



THE CASE FOR CHANGE

GROWTH & CHANGE AT THE
CHARLOTTESVILLE/ALBEMARLE
COMMISSION ON CHILDREN AND
FAMILIES

A REPORT BY
THE EXECUTIVE AND
REDESIGN COMMITTEES OF THE
CHARLOTTESVILLE/ALBEMARLE
COMMISSION ON CHILDREN AND
FAMILIES

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EXECUTIVE SUMMARY

IN 1997, the two localities of Charlottesville and Albemarle County signed a Joint Agreement creating the Charlottesville-Albemarle Commission on Children and Families (CCF). The intent of the Commission was broad and bold. Central to the charter and responsibilities was a commitment to strengthen the services available to local children and their families and “to be accountable for the efficient use of public/private resources, and to be responsive to the changing needs of the community.”

Much has been accomplished since the inception of CCF. Over the last seven years, CCF members and staff have built an organization known for its reliable and credible information on child and family conditions, its emphasis on data and results, its development of new programs in response to local needs, and its coordinating capabilities. During this period of productivity, there have been organizational and fiscal constraints – particularly State budget cuts and growing administrative responsibilities -- that have challenged CCF members and staff to reach their designated goal of “improving a community wide system of services for children and families.”

Conditions for children and their families have also changed over the last ten years in City and County schools, neighborhoods and communities. While there have been positive trends in areas of teen pregnancy and juvenile crime, local families continue to face significant risk factors. The challenges facing families include stresses on the working poor, high health care costs, family violence, high housing costs, lack of substance abuse treatment, and challenges in adequately addressing behavioral problems and delinquency in youth.

Beginning in 2005, CCF members embarked on a planning and research project to determine how the Commission could address these organizational challenges and become more effective in improving outcomes for local children and families. This report is the product of their efforts. The report’s findings come from a historic review of CCF documents since its inception, interviews, surveys and discussions with stakeholders, a review of similar organizations identified as among the best in the country, and deliberations by CCF members.

The final recommendations and recommended strategies are noted below, and expanded upon in the full report:

GOAL 1: INCREASE IMPACT: PLACE CHILDREN AND THEIR FAMILIES AT THE FOREFRONT OF THE LOCALITIES’ PLANNING AND INVESTMENT AGENDAS.

- ◆ Strategy 1.1 Champion and build support for prioritized recommendations to improve conditions for children and their families.

- ◆ Strategy 1.2 Provide planning, analysis and capacity-building to the leadership of City and County public schools to address child and family needs.

GOAL 2: BUILD CAPACITY: INCREASE THE RESOURCES AVAILABLE TO THE CHARLOTTESVILLE/ALBEMARLE COMMUNITY TO UNDERSTAND AND MEET THE CURRENT AND EMERGING NEEDS OF CHILDREN AND THEIR FAMILIES.

- ◆ Strategy 2.1 Establish a non-profit arm to support research, community problem-solving and to advance prioritized recommendations.
- ◆ Strategy 2.2 Build public and private support for investing in children and families.

GOAL 3: IMPROVE EFFICIENCY: RESTRUCTURE THE COMPOSITION OF THE CCF TO FOCUS MEMBERS' ATTENTION ON THE RESEARCH, PLANNING, COORDINATION, AND COMMUNITY PROBLEM-SOLVING NECESSARY FOR PREVENTING RISK FACTORS AND ADDRESSING CHILDREN AND FAMILY NEEDS.

- ◆ Strategy 3.1 Revise charter and membership to more accurately reflect and address CCF's core purpose of improving outcomes for children and their families.
- ◆ Strategy 3.2 Explore transitioning CCF from a management to a technical assistance and evaluation role within the Agency Budget Review Team.
- ◆ Strategy 3.3 Review the efficiency and appropriateness of having the CCF members serve as the legal Community Policy Management Team responsible for CSA funds.

Charlottesville and Albemarle can be a model community where the localities plan and provide for the health and well-being of children and their families as they do for their education, transportation, housing and quality of life. To have proactive policies in place requires a community mobilized to work together to bring about improvements. Public organizations like the Charlottesville-Albemarle Commission on Children and Families are one part of the equation. CCF needs increased capacity to attract public-private partnerships and stronger linkages to local leaders to bring about significant long term change.

An investment in CCF will bring dividends to the localities by providing them with strategies and new resources to reduce risk factors for children and their families. By accomplishing the three goals identified in this report, CCF will be a vital resource to the localities as they seek to improve conditions for children and their families.

I. INTRODUCTION



In 1997, the two localities of Charlottesville and Albemarle County signed a Joint Agreement creating the Charlottesville-Albemarle Commission on Children and Families (CCF). The intent of the Commission was broad and bold. Central to the charter and responsibilities was a commitment to strengthen the services available to local children and their families and “to be accountable for the efficient use of public/private resources, and to be responsive to the changing needs of the community.” The scope of the Commission was envisioned to reach beyond local government, and to engage community partners and residents in making this area a place where families could raise children to reach their potential.

Much has been accomplished since the inception of CCF, yet the community’s children and families still face many challenges. This year, CCF members embarked on a planning and research project to determine how the Commission could address organizational challenges and be more effective in improving outcomes for local children and families. The report that follows makes specific recommendations for change and includes background, a rationale for change, a description of research methods, and three subsequent sections corresponding to the three goals adopted by the CCF to provide a road map for future growth and attention to children’s needs. These goals are:

- (1) INCREASE IMPACT:** Place children and their families at the forefront of the localities’ planning and investment agendas.
- (2) BUILD CAPACITY:** Increase the resources available to the Charlottesville/Albemarle community to understand and meet the current and emerging needs of children and their families.
- (3) IMPROVE EFFICIENCY:** Restructure the composition of the CCF to maximize members’ focus on the research, planning, coordination, and community problem-solving necessary for preventing risk factors and addressing children and family needs.

II. BACKGROUND

A CASE FOR ATTENTION TO CHILD AND FAMILY WELL-BEING

OVER the last ten years in Charlottesville and Albemarle, there have been significant changes affecting children and their families. A look at several trends illustrates the changes in the local child and family population since 1995. On the positive side, there have been some overall improvements such as a decrease in poverty rates among children, a drop in juvenile crime and teen pregnancy rates, and steady academic progress in the schools, as measured by the Standards of Learning. Yet these improvements can mask shifts that have resulted in extensive financial and human costs for our region:

- More children receive Comprehensive Service Act (CSA)-funded services at substantially increased costs;
- More children are in foster care;
- There have been increases in student substance and alcohol use, and suspensions of students;
- Federal and state government investments in human services funding have not kept pace with increased mandates;
- Sub-groups of Charlottesville and Albemarle public school students continue to face a significant achievement gap;
- There are a growing number of persons of all ages without health insurance;
- There are a growing number of households paying more than 30% of their income for housing.

As a result, local families face many challenges in raising children in a healthy, safe, and supportive environment. They include stresses on the working poor, high health care costs, family violence, high housing costs, lack of substance abuse treatment, and challenges in adequately addressing behavioral problems and delinquency in youth. The demographics of Charlottesville and Albemarle have also changed. There has been a steady increase in the number of families with limited English proficiency in schools and neighborhoods, and a segregation of poverty by neighborhood and housing patterns mirroring an increasing income gap nationwide.

These needs have been clearly documented by CCF; most recently through its publication *Key Areas of Child and Family Focus, 2004*. Many non-profit, public and civic organizations are addressing these needs by mentoring children, providing family support services and enrichment programs and support services across the community.

To realize the full potential of area children and reduce the risk factors for children from distinct neighborhoods, schools and families, an agency-by-agency approach is not sufficient. The City and County will benefit from developing a coordinated regional approach to improving the health and safety of local children, that includes the well-being of children and families in their

vision for a healthy community with a high quality of life shared by all. To do so, schools, government departments and public and private organizations benefit from sharing information, planning together, and adopting and accomplishing specific measurable goals to improve outcomes for children and their families.

This type of unified vision and commitment was one of the driving forces behind the local governments' establishment of the CCF in 1997 and inspires over 200 volunteers to join CCF work groups and meetings each year. While CCF has come some distance in realizing this vision, a strengthened impact, capacity, and efficiency is needed to be better able to address the extensive unmet needs in the community.

In retreats from 1999 to 2004, CCF members have consistently stated that they want the board to be more visible in raising awareness about children's needs, and, taking this information to the next, logical step: to advance policies and programs that support children and their families. Prioritized recommendations, new resources to address needs, better integration with government, community-wide outcomes in priority areas, and a stronger link with schools are all part of CCF's *Case for Change* to improve outcomes for children and their families.

III. RATIONALE FOR GROWTH AND CHANGE

THE Charlottesville-Albemarle Commission on Children and Families is a product of the localities' human services and comprehensive plans developed ten years ago in 1995. The Commission was established by Joint Agreement in 1997, and became operational in March 1998. As CCF enters its eighth year of operation, it is timely to examine whether the original responsibilities and tasks designated to the CCF meet the changing needs of the community and the local governments ten years later.

The 1997 Charter gave the CCF coordination responsibilities and required all major child-serving agency executives – including the Superintendents of Schools – to plan together using common data and information and to adopt compelling and visionary goals. To guide this community wide planning effort, Council and Board appointed 18 members, which increased to 22 in 2003 to allow for increased citizen representation. The agency representatives were joined by a majority of citizens, including two young people, and representatives of United Way, University of Virginia and the two local government executive offices to be “the eyes and ears of children and their families”.

CCF was also tasked to administer a large pool of Comprehensive Services funds (\$12 million in 2005), serving as the legal entity responsible for serving as the State mandated Community Policy and Management Team (CPMT) and to provide youth development and prevention plan-

ning for the State-funded Offices on Youth. In 1999, CCF was tasked by the City Manager and County Executive Offices to administer and manage the Agency Budget Review Team process on an annual basis, in addition to its technical assistance and evaluation role in that process.

The CCF board and staff have addressed all aspects of the Joint Agreement in the course of its seven-year history. During its 2004 annual report to the localities, CCF demonstrated results in all eight areas of its designated responsibilities, which included providing comprehensive short and long-range planning for children and family services; making program and funding recommendations; reviewing and evaluating current service delivery systems; identifying and encouraging new, innovative approaches and funding sources; providing structured opportunities for community input on the needs of families; and presenting an annual report to Board and Council to insure that the County and City were in agreement with the policy and direction set by the Commission.

Over the last seven years, CCF members and staff have built an organization known for its reliable and credible information on child and family conditions, for its emphasis on results; its evaluation of programs; and its coordinating capabilities. CCF publications, service directories, research briefs, and roundtables have generated increased media attention to child and family needs and resources, access to services, and community understanding. CCF Board meetings have evolved into a monthly meeting place for regional cooperation and joint human services planning. CCF-sponsored initiatives have resulted in enhanced services in early childhood development, juvenile justice, family violence prevention, out-of-school time, and other key areas of child and family needs.

Yet, during this period of productivity, there have been organizational and fiscal constraints that have challenged CCF members and staff as they sought to accomplish their designated goal of “improving a community-wide system of services for children and families.” For example, State juvenile justice funding for CCF was cut as part of the Governor’s budget in 2002, resulting in the loss of financial support for 1.5 of the CCF staff. State funds that had supported research and planning prior to 2002 were redirected to support basic operation of juvenile justice services. CCF’s administrative burden for the operation of the Comprehensive Services Act grew during this period, as cases and costs increased, drawing on more staff and member time and requiring additional personnel support and oversight. The management of the Agency Budget Review Team (ABRT), and related analysis, research and technical assistance, became an increasingly significant part of the CCF workload. This management role--starting in 1999 with approximately 45 staff hours, and increasing to more than 450 hours annually between September and February of each year plus ongoing coordination and communication responsibilities--stimulated significant debate among members of the planning team regarding whether this should be a core function of the CCF.

The City and County governments and social service departments were generous in filling many of these funding gaps with one-time and ongoing funding intended to maintain operations. While no cuts were made to staff, the net result is that more than half of the staff time is now dedicated to human services administration and management. There has been a reduction in the hours and the internal funds available for community engagement, planning, resource development and fundraising, and data collection and research. Less and less staff time is available to understand emerging needs, improve human service systems and mobilize the community to improve outcomes for children and their families -- despite unmet human service needs in the community.

In addition, CCF's method of providing broad guidance to the localities in a range of child and family areas has needed to evolve into providing specific advice and priorities to busy decision makers seeking to make improvements in human services.

The recommendations herein are designed to increase the capacity of the Commission to improve conditions for children and their families, advance prioritized recommendations, and to increase CCF's impact and efficiency.

IV. RESEARCH AND PLANNING METHODS

AT CCF's October 2004 retreat, members tasked a sub-committee of the CCF to identify ways to improve the CCF's impact on improving local conditions for children and their families. The Redesign Team was tasked to develop a means for the CCF to identify and champion prioritized recommendations from conception to implementation. This team was later joined by the CCF Executive Committee to review the Commission's structure, responsibilities and membership to assess whether it was poised to carry out its current mission, address its lack of capacity, and prepare for strategic growth. The Redesign Team included citizen members Tracey Hopper, Tim Heaphy, Kim Walters, and Alia Stewart-Silver, Charlottesville Department of Social Services Director Buz Cox, and CCF Director Saphira Baker. The 2004-2005 Executive Committee of Albemarle Department of Social Services Director Kathy Ralston, citizens Madison Cummings, Danielle Wilcox, and 16th District Court Services Unit Director Martha Carroll.

This report's findings come from a historic review of CCF documents since its inception, interviews, surveys and discussions with stakeholders, a review of similar organizations identified as among the best in the country, and deliberations by CCF members. Specifically, the sources are:

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- ◆ **Staff Review of CCF Past Retreats and Planning Documents** – An analysis of all recommendations put forth by the Commission between 1998-2004 including their impact on programs and policies, as well as resulting allocation decisions by the localities, and a synopsis of the findings with “lessons learned”;
 - ◆ **Interviews with “best practice” Commissions**– A summary of the funding mechanisms, participants, system reform efforts, relationship to local government and communication vehicles for model organizations. The funding information was supplemented with a meeting with representatives of the local Charlottesville Area Community Foundation.
 - ◆ **Meetings with community representatives** – A dialogue with a group of representatives of the low-income communities in Charlottesville and Albemarle County regarding the best means to identify, champion and support recommended improvements in child and family conditions.
 - ◆ **Analysis by redesign team and Executive Committee** – Analysis identifying the nature of the barriers faced by CCF and opportunities for strategic growth, and documents including criteria for adopting prioritized recommendations, communication to work groups, work plan.
 - ◆ **Discussions by the full CCF** – Ongoing dialogue, building consensus and approval of the four roles of the CCF, the new strategy for prioritizing and championing recommendations, and adoption of the major recommendations and content of the report and its findings.

V. THE CHALLENGES AND SOLUTIONS:



GOAL 1. INCREASE IMPACT: PLACE CHILDREN AND THEIR FAMILIES AT THE FOREFRONT OF THE LOCALITIES' PLANNING AND INVESTMENT AGENDAS.

Anticipated Outcome: Conditions for children and their families improve in priority areas. Tangible and measurable improvements are realized.

Rationale:

The use of a child and family coordination and advisory body to address regional needs insures a unified approach to solving community wide problems and an alignment of resources, targeted where they are needed most. In research conducted for this report, organizations funded by the Robert Woods Johnson's Urban Health Initiative provided useful guidance as to how CCF can strengthen its role as a catalyst for improving community conditions in targeted areas of child and family need.¹

In studying these Urban Health Initiatives, several were identified as “think tanks” for their local governments and, in some cases, the public schools. These organizations were responsible for crafting their localities' child and family budgets, advising leaders on policies and programs, analyzing community needs, engaging residents and setting a children and family agenda with measurable outcomes. At two of the organizations, both the public schools and the local governments contributed staff and financial resources, and considered these public-private partnerships their vehicle for improving conditions in areas such as after-school, violence prevention, and early childhood development.

At the October 2004 CCF retreat, board members were unanimous in their desire to increase attention and support for children and family issues within local government, and put these issues on the front of the radar screen for local leadership. Members reviewed their track record and noted substantial impact on changing policies and practices among non-profits and public agencies. Yet, only a small percentage of CCF recommendations resulted in the allocation or redirection of local City-County government dollars or the adoption of new public policies. As a result, CCF members identified a need to narrow the number of issues put before the governments, to develop a concrete way of identifying priority issues and engaging the community in the selection and advancement of these issues, and to measure the impact of these initiatives.

¹ As noted in Robert Woods Johnson foundation materials, “Urban Health Initiative (UHI) campaigns are catalysts for change, not service providers or funders. Each works with partners inside and outside government to improve the systems—such as education, juvenile justice, health and recreation - that serve children. With unwavering resolve and a commitment to be guided by sound data, UHI campaigns have an ambitious goal: to improve kids' health and safety statistics throughout an entire city or metropolitan area.” Robert Woods Johnson Foundation, Urban Health Initiative, 2005. Online at: <http://www.urbanhealth.org>.

 **RECOMMENDATION 1.1:**
**CHAMPION AND BUILD SUPPORT FOR PRIORITIZED RECOMMENDATIONS TO
IMPROVE CONDITIONS FOR CHILDREN AND THEIR FAMILIES.**

Anticipated Outcome: Recommendations are implemented and supported through public and private partnerships. As a result measurable improvements are achieved.

To build community and public support for needed children and family policies and programs will require championing fewer issues with more detail and a greater emphasis on developing partnerships and identifying resources.

CCF has successfully engaged community members in “work groups” tasked to better understand community needs and identify and implement recommended solutions. These work groups are teams of eight to twenty-five residents and public and non-profit agency staff focused on a particular child and family problem or need for system reform. Work groups have captured the energy and talents of upwards of 200 volunteers annually and resulted in specific recommendations and concrete improvements in human services delivery. Yet, the information and results coming from over ten CCF work groups at any given time may have inadvertently scattered attention from two or three pressing issues requiring immediate action.

At the Commission’s retreat in October 2004, members agreed to further develop CCF’s catalyst function by identifying prioritized recommendations each year and creating a plan of action to address these priorities. The CCF would advocate and provide leadership regarding matters related to these recommendations throughout the year, and its success in this role would be evaluated at the conclusion of each year. A new non-profit arm (see Goal 2) would provide additional resources for the research and planning to develop these recommendations in collaboration with community partners, as well as providing seed money to support strategic data-driven initiatives and solutions that result at area public and non-profit agencies.

A centerpiece of this approach would be an interactive public annual meeting with work group representatives and Commissioners, as well as residents affected by child and family programs and policies. CCF’s Redesign team has created guidelines for engaging the community and Commissioners in prioritizing recommendations and developing community champions for their implementation and measuring their success. These materials are appended to this report.

In a memo to CCF members, citizen member Tracey Hopper writes: “It is important to emphasize that regardless of what “priority” is identified, the other roles of the Commission and the other matters tackled by work groups continue to be vitally important to our community and our mission. We merely are adding another component to what the Commission does in

order to attempt to provide positive outcomes for families and children more effectively and efficiently.”

In a survey of local City Council, Board of Supervisors and local government leaders, respondents noted their use and support for CCF publications such as *Stepping Stones*, the *2003 Community Needs Assessment*, and the annual Agency Budget Review Team report and a desire for more detailed information on recommendations. In response to this request, CCF has developed a template for advancing prioritized recommendations which requires commitments of partners and resources, a timeline for completion, and clear outcomes that can be measured annually. Beginning in 2004, CCF began modeling this approach on a small scale with its *CSA Cost Containment Report*, the Assets for Youth recommendations for out-of-school time, and the community-wide effort to establish a Child Advocacy Center.

 **RECOMMENDATION 1.2:**
PROVIDE VALUABLE PLANNING, ANALYSIS AND CAPACITY BUILDING TO THE LEADERSHIP OF CITY AND COUNTY PUBLIC SCHOOLS TO ADDRESS CHILD AND FAMILY NEEDS.


Anticipated Outcome: Requests for assistance increase from School leadership and personnel. Schools implement proven policy and practice to address child and family needs, with demonstrated improvement in conditions.

When asked why the local schools were so involved in the leadership, staffing and support of Safe Passages (Oakland, California’s system reform effort and Urban Health Initiative site), director Josefina Alvarez-Mena said, “the school system has the most interaction with children and families; you have to have the schools involved to do this work.” She cites the public schools’ involvement as the reason why their middle school strategy was so successful, and notes that a visionary superintendent was one of the greatest forces in starting Safe Passages ten years ago.

Beginning in 2004, CCF began presenting its information to the School Boards of both localities, and working with administrators in conducting research, providing guidance on local resources and the implementation of new initiatives. Prior to 2004, interaction with school personnel was done on a case-by-case basis, within CCF work groups and through the Superintendents’ representation on the CCF board. However, recent joint initiatives have demonstrated the potential of working more closely together on priority issues. For example, CCF staff supervised the grant writing of the successful 21st Century Learning grant for the Albemarle County Schools (providing data, helping with coordination between schools and agencies, and supervision and technical assistance for grant writing), worked with City and

County guidance counselors, principals and leadership to conduct youth-led focus groups of 276 middle and high school youth to determine needs for out-of-school programs, and directed staff and interns to compile a resource listing and a research brief on the human services needs of Limited English students and their families for the Charlottesville City Schools. The results of these efforts are new programs and improved targeting of services for public school students. As positive as these initiatives have been, all have required outside ad-hoc funding generated by CCF itself to support, and are not part of a strategic collaboration between human service organizations and the school system.

A more ongoing relationship with City and County school planning and research efforts would allow CCF and public schools to identify where a joint venture would be promising, and to raise funds jointly to address the needs of students, particularly initiatives that improve students' development, economic situation and social well-being.

 **GOAL 2: BUILD CAPACITY: INCREASE THE RESOURCES AVAILABLE TO THE CHARLOTTESVILLE/ALBEMARLE COMMUNITY TO UNDERSTAND AND MEET THE CURRENT AND EMERGING NEEDS OF CHILDREN AND THEIR FAMILIES.**

Anticipated Outcome: Additional resources are available to identify and stay ahead of negative trends related to children and their families; staff support is available to facilitate community problem-solving; and resources are available to advance, implement and evaluate prioritized recommendations. Services for children and families are more effective.

Rationale:

When CCF was established in 1997, the future looked bright for continued State and local funding. Office on Youth funding supported nearly a third of the CCF office, with Comprehensive Services Act (CSA) administration and Virginia Juvenile Community Crime Control (VJCCCA) funds supporting about half the cost of CSA administration and Juvenile Justice Coordination. In 1998-99, the four full-time staff were supported by both local and State funds and included a Director, CSA Coordinator, Juvenile Justice Coordinator and clerical support. This staff grew modestly over eight years with the addition of a part time Planner (2001), a half-time FAPT Coordinator (2004), additional clerical hours, and the split of the clerical position into two part-time positions (2002) -- one focusing on information and outreach, and the other on office management bringing the full staffing to 5.2 in 2005, half of which is focused on CSA and VJCCCA coordination and related administrative support.

In 2002, Office on Youth funds were cut entirely and VJCCCA funds were cut in half, eliminating support for 1.5 positions in the CCF office. CSA State funding went from 50% to 28%

of the full cost of operation. Stop-gap funding measures supported continuation of the CCF at the same level for the next two years. Over time, however, the increasing State demands combined with decreased dollars meant that CCF began to rely on local government as its principal funding source, and supported what limited applied research it could accomplish with small grants and volunteers. Limited resources also impacted the extent to which CCF could leverage public and private support for its recommendations and build a type of community “campaign” in support of investment in areas of need. In the past year alone, CCF dropped sponsorship of its annual Legislative Forum on Children and Families -- an annual event which had attracted over 140 diverse attendees and local legislators and had increased understanding of child and family needs and necessary legislation -- due to limitations of staff support.

Since 2002, there has been an increase in the CCF staff workload, increased usage of volunteers for core research and planning activities without capacity to sustain or adequately supervise these initiatives, and diminished attention to new, emerging or current human service needs. This loss of staff time has meant that staff have not had the capacity to implement new initiatives that are clearly based in local data and community needs; to advance and champion specific recommendations once they are developed; to provide adequate technical assistance to public and non-profit agencies, guidance to government; or retain high quality reliable and credible research and evaluation. In short, CCF has gradually become unable to fulfill the promise of its original charter and responsibilities.

 **RECOMMENDATION 2.1:**
ESTABLISH A NON-PROFIT ARM TO SUPPORT RESEARCH, COMMUNITY PROBLEM-SOLVING, AND IMPLEMENTATION OF STRATEGIC INITIATIVES AT PUBLIC AND NON-PROFIT AGENCIES.

Anticipated Outcome: An increase in financial resources available to CCF and non-profit and public agencies to plan for and meet identified needs. Community needs are clearly defined and proven strategies are implemented.

Since 2002, on an occasional basis, CCF has successfully raised money from private and public sources and supported new research with small grants and federal IVE reimbursement funds. Through these kinds of donations and partnerships, staff and members have expanded the ownership and engagement of citizens and funders in its work. Yet, to receive many of the foundation and individual donor grants, it is advantageous to have a 501c3 designation for donors’ tax purposes. A non-profit arm broadens the circle of donors willing to invest in system reform and improved child and family outcomes. Further, many foundations require non-profit status for charitable contributions.

It is envisioned that CCF's non-profit arm would focus on "applied research" and support of strategic initiatives that are identified through CCF work groups and the community wide prioritized recommendations process. These new resources would help support work group members and staff to conduct research, formulate recommendations to address community problems, and spark the implementation of new initiatives. Additional resources would allow CCF to advance recommendations that are based on community needs and data driven, and to engage community members in finding and supporting solutions.

To provide a few examples:

- ◆ **Out-of-School time:** During 2005, CCF's Assets for Youth Work group was able to generate \$10,000 in private funds to conduct youth focus groups and produce recommendations for increasing access to programs for low-income youth to overcome the gap in participation; Additional resources would allow work group members to advance the recommendations, such as piloting an after-school program at Walton and Henley middle schools; developing a summer youth career exploration initiative for youth ages 13-16; and training school and youth program staff to increase youth engagement and leadership in their programs using recommendations from young people themselves.
- ◆ **Human Services Planning:** During 2005, members of a CCF ad-hoc inter-generational work group recommended updating the County of Albemarle's 1995 Human Services Plan and the City's Comprehensive Plan to reflect local needs and set new priorities and outcomes for the next decade, but were unable to proceed with this recommendation due to lack of resources. New resources would provide CCF with staffing to engage community partners and residents to participate and help support this process, build consensus for a vision, conduct necessary research, and identify and measure priority goals so that the localities could improve services and measure their progress on an annual basis.
- ◆ **Impact of Family Violence on Children:** CCF's Impact of Family Violence work group has completed a feasibility study and a business plan for the development of a Child Advocacy Center to reduce the impact of violence on young children. Staff from twelve agencies participate voluntarily in joint staffing of cases for increased efficiency and prosecution of cases. Additional resources would allow the Child Advocacy Center planning group to pilot the center using existing resources and have the necessary foundation in place to attract and sustain federal and State funds designated for Child Advocacy Centers.

CCF has a track record of bringing in funds for community-based agencies. CCF data and technical assistance have helped to generate an average of \$500,000 annually in grant funds to not-profit and public agencies. CCF members and staff have raised State and private dollars to support studies to understand local conditions and improve services. These studies include a 2002 telephone survey and focus groups including 840 families, focus groups of 276 youth on out-of school-time, case file research on 576 juvenile offenders, and a 2001 study on improving information-sharing within the Juvenile Justice system. These reports drive many human service innovations across the City and County-- reaching residents in areas of documented need. With additional capacity and staff focusing on fund raising and development, it is anticipated that CCF could increase the annual dollars coming into Charlottesville and Albemarle targeted at unmet human services needs and support solutions in a timely manner.

In consultation with staff at the Charlottesville Area Community Foundation, CCF's planning team confirmed that developing a non-profit arm makes sense for CCF as a means of diversifying funding and strategic growth. In addition, the model organizations interviewed for this report had either established a non-profit arm or transitioned entirely to non-profit status to increase public and private investment in community wide strategies. Their directors also noted that membership on the board of their organization and its non-profit arm are critical for maximum impact. They recommended board members placed at high levels in the City government to have access to data, influence, and policy in human services, finance, and politics, as well as credible and influential members of the business community (See Goal 3 for recommended members for CCF and its non-profit arm.) Directors of these organizations noted that, while using an existing non-profit as a fiscal pass-through can be a temporary solution, this is generally confusing to donors and expensive to administer (usually the hosting non-profit seeks an administrative fee) and there is potential competition between organizations when raising funds.

Clearly, CCF's neutral role as a convener and advisor for child and family services is critical to maintain as it diversifies its funding. CCF members are developing criteria for the non-profit arm that stipulates that monies raised be aimed at leveraging new resources for the community, and not compete with area direct service organizations.

 **RECOMMENDATION 2.2:**
BUILD PUBLIC & PRIVATE SUPPORT FOR INVESTING IN CHILDREN AND FAMILIES.

Anticipated outcome: A strategic communications campaign that would highlight areas of need, convey measurable community wide goals and engage residents, and public and private partners in addressing new and emerging needs. Increased attention to children and families is evident in public policy and public and private funding of services.

A strategic communications effort is needed to increase the prominence of issues related to local child and family well-being and the need for action. As noted in the Robert Wood Johnson's compilation of "lessons learned" among community-wide system reform efforts, "A sophisticated communications campaign is key to increasing the prominence of youth health and safety issues, and creating and sustaining momentum for change." They further note, "An experienced political communications expert, either on staff or under contract, should be a key member of a change agent's leadership team."

The organizations interviewed for this study that have raised funds and engaged influential partners in improving outcomes for children at a large scale have dedicated significant resources to communicating with the public and community leaders about the need for change. This building of public will toward support of children translates into financial support for new initiatives as well as increased attention to and support of public human service investments. For example, Philadelphia uses its child and family community report card to gauge success, highlight areas needing attention, and improve conditions. Arlington County, Virginia also uses its community report card – published every three years – as a rallying point: to point out areas of need, generate support, and measure progress.

At the same time, model organizations identify two to three priority issues which they advance, measure and champion in the community (as recommended in Section I of this report). The most effective efforts adopt specific locality-wide measurable outcomes and measure their progress on a regular basis in one or more focused areas, such as increasing after-school involvement, reducing family violence, or reducing youth violence. These quantifiable goals not only keep the system reform efforts focused, they are essential for building and sustaining public will.

CCF's presence on the Internet and in the community is identifiable and well-utilized by the human service professional community and a diverse group of community partners with growing numbers of downloads and hits annually. Despite capacity limitations, CCF has built a strong organizational identity and emerged as a resource for child and family information, planning and innovation for the media, area human services providers, community leaders and residents. CCF roundtables and staff development trainings have consistently drawn high attendance and been evaluated positively over the years.

With all this in place, CCF has a strong foundation to build from a focused, results-oriented message across to potential volunteers and supporters. This will help generate citizen support for policies and programs that benefit children and their families. A strategic communications effort would add value to all area human service organizations by increasing the climate and likelihood of public support and investment in improving conditions for children and their families.



GOAL 3: IMPROVE EFFICIENCY: RESTRUCTURE THE COMPOSITION OF THE CCF BOARD TO FOCUS MEMBERS ATTENTION ON THE RESEARCH, PLANNING, COORDINATION, AND COMMUNITY PROBLEM-SOLVING NECESSARY FOR PREVENTING RISK FACTORS AND ADDRESSING CHILDREN AND FAMILY NEEDS.

Anticipated Outcome: Community needs are regularly and reliably identified. Effective strategies for improvement are identified and implemented.

Rationale

When the CCF was established in 1997, it was given major responsibility for providing the legal oversight of the administration of the Comprehensive Services Act system locally as the state-designated “Community Policy and Management Team”. It followed that composition of its membership was determined by State law which required members of seven public agencies to be on the board, as well as a CSA private provider. This was an extensive responsibility involving the oversight of some \$12 million dollars of funds in 2004 and a coordinated staffing and review process between public child-serving agencies, including the public schools. It is primarily an administrative and coordination responsibility and was distinct from the Commission’s other eight responsibilities which had to do with planning, evaluation, and service improvement for the full spectrum of non-profit and public child and family services.

In addition to the CSA administrative responsibilities, CCF was tasked with administrative and management of the Agency Budget Review Process in 1999 without accompanying additional staffing or operational resources. CCF has managed this process through its Agency Budget Review Team. In this role, CCF’s expertise and utility has been in serving as a technical assistance arm to agencies, training providers in using outcome measurement to communicate and measure their results, and linking local investment strategies with community needs.

In CCF member surveys throughout this period, the core functions of CCF have been understood as improving overall child and family services and retaining accurate and reliable information on children and family conditions. The administrative responsibilities related to CSA (as well as oversight of the Virginia Juvenile Community Crime Control Act (VJCCCA) and the management of Agency Budget Review Team) have not been considered core responsibilities by the majority of members, despite accounting for more than half the time of CCF’s staff time and resources.

Reducing administrative and management responsibilities for staff related to ABRT, adding new members poised to expand public and private support for children and their families, and consideration of separating the CSA and CCF legal responsibilities will create a more efficient and effective planning body for the localities, and increase available resources to address community needs.

 **RECOMMENDATION 3.1:**
REVISE CHARTER AND MEMBERSHIP TO MORE ACCURATELY REFLECT AND ADDRESS CORE PURPOSE OF IMPROVING OUTCOMES FOR CHILDREN AND THEIR FAMILIES.

Anticipated Outcome: The quality of and resources available to CCF and community public and private partnerships in support of children and their families' increases. More resources are attained to identify and meet child and family needs.

As part of CCF's goal to increase resources and have a greater impact, additional membership is sought to expand and energize the CCF board, connect CCF more closely with the public schools, and build community support.

In interviews with similar organizations across the country, board membership and expertise is closely aligned with the core mission and includes, in addition to citizens, increased representation from the private sector and community leadership. At organizations which had generated community-wide support for child and family initiatives, board members viewed themselves as champions in improving services. While many board members were administrators or managed large human services budgets in their home organization, their role as board members was to be a catalyst for community improvement. None viewed their role as serving a legal mandate for administration of funds (such as serving as the localities' Community Policy Management Team for CSA services).

In addition, the Executive Committee reviewed CCF's place within the City and County government and found that more opportunities for collaboration and connection were desirable. CCF is tasked as an advisory arm to local government for children and family services. The representation and oversight by the Assistant City Manager and Assistant County Executive on the CCF board, as well as the leadership of the local government social service directors, has been vital to CCF's effectiveness and its connection to local government. CCF members and staff also play an important role in the recommending of community agency allocations on behalf of local government.

At the same time, there are limited opportunities for CCF staff and members to participate in City and County internal departmental planning, budget preparation or overall strategic planning related to local government children and family services or to exchange information and share recommendations with those beyond its membership. CCF's regional status crosses traditional departmental and division lines and calls for a unique arrangement to solidify these organizational connections to the two local governments. Increased governmental representation on CCF would promote wider understanding of CCF, increased sharing of information between CCF and government departments, and be a vehicle for integrating CCF recommendations into

the localities processes while building a wider understanding and foundation of support within each government organization.

After reviewing membership on organizations similar to CCF that strive for a community wide impact, the Redesign and Executive Committees recommend that the following individuals be added to the Commission to increase the capacity, impact, connection with local government and schools, and efficiency of the CCF:

- Private Sector Chief Executive Officers or Business Owners Employers (2 representatives)
- Police Chiefs (1 from each locality)
- Parks and Recreation Directors (1 from each locality)
- School Board Member (1 from each locality)
- Juvenile Court Judge
- Faith Based Organization Representative

It is also recommended that the City Council and Board of Supervisors, upon making appointments, analyze CCF board members' composition and skill sets for their ability to drive system reform/improvements, enhance and improve CCF's impact and influence in the community, and their willingness and/or ability to raise funds. Members would be expected to have an activist as well as an advisor role, and would be encouraged to have more direct involvement in public efforts to champion prioritized recommendations and bring attention to children and family issues. This new membership and criteria for appointments would require an amendment to the existing Joint Agreement and charter for CCF:

 **RECOMMENDATION 3.2:**
**EXPLORE TRANSITIONING CCF TO A TECHNICAL ASSISTANCE AND EVALUATION
ROLE WITHIN THE AGENCY BUDGET REVIEW TEAM.**

Anticipated Outcome: Community agency applicants and local funders increase satisfaction with overall interaction, technical assistance, and quality of review process and localities' ability to invest in priority needs. Community agencies demonstrate improved measurable outcomes.

In 1999, CCF was asked to manage the community agency funding cycle in addition to providing guidance and technical assistance to applicants and revising the application process. This addition of responsibilities has resulted in an estimated additional 450 hours annually. CCF's request for a Planner to assist with this process was not funded in the City-County FY06 budget process.

Because there is very limited administrative and financial management capacity at the CCF, the

director and Planner essentially put on hold other responsibilities between October and January of each year to administer this process and coordinate the Agency Budget Review Team. Taking place outside of the traditional City and County budget development process, the recommendations come in as a separate component and are not linked with overall City/County human service planning or budgeting.

In times of scarce and decreasing resources, managing the budget process may not be the optimal use of CCF expertise or analysis. Community agencies have indicated in evaluations and roundtables that the CCF Planner's and Director's time and expertise is beneficial in working with them to improve program quality. CCF's original charge has more to do with assisting the localities in aligning community investments with needs, analyzing measurable improvements, and providing funding recommendations than with managing the review process for non-profit applicants. At a recent roundtable with community agencies on this topic, the number one recommendation was to increase interaction and communication between the ABRT and agencies requesting funding. This would include ongoing site visits, technical assistance, and peer exchange between agencies throughout the year instead of solely during the intense October-February review process.

It is recommended that an effort be made to determine whether CCF staff time can be reduced in managing this process, or whether the management responsibilities can be shared with the localities. If CCF staff were freed from some of the administrative and clerical responsibilities inherent in this process, it is anticipated that staff could more easily accomplish technical assistance tasks desired by both reviewers and agencies, such as conducting and standardizing site visits, providing guidance to applicants in measuring outcomes, analyzing the match between human service needs and local investments, evaluating and continuously improving the review process and having ongoing communication with applicants. In short, the ABRT process either needs additional resources to be managed adequately at CCF, or should be gradually shifted back to the budget offices in the City Manager's and County Executive Offices.

 **RECOMMENDATION 3.3:**
REVIEW THE EFFICIENCY AND APPROPRIATENESS OF HAVING THE CCF MEMBERS SERVE AS THE LEGAL COMMUNITY POLICY MANAGEMENT TEAM RESPONSIBLE FOR CSA FUNDS.

Anticipated Outcome: Recommendation for the legal responsibilities of the CCF, the CSA, and administration of CSA program responsibilities for optimum accountability and oversight for administration of CSA funds. Funds are used effectively and efficiently.

Early in its trajectory, the CCF designated the CSA Committee to serve as the “de facto” Com-

munity Policy and Management Team to manage this extensive responsibility. At the same time, the CCF members were recognized by the State and the localities as the State mandated Community Policy and Management Team (CPMT). Specifically, the responsibilities of the CPMT as designated to and carried out by the CSA Committee in the CCF bylaws are to;

“Carry out the administration of the Comprehensive Services Act, as specified in the Code of Virginia. The Committee will develop local procedures to provide services to children and families, including management of pool funds through monthly monitoring and authorization of expenditures, implementation of state requirements, and oversight of the Family Assessment and Planning Teams. New policies developed by the Comprehensive Services Act Committee will be submitted for formal approval to the full Commission.”

In order to keep CCF members informed, the CSA Committee Chair presents quarterly updates on the program and policies issues inherent in providing children with services funded by the Comprehensive Services Act. Planning and research issues that are identified through the CSA Committee are regularly brought to the CCF for attention, such as the risk factors facing children receiving extensive services or, more recently, the need to contain costs and retain quality services within the CSA system. CSA staffing is provided by a full-time CSA Coordinator, a half-time Family Assessment Team Coordinator, and a new full-time Utilization Review Coordinator position, all housed at CCF and under the CCF director’s supervision.

During the 2004-2005 year, CSA oversight and coordination committees were reorganized in keeping with the recommendations of the *CCF CSA Cost Containment Report*, November 2004. As part of this reorganization, Finance and Program sub-committees were established and are underway. Given the early stages of this reorganization, it was determined by the Planning Team that it is premature to recommend more extensive changes in the administration of CSA and the structure of its committees until one year’s time. At the same time, members acknowledged that designating the CCF members as the localities’ CPMT may create an unnecessary layer of bureaucracy in the system, particularly with all but one of the required members (parent representative) already serving on the current CSA Committee.

While linking CSA planning with CCF was logical in 1997, it may not follow that citizen commissioners should hold legal responsibility for funds which are managed by public agencies, and for which they receive quarterly updates and information but have a limited understanding of the purpose and scope.

VI. CONCLUSION

Charlottesville and Albemarle can be a model community where the localities plan and provide for the health, safety and well-being of children and their families, as they do for their education, transportation, housing and quality of life. To have proactive policies in place requires a community mobilized to work together to bring about improvements. Public organizations like the Charlottesville-Albemarle Commission on Children and Families are only one part of the equation. CCF needs increased capacity to develop and attract public-private partnerships and stronger linkages with local leaders to bring about significant long term change.

The current CCF model is strong, yet its potential impact is even greater. An investment in CCF will bring dividends to the localities by providing them with strategies and new resources to reduce risk factors for children and their families. By accomplishing the three goals identified in this report, CCF will be a vital resource to the localities as they seek to improve conditions for children and their families.

**CCF BOARD MEMBERS
2004-2005**

Brian Bills, Youth Representative, Albemarle County
Martha D. Carroll, 16th District Juvenile and Domestic Relations Court Service Unit
Dr. Kevin C. Castner, Albemarle County Schools
Shirley Copeland, Citizen Representative, Albemarle County
Robert A. Cox, III, Charlottesville Department of Social Services
R. Madison Cummings, Citizen Representative, Albemarle County
Leslie Harris-Scott, Citizen Representative, City of Charlottesville
Tim Heaphy, Citizen Representative, City of Charlottesville
Tracey C. Hopper, Chair, Citizen Representative, City of Charlottesville
Winx Lawrence, University of Virginia
Dr. Susan L. McLeod, Thomas Jefferson Health District
Linda Peacock, City of Charlottesville
Dr. Laura Purnell (interim Superintendent representative), Charlottesville City Schools
Philip Campbell, Region Ten Community Services Board
Katherine A. Ralston, Albemarle Department of Social Services
Noah Schwartz, Monticello Area Community Action Agency
Alia Stewart-Silver, Youth Representative, City of Charlottesville
Cathy Train, United Way-Thomas Jefferson Area
Roxanne W. White, County of Albemarle
Danielle Wilcox, Citizen Representative, City of Charlottesville
Dr. Paul Wisman, Citizen Representative, City of Charlottesville

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