

NATIONAL RESOURCE CENTER FOR PERMANENCY AND FAMILY CONNECTIONS at the Hunter College Silberman School of Social Work



a service of the Children's Bureau – ACF/DHHS and member of the T&TA Network National Foster Care Month Webinar Series: Building Blocks Toward Permanent Families

Part 3: Federal Supports to Improving Permanency Outcomes in Child Welfare

Thursday, May 29, 2014 2:00-3:30 PM EDT

www.nrcpfc.org

National Foster Care Month 2014

Building Blocks Toward Permanent Families

> www.childwelfare.gov/ fostercaremonth



Welcome and Introductions

Taffy Compain National Foster Care Specialist Children's Bureau





National Resource Center for Permanency and Family Connections Silberman School of Social Work at Hunter College



Webinar Agenda

Welcome and Introductions

Taffy Compain, National Foster Care Specialist, Children's Bureau

Opening Remarks

JooYeun Chang, Associate Commissioner, Children's Bureau, ACF

 Illinois: Trauma Focus Model for Reducing Long-Term Foster Care

Dana Weiner, Jennifer O'Brien, Larry Small



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Webinar Agenda (continued)

- Missouri: Extreme Recruitment
 Amy Martin, Melanie Scheetz, Lori Ross
- Questions and Answers via online chat
- Closing Remarks

Taffy Compain, National Foster Care Specialist, Children's Bureau

Real Children's Bureau



JooYeun Chang Associate Commissioner Children's Bureau, ACF

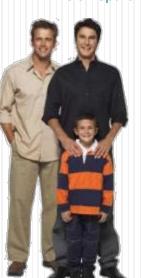
Opening Remarks



Evaluating Trauma-Informed Child Welfare Interventions

Larry Small, Psy.D. Dana A. Weiner, Ph.D. Jennifer O'Brien, LCPC Northwestern University Illinois Department of Children & Family Services







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Permanency Innovations Initiative



- Aims to focus on reducing length of time in care for youth at greatest risk of long stays
- Provides an opportunity to apply and test innovative practices
- Rigorously evaluates the effectiveness of tested strategies

The Illinois Trauma Focus Model for Reducing Long-Term Foster Care is funded by the Children's Bureau, Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services, under grant number 90-CT-0156

Support from the Children's Bureau

Children's Bureau awards grants to various states for proposed innovations to reduce long- term foster care placement.

- 6 grantee sites
 - *Arizona: Fostering Readiness and Permanency Project
 - California: California Partners for Permanency
 - Kansas: Kansas Intensive Permanency Project
 - Washoe County, Nevada: Initiative to Reduce Long-Term Foster Care
 - Los Angeles, CA: RISE (Recognize. Intervene. Support. Empower)
 - Illinois: Trauma Focus Model for Reducing Long-Term Foster Care
- Grantees were charged with identifying the population most at risk for long term foster care and implementing a strategy to lower this risk.

*The Arizona Department of Economic Security relinquished their grant effective June 30, 2013. Additional tools and/or lessons learned will be available in the future.

Service and Intervention Challenges for Illinois

Illinois Statistics:

- Fourth largest foster care system (after New York, California, Pennsylvania)
- 16,500 (approximately) children in out-of-home care:
 - 13,000 in foster care
 - 2,000 in residential care
 - 1,500 in various independent living placements
- Third longest length of stay in the U.S—an average of 28 months.
 - 11 to 16 yr olds in care --17% less than 2 yrs; 25% 2 to 5 yrs; 25% 5 yrs and longer.
- Illinois has the third highest percent of children who age out (at 21 years old)--21%

INITIATIVI

Illinois PII



- PII Project: Trauma-Focused Model for Reducing Long-Term Foster Care
- Convened by: Illinois Department of Children & Family Services
- Key partners
 - Contracted System of Care (wraparound) program providers
 - University Partners
 - Northwestern University
 - University of Chicago
 - University of Illinois Chicago Jane Addams College of Social Work
- Decade-long commitment to trauma-informed assessment & application of trauma lens to addressing child & family needs

Background: Trauma informed child welfare practice in Illinois

- 2004 pilot implementation of 3 Evidence-Based Practices
 - Child-Parent Psychotherapy
 - Trauma-Focused Cognitive Behavioral Therapy
 - Structured Psychotherapy for Adolescents Responding to Chronic Stress
- 2010 Family Focused, Strengths Based, Trauma Informed Practice model

INNOVATIONS

Target Population

Youth ages 11-16, who at the two-year anniversary of entry have either MH/trauma problems (as rated by the CANS) and/or placement instability risk



Decision-Making about Eligibility Criteria



Trauma Cluster Analysis

- Cluster One (25%) typical Complex Trauma profile
 - 95% met the Complex Trauma criterion
 - high rates of symptoms in all of the four trauma symptom groups
- Cluster Two (60%) less Symptom Complexity
 - 46% met Complex Trauma criterion
 - relatively lower rates of symptoms (13-18%), indicating a lower degree of comorbidity among symptom types
- Cluster Three (15%) highly Behaviorally Disordered
 - 53% met Complex Trauma criterion
 - 100% had behavioral dysregulation issues
 - high rates of affect dysregulation (85%)
 - disproportionately male (63%)
 - at least 25% had previous detention

Implications for Intervention Selection

- If applying a complex trauma intervention, as many as 60% meet criteria
- If applying a targeted trauma intervention, all youth with symptoms and trauma experiences other than neglect only (75%) are appropriate
- In one year of intervention, estimates of roughly 400 youth becoming available for intervention meeting criteria

Transparency: Assumptions & Theory of Change



- Ideas about which subgroups have poorer outcomes than others
- Ideas about why subgroups of youth have poorer outcomes
- Theories about what will improve outcomes among at-risk groups

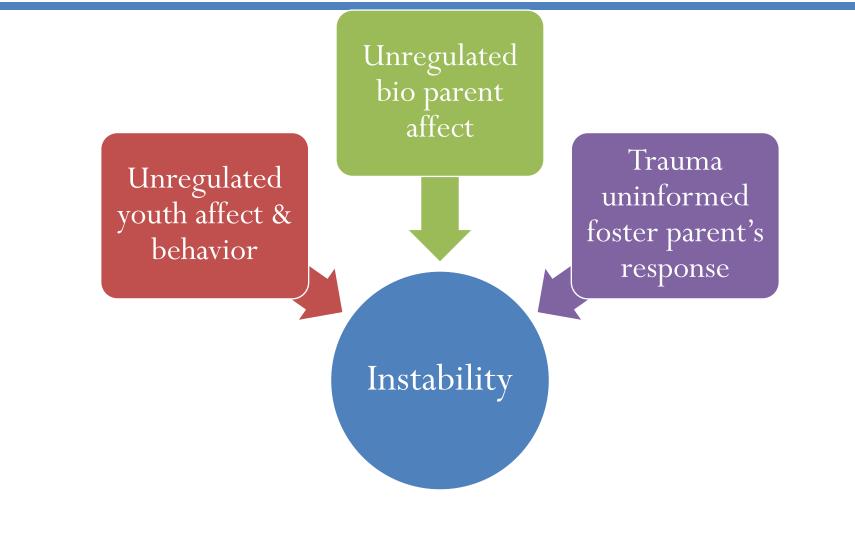
Underlying Assumptions



- Youth with trauma problems may have trouble regulating affect and behavior
- Unregulated youth affect & behavior present challenges for foster parents who may be unaware of the impact of trauma and unprepared to respond appropriately
- Unregulated parent affect & behavior may impact ability to re-establish connections with their children, establish healthy social support networks, or complete needed services

Trauma impacts outcomes through instability:



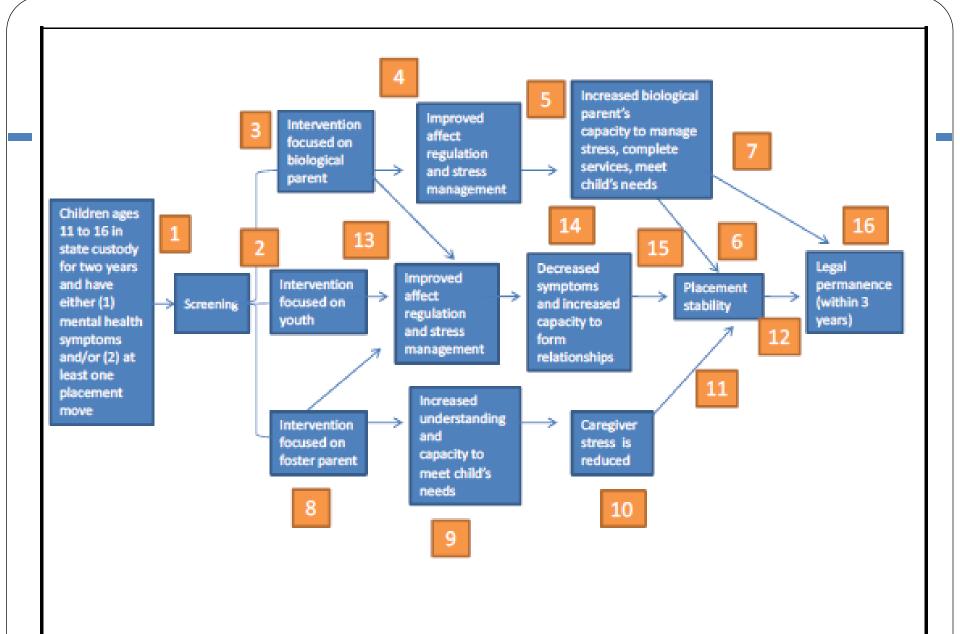


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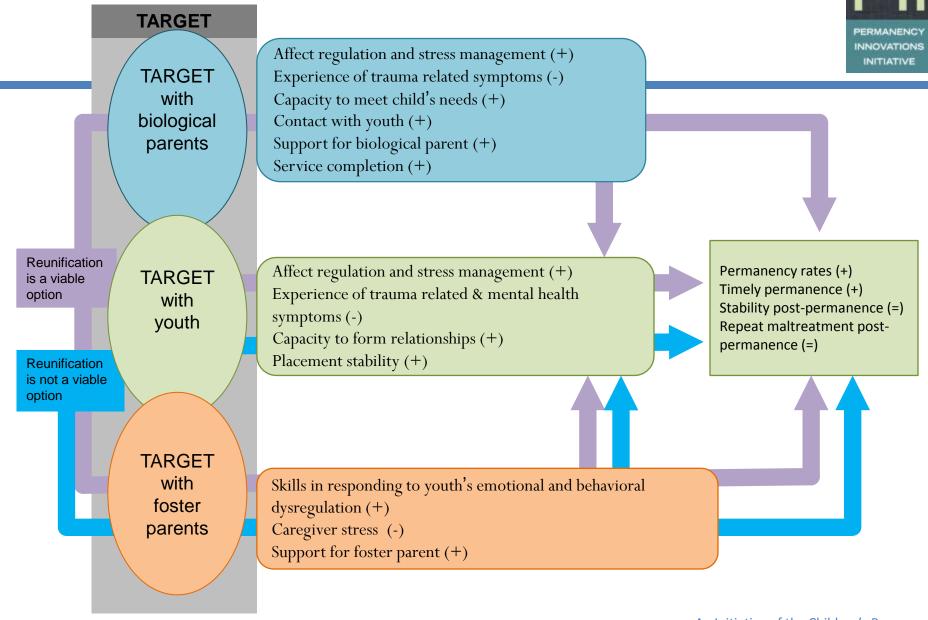
Theory of Change



- By educating youth, biological parents, and foster parents about trauma & strategies for healthy coping, we can improve
 - Appropriate (de-escalating) foster parent responses to youth
 - Opportunities for relationship-building between bio parent and youth
 - Youth ability to manage affect & behavior even in stressful situations
- Improvements in healthy functioning will stabilize placements and promote relationships, which will in turn make permanency achievable



Illinois PII Services Summary Diagram



Selected Intervention: TARGET



- Addresses affect dysregulation that is (1) caused by trauma and (2) results in behavioral problems that are challenging for foster parents to manage
- Can be used with foster parents, biological parents, and youth
- Is appropriate for all youth with trauma histories, not just those with discrete traumatic events
- Developers had implemented the intervention with youth in Juvenile Justice settings but were eager to modify, apply, and test intervention with child welfare population

Trauma Affect Regulation: Guide for Education & Therapy



- Strengths-based psycho-educational approach
- Delivered in-home 10-12 sessions that incorporate parental and caregiver involvement
- Frames PTSD symptoms as the result of the brain's "alarm center" overwhelming the brain's information retrieval ("filing") and executive functioning ("thinking") systems.
- Addresses symptoms by strengthening the "filing" and "thinking" centers rather than turning down the "alarm"



TARGET Core Skills: FREEDOM steps

- Focus the mind on one thought at a time (SOS: Slow down, Orient, Self-check)
- **Recognize** triggers for alarm reactions
- Emotion self-check
- Evaluate thoughts
- Define goals
- **Options** for behavioral response
- Make a contribution



TARGET Fidelity and Consultation

- Therapists submit videos of each session to purveyor for fidelity scoring
- Purveyor convenes monthly fidelity call with each therapist
- Group consultation occurs bi-weekly



Evaluation Design

- Approximately 400 youth will participate in the evaluation study.
- To test the effectiveness of the intervention, half of the youth enrolled will receive the TARGET therapy in addition to services as usual; the other half will receive services as usual.
- PII project will be evaluated in partnership with local universities and Federal consultants.

Primary Data Collection-Westat



- Youth, foster parents, and parents (with return home goals) invited to participate in two interviews- at the start of their involvement in the study and 6 months after
- Calls foster parents to schedule consent and interview for youth and foster parent (45 minutes) in home
- Calls birth parents to gain consent and conduct individual phone interviews (15 minutes)
- Gift card incentive for interview completion: youth (\$20), parent (\$15), foster parent (\$20)
- Westat data collectors may contact the caseworker to assist with coordinating the youth interview at the caseworker's office if the foster parent declines release of their contact info

Proximal Outcomes



Proximal Outcome	Measure
Increase in youths' ability to regulate emotions	Affect Dysregulation Inventory (ADI)
Reduction in youth trauma & MH symptoms	CANS & Trauma Symptom Checklist
Youth capacity to form and maintain relationships	Youth social support measure and CANS
Increase in bio parent ability to regulate emotions	Affect Dysregulation Inventory (ADI)
Bio parent service participation & completion	Administrative Case Review (ACR)
Bio parent contact with youth	Bio parent contact with youth measure completed during youth interviews
Increase in bio parent social support	Social Provisions Scale (SPS)
Increase in foster parents' skills in responding to youth	Parenting Practices Chicago Survey- Parent Version (PPCS)
Increased placement stability	Administrative Data (CYCIS)

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PERMANENCY INNOVATIONS INITIATIVE

Distal Outcomes

Distal OutcomeMeasuresIncrease in rate of permanencyAdoption and Foster Care AnalysisDecrease in average length of stayand Reporting System (AFGARS) &
National Child Abuse and Neglect
Data System (NCANDS)

Anticipated Systemic Change



- Increased system-wide trauma awareness
- Increased capacity for sustained evidence-based practice delivery to address trauma needs among youth and their parents & caregivers

Impact to Date



- Approximately 50 eligible youth identified every two months
- 288 youth randomized to date; 143 treatment 145 control (began Summative Phase August 22, 2013)
- 16 graduates to date
- Expect a sample size of 400 by November 1, 2014

Lessons Learned



- Existing contractual relationships with therapists and strong monitoring is key to successful implementation
- Identify core components of intervention for fidelity monitoring
- Consistent leadership team meetings comprised of implementation and evaluation members
- Outside evaluator (no peak no tweak), implement satisfaction surveys to inform leadership and champions

Illinois PII Contacts

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Missouri Extreme Recruitment



Diligent Recruitment of Families for Children in Foster Care

- 🐐 Missouri Children's Division
- Missouri Coalition of Children's Agencies
- * Foster and Adoptive Care Coalition
- Missouri Institute of Mental Health
- St Louis Region Case Management Contractors
- Adoption Exchange of Missouri and AdoptUSKids

Project Components

Extreme Recruitment

12-20 week individualized recruitment effort that includes:

- Preparing the child for permanency
- Conducting a diligent search in order to reconnect youth with relatives/kin
- Achieving permanency through concurrent general, targeted, and child-specific recruitment

• Extreme Education, Training, and Supports

- Training for potential resource families is conducted by a centralized source
- "Connector" services are provided to families immediately to:
- Coordinate with the public/private agency case mangers and licensing staff during the home study process
- Provide "trouble shooting" and problemsolving if barriers to licensing emerge
- Provide support groups and specialized training designed for relative/kin resource families
- Provide services to strengthen the family after placement of the children



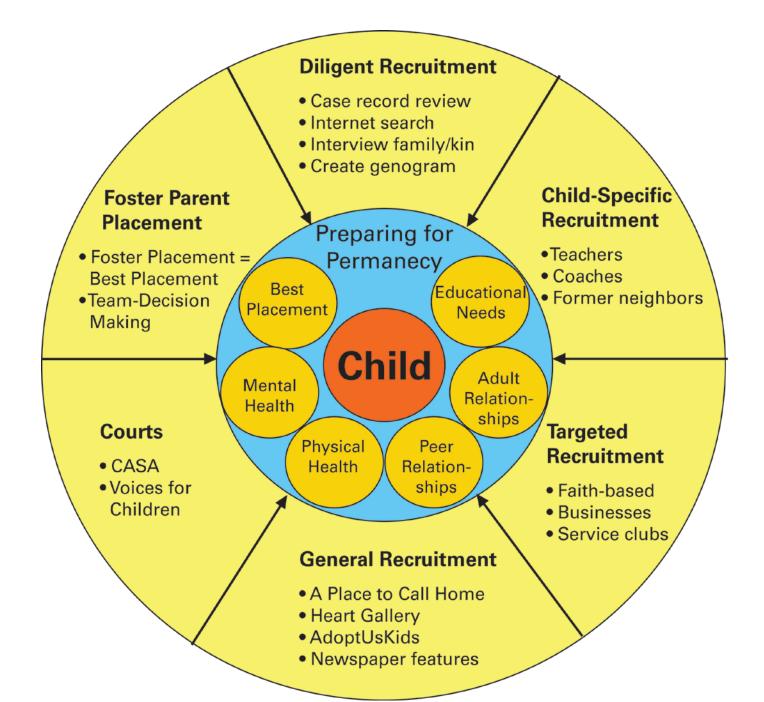
Goals

- Ensuring a system of supportive adults for at least 90% of those youth
- Achieving permanency through adoption or guardianship for at least 70% of those youth
- Actual rate achieved was 75% reconnection and 21% permanency

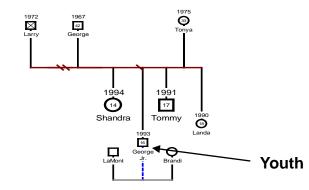
Significant Findings

- CAFAS indicated well-being increases when youth are reconnected with relatives and kin.
- However, positive effects reduced over time, highlighting the fact that supportive supports to relatives/kin are essential.
- The overall premises and philosophical tenets of the program have been largely incorporated into Missouri's child welfare system and so there is significant sustainability.
- Determination a program is needed to address location of relatives and kin in the first 30 Days of placement in Alternative Care.

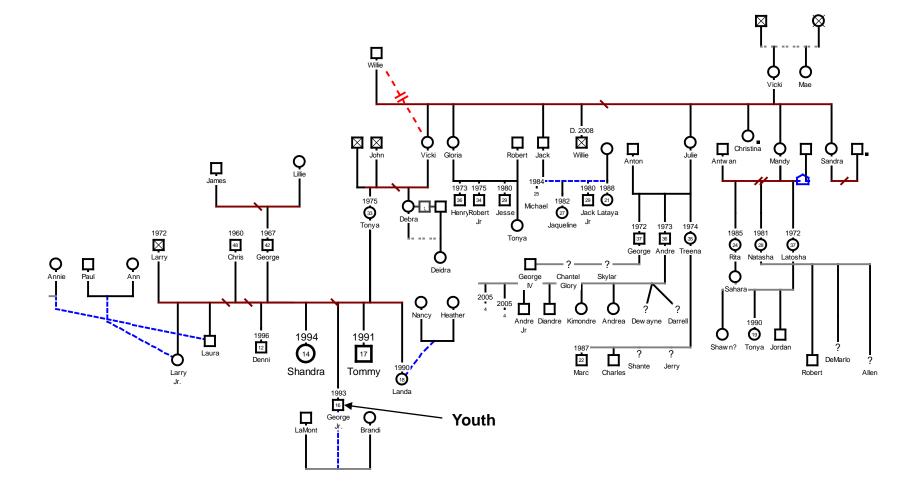
Extreme Recruitment Model



Genogram: Week 1

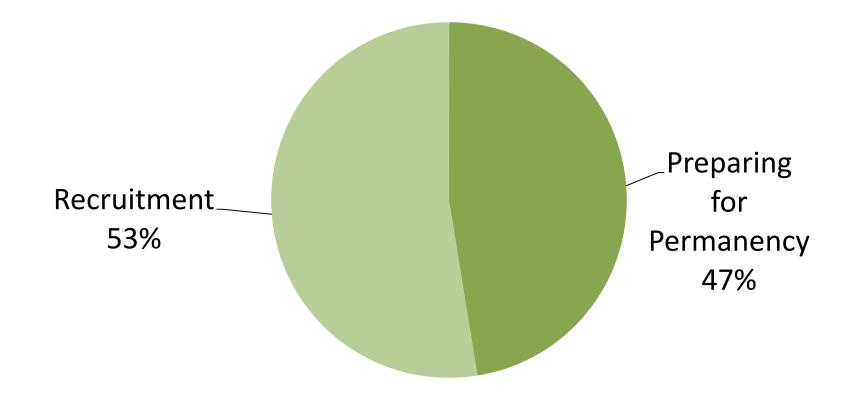


Genogram: Week 4

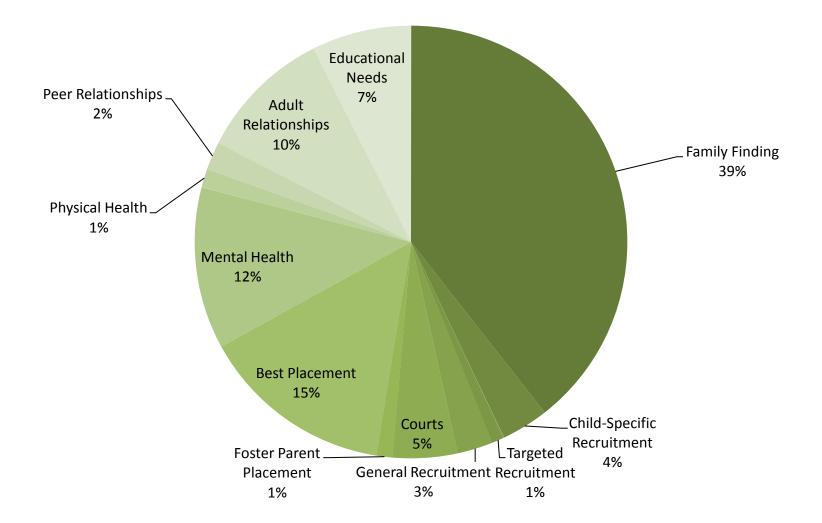




Distribution of Tasks



Distribution of Tasks



Timeline



Week 1

- Identify Paternity
- Complete Initial Genogram
- Assess Educational Needs

Week 2

- Complete Case File Review
- Complete Expanded Genogram
- Rate CAFAS and Social Support Tool

Week 3

- Identify "The Informant"
- Make contact with Relatives (Expand Genogram)

Week 4-5

- Identify 40-80 Relatives/Kin
- Review Progress on Concurrent Recruitment Checklist

Week 6-7

- Visit the idea of a Family Group Conference
- Review Expanded Genogram if team is stuck

Week 8-10

• Child is Reconnected with Family/Kin

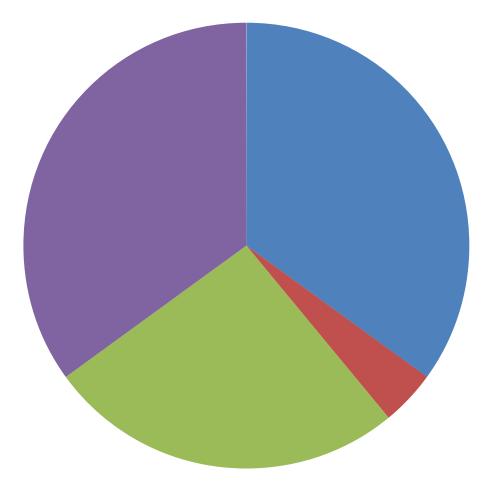
Week 15-17

 Begin Roadmap to Permanency with Possible Matches

Week 17-19

Child is Matched

Placement Relationships





Kin (4%)

- Current/Former Foster Parents (26%)
- Other Non-Relative (35%)

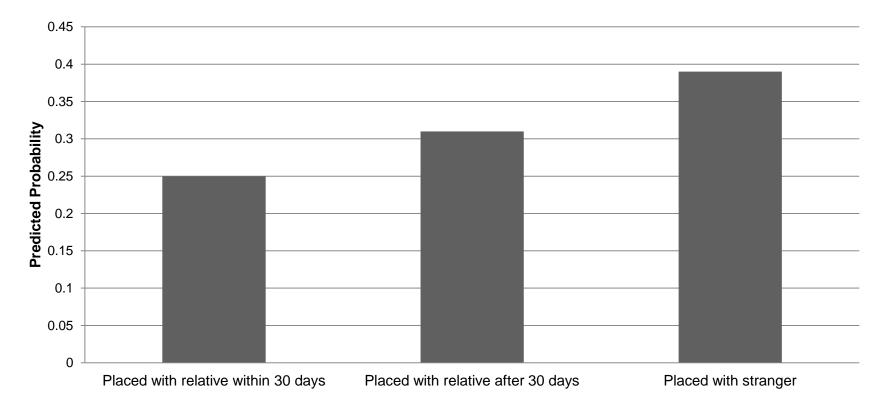
Replication with Fidelity

- Kansas City, MO
- State of Virginia
- Ontario, Canada

30 Days to Family[™]

Behavior problems at 36 months

Rubin, et al: 2008 Measurement: Child Behavioral Checklist



Replication in Kansas City, Missouri

- MFCAA is a similar organization based on the other side of the state.
- Kids who mirror the population being served in St. Louis.
- Supportive state child welfare agency.
- A WWK program in operation in KC area serving children case managed by a private agency, but no other organized recruitment strategy that includes child specific family finding.
- FACC St. Louis was willing to train us and share their model.

Funding

- Local community health foundation supported the initial year due to the impact of permanency on children's mental health and functioning.
- Success in year one led to an additional two years of funding and expansion to increase staff.
- Advocacy efforts in year three led to the inclusion of an Extreme Recruitment line item in the DSS-Children's Division budget to provide supplemental funding to St. Louis, and ongoing funding to Kansas City.
- Outcomes after year one have resulted in a legislator initiated increase in state fund for year two of state funding, increasing program size in Kansas City and St. Louis.

Outcomes in Kansas City

- Total # of kids served= 82
- Total # of kids with permanency resources identified= 70
- Of the 12 without resources identified, 6 just started in the last two weeks, 3 (over 18 and refused to be adopted), 1 disabilities too severe to leave DMH custody, 1 too unstable to leave psychiatric hospital, 1 case is ongoing.
- Total # of adoptions completed (to finalization): 16.
 Many others are in process.

Contact Information

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Questions ???????

Type a question using the chat function on your computer.





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Resources

- National Foster Care Month 2014: Building Blocks Toward Permanent Families <u>https://www.childwelfare.g</u> ov/fostercaremonth/
- Materials for this event are currently posted on the NRCPFC website at:

http://nrcpfc.org/teleconfe rences/may/part-3.htm





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Webinar Series

Webinars 1 and 2 are now archived. <u>www.nrcpfc.org/teleconferences/may/</u>

<u>Webinar 1</u> Integrated Systems Approach to Permanency-Focused Programs <u>http://nrcpfc.org/teleconferences/</u> <u>may/part-1.htm</u>

<u>Webinar 2</u> Real Talk: Myths and Challenges in Permanency Work <u>http://nrcpfc.org/teleconferences/</u> may/part-2.htm





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After the Event

• A feedback survey will be emailed to all participants. We appreciate your feedback!

 The event will be archived on Wednesday 6/4/14 at: <u>http://nrcpfc.org/teleconferences/</u> <u>archives.html</u>

 Sign up for Weekly Update, NRCPFC's weekly e-newsletter, to receive updates and announcements about future events.

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