

# CT Family First: Community Partnerships and Youth and Family Engagement Meeting Notes

3/3/2020

## Agenda

- Welcome
- Introductions
- Recap of Virtual Meeting
- Family First Workgroup Updates
- How to Facilitate a Family First Community Conversation
- Racial Justice Overview
- Closing and Wrap Up

## Recap of Virtual Meeting

- Web Updated
  1. The first Teams meeting was held last week. The Co-Leads gave updates on the other workgroups and answered questions.
  2. We at the Department are still learning how to best navigate the Teams application. We apologize for not being responsive in the chat; after we started sharing the screen, we did not have access to the dashboard and could not see people asking questions.
- Discussion on Teams and Meeting Options
  1. It was suggested that the workgroup switch to a six-week meeting format; however, that would push us out until April and others felt that would be too much of a lag.
  2. The group also requested to add weekly meetings through the end of April.
  3. It was also recommended that the April 7 meeting be adjusted to a web-based meeting based on the content to be shared. The group agreed that a day or so before an in-person meeting, if JoShonda could evaluate whether there is enough material to warrant a full in-person meeting and then potentially switch the meeting to a Teams meeting, the group would appreciate this.
  4. JoShonda also committed to learning Microsoft Teams.
- Meeting Cadence
  1. Our next meeting is scheduled for March 10. It will be another electronic meeting.
  2. Our next in-person meeting is scheduled for March 24. *Note - this meeting has since been canceled due to COVID-19.*

3. The Co-Leads will consider whether there is enough content for a meeting, and if not, meetings could be canceled. Please keep an eye on your inbox and calendar for any potential cancellations.
4. One person suggested utilizing the Youth Advisory Board (YAB) and perhaps collaborating with schools to get more youth input.
5. Another person suggested meeting outside of the Hartford area. All in-person meetings have been at Beacon, which means family and youth representation are more likely to be from that region. Perhaps a better cross-section of families could participate if there were meetings in more locations.
6. The group will consider whether there are any opportunities for youth to participate, but they are likely going to continue with the current schedule.
7. Another important note for participating in the online meetings is that Microsoft Teams is not compatible with Microsoft Edge/Explorer or Safari. Please use Chrome for these meetings, or [download the Microsoft Teams app](#) to your computer or phone for free.

## Workgroup Updates

- Governance
  1. The Governance Committee will meet next on March 19. *Note: This meeting has been postponed due to the COVID-19 outbreak.*
  2. There are no other updates at this time, as the Committee has not met since their last meeting on January 27.
- Candidacy
  1. The Candidacy workgroup met on February 28, where they listened to several presentations on the current system (Careline, intake, ICFS program, voluntary services, Beacon, 211, EMPS) to learn about what screening and assessment tools are already in place, as well as identify places where a Family First screening tool could be added.
  2. The workgroup felt that the first five population groups (1-5 on the narrow definition list) were all DCF-centric. It did not seem necessary for these cases to add an extra step, so the workgroup decided that DCF would come up with a screening tool that can be integrated into their process which the workgroup would then approve.
  3. The group then turned to Population #6 (Community and Neighborhood Pathways). It was difficult to decide where the best place to identify these youths would be. Where is the entry point to services? Who actually speaks to and works with the identified

family populations? It was a struggle to arrive at a conclusion, but overall, the workgroup decided to create an entity using either a tech or service organization. No particular organization was chosen, but the workgroup agreed it should be a 3<sup>rd</sup> party entity that is leveraged in combination with technology. This idea will be presented to the Governance Committee for approval before moving on. The workgroup is also mindful of potential procurement issues or development costs and would like this to be vetted through the Governance Committee before moving on with the process.

4. If the Governance Committee agrees with the idea, the Candidacy workgroup may need to disband and DCF will need to design this in-house to avoid any potential conflicts of interest.

5. Questions?

a) Someone asked if the Department would consider using an RFI process to elicit candidacy infrastructure recommendations.

b) **Q:** If you need a manager for this screening, wouldn't 211 be the natural choice?

**A:** We agree that 211 would be a good option, but there are several other possibilities. For example, Department of Social Services (DSS) has a portal that seems like it could fit too. We have also been listening to the Kinship and Foster Care workgroup's discussions, and we feel there is a lot of opportunity there too. We do not want to make the ultimate choice just yet.

c) **Q:** Although a conflict of interest is a valid concern, it is important providers be involved in the design process because they are the ones who will be using the tool--what will you be doing to get provider input?

**A:** So far in the planning process, there has been no conflict of interest. All of our meeting minutes are available online, and we have not excluded anyone from participating in any workgroup. However, once we get into the procurement/design phase, we need to consider unhooking some of these partnerships. As soon as we are designing something for money, we need to be careful of who is involved in that design process.

- Fiscal and Revenue Enhancement

1. The workgroup has not met since the last update.

2. Their next meeting is scheduled for March 20. They hope to have an update from the Programs and Service Array workgroup by that point, as there is still very little for them to do without knowing what programs they are to fund.

- Kinship and Foster Care
  1. The Kinship and Foster workgroup met on February 28. At this meeting, they reviewed the Kinship Navigator requirements.
  2. So far, they have not focused on the community as much as they have DCF.
  3. They have also focused a lot on the barriers that exist and less on building a new system.
  4. Their next meeting will be on March 13. *Note: This meeting has since been cancelled. The next meeting is now tentatively scheduled for April 13. Please see the Family First website for the most up-to-date schedule.*
  5. The workgroup's next meeting will focus on practice and training.
- Programs and Service Array
  1. This workgroup has been working so hard to get their work done. They have come up with several tools that can help better visualize clinical interventions. They have also been doing more research on the other services available on the Clearinghouse.
  2. Last week, they added an additional meeting to workshop/catalogue interventions.
  3. The group has also split into subgroups. This week, the subgroups will present their findings to the bigger group.
  4. At one point, they had 40 interventions that they knew of. They now want to focus on breaking these down into more refined groups that will work for more populations. Connecticut has so many services, which is great, but it makes it more challenging to pare down.
  5. The workgroup will meet next on March 19. *Note: This meeting has been cancelled due to COVID-19.*
  6. Questions and Comments?
    - a) The two folks in the Community Partnerships workgroup who have also attended the Programs and Service Array workgroup agreed that this was the most concise and simple explanation of all the work the group has been doing.
    - b) Ken Mysogland also acknowledged that all this talk of EBPs makes some folks anxious--participants should know that the Department will not *only* fund EBPs.
    - c) One workgroup member asked that Programs and Service Array workgroup also look at the length of time services are available and consider lengthening that time frame. Many programs are just four months long, and that is too short for many families.

d) Another person wondered whether it is possible to look at non-EBPs that have EBP components and include those components in the plan for some reimbursement. JoShonda felt that this could be initially challenging and right now the workgroup is only focusing on full EBPs on the Clearinghouse. Perhaps this is something to consider for the broader prevention population.

- Intensive Treatment 24/7 QRTP

1. This is a new workgroup that had its first meeting today (3/3)! It is almost entirely composed of people who are members in other workgroups.
2. QRTP stands for Qualified Residential Treatment Program. This is referring to congregate care settings that are used for treatment, not for youth for whom another placement cannot be secured. The Department is reimbursed for fourteen days and after that, only reimbursed if the placement is a QRTP.
3. Their first meeting went well; Linda Dixon, Workgroup Co-chair, gave the group an FAQ document regarding the money currently spent by various treatment programs.
4. The group also looked at the regulations surrounding QRTPs. A key takeaway is that Connecticut seems to be in pretty good shape for meeting the standards, except with regards to the six months of aftercare that are required. This groups plans on diving more deeply into QRTP requirements to determine what exactly is meant by aftercare. The group hopes to address this question with our federal partners.
5. At their next meeting, the workgroup plans to examine DCF's disparity data (by race/ethnicity), have more clarification on the aftercare question, look at draft legislation, and learn more about the mechanics of the juvenile justice (JJ) system. The JJ system is important because they will be conducting a 30-day review in court and the group wants to learn more about where the judiciary is on that.
6. Connecticut is not focused on the reimbursement but the better standards that come with being accredited as a QRTP. To be considered a QRTP, a facility must:
  - a) Be accredited
  - b) Have a 24/7 nursing staff
  - c) Be trauma-informed
  - d) Plan with the family
  - e) Engage siblings
  - f) Have a 6-month aftercare program

7. The workgroup members did a self-assessment and felt that Connecticut's facilities do well in the above metrics, except with respect to the six months of aftercare. This is not necessarily a huge lift, but it is good to see if we are really where we think we are.
8. There are other questions that remain and will be discussed in future meetings.
9. Another note is that Connecticut's legislation needs to match the federal and judicial requirements. There are more process details needed, and the individual needs to agree to the plan and to the match.
10. Overall, the QRTP standards are good because they create more oversight.
11. Questions/Comments?
  - a) One person asked for more clarification on the reimbursement model--if a facility is a QRTP and the judicial process was followed, the State gets the reimbursement? Is there any reimbursement for aftercare? JoShonda explained that we will need to look at the rate structure to determine what adjustments, if any, may need to be made.
  - b) Another person asked whether the reimbursement comes through funding the fee for services or through a contract. This is not articulated in the statute, so it is a part of the discussion and something the Department will need to decide.
  - c) **Q:** How will Connecticut use the transitional funds?  
**A:** The deadline to apply is April 30, and in the meantime, the Department is still planning on how they will use the funds.
  - d) One member explained that they have some anxiety regarding the judiciary and Department making these decisions on QRTPs and congregate care. Knowing the judicial history in Connecticut makes them worried for kids of color and how the system will affect those kids. They know that the judiciary sometimes lets kids stay in these places for longer than they should, and they do not trust a system based in those two institutions. The Co-Leads agreed that this is an important concern and said that they hope to explain to the QRTP workgroup what this means so that it is a consideration in their discussions.
  - e) **Q:** Is a representative from the judicial system on the QRTP workgroup?  
**A:** No, not yet. The workgroup discussed who else they wanted to bring to the table and decided that representatives from the judiciary, education, and DSS were all important.

- f) The Co-Leads reminded the workgroup that anyone should feel free to join the QRTP workgroup if they would like. To do so, please email [dcfctfamilyfirst@ct.gov](mailto:dcfctfamilyfirst@ct.gov).

## **Racial Justice and Health Equity Update**

- The Connect II CONNECTING with CLAS Workgroup
  1. There has been lots of discussion on inequality, so the Co-Leads wanted to give an update on the SOC (System of Care) CONNECT II grant.
  2. The plan for this plan is to look at how to deliver racially just services and improve CLAS standards despite cultural and linguistic differences. Aspects include:
    - a) Hiring CLAS Standards expert consultants (SEET) to work with providers and children, with a special focus on behavioral health.
    - b) Implementing a 4-Phase Model:

Agencies participate in an organizational self-assessment, review their linguistic capacity and the racial and ethnic demographics of staff and the communities they serve, and finally, the agencies develop long, intermediate, and short-term goals.
    - c) This model has touched over 60 agencies, 36 of whom have completed a Health Equity Plan. Many of those 36 did even more than the program required. They hope to reengage agencies and offer more technical assistance and support moving forward.
  3. The CONNECTING with CLAS workgroup (and the consultants) have also begun to develop regular learning collaboratives.
  4. We are executing contracts but still behind.
  5. We have hired four consultants so far and won a SAMHSA grant award.
  6. Your organizations are welcome to participate in different events. Stay tuned for more!
- Monica Rams and the Racial Justice Workgroup
  1. Monica Rams is the new Director of Multicultural Affairs! Before being promoted, Monica was a Program Supervisor in the New Haven Area Office. Monica is one of three co-chairs for the Racial Justice workgroup.
  2. The Racial Justice workgroup is a partnership between internal DCF staff and external community members. They meet monthly as a large group. There are also four subcommittees: 1) Data, 2) Service, 3) Policy, and 4) Workforce.

3. If you are interested in participating in the workgroup, please email her at MONICA.RAMS@ct.gov so that she can determine your best fit, whether it be in the statewide group or in your local office's group. She will slot you best.
4. The Co-Leads are considering having Monica come to one of these meetings as well.
5. This is also an opportunity for all of us to look at our own agencies--how are we addressing the issue of racial justice in our own offices?
6. Monica is also available to discuss how the Department's work on racial justice could be implemented in agencies.

### **How to Facilitate a Family First Conversation**

- The Family First feedback portal is now open! You can access it [here](#).
- The Department is excited about this new method of obtaining community feedback, and we are certain that we will receive lots of data from our community partners on how we can better serve children and families. In order to make use of this data, the Department will employ strategies to code the narratives and identify key themes.
- The Department's Children's Behavioral Health Plan was created using similar methodology. Based on what we know from that experience, we have come up with some suggestions for providers who want to facilitate a Family First conversation.
  1. The narratives will be coded and analyzed. We do not recommend that providers attempt to code the data themselves; we will want the coding to be consistent for all the data that we receive.
  2. When facilitating a conversation, get as much notice out to folks and try to prepare your participants for what is going to happen. Either before the meeting or at the beginning of the meeting, let participants know what to expect. It is helpful to summarize the work that has been done so far. To help with this, there is a narrative that providers can use at the beginning of their meetings.
  3. Make sure that participants feel as comfortable as possible. We have found that having DCF either out of the room or in the room but not participating helps make families feel more comfortable. The more safe they feel the environment, the more they will feel comfortable sharing.
  4. Ask the questions as they are written, then feel free to explain the question the best you can (unscripted).
  5. We recommend taking notes in a two-part format. One, have someone taking notes. This person should be writing down as much as they can and using direct quotes whenever possible. Their goal should be to get as accurate a representation of the

meeting as possible. Two, have another person summarizing people's points on flipcharts. These summaries are useful because they help to identify big themes, show participants that you are listening to them, and verify that you are understanding folks correctly. If you summarize someone's point incorrectly, they will then be able to clarify what they mean.

6. Have the detailed notes typed up to fix any errors and remember that it should be as close to a script of the meeting as is possible. If possible, we recommend bringing these notes back to the group for editing so that if there is information missing or incorrect, they can fix it. This also shows that you heard them and understood what they were saying.
  7. That "script" or transcription of the detailed notes should be what goes in the portal.
  8. We will compile the feedback from all our community partners and sift through these transcripts. Common themes will be identified and coded. For example, if only one person mentions transportation, then we know it is not a major issue, but if half of our families bring it up, then we know it needs to be addressed.
- How does the Family First process differ from the Children's Behavioral Health Plan?
    1. The above process was used to plan the Children's Behavioral Health Plan, but we anticipate there will be a bit less analysis in the Family First plan since there is a compressed timeframe.
    2. Also, CBHP had at least 30 meetings and around 350 pages of narratives on their website that show what was said.
  - Considerations from FAVOR
    1. FSM staff has facilitated community conversations with help from Yale. Beresford Wilson also recommended considering who in one's agency would be better at this. Who is the strongest at taking notes? Who is good at picking out themes? Consider the skills of your staff and try to match them with tasks that would best suit them. Beresford was also very proud of the FAVOR staff and how they informed CBHAC after Sandy Hook. This is important and without including the community, it would not have happened.
    2. Beresford also brought up folks who criticize the Department and partners for this process, as they take families' time and provide only a small stipend in return. While he understands that point, he affirmed that participation is important, and we have been doing a better job of incentivizing and compensating. This also helps families

develop leadership skills. It can be harmful in some ways (tokenizing) but it is essential to the process.

- How do you "give back" this information to the participants?
  1. Beresford explained that it is helpful to train families on data and involve them in the data definition.
  2. Tim Marshall pointed out that in this case, it might be a good idea to bring back the Prevention Plan to families. This would be a tangible final product that will go to the Governor and the Children's Bureau.
- Other discussions and questions:
  1. Beresford explained that FAVOR is not being paid for their part in facilitating these conversations. They have agreed to do annual community discussions.
  2. It can also be helpful to listen in on other conversations in the community to inform your work.
  3. Another person explained that they have used the Regional Advisory Council (RAC) to facilitate these conversations. It is a good idea to consider partnering with organizations that might help with the facilitation portion (like FAVOR). Beresford confirmed that FAVOR would be willing to help partner on this.
  4. The questions for these facilitated meetings are available online, but we understand it may be easier to have a printed off copy for in-person meetings. Parents and families also have the opportunity to use [the portal](#) individually and add input. This section of the portal is designed for one person's answers but it can also be used for groups. We also understand that the data from families and youth will be different from the facilitated discussions, but it will still be coded in a similar way.
  5. One person asked about the time frame for this portal. JoShonda explained that sooner is better so that we have time to analyze the data and incorporate it into the plan. It will be harder to plug the information into the plan, as time evolves. By the beginning of April would be a good guide. *Note: We understand that with the onset of COVID-19, large facilitated discussions may not be possible. We encourage the use of our online portal, and we will keep our partners informed of any updates regarding our Family First planning.*
  6. One person asked about language access, especially as it relates to sign language and non-English speaking families. The Department asks that you let us know what your language needs are, and we will help with specialized needs. Online, we have machine translations.

- a) One person specifically discussed the deaf and hard-of-hearing population, and they pointed out that in planning for the coronavirus, they created a visual that helped get the message across. The American School for the Deaf was helpful in partnering on this, and it was agreed that they might be a good partner for Family First work too.
7. The Co-Leads also agreed to try to work to improve online facilitation for future meetings.

### **Next Meeting**

- The next meeting will be on March 10, and it will be an online meeting via Microsoft Teams from 12 - 1 pm.