



A Sustainability Toolkit for
Infant-Toddler Court Team States and Sites
ZERO TO THREE National Resource Center
for the Infant-Toddler Court Program

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ZERO to THREE
Early connections last a lifetime

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PREFACE

ZERO TO THREE's National Resource Center for the Infant-Toddler Court Program provides resources and support for implementation and dissemination of the Infant-Toddler Court Team (ITCT) approach in states and sites across the country. The National Resource Center aims to achieve the following:

1. **Build the evidence base** and increase the capacity of states, territories, and tribal communities to implement and sustain the ITCT approach.
2. **Advance systems building** to support families' access to comprehensive services/supports and trauma-responsive practices—from the prenatal stage to age 3.
3. **Integrate parent voices and perspectives** at all levels to identify and address barriers to health equity.

For the past 16 years, the National Resource Center has worked throughout the country in local communities and states to implement the ITCT approach. Since 2014, the National Resource Center has successfully scaled from 10 ITCTs to 129 sites in 30 states. Through this toolkit and other implementation support offerings, such as webinars and site-specific consultation sessions, the National Resource Center is engaging with sites and states to ensure that ITCT implementation and dissemination efforts are sustained well into the future.

ACKNOWLEDGMENTS

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ZERO TO THREE deeply appreciates Ballmer Group for its generous support of our work to scale the Safe Babies approach. We'd like to especially thank Connie Ballmer for her vision and commitment to transforming the child welfare system so that all babies thrive. Ballmer Group is committed to improving economic mobility for children and families in the United States, funding leaders and organizations that have demonstrated the ability to reshape opportunity and reduce systemic inequities.

PURPOSE

Planning for the sustainability of Infant-Toddler Court Teams (ITCTs) is critical to ensuring their long-term success. As discussed in this toolkit, ITCTs will need to be creative in identifying potential funding sources, cultivating champions inside and outside of government, and forming robust partnerships with community-based organizations, government agencies and other community and state leaders.

The toolkit is intended for State Teams who work in collaboration with local sites to implement the ITCT approach, as well as for local sites that are not affiliated with a state implementation effort. The toolkit may also be used by other systems change initiatives involving collaboration among child-serving organizations. The term “teams” is used throughout this document to refer to both State Teams and Active Community Teams, which have a central role in sustainability planning.

This toolkit provides a starting point for teams, including key questions and tools that can be adapted to the local or state context. Teams will need to set aside time to strategize and plan for sustainability, so follow-up action steps and worksheets are included in [Appendix A](#).

The toolkit is designed to support teams in several specific ways:

- 1** | Synthesize findings from surveys and interviews with states and local sites and draw from other sustainability work in the health and human services field.
- 2** | Walk through the updated Sustainability Framework with definitions of the six key elements.
- 3** | Offer key questions that teams can consider when planning for sustainability.
- 4** | Provide practical strategies and tools for teams at different stages of implementation.



BACKGROUND

Infant-Toddler Court Teams (ITCTs) represent a systems change approach that aims to apply the science of early childhood development to meeting the urgent needs of infants and toddlers and strengthening their families. The target population for this approach is families and children (from the prenatal stage to age 3) who are under court jurisdiction in out-of-home care or at imminent risk of removal. ITCTs are based on an innovation known as the Safe Babies Court Team™ (SBCT) approach, first developed nearly two decades ago by ZERO TO THREE, which puts the need to protect and build safe, stable and nurturing early relationships at the center of child welfare decision-making.

The National Resource Center supports sites and states in implementation to effect change in child welfare, judicial and early childhood systems for children and their families from the prenatal stage to age 3.

Below, we have defined terms that are commonly used throughout this toolkit. Teams with an **asterisk(*)** have a primary role in sustainability efforts.

STATE LEVEL

STATE ADVISORY GROUP: The State Advisory Group is a team of key allies at the state level who have influence and decision-making authority in child- and family-serving systems. Members of the team may represent a wide array of partners and areas of expertise, including families/caregivers, child welfare, the judiciary, state government entities, tribal organizations, advocacy, health, adult behavioral health and infant and early childhood mental health, among others. These leaders support ITCTs at the state level by looking for opportunities to coordinate systems of care and by sharing their expertise on financing and sustaining programs in early childhood, child welfare or other related areas.

STATE TEAM*: The State Team, which provides strategic and administrative leadership to the state's implementation of ITCTs, includes three key positions: State Project Director, Statewide Coordinator and Data and Evaluation Lead. The State Team provides state-level leadership and coordination for the implementation of ITCTs in collaboration with cross-sector partners. The team supports effective site implementation and creates a communication network with local sites and other partners. The State Team also develops a strong relationship with local sites to provide implementation and sustainability support and drive system change at the community level. In addition, the team drives policy, advocacy and funding to support best practices and the SBCT approach for very young children.

LOCAL LEVEL

ACTIVE COMMUNITY TEAM: The Active Community Team (ACT) collaborates on systems change efforts that improve access to comprehensive prevention, early intervention and therapeutic services and supports for families with very young children. The ACT is a broad and diverse group of partners who represent key areas, including families and community members with lived experience, community organizations and representatives from other related community initiatives. The ACT identifies and addresses disparities, racist policies and discriminatory practices. The team also identifies shared systems change priorities and ensures success in achieving these goals. In addition, the ACT develops solutions for policy, funding and other infrastructure changes that are supportive of the SBCT approach. The ACT does not discuss individual cases.

FAMILY TEAM MEETINGS: Family Team Meetings (FTMs) engage families in collaborative, proactive case planning that puts a young child's developmental need for safe, stable and nurturing early caregiving relationships and the individualized needs of each family member at the center of decision-making. FTM participants include parents, family members and/or other chosen social supports, resource parents and the multidisciplinary professionals supporting the child and family in the child welfare case process. Professionals actively support the parents' confidence and motivation, creating a climate of trust, compassion, respect and transparency between the families and professionals. The case planning process, including transition planning, is family centered and employs a developmental, multigenerational lens to ensure that the needs of parents and family members can also be addressed. FTMs generate agreed-upon, meaningful information and individualized recommendations to be presented at the next hearing.

SITE IMPLEMENTATION TEAM*: The Site Implementation Team provides leadership and oversight for effective SBCT implementation and sustainability at the local community level. This team develops site policies and procedures for the ITCT that guide day-to-day operations and team member roles and responsibilities. The Site Implementation Team supports the professionals involved in implementing the best practices represented in the SBCT approach. The team also participates as a core member of the Active Community Team, sharing data that highlights progress, inequities and barriers—and leveraging the data to engage in discussions that will improve the child- and family-serving systems. The Site Implementation Team serves as the liaison to the National Resource Center and the State Team for technical assistance and training. The team is also responsible for leading sustainability efforts.

INTRODUCTION TO SUSTAINABILITY

It's Never Too Soon to Think About Sustainability

Building strategies for sustainability begins in the earliest stages of implementing a new approach or program, ideally well before a program is up and running. Sustainability is not just an end goal, but is an ongoing, intentional process that encompasses a range of activities to give programs the best chance for long-term positive impact. Planning for sustainability cannot wait until the results of the program are available or the initial grant funding is ending.

Teams are actively involved in creating the conditions that will support the approach in the long term. Each team is part of larger systems at the local and state level with their own unique pressures and competing interests, so consistent and ongoing attention to sustainability is critical. Achieving long-term sustainability requires teams to identify and demonstrate their value to key partners/systems, attract additional investment and resources, and become embedded into existing systems or agencies.

What Is Sustainability?

Based on the National Resource Center's longstanding support of states and local sites, we are using the following definition of sustainability in this document:

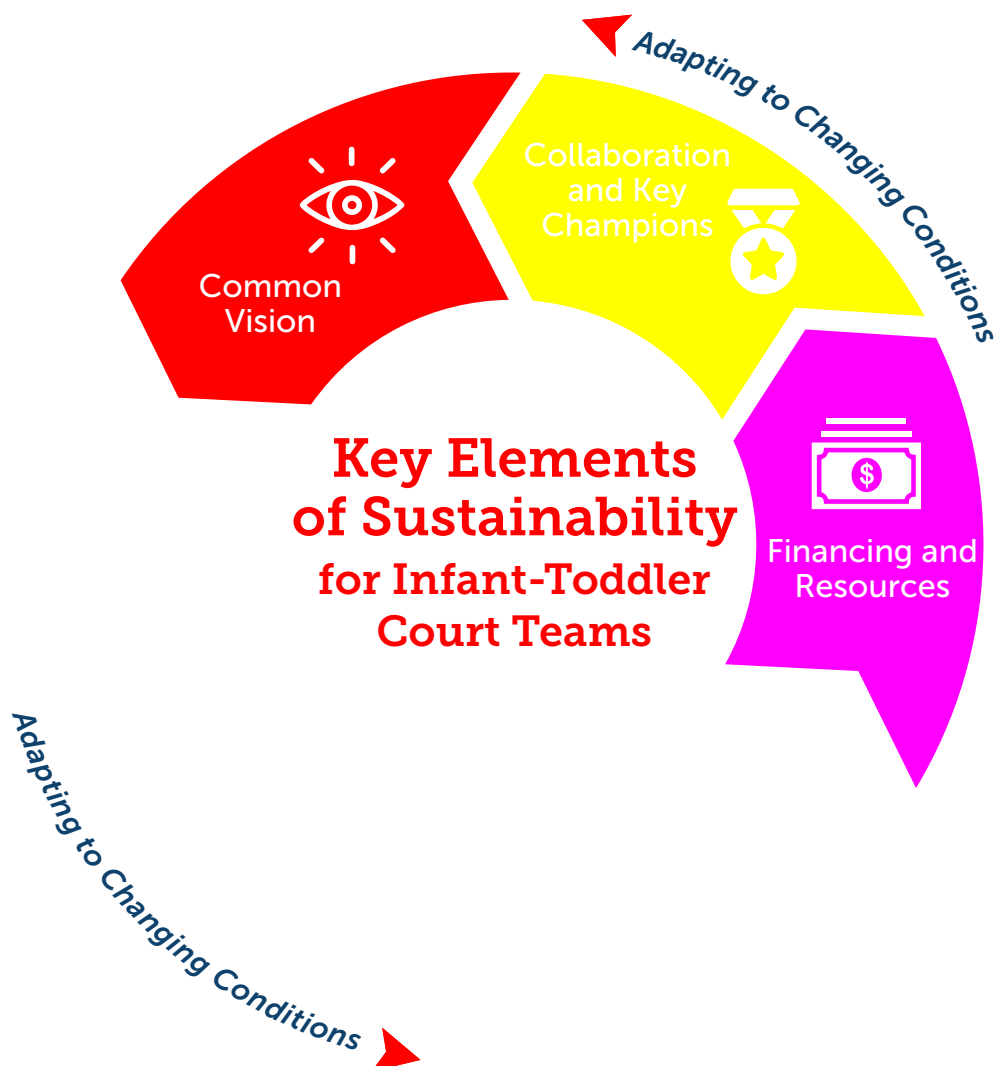
Sustainability is driven by a confluence of factors that, if working synergistically, will create conditions for programs to continue in the long term. Achieving sustainability means that the program is fully embedded in systems, has led to substantive change in the way those systems operate and partner, and is seen as a value-add to the community such that it attracts the investment of resources. Sustainability should encompass policy and practice change that focuses on creating equitable and inclusive systems that lead to better outcomes for everyone served. Sustainability is NOT just about funding.



KEY ELEMENTS OF SUSTAINABILITY

The National Resource Center delineates six key elements of sustainability: Common Vision, Collaboration and Key Champions, Financing and Resources, Continuous Quality Improvement (CQI), Systems Capacity, and Policy.

As you walk through this document, think about how the various sustainability elements come together in your work. **Sustainability planning** is critical to long-term viability of your program, and this toolkit is meant to serve as a primer to guide such a process. A **sustainability planning process** is a variation on *strategic planning*. The planning process is led by those with the knowledge and passion to influence the necessary actions—often a core group of advocates and practitioners surrounded by a community of champions who can help elevate the cause among different audiences. Throughout this document, we have included **Key Questions** and **Tools** you can use to develop a sustainability plan. These resources can be adapted to the context of teams at the state or local level. A guide for sustainability planning is also included in [Appendix A](#), along with worksheets for identifying your sustainability priorities and a planning template.





Common Vision

Creating a shared definition of success and articulating that vision is essential to having a clear idea of what collaborators are working to achieve. The process of creating this common vision will result in the development of two products: a vision statement and a mission statement. The team can work together to define both statements, which will embody the goals of your current work and what kind of future you want to create through systems change. The vision and mission statements can be created or updated at any point along the implementation continuum. It may be necessary to update the common vision with your team as your collaboration evolves.

While all teams have the shared goals of reducing child welfare involvement for very young children and their families and supporting families via a trauma-responsive approach, your team will need to create a common vision that includes other desired outcomes that best fit the unique culture and dynamics of your state or community.

OHIO

VISION: We will create a future where all families have the capacities, resources, and supports to care for and nurture their children.

MISSION: The Ohio Infant-Toddler Court Team Expansion Project intends to transform the experience of infants and toddlers and their families involved in the court system so that they can be safe, loved and thrive, and to enable communities to be non-adversarial, racially and culturally equitable, and collaborative as they address the problems that interfere with the health and well-being of children and families.

SOUTH CAROLINA

VISION: Collaborate and support the future of Safe Babies Courts statewide, in an effort to build community capacity and promote strong and healthy families of children between the ages of 0 and 3.

MISSION: To promote reunification, parent empowerment and positive outcomes for parents, infants, and toddlers by transforming child welfare and the court process to be family-centered, relationship-based, collaborative and including diversity, equity and inclusion.

A common vision includes a statement as simple as a sentence or two that succinctly captures your team's feedback to the questions below. It could also involve a more elaborate concept document that spells out the program's history, background and rationale. One approach to brainstorming a vision statement is developing a "word cloud" of terms or short phrases that come to mind when answering the following key questions. Such terms can be pieced together into a few sentences that spell out where you want your initiative to go and what results you want to achieve.

Mission statements offer a way to further describe your action orientation and intended impact. While the vision statement is future-focused, the mission statement briefly states what is going on in the here and now.

KEY QUESTIONS

Regardless of the final format your common vision takes or how you get there, the following questions can help guide the vision- and mission-building process:

- What are the issues we are trying to solve with this approach?
- What results do we hope to achieve?
- What will be the results if we solve these issues?
 - Who will be impacted?
 - How will they be impacted?
 - What changes will be made in systems? What difference will we make?
 - What will look different in how we work to support children and families?
- What are the shared values of our approach?

TOOLS

- [Mission and Vision Statement Worksheet](#)
- [Sample Vision Statements from Nonprofits](#)
- [Sample Mission Statements from Nonprofits](#)






Collaboration and Key Champions

Collaboration

Infant-Toddler Court Teams (ITCTs) are built upon the premise that child- and family-serving systems must be integrated and highly collaborative to realize the best possible outcomes for children and families. Because the teams bring together child welfare, dependency courts, lawyers, families, early childhood systems and health care providers, among others, the opportunity for partnership is naturally embedded but must be pursued with intentionality.

Developing cross-system collaboration, which is critical to sustaining the work, is represented in core components of the ITCT approach (e.g., Family Team Meetings and Active Community Teams).¹ For State Teams, the State Advisory Group focuses on developing relationships across multiple state systems that can influence policy and funding. At the local level, the Active Community Team leads this effort. Both local and state teams work to foster existing relationships, cultivate new partners and understand other initiatives in the state and community and how they may prove complementary. Involving a diverse set of partners provides many benefits, including the ability to prioritize the 0-3 population and services across systems and building new capacity to care for families and children.

Collaboration is not a simple process, and the State Advisory Group and Active Community Team involve a wide range of organizations and people. Each brings a variety of history, skills, knowledge, attitudes, strengths, weaknesses and beliefs to the work. Establishing group norms for communication, managing conflict, and identifying roles within the team and other areas can help groups overcome challenges in their path and build cohesion. Setting aside time to reflect on your team's progress is also essential. Teams need time together to think about the work they have accomplished, the barriers they have overcome and how these factors may inform future activities. Periodically reassessing your common vision and who is in your team allows for the opportunity to reflect on progress and growth and to identify gaps in capacity. Your vision may shift over time depending on new partnerships and evolving goals.



Infant-Toddler Court Teams (ITCTs) are built upon the premise that child- and family-serving systems must be integrated and highly collaborative to realize the best possible outcomes for children and families.

Across the national network of sites, teams have cultivated many unique partnerships:

LOCAL

Individuals/Families

- Parents and family members
- Parent leaders/family leaders

Local Government

- Court system, including judges, attorneys, and guardians ad litem
- Local child welfare leadership
- Libraries
- Local councils on early childhood
- Part C Early Intervention Services
- Public health
- School systems

Other Local Organizations

- Faith communities
- Foundations
- Universities

Services/Supports

- CASA
- Early care and learning
- Intimate partner violence programs
- Head Start, Early Head Start, early care and learning
- Health centers/medical homes
- Healthy Start
- Home visiting programs
- Homeless shelters
- Hospitals
- Mental health system (adult and child), including infant and early childhood mental health
- Parent partner/mentor programs
- Substance use system

Tribal Organizations/Systems

- Tribal early childhood programs
- Tribal health care providers

STATE

State Associations

- American Academy of Pediatrics (state chapters)
- Infant mental health associations
- Foster parent associations
- Perinatal quality collaboratives
- Primary care associations

Government Agencies & State-Run Programs

- Administrative Office of the U.S. Courts
- Children's trusts
- Child welfare departments, including Plans of Safe Care
- Court Improvement Programs
- Drug and law enforcement
- Family-serving human services programs (e.g., home visiting, WIC, SNAP, HUD)
- Governor's Office/children's cabinets
- Home visiting programs, including maternal, infant and early childhood home visiting (MIECHV)
- Help Me Grow chapters
- Public health (including maternal and child health)
- State councils on early childhood, child welfare, behavioral health and the unhoused
- Juvenile courts
- Study committees/workgroups related to state legislatures
- State Behavioral Health Department (mental health/substance use)
- State Early Childhood Education Department
- State Department of Education
- State Medicaid Program
- State Preschool Development Program (PDG)

Other Organizations

- Universities

Tribal Organizations/Systems

- Indian Child Welfare Act courts
- Indian Health Service programs
- Native American tribes/tribal organizations

Special Grant Programs

- Early Childhood Comprehensive Systems
- Grant project teams/advisory groups (e.g., Project LAUNCH, Systems of Care, Regional Partnership Grants)

Collaboration also requires participating in external coalitions, such as other community or state initiatives focused on early childhood, health, human services or related areas. By networking with these groups, new connections can be made and may lead to opportunities such as:

- infusing ITCT core components in other programs and systems
- codeveloping grant proposals or jointly seeking other types of funding opportunities
- raising awareness about the needs of infants and toddlers and their families with broader audiences
- streamlining systems to avoid duplication of services and ensure access for families is easy to navigate (e.g., single point of entry to care)
- coalition building for the purposes of joint advocacy for policy/funding change

Not all collaborations are the same, and the type of partnership will vary based on factors such as level of commitment of partners, organizational goals, time and resources available.

Key Champions

Identifying leaders who can serve as key champions is important to building support at the state or community level. These champions may include senior decision makers, advocacy groups, foundations, families/caregivers, frontline workers, neighborhood leaders, business leaders or other respected and influential individuals from the community. Key champions understand the goals and philosophy of your work and are outspoken advocates for your program. Key champions may need to be cultivated through outreach and education by members of your team. Having a one-pager or other briefing materials that outline your goals and outcomes can help bring key champions up to speed and may prove helpful in other areas of outreach.

Examples of key champions identified by teams include judges, philanthropic leaders, lawyers, parents/caregivers, child welfare/early childhood leadership, health care providers, legislators/legislative aides, members of the business community and state or local advocacy organizations.



How to Analyze Your Collaboration/Key Champions

Stakeholder analysis is a pathway to identifying strengths and areas of improvement within your current partnerships. It can aid in assessing whether you have the right people and organizations involved and how their unique skills/power/influence could be leveraged to further the impact of your work. Some tools for stakeholder analysis are found below. Your team may choose among these depending on your goals and how you feel you need to evaluate partnerships. Importantly, these tools can be used to identify new partners and/or to identify potential key champions.

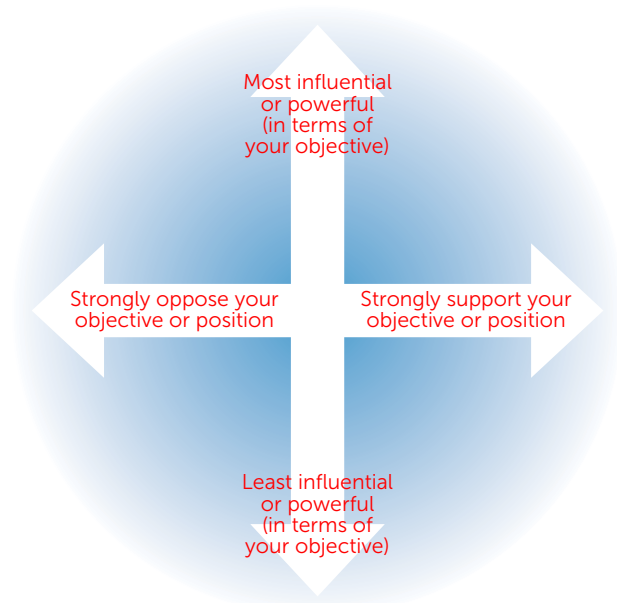
The [ZERO TO THREE State Initiatives Scan Tool](#) promotes connectivity to key partnerships in your state to support the implementation and sustainability of ITCTs. This tool serves as a starting point, providing a list of key programs and initiatives aligned with the ITCT approach. Programs and initiatives are separated out under such high-level categories as prevention, substance use prevention and treatment, mental health, physical health, courts and child welfare. This tool also walks you through questions that identify key partners within different policy areas related to early childhood systems.

Other tools that might be relevant or complementary to the ZERO TO THREE State Initiatives Scan Tool include the following:



SWOT Analysis

SWOT (strengths, weaknesses, opportunities, threats) analysis is a widely used tool that enables teams or organizations to assess the current operating environment based on a key area of focus or objective. An example of a SWOT analysis chart is shown above, and a worksheet is provided in [Appendix B](#). Teams can answer a few key questions in each area to populate a similar chart and guide a discussion on seeking out new partnerships.



Power Mapping

Power Mapping analysis focuses on the relationships needed to move your work forward. Power mapping views relationships with individuals from a power and influence perspective, including how much buy-in or support individuals have for your cause. A simple matrix is used in Power Mapping to place individuals according to their level of buy-in and their ability to influence change and/or make decisions.² Two Power Mapping worksheets are provided in [Appendix B](#).



KEY QUESTIONS

- Which partners do we have and who would we like to build relationships with? Why?
- What level of engagement would we want to have (e.g., formal partnership, information sharing) with each partner?
- What other initiatives in our community/state align with our work? How do we develop relationships with these?
- What are the challenges in engaging these partners?
- Do we need anyone else who can influence change and promote buy-in? How might we engage them?
- Who are your potential key champions (e.g., community members, families, systems leaders)?
- How will we approach developing new key champions?
- How have we ensured there is diverse representation across our team, including voices of parents and others impacted by system design/implementation?
- How have we gone beyond the usual partners to engage the community and other non-traditional partners?
- How have we built trust among partners?
- In what ways will we welcome new members/orient them?
- How could your partnerships benefit from a more formalized arrangement (MOU, data-sharing agreement)?



TOOLS

- [ZERO TO THREE State Initiatives Scan Tool](#)
- [Power Mapping](#)
- [SWOT Analysis](#)
- [SWOT Analysis Worksheet](#)



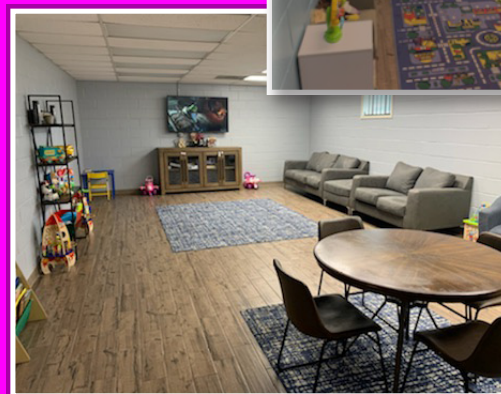
Financing and Resources

All programs need funding and other resources to reach desired outcomes. Funding, both direct and in-kind, is a critical ingredient to sustainability because it provides the resources necessary to achieve the desired results for children and families and to support your ongoing work. Funding may involve direct financing of program expenses, or it may be indirect by way of in-kind donations of goods and services.

For many teams, the focus of sustainability is ensuring long-term funding for the Community Coordinator position(s). Other implementation activities that may incur costs include data collection/continuous quality improvement (CQI), meeting and office space, supplies for staff, goods/services for families and training for staff and key partners.³

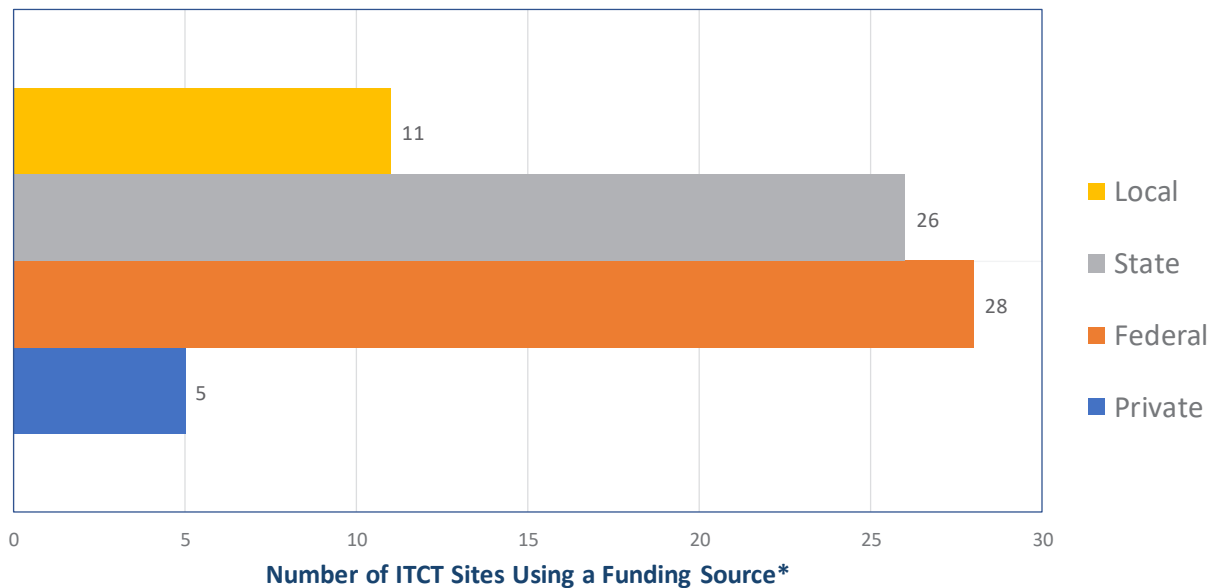
Funding may be obtained through federal, state and/or local funds or grants, foundations, cross-agency agreements, social impact financing or other means. Organizations can also leverage in-kind or donated resources to enhance the impact of the ITCT, including shared meeting or office space, goods or supplies for families, or services.

Soon after Judge Jones Russell took over leadership of the youth court in Forrest County, Mississippi, a vision for a family time/visitation center evolved. Working with limited resources, Judge Jones Russell assessed the unused and underutilized space in their buildings, repurposing what was a separate storage facility into a site for the family visitation center. Judge Jones Russell and her staff developed a plan to furnish the center with kitchen equipment, office furniture, cribs, gliders, diapers, rugs, art, flooring and a washer and dryer. The space came together through collaboration—the county covered the cost of paint and provided safety upgrades (e.g., flooring), while grant funds were approved to offset furnishing costs. Staff and volunteers came together to paint and remake the space in 2020. The Hope Visitation Center now offers a safe and comfortable space for family time/visitation for children and families involved in ITCT.



It is important to understand the different types of funding that states may receive, and how they might be used to cover costs. The National Resource Center conducted a survey of local sites and states in 2020. Based on responses from 35 sites, federal dollars are slightly more common sources of support than state funding, followed by local dollars and private investment. Ideally, states and sites are able to utilize a diversity of funding sources, which may provide more stability than relying on a single source of funding.

Infant-Toddler Court Teams Leverage a Mix of Funding Types

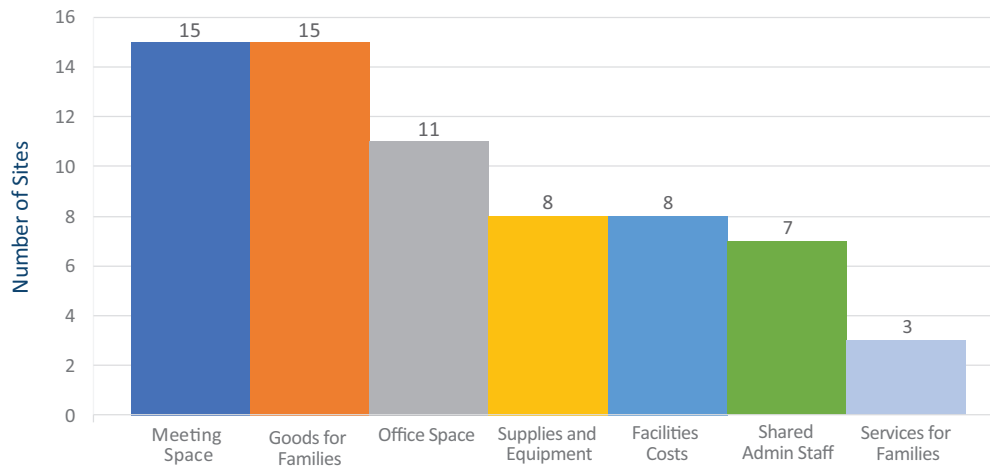


**Sites may report more than one funding source.
Findings are based on a 2020 survey of ITCT sites. 35 sites responded, 10 of which are HRSA-funded evaluation sites.*

- Federal funding.** Table 1 on page 18 is adapted from [ZERO TO THREE's Supporting Sustainability for Infant-Toddler Court Teams: A Federal Funding Guide](#), which synthesizes numerous federal funding streams and discusses how they might be leveraged to support core components. It is important to note that federal funds often flow to local communities through state-administered programs or grant opportunities. Federal funding can be discretionary, with a federal agency issuing competitive grant awards that are time-limited to states, localities or other entities. Non-discretionary federal funds, which are consistently funded year to year, include entitlement programs or block grant mechanisms (e.g., Medicaid and formula grants made to states).
- State funding** is also commonly cited as key to sustainability. State funding may come from a state's general revenues, tax, lottery or fee set-asides, permanent or temporary line items within state agency budgets or state matching dollars as required by federal authorities.
- Local funding** can take the form of local government budget dollars/general funds, federal pass-through funds from the state, direct state funding or local fees/tax levies that have a specified purpose. Both state and local funding availability are impacted by a variety of factors, including the economy, population/community trends, political change and advocacy/lobbying.

Shared resources and in-kind donations of goods and services are very common and must be explored intentionally with partners. Importantly, all survey respondents indicated sharing at least one in-kind/donated resource (e.g., administrative staff, facilities costs, supplies and equipment, or goods for families).

Infant-Toddler Court Teams Leverage Many In-Kind and Donated Services and Supports



It is important for teams to have knowledge of and connections to funding decisions in their state and community. State legislative and budget processes can have a powerful influence on the availability of state funding for early childhood/health/human services initiatives. Local funds are similarly impacted by the decisions of county commissions/councils and local leadership, such as mayors and others in county-level government roles. Over time, it is critical to develop familiarity with budget cycles and relationships with those who have influence over funding decisions.

Table 1: Potential Federal Funding Sources for ITCTs

ACF	HRSA	CMS	DOE	SAMHSA
<ul style="list-style-type: none"> ✓ Title IV-B ✓ Title IV-E ✓ Social Services Block Grant (SSBG- Title XX) ✓ CAPTA/CBCAP ✓ Child Care and Development Block Grant (including Child Care & Development Fund) ✓ Early Head Start/Head Start ✓ Tribal MIECHV ✓ Court Improvement Program 	<ul style="list-style-type: none"> ✓ Infant-Toddler Court Program ✓ Healthy Start ✓ MIECHV ✓ Title V Maternal & Child Health Block Grant 	<ul style="list-style-type: none"> ✓ Medicaid ✓ CHIP 	<ul style="list-style-type: none"> ✓ IDEA – Parts B & C 	<ul style="list-style-type: none"> ✓ Community Mental Health Services Block Grant ✓ Substance Abuse Prevention & Treatment Block Grant

Source: [Supporting Sustainability for Infant-Toddler Court Teams: A Federal Funding Guide](#)

ARKANSAS

Arkansas has identified multiple funding pathways to sustaining its ITCTs and related services. Very early on, the state identified federal Child Care and Development Fund (CCDF) dollars to allocate to ITCTs, which cover the cost of Community Coordinators, training and data support. Arkansas was able to leverage CCDF quality set-asides for infants and toddlers.

In 2018, after years of advocacy and planning, Arkansas released new Medicaid standards that increased reimbursement rates for clinicians providing mental health services for children ages 0 to 47 months, with the goal of increasing the use of evidence-based practices. To meet these standards, clinicians must be trained in ZERO TO THREE's *DC:0–5*TM diagnostic manual,⁴ as well as evidence-based dyadic treatment.

The Community Coordinator and other ITCT partners formed a workgroup with state collaborators focused on developing reimbursement rates that include mental health services for children aged 0–3. Arkansas Building Effective Services for Trauma (ARBEST) supports clinicians in meeting these standards by offering regular trainings (at no cost to the clinician) in the *DC:0–5*, as well as Parent-Child Interaction Therapy and Child-Parent Psychotherapy.

Funding strategies need to be considered and developed early on because identifying and securing sustainable funding is oftentimes a long-term, multi-year process. While time-limited foundation grants or discretionary federal grants can be an effective way to seed the start-up period or to scale to new geographic areas, such funds are generally short-term and less stable compared with non-discretionary federal funding streams received by states, or state or local government funding.

KEY QUESTIONS

- How are we currently funded? (This includes which core components require funding, how much funding is needed, who the funding currently comes from and how long the funding will last.)
- What options might there be for state/local public funding or private funding?
- Do we have relationships with those at the state/local level who make funding decisions?
- What private partners could be engaged to provide financial support (e.g., universities, foundations)?
- Do we have partners to collaborate with on future funding opportunities?
- Are there opportunities in our area to further integrate activities within existing initiatives?
- How could we share resources across programs (time, space, supplies, training)?

TOOLS

- [Safe Babies Court TeamTM Approach Cost Document](#)
- [Supporting Sustainability for Infant-Toddler Court Teams: A Federal Funding Guide](#)

A commitment to CQI is the engine that drives effective uptake and sustainability and is the foundation of your work. CQI provides real-time information about the impact of the approach, practice changes and whether the expected and desired results are being achieved. It also informs how the approach should be modified along the way to maximize impact. Quantitative and qualitative data collected through a CQI process are critical to documenting your successes with children and families, as well as with partners.

CQI is a foundational tool for sustainability because it identifies the various processes and roles of partners, both internal and external. Teams identify the root causes of systemic barriers and put a plan in place to address them. Other reasons for using a CQI process include:

- ongoing review of implementation progress
- data-informed decision making
- flexibility to changing conditions
- shared ownership
- innovative solutions

Within the CQI process, sites can use their formalized common vision as a launching point to develop specific, measurable goals for their work. The goals your team creates will help establish measures of success and identify areas where a structured CQI process may be warranted. CQI helps teams find strengths in their work and identify areas that are not meeting their goals or expectations. For areas of improvement, teams can test out potential solutions and review the results of any innovative strategies.

CQI often involves breaking down the steps of a process to surface where there might be challenges/barriers. The team then works together to develop a solution and implement changes. Over time, the team monitors data to determine the progress that has been made in solving the initial challenge. CQI affords an opportunity for the team to document and demonstrate their success and impact, which can be shared with current or potential funders or other decision makers.

During a monthly site review of data trends related to CQI indicators, including the frequency of Family Team Meetings (FTMs), a judge realized that these meetings were occurring in intervals of three to six months. Best practice standards for the approach recommend monthly hearings. As a result, the judge court ordered monthly FTMs. The average time between FTMs was monitored after the protocol was changed, and through recurring data review, the site achieved an average of less than one month between meetings.⁵



Evaluations of courts implementing the Safe Babies Court Team™ approach have shown that frequent court hearings, including monthly case reviews, are one of several important factors that lead to improved results for infants and toddlers in child welfare, such as shorter time to permanency and lower repeat maltreatment rates.⁶

A CQI process is not only an opportunity to look at the “here and now,” but also opens a window to think about sustainability of activities critical to successful implementation of the ITCT core components. CQI creates the opportunity to discuss both short- and long-term solutions and enlists the team’s support in identifying solutions at a systems level. It engages the team in continuous learning and gives the team tools and dialogue to adapt to constantly changing conditions.

CQI strongly correlates with other elements of the Sustainability Framework. For instance, success in a CQI initiative can help your team advocate for policy change or document positive outcomes that can help with writing a funding application. Your team may find that CQI leads to additional strategies across multiple areas depending on the challenges/solutions you decide to address. CQI is also critical to surfacing disparities that may impact health and racial equity, including structural factors within systems. Families and community members should be included in all aspects of the CQI process to bring their experiences and observations into consideration. Insights from families will create more opportunities to address inequities.

- What are our primary questions about outcomes? What areas has the team identified as needing improvement?
 - What data do we have readily available to answer these questions? If we don’t have the data we need, which areas of improvement have been identified?
 - What pieces of data might we have that could help us identify challenges?
 - What is the team’s plan for studying the collected data?
 - How are we engaging diverse voices in analyzing our data and developing solutions, including the voices of families with lived experience in the child welfare system?
-
- [Plan-Do-Study-Act](#) (a commonly used framework for CQI processes)
 - [Process Mapping/Workflows](#)
 - [Quality Improvement Storyboards](#)

Systems capacity can be looked at in two ways. First, it involves the development of strong internal organizational capacity for the core partners (e.g., partners in the Site Implementation Team, State Team), which include staff and internal processes such as human resources, fiscal operations and data systems. These processes allow an organization to operate efficiently and effectively. In some cases, a local or state government may provide organizational capacity, while in other instances, this role may be taken on by a nonprofit or university partner who provides backbone support.

Organizational capacity also involves having the right mix of people with the right knowledge and skills to participate in planning and implementation. It is critical to ensure the carving out of dedicated roles that align with the administrative needs of your program. Organizational capacity can be developed through continuous learning opportunities such as training, professional development, mentorship and facilitated peer-to-peer learning activities.

The other way to view capacity is through a systems and community lens. Teams will need to look at and plan for capacity as they bring the ITCT approach to the system of care for very young children. Important needs and gaps across systems will be identified during implementation. For instance, your community may identify a lack of infant and early childhood mental health (IECMH) professionals that can serve families.

The Community Coordinator, through the efforts of the Active Community Team, plays an instrumental role in coordinating local systems, addressing barriers and identifying resources to fill gaps. While building out the mental health system infrastructure is not the function of the Community Coordinator, the array of services in these related systems have a direct impact on family outcomes and the ability to meet the needs of the whole child and family. Partners will work with others in their community and state to strengthen systems capacity so that a full continuum of support is available.

The below case studies illustrate how ITCTs have influenced and supported capacity development in areas such as workforce training and streamlining of points of entry into care for families.

The original ITCT site in Little Rock, through strategic efforts driven by its Active Community Team, was instrumental in building a continuum of care to address the mental health needs of and improve outcomes for young children exposed to trauma across the state. When the team began implementation in December 2009, there was very little capacity to provide IECMH services in Arkansas. The ITCT initially acquired funding for three cohorts of mental health clinicians to be trained in an evidence-based, trauma-specific intervention for very young children and their caregivers (Child-Parent Psychotherapy). Over the next three years, the ITCT worked to raise funding to expand the program, ultimately training the first 75 clinicians across the state. The initiative grew to become known as Arkansas Building Effective Services for Trauma (ARBEST). Supported by state funding, ARBEST has worked for more than a decade to increase access to evidence-based trauma treatment services by providing training for mental health professionals.

When Rocky Mountain Children’s Law Center launched its ITCT, the local mental health provider had just finished training their workforce in Child-Parent Psychotherapy (CPP). Many challenges existed in rolling out this new service for infants and toddlers in the community; so, during the first two years of ITCT implementation, Rocky Mountain Children’s Law Center, the Community Coordinator and the Active Community Team worked to build system capacity and coordinated points of entry into these services for ITCT families. While the therapists were trained and ready to take CPP referrals from ITCT partners, *services initially took more than 100 days to initiate after a referral was made. By the end of the third year, more than half of the families in the ITCT were referred to and received CPP services in less than 30 days.*

In the face of these systems capacity issues, multiple strategies were employed to address the needs of the families, staff/partners and systems. Together, these strategies led to successful integration of IECMH services into the ITCT process and the broader community, the development of additional supports for families and faster CPP enrollment processes.

The mental health provider recognized a need for therapists to have reflective supervision and more intensive training on partnering with child welfare. Rocky Mountain Children’s Law Center immediately obtained funding to increase supervision and consultation for the therapists to enhance and support their delivery and success with CPP child welfare. As a result, the CPP providers gained additional support via reflective supervision and an increased understanding and readiness to partner with the child welfare system and ITCT.

Initially, there was hesitancy on the part of attorneys and child welfare to refer families to CPP because of unfamiliarity with both the intervention and IECMH. The Community Coordinator conducted outreach with therapists, the judicial officer, attorneys and child welfare workers to discuss the benefits of CPP and increase buy-in for CPP referrals. The Community Coordinator also hosted a series of short presentations to increase awareness of IECMH and the evidence-based practices available within the community. Additional meetings were held with child welfare staff and mental health professionals to discuss barriers to referrals and service initiation. These strategies resulted in several positive outcomes, including the child welfare department integrating infant mental health assessments and treatment into their treatment plans. The judicial officer also began seeking feedback from mental health providers on transitions for children in out-of-home care.

The Community Coordinator gathered ITCT data to present to key partners in the Site Implementation Team and Active Community Team. The data included the number of children referred, time to referral, time to service initiation and outcomes for families with (or without) the service. Through the data, the Community Coordinator showed that the reunification of families attending CPP was significantly higher than that of their peers who did not engage with the intervention. This led to additional discussions about the barriers for families and the systems, sparking motivation and enthusiasm among the partners to find solutions. As a result, the local mental health provider better understood clients’ needs and funded shuttles from the home to the office for families to attend CPP. Funding was also obtained to offer the service at home or in private community settings.

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- Does the ITCT administrative home have adequate staff, time, resources and data systems to manage the program?
 - How can systems/community resources be leveraged to create capacity in resources, staff and data?
 - How could training efforts be aligned across early childhood programs?
 - What options are there to integrate and/or build local capacity (e.g., train-the-trainer models)?
 - How can points of entry to services be coordinated/streamlined across partners?



Achieving policy change that supports the team’s common vision is important to ensuring your work is sustained beyond current funding, trends or leadership. In policy work, the terms “Big P” and “Little P” have become common in differentiating between systems where policy efforts might be focused. Big P policy includes state legislation or national policy changes that affect a state or the entire country. Big P policy can take years to develop and gain the support needed for approval. Little P policy refers to departmental, agency or organizational decisions that address resources, practices and regulations. These more localized policy changes take place on a smaller scale, with the impact often seen much more quickly.⁷ Federal-, state- and local-level reforms are all relevant to teams. For example, reforms to state-level public programs such as child welfare, behavioral health and Medicaid may impact future resources for the programs and/or families served.

Florida was an early innovator and leader in the expansion of ITCTs. Starting with a pilot program with three sites, Florida was able to make the case for further expansion to new areas. A four-person, state-level team was funded through state dollars. After eight years of implementation and advocacy, Florida has expanded from the three original sites to 32 active sites around the state. Florida’s legislature committed to a major investment of state dollars—\$1.86 million—which ensures sustainability of 20 ITCT Community Coordinator positions. The new policy that accompanied the budget allocation ([Senate Bill CS/SB 236](#)) also includes the establishment of the Early Childhood Courts program using language and incorporating components from the Safe Babies Court Team™ approach.

In 2021, Washington State implemented [RCW 2.30.100](#), legislation based on the Safe Babies Court Team™ approach. This law provides a foundation for practice change through Early Childhood Courts and emphasizes parent voice, relationships, safety and racial equity. In Washington, the Safe Babies Court Team™ approach was initially launched with one court in Pierce County in 2016. In 2020, the Center for Children & Youth Justice (CCYJ) convened a design team of statewide, regional and local leaders to develop a [blueprint for statewide implementation](#). CCYJ then formally partnered with the Washington Administrative Office of the Courts and other community partners, including child welfare, to enact the blueprint and work toward expansion of Early Childhood Courts (ECCs) across the state. Currently, there are five ECCs in the state, with plans for continued growth across Washington.

Teams should pay attention to Big P policy processes in their home state, including state budget bills and other legislative actions that can be key drivers of long-term sustainability. It is important to identify who within your collaborative can have a voice in important policy change discussions, and how collective voices can be leveraged to raise awareness to direct resources and policy change in favor of ITCTs. Teams may have some members who can advocate for direct legislative action with leadership, while other team members may not be allowed to do so if, for example, they are government employees.

States and local sites may need to assess their partnerships in order to identify key champions who have the influence to spark policy changes. The National Resource Center developed [Strengthening Families with Infants and Toddlers: A Policy Framework for States](#) as a resource for states to use to

support policy change efforts. The policy framework includes strategies informed by research and best practices that improve the health and well-being of very young children and their families.

While larger systems policy change, such as state legislation or changes to state child welfare agency regulations, are important to the long-term success and outcomes of states and local sites, local policy or Little P policy can be just as critical. Teams have noted the value of changes to policies around referrals, eligibility and enrollment processes and the subsequent positive outcomes for children and their families. Some of these policy changes have transformed the way agencies partner to create greater efficiencies and have thus been formally adopted into local agency guidelines/policies.

In Polk County, Iowa, the Early Head Start (EHS) program collaborated with the ITCT to ensure that children are enrolled in EHS and receive EHS home visiting services. The EHS program requested a reduced home visiting caseload per worker (from 12 to eight families), and assigned a dedicated home visitor to work with an ITCT caseload. This allowed home visitors to work more intensively with families and focus their caseload on ITCT families.

The Polk County ITCT advocated for changes to the eligibility policy that limited referrals to county residents. They saw an increasing need for support for families who had a parent receiving inpatient treatment in an adjacent county, as these families were ineligible for referral while the parent was receiving treatment in the nearby county. Polk County has very limited inpatient beds within its boundaries, so a change was sought to allow ITCT to serve families who were obtaining care at a specific facility in the neighboring jurisdiction.

In addition to being involved in state and local policy discussions, teams should be attuned to federal policy decisions that will impact systems. A recent example of this is the Family First Prevention Services Act, legislation that provides states an opportunity to potentially keep children safely with their families when there is a risk of removal from the home due to maltreatment. Through this legislation and the related changes to child welfare funding, many states have submitted Title IV-E Prevention Program five-year plans to help provide families with evidence-based mental health, substance use and in-home parenting services as part of an array of supports focused on keeping children's early development on track. These changes have opened new prevention pathways to support children and families who are at risk of child welfare involvement.



KEY QUESTIONS

- What state or local policies, regulations and legislation can be implemented that would support your goals?
- What state policies need to be reviewed and explored to better understand the opportunities and limitations?
- Where and with whom should your team be sharing messages (e.g., data/outcomes) about your work at the local and state level to impact policy change?
- Are there policy windows that are open or likely to open via a future legislative session or other local policy making process?

TOOLS

- [Strengthening Families with Infants and Toddlers: A Policy Framework for States](#)
- [ZERO TO THREE State Scan of Initiatives Aligned with Infant-Toddler Court Teams](#)
- [ZERO TO THREE State of Babies Yearbook: 2022](#)
- [ZERO TO THREE Building Momentum: A Messaging Guide for the Earliest Years](#)
- [NCSL Early Childhood Policy Overview](#)
- [NCSL State Bill Tracker](#)

CONCLUSION

Sustainability planning is an iterative process that should be embedded in all implementation stages, whether you are implementing an ITCT or another health and human services initiative. Infants, toddlers and families, along with systems and partners, will greatly benefit from your team's dedication to sustainability planning. Approaching implementation with a sustainability mindset will position your work for long-term success, and the tools and resources provided throughout this document can support your team's efforts to plan for the future.

If your team is looking for additional resources on sustainability planning or would like a consultation with National Resource Center staff, please contact ZERO TO THREE's Policy and Finance Team: Torey Silloway (tsilloway@zerotothree.org) and Lisa McGarrie (lmcgarrie@zerotothree.org).

Appendix A: Key Steps to Developing Your Sustainability Plan

Sustainability planning will require your team to revisit the original reasons you came together to implement and review your common vision (vision and mission). It is critical to set aside team time to reflect on important takeaways from your implementation journey, which in turn may inform decisions about the future. This is true whether you are brainstorming how to start an ITCT or if you are already several years into serving families.

Some key questions for reflection with your team before starting the sustainability planning process include the following:

- Why did we originally seek to implement an ITCT in our community/state? Have there been changes in the needs of the community/state since we started?
- Do we have enough information to make the case to continue the program as is? What adjustments might we need to make based on evolving needs in the community/state?
- How have we met our original goals? Have we achieved positive outcomes?
- What lessons have we learned through implementation?
- Are we missing any key partners for our sustainability planning process and, if so, how might we engage them? How have we involved leaders who make funding or policy decisions?
- How are we currently thinking about sustaining the different components?

Use the guides on the following pages to walk through key questions with your team. These tools will help you document and organize the different elements of sustainability that your team prioritizes, with templates to map out goals for each area.

After your reflective discussion, take the following steps:

1. Conduct a quick self-assessment of where your team currently stands with strategizing and planning (see Brief Sustainability Reflection).
2. Review the action steps in the sustainability planning work with your team.
3. Begin outlining an agenda.
4. Determine how much time you will need together to begin your work and schedule a dedicated time to discuss.
5. Solicit feedback on the agenda and make sure that team members have roles within the different discussions (e.g., co-facilitators, note takers, leads).

Areas to consider for sustainability planning discussion:

- Management and coordination of processes
- Direct staffing
 - Who will employ staff?
 - How will they be paid?
 - How many staff members are needed?
 - What responsibilities will be given to staff versus absorbed by partners?

- Roles of the team, including the roles of parents and other community members across different teams
 - Will the team continue in its current form?
 - What role does each partner assume?
 - What roles do parents/families and community members have?
 - Are we maximizing our partnerships to their fullest?
 - Do we need additional partners?
 - How will we recruit new members?

Before your first sustainability planning session, review the various tools provided throughout this document that could potentially support your sustainability discussions. For example, if your team has a logic model or process workflow, it may be a useful tool to review during sustainability discussions. Power Mapping or SWOT analysis can both be used to think about the questions related to collaboration/key champions. Either of these tools can be completed with your team during a sustainability planning session, or they can be revisited if done ahead of time.

ITCT Brief Sustainability Reflection		
Sustainability Progress <i>(Discuss with your team and decide where your ITCT fits below.)</i>	Where is our team with sustainability? <i>(notes from team discussion)</i>	Recommended Next Steps
<ul style="list-style-type: none"> ✓ There have been no discussions about sustainability as a team. ✓ We have informal strategies or no strategies for sustainability. ✓ Sustainability is seen as one person's or one organization's responsibility. 		Convene your team for a focused session on sustainability. <i>(Use the planning templates on the following pages and other tools throughout this toolkit.)</i>
<ul style="list-style-type: none"> ✓ Sustainability is an ongoing topic of discussion with the team. ✓ We have some formal strategies to sustain but there are gaps. ✓ Sustainability is seen as the responsibility of multiple people/organizations. 		Establish a schedule to revisit your sustainability plan progress with the team.
<ul style="list-style-type: none"> ✓ We have developed a sustainability plan/strategies as a team. ✓ We have a formal sustainability plan in place and sustainability is a shared responsibility among all partners. 		Periodically convene your team to revisit the sustainability plan and your progress (minimum of every six months). If major changes occur in your sustainability strategies, convene your team for a special session to discuss. <i>(Use the planning templates on the following pages and other tools throughout this toolkit.)</i>

Sustainability Planning Worksheet #1

Action 1: With your team, identify the components you need to sustain.

1. Which component(s) do you need to sustain?

2. Choose the element(s) of the sustainability framework to which this applies.

EXAMPLE: Common Vision, Collaboration and Key Champions, CQI, Financing and Resources, Policy, and/or Organizational Capacity

3. What resources do we need in order to sustain each component?

(might be a dollar amount, people or relationships, donations of goods/services)

EXAMPLE: Salary + fringe for this full-time Community Coordinator position

4. Will the component we want to sustain continue as is or will there be administrative changes or changes to management/ownership?

EXAMPLE: Yes. The Community Coordinator will move from the CASA program to a position within the dependency court.

5. Are we planning to take the ITCT to scale across new geographic areas?

EXAMPLE: No. This program will remain in Clarke County only.

6. Are there gaps in funding or other resources currently or forecasted for the future?

EXAMPLE: Yes. Courts currently only have 50% of funding identified for Community Coordinator salary.

7. Do we have relationships and resources in place to take next steps?

EXAMPLE: Partially. We need to work on partnering more with the administrators at the courts.

Sustainability Planning Worksheet #2

Action 2: Identify your sustainability goals. Based on your team's responses in Action 1, work with the team to identify the goals for sustainability of the elements identified. Identify whether you have funding/diversification goals, partnership goals, etc.

Sustainability Area #1: _____

EXAMPLE: Community Coordinator Position (1 FTE)

1. **Goals** (*Make sure your goals map to the core elements of the sustainability framework in the first worksheet.*)

EXAMPLE: • Funding goal – to identify 100% funding for the Community Coordinator position within six months before the current grant ends
• Partnership goal – expand the relationship with courts administration to ensure funding and seamless transition of Community Coordinator position

2. **Target date(s)**

EXAMPLE: 12/31/22

3. **Action Items** (*Actionable strategies to aid in achieving your goal*)

4. **Who is responsible?** (*Identify a lead/co-lead, support for each action.*)

5. **Status**

EXAMPLE: Not Started, In Progress, or Completed

Appendix B: SWOT Analysis and Power Mapping

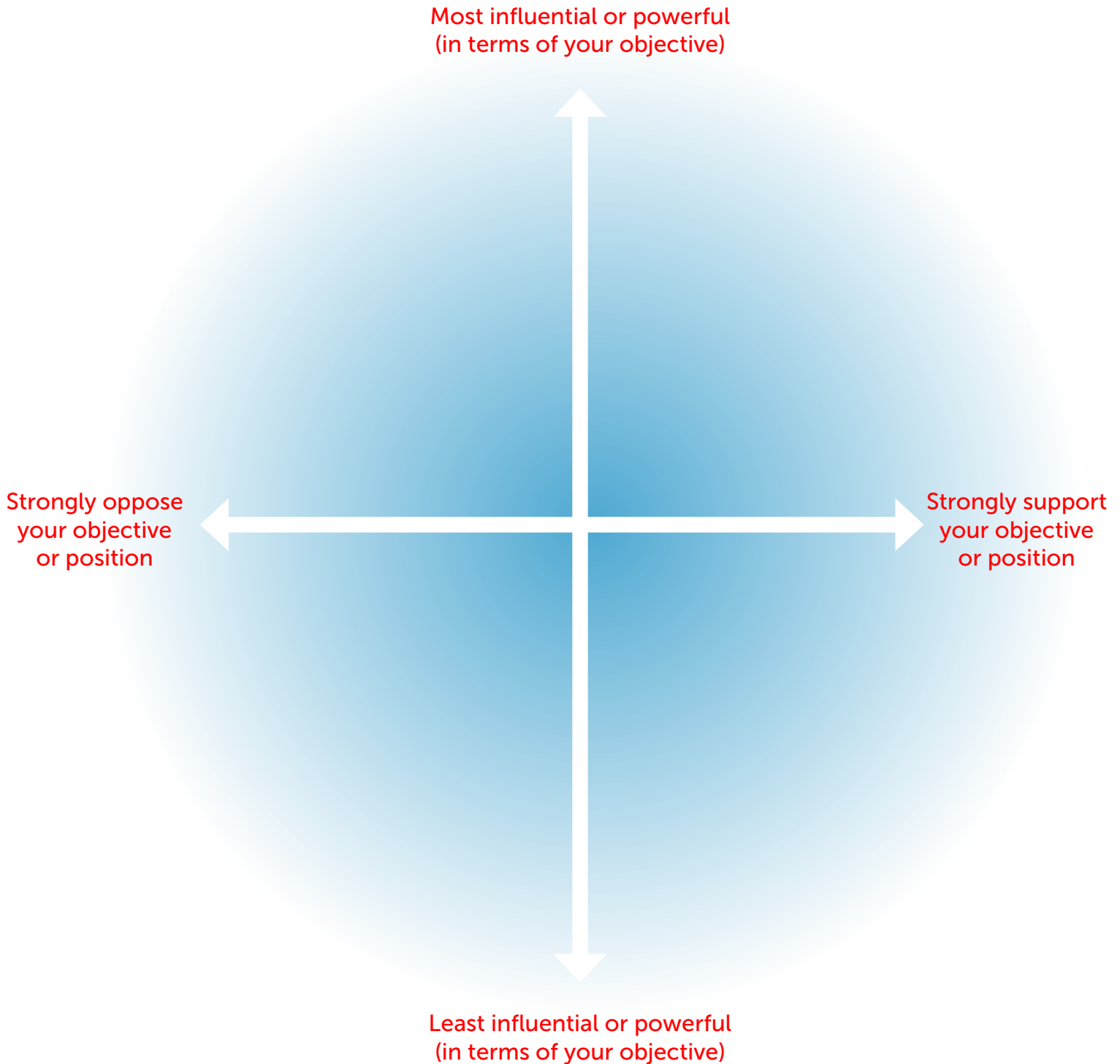
SWOT Analysis Worksheet

SWOT (strengths, weaknesses, opportunities, threats) analysis is a widely used tool that enables teams or organizations to assess the current operating environment. With your team, establish a focus for the SWOT analysis. Example questions are provided below as a starting point in each quadrant. Your team can think through each area together, including the internal strengths and weaknesses of your collaboration and the potential external opportunities and threats.

	HELPFUL to achieving the objective	HARMFUL to achieving the objective
INTERNAL ORIGIN (attributes of the organization)	 Strengths What do we do well? What does our approach offer that others do not? 	 Weaknesses How is our work limited (e.g., resources, time, people)? What are others likely to see as weaknesses in our efforts? 
EXTERNAL ORIGIN (attributes of the environment)	 Opportunities How can you turn your strengths into opportunities? Where is there momentum that you could take advantage of? 	 Threats What threats could harm your work? What threats do your weaknesses expose you to? 

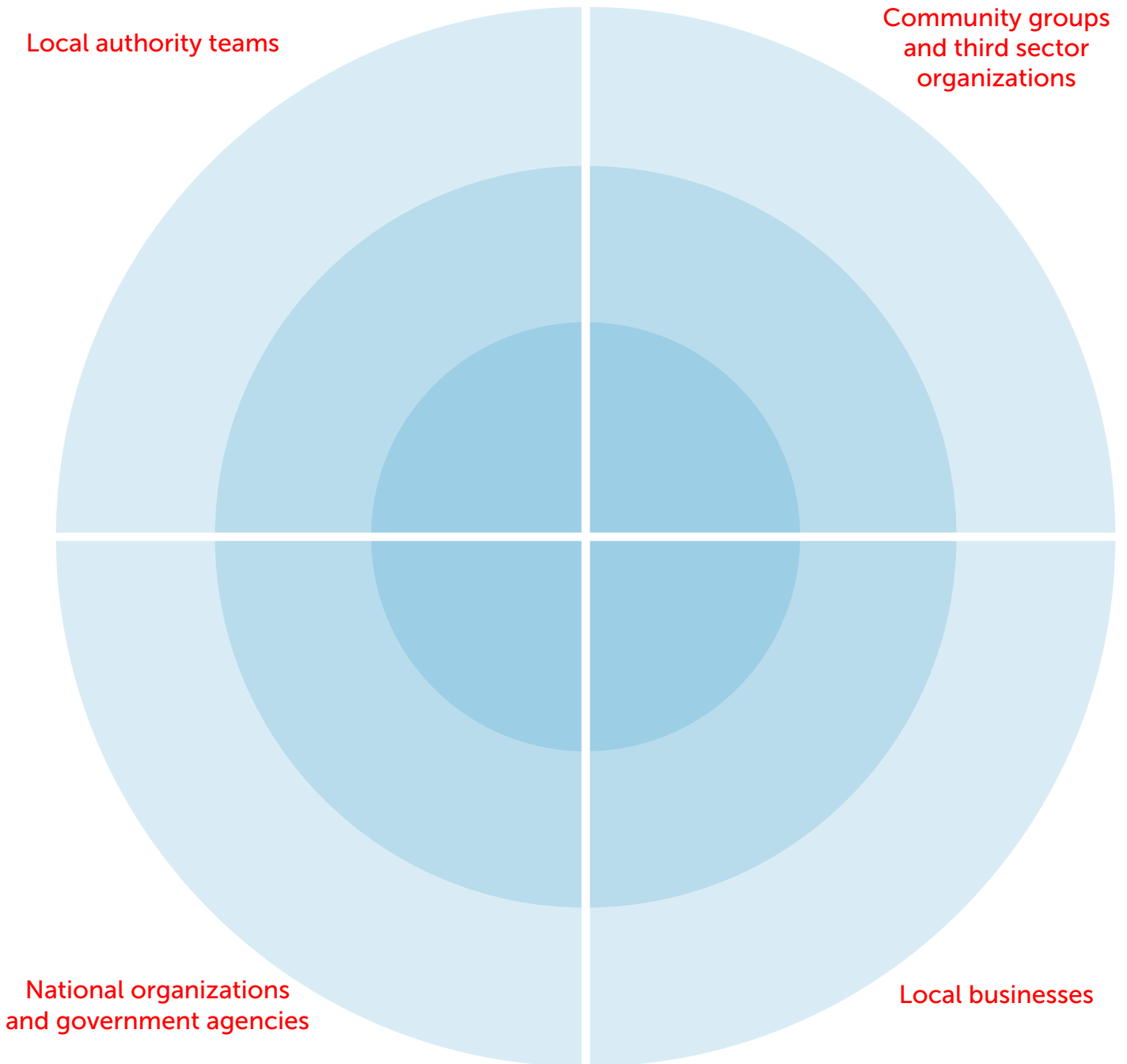
Power Mapping Worksheet - 1

Power Mapping analysis focuses on the relationships needed to move your work forward. First, identify your objective - which, for instance, may come from your State Action Plan or locally identified priorities. With your team, identify and discuss individuals and place their names across the quadrants using text boxes or sticky notes.



Power Mapping Worksheet - 2

With your team, identify and discuss your community stakeholders and place their names in the bullseye diagram using text boxes or sticky notes. Place those you think have the most influence closer to the middle of the circle and those with less influence on the outer edges.



ENDNOTES

- ¹ The core components of the Safe Babies Court Team™ approach. (July 19, 2015). ZERO TO THREE. Retrieved July 28, 2022, from <https://www.zerotothree.org/resources/1655-the-core-components-of-the-safe-babies-court-team-approach>
- ² Power mapping. (n.d.). Beautiful Trouble. Retrieved July 28, 2022, from <https://beautifultrouble.org/tool-box/tool/power-mapping>
- ³ The Safe Babies Court Team™ approach cost document. (2020). ZERO TO THREE. <https://www.zerotothree.org/wp-content/uploads/2022/10/SBCT-Cost-Document.4.10FINAL.pdf>.
- ⁴ ZERO TO THREE. (2021). DC: 0–5™ Diagnostic Classification of Mental Health and Developmental Disorders of Infancy and Early Childhood. <https://www.zerotothree.org/our-work/learn-professional-development/dc0-5-manual-and-training/>
- ⁵ Casanueva, C., Smith, K., Burfeind, C., Harris, S., & Carr, C. (August 2018). Using data to drive decision making and promote continuous quality improvement. Quality Improvement Center for Research-Based Infant-Toddler Court Teams. Retrieved July 28, 2022, from <https://www.zerotothree.org/wp-content/uploads/2022/10/QIC-Using-Data-to-Drive-Decision-Making-and-Promote-CQI.pdf>
- ⁶ Casanueva, C., Harris, S., Carr, C., Burfeind, C., & Smith, K. (2019). Evaluation in multiple sites of the Safe Babies Court Team approach. *Child Welfare*, 97(1), 85–108. <https://www.jstor.org/stable/48623578>
- ⁷ Collins, S. (April 2019). Big P, Little P – a guide to policy engagement at all levels. Retrieved July 28, 2022, from <https://amchp.org/big-p-little-p-a-guide-to-policy-engagement-at-all-levels/>