

COMBINED IN-HOME SERVICES ANNUAL REPORT



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Executive Summary

ESSB 5187 (2023) Section 227 (26): "By December 1, 2023, and annually thereafter, the department shall provide a report to the legislature detailing combined in-home services expenditures and utilization, including the number of families served and a listing of services received by their families." The Department of Children, Youth, and Families (DCYF) has a contracted suite of services called Combined In-Home Services (CIHS). These services are authorized and described under RCW 74.14C.040 and RCW 74.14C.050 (Intensive Family Preservation Services and Family Preservation Services) and are family-focused, behavior-oriented, in-home counseling, and support programs. This report includes an overview of the specific service types under CIHS and DCYF's fiscal year (FY) 2023 expenditures (\$16,332,125). This represents 8,135 cases being being provided CIHS, which is 23.5% of the totals cases serviced in Child Welfare. Efforts are underway to expand capacity for family access to these services, as well as expanding our array of culturally responsive service offerings. DCYF is exploring payment methods to incentivise current providers, expand the array of services, and fill service gaps across the state. Targeting the service utilization of services in the front end of child welfare involved cases will be at the forefront of efforts in the next calendar year.

Introduction

Combined In-Home Services, or CIHS, are a suite of contracted parenting services available to families involved with DCYF child welfare. They consist of: Family Preservation Services, Intensive Family Preservation Services (Homebuilders), Crisis Family Intervention, SafeCare, Promoting First Relationships, Parent-Child Interaction Therapy, Incredible Years, Triple P, and Functional Family Therapy. These services address a variety of parental related needs such as attachment/bonding, structure and routine, counseling, coaching, concrete supports, connections to community resources, and crisis stabilization. They range from crisis oriented, birth to small child Evidence Based Practices (EBP), and school aged to adolescent EBPs. EBPs are supported by research to achieve specific outcomes within a population. DCYF's EBPs are well-supported or promising practices identified by the California EBP Clearinghouse and some are also identified in the Family First Prevention Services Clearinghouse for positive outcomes with the child welfare population (e.g., improved parent-child attachment, placement prevention, successful reunification, and decrease in parental stress). See Appendix for details of each individual service. This report provides the details requested in ESSB 5187 (2023) Section 227 (26) as well as DCYF strategies to increase CIHS utilization.

Fiscal Year 23 CIHS Expenditures by Service Type

The table below shows expenditure for FY 2023 of each CIHS type and the total for all. It does not exclude families who received more than one CIHS during that time or distinguish between case type (e.g., FAR, CWFS).

Service Type	FY2023 Expenditures
Crisis Family Intervention	127,495
Family Preservation Services	5,789,218
Functional Family Therapy	728,445
Home Builders	3,160,609
Incredible Years	794,064
Parent Child Interaction Therapy	301,198
Promotion First Relationship	1,340,088
Safe Care	1,335,126
Triple P	2,755,884
Total	16,332,125

Calendar Year 2022 Data

Due to data limitations, calendar year 2022 is the most recent full set of data available showing how many families and children received a CIHS. This is a retrospective summary of that data. DCYF has clustered CIHS in to buckets of service types: Crisis Services (Family Preservation Services, Homebuilders, and Crisis Family Intervention); young child EBPs (Promoting First Relationships, Incredible Years, SafeCare, and Parent-Child Interaction Therapy); and school aged-adolescent EBPs (Triple P and Functional Family Therapy). Below are tables outlining the total counts of cases and children who received a CIHS in 2022 as well as the percent of cases and children who received a CIHS compared to the total number of cases and children involved in child welfare. It is common for families to receive more than one CIHS (e.g., FPS and then an EBP) given one service may not address all the needs a family presents with or their needs may evolve; therefore, there are duplicate counts of cases and children in the sets of data. Overall, there were 34,497 families involved in Child Welfare in 2022 and 23.5% (8,135) received a CIHS. While this report shows retrospective data from 2022, DCYF has recently hired a position to assist with ongoing data analysis in what has been named as the Service Penetration Report. DCYF should have regular snapshots of this data set to analyze and report out for future legislative reports.

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Count	of	Cases
count		Cuscs

<u>STATE</u>

	Count of Cases	A Child is 0-5	A Child is 6-17
2022	34,497	19,362	24,677
Grand Total	34,497	19,362	24,677

Percent of Cases that Receive each Service										
	<u>STATE</u>									
Family Preservation Services Crisis Family Intervention Crisis Family Crisis Family Intervention Crisis Family Crisis Famil								Functional Family Therapy		
2022	22.04	0.45	3.26	4.62	3.25	3.25	1	5.25	2.1	
Grand Total	22.04	0.45	3.26	4.62	3.25	3.25	1	5.25	2.1	

Count of Children							
	Count of Children	Child is 0-5	Child is 6-17				
2022	73,350	27,617	45,733				
Grand Total	73,350	27,617	45,733				

Count of Children that Receive each Service										
	Count of Cou									
	Family	Count of		Promoting First	Incredible	Project Safe	Child Interaction	Count of PPP	Functional	
	Preservation	Crisis Family	Count of	Relationships	Years Zero to	Care Zero to	Therapy Zero to	Six to	Family Therapy	
-T-	Services	Intervention	Homebuilders	Zero to Five	Five	Five	Five	Seventeen	Six to Seventeen	
2022	14253	242	2265	1108	797	847	267	2111	869	
Grand Total	14253	242	2265	1108	797	847	267	2111	869	

Percent of Children that Receive each Service										
	STATE									
Family Preservation Services Crisis Family Intervention Promoting Homebuilders First Relationships							Functional Family Therapy			
2022	19.43	0.33	3.09	4.01	2.89	2.89	0.97	4.62	1.9	
Grand Total	19.43	0.33	3.09	4.01	2.89	2.89	0.97	4.62	1.9	

Strategies to Increase CIHS Utilization

Collecting weekly service availability reports: DCYF is collecting weekly service availability reports from CIHS providers to compare with provider reported capacity. This analysis gives a snapshot into unfilled capacity, which is being shared with regional leadership to enhance CIHS referrals from child welfare field staff.

Root cause analysis: DCYF is reviewing referral trends across the state to identify patterns and begin a root cause analysis to increase CIHS referrals. Currently, the data is insufficient to pinpoint a root cause to make needed changes. By doing this feedback data loop over time, DCYF hopes to better understand the referral pattern behavior and address any barriers or practice issues. In Region 1 and 2 (Eastern Washington), there is a Network Administrator (NA) that oversees CIHS and sub-contracts with individual agencies to deliver the services to families. The NA has some data on supply and demand that is useful in determining referral trends and what services are needed and where. DCYF does not have similar data for the rest of the regions as those service referrals are sent directly to individual contractors.

Family Preservation Service Upgrade: DCYF will be convening a workgroup to explore upgrading the most widely used CIHS line (Family Preservation Services). This workgroup will include internal and external stakeholders as well as ensuring those closest to the service delivery are informing the recommendations.

Telehealth CIHS Pilot: DCYF is currently exploring expansion of CIHS via telehealth in a pilot program in Regions 1 and 2. After completion of the pilot, exploration of expansion will be made dependent on the learnings of the pilot testing.

Updating Caseworker Trainings: Service Continuum leadership has been working with UW Alliance training partners to update e-learnings to enhance worker knowledge and better match referrals to identified family's service needs.

CIHS Provider Directory Updates: DCYF is updating the CIHS provider directory, making one consistent directory for caseworkers to access and utilize. Once DCYF has confirmed areas needing increased capacity with no current providers willing or able to expand, we will work with existing contracted agencies to build capacity and or seek new contracted service providers. DCYF is also exploring different payment methods to support current service expansion needs and filling identified service gaps across the state.

Concrete Goods Enhancements: The concrete goods funds CIHS providers can use with the families has been increased to assist with crisis stabilization and economic support. It has been changed from \$200 to \$500 per family, \$75 of those funds can be used for engaging families in the service without pre-approval from the Social Service Specialist. The engagement funds can be used for groceries, a meal, taking a parent out for coffee, etc., to get them engaged with the provider and participate in the service. Concrete goods can address immediate needs the service provider and family identify during the intervention. Recognizing recent inflation trends, DCYF and providers agreed that \$200 was not sufficient anymore, resulting in the increase to \$500 available for the provider to use.

Native American/Alaskan Native and **African American Prevention Services Pilots**: These projects were built from DCYF's diagnostic work in 2020 and 2021 that included extensive interviews and data collection to support DCYF in strengthening prevention services for Black and Native Families. From that research DCYF designed pilots to identify additional culturally responsive services and addressed the service gaps, access and engagement needs for the proximate provider community. An RFA for Native families was released in May 2023, and another RFA for African American families will be released in Fall of 2023. The pilot projects will focus on contracting with proximate providers to build upon culturally responsive community-based solutions and learn how to better support the contracting process for smaller agencies. The intent is to create learnings that will then expand past this pilot and across the service continuum.

Community Pathway Development: DCYF is developing community pathway opportunities under the Family First Prevention Services Act to further prevention efforts and access to services further upstream. These efforts will create opportunities for families who are not child welfare involved but have risk factors that could lead to involvement to engage in a CIHS via prevention pathway. Washington state will submit a Family First plan amendment to the Children's Bureau that will include community pathway design, and additional services that have been approved on the clearinghouse.

Cultural Services Landscape Analysis (CSLA): The purpose of the CSLA is to research and understand the strengths, resources, and needs of the specified populations of children, youth, and families served by DCYF Child Welfare Services in Washington state, including the below population groups. This landscape analysis is being completed by an American Indian and woman owned consulting firm, <u>Kauffman & Associates Inc.</u>

1)American Indian/Alaskan Native (AI/AN)

2) Asian American and Native Hawaiian/Pacific Islander (AANHPI)

- 3) Black and African American
- 4) Hispanic and Latino
- 5) Immigrants and refugees

6) Non-English primary language/American Sign Language (ASL)/ Sign language/limited English proficiency (LEP)/families using interpretive services

Appendix

Crisis Family Intervention

Crisis Family Intervention is a brief in-home crisis intervention service available to adolescents and their families who are experiencing brief conflict. It is for youth ages 12 to 18 and for families in need of support to find immediate and long-term solutions to their conflicts. Services are limited to 12 hours over 45 days.

Family Preservation Services

Family Preservation Services is a family focused, behavior-oriented in-home counseling and support program. It is for children and youth ages birth to 17 and for families to address specific needs and goals. It focuses on reinforcing the strengths of the family and supporting them to gain insight into issues that may result in crisis. Services are limited to approximately 30 sessions, weekly or as needed, within 90 to 120 days.

Functional Family Therapy

Functional Family Therapy is a strength-focused, family counseling model designed primarily for at-risk youth. It is for youth ages 11 to 18 and families who need support to overcome delinquency, substance abuse, violence and/or who may need support across systems (juvenile justice or schools). It helps control threats to child safety, so children can remain free from harm in their own homes. Services are limited to 12 to 16 weekly sessions over three to four months.

Homebuilders

Homebuilders is an intensive service focused on child safety, crisis intervention, connection to community resources and teaching caregiver's problem solving/life skills. It is for children and youth ages birth to 18 and families when removal from the home is imminent or when reunification is planned within seven days. Services are limited to four to six weeks with an average of 80 hours spent on each case.

Incredible Years

Incredible Years is a parent education program designed to be delivered in group sessions or in the family home. It is for parents with children between the ages of birth to 12 (ages served are defined as: *Baby* – Birth to 12 months, *Toddler* – 1 to 3 years, *Preschool* – 3 to 6 years, *School Age* – 6 to 12 years). It focuses on the parent-child relationship, managing child behaviors, discipline and working to keep children safely at home. Parents either meet with a group for 2.5 hours or with the provider in-home every week. The standard length of services are: *Baby* – 8 to 11 weeks, *Toddler* – 12 to 17 weeks, *Preschool* – 18 to 21 weeks, *School Age* – 21 weeks.

Parent-Child Interaction Therapy

Parent-Child Interaction Therapy is a program for young children and parents that places emphasis on improving the quality of the parent-child relationship and changing parent-child interaction patterns. It is for children ages 2 to 7 and families when parent-child interaction patterns, child behavior, and social and emotional development are primary areas of concern. It involves live coaching in which parents are coached by the therapist through an earpiece while the therapist observes their interactions. Services are limited to 12 to 15 sessions.

Positive Parenting Program

Positive Parenting Program is a coaching system of parenting and family supports designed to promote positive parenting and caring relationships between parents and children. It is for children and youth ages 2 to 18 and families when child behavioral issues are the primary area of concern and a primary safety issue for the family is directly related to the behavioral issues of the child. The standard length of service is 10 to 14 weekly sessions that are 50 to 90 minutes each.

Promoting First Relationships

Promoting First Relationships is a system of parenting and child supports designed to promote sensitive and secure relationships between the child and caregiver. It is for children ages birth to 5 and families when the quality of the parent-child relationship is the primary area of concern. It supports parents to experience joy and confidence in their relationships with their infants and toddlers. Services are limited to 10 to 14 weekly sessions that are 60 minutes each.

SafeCare

SafeCare is an eco-behavioral model that provides at-risk parents with direct skill training to prevent child maltreatment. It is for children birth to 5 and their families when basic parenting skills, understanding and management of child's illness and/or injuries and home safety are the primary areas of concern. Services are limited to 18 to 22 weekly visits that are 60 to 90 minutes each; it includes three modules that last approximately six weeks each.