Family First Update



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What is the Family First Preventions Services Act?

- The Family First Prevention Services Act (FFPSA) places focus on prevention in child welfare - leading to more families remaining permanently together.
- Jurisdictions are required to develop a statewide prevention plan which includes identifying those families most likely in need of supports.
- Community pathways will be created for families to access family-centered community based resources.
- Evidenced Based Services addressing mental health, substance use treatment, and in-home parenting skill training are incentivized.
- Kinship navigator programs, which provide information, referral, and follow-up services to relatives raising children, will be established.
- The Act requires higher standards for treatment of youth placed into congregate care settings.

State of Connecticut's Prevention Efforts



Family First is a Tool



What is this Really About?



- Chapin Hall
- Sister State Agencies
- Contracted Providers
- Community Partners
- Parents with Lived Experience
- Youth

Governance Committee

- Candidacy Definition
- Kinship and Foster Care
- Program and Service Array
- Infrastructure
- Intensive Treatment 24/7 QRTP



Candidacy Definition

The Governance Committee has approved the following groups under the Candidacy definition:

- Families with Accepted Careline Calls
- Families Who Have Been Accepted for Voluntary Services
- Pregnant and Parenting Youth in Foster Care
- Siblings of Children in Foster Care
- Youth Exiting to Permanency or Youth Exiting Out of Foster Care

Candidacy Approval Continued

- Families with Certain Characteristics Identified Through a Community or Neighborhood Pathway
 - Children who are chronically absent from preschool/school or are truant from school
 - Children of incarcerated parents
 - Trafficked youth
 - Unstably housed/homeless youth
 - Families experiencing interpersonal violence
 - Youth who have been referred to the juvenile review board or who have been arrested
 - Caregivers who have, or have a child with, a substance use disorder, mental health condition or disability that impacts parents
 - Infants born substance-exposed (as defined by the state CAPTA notification protocol)

Kinship and Foster Care

- Develop and implement a Caregiver Practice Model (CPM) which is an organizing framework, that will align our vision and values with policy and practice by describing and guiding the work of the agency and its contracted providers related to all caregivers in the State of Connecticut.
- Develop a Connecticut model of Kinship Navigation which may qualify for federal entitlement funding under the Family First Prevention Services Act (Family First).



Intensive Treatment 24/7 (QRTP)

Qualified Residential Treatment Programs (QRTP):

- Children will be assessed to determine if treatment in a QRTP is the right level of care to meet their needs
- QRTP uses a trauma-informed treatment model
- Nursing and clinical staff accessible 24 hours a day/7 days a week
- Licensed and accredited by certain national organizations
- QRTPs must provide 6 months of aftercare
- Families must be engaged as part of placement decision-making and ongoing treatment
- Increased court oversight of placement

Legislation is pending to establish these criteria in state statute

Infrastructure Practice and Policy

- Establishing strategies to guide families to the right services via an external care entity/pathway.
- Determined and prioritized essential care entity/pathway characteristics:
 - Easily accessible for the families
 - Supportive and empathetic to the families' situation
 - Provides a 'safe' and stigma free environment
 - In-person, website (chat) and phone line open 24/7
 - Ability to think about whole child and whole family



• Utilizing "Parents as Experts" facilitated group discussions to further inform the work.

"Parents as Experts" Facilitated Discussions

- We believe parents have the firsthand knowledge of how to assist us in developing a statewide plan of services and supports for families.
- Groups will be facilitated by a community partner and consultants from Chapin Hall at the University of Chicago, a policy and research center, supporting the Department of Children and Families.
- The following themes will be discussed:
 - Getting access and initial contact to services and support
 - Identifying a family's needs and priorities
 - Connection to services and the benefit of the support
 - The ideal experience for families in Connecticut

Program and Service Array and Fiscal

- Provided initial recommendations on Evidenced Based Programs (EBPs) to address identified needs of the Candidacy populations.
- Work is fluid with additional assessment of service gaps occurring and new programs becoming eligible to be utilized.
- Fiscal will match recommended services against the candidacy pool, estimate costs and produce financial models.
- Planning will match the values of the Agency.



THE FIRST FINISH LINE IS APRIL...

Then Come the Other Finish Lines.....

Phase 2 – Implementation

The Implementation Stage of Family First will involve:

- Additional Workgroups
- Stabilizing Service Selection
- Procurement of Care Entity/Pathway
- Workforce Training
- Data Collection
- Quality Assurance



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Questions and Answers?