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# KENTUCKY CABINET FOR HEALTH AND FAMILY SERVICES

**DCBS Commissioner Marta Miranda-Straub**  
**DCBS Deputy Commissioner Lesa Dennis**  
**21<sup>st</sup> Century DCBS Update:**

**Organizational Transformation**

# DCBS Commissioner Imperatives

- It is our duty and responsibility to address the disparities and disproportionalities in our work.
- We must engage, listen, learn and implement the wisdom and talent of those we serve as trusted advisors. ( lived experience)
- Trusted Advisors Council
- “Nothing About us without US: Front Line, Consumers and Partners
- We are not police for the state; We are social servants
- We must strengthen the “C” in DCBS
- Comprehensive Community Wrap Around Prevention Collaborative
- Healthy , valued and supported staff is crucial to our work
- We must move UPSTREAM



KENTUCKY CABINET FOR  
HEALTH AND FAMILY SERVICES

## **Building a 21<sup>st</sup> Century Agency Strategic Planning**

### **Overarching Goal: Decrease Barriers, Increase Access**

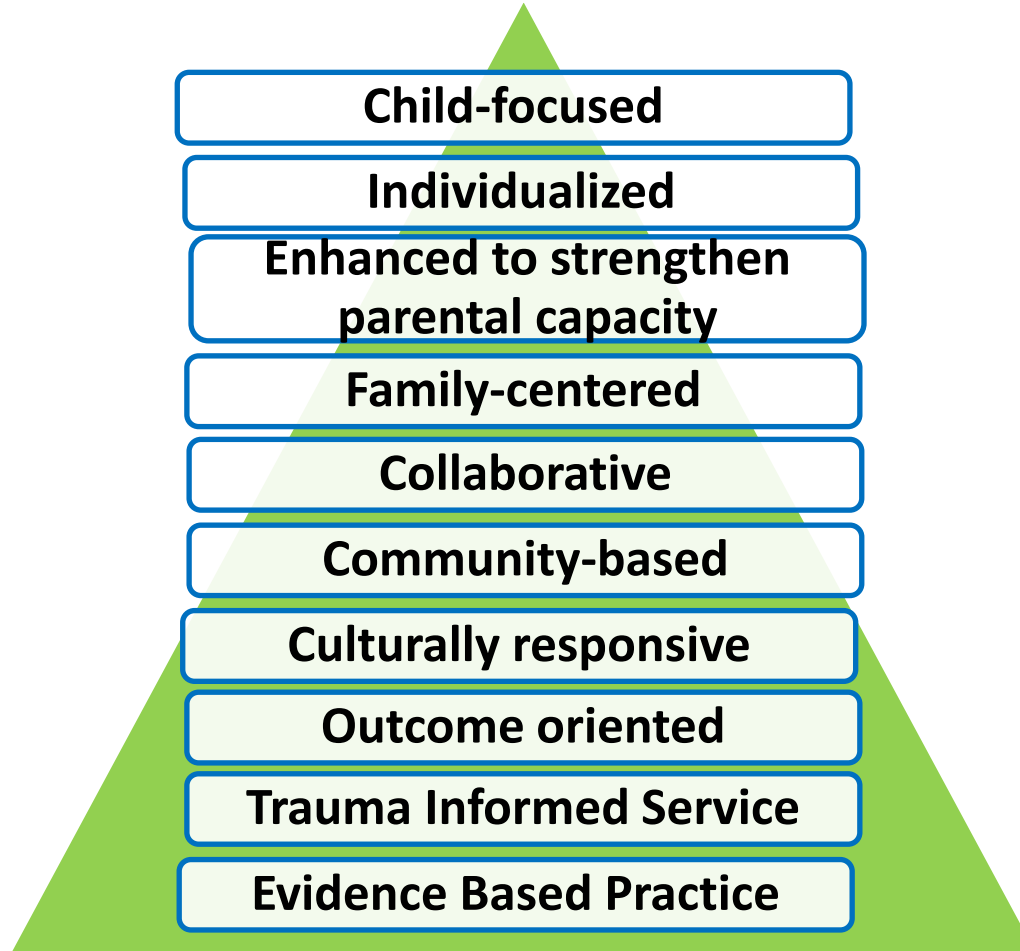
- Overarching Outcomes: Thriving Families, All Children all Families
- Achieving the Highest Human Potential Possible
- Resilient Organization, Healthy and Supported Workforce, Engaged and Valued Consumers
- High Impact Collaborations
- From Residential to Community Services
- Primary – Secondary Prevention Division

# Building a 21<sup>st</sup> Century DCBS

## The Five Pillars

- Equity: Social and Economic Justice: Racial Disparities & Poverty: Economic Support
- Trauma/Resilience and Engaged Healing: Clients and Staff
- Families/Children/Youth
- Health and Wellness: Behavioral Health, Mental Health and the Opioid Crisis
- Operations/Implementation and Evaluation: Systemic and Structural changes

# Basic Practice Elements



# Equity: Social and Economic Justice

- Social Inequities, Disparities and Disproportionality
- High Cost of Living in Poverty: transportation, housing, foods, education, childcare, banks, mental and physical health
- Wages, Skills, Education



# Social Determinants of Health

- Economic and social conditions that influence health status
- Health promoting factors that impact living conditions, such as: distribution of income, wealth, influence and power.
- SDH are mostly shaped by socio-cultural attitudes and public policy

**Social Determinants of Health**



Social Determinants of Health  
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 Healthy People 2030

# Social Justice



- Striving to become an antiracist organization
- Addressing disparities/disproportionality, bias, assumptions in policy and practice
- Added to content experts on public health and equity
- Creating a DCBS Core Racial Equity Team
- Expanded Race Community and Child Welfare (RCCW) work to every region
- Worked with AOC on a joint Vision Statement on Racial Equity Inclusion and Justice



# Trauma Resilience and Engaged Healing

- Address Secondary Trauma: The continuum
- Policy, protocols and Practice
- Mitigate secondary trauma as part of the work
- Debriefing and administrative support
- Trainings on resilience building
- Build capacity and implement pay equity
- Work towards all employees making a living wage





# Trauma/Resilience/Engaged Healing: Staff/Clients/Consumers

- Professional development
- Trauma support/debriefing groups
- Ongoing skill-based training to identify and address chronic stress, burn out, compassion fatigue, vicarious trauma and secondary trauma
- Build prevention services array that includes primary, secondary, and tertiary interventions
- Continue System of Care Round 5 Grant
- Expand human-centered design and Bridges out of Poverty
- Work with Dr. Austin Griffiths/Western Kentucky University through a state-university partnership opportunity on a self-care research project looking at biometric data
- Continue partnership with the Office of Health Data and Analytics on gathering and analyzing data from the Family First evaluation to enhance service provisions and expand evidence-based practices

# Continued Work: A New Business Model



- Differentiate Poverty vs Neglect
- Apply Strengths and Resilience Framework  
Client Centered/Human Design/Culture of Safety
- Trainings, Planning, Programs, Evaluation: include those with lived from front line and those with lived experience
- Assess/Evaluate Policy, Practice and Programs
- Disaggregate Data
- Identify disparities and disproportionalities in all our programs
- Develop language and strategies to design new community of practice

# Operationalizing

- Prevention Collaborative
- Planning for a Division of Prevention
- Upstream Learning Cafés
- Implementation of Qualified Residential Treatment Program (QRTP)
- Modernizing KTAP
- Telecommuting/Hybrid Workforce
- DCBS Certification



# Do you have any questions?



