 1.1.

Branching, Affiliate, and Distribution Network Pathway Structures.



Branching pathways are like branch offices. The lead partner opens additional sites, with the training and supports of the original. The branches are then given some flexibility, but are expected to adhere to a set of program non-negotiables.

Affiliate pathways resemble business franchising. Here, the lead partner retains the basics—name, service, for example—but the affiliates are independent, often operating under contracts with the lead partner.

The distribution network pathway is akin to supply chain business arrangements, where the lead partner provides the “service” and a partner with an existing network distributes it to member organizations or individuals.

The Wallace Foundation report notes that scale-up is often not a one-time event. Those doing the work need to constantly re-evaluate pathways, partnerships and fidelity. To this end, we recognize that the transition from the current situation of referral relationships among providers to something more formal, structured and most importantly, youth and family centered, will take time and investment to achieve.

Why it matters

Placing youth and families at the center of our system of support requires us to do business in new ways. Partnership is necessary to effectively achieve a youth and family centric system.

4. Evidence Informed

What it means

The United States governmental agencies, and many other funders, increasingly require the use of Evidence Based Practices¹⁰ or, if not specifically named EBPs, the collection of evidence and demonstration of how that evidence is being used to improve program quality. The most commonly cited definition of EBP is from Dr. David Sackett: “the conscientious, explicit and judicious use of current best evidence in making decisions about the care of the individual patient. It means integrating individual clinical expertise with the best available external clinical evidence from systematic research.” (Sackett D, 1996).

We agree that it is critical to gather evidence (or performance data) to assess the efficacy of our services. Certifying a practice as an EBP is lengthy, expensive and rigorous. Randomized controlled trials (RCT) (used to evaluate the efficacy of an intervention) cannot always be conducted in social, health, and human services, resulting in a lack of evidence for some interventions provided by social workers.¹¹

In addition, most currently acknowledged EBP were not evaluated using data from diverse cultural, racial and ethnic communities and may not be the most efficacious intervention for different communities.

Why it matters

We support using evidence, and believe that we must work with our clients, partners, funders and community to assess whether the supports, interventions and processes that we employ are leading to the desired outcome. We must not only mean well, we must do well. The process of gathering evidence, of analyzing outcomes through the equity lens, of reflecting on the data and making changes in response is critical, but for the most part unfunded. Here again the importance of a fully funded system will support a stronger, more efficacious system of interventions, supports and practices.

5. Continuously Improved

What it means

In continuous process improvement, tools and processes are used by an organization to consistently review and reflect on current practices and outcomes, to achieve improved results. Continuous process improvement creates a culture that supports efforts to maximize resources and improve outcomes.

There are a variety of tools used to create a quality improvement process. Many of our BC organizations have become accredited,¹² a process that includes the creation and implementation of a quality improvement

¹⁰ As an example, SAMSHA lists its EBP on its resources page: <https://www.samhsa.gov/ebp-resource-center>

¹¹ <https://www.socialworkers.org/News/Research-Data/Social-Work-Policy-Research/Evidence-Based-Practice>

¹² Most common accrediting bodies are Council on Accreditation, or COA <https://coanet.org/home/and> CARF <http://www.carf.org/home/>

process. The newly adopted Families First Protection and Services Act (FFPSA) requires accreditation for receipt of funding through Title IV-E for residential child welfare programs, reflecting Congress' commitment to the importance of rigorous quality improvement processes in child welfare services.

Continuous quality improvement is a continuous cycle:¹³

- Planning
- Data Collection
- Data
- Implementation
- Process Analysis (evaluating the quality improvement process itself).

Why it matters

The importance of a continuous improvement model are clear: it supports a continuous learning environment; it ensures that data guide decision-making; it can be used across the system to inform practice across the County.

6. Fully Funded

What it means

Most of King County's youth-serving nonprofit organizations receive the majority of their funding through federal, state and local government contracts, providing essential services as an important extension of the public sector's support for our community's safety net for youth.

The amounts provided in these contracts do not cover the whole cost of providing the services or outcomes. It is common to find government contracts paying for as little as 60% of the cost of providing the service described. In most contracts no overhead is awarded, renewals are provided at the same amount as an original award with no allowance for inflation or COLAs, expectations for oversight (audits and site visits) have increased, and the outcomes are predicated on a level of service that is not covered by the award.

Providers have accepted these diminished awards, promising to supplement revenue through fundraising, braided funding or by dipping into reserves. The decision to take on work that is not fully funded comes from a passionate commitment to the mission of the organization and the youth and families served; it is not in the long term best interest of the organization. Multiple studies have revealed that this practice has weakened the sector. The 2018 national study *The Financial Health of the United States Nonprofit Sector*¹⁴ indicates just how fragile the nation's nonprofit organizations really are, with:

- 7-8% technically insolvent with liabilities exceeding assets
- 30% facing potential liquidity issues with minimal cash reserves and/or short-term assets less than short-term liabilities
- 30% having lost money over the last three years
- ~50% with less than one month of operating reserves

¹³ <https://www.socialsolutions.com/blog/how-to-use-continuous-quality-improvement-tools/>

¹⁴ *The Financial Health of the United States Nonprofit Sector*, by Oliver Wyman, Sea Change Capital Partners and Guidestar, 2018

Many of the Brave Commitments participants have profound concerns about their organizations' fiscal health, very much in line with the national study. Nonprofit youth-sector leaders at the Brave Commitments table describe their organizational instability as "precarious" and on the "verge of tipping over." In addition, the lack of adequate funding has resulted in a chronically underpaid workforce with little investment in training, trauma support, professional development and leadership training. This has resulted in a high turnover rate, diminishing the quality and effectiveness of support for clients and exacerbating the financial challenges of the organizations. Doing more with less may sound like a winning strategy but in reality is not only unattainable, but contrary to creating the system we want for the youth, children and families of our communities.

In addition to these significant current funding gaps, a blueprint for a success must also include adequate funding for both research and innovation regarding evidence based approaches, and continuous quality improvement, which are lacking in today's funding environment.

Why it matters

In the present system, underfunded CBOs are struggling to meet the needs of the youth they serve, to create the system that most efficiently meets those needs, to achieve the outcomes described by funders, to innovate in service provision, and to support their talented and committed staff. The strength and stability, and indeed survival, of the providers is key to ensuring that we are able to meet the goals and objectives articulated in Best Starts for Kids and the Youth Action Plan—in short, to meet our shared vision for the children, youth and families of King County.

Next Steps and Strategies

The system described above will take concerted effort, dedication and commitment to build. King County and Washington State are communities that cares deeply for their children, youth and families, as evidenced in countless ways, including the passage of Best Starts for Kids. We know that working together, we can create the strong system described.

We propose the following next steps to move the work forward. As we engage other providers, youth, families, donors, funders and government in the conversation we know that the solutions will continue to evolve and grow. But, as noted in the opening to this plan, we must begin. The following proposals suggest where we might start.

1) Youth & Family Centered

a) Create a Children & Youth Bill of Rights. A Children & Youth Bill of Rights was contemplated in the Youth Action Plan (YAP), but not completed as youth surveyed and engaged in the YAP prioritized other engagement strategies. Some of those, such as including youth on the Citizen & youth Advisory Board (CYAB) that is overseeing both BSK and YAP, have been accomplished. The time has come to once again reach out to our youth to engage them in the creation and adoption of a Youth Bill of Rights. Such a document lays the foundation for providers, policymakers, youth and the community to articulate a shared vision for the future for our children and youth. In addition, a Bill of

Rights can be used to ensure that the community holds ourselves accountable to the well-being of our children and youth. This is a key strategy in creating a youth centered system. A comprehensive discussion of a Youth Bill of Rights can be found in the Youth Action Plan Appendix C, with extensive citations to other communities that have adopted a Youth Bill of Rights (Portland, OR; Fall River, MA; San Jose, CA; San Mateo, CA).

b) Engage youth in helping to articulate and design the key strategies necessary to creating a youth centered/family centered system. (See page 72 in YAP for specific strategies).

2) Relationship Based

a) Create a Youth Navigator System, or put another way, engage all youth in a **Wraparound Service Delivery model**. The wraparound model is described by the National Wraparound Initiative as follows:

What is Wraparound?

Wraparound differs from many service delivery strategies, in that it provides a comprehensive, holistic, youth and family-driven way of responding when children or youth experience serious mental health or behavioral challenges. Wraparound puts the child or youth and family at the center. With support from a team of professionals and natural supports, the family's ideas and perspectives about what they need and what will be helpful drive all of the work in Wraparound.

The young person and their family members work with a Wraparound facilitator to build their Wraparound team, which can include the family's friends and people from the wider community, as well as providers of services and supports.

With the help of the team, the family and young person take the lead in deciding team vision and goals, and in developing creative and individualized services and supports that will help them achieve the goals and vision. Team members work together to put the plan into action, monitor how well it's working, and change it as needed.¹⁵

To enhance the success of wraparound services, the young person and their family members will work with a Youth Navigator in the building of their Wraparound team and then accompany/transport the youth in accessing services in the youth's plan to ensure appropriate connections and implementation. This model provides the organization and follow-through needed for clients with trauma-induced compromised executive functioning.

This shift will require that providers train their staff as relationship specialists, rather than subject matter experts, while giving them the tools they need to access the supportive services their youth identify.

3) Partnership Driven

a) Providers must commit our organizations to focus first on youth. Our organizations, our boards, our leadership and our staff must put our community's shared mission for our youth first, rising

¹⁵<https://nwi.pdx.edu/wraparound-basics/>

above an individual or organizational perspective. The Youth Bill of Rights is a good step toward creating a system that will hold organizations accountable for putting youth first. This is a disruptive commitment for many reasons. First, success in fundraising relies on our ability to distinguish ourselves from other nonprofits to attract and retain donors. Second, it may mean that we seriously consider whether our organization might better achieve the work by partnering or merging with another entity, and take the steps to accomplish that change in status.

b) Funders must incentivize collaboration. To the extent that funders support partnerships, collaboration and/or mergers, funding should include true support for the systems necessary to build a successful youth-centered system, for example:

- The partnership structures described earlier will require setup and systems development, each with a cost associated with it to develop a youth-centered, relationship based approach.
- In a merger funding scenario, ensure that the merger does not result in net loss of funding, for instance if both organizations were funded prior to the merger, the newly merged organization should be funded at the combined amount of funding (in other words, funding includes both of the grant amounts that each individual organization had received).

c) We must convene a quarterly youth table. If we share a mission, we have to make time to share our work. We must have a regular time and place to create meaningful partnerships. Providing a quarterly opportunity to build relationship, share information, learn together, hear from experts and learn of the opportunities and challenges our partners are encountering is critical. A quarterly one day gathering of all members of the sector should be convened, with the hosting organization responsible for determining the agenda, including time for relationship building, education, information sharing, expert presentations, etc.

4) Evidence Informed

a) We must build a single youth data system, allowing providers and youth to efficiently coordinate access to care and resources. In the past years there has been a lot of work, thought and effort expended to create a data system that would include all youth, tracking their engagement with the provider system of services in a way that is confidential, efficient, HIPAA compliant and available to all providers. A single youth data system will give us critical information that can be used to improve outcomes, guide investments, ensure equitable outcomes for all youth, and track utilization.

5) Continuously Improved

a) Funders must include funding for providers to implement quality improvement processes.

We recognize and advocate for the need to increase quality of outcomes, a commitment that must co-evolve with increased funding to the sector. Investments in our work means a higher retention rate for quality staff, which provides continuity and culturally-competent services to our clients, allowing them to thrive. It creates support for innovation, evaluation and continuous improvement. Funders must financially support and require performance quality improvement processes for all grantees,

and must engage in dialogues with organizations about what they are learning, innovating and changing approaches along with nonprofit recommendations and learnings.


6) Fully Funded

- a) **Reset youth organization funding to cover the full cost of services.** This will require an increase in government funding, but is the key funding requirement need to stabilize the youth system.
- b) **Move to multi-year funding indexed to CPI.** Especially for proven programs, any additional funding should be ongoing, and not one time, for example, increasing per client/per bed reimbursement for behavioral health or child welfare services. For homeless youth programs, because licensing requirements drive staffing levels regardless of the specific occupancy at the moment, programs should be capacity funded, meaning they are billed to costs and not occupancy, which does not allow for the fluctuations of utilization that often occur on a daily basis. The current occupancy based funding does not allow for the fluctuations of utilization that are inherent in serving this population and that often occur on a daily basis. Such funding models can be sustainably budgeted, rather than creating additional administrative burdens for non-recurring payments to organizations that are already underfunded.
- c) **Provide unrestricted funds or flexibility in how funding is used** (to support programs) Restrictions in how funds are used do not allow any flexibility or innovation by experts in youth service provision. Unlike in the private sector, there is simply no investment in 'research and development' to enhance and innovate. This curbs the ability to react to emerging community needs and conditions, leverage partnerships, or address the uniqueness of individual youth, who do not fit the 'checkbox' for a particular program or approach and yet benefit from a more flexible service model.
- d) **Cover overhead.** Structure and increase funding to support adequate administrative overhead to allow providers to sustain themselves, and/or more flexibility and/or unrestricted to allow some ability to tailor some interventions to special cases. This will allow providers the flexibility to use unrestricted funds to sustain themselves while tailoring needed interventions to special cases.

CONCLUSION

The existing social service delivery system in the United States has evolved from a volunteer, often faith based, driven model of a fragmented system to one funded in most part by local, regional, state and federal governments. Initial interventions were often motivated by compassion for those less fortunate and addressed the problems by treating the symptoms; a homeless adult needs housing, an addict needs treatment and parenting classes are needed by those who abuse or neglect their children.

With social science research in the profession of psychology and social work over the past several decades it has become clear that the problems that face our communities are multi-faceted with roots far deeper than any single intervention or system can solve. The issues facing most clients in the social service system are generational and societal. Changes needed to effectively address the current social



challenges lie not solely within the client or the organizations that serve clients, but also within the communities and social and economic structures of our country that shape the forces in which our clients grow, learn and, too often, fail to thrive.

This plan is an outline of what the youth serving system can do as a first step to help those in the service pipeline. To reduce the numbers of our fellow citizens from entering this pipeline will require equal efforts outside of service providers to address the inequity, racism and ----- that create the conditions of our communities and these negative outcomes.

This plan is a living document, and we expect that it will evolve and improve with additional input. We welcome feedback from a wide range of providers, funders, government, youth and families to further strengthen our work.