

Child Welfare Information Gateway Podcast – FGDM – Family Group Conferencing (FGM)
TRANSCRIPT

Presenters: Female Narrator; Tom Oates, Child Welfare Information Gateway; Julie Treinen, Arizona's Children; Michele Schmidt, LeCroy & Milligan

00:00:00 [Music Introduction]

FEMALE NARRATOR [00:00:03]: This is the Child Welfare Information Gateway Podcast, a place for those who care about strengthening families and protecting children. You'll hear about the innovations, emerging trends and success stories across child welfare direct from those striving to make a difference. This is your place for new ideas and information to support your work to improve the lives of children, youth, and families.

TOM OATES [00:00:33]: Family Group Decision Making is being applied across agencies to engage and empower those with a close connection to a family or child being served by child welfare agencies. Now, the group - which doesn't have to be limited to family members - is given a primary role in case planning and taking the identified steps and actions to hopefully lead to better outcomes for the children and family involved.

[00:00:56]: Hey everyone, it's Tom Oates from Child Welfare Information Gateway, and Family Group Decision Making, while being applied by many agencies and organizations, is being applied in different ways and different methods across the nation. So, today we're gonna explore how one method - The Family Group Conferencing Model - is being used in Arizona.

[00:01:16]: Now in 2015, the Children's Bureau awarded three-year grants under the Building the Evidence for Family Group Decision Making in Child Welfare Grant Cluster. Now, the goal of the grants is to build credible evidence of effective Family Group Decision Making programs and improving outcomes. Now, grantees are also required to employ a what they're calling a highly rigorous local evaluation with the intent to inform both project implementation and produce of how well the interventions and actions actually achieve outcomes related to safety, permanency and well-being.

[00:01:52]: One of the grants was awarded to Arizona Kinship Support Services, which is a part of Arizona's Children - a not-for-profit organization providing child welfare and behavioral health services in about fifteen counties in Arizona. Now, the folks from Arizona Kinship Support Services provide more than just family group conferencing, and we're gonna get to all of that - including how they've incorporated the four-stage model - and we'll also dive deep into what they're local evaluation entails.

[00:02:22]: So, I got the chance to talk with Julie Treinen, she's the program director for Arizona's Kinship Support Services and Michele Schmidt from LeCroy and Milligan, and they are the evaluation partners. So take notice to how the evaluations and the evidence they intend to gather will have a wider implication on how Family Group Decision Making is perceived with specific reference to the California Evidence-Based Clearinghouse. So, besides evaluation, we'll also get into some of the key insights Julie and Michele feel are the must-haves to achieve outcomes and which families may be more open to participating. We'll come back after the conversation and I'll point you to resources and other materials for additional context regarding Family Group Conferencing and Family Group Decision Making overall. But for now, here's our conversation with Julie Treinen and Michele Schmidt.

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[00:03:15]: Julie and Michele, welcome to the Child Welfare Information Gateway Podcast. So, Julie, I want to start with you, here, just first give me an overview on the big sense of what Arizona Kinship Support Services provides, because I know it's a wide array of services.

JULIE TREINEN [00:03:29]: At Kinship Support Services, we serve any kin caregiver caring for their relatives' children and we try to meet any need that they have. So, the navigators work with the families to try to identify their needs and then we try to connect them to services that will help them overcome those barriers. For folks that have yet to become involved with the Child Welfare Agency, services that they most need are legal services, they need legal assistance to obtain a legal relationship, legal guardianship to the kid in their care.

[00:04:08]: And for those families that are formal families - that is they are, the children are in the custody of Child Welfare Agency, they need a lot of information and assistance in understanding the Child Welfare Agency and what it is that they need to do and then finding a whole array of services to help them meet those needs.

TOM OATES [00:04:31]: There's a wide array of partnerships and services you guys have to juggle - of course one of them is, you know, Family Group Decision Making, and you guys have made the choice to follow the Family Group Conferencing Model, you know, developed over by the folks at the KEMPE Center and that four stage model. What was it that made you choose that model and what made you see the need for Family Group Conferencing within your array of services?

JULIE TREINEN [00:05:01]: Family. We chose this specific model, mostly because it's very family-driven as opposed to agency or state-driven. The Family Group Conference that you convene is in the driver's seat as to what the plan should be, and the Family Group Conferencing Model also allows some private family time. So the family gets a chance to discuss how they might accomplish these things without the watchful eyes of agencies that might inhibit their open and honest discussion in the family.

TOM OATES [00:05:36]: So, the four stage model - the referral to hold the conference, the preparation and the planning, then the conference itself, followed by the fourth stage, the post-conference events and planning - how is your staff implementing that within the structure that you have, and frankly, the resources that you have?

JULIE TREINEN [00:05:57]: Right now, we're in the middle of a randomized control trial, so any family that comes to us in need of kinship navigation services is invited to participate in that study. And then based on their random assignment, those that are chosen to do Family Group Conferencing, they're immediately connected with their Family Group Coordinator. So, at the very initial referral stage, the Family Group Coordinator and the Navigator are meeting with the family to do a full assessment of their, of the family's needs with the Caregiver and other participating family. Then, they begin the process of preparation - finding those other supportive family members, some informal supports that the family uses that may not be relative, church members, organizations, things like that the family works with and feels comfortable with. And then once they've found all the participants, then the Family Group Coordinator begins the preparation and working one on one with each of those family members to focus on the point of the meeting, which is to provide safety and stability for the children in care. And then what each of those family or support partners can bring to the family in order to support the plan.

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[00:07:28]: Then, they find the date and they schedule the Family Group Conference and they all come together. The professionals say these are the needs that we have - whether it's child welfare bottom lines on what will be acceptable in the plan, that Navigator talks about these are the needs that you've identified and here are some professional services, we try to give them a menu of options so that they can choose from those that fit with their family and their family culture.

[00:08:02]: And then, after that presentation, all the professionals leave the room and allow the family, in private, to hash out how they're going to make that plan work. And then, at the end of the conference, then all the professionals return, the family submits their plan, and you know, if there's child welfare involved, they have to approve the plan, make sure it meets all of their needs for the safety of the child.

[00:08:30]: Once the family puts the plan, once the plan is approved, the family puts the plan into action and that may be collaboration with the Navigator, receiving referrals, but often times, it's direct help, Auntie agrees to do this to support, Uncle agrees to do that. And so we want to make sure that everybody's doing their part that they agreed to. So, the family in the after conference events really consist of a lot of the Family Group Coordinator checking in with family members – 'how are you progressing on your plan? Are there issues that are keeping you from implementing your plan?' And they discuss that in terms of do you just need more time, or is this plan not working and do we need to convene a follow up meeting to adjust the plan so that it can work out so that they family can actually follow that plan.

TOM OATES [00:09:31]: You know, with the Navigators and the role that they play in supporting the family to make their own plan, as you mentioned, the family gets together on their own and starts to make the plan that then, off course, has to go through approval. Do the coordinators have to kind of walk a tightrope into how much do I let the family really be the leader of their plan and execute the steps that they've put forward, versus taking a step in and maybe helping and maybe guiding. Where is that point where they, they're putting their hands in and helping along the way, or letting the family truly be one to execute all aspects of the plan? Do they have to navigate, kind of a gray area?

JULIE TREINEN [00:10:16]: That's a good question. The role of the Family Group Coordinator is to really facilitate the family's process. So the Family Group Coordinator has no investment whatsoever in the plan, in the goals, in how to achieve the goals. They are there to facilitate the process, to help keep the family in the driver's seat, but make sure the family understands that they have certain bottom lines.

[00:10:45]: The Kinship Navigator serves in a role with the other professionals, just like CPS. CPS says this is what you have to do and this is what you can't do, and the Navigator says "I recognize, you said here's a mental health problem, here's a referral for that, if you choose to use it". I think when they come back and they present the plan, the Family Group Coordinator works with them to articulate their plan to the professionals. Our Navigators have a tendency to follow what it is that the family is wishing to do, I can give you an example.

[00:11:28]: We had a family come in and the reason for relative placement was because the young lady's mother had died - and so there were definite grief issues involved - and they did not want mental health help, professional mental health help, for that. And so there was a discussion in the professional time of, you know, if you are not going to use professional help at this time, what are you going to do? What

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informal supports are going to be there and how are you going to know if that's effective? And if that's not effective, then, you know, at what point will you trigger utilization of that referral?

[00:12:17]: So, it is kind of a soft touch, remembering and respecting that this family has to carry out this plan, and so we really need to keep with their culture and their wishes, but at the same time, we can point out to them, maybe some flaws in their thinking, or some, and if that doesn't work, what else can you do so you have other options as you go?

TOM OATES [00:12:43]: Yeah, there's a guiding factor in kind of shepherding without making, taking the steps for somebody. You know, I think one of the strengths of your organization is all the various partnerships that you guys are bringing together to provide services or information for the families you serve. How are your partners - and you mentioned, let's say one of them, legal services or other partners - then come to part of the plan where it's specific to Family Group Conferencing, do you find that you're really reaching out to all of those partners from all of your array of services, are they also involved in the FGC that you're putting together?

JULIE TREINEN [00:13:23]: No, they're not. If the family is connected with behavioral health services, their behavioral health provider would be part of the Family Group Conference. The Kinship Navigator represents all of those partnerships and what services we've arranged. Our legal partners, we hold a Guardianship Clinic, so we have a prearranged agreement with Southern Arizona Legal Aid for lawyers to show up, how do we do an intake for the client to be able get the service from the lawyer, when do they show up, how do they get the aftercare help if that clinic wasn't enough - those are all prearranged with our partners, usually in Memorandum Of Understanding. And so the Navigator can represent what services are available from all of those partnerships in the Family Group Conference.

TOM OATES [00:14:24]: Okay, thank you, thank you for clarifying. So, Michele, I want to bring you in here as we start to talk about so many, maybe informal solutions or ways that family members are, kind of, executing this plan together. While it may not be super structured, if somebody agrees to do something, then they agree to do it, or what's the best option, as the Coordinator helps the family move forward? From your point, in terms of evaluating all this, how do you determine what are measurements and what are outcomes?

MICHELE SCHMIDT [00:14:55]: Sure, that's a great question. So, basically, part of this grant the California Evidence-Based Clearinghouse for Child Welfare, which is CEBC, they currently list the Family Group Decision Making Model as a level three, which is defined as a promising practice and through our evaluation design - which is a rigorous experimental design model - a goal of the project and the evaluation is to produce evidence that will move the Family Group Decision Making Model from a level three to a level two, which is a program that is considered to be supported by research evidence. And specifically outcomes are measured up to six months post the intervention.

[00:15:46]: And so, we designed our formative and our summative evaluation questions, our measures and the actual outcomes very specifically to meet this need, basically. And, the formative evaluation refers to process - so how the evaluation is, or how the project is carried out by staff, outputs such as the number of clients involved, the services similar to what Julie just talked about, all of the services that they're receiving, what are they actually receiving, what are the characteristics of clients by each study group, the different eligibility criteria, so we have - we don't necessarily have, as all families are

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welcome, how families are eligible for an open Navigation case, which would prompt them to be invited to participate in this study. So, we're tracking that.

[00:16:46]: And we also track the things such as contextual factors that are supporting enhancing the model challenges, facilitators, barriers; to staff actually implementing the model and then other qualitative pieces such as client satisfaction and any barriers that they are experiencing to permanency in this model. And we're also measuring fidelity - so that's a second area, so we have process evaluation questions, we're measuring fidelity through several ways and that's basically to answer the question of to what extent are staff implementing the Family Group Decision Making Model with fidelity to the KEMPE Center model.

[00:17:35]: So that's the model that we have chosen, staff have received the full training and some follow up training and coaching on this model, and so we're tracking that through a variety of different ways. And then finally our summative evaluation, which is actually looking at the outcomes - what is happening with families? And so the three areas that we have specifically chosen to focus on, the first one is placement and/or family stabilization outcomes. So, examples of these are rates of entry and reentry into out of home care - specifically through removal through Department of Child Safety - that would not be, that's something that we would want to track. Any number of placements that a child might make until they get into a stabilized permanent placement. And if there's any reunification with biological or adoptive parents, that could be a possibility. Planned placement stabilization, so establishing of a legal relationship, so if they are a Kinship Caregiver moving from a Caregiver to actually having a legal relationship that could be recognized by the courts, recognized by the school system, by doctors if you wanted to take the child to medical care.

[00:19:02]: And then, so our second area is looking at child safety outcomes and safety is defined in this study as Department of Child Safety intervention - so Department of Child Safety is our Child Welfare, Child Protective Services in the State of Arizona. And so, we look at hotline calls - so if there were any calls made on behalf of the families in the study, as well as if there was an investigation and if something was substantiated or unsubstantiated and then again, if something is substantiated, what is the outcome of that, if there's a removal, and then what type of placement happens after that removal.

[00:19:47]: So, looking at child safety outcomes, and then we also look at caregiver and family-level outcomes and through that, that comes from - so let me actually back up for just a moment, the child safety and the placement permanency outcomes, that is, we're gathering that data, not only through Caregiver self-report, but through administrative data that we are collecting in partnership through, as Julie mentioned, through a data sharing agreement and an MOU with the Department of Child Safety. So we are able to confidentially and securely access that data. So, we're looking at the actual hotline calls - substantiation, unsubstantiation - rather than somebody self-reporting oh yeah the children were removed or no, they're still here. So, it's looking at administrative data, which is considered a high-quality level data source as opposed to self-report.

[00:20:47]: But, the third area, the caregiver family-level outcomes, we are doing a follow-up survey with families and we're conducting it roughly six months post their case closure. So, they have their intake, they have - are randomized into the Family Group Conference treatment group - and then will go through the stages of the Family Group Decision Making Model, they have their conference, they have their post-work - and so once the Navigator, the Family Group Coordinator and the family agrees that the case needs to be closed - and it could be for a variety of reasons - the ideal reason is that all of their

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navigation permanency goals were met. So after case closure, six months later we do a follow-up survey and that is meeting that level-two requirement of the California Evidence-Based Clearinghouse. And for that follow-up survey, we have measures specifically from the family needs scale, which is a scale that is developed to basically understand what are families' current immediate needs, related to a variety of basic needs that would need to be met for a family to be in a safe and stable situation.

[00:22:13]: And then also are utilizing scales from The Healthy Families Parenting Inventory, also called the HFPI, and this looks at social support, problem-solving, mobilization of resources, parent-child interaction, home environment. So, it's an outcome measure that helps to identify how, what Protective Factors are in place with families, what supports they have in place, and it's also, actually a measure we're going to be receiving training on this, in the following month that staff can utilize to identify areas that may need strengthening for families. So, those are all of the, kind of in a nutshell all of the different measures that we're using and they've been purposely selected for looking at trying to move the Family Group Decision Making Model to a level-two for the California Evidence-Based Clearinghouse.

TOM OATES [00:23:24]: A lot of those you're pointing toward measurements or established, like you mentioned, the Protective Factors that have been recognized as things that lead to improved outcomes, so you can see why, you know, CEBC looks at that going from a level-three to a level-two.

[00:23:41]: So I, and I know it's early in the process, you mentioned folks getting trained on the model, that was back in, you know, really it was around January or February of 2016, so we're not really dealing with a great deal of times, so, initially - and I know that the numbers are still yet to be really sifted - what are those initial program indicators that you are seeing to help, really, some other agencies that may be considering implementing something like this or where they would spend their resources? What are those initial program indicators about maybe which families would be more or less likely to participate in the Family Group Conferencing?

MICHELE SCHMIDT [00:24:18]: Well, actually, I think from a staff perspective, I don't know if Julie wanted to chime in, I know she has some ideas about families with higher needs, families with - they could have multiple children - so a larger family group, families that are able to identify part of the planning process and the preparation process is to identify who are the people you would like to be at the Family Group Conference, and who could be, kind of gathering your tribe, so to speak, to be attending that. And so, people need to be open to that process, where they're identifying people and possibly bringing in people that they may or may not have their own personal relationship issues with somebody that you would have at a Family Group Conference, and so that's part of the Family Group Coordinator's role, is to help prepare and work with each and every family member to get them to the place where they can be confident to participate in the meeting process.

JULIE TREINEN [00:25:29]: One of the things that we've recognized is that some of the families assigned to the Family Group model, that condition, they're not following through with the Family Group Coordinator, they're not actually making it past the preparation stage to an actual Family Group Conference. And, so when we noticed some of those difficulties early on, we had the staff get together and talk and we had to make some guesses as to what's going on and what might be causing this. We don't have the data for Michele to crunch the numbers and tell us definitively what to do.

[00:26:09]: So, we made some guesses and one of the things that we learned is that like Michele said, if they have an identified group of people that they'd consider to be in their Family Group Conference,

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even if they have strained relationships, if they can identify those folks and they're willing to work with the Family Group Coordinator to kind of smooth over those relationships, in the process, they're more likely. We have folks that just can't identify any other people to be part of the Family Group Conference, and of course then they consider that to be a waste of their time because they have nobody to convene.

[00:27:01]: Like Michele mentioned, we have grandparents that are taking in six or more of their grandkids at once, these folks are overburdened just by the number of children, and so they're like, "hey, we'll take all the help we can get." And so, they're very interested in participating and drawing down those natural supports that they can use.

[00:27:28]: One of the other things that we found that was really interesting is, at first we were having the Navigators do the assessment of the family needs and once the Navigator assessed the family needs, then the family Group Coordinator was reaching out to do prep. Now, the Family Group Coordinators reported it just felt like a cold sales call and the reception that they were getting from the family kind of felt that way, as well. And so, what we did was we made a change in our process and the if, once assignment to a group is done, once they've enrolled and assignment to Family Group Condition is established, the Family Group Coordinator and the Navigator meeting together with the family, they're building that relationship with the family member, which makes them more likely to engage and follow through with their Family Group Conferencing.

TOM OATES [00:28:23]: So, Julie, for all of those other agencies that are either implementing something like this or coming close, or want to improve their ability to execute, you know, Family Group Decision Making, or, in a model like this with the Family Group Conferencing, what's the one piece of advice you would either give to an agency, or even give to the Navigators out there to help them lead to better outcomes and maybe, you know, a smoother relationship with the families?

JULIE TREINEN [00:28:52]: I think active listening to the family as the family express their needs, that's really important. I think one thing that the agencies have to recognize is this is a very intensive intervention. It requires a lot of time commitment on the family's part, and so if the family's needs aren't great, the family is not going to sign on for an intensive intervention. We put this model and we're using it with our lower needs as well as those that are higher needs and involved with CPS, so some of our families that we serve have not yet become involved with the Child Welfare Agency. The caregivers are attempting to avoid that and if their needs have not yet gotten to a high level, they have a really hard time putting in the investment that Family Group Conferencing entails. So it is labor-intensive, both for the agency that's providing the service and for the family that's gonna participate in the service.

TOM OATES [00:30:08]: So, obviously, it's not just, you know, across the board everybody can be applying, it's a great fit for everybody, I think agencies now need to be a little careful to kind of, recognize where tools like this need to be implemented, where they can be implemented and make sure, and you talked about it, that it's a stress, you know, on the agency that you've got this staff that are able to handle it, because this is not something that you can dedicate part-time, this has gotta be something that you can dive into and understand the intensity that you're asking from somebody and the intensity that it requires from the coordinators and from the agencies - am I pulling on that right?

JULIE TREINEN [00:30:45]: Yeah, and the Family Group Coordinators definitely have to have some skills in negotiating difficult relationships within families. The same issues that are happening in a family that

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are requiring a relative caregiver to step in, those are also causing really strained relationships - and there's history of this strained relationship, there's old lumps - and so the Family Group Coordinator has to very delicately - and they have to be skilled to very delicately navigate that with the family, so as to not make the issues worse - to remind the adults that we're not here to resolve all those old issues, we are here to focus on the needs of this child. And to the extent that the Family Group Coordinator is able to keep all the adults focused on "we are here for this child", then they're able to keep some of the past drama out of the process.

TOM OATES [00:31:51]: Michele, do you have anything to add, you know, any evaluation information that would support what Julie's talking about here?

MICHELE SCHMIDT [00:31:58]: Yes, I do, actually. We completed, as of April 2017, we completed our formative evaluation process, so that is looking at how the project is implemented - and so from that, we did some interviews with staff and asked questions about the project's strengths and the key facilitators and so I wanted to just echo almost exactly what Julie said as to what staff said are some of the key facilitators of implementing the Family Group Decision Making model with success.

[00:32:36]: And so, one of the first themes was using family engagement strategies to support the process - and so this includes using evidence-based practices such as motivational interviewing to engage families during a time of crisis as well as when things may be calm, and being able recognize that if families are in a situation of crisis. Really empowering and honoring the family's right to choose their own plan - and so, making it a family-centered model. And so, these are all active engagement strategies. Listening well to families, encouraging them to share their story, asking open-ended questions. Identifying and helping the family to name their own strengths, and how this process can be a benefit for the family, even if they might feel overwhelmed by the whole situation.

[00:33:42]: A second area that came up in staff discussion was the staff team collaboration, so there's a team of Family Group Coordinators and Navigators working together to support the families in the treatment group, who engage with the Family Group Decision Making Model - and so, the staff teams need to have good communication with each other about that case and so that nobody feels in the dark on anything, basically, they need to work collaboratively to assess the family's needs and strengths and support the family by finding as many resources as possible for them and also preparing them for the Family Group Conference.

[00:34:31]: So that staff team collaboration. And then a third area was staff skills training, as well as supervision. So, in addition to the staff team that has the direct contact with families, they are supported by their own supervisor, by Julie, the project director, and so, as well as the KEMPE Family Center, the trainer that we have in any, so, initial and ongoing training, as well as any coaching. We also are collaborating with another site in the country located in San Diego, California - they're also implementing a very similar model and study for Family Group Decision Making - and we've been doing some, kind of, self-study site visits back and forth in both of our locations so that we can learn from what it is they're doing, they can learn from what we're doing with this process.

[00:35:34]: And, so, just basically having that supervision, the training and all of the support and the skills specific to family engagement, things like that. As well as overarching skills such as, that are very specific, for areas such as domestic violence intervention, identifying families in crisis and supporting their immediate needs, so and those are general skills that Julie provides all of her staff.

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TOM OATES [00:36:08]: And to have that, that source of, I don't know, be it information or be it guidance or be it training, like you mentioned, going back to the KEMPE Center or working with the partners in San Diego - and I know at times it can feel like agencies or folks are all alone out there because they're so swamped having that extra support for yourselves, you know, it's important along the way, especially what you mentioned, Michele, about learning and following that continuous quality improvement.

[00:36:39]: Julie Treinen, Michele Schmidt I thank you guys so much for sharing what you've learned so far, and again I know this is in the early stages, but seeing how you guys are implementing can help others across the nation either improve what they're doing, or help them make decisions on where they want to go forward in terms of implementing something within Family Group Decision Making or just, you know, providing the right types of services and the right level of services - and really, the right resources and staff for the families that they serve. I want to thank you guys so much for your time, thanks for joining us here on the Child Welfare Information Gateway Podcast. And you guys, again, Julie, Michele, thanks so much.

JULIE TREINEN [00:37:17]: Thanks for having us.

MICHELE SCHMIDT [00:37:18]: Hey, thank you!

TOM OATES [00:37:22]: Now, there's a lot of material on Family Group Decision Making, so if you go to this podcast webpage on acf.hhs.gov/cb, we've put up some links for you, including links to the National Center on Family Group Decision Making, information about family engagement, including the Family Engagement Inventory, which collects resources, program strategies and other materials from five different disciplines - that's Child Welfare, Juvenile Justice, Education, Early Childhood Education and Behavioral Health. And we'll also point you to the Family Group Decision Making web section over on Child Welfare Information Gateway.

[00:38:00]: We plan on diving into this topic in some other podcasts, as well, to take a look at how else family conferencing and family engagement are being delivered across the nation. And so, if you want to check out our other podcasts, we are racking up quite the collection, just visit the Children's Bureau's website and search 'podcasts'. Of course if you're looking for any resources or tools, including helpful fact sheets you can share with colleagues or families, visit Child Welfare Information Gateway at childwelfare.gov. There's a live chat function, so you can connect with one of our information support specialists to help you find what you need. Also, check out our library, with nearly 90,000 titles, it's the nation's largest library solely dedicated to Child Welfare.

[00:38:44]: You know, I want to thank Julie Treinen and Michele Schmidt for joining me in diving into Family Group Decision Making and giving us a peek into what their doing in Arizona. And as always, my thanks to you for listening to this and all of the Child Welfare Information Gateway podcasts, I'm Tom Oates, have a great day!

FEMALE NARRATOR [00:39:07]: Thanks for joining us for this edition of the Child Welfare Information Gateway podcast. Child Welfare Information Gateway is available at childwelfare.gov and is a service of the Children's Bureau, U.S. Department of Health and Human Services Administration for Children and

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