CT Family First - Programs & Service Array Workgroup

Initial Recommendations: Tier 1 & 2 Models

JANUARY 5, 2021 CO-CHAIRS: ELISABETH CANNATA & ELIZABETH DURYEA

PSAWG Governance Meeting Agenda: 1/5/2021

- 1. Overview of Workgroup & Deliverables
- 2. Our Process: Moving from CT Continuum to Tier 1 & 2 Recommendations
- 3. Initial Recommendations: Tier 1 & 2 (as of 12/18/2020)
- 4. Identified Gaps
- 5. Propose/Discuss Next Steps

Desired Results for Today:

- 1. Review and validate the PSAWG program/service review and recommendation process
- 2. Guidance on how to proceed in addressing remaining candidacy population gaps
- 3. Discuss fluidity of Title IV-E Clearinghouse and ongoing EBP review

PSAWG Overview

Kick-off session: December 13, 2019

2020 Work to Date:

- Pre-COVID: Dec 2019 March 2020 6 meetings on bi-weekly basis @ 3 hours each
- Post-COVID: Oct Dec 2020 6 meetings on bi-weekly basis @ 90 minutes each

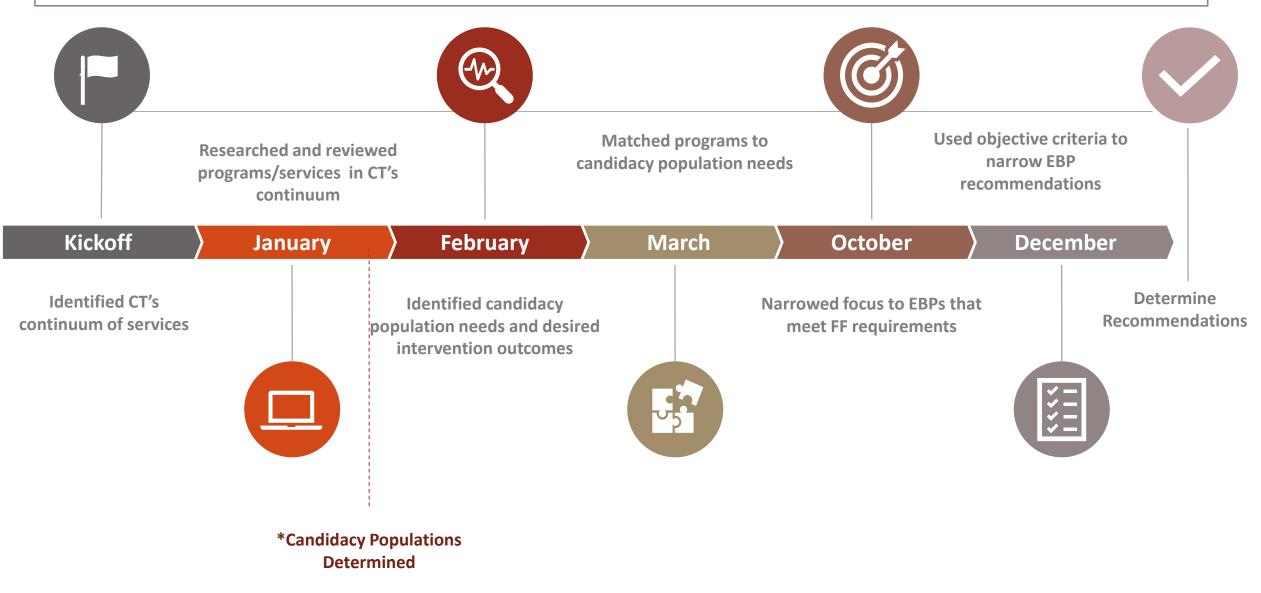
Membership – representing a cross-section of partners including providers, model developers, advocates, other state agencies and consumers

- Pre-COVID: 70+ members
- Post-COVID: 100+ with many new members after September relaunch
- October 15th: Orientations session for new members

First deliverable: Initial candidacy plan program/service recommendations

- Original target date April 2020
- Revised target date December 2020

Workgroup Timeline and Process



Research and Review

Information gathered on each program/service identified in CT continuum :

- Model
- Target Population
- Level of Empirical Support
- Research-Supported Outcomes
- Provider Qualifications
- Training and Supervision
- Service Location

CANDIDACY DEFINITIONS: APPROVED JAN 2020

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 aging out of DCF foster care

Families with certain characteristics who are 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

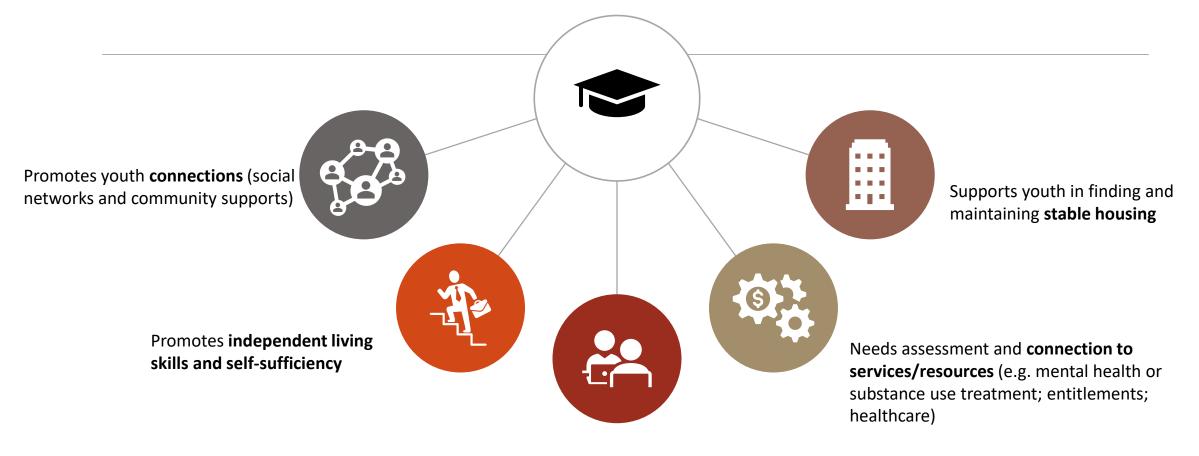
Families experiencing interpersonal violence

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 parenting Infants born substance-exposed (as defined by the state CAPTA notification protocol)

Identify Candidacy Needs and Desired Intervention Outcomes

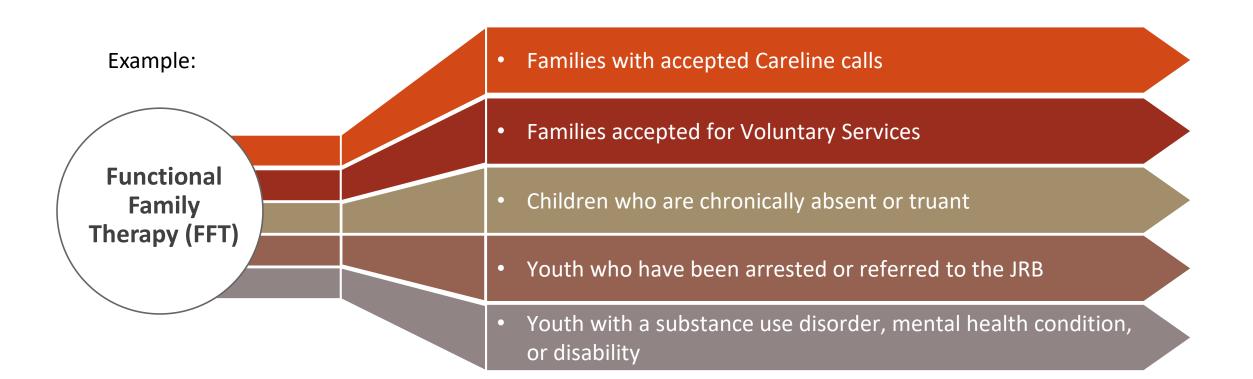
Example Candidacy Population: Youth exiting to permanency or aging out



Assists with **long-term planning** (e.g. education, employment)



Match Candidacy Populations to EBPs





Narrowed Focus to FFPSA-Eligible EBPs

Evidence Tiers	Prevention Plan CQI/Evaluation Requirement	# of EBPs Reviewed
Tier 1: Rating of "Well Supported" on FFPSA title IV-E Clearinghouse	CQI with Evaluation Waiver	8
Tier 2 : Rating of "Supported" or "Promising" on title IV-E Clearinghouse or has an Independent Systematic Review	Full Evaluation	6
Tier 3: Rated on CEBC or has strong body of evidence, but is not on title IV-E Clearinghouse	Independent Systematic Review + Full Evaluation	73
Tier 4: Effective services, but not on CEBC or title IV-E Clearinghouse	N/A (Likely not viable for Plan inclusion)	

Selection Criteria to Refine Initial EBP Recommendations

Fit:

- Prioritized EBPs that met 3 or more candidacy populations
- Evidence of research for EBPs with communities of color, as evidenced by studies reviewed on the CEBC or the title IV-E Clearinghouse*

Feasibility:

- The level of evidence, as determined by the title IV-E Clearinghouse (only Tier 1 and Tier 2 considered at this time).
- Availability in Connecticut, as defined by existing within 3 or more regions.

*Recognizing there may be other sources of research for consideration



Fit & Feasibility Matrix

Feasibility	High Feasibility Low Fit	High Feasibility High Fit	 High Fit/Feasibility: EBPs with all 4 criteria met (<i>likely recommended</i>) High Fit/Low Feasibility: EBPs that met both fit criteria
	Low Feasibility Low Fit	Low Feasibility High Fit	and 1 feasibility criterion (recommendation considered) High Feasibility/Low Fit and Low Fit: •EBPs that met fewer than 3 candidacy populations or are not researched with communities of color: (likely excluded)

Fit

Discussion

Are there any questions or feedback about this process?

EBPs Recommended for Further Consideration for CT Prevention Plan

High Feasibility/Low Fit: •None	 High Fit/Feasibility: Functional Family Therapy (FFT): Multisystemic Therapy (MST): Parents as Teachers (PAT): Nurse Family Partnership (NFP): Parent Child Interaction Therapy (PCIT): Motivational Interviewing (MI)
Low Fit/Low Feasibility: •Methadone Maintenance Therapy (MMT)	 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 Wraparound

Criteria Summary for Initial EBP Recommendations for Further Consideration

All recommended EBPs were researched with communities of color

Tier 1 –

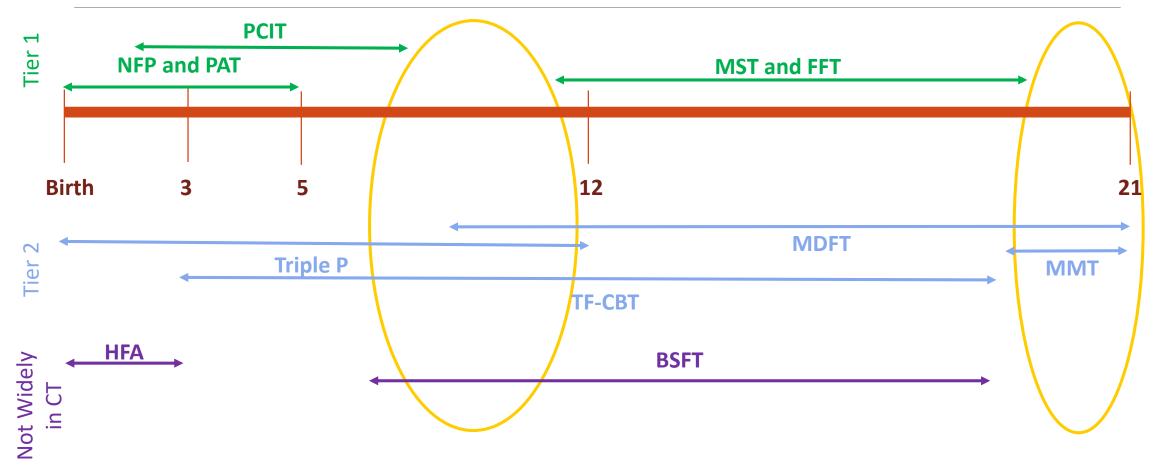
Functional Family Therapy (FFT) Motivational Interviewing (MI) Multi-systemic Therapy (MST) Nurse Family Partnership (NFP) Parents As Teachers (PAT) Parent-Child Interaction Therapy (PCIT) Brief Strategic Family Therapy (BSFT) Healthy Families America (HFA)

Tier 2 –

Methadone Maintenance Therapy (MMT) Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) Triple P Multi Dimensional Family Therapy (MDFT) Wraparound

Not Yet Available in CT	Some Availability in CT	Widely Available in CT
Brief Strategic Family Therapy	Healthy Families America	All Other Tier 1 and Tier 2 Recommended EBPs

Age Continuum of Recommended EBPs



Service Type of Recommended EBPs

Mental Health Services

- Trauma-Focused Cognitive Behavioral Therapy (TF-CBT)
- Triple P
- Wraparound
- Functional Family Therapy (FFT)
- Parent-Child Interaction Therapy (PCIT)

Substance Use Programs

- Methadone Maintenance Therapy (MMT)
- Motivational Interviewing

In-Home Parenting Programs

- Healthy Families America (HFA)
- Nurse Family Partnership (NFP)
- Parents as Teachers (PAT)

- Multi-systemic Therapy (MST)
 - Multi Dimensional Family Therapy (MDFT)
 - Brief Strategic Family Therapy (BSFT)

Discussion

Are there any questions about the EBPs the workgroup put forward?

Remaining Gaps

From PSAWG Phase 1 review, here are identified where Tier 1 & 2 models do not address candidacy needs:

- Housing
- Caregivers and/or children with Intellectual/developmental disabilities
- Parents or caregivers with mental health disorders
- Parents and caregiver substance use disorders
- Families with IPV
- Children with incarcerated parents
- Mental health needs of very young children

Potential Strategies to Address Gaps

- Review new and future models on Title IV-E Clearinghouse
- Convene small, time-limited workgroup to review areas of overlap and gatekeeping criteria for Tier 1 & 2 model recommendations
- Consider Tier 3 services
 - Require Independent Systematic Review before submission of the Prevention Plan
- Consider Tier 4 services
 - Require resources outside of Family First
- Strategies to guide planning for identified gaps
 - Existing initiatives or partnerships

Recommendation and Discussion

The Programs and Service Array Work Group proceeds in its effort to identify services to meet the needs of candidacy groups.