



# FAMILY CENTERED TREATMENT

# Family Systems/Trauma Treatments to Confront the Child Welfare Crisis

Kathi Cauley, Jefferson County Fred Johnson, St. Croix County

## Population Needs- St. Croix

- Increase in child protection services due to drug abuse/use of parents resulting in out-of-home placements
- Complex unmet mental health needs of children
- Youth Justice
- Increase in younger children needing services



# Child Welfare Crisis – St. Croix County

#### Placement Data

Placement	2014	2015	2016	2017	2018	
Foster Home, Non Relative	12	11	17	21	17	
Foster Home, Relative	2	3	8	23	37	
Kinship	1	3	10	13	11	
Residential Care Center	1	2	0	5	3	
Shelter	4	0	0	5	5	
Detention	0	0	1	2	1	
Group Home	3	2	1	0	2	
Corrections	0	1	0	0	0	
Trial Reunification	0	2	0	2	1	
Missing From Care	0	0	1	0	0	
Totals	23	24	38	71	77	



# Population Needs - Jefferson County

- **Few private Outpatient Clinics in the County**
- ❖ Increase in child protection services due to parents with opioid abuse issues.
- Complex unmet mental health needs of youth
- ❖ No Family Therapy services in the County



# Child Welfare Crisis - Jefferson County

#### Placement Data

Alternate Care Placements - Children											
SETTING	2011	2012	2013	2014	2015	2016	2017	2018			
Foster Care	125	130	82	127	112	108	114	105			
Residential Treatment Center	6	5	2	6	7	12	9	7			
Juvenile Corrections	3	1	0	0	0	0	0	0			
Group Homes	12	18	11	13	17	12	16	6			
Detentions	47	35	68	76	45	23	15	10			
TOTALS	193	189	163	222	181	155	154	128			



# FAMILY CENTERED TREATMENT

- ❖ North Carolina/Virginia based organization
  - 25 years of existence
    - Private, non-profit
    - Board of Directors
  - Practitioner developed
- Partnerships with Duke & University of Maryland School of Social Work
  - Rigorous research and recognized as an evidence-based practice

#### Four Phases of Treatment

**Joining and Assessment** 

Gain family trust and identify strengths
& areas of family need

Restructuring

Identify maladaptive patterns and practice new skills

**Valuing Changes** 

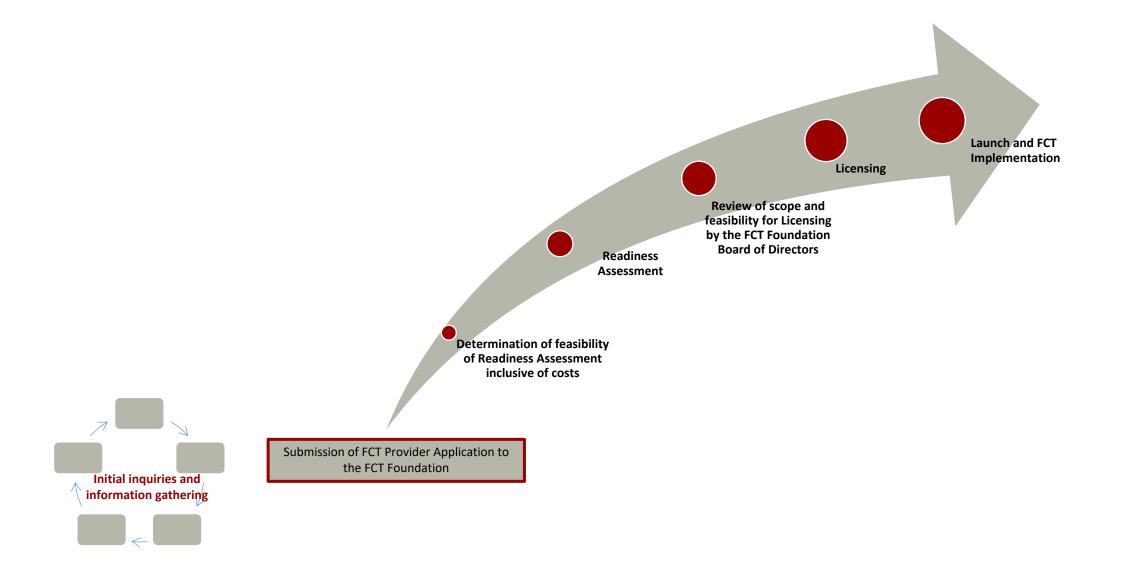
See change as necessary over compliance

**Generalization** 

Skill adoption and predict future challenges

Systemic Trauma Treatment

# Path of Implementation



# FCT FOUNDATION CONSULTANTS

Primary objective is to move organizations through stages of implementation to achieve full implementation

- **❖** Training
  - Onsite and Offsite weekly
  - Supervisors and organizational Trainers
- Case consultation/staff modeling
- Supervision consultation modeling
- Fidelity and Adherence monitoring
- Setting up systems within the organization to 'self monitor'
  - 3<sup>rd</sup> party audits and reporting of model metrics
- Community/Stakeholder training and consultation
- Establishing and revising service standards to reflect current needs and sustainability
- Implementation Driver Assessment completion, analysis, and monitoring

# Structure and Funding- St. Croix County

#### **Funding Sources**

- Promoting Safe and Stable Families Allocation
- Comprehensive Community Services
- County Tax levy

#### Organizational Structure

- Certification under Behavioral Health Division through the Division of Quality Assurance
- Staffed under Children Services Division
- Ongoing collaboration and consultation between Behavioral Health & Children Services



# Structure and Funding- Jefferson County

#### Funding Sources:

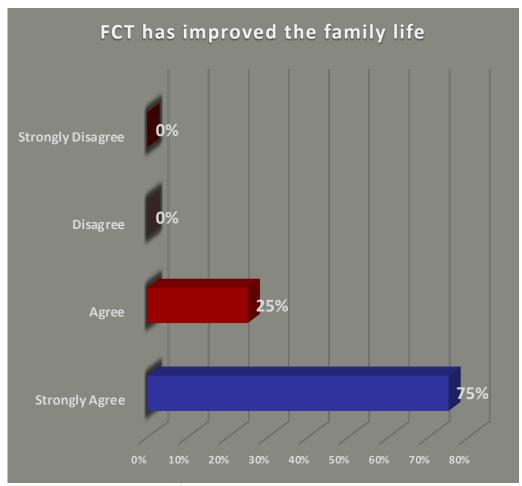
- Comprehensive Community Services (CCS)
- ❖ Substance Abuse Prevention Block Grant
- Tax Levy

#### **Organizational Structure**

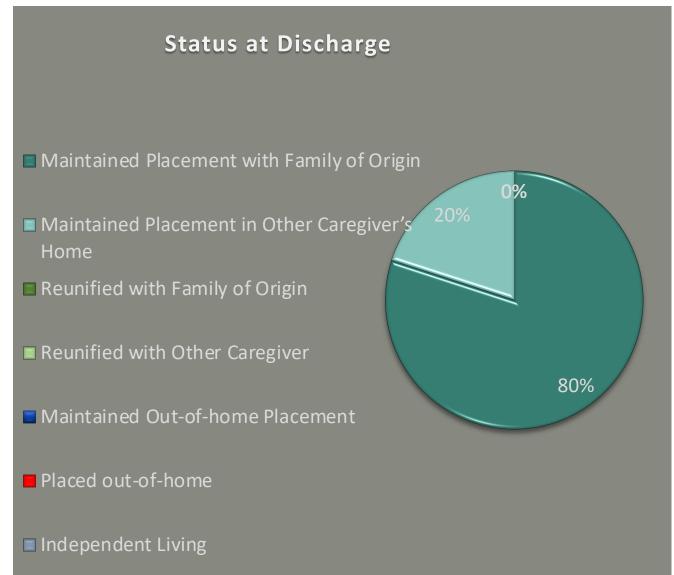
- **Certification under Behavioral Health Division through the Division of Quality Assurance as part of CCS**
- ❖ Lots Ongoing collaboration and consultation between Behavioral Health & Children Services



#### Outcomes- St. Croix County County







# Outcomes- Jefferson County

- FCT currently has 9 enrolled families.
- ❖ All of our families are on target to meet their identified FCT goals. I have pulled the following data:
- ❖ Our average weekly time spent with a family is 5.5 hours.
- ❖ Our clinicians are seeing families an average of 3.5 times a week.
- 70% of time spent working with families is direct face to face time.
- ❖ It is still too early to re-administer the mind-point Family Assessment Device (FAD) that we use to measure outcomes for 8 of the families. For one family that has reached the mid-point re-administration, their FAD went from a 2.6 to a 1.5 on a 0-5 scale with 0 being no family dysregulation.
- ❖ In addition, none of the families enrolled in FCT have been placed out of home and have been able to stabilize behaviors to preserve in-home placements.



# COUNTY CONSIDERATIONS

- 1) County Child Welfare Needs
- 2) Collaboration between Behavioral Health and Children Services
- 3) Implementation Planning
- 4) Funding Plan





## **County Contacts**

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