

Department of Human Services

Proposed Service Array Recommendations for FFPSA Prevention Plan



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Alex Palm
Service Array Workgroup
August 3, 2020

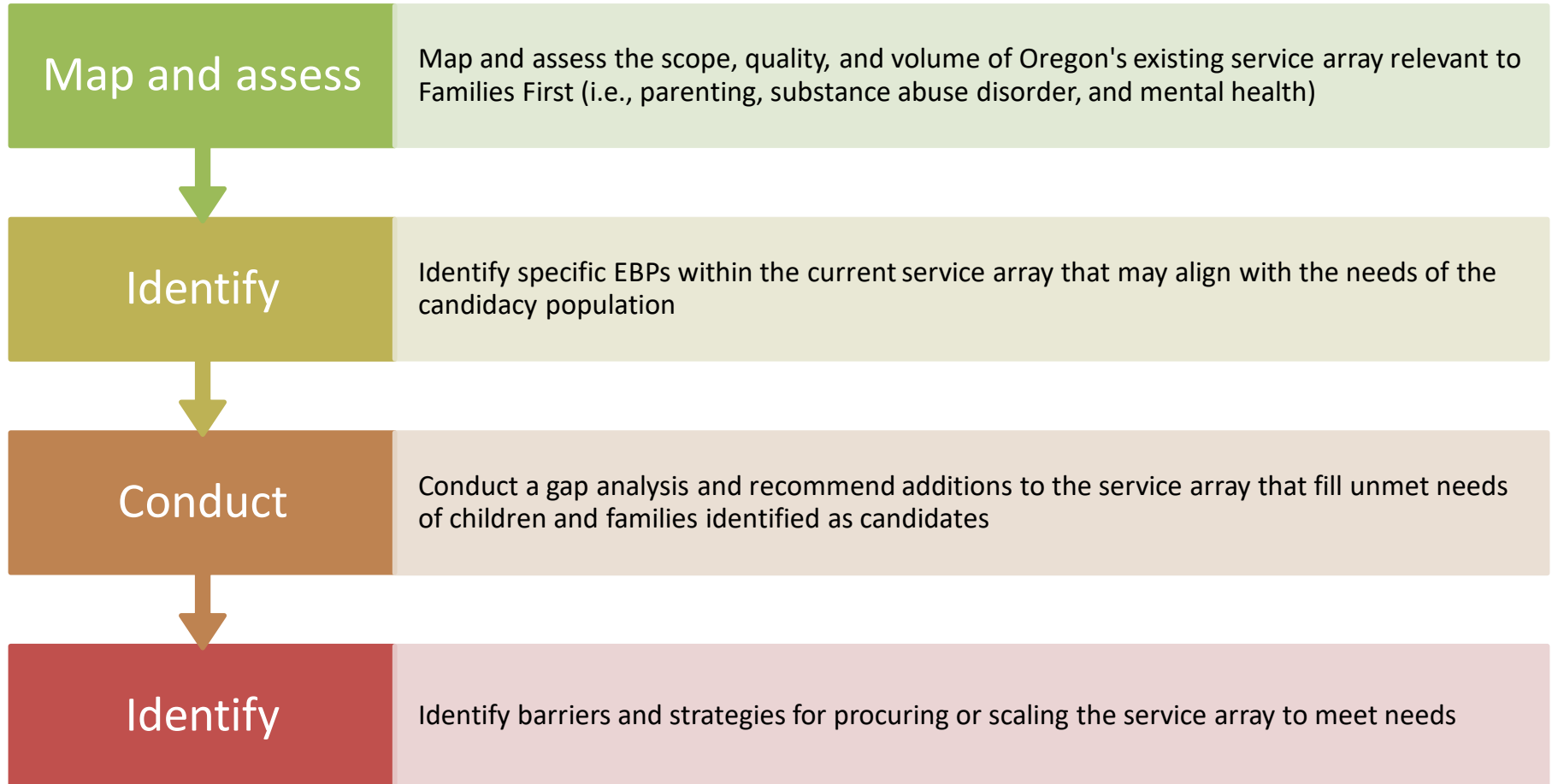
Purpose and Charge of the Workgroup

- The purpose of the Service Array workgroup is to identify specific services, including EBPs, that meet the needs of identified target populations and bring forth recommendations that will inform the development of Oregon's Family First Prevention Plan
- The charge of the Service Array workgroup is to use data and qualitative information, and the experiences and expertise of workgroup members and other invited guests, to identify recommendations that will ensure that Oregon's programs and service array match the needs of the population.

Service Array Workgroup Contributors

Name	Organization/Unit	Role/Title
Alex Palm	DHS	Service Array Co-Lead
Alex Trotter	DHS	CW Permanency Consultant
Amber McClelland	DHS	CW Permanency Consultant
Amy Chandler	Mult. Co Juv. Court	Juvenile Court Improvement Coordinator
Amy Shea Reyes	Care Oregon	BH Manager for Children, Youth and Families
Benjamin Hazelton	OHA	Home Visiting Policy & Systems Coordinator
Brian Whitmer	Washington Co MH	SOC Program Coord
Chelsea Holcomb	OHA	OHA/Behavioral Health
Christine Kamps	DHS	DHS Tribal Affairs
Frances Sallah	United Way	Early Learning Operations and Policy Director
Hannah Royal	Oregon Foster Youth Connection	Youth Voice
Hazel Clements	Birch Grove Collaboration, La Clinica,	Director
Hector Cordova	Tu Familia	IFS Director, Lebanon
Jamie Hinsz	OR State Legislature	Senate Committee H&HS
Jessie Carpenter	Relief Nursery	Deputy Dir Quality Assurance, Relief Nursery
Kelli McKnight	Options Counseling	Chief Operations Officer (Lane), operating in 10 counties
Kelly Poe	Malheur ESD	Dir of Early Learning Hub
Kevin George	DHS	CW Grant Mgr
Laurie Theodorou	OHA	Child and Family BH
Leanne Heaton	Chapin Hall	Sr. Researcher, Consultant
Linda May Wacker	Morrison Ctr, Parents Anonymous	Program Dir
Lise Schellman	Pearl Buck Ctr	Preschool and Fam. Supports Dir
Maureen Seferovich	Washington Co	Children's MH Program Supervisor
Michael Payne	DHS	Business Analyst
Michael Simmons	Morrison Center	Parent Mentor Prog Coord
Michelle Moore	Cow Creek Band of Umpqua Indians	Social Service Director
Patti Chamberlain	Oregon Social Learning Center	Science Dir (Lane)
Ray Brown	Relief Nursery	Program Dir, Lane
Roland Garcia	DHS	District 16 Manager
Sahaan McElvy,	Self-Enhancement, Inc.	Director, Community and Family Programs
Shawn Bower	Iron Tribe	Executive Director
Sherrelle Jackson	DHS	District 2 Manager, Service Array Co-Lead
Susan Fleming	Family Skill Builders	Director, Mult, WA, Clack, and Marion Counties
Tayo Cotton	DHS	CPS Sup, Mult. Co
Ximena Ospina-Todd	Latino Network	Community Stability and Support Services Director
Yasmin Grewal-Kok	Chapin Hall	Senior Policy Analyst, Consultant

What We Did



The How:
Using Data
to inform

Master Spreadsheet created using data gathered from:

Geo map

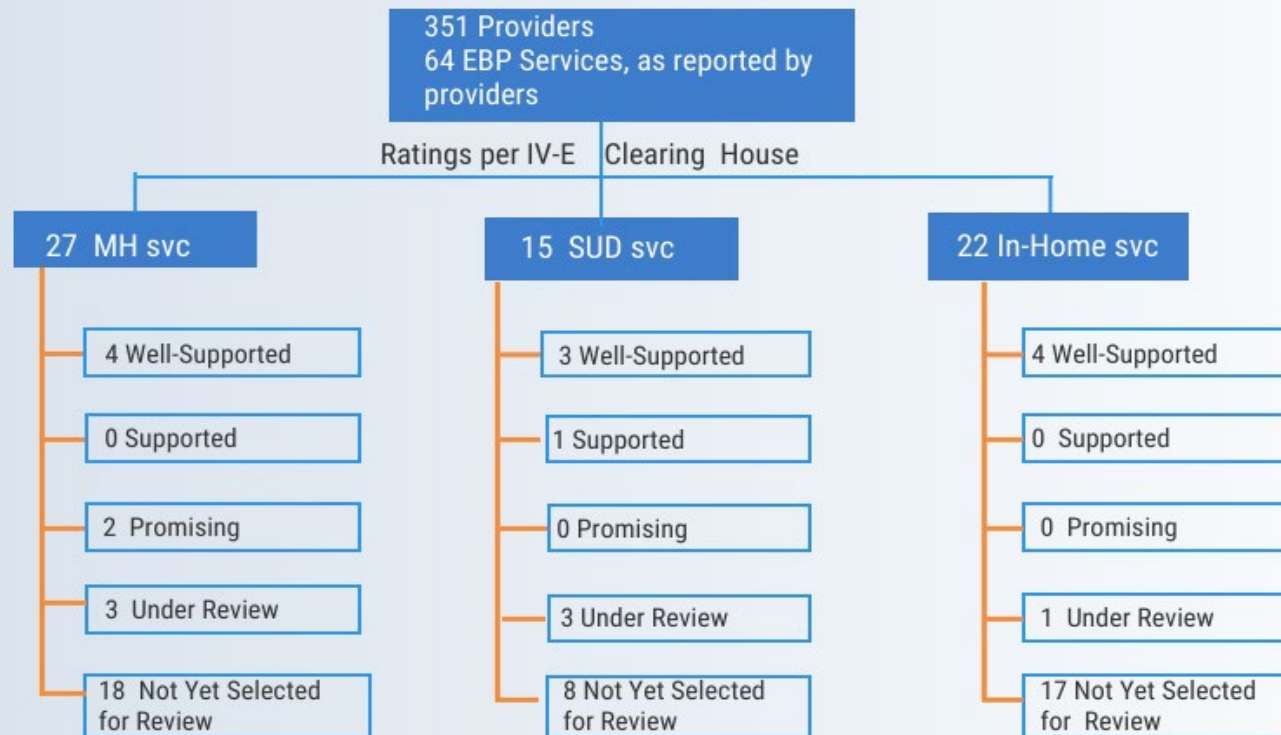
Providers
identified in
ORKids

Additional
information
from workgroup
members

- Weekly SA workgroup meeting for additional input, consideration, deliberation

What We What We Found

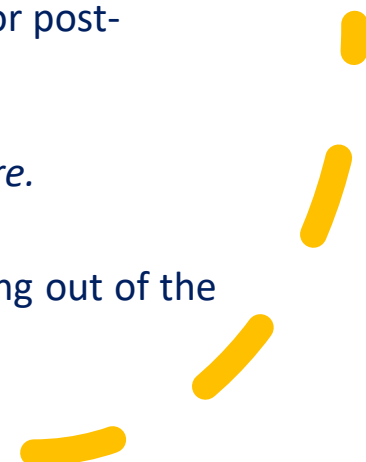
Service Array in Oregon





Getting Closer to Recommendations: Candidacy

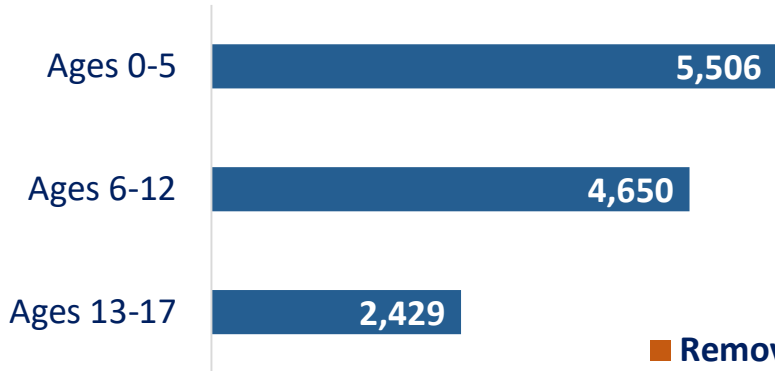
Candidates, as identified by the Target Population Workgroup, for the FFPSA Prevention Plan:

- Children who are at risk of voluntary placement through Child Welfare if their caregivers are unable to access appropriate services/assistance for the child, or other utilized community resources have been determined to be ineffective or inaccessible.
 - Children identified in a CPS assessment which identified at least one family stressor.
 - Children who have exited the foster care system to reunification but are at risk of re-entry.
 - Children who have exited the foster care system whose caregivers have requested post-adoption or post-guardianship services.
 - *Pregnant and parenting youth in foster care.*
 - Children of youth/young adults transitioning out of the foster care system.
- 

Focus Area: Age

Founded allegations: removal and in-home service status, by age group

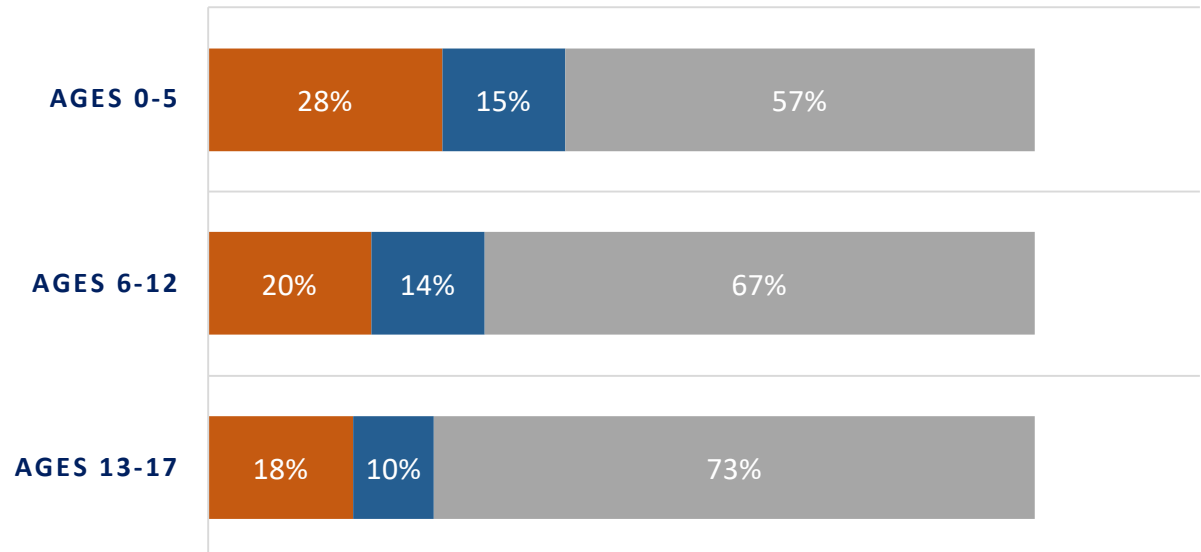
Total counts



Ages 0-5 make up the largest group of children with founded allegations:

- 28% removed from home
- 15% served in home
- 57% not served in home

Removed from home % Served in home % Not served in home %



Focus Area: SUD

Family stress factors and alignment with FFPSA services

Parent/caregiver alcohol or drug use	Substance	42.5%
Domestic violence		29.7%
Parent/caregiver involvement with law enforcement agency		19.9%
Parent/caregiver mental illness	Mental health	13.6%
Family financial distress		11.8%
Parent/caregiver history of abuse as child	Mental health or Parenting	11.4%
Child mental/physical/behavior disability	Mental health or Parenting	9.6%
Inadequate housing		8.5%
Head of household unemployed		6.6%
New baby/pregnant	Parenting	6.6%
Child developmental disability	Parenting	2.1%
Parent developmental disability	Parenting	2.1%
Heavy child care responsibility	Parenting	2.0%
Data source: 2018 Child Welfare Data Book		

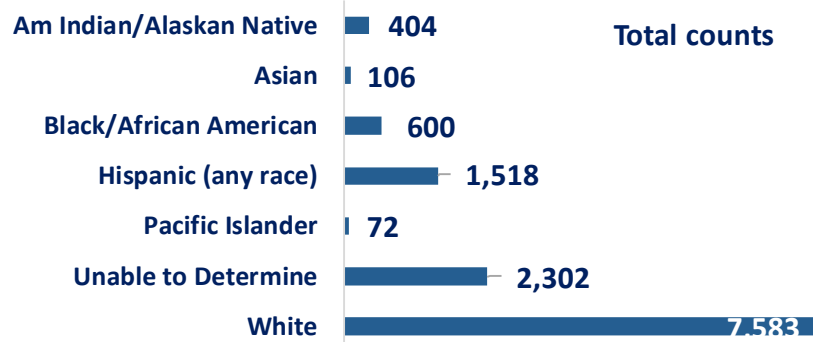
Comparison

Founded allegations not removed vs. removed by family stressors

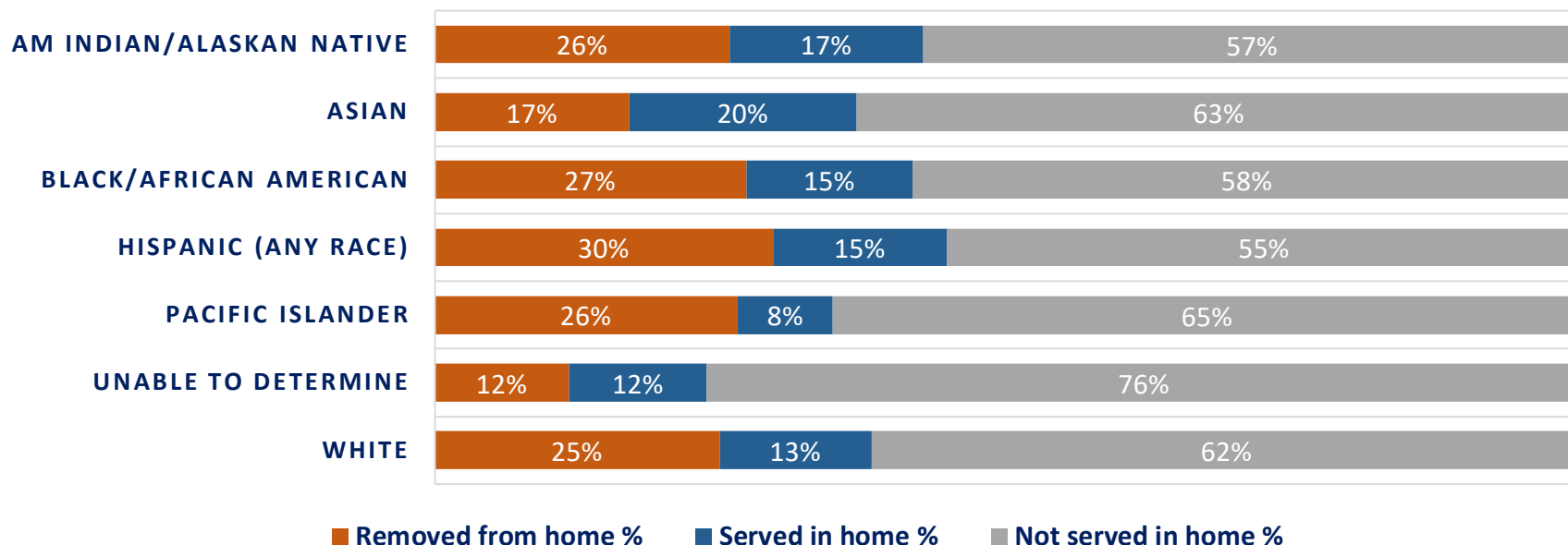
	Not removed	Removed
Parent/caregiver alcohol or drug use	33.0%	58.3%
Domestic violence	33.0%	26.9%
Parent/caregiver involvement with law enforcement agency	17.7%	21.8%
Family financial distress	10.3%	20.9%
Parent/caregiver mental illness	10.3%	18.7%
Parent/caregiver history of abuse as child	9.8%	14.2%
Child emotional behavior disability	8.6%	10.3%
Inadequate housing	5.4%	16.1%
Head of household unemployed	4.6%	11.8%
New baby/pregnant	4.8%	10.9%
Heavy child care responsibility	3.5%	4.1%
Child developmental disability	1.9%	2.7%
Social isolation	1.4%	3.9%
Child mental illness	1.7%	2.2%
Parent developmental disability	1.2%	2.7%

Focus Area: Culturally Specific Services

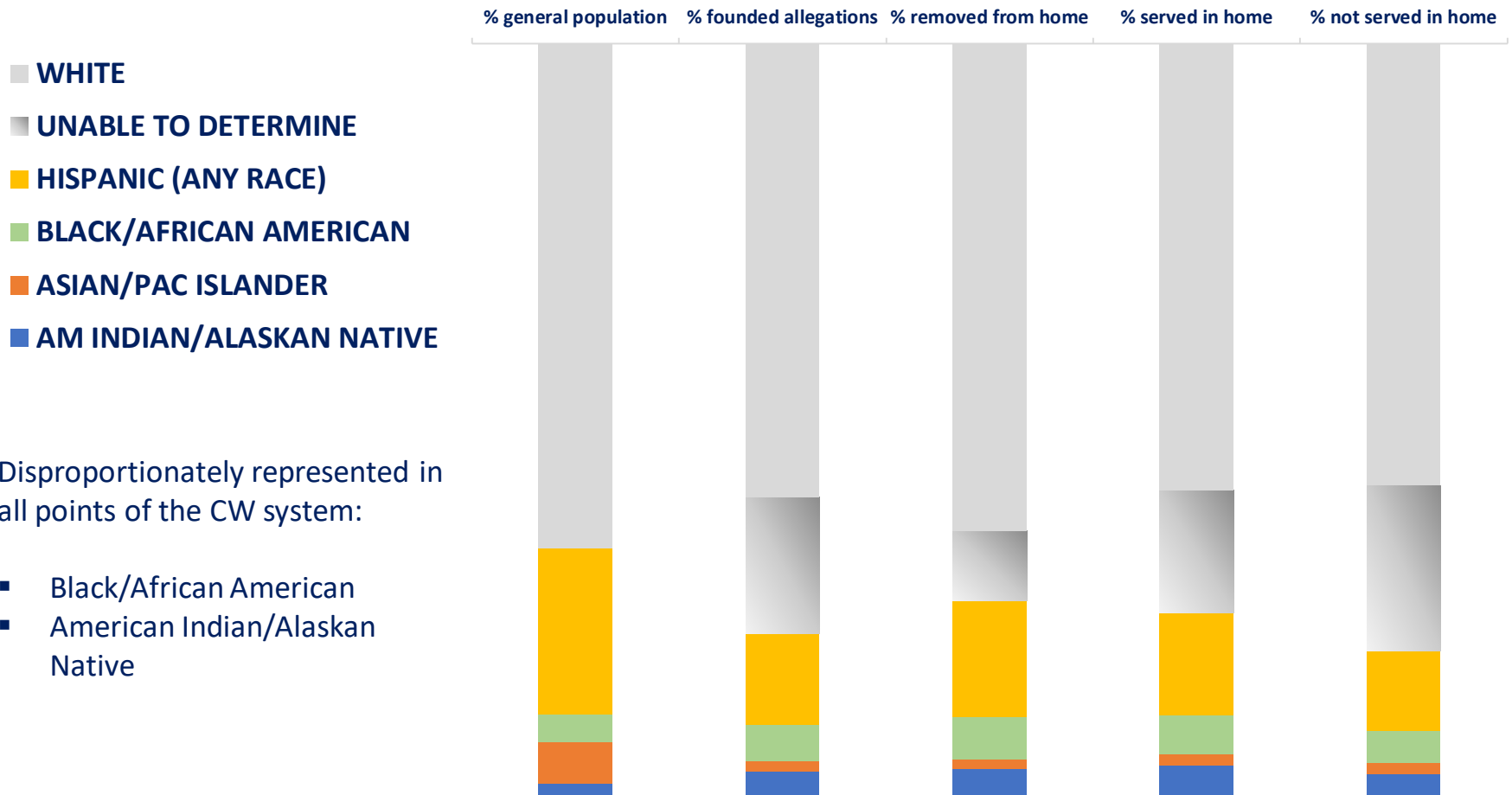
Founded allegations: removal and in-home service status, by race/ethnicity



Children with founded allegations are racially and ethnically diverse. The horizontal bars show the percentage of children within each racial/ethnic group at each point in the child welfare system



Disproportionality and representation by race/ethnicity for founded allegations, removal and in-home service status

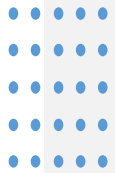


IV-E Clearinghouse Ratings by Required Research Components and Permitted Claiming

IV-E Clearinghouse Rating	CQI Plan or Evaluation Plan Required?	Systematic Review Required? ¹	IV-E Claimability?
Well-Supported	CQI	No	Yes
Supported or Promising	Evaluation	No	Yes
Not Yet Rated	Evaluation	Yes	Yes ²
Rated but Evidence Does Not Meet Criteria	N/A	N/A	No

¹ The first jurisdiction to submit an approved systematic review will then no longer require other jurisdictions to submit one

² Initially claimable as a transitional payment with an approved evaluation and systematic review. If eventually rated unfavorably by the Clearinghouse, claimability ends



Shared Understanding What we mean by:

Culturally Specific – a service for a specific cultural population where research was done on that population and found to be effective

Culturally Responsive – a service for a broad population but part of the research was done on specific cultural populations and so can be adapted to have efficacy within those specific cultural populations

Specialized IDD-impacted Parents – populations who experience pervasive neurological conditions with cognitive impairment resulting in a need for adapted approaches to accommodate their learning style

Recommended Services

How did we get here?

What is the purpose of these recommendations?
How do they fit into Oregon's Family First efforts?

Category	Evidence Based Practice	Target	Rating	Intellectual and Developmental Subdomains	Culturally Responsive/Specific
Mental Health	Parent Child Interaction Therapy (PCIT)	0-6	Well Supported	Y	Y
	Functional Family Therapy (FFT)	6-18 (11-18)	Well Supported	N	N
	Trauma Focused Cognitive Behavioral Therapy (TF-CBT)	6-18 (Children and Adolescents)	Promising	N	Y
	Youth Villages – Intercept Model	Early childhood through 17	Under Review	Unknown	Unknown
Substance Abuse	Motivational Interviewing (MI)	All Ages	Well Supported	N	Y
	Sobriety Treatment and Recovery Teams (START)	0-6	Under Review		Unknown
	FAIR (Families Actively Improving Relationships)	0-18	Not Yet Selected for Review		
	Parents Anonymous	0-18	Promising		N
In-Home Parent Skill Based	Nurse Family Partnership (NFP)	0-6 (Preg thru 2yrs)	Well Supported	Y	Y
	Parents as Teachers (PAT)	0-6 (Early childhood)	Well Supported	Y	Y
	Family Spirit	0-6 (Prenatal-3)	Under Review		Y
	Parent Management Training – Oregon (GenerationPMTO)	2-17	Not Yet Selected for Review	Undetermined	Y

Final Recommendations from the Services Array Workgroup

Claimable Services

- Trauma Focused Cognitive Behavioral Therapy (TF-CBT)
- Youth Villages-Intercept
- Parent Child Interaction (PCIT)
- Functional Family Therapy (FFT)
- Sobriety Treatment and Recovery Teams (START)
- Motivational Interviewing (MI)
- Nurse Family Partnership (NFP)
- Parents as Teachers (PAT)

Non-claimable services but have been submitted.

- Parents Anonymous
- Parent Management Training-Oregon (GenerationPMTO)
- Families Actively Improving Relationships (FAIR)
- Family Spirit

* We recommend to include the following slide in the plan. The services right now are not claimable. Several currently have strong research tied to them. We recommend inclusion because they meet the needs identified by the target population in slide 11 connected to disproportionality and provide culturally specific services.

Final Recommendations from the Services Array Workgroup: Culturally Specific & IDD Services

Category	EBP Service	Target	IV-E Clearing House Rating
African American	Self Enhancement Model (SEM)	Adolescents	Not Yet Selected for Review
	Community Healing Initiative	All Ages	
	4M Relational (Multigenerational, Multisystemic, Multicultural Model)	All Ages	
Intellectual and Developmental Disability	Make Parenting a Pleasure (<i>Adapted</i>)	1. All Parents with cognitive limitations; 2. Parents involved with CW	
	The Health & Wellness Program: a parenting curriculum for families at risk. (See Healthy and Safe in CEBIC)	Parents with cognitive limitations who are Child Welfare involved	
LatinX	Community Healing Initiative	All Ages	
Oregon Tribal Based Practices**	Adventure Based	No info	
	Baby Doll Cradle (listed, but no supporting document)		
	Canoe Journey - Family	All	
	Ceremonies and Rituals	All	
	Cradle Boards	Partners of Child- bearing age	
	Cultural Camp	All	
	Domestic Violence Group Treatment for Men	Referrals from DOC and DHS CW	
	Family Unity	All	
	Healthy Relationship Curriculum	Adults	
	Horse Program	All	
	Native American Community Mobilization	All	
	Native American Storytelling	All	
	Positive-Indian Parenting	Anyone raising children	
	Powwow	All	
	Round Dance	All	
	Sweat Lodge	All	
	Talking Circle	All	
	Trauma Recovery & Empowerment Model	Women	
	Tribal Crafts	Community members	
	Tribal Family Activities	Youth and Families	
	Tribal Youth Conference	7 th -12 th Grades	



Mental Health Services Recommendations

Parent Child Interaction Therapy (PCIT)

Pros

- Available in most regions.
- Demonstrated effectiveness in foster care prevention.
- Abundance of training resources in Oregon.
- Emerging evidence supports culturally responsive for people impacted by IDD.

Cons

- Trained therapist primarily paid through OHP.

Functional Family Therapy

Pros

- Primarily provided through Oregon Juvenile Departments.
- Effective for adolescents with behavioral needs.

Cons

- Not widespread in Oregon.
- No identified training resources.
- Could be difficult to scale.



Mental Health Services Recommendations

Trauma Focused Cognitive Behavioral Therapy (TF-CBT)

Pros

- Effectively addresses trauma needs.
- Certification training opportunities made available through system partners.
- Can be scaled with workforce.
- AMH data supports culturally responsive in African-American populations.

Cons

- Model not utilized to full fidelity by current providers.
- Insufficient information on availability in rural areas.

Intercept (Youth Villages Model)

Pros

- Eligible for transition funding.
- Implemented in other states.
- Presence in several Oregon counties.

Cons

- Provided by one provider.
- Implications for scaling.
- Review currently incomplete.
- Accessibility across the state.



Substance Abuse Services Recommendations

Motivational Interviewing

Pros

- May be used for several providers.
- Low bar to fidelity measures and tools.
- Can be broadly implemented.
- AMH data supports culturally responsive in African-American populations (*AMH data can't be verified*)

Cons

- Not used to fidelity by Oregon providers.
- Applications research needed.

Sobriety and Treatment and Recovery Teams

Pros

- Demonstrated success in supporting families with youth under six years of age.
- Services provided while youth remain at home.
- AMH data supports culturally responsive in African-American populations (*AMH data can't be verified*)

Cons

- Limited implementation in Oregon.
- Included in one other state plan.



Substance Abuse Services Recommendations

Families Actively Improving Relationships (FAIR)

Pros

- Developed in Oregon
- Complimentary of GenerationPMTO
- Serves families with youth of all ages
- Training and research opportunities in Oregon

Cons

- Not yet scheduled for review by Title IV-E Clearing House
- Limited providers in Oregon

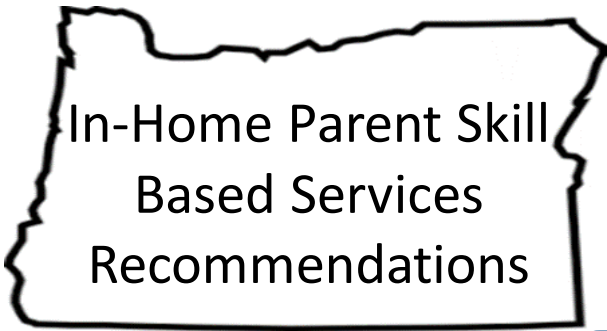
Parents Anonymous

Pros

- Relatively affordable model to implement
- Heavy emphasis on Peer Support
- Focuses on family systems as they relate to Drug and Alcohol Treatment

Cons

- Limited implementation in Oregon.
- Not included in any other state plan



In-Home Parent Skill Based Services Recommendations

Parents as Teachers

Pros

- Curriculum can be applied to many service offerings.
- Can be applied to existing community-based services.
- Effective for youth under the age of five.
- Several Oregon providers.

Cons

- Uncertain implementation costs.
- Further scaling research needed.

Parent Management Training Oregon (Generation PMTO)

Pros

- Developed in Oregon.
- Several in state training resources.
- Connects to system partner services in Oregon.
- One of few In-Home options for children over the age of five.
- Does not require Masters level credentials.

Cons

- Not reviewed by Title IV-E Clearinghouse.
- Not schedule for review.

In-Home Parent Skill
Based Services
Recommendations

**Nurse Family
Partnership**

Pros

- Broad implementation in Oregon
- Existing training resources exist
- Complimentary of other projects in Oregon
- Supportive of Pregnant and Parenting Teens

Cons

- Need to determine workforce capacity and needs

Health Families America

Pros

- Large provider network in Oregon
- Existing infrastructure for development
- Supportive of similar efforts throughout the state

Cons

- Need to determine expansion needs and workforce capacity

Overarching Recommendations

The Service Array Workgroup believes that these service best align with the needs of Oregon's Target Population. The group also believes that child welfare needs to consider the following actions to ensure effective Service development

- Contracts are developed with culturally specific providers to the greatest degree possible
 - E.g. Providers that serve American Indian/Alaskan Native & Black/African American populations who the Target Population workgroup identified as most disproportionately represented in our system.
- Contracts that are not developed with culturally specific providers should include very specific standards for cultural responsiveness
- Contracted providers should demonstrate the capacity to meet the needs of parents and youth who experience Intellectual and Developmental Disabilities
- Child Welfare should continue to invest in the development and research of Culturally Specific EBPs so that they may be able to be claimed on in the future

Questions?



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