

CT Family First - Programs & Service Array Workgroup

FEBRUARY 25, 2021

CO-CHAIRS: ELISABETH CANNATA & ELIZABETH DURYEA

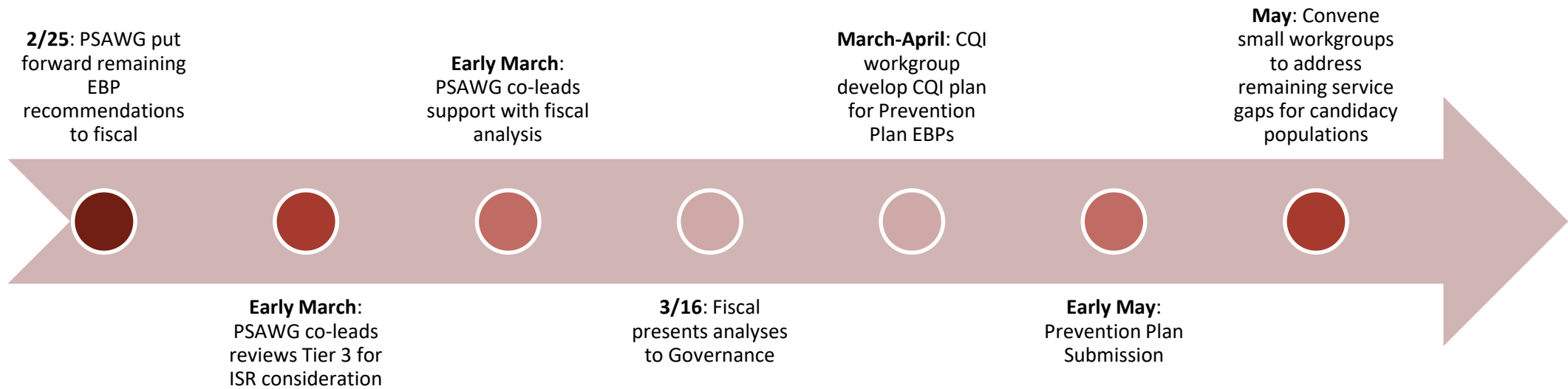
PSAWG Meeting Agenda: 2/25/2021

1. Welcome
2. Desired results
3. FFPSA workgroup updates & timeline of remaining activities
4. Review of additional Tier 2 models
 - Fit/Feasibility exercise to submit to Fiscal Workgroup
5. Proposed approach for Tier 3 models
6. Next Steps

Desired Results for Today:

1. Review Tier 2 models for fit/feasibility to assess additions to our initial recommendations and work ahead with Fiscal Workgroup
2. Discuss Tier 3 review process
3. Discuss next steps pending Governance Meeting on 3/2/2021 and 3/16/2021

2021 Timeline Forward





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	17*
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 (Tier 1 & 2 models)

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*

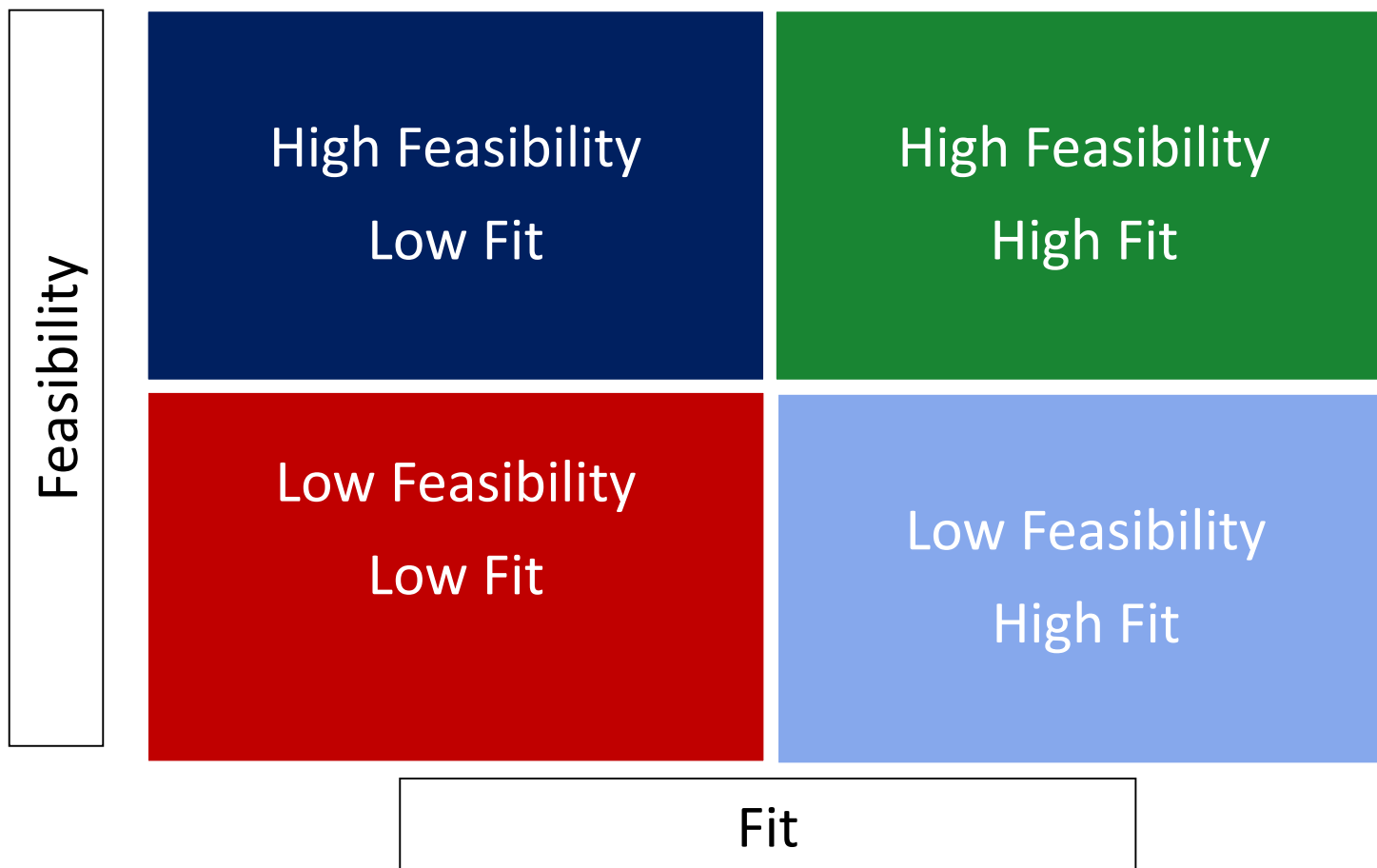
Feasibility:

- 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



High Fit/Feasibility:

- EBPs with all 4 criteria met (*likely recommended*)

High Fit/Low Feasibility:

- EBPs that met both fit criteria 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*)



FFPSA Clearinghouse – What's New?

High Feasibility/Low Fit:

High Fit/Feasibility:

Low Fit/Low Feasibility:

- Incredible Years – School Age Basic Program
- Incredible Years – Toddler Basic Program
- Interpersonal Psychotherapy
- Iowa Parent Partner Approach

High Fit/Low Feasibility:

- Adolescent Community Reinforcement Approach (ACR-A)
- Child-Parent Psychotherapy
- Intercept
- SafeCare
- Sobriety Treatment and Recovery Teams
- TRBI 101
- Trust-Based Relational Intervention – Caregiver Training

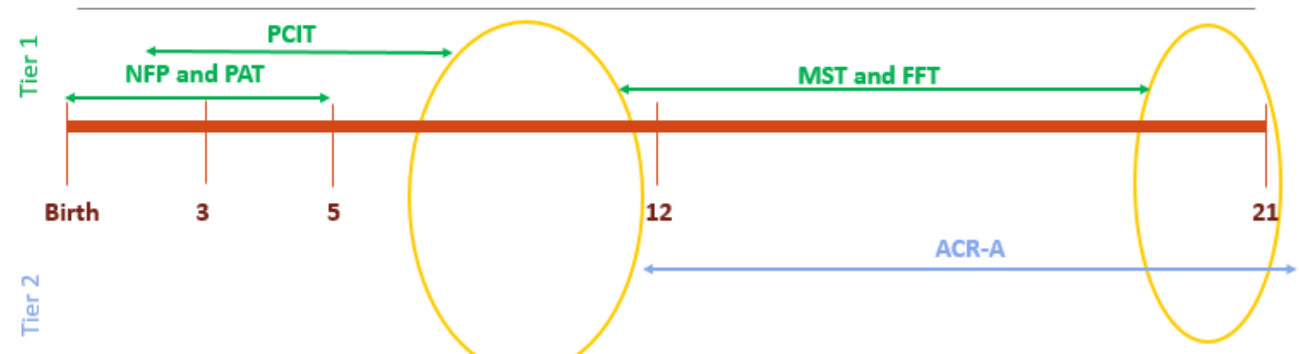
Adolescent Community Reinforcement Approach

Criteria:

- Met 5 candidacy populations
 - Families accepted for voluntary services
 - Youth exiting to permanency or aging out of foster care
 - Youth chronically absent or truant from school
 - Youth at risk for JJ involvement/JRB referred/arrested
 - Youth with substance use disorder
- Tier 2**
 - Researched with communities of color
 - Widely available in CT

Gaps to Fill:

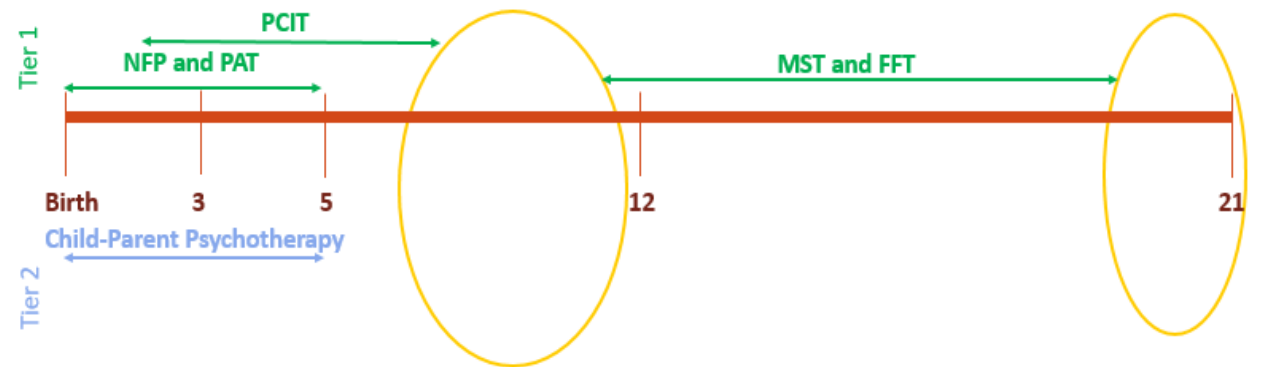
- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, ACR-A serves youth 12-24



Child-Parent Psychotherapy

Criteria:

- Met 4-5 candidacy populations
 - Families with accepted Careline calls
 - Pregnant and parenting youth in foster care
 - Siblings of youth in foster care
 - Youth chronically absent or truant from school
 - Children of incarcerated parents (parents caring for children)*
 - Children with a mental health condition that impacts parenting
- Tier 2**
 - Researched with communities of color
 - Widely available in CT



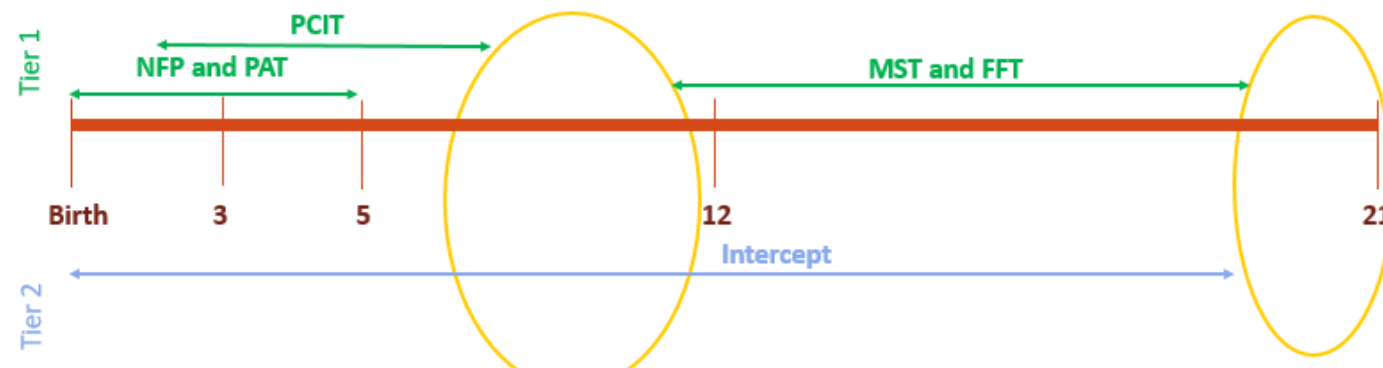
Gaps to Fill:

- Addresses the mental health needs of very young children
- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, Child-Parent Psychotherapy serves youth 0-5

Intercept

Criteria:

- Met 7 candidacy populations
 - Families with accepted Careline calls
 - Siblings of youth in foster care
 - Pregnant and parenting youth in foster care
 - Youth chronically absent or truant from school
 - Youth at risk for JJ involvement/JRB referred/arrest
 - Caregiver with mental health condition that impacts parenting
 - Children with a mental health condition
- Tier 2**
 - Researched with communities of color
 - Not widely available in CT***



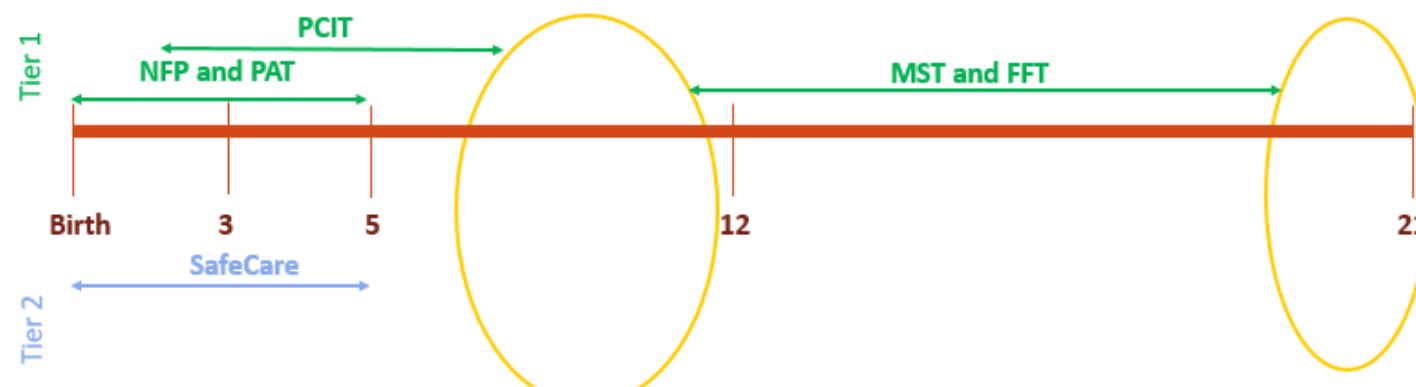
Gaps to Fill:

- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs Intercept serves youth 0-18

SafeCare

Criteria:

- Met 3 candidacy populations
 - Families with accepted Careline calls
 - Siblings of youth in foster care
 - Pregnant and parenting youth in foster care
- **Tier 2**
- Researched with communities of color
- ***Not widely available in CT***



Gaps to Fill:

- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, SafeCare serves youth 0-5

Sobriety Treatment and Recovery Teams

High Feasibility/Low Fit

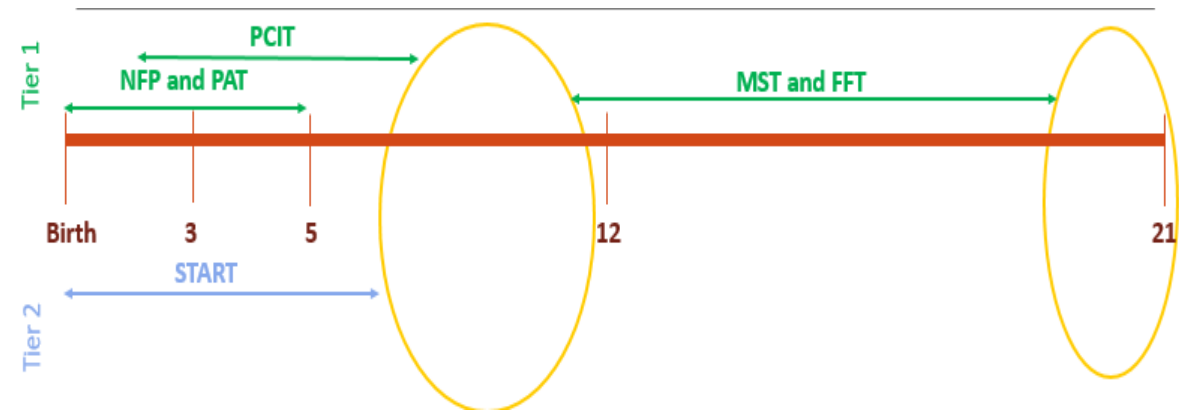
START

Criteria:

- Met 4-6 candidacy populations
 - Families with accepted Careline calls
 - Pregnant and parenting youth in foster care
 - Caregivers with substance use disorder that impacts parenting
 - Substance exposed infants as defined by state CAPTA protocol
- **Tier 2**
- Researched with communities of color
- ***Not widely available in CT***

Gaps to Fill:

- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, START serves families with at least one child under 6



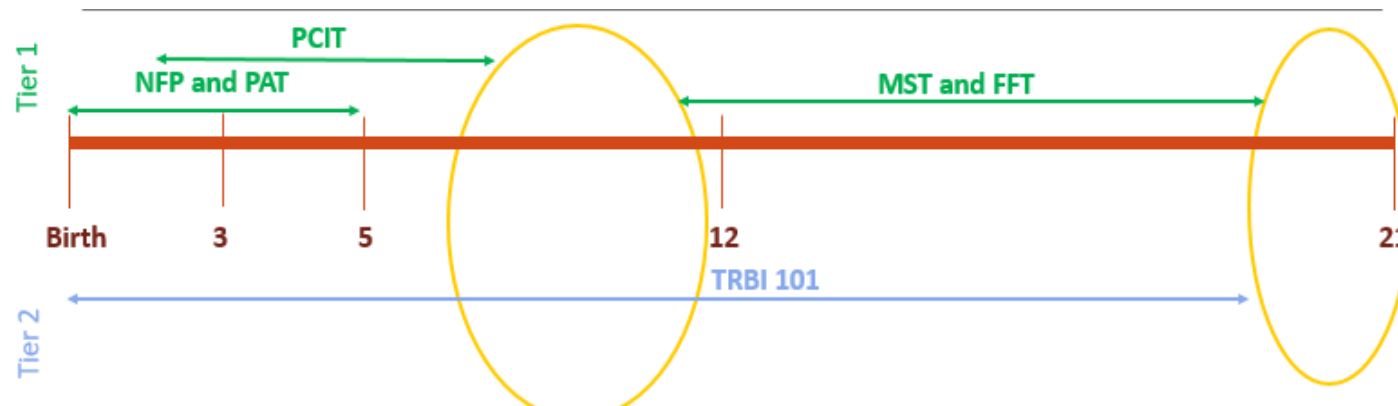
TRBI 101

Criteria:

- Met 3 candidacy populations
 - Families with accepted Careline calls
 - Pregnant and parenting youth in foster care
 - Youth chronically absent or truant from school
- **Tier 2**
- Researched with communities of color
- ***Not widely available in CT***

Gaps to Fill:

- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, TRBI 101 serves youth 0-17



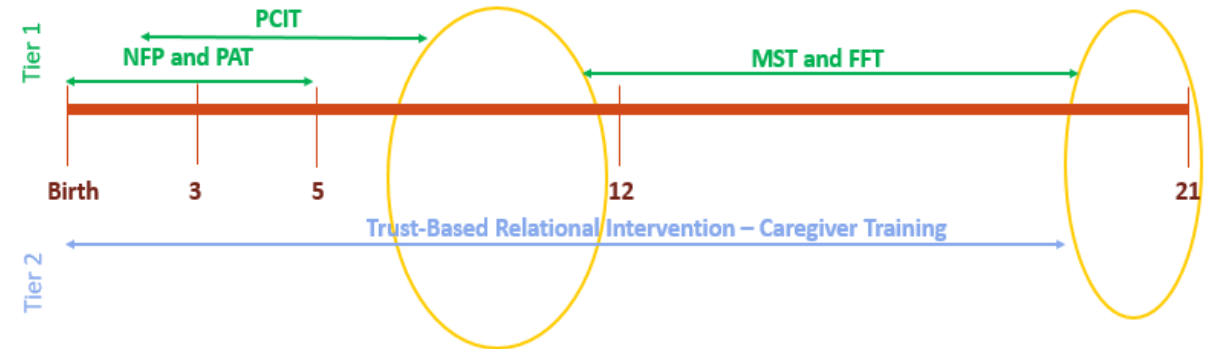
Trust-Based Relational Intervention – Caregiver Training

Criteria:

- Met 2-3 candidacy populations
 - Families with accepted Careline calls
 - Siblings of youth in foster care
 - Children of incarcerated parents (parents caring for children)
- **Tier 2**
- Some/limited evidence of research with communities of color
 - Only one study considered on the clearinghouse, small sample size with limited evidence
- ***Not widely available in CT***

Gaps to Fill:

- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, Trust-Based Relational Intervention – Caregiver Training serves youth 0-17



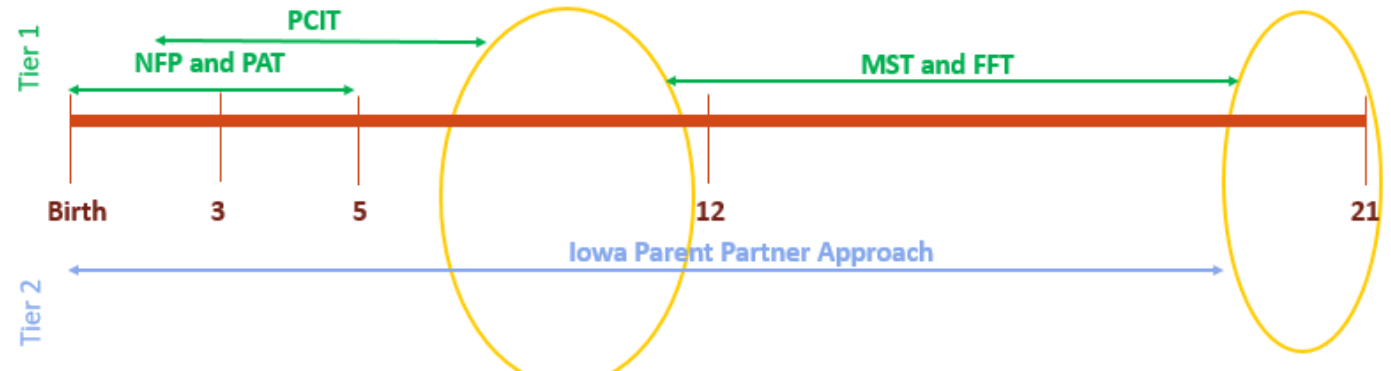
Iowa Parent Partner Approach

Criteria:

- Met 0 candidacy populations
- **Tier 2**
- Researched with communities of color
- ***Not widely available in CT***

Gaps to Fill:

- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, Iowa Parent Partner Approach serves youth 0-17



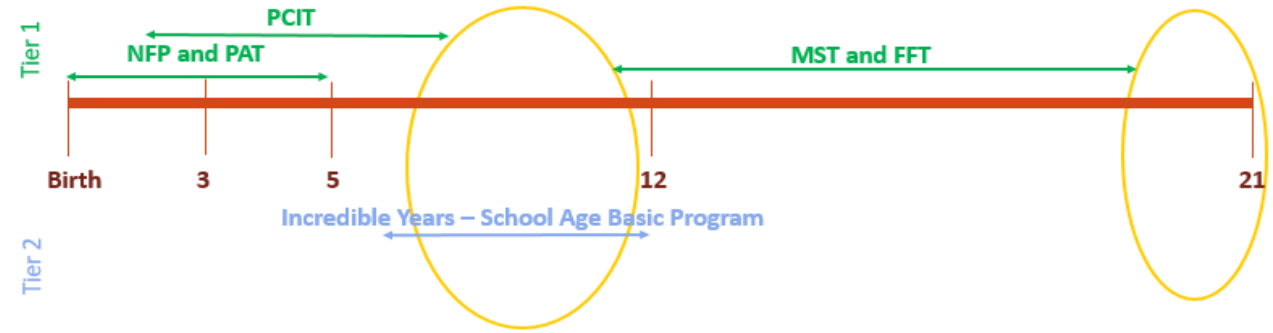
Incredible Years – School Age Basic Program

Low Feasibility/Low Fit

Incredible Years – School Age Basic Program

Criteria:

- Met 3 candidacy populations
 - Families with accepted Careline calls
 - Siblings of children in foster care
 - Youth chronically absent or truant from school
- **Tier 2**
- **Unclear whether researched with communities of color**
- **Not widely available in CT**



Gaps to Fill:

- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, Incredible Years – School Age Basic Program serves youth 6-12

Incredible Years – Toddler Basic Program

Low Feasibility/Low Fit

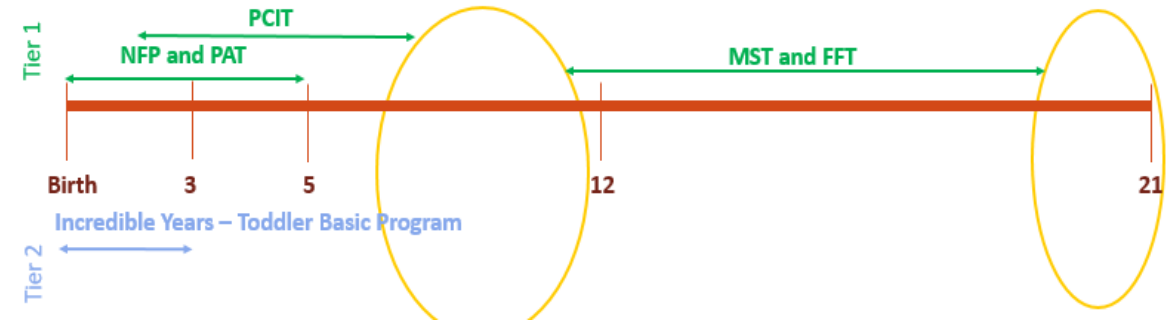
Incredible Years – Toddler Basic Programs

Criteria:

- Met 3-4 candidacy populations
 - Families with accepted Careline calls
 - Siblings of children in foster care
 - Youth chronically absent or truant from school
 - *Children of incarcerated parents (parents caring for children)*
- **Tier 2**
- ***Unclear whether researched with communities of color***
- ***Not widely available in CT***

Gaps to Fill:

- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, Incredible Years – Toddler Basic Program serves parents of youth 1-3



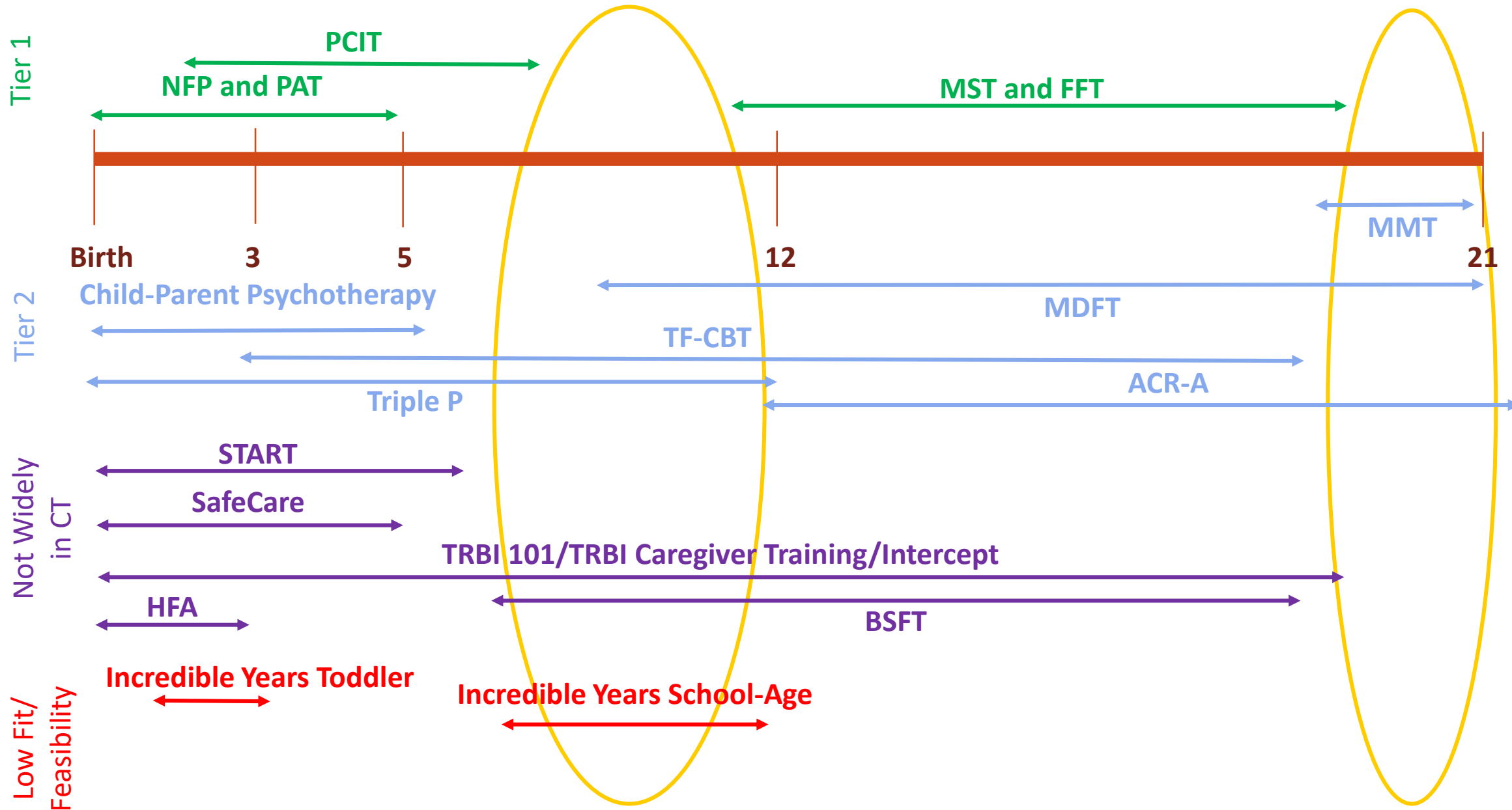
Interpersonal Psychotherapy

Criteria:

- Met 2 candidacy populations
 - Families with accepted Careline calls
 - Caregivers with mental health condition that impacts parenting
- **Tier 2**
- Researched with communities of color
- ***Not widely available in CT***

Gaps to Fill:

- **Outcomes are for parent/caregiver mental or emotional health**
- Age range: Age 7-12 are unmet by High Fit/High Feasibility EBPs, Interpersonal Psychotherapy is designed to treat adult patients with major depression



Round 2 EBP recommendations for fiscal modeling (to be filled in)

To be passed on for fiscal analysis:

- Adolescent Community Reinforcement Approach (ACR-A)
- Child-Parent Psychotherapy
- Intercept
- SafeCare
- Sobriety Treatment and Recovery Teams
- TRBI 101
- Trust-Based Relational Intervention – Caregiver Training
- Iowa Parent Partner Approach (send to fiscal for review for kinship workgroup)
- Interpersonal Psychotherapy (may consider because of mental health support for caregivers)

Not to be passed on to fiscal:

- Incredible Years --- School Age Basic Program
- Incredible Years --- Toddler Basic Program

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**

Tier 3 Models for Consideration

Up next for review by Clearinghouse:

- Child First
- Circle of Security
- High-Fidelity Wraparound (*already reviewed by this workgroup*)

Significant amount of evidence in CT, potential for an ISR:

- CBITS
- Family Based Recovery
- Fathers for Change
- IICAPS
- MATCH
- MDR
- YV Lifeset
- MST-BSF

Considerations for ISR: Study Eligibility Criteria

- **Date of publication:**
 - In or after 1990
- **Source of publication:**
 - Publicly available and published in
 - peer-reviewed journals or
 - in reports prepared or commissioned by federal, state or local government agencies or departments, research institutes, research firms, foundations or other funding entities or other similar organizations,
 - *not dissertations, theses, and conference papers*
- **Language of publication:**
 - Available in English
- **Study Design:**
 - Must use a randomized or quasi experimental group design with at least 1 intervention condition and at least one comparison condition.
- **Target Outcomes:**
 - Studies must measure and report program or service impacts on at least one eligible target outcome. (Definitions on pp. 10- 14)
 - (a) Child Safety, (b) Child Permanency, (c), Child Well-Being, and/or (d) Adult Well-Being
- **Program Adaptations:**
 - When multiple versions of a program or service exist, versions are reviewed separately

Source: Wilson, S. J. et al. (2019). "The Prevention Services Clearinghouse Handbook of Standards and Procedures" Office of Planning, Research, and Evaluation, the Administration for Children and Families, HHS. https://www.acf.hhs.gov/sites/default/files/documents/opre/psc_handbook_v1_final_508_compliant.pdf

NEXT STEPS:

- Share PSAWG recommendations with fiscal
- Offline review of Tier 3 models ISR feasibility
- Work with Chapin Hall/Fiscal/CG Workgroup re: further analysis Tier 1 & 2 models
- Governance review and guidance on next steps
- Prevention Plan submission

APPENDICES



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)

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