

CT Family First - Governance Committee

January 5, 2021 | 8:30 - 10:30 am

Microsoft Teams Meeting

Welcome and Introductions

- Ken Mysogland and JoShonda Guerrier wished everyone a Happy New Year and thanked everyone for being at this the third Governance meeting.
- The focus for today's meeting will be a presentation by Elisabeth Cannata and Elizabeth Duryea, co-chairs of the Programs and Service Array Workgroup (PSAWG), with the initial recommendations for models to be considered for the prevention plan.

Opening Remarks and Level Setting:

- Commissioner Vannessa Dorantes opened the meeting with a few remarks and level setting.
- We have lots of work to do in 2021, particularly on the other side of the pandemic. Just to refresh, the Governance Committee Family First is to provide guidance for the recommendation and the discussion during which the chairs of our subcommittees will bring forth all the commentary that was synthesized over the last several months. We took a hiatus at the height of the pandemic, but we are on target and the timelines related to the submission of our prevention plan will be shared with you.
- The Governance Committee is comprised of stakeholders across the state, including other leaders of other agencies and other stakeholders who have a vested interest in the work of the Department and what the prevention plan will mean for service delivery to Connecticut's children. Your voice is very important. We want to hear your input and your insight.
- This is our third meeting. The first Governance meeting helped us nail down the definition of what candidacy would mean for us, the second was a review of kinship, and today's will be about programs and service array. The process is designed so that Governance Committee offers recommendations to me, the Commissioner, who will ultimately recommend the prevention plan that will be submitted to the Governor.
- Over 250 stakeholder voices have been participating in the subcommittees. They are chaired by an internal senior leader from DCF, as well as a senior leader from an external entity. And today we've got a powerhouse duo, "the Eliz(s)abeths" as we call them have been leading our program and service array.
- The Governance Committee is heavily populated with thought partners from across the state. It is important for me to hear your reflections how they have summarized the information of the workgroup so I can ultimately make some decisions.
- At the very end, the Governance Committee will have an opportunity to take a look at the prevention plan before it is submitted and make final comments.

Presentation: Elizabeth Duryea and Elisabeth Cannata (JoShonda Guerrier monitored the CHAT)

Overview: The co-chairs presented the initial recommendations in slides that provided an overview of the selection process to identify programs and services to be considered for inclusion in CT's prevention plan.

- The Candidacy Workgroup gave us their recommended candidacy groups for specific attention in CT's prevention plan - six main categories, with the last one further broken down into subsets. We want to make sure we are matching the program to the specific need of the candidacy group and considering the desired outcome that we would want a program or service to deliver if we were to match it to those candidacy groups.
- Illustrative slide examples showed how we identified needs and desired outcomes for each candidacy group and looked at where specific programs aligned or did not align with those needs. We also intentionally applied a racial justice lens, noting that selection of evidence-based programs for families and communities of color should be informed by whether there is a research base for a program with those communities. We reviewed the workgroup process for looking at each and every service. An initial threshold for prioritizing potential programs for recommendation, was consideration of programs that were identified as meeting needs of multiple candidacy groups.
- Narrowed Focus to FFPSA Eligible EBPs - Chapin Hall Team helped narrow the focus to models included in the clearinghouse (Tier 1, well supported and Tier 2, supported or promising). With the limitations of what is in the clearinghouse, there are a lot of gaps.
- There would need to be some consideration for any Tier 2 models that we put forward as recommendations, as additional support may be needed for an independent systematic review.
- The Tier 3 models are models where there is a body of research support, and where there may be a large service footprint in CT, but not yet reviewed by the FFPSA Clearinghouse. There may be some programs in this group that warrant consideration that we want to put on the radar for governance. Connecticut has a very strong network of models that have some level of empirical support that are recognized in other clearinghouses such as the California Evidence-Based Clearinghouse. Some may be likely candidates for approval by the Family First clearinghouse. We want to prioritize certain Tier 3 programs we might want to give further consideration, particularly where these Tier 3 models meet identified needs of the candidacy groups.
- We might want to collaborate with Fiscal to consider how we ensure that there is a very robust system that meets the needs and promotes the desired outcomes for the identified candidacy groups that includes more grassroots and community-focused services.
- The go-to resource for child welfare before this legislation was the California Clearinghouse. The Title IV-E Clearinghouse for Family First uses different criteria than

the California Clearinghouse to determine whether a model is well-supported, supported, or a promising practice. There are some models that are recognized as well-supported on the California Clearinghouse that turn out to have different ratings on the Title IV-E (FFPSA) Clearinghouse. That is important because we could have some models with a very strong research basis of support but not necessarily have that classification in the FFPSA system. That is the distinction that we have to keep in mind, as data collection and program review obligations on us will be higher if we choose a Tier 2 service.

Feedback, Discussion and Questions

- Question in the CHAT: Are the criteria different between the "California Clearinghouse" (CEBC) and the FFPSA Clearinghouse? Elisabeth Cannata - Yes, it's not necessarily more rigorous review as much as it is different criteria, different types of research considered for review, and a different timeframe for the particular studies that they're willing to review under the FFPSA clearinghouse. The other important distinction is that the process of review is still really in its infancy stages on the FFPSA Clearinghouse, in that not that many models have been reviewed so far. There are models that are not yet on the FFPSA Clearinghouse simply because they have not yet been reviewed. Therein lies one of the challenges. There is much more on the California clearinghouse, but many models have not yet been reviewed under FFPSA.

Fit and Feasibility Matrix (Please refer to slides)

- To provide a systematic way to capture how we prioritized our initial recommendations, the PSAWG, with TA from Chapin Hall, created a "fit and feasibility" classification system. We wanted to prioritize to those models that aligned with three or more candidacy populations, higher classification according to FFPSA research criteria, had evidence of research with communities of color and were there was already a sizable footprint for the model in CT.
- This framework was used to prioritize the Tier 1 and Tier 2 models presented in the slides with the fit/feasibility criteria.

Discussion and Questions

- **Q:** Do the models on the clearinghouse include an assessment of their effectiveness with persons of color?
A: So far, all the models that we have in the Clearinghouse have evidence of research with communities of color; however, that does not necessarily mean that those studies looked at the differences in outcomes between groups because their sample sizes may not have been large enough. As we move forward, we may want to be purposeful in looking at our Connecticut data.

- Q:** Has Connecticut started to look at the stimulus bill that recently passed where new provisions and waiver opportunities may influence our recommendations?

A: Chapin Hall clarified that the stimulus bill is not related to FFPSA. There is not a waiver of the evidence standard, but there is an enhanced federal reimbursement for the period of the pandemic and that requires that Connecticut has an approved plan to be able to take advantage of that. As of right now, it does not appear that there is a change to the evidence requirements for that prevention side.
- Q:** Do these initial recommendations include any kind of fiscal analysis and feasibility for those that don't exist in Connecticut now?

A: No, because this workgroup was encouraged to not consider fiscal. We have had several consultations with the fiscal workgroup co-chairs throughout this process to ensure we are including the appropriate information to assist fiscal analysis. In moving the initial recommended models for further consideration on to the fiscal workgroup, we want to make sure that we are not including a model just because it is on the Clearinghouse but because we see it yielding good outcomes for families and aligning with our values for our prevention continuum here in Connecticut. Our fit and feasibility selection criteria gave a systematic approach to prioritization for Tier 1 and Tier 2 models. We have some follow-up recommendations that we will propose to Governance today to continue the analysis collaboratively as Fiscal begins their analysis.
- Q:** Is there an age continuum that you were also considering in terms of the fit?

A: Yes, we will present the age range of each model in a subsequent slide.
- Comment:** Connecticut has been very clear that it is creating a larger prevention continuum, of which Family First is a part. Some of these really great programs will be part of the larger plan. Taking the time to do a detailed review of each model will help the larger plan as well, and we must ask ourselves, who does it serve? Does it work? Do we already have it?
- PSAWG co-chair Elisabeth Cannata comment:** Where possible, we may want to also utilize Connecticut data - related to outcomes by race and ethnicity where there may be more detail (and specific to Connecticut) than the evidence that we have as presented on the clearinghouse.

EBPs Recommended for further Consideration for Connecticut's Prevention Plan

- The co-leads reviewed the Tier 1 and 2 services the workgroup is recommending for further consideration:

 - High fit/feasibility: Functional Family Therapy (FFT), Multisystemic Therapy (MST), Parents as Teachers (PAT), Nurse Family Partnership (NFP), Parent Child Interaction Therapy (PCIT), and Motivational Interviewing (MI).

- High fit/low feasibility: Trauma-Focused Cognitive Behavioral Therapy (TF-CBT), Brief Strategic Family Therapy (BSFT), Multi-Dimensional Family Therapy (MDFT), Healthy Families America (HFA), Triple P, and Wraparound.
- Low fit/high feasibility: None
- Low fit/low feasibility: Methadone Maintenance Therapy (MMT)
- PSAWG co-chairs pointed out that BSTF and HFA are not widely available in CT.
- The co-chairs discussed aspects of models that may overlap
 - **Age:** There is overlap for both early childhood programs and adolescent models. Seeing on this age continuum where there are emerging gaps can also direct further analysis (e.g. older adolescents and young adults 18-21 years old). Where these gaps exist for our CG populations will require consideration to other models that may be outside of FFPSA clearinghouse.
 - **Service Type:** Family First focuses on improving mental health for parents and children, reducing substance use for parents and children, and in-home parenting. These models overlap as they address these issues. The Clearinghouse does not explicitly reference gatekeeping criteria.

Questions:

- **Q:** Can we broaden MMT to MOUD to include buprenorphine?
A: The review conducted by FFPSA clearinghouse was specifically of Methadone Maintenance, so we would not be able to broaden it.
- **Q:** Does the in-home parenting program service address needs for both Custodial and Non-custodial parents?
A: Many of the models would consider caregivers other than bio parents as eligible, but we do not know whether the Clearinghouse studies have considered the outcomes for different types of caregivers. We have invested so much for dads and non-custodial parents, so we recognize the fiscal considerations. We want to think about how to make the most comprehensive prevention continuum for our families, but the Family First Clearinghouse does give us some limited restricted Tier 1 and Tier 2 models that we are hoping will get a little less restrictive and also allow for us to consider the racial justice lens that we know is part of our statutory mandate in Connecticut. As a system, we want to prioritize intention with our fatherhood work
- **Q:** Are there any EBPs in the pipeline for clearinghouse approval that we may want to have in our plan?
A: We were excited to find out the ACRA model had been approved since our initial review of Tier 1 and 2 models, as well as a few others that we will turn to in short order. Miranda Lynch (Chapin Hall consultant) explained that we stay updated on the models that are coming up for review; a number of them that have systematic reviews from other

states and were in the pipeline, so we elevated those in the process so that the workgroup deliberations could begin sooner.

- **Q:** What consideration is there being given to model adaptations? For example, in CT there are several adaptations of Multisystemic Therapy (MST), such as MST-TAY; MST-CAN; and MST-EA. Also, are the models you looked at differentiated by racial and ethnic groups and by gender?

A: Currently, the only model approved in the Clearinghouse is standard MST, therefore MST model adaptations would not necessarily be eligible under FFPSA until those adaptations are specifically reviewed and approved. MST-CAN was reviewed and did not get approved on the Clearinghouse but there may be a re-review of that.

Regarding the 2nd question about the race, ethnicity, and gender of the populations included in the research, we looked at both information on FFPSA Clearinghouse and the California Clearinghouse to review summary information about what demographic distribution of subjects in the studies entailed and what percentage might have been for different race/ethnicity in the studies; all of the models had populations that were studied that included diverse populations, but we do not know the extent of information about diversity considerations within that research.

Remaining Gaps:

- From the review of Tier 1 and 2 models, the following gaps have emerged:
 - Housing for families
 - Parents/caregivers and/or children with intellectual/developmental disabilities
 - Parents/caregivers with mental health needs
 - IPV - Intimate Partner Violence
 - Children with incarcerated parents
 - Mental health needs of very young children

Follow up Questions:

- **Q:** Many programs are not accessible to families who are non-custodial and/or when a child/youth is in a hospital/congregate care setting. Often this is when the families need the intervention and support to streamline reunification/placement in home. Has there been any consideration as to this being a gap to services available? Are there considerations that we need to pay attention to because of the present pandemic situation?

A: There are absolutely considerations that we are going to have to grapple due to COVID. We recognize that the plan has to address the underlying basic needs for families, like housing, food, access to rent support, separate and apart from services prioritized under the Families First umbrella. A core value for Connecticut is to keep kids with families and limit the use of congregate and non-relative placement wherever possible. There is a separate work group that is looking at the residential services criteria

under Title IV-E so that we understand what kind of programs we need to shorten the stay and strengthen the capacity to return home. Some of the Tier 3 models that we have are also designed to help with that transition. We will also have to consider other Connecticut initiatives like the Children's Behavioral Health plan, and assess where that work can complement our FFPSA plan, address gaps, etc.

- This is our first submission. It doesn't have to be perfect.
- **Q:** How are we taking funding considerations into account? We know that there is IV-E funding, but there are a lot of other federal funding streams that are brought into Connecticut and not just by DCF, but by our other human service agencies. Some of the work that we are potentially seeking to elevate would require a cross section of experts in other agencies to guide what is currently funded through federal funding. We know that our review with program and service array will be ongoing as new models are added to the clearinghouse.

Potential Strategies and Implications to Address Gaps

- The co-leads recommend convening a time-limited workgroup that contains folks from Fiscal, PSAWG, and Candidacy. They would be able to fine-tune the services based on fiscal and programmatic considerations while making sure we stay true to the original intent of Candidacy.
- We are very clearly recommending that further consideration be given to Tier 3 and Tier 4 services. While they may not ultimately be approved in the Clearinghouse given a lack of federally recognized empirical support, we recognize that those may require an independent systemic review and Governance would have to support that.
- Today is the initial set of these recommendations limited to Tier 1 and Tier 2 models. Going forward, there will remain opportunities for us to further review new models and those models in Tier 3 or Tier 4 that make sense, taking into account funding levers across state agencies.

Wrap Up

- PSAWG is recommending moving 13 models forward for further consideration and consultation with the other workgroups. This proposal includes establishing a time-limited interim workgroup that has cross representation of the Candidacy and Fiscal workgroups, and a few members with subject matter expertise in the areas where there may be overlap across models. The co-chairs emphasized that this is an important next step to help determine whether there is real value in bringing in a new model or whether we should consolidate programming to an FFPSA approved model, and where there may be fiscal considerations that could help make these decisions.

- One person said that it is really important to think about communication strategies. Advocates must come forward. This plan is not going to address everything, but we must help people understand what the true goals are and the values and beliefs underneath it; do not get caught up in the limitations that are in front of us.
- Jodi Hill-Lilly added that Elizabeth is charged with seeing a lot of the service array in Connecticut and we are continuing that work. That work will not stop just because some of those services are not in the Clearinghouse. We obviously want to maximize the opportunity IV-E reimbursement. but we still have work to do, and there are significant gaps that we need to continue to address.
- Michael Williams addressed the governing board members and said that what is being recommended is necessary work that represents the heart and soul of our submission. We have got to get that right while understanding our own internal deadline. We missed out on October last year, which is when we thought we would have submitted, but COVID changed all that. We want to get it up there as soon as we possibly can. He would ask Governance members to give consensus recommendations going forward, unless there is anybody who objects to these alternative views, please make those known.
- Elizabeth Duryea emphasized that the process was a big part of what was highlighted here. As we broaden our understanding of the fiscal considerations and how we can approach this in an intentional way and leverage the fiscal opportunities across state agencies without undermining or dismantling services that are either not approved now or potentially not likely to be approved at a future point. If we can sort of carry this process through with some of the insights and expertise with fiscal that will help us to further refine this process and speed this up. The curse and the blessing of having a large workgroup of a hundred plus people is that it takes time for us to find our rhythm. We have found our rhythm despite COVID. We recognize there is a lot of work ahead and that our workgroup has had good success in engaging smaller subgroups within our workgroup to do these deeper dives. The fiscal considerations are legitimately something that we need to understand better, along with the efficacy by race, ethnicity, and gender.

Next Steps

- JoShonda Guerrier explained that the Eliz(s)abeths will continue leading PSAWG while we bring in Alison and Cindy for the fiscal analysis. Ken and JoShonda will continue to guide the co-leads.
- We are working against the April deadline. We will balance efficiency and quality, and when we have a deliverable, we will present that as the agenda topic for this group.
- JoShonda highlighted the motion from the Deputy Commissioner to move forward with the approach that has been conveyed. Additionally, she felt that based on the positive comments in the chat that folks agreed with PSAWG's process and that they thoroughly

reviewed Connecticut's service continuum and the Clearinghouse programs. Further, PSAWG has kept race and ethnicity at the forefront throughout.

- Commissioner Dorantes thanked everyone for their thoughtful consideration, noting that there is still a lot of information to synthesize and follow-up to consider. This Governance Committee includes big thought leaders in Connecticut who will speak up and will advise her beyond Family First to make Connecticut the strongest place for children's behavioral health. Having said that, the goal of the Governance Committee is to report the Connecticut Prevention Plan in a way that reflects what we need in this particular arena, understanding that larger circle that encapsulates FFPSA is really the true full picture of what we have.
- Commissioner Dorantes also reiterated what folks are saying in terms of the strength of Connecticut's service array and strength of all of the models that we have here over the next couple of months. As things begin to populate the Clearinghouse, and as the administration changes, there will be opportunity for amending our plan and our final version. We actually had an opportunity to participate with about eight other jurisdictions to have a conversation with the Biden-Harris transition team. Many of them participated in the crafting of FFPSA at the tail end of the Obama administration. She is hopeful that more flexibility will be afforded to states, but we cannot speak to that until we have more federal input. She thanked Chapin Hall and Casey Family Programs for their consultation and input with this.
- The next Governance Committee meeting will be on **Tuesday, February 2, 2021 from 8:30 - 10:30 am.**