The Long and Winding Road of Organizational Transformation: Implementing Collaborative Problem Solving
Wayfinder Family Services

**Our Mission**
Wayfinder Family Services ensures that children, youth and adults facing challenges always have a place to turn.

**Our Purpose**
We strive for a world in which every child and family can overcome the obstacles they face—a world where everyone has the opportunity to thrive.

**Our History**
Founded in 1953 by Norm Kaplan, Junior Blind was created so that blind and visually impaired children could participate in recreational activities. Since then our mission has expanded to include blind babies, teens and adults, children with developmental disabilities, and foster children. In 2018, we changed our name to Wayfinder Family Services.
Wayfinder Family Services

Our Values

We put people first.
There’s extraordinary potential in the people we work with, and we do everything in our power to facilitate their success.

We listen to all voices.
We invite everyone—our families, our volunteers and our staff—to speak openly, and we believe that there’s value in every viewpoint.

We get where we need to go.
No challenge is too great. With careful, thoughtful planning, we follow through on even our loftiest goals.

We strive to do even better.
We see every day as an opportunity to go further than we did yesterday, and we give children and families what they need to propel themselves forward, too.

We never give up.
Our support is unwavering. We will always be there for our children and families.
Our Services

- 19,600 children, youth, adults and family members served last year.
- 465 children received assistance from our foster care and adoption services.
- Our comprehensive medical team includes a psychiatrist, endocrinologist, 17 nurses, behavioral psychologist, and 14 mental health therapists.
- 275 people received mental health therapy from Wayfinder.
- Wayfinder serves individuals with developmental disabilities from 18 of California’s 21 regional centers.
- 1,665 children removed from their homes received care at our Cottage transitional shelter program.
- 3 residential programs serving blind and visually impaired youth and adults
Transformational Groundwork

- In 2017 Wayfinder began a Transformational Change process in partnership with the Alliance for Strong Families and Communities
  - Year-long process with multiple agencies using Blueprint plans
  - Monthly all-agency calls to discuss the process
  - Internal cohort teams and forming-storming-norming process
  - Cross-functional teams meeting agenda process
  - Establishing buy-in, helping people self-select for their fit within the change process
  - Increased focus on gathering feedback and Employee Engagement efforts

- CQI Process
  - Changing the culture around change
  - Departmental CQI projects
  - Monthly meeting with program updates, discussion and feedback on progress & challenges
  - Success stories
Regulatory Environment

Families First- Qualified Residential Treatment Program (QRTP)

- Must be licensed and accredited
- Provides trauma-informed programming
- “Qualified Individuals” (not employed by the state or affiliated with any provider unless waived) conduct assessments and approve placement within 30 days
- Judges need to approve placement within 60 days and at regular status hearings
- Clinical and Nursing staff need to be onsite according to the treatment model and available 24/7
- Providers maintain documentation of family engagement, including sibling contact
- Requires 6 months of post-discharge support and family-based aftercare
Regulatory Environment

- Short Term Residential Therapeutic Program
- Emphasis, infusion of Mental Health
- Treatment Screening process by Intra placement committee
- No eject or reject
- Medication Services
- Emergency Intervention
- Child Choice and Voice

- Child Family Team (CFT)
- Continuum of Care Reform
- Increase family relationship
- Length of stay and continued stay determination
- Increased oversight
- Staffing requirement and duties
- Reassess children in care one year or more
Bringing Transformation and Regulatory Requirements Together

- Wayfinder was already undertaking transformational change, preparing for a landscape with youth who have more complex challenges.

- Transformational change and regulatory environment came together in a strategic initiative to implement Trauma Informed Care.

- ACRC Pre-conference with Bruce Perry and Stuart Ablon and overview of the trauma-related research and evidence by a CPS certified trainer at the California Alliance conference came together in a decision to pursue CPS.

- Wayfinder engaged with Think:Kids-certified trainers to bring TIC and CPS to the organization.
Why Collaborative Problem Solving?

**In one approach, a practice that:**

- Has good evidentiary support from the California Clearing House.
- Is trauma informed.
- Provides a philosophy, language and process that can be implemented with individuals and in groups, across all settings.
- Can be used by line workers, therapists, case managers, wraparound facilitators, teachers, counselors, parents, AND organizationally.
- Is family-driven, youth guided, and culturally and linguistically competent.
- Has tools to guide implementation and fidelity.
- Is strengths-based and neurobiologically grounded.
Collaborative Problem Solving

Major Components

- Mindset/Philosophy: CPS is a practice model paired with a philosophy, which is now supported by hard science.
  - “Kids Do Well if They Can”
  - “Skill, NOT Will”

- Three Ingredients:
  - Assessment- Based on understanding the antecedents for challenging behavior to identify problems to be solved
  - Planning- Using this understanding to determine which of three options to use to address the problems to be solved.
  - Intervention- Using “Plan B” conversations to help teach skills, reduce challenging behavior, pursue expectations, build relationship, create enduring change
Neurobiological Grounding: Key Principles

- Experience shapes adaptation. “What gets activated gets learned.” Bruce Perry
- Principle of Specificity: You can’t change a neural network without activating that network.
- Stress Response System: You have to activate the stress response system to change the stress response.
- You can activate the stress response system safely with the right dose and pattern: moderate, predictable, and controlled.
- Neural networks change with small relational doses many times throughout the day, regardless of specific content focus.
Neurobiological Grounding: Key Principles

Sequence of Engagement
- Information processes sequentially from the “bottom up”
- We feel first, then we think
- When dysregulated by accumulated or immediate stress, triggers, or sensitized stress arousal reactions, we are unable to effectively or optimally use our cortex to process information; can’t sort out, plan, respond with reason.
- Must be regulated in order to relate and reason

Regulate, relate, reason
Neurobiological Sequence of Plan B

**Empathize:**
- Clarify the child’s concern
- Reflective listening
- Reassurance

**Share:**
- The adults concern

**Collaborate:**
- To create solution

**Empathize:**
- Clarify the child’s concern

Cortex: REASON
Limbic Region: RELATE
MidBrain /Brainstem: REGULATE
Neuroscience and Plan B

- Brain change isn’t about erasing old associations, it is about creating new ones.

- Plan B is a patterned activity that involves small doses of novel emotional experience (i.e., good stress).

- Facilitates brain development (new neural connections in the brain).
Healthy Development and Plan B

1. Plan B resonates with healthy human brain development and biology

2. Mirrors early regulating developmental experiences (rhythmic, repetitive and relational)

3. Puts a flexible structure to the type of interaction that leads to enduring change

4. A roadmap with guideposts that can be followed and replicated

5. Honors sequential nature of how our brains process information
CPS Is Trauma-Informed Care in Action

CPS aligns with TIC values of Safety, Trustworthiness, Choice, Collaboration, and Empowerment (Fallot and Harris, 2009; Perry and Ablon, in press)

- avoids use of power and control (Plan A) which is re-traumatizing and does developmental damage
- honors the intimacy barrier
- reduces power differential which causes arousal, dysregulation and/or dissociation
- helps children confront triggering situations safely to detoxify / desensitize them slowly over time
- gives child control without sole responsibility for process
Effective implementation of transformational efforts, trauma-informed care, and evidence based or informed practices and approaches requires changing:

- **Organizational climate**
- **Organizational culture**
- **Structures, policies and procedures**
- **Staff attitudes and behavior**

This puts all aspects of the program- leadership, communication systems, physical space, intervention models and practices, teamwork, roles- under a microscope and up for change and revision.
Implementation Science: Systemic Drivers

- **LEADERSHIP**
  - Technical
  - Adaptive

- **COMPETENCY**
  - Training
  - Coaching

- **ORGANIZATIONAL**
  - Facilitative Administration
  - Decision Support Data System
Implementation in Organizational Practice

- Provide initial and ongoing training for staff and Board
- Reflect trauma informed principles in organizational philosophy
- Determine practice model and interventions
- Review and revise policies and procedures
- Engage staff collaboratively in decision making relevant to their roles and functions
- Establish continuous, predictable communication systems
- Build on existing indicators to establish metrics and measurement system
- Recognize and address vicarious traumatization
Implementation in Organizational Practice

- Readiness
- Training & Coaching
- Data-Driven Process Improvement
- Developing Internal Capacity
Wayfinder Implementation Structure

- **Leadership Team**: oversees the overall project, coordinates resources, plans overall logistics and reports to the Wayfinder Executive Team.

- **Implementation Team**: consists of the directors of the programs and some administrative department directors. It monitors progress in the programs and coordinates and directs agency wide system issues in the implementation.

- **Champions Team**: are the leaders within the programs at the direct service level, designated by the directors. This group focuses on the use of CPS in the programs, troubleshooting elements of the approach including mindset, assessment, planning, and intervention. This can involve review of audio or video of Plan B, practicing assessments, etc. It is best to establish a Champions team via face-to-face meetings but can move to conference or video calls over time. The Champions team then become the informal coaches and mentors for the approach in the programs.
Transformational Structure

- Leadership team impacts
  - CPS informed code of conduct and values
  - Supervision for Success practices
  - Mindfulness practices included in team meeting agendas
  - Role-play of Plan B conversations for different types of problems to be solved
  - Consideration of how these practices will inform new programs, policies, and initiatives
Transformational Structure

- **Administrative team impacts**
  - Human Resources department is including a CPS overview in new hire orientations
  - A year-long agency-wide salary survey project was completed in response to employee engagement survey feedback
  - Ongoing practice of mindfulness trainings and engaging administration in perspective taking
  - Buddy program staff will also help orient new employees to CPS
  - Development & Marketing departments working with programs to describe the impacts of CPS to funders and stakeholders
  - Rewards and point systems research feeding into performance management theory, what’s most important to employees in their work and leadership staff?
Transformational Structure

Program Leadership

- Program leaders developing 3-month implementation plans on a quarterly basis
- Developing and supporting CPS Champions
- Focus on moment-in-time application of the approach
- Plans for incorporating CPS and trauma-informed practices into program designs
- Increased attention to vicarious trauma for caregivers and developing supports
- Building collaborative relationships with external partners
Challenges

General all-industry issues

- Turnover of staff
- Building training time into staff schedules
- Developing data collection and documentation practices
- Maintaining staff ratios while taking time to working individually with a youth on lagging skills
- Culture shift with long-term staff members struggling with content and implementation
- Conflicting philosophies regarding Trauma Informed Care systems between regulators and service providers
Challenges

Wayfinder Specific Challenges

- Logistics and costs associated with training off-site and NOC staff teams
- Challenge of scheduling staff time to participate in the “Champions” meeting
- Training different types of program staff, serving clients being from birth to senior
- Diverse clients served including those with other language needs, ID, and multiple disabilities
- Departure of key persons
- Critical program incident commandeering time and attention
- Removal of level system from the STRTP
- Staff members perceiving CPS strategies as additional work tasks, and seeking additional compensation
- Simultaneously implementing agency-wide use of EHRM system
Wayfinder Success Stories & Lessons Learned

- Excitement and buy-in from staff regarding the Champions team, staff learning CPS and also leadership skills
- Wrapping CPS implementation into our Transformational Change Cohorts
- Scheduling of individual coaching meetings with program Directors, establishing of 3-month plans
- Removal of level system from the STRTP
- Use of the training video in program
- “Lunch N Learn” session with leadership team
Wayfinder Success Stories & Lessons Learned

- Excitement and buy-in from staff regarding the Champions team
- Excitement from new hires on implementing the content
- Requests for additional CPS signage at satellite locations
- Improved communication and Teaming among staff
- Increased relational communication between staff and youth
- Addition of introductory exposure video to internal training website
- Integration with trainings for mindfulness
Next Steps

- Certified internal trainers
- Continue to integrate data collection into EHRM system
- Maintain momentum while adding key senior leadership positions
- Add to new hire orientation and the Buddy Program
- Plan for second Tier 1 training in late summer
Questions?
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