

RBS Demonstration Site Kickoff Symposium

May 16, 2008

Sacramento Sheraton Grand

Breakout Group Exercises



Introduction

Mission, vision, values-in-action and theory of change provide the foundation for united group action by creating the context for a dynamic and imaginative partnership.

The local implementation team in each demonstration site county or consortium will consist of individuals coming from many different perspectives. Not only will there be public agency, provider, consumer and stakeholder representatives, but within each category there are likely to be important differences of opinion.

To help our symposium participants prepare for the team building and planning process in their demonstration sites, we have prepared four preview exercises that you may find helpful in increasing your team's cohesion and alignment.

- The first one generates a common, action-oriented mission statement.
- The second produces a consumer-focused vision of what your project will look like when it is implemented.
- The third helps your members translate their values into concrete operational structures.
- The final exercise produces a succinct framework for explaining why you think your new way of helping will result in better child, youth and family outcomes.

For these practice run-throughs, we'll spend about 15 or 20 minutes trying each one out. Back with your local implementation teams, you should schedule between an hour and an hour and half for each exercise you want to use.

First Exercise: Mission

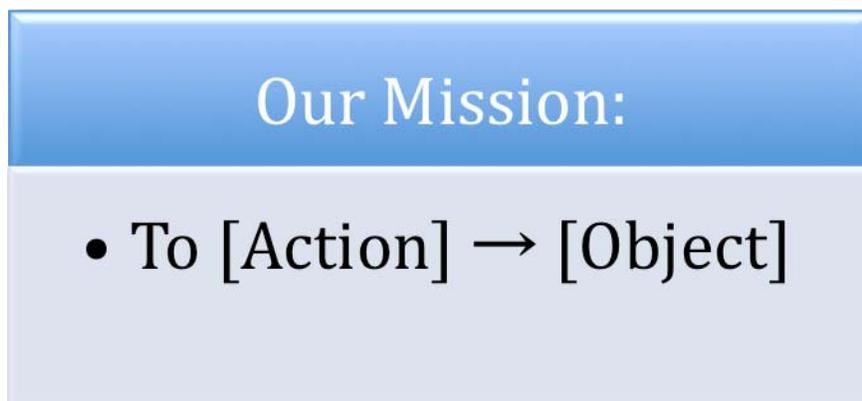
A mission is a succinct statement that contains a concrete action verb and a specific object of that action. The key to good mission statements is not their wording, but their ability to capture the passion of the group that created them. The mission statement isn't a marketing catchphrase. It's a tool to help your group stay on track.

For this exercise, each person in the group should state in one or two sentences what they hope to accomplish through RBS reform. "Through RBS reform I want to _____." There is no wrong answer and the point isn't to convince anyone else. There should be a number of different personal agendas at the table. Be creative and expressive. Speak from the heart, but try to be concise.

The facilitator will capture each statement on the flip chart. When everyone has shared their statements, the group should pause to read through the whole list. See if a certain phrase has begun to emerge that captures the kernel of what your group is hoping to accomplish together. Put it in a sentence: "Our mission is to (action verb) (object)." The facilitator will write up each suggestion until there are five. Then the group should test the statements to see which one works best.

The test of a mission statement is whether it will help you stay on track during the planning and implementation process. You should be able to apply it to a proposed action or strategy your group is considering, by asking a question in this format: "Will (doing this strategy or action we are considering) help us (action verb) (object)?" For example, "Will holding a family fun day for the families of the children and youth enrolled in our project help us *build* (action verb) *positive and sustaining connections* between children and their parents or care givers?" (object).

The facilitator will write the one you choose as your favorite in big letters on a flip chart page and post it up on the wall.



Second Exercise: Vision

An implementation team's vision should present a shared sense of how the completed project will look and feel. Don't think of it as a diagram or a blueprint, but instead as a drawing, the proverbial sketch on a restaurant napkin that captures the heart of what you want your project to become.

For this exercise we challenge you to shift your perception of the project in a radical way. Instead of thinking about how you want to *deliver* the new way of helping that your RBS project will offer, imagine how it will feel to *receive* that help. It's an approach called patient-focused care that is used in the design of new hospitals.

In patient focused care, hospital managers and supervisors accompany patients through every step of the hospital care process from the point they enter the parking lot, until the time they leave to go home. Essentially they become "patient-cams" tracking a person's trip through the machinery of hospital care. The point of that process is to figure out how to change the machinery to make it more humane and more effective.

Imagine that you have built a project that implements your mission statement. Now imagine that you are a child, youth or family member entering the project. What will you experience each step along the way in this new resource you are designing?

Each of you has a pad of post-it notes. The facilitator will put six flip chart pages up on the wall with each of the key steps in the process:



In the time you have available, write on each post-it one aspect of how you as a child, youth or family member will experience each of these phases. Use short phrases that answer the question, "What was it like?" as if someone had asked you that after you went through that aspect of your new RBS system.

Think of each post-it as a vision snapshot taken by an "imagina-matic" camera being carried by a member of your proposed target population during their journey through your new system. Post your snapshots on the appropriate chart pages. As a group, take a moment to see if these snapshots are beginning to coalesce into a common vision for the project. In the full-blown workshop you would then craft a vision statement that

expressed a combined sense of what the program will be like. For now, just think about how these individual insights might be used to forge a shared picture of your new project.

Third Exercise: Values-in-Action

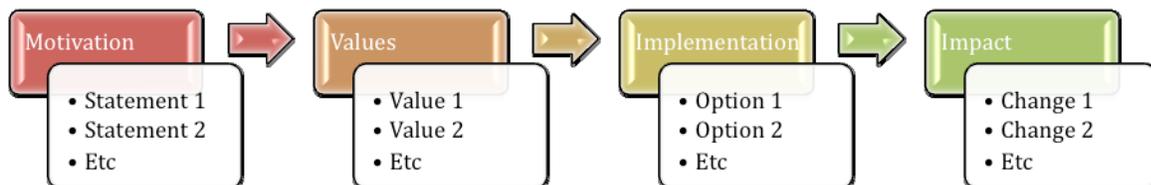
For RBS reform to be a values-based effort, we need to be clear not only about the values that it should embody, but also about how those values will be expressed.

The values-in-action exercise is a discussion based on four questions:

1. Why do you care about RBS reform?
2. How do your most deeply held values and convictions motivate you to take positive action for RBS reform?
3. What changes or adjustments could be built into the new RBS system to insure that the values you hold most dear will be expressed on a daily basis in the system's operations?
4. What would the impact on the children, youth and families in the RBS system be if those changes or adjustments were made?

The benefit of this exercise comes through the interplay of each participant's effort to express not only their personal motivations and values, but also their ideas for how those values can become working elements of a formal system of care.

The facilitator will post your responses across four flip chart pages:



In the time available you will not be able to do a complete values-in-action exercise, but you should be able to see at least a couple of examples of how the flow from espoused value through value-in-action, to impact can be expressed.

In the full exercise, after all of the team members have had a chance to post their values, the group has worked together to imagine creative new ways to put those values into action, and described the impact those actions would have, you would then create a shared summary of the key value statements, choose specific implementations that the team will commit to carrying out, and define the results you are hoping to see.

For now, your group should look at its mission statement, vision snapshots and the values-in-action charts to see if a sense of alignment and purpose is beginning to emerge.

Fourth Exercise: Theory of Change

A theory of change expresses the basic premises on which a system of care is based. It explains how the actions you are proposing will produce the results you have intended.

Theories of change have four elements:

- A. For a group of people with these characteristics >>>
- B. If we provide these services >>>
- C. Then we should see these results >>>
- D. For these reasons >>>

Part A is your definition of the target population to be served through RBS reform. For this exercise, pick one of the key characteristics that define your target population. The facilitator will write it on the first of four flip chart pages posted on the wall.

Now pick an intervention that your project will use to address the needs expressed in the characteristic you have chosen. It doesn't have to be described in detail, as long as it is an intervention that most of the group is familiar with. The intervention is described on the second flip chart.

The third step is to describe the outcome or outcomes that will you hope to produce by providing this intervention for the person or family that has the chosen characteristic. The outcome should be written on the far right flip chart. The remaining flip chart, in between intervention and outcome, is where your group will develop its theory of change.



If the intervention is seen as an input, then the immediate effect of the intervention can be seen as its effects or outputs. Those effects are the bridge that connects the intervention with the long-term outcomes you are expecting to see. The correlation between input, output and outcome is your theory of change.

For example, you might say that for children who have poor impulse control due to fetal alcohol syndrome, if we consistently provide structured pause-before-you-act cues and reinforcements, combined with adapted decision-making tools, such as laminated 3-step question cards, then we should see more evidence of hesitation and consideration

before acting, which will result in fewer inappropriate behaviors and associated disciplinary or criminal justice referrals.

For this exercise describe some of the effects that you believe your intervention will have and explain why those effects will help the children, youth and families in your project achieve better outcomes. When this process is applied to all of your key interventions it becomes the rationale for your demonstration project.