NORTH CAROLINA FAMILY-CENTERED MEETINGS PROJECT

ANNUAL REPORT TO THE NORTH CAROLINA DIVISION OF SOCIAL SERVICES FISCAL YEAR 2004 - 2005

SUMMARY AND PROJECTIONS

Dr. Joan Pennell
Principal Investigator & Project Director

With Kara Allen-Eckard, Amy Coppedge, and Cherie Spehar

North Carolina State University
Department of Social Work
Joan Pennell, 2005

North Carolina Family-Centered Meetings Project
North Carolina State University
Department of Social Work
Box 7639, Raleigh, North Carolina 27695-7639
United States of America
SUMMARY AND PROJECTIONS

Mission and Vision

The mission of the North Carolina Family-Centered Meetings (NC-FCM) Project is “to provide training and evaluation on family-centered meetings in North Carolina,” and its vision is “to transform practice by supporting the leadership of families in service planning.” Family-centered meetings is a philosophy and practice integral to a major child reform in North Carolina— the Multiple Response System (MRS). The philosophy and practice of family-centered meetings guides two of these seven MRS strategies: Child & Family Teams and Shared Parenting Meetings.

The vision of the North Carolina Family-Centered Meetings Project is to transform practice by supporting the leadership of families in service planning.

Expansion of Training Team

The NC-FCM Project commenced in July 2002 and has just finished its third year of operation. The Project is based at the Department of Social Work of North Carolina State University and funded through a contract from the North Carolina Division of Social Services (NC DSS). For the first half of the fiscal year 2004-2005, all trainers were employees of NC State University. In response to the counties’ demand for more family-centered meetings training and training curricula, NC DSS increased the funding for trainers and curriculum development. In January 2005 training staff were added at NC State University and were joined by two trainers affiliated with Appalachian State University’s Appalachian Family Innovations.

The training team expanded in order to respond to the county demand for more training and training curricula.

In order to ensure consistency and quality across trainings, NC State University continued to provide direction to all family-centered meetings trainers: orienting and training all of the trainers, scheduling training events, reviewing participant feedback, and developing all training materials. The oversight by NC State University worked to develop a team spirit among the training group.

As the trainer pool expanded, NC State University continued to provide overall direction to family-centered meeting trainers. This helped to ensure consistency and quality in training and a team spirit.

Multiple Response System

The establishment of the Multiple Response System (MRS) in North Carolina follows a trend across the United States to develop child welfare systems that are adaptive to family
situations rather than imposing one method of intervention on all families served (Fluke, Harper, et al., 2003). This approach, also known as “dual track,” “differential response,” and “alternative response,” continues to place families with more serious child maltreatment into the forensic track and other families into a family assessment track.

Evaluation studies of differential response are yielding positive findings for children and their families and enhanced relationships between families and their workers (Siegel & Loman, 2000; Virginia Department of Social Services, 1999). Counties with the dual track system were able to focus investigations more effectively on cases of severe physical and sexual abuse than those without a differential response system (Loman, 2005). Families preferred an alternative response because it increased satisfaction with the help received and heightened their involvement in decision making, and workers found that an alternative response enhanced the worker-family relationship without reducing children’s safety and led to fewer new maltreatment reports for all three largest racial groups, White, African American, and American Indian (Institute of Applied Research, 2004). In North Carolina, although MRS posed numerous challenges in staffing, training, and funding (NC DHHS, 2004), the approach increased intra-agency collaboration and family and worker satisfaction without harming children’s safety (Center for Child and Family Policy, 2004).

In order to advance collaborative relationships between families and their workers, differential response systems are incorporating various forms of meetings involving families in service planning (Institute of Applied Research, 2004; NC DSS, 2003). Family meetings have been encouraged by the federal Child and Family Services Reviews (CFSRs) of all state child welfare systems. These reviews have found that most states are out of compliance with the service standard on involving families in decision making. This is a particularly troubling finding given that the CFSRs have also found that greater family participation leads to better outcomes in stabilizing children’s placements and promoting children’s well-being (US DHHS, 2004). North Carolina incorporated its MRS strategies, including family-centered meetings, into its Program Improvement Plan to meet the standards of the CFSR (NC DSS, 2003). The state has recently received confirmation that the implementation of its Program Improvement Plan has met the child outcome and service standards of the CFSR.

| Evaluation studies of multiple response systems are yielding positive findings for children and their families and enhanced relationships between families and their workers |

### Collaboration with Other Public Systems

The North Carolina Department of Health and Human Services (NC DHHS) is working to enhance collaboration among its divisions and with other services. The seven strategies for MRS include greater collaboration of child welfare with Work First (economic assistance) and police. The new NC DSS Domestic Violence Policies encourage collaboration with domestic violence programs. Child & Family Teams (CFTs) are viewed as a means of furthering cross-system collaboration around children and their
families. Two initiatives are propelling forward the use of CFTs for building partnerships: the System of Care Project and the School-Based Child and Family Teams Program.

System of Care

A System of Care project funded by the federal Children’s Bureau is intended to build partnerships among child welfare, child mental health, juvenile justice and delinquency prevention, schools, and other agencies. This five-year project is being piloted in three counties: Alamance, Bladen, and Mecklenburg. The planning group concurred that the main strategy for fostering cross-system partnerships are Child and Family Teams (CFTs).

Schools

Governor Easley included in his March 2005 State of the Union address a proposal for a School-Based Child and Family Teams Program. This proposal seeks to build collaboration among systems in local management entities (LMEs) for children at risk of academic failure and removal from their home. The proposal includes hiring CFT Coordinators to be based in county departments of social services.

Child & Family Teams are seen as strategy for promoting cross-system collaboration around families.

Practice Guidelines

The Family-Centered Meetings Practice Guidelines were prepared in order to offer good practices on holding CFT and Shared Parenting Meetings and to reference NC DSS policy specific to these types of meetings. The guidelines were drafted by the NC FCM Project, reviewed by the county departments of social services participating in MRS, and revised and approved by NC DSS. They are available at http://www.dhhs.state.nc.us/dss/mrs/docs/Practice%20Guidelines%20for%20Family%20Centered%20Meetings.pdf

Practice guidelines for Child & Family Team and Shared Parenting meetings are available on the NC DSS Multiple Response System webpage.

Approach to Training and Curriculum Development

The Project’s philosophy on training parallels that for family-centered meetings. The aim is to center the training around participants by adhering to partnership-building approaches that promote learning in the workshop and transfer of learning to the workplace. To guide the training plan, the Project used three main sources of information: (a) assessments of county training needs by NC DSS, (b) participant
feedback on the trainings, and (b) trainer recording of experiences and lessons learned at training events.

**The training team used a range of feedback mechanisms to adapt the curricula and center the training around the strengths and needs of training participants.**

In order to enhance the Project’s curriculum development skills, Resources for Change provided workshops, consultation, and observation of and feedback on training of new curricula.

**Curricula Overview**

The NC-FCM Project Team offered six training curricula this year. These included a new advanced curriculum on safety considerations at family-centered meetings. The six curricula were as follows:

1) **Setting the Stage for Family-Centered Meetings: An Agency and Community Orientation.** This one-day training for county staff and community partners is the pre-requisite for all other formal family-centered meetings training events. It was revised and combined with elements of the first version of another training curriculum (see below) to make it more practical for workers.

2) **Caution: Family Meeting Ahead! A Guide for Social Workers Attending Family Meetings.** The second part of the overall training plan is a one-day skills-based training for agency social workers. This curriculum was significantly revised to better meet the needs of social workers involved in family-centered meetings and included many more practice opportunities and situational discussion.

3) **Anchors Away! How to Navigate Family Meetings: The Role of the Facilitator.** A four-day, intensive skills-based event, the third component of this plan specifically addresses the facilitator’s role and practice opportunities. The audience is any person designated as a facilitator by specific county DSS agencies.

4) **The ABCs of Including Children in Family-Centered Meetings.** An advanced curriculum, the fourth part of the training plan provides an opportunity for specialized training for facilitators and social workers about *how* children should be involved in family meetings, rather than *if* they should be included. Setting the Stage and Caution OR Anchors Away are pre-requisites for this training. Minor revisions were made to ABCs in response to an analysis of this curriculum and another on Shared Parenting. NC DSS in conjunction with UNC-Greensboro as well as the NC-FCM Project and the Shared Parenting training group carried out the curricular analysis.

5) **Widening the Circle: Family-Centered Meetings and Safety Considerations.** This is another advanced training that was developed in response to participants’ expressed need for more information on working with family violence, substance addictions, and mental illness in the context of family-centered meetings. It is a two-day intensive training
designed to provide critical information and create practice opportunities for working in these areas. The intended audience is facilitators, social workers, and their supervisors involved in FCMs and the pre-requisite trainings are Setting the Stage AND Caution OR Anchors Away.

6) Transfer of Learning. Lastly, the sixth component of the overall training is designed to offer on-going support and learning activities outside of the formal classroom setting. There was a range of means for delivering this type of learning support: These included coaching on family referrals, meeting preparations, selection of meeting options, facilitator skills, safety issues, and including children. Technical assistance was provided informally in face-to-face meetings and by telephone and e-mail and in more structured Facilitator Forums and presentations. The growth of transfer of learning substantially increased over the last six months after the addition of new staff and development of a management plan.

| The project offers a continuum of training: from orienting social services and county partners to preparing social workers for making referrals and coordinating meetings and developing facilitator skills to advanced training on including children and addressing safety consideration. On-going coaching and facilitator forums enhance transfer of learning to the workplace. |

Performance-Based Contracting Evaluation

At the request of NC DSS, the NC-FCM Project developed and piloted a new training curriculum called “Widening the Circle: Family-Centered Meetings and Safety Considerations.” This curriculum addressed safety issues when the referred family had a history of family violence, alcohol and other drug addictions, and/or mental illness. In developing the curriculum, the Project received consultation from numerous sources: Resources for Change and NC DSS and county staff involved in MRS policy, domestic violence policy, and staff development.

The curriculum uses a theory of practice called “widening the circle” for safeguarding children, young persons, and their families and for building strong communities (Pennell & Anderson, 2005). “Widening the circle” is based on research carried out in Canada (Pennell & Burford, 2000) and North Carolina (Pennell, 2002). This research found four pathways for widening the circle and safeguarding children and their families: cultural safety, family leadership, community partnerships, and inclusive planning. These are defined as follows:

Cultural Safety – a context in which family members can speak in their own language, express their values, and use their experiences and traditions to resolve issues

Family Leadership – a relationship in which the family group members are central and their efforts are supported by community organizations and public agencies
Community Partnerships – a local collaboration in which each partner retains its distinctive role while striving to realize common goals (Pennell, 2004)

Inclusive Planning – a decision-making process that involves different sides of the family in making a plan, incorporates means of sustaining the family group’s participation, and is authorized and supported by the protective authority. (Pennell, in press)

A new curriculum was developed and piloted on safety considerations at family-centered meetings. The curriculum is guided by a theory of “widening the circle” to safeguard children and their families.

A performance-based contracting (PBC) evaluation plan was designed and initiated for the component of the new curriculum focusing on family violence. The evaluation was initiated in the spring of 2005 and a more extensive evaluation will be carried out in fiscal years 2005-2006 and 2006-2007. The study will employ a formative evaluation that monitors the family violence focus of Widening the Circle delivery, assesses its effectiveness, and uses the finding to improve the curriculum. The data collection plan includes pre-post testing and longitudinal study. Data will be collected from all training participants at workshops, FCM facilitators and referring workers of two workshops on their return to work, FCM facilitators at facilitator exchanges, and FCM participants of two successful meetings. Means of data collection include observation, questionnaires, focus groups, and interviews. The data analysis will include both quantitative and qualitative methods.

The long-term, desired outcome of the family violence focus of Widening the Circle is promoting safe and effective FCM participation when there is a history of family violence. The long-term outcome and the steps toward achieving this outcome were delineated in a logic model. A logic model is a way of specifying the linkages among the components of the training development effort. The main components are the inputs (resources), implementation (activities), outputs (deliverables), and outcomes (measurable effects, immediate, intermediate, and long-term).

The long-term outcome of the curriculum Widening the Circle is promoting safe and effective participation at family-centered meetings. A logic model was developed to specify the linkages among the components of the training from resources to activities to outputs to immediate, intermediate, and long-term outcomes.

Numbers of Training Participants and Training Events

During the year, training events were held for each of the six curricula. Table 5-1 below shows for each of the five formal training curricula, the number of training events, the participants that attended, and the number of counties represented. In all 71 events were held with a total of 959 participants from 60 counties. The participants came from the 52
MRS counties and with space permitting at trainings, from some of the 48 counties preparing for taking part in MRS.

Number of Events, Participants, and Counties Represented for Each Training Curriculum

<table>
<thead>
<tr>
<th>Training Curricula</th>
<th>Number of Events</th>
<th>Number of Training Days</th>
<th>Number of Participants Who Completed Training</th>
<th>Number of Counties</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setting the Stage</td>
<td>30</td>
<td>30</td>
<td>585</td>
<td>54</td>
</tr>
<tr>
<td>Caution</td>
<td>10</td>
<td>10</td>
<td>125</td>
<td>27</td>
</tr>
<tr>
<td>Anchors Away</td>
<td>17</td>
<td>68</td>
<td>162</td>
<td>41</td>
</tr>
<tr>
<td>ABCs</td>
<td>12</td>
<td>12</td>
<td>79</td>
<td>21</td>
</tr>
<tr>
<td>Widening</td>
<td>2</td>
<td>4</td>
<td>8</td>
<td>9</td>
</tr>
<tr>
<td>Total</td>
<td>71</td>
<td>124</td>
<td>959</td>
<td>60</td>
</tr>
</tbody>
</table>

The Project also offered training at the 52 MRS counties meeting to about 50 participants on the FCM practice guidelines and at the MRS Learning Institute approximately to about 50 attendees on FCMs and family violence. To sustain facilitation skills and encourage mutual support, the Project organized Facilitator Forums in three regions of the state in February and June. Counties volunteered to host Facilitator Forums in their regions, and 5 were held. The number of participating counties was 20 and the number of participants was 57. In addition, Project trainers provided more informal means of Transfer-of-Learning training by means of coaching and other technical assistance. Over the year, there were 25 Transfer-of-Learning events that were either more formally designed or more spur of the moment coaching through emails and phone contacts.

For the five formal curricula, there were a total of 71 training events attended by 959 training participants from 60 counties. In addition, there were approximately 50 participants at in-state conferences and 57 participants at facilitator forums. In addition, more informal transfer-of-learning training was provided through coaching and other technical assistance to 23 counties.

Participant Satisfaction with Training Workshops

For each workshop, the participants completed a Participant Satisfaction Form. Overwhelmingly participants were favorably impressed by their workshop. As seen below in Table 5-2, nearly 86% gave a “high” or “very high” to their overall rating of the training session.
Notably, most (91%) “agreed” or “strongly agreed” that their understanding of the workshop topic significantly increased (see Table 5-3). This increase happened despite the initial reluctance of over one-quarter (25.2%) of the participants to attend the session. By the conclusion of the training, sentiments had shifted with the number of those unhappy with having attended shrinking to 8%.

Planning Issues Raised by Training Participants

As trainers recorded after the workshops, the participants raised a number of issues related to implementing family-centered meetings (FCMs) in their counties. Despite their concerns, training participants, in general, expressed a high level of enthusiasm about the FCM process and a strong desire to find ways to “make it work” in the face of low resources. They sought to maintain their excitement and trust in the process through offering each other support, and many voluntarily exchanged contact lists so as to remain connected. The planning issues that were raised by training participants throughout the year echoed some of the same concerns expressed last year by the MRS pilot counties. These issues included the following:

Lack of time and resources

Participants questioned the realistic nature of FCM implementation given its demands on workers’ time and agency resources. Nevertheless, training participants were reassured by the larger number of counties involved, the clear support for each other that emerged in trainings, and the group sharing around innovative ideas and practical tips.
Safety concerns

Participants not yet familiar with the FCM process generally brought up concerns around safety, but, it was evident that messages around safety and FCMs were rapidly disseminating among MRS counties through their sharing methods that some counties had already put in place to enhance safety.

Lack of facilitator resources

The lack of facilitator resources was the most commonly heard in the training sessions and the informal and formal Transfer-of-Learning exchanges. Counties were worried about being able to fully adhere to practice guidelines when faced with inadequate budgets and low staff numbers. They continued to recognize and debate the issue of social workers having facilitation duties, and many expounded on the dangers of facilitating their own cases. County sharing provided participants with innovative ideas (e.g., utilizing volunteers, staff rotation, contracting out), but most participants still struggled to determine (a) who in their agency was the best fit for a facilitator role and (b) how could they find a way to utilize these staff in a way that did not compromise the rest of the unit as well as the well-being of each staff member.

Social worker role and maintaining the neutrality of the facilitators

Tied closely to facilitator resources was a concern of how to maintain neutrality and whether it was all right to facilitate their own cases. While attempting to define their social workers’ role, most counties concluded that facilitating their own cases was not appropriate; however, some counties shared that they were doing so with what they felt was success.

Confusion about policies and procedures

Policy questions arose at nearly every training event, some of which Project staff could answer and many of which were referred to NC-DSS or the MRS Manual for further clarification. Along with policy questions were issues around how current documentation and procedures meshed with MRS and family-centered practice. Many reported that these requirements felt incongruous and were finding difficulty “making it all fit.”

Confusion with other decision-making formats

Confusion remained over the differences and applicability of various decision-making models including Shared Parenting, Team Decision Making, case staffings, Family Group Conferencing, Action Team Meetings, System of Care Meetings, and Community Assessment Team meetings. However, participants were reporting greater clarification in recent months after trainers took steps to introduce this
discussion during Setting the Stage, as well as discussions during Transfer-of-Learning activities.

**Difficulty getting buy-in from families and community**

With families, participants sometimes felt that the message about FCMs is not perceived as genuine and, therefore, not to be trusted. Through discussion, participants recognized the importance of their own belief in the process and conveying that sincerely to families, as well as the critical importance of adequate preparation meeting participants.

**Perceived inconsistency between timelines and family-centered practice**

The participants recognized the incongruity between efforts to center practice around families while following federal, state, and county regulations. For instance, the policy on when to hold CFTs for high/intensive and moderate risk cases appeared to conflict with making the meetings relevant to the children and their families. Participants found it helpful during the training workshops to examine ways of crafting the purpose of the meetings in a manner that was pertinent to all of the participants.

**Uncertainty about child participation**

Including children in the family-centered meeting can be an unsettling endeavor for many social workers. Wishing to protect children, the workers often hold the belief that children will be safer if they do not take part and are not exposed to difficult information. Participants report their thinking from this perspective is challenged after discussion and training around the premise of how to include children’s voices, rather than if they should be included. Participants often want a cut-and-dried approach to this concern to help them make the decisions, but they report a greater understanding having attended the training on child inclusion, reviewing the assessment tool, and examining their values about children’s participation.

**Perceived lack of support from administration**

Many participants identified a perception that their supervisors and other administration did not believe in MRS or the process of family-centered meetings. This then created what they described as a working environment in which they felt unsupported and unable to do this kind of work well with families. They often insisted that their directors or program directors and supervisors “just have to come to this training. We need them to hear this.” Trainers continued to offer support and additional strategies for implementation and agency buy-in.
In the training sessions, participants expressed a number of concerns about their county’s capacity to implement family-centered meetings, including low resources, limited support, and inconsistencies between family-centered meetings and policies. Nevertheless, training participants generally expressed a high level of enthusiasm about the meetings and used the training exchanges to figure out ways to make the meetings work.

Projections

At the beginning of July 2005, all 100 North Carolinian counties will participate in the Multiple Response System (MRS). This means that the current 52 MRS counties will be joined by another 48 counties, also seeking to implement the seven MRS strategies. Beginning in July, the NC-FCM Project will open trainings to all 100 counties. In 2005-2006, the entering 48 counties will particularly need the first three training curricula: the orientation, referring worker preparation, and facilitator training. The 52 counties will continue to require training to sustain and hone skills of their current workers and to orient new hires.

In the coming two years, the Project will refine its current five formal curricula to better meet the needs of its enlarged training pool and the more advanced stage of MRS in the state. This past year the referring worker curriculum was revised, and in the new year revisions will be made to the curriculum orienting county stakeholders to FCMs and to the two advanced curricula respectively on including children and on safety considerations. Under performance-based contracting, the evaluation for the training on safety considerations will help to guide the curricular revisions. The trainers will continue to develop mini-curricula in response to the topics requested by participants at the Facilitator Forums.

The demand for informal Transfer-of-Learning training is likely to increase. County workers, once they have taken part in FCMs, often note that they see its potential for helping children and improving family-worker relationship. At the same time, they have raised numerous issues about implementing FCMs given limited resources and supports. They have been quite receptive to and appreciative of technical assistance from Project trainers to help them make this happen within their work settings. Because of restrictions on their time and travel, having training tailored specifically to their situations has been well received. This means that Project staff will continue to develop strategies for Transfer-of-Learning training and to prepare short guides for various FCM participants from families, communities, and social services.

The growing push in the state for cross-system collaboration will also drive the FCM training program. The underlying assumption is that children at risk are better served if the various systems involved in their lives are working together to carry out plans in which their families have a voice. Child & Family Teams (CFTs) are seen as a vehicle for making this happen. The push for cross-system collaboration is coming from a number of directions, including MRS, System of Care, schools, and domestic violence. The involved
systems each have their own philosophies, priorities, practices, and regulations that influence how they can and will interact with other systems. Differing mandates can make for conflicts. Working in collaboration will require funding, policy, training, and evaluation that help the involved systems find and sustain ways of working together. One contribution that the NC-FCM Project can make is advancing practice guidelines that build cross-system work around children and their families.
References


ACKNOWLEDGMENTS

This year 52 counties participated in the Multiple Response System (MRS). This means that over half of North Carolina’s 100 counties continued to practice MRS. We wish to congratulate the North Carolina Division of Social Services for moving forward this major child welfare reform and the participating counties for continuing with this challenge. We agree that responding flexibly to families and including them and community organizations in service planning will make for safer children and stronger families. We are honored to have been invited by NC Division of Social Services to provide the training on family-centered meetings, and we respect the effort that so many families, county Social Services, and community partners have put into making MRS work.

At the NC Division of Social Services, we must especially recognize the contributions of Teresa Turner, Ruth Harrison, JoAnn Lamm, and Tony Troop. In developing our new curriculum on safety issues, we wish to thank at the NC Division of Social Services Chris Sinha, Angela Holloway, and Crystal Williams; at the North Carolina Association of County Directors of Social Services Tracy Turner; at Nash County Department of Social Services, Lynn Wilson; and at Mecklenburg County Department of Social Services, Morgan Cromwell. In analyzing our curricula, we benefited from working with Dr. Betsy Lindsey at the University of North Carolina-Greensboro and Debbie Gallimore, Private Trainer, Shared Parenting. At the county Social Services, we extend thanks to the county liaisons who helped us develop the training schedule and locate training sites and to the meeting facilitators who so willingly shared their expertise and enthusiasm in our video on family-centered meetings. Over the course of the year, our work was sustained and invigorated by the many training participants who at times reluctantly signed up for training but then threw themselves wholeheartedly into the learning process.

At NC State University, we extend a note of appreciation to Dean Linda Brady for her unswerving commitment to community engagement; our college’s Office of Research, in particular, Dr. Matt Zingraff and Amanda Tueting, for guiding us through the contract process; and the Department of Social Work’s administrative assistant, Sharon Wright, for assisting on contracts.

This year we have had the good fortune to retain staff and to add new staff, all of which has enhanced our training capacity. Our training coordinator, Cherie Spehar, ensured that new staff were welcomed and that we all continued to work together as a team as we took on many new initiatives. Our project coordinator, Amy Coppedge, assumed many added responsibilities with our growth as a team and our expansion across the state; and she was greatly helped out by our new and very organized registrar, Ashley Duncan; our technologically savvy project assistant, Chrissy Dembowski; and our project assistant, Jeanne Mesiano, who helped to organize our registration system. Our trainers now numbered five at NC State University: Kara Allen-Eckard, who spearheaded our development of facilitator forums and always checked policy developments against their impact on families having a voice; Susan Gasman, who worked with me on developing a
curriculum on safety issues and brought a keen sensitivity to including young people in deliberations; Sylester “Tee” Henderson, who translated her Wilson county experience with family meetings into guidance helpful to families and agencies across the state; Marc Morgan, who arrived with experience in facilitating meetings from Guilford county and a strong passion for including families in decision making; and Billy Poindexter, who continued to share his knowledge from facilitating family meetings in Catawba County and kept us updated on the latest developments affecting the delivery of family meetings. In addition, we have greatly benefited from working with two trainers from Appalachian State University: Lindley Myers, who brought a keen understanding of how family meetings serve to build a system of care around children and families; and Catherine Williamson-Hardy, who understood the ins and outs of Social Services work and how policies can sustain the delivery of family meetings; and with Patrice White, the supervisor, who with such good will and skill worked through the intricacies of our collaboration.

We have listed below so many of you who have supported us throughout this year. Acknowledgments are never fully complete so we ask your indulgence in forgiving us for our oversights.

Dr. Joan Pennell
Principal Investigator and Project Director
Caldwell County DSS
Joyce Edwards
LaWanda Knox
Ginger Caison

Caswell County DSS
Deborah Williamson

Catawba County DSS
Cyndy Benson
Melissa Riddle
Beth Brandes
Bobby Boyd

Chatham County DSS
Millie Enos

Cherokee County DSS
Lisa Davis

Clay County DSS
Barbara Ford

Cleveland County DSS
Jane Shooter

Craven County DSS
Hannah French

Currituck County DSS
Vickie Moore

Davidson County DSS
Paula Sink Harrison

Davie County DSS
Marcheta Williams

Duplin County DSS
Susan Sanderson

Durham County DSS
Diane Wright
Chuck Harris

Franklin County DSS
Patrick Betancourt

Gates County DSS
Colleen K. Turner

Graham County DSS
Marvin Mullinax

Guilford County DSS
Joyce White

Halifax County DSS
Carolyn Poythress

Harnett County DSS
Cindy Minton

Haywood County DSS
Theresa Phillips

Henderson County DSS
Karen Couch

Iredell County DSS
Lisa York

Jackson County DSS
Robert Cochran

Johnston County DSS
Joe Lansinger

Lee County DSS
Kelly Smith

Lincoln County DSS
Susan McCracken

Macon County DSS
Wesley Price

Martin County DSS
Vickey M. Manning
Mecklenburg County DSS
Bobby Cagle
Donna Fayko
Rita Miller

Moore County DSS
Debbie L. Brigman

Nash County DSS
Lynn Wilson
Teresa Baker
Brenda Matthews

New Hanover County DSS
Wanda Neidig
Stephanie Monteath

Orange County DSS
Denise C. Shaffer

Pamlico County DSS
Debbie S. Green

Pasquotank County DSS
Kathy Ford

Person County DSS
Carole Thomas

Polk County DSS
Lou Parton
Ernestine Lewis

Scotland County DSS
Sandy Skamperle

Swain County DSS
Tammy Cagle

Transylvania County DSS
Joy Barton

Union County DSS
Brenda Simms

Wake County DSS
Pat Dodson
Mary Urzi
Stoney Blevins

Warren County DSS
Freddie Harris

Watauga County DSS
Roslyn Thompson

Wilson County DSS
Rita B. Bland

Yancey County DSS
Michelle LePore