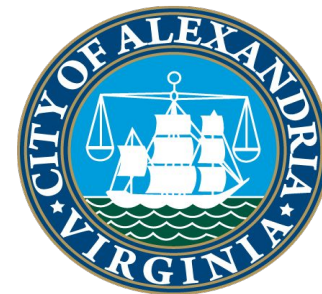


Family Support Partners in Community Services Boards 10th Annual CSA Conference October 29, 2021

Pam Fisher, Office of Child and Family Services, DBHDS
Taisha Chavez, Rappahannock Rapidan Community Services
Cory Will, Rappahannock Rapidan Community Services
Sinae Choi, City of Alexandria Child and Family BHS
Carla Oliver, City of Alexandria Child and Family BHS
Cristy Corbin, Family Support Partners of VA, Inc.



Rappahannock Rapidan
Community Services
Programs that matter. People who care.



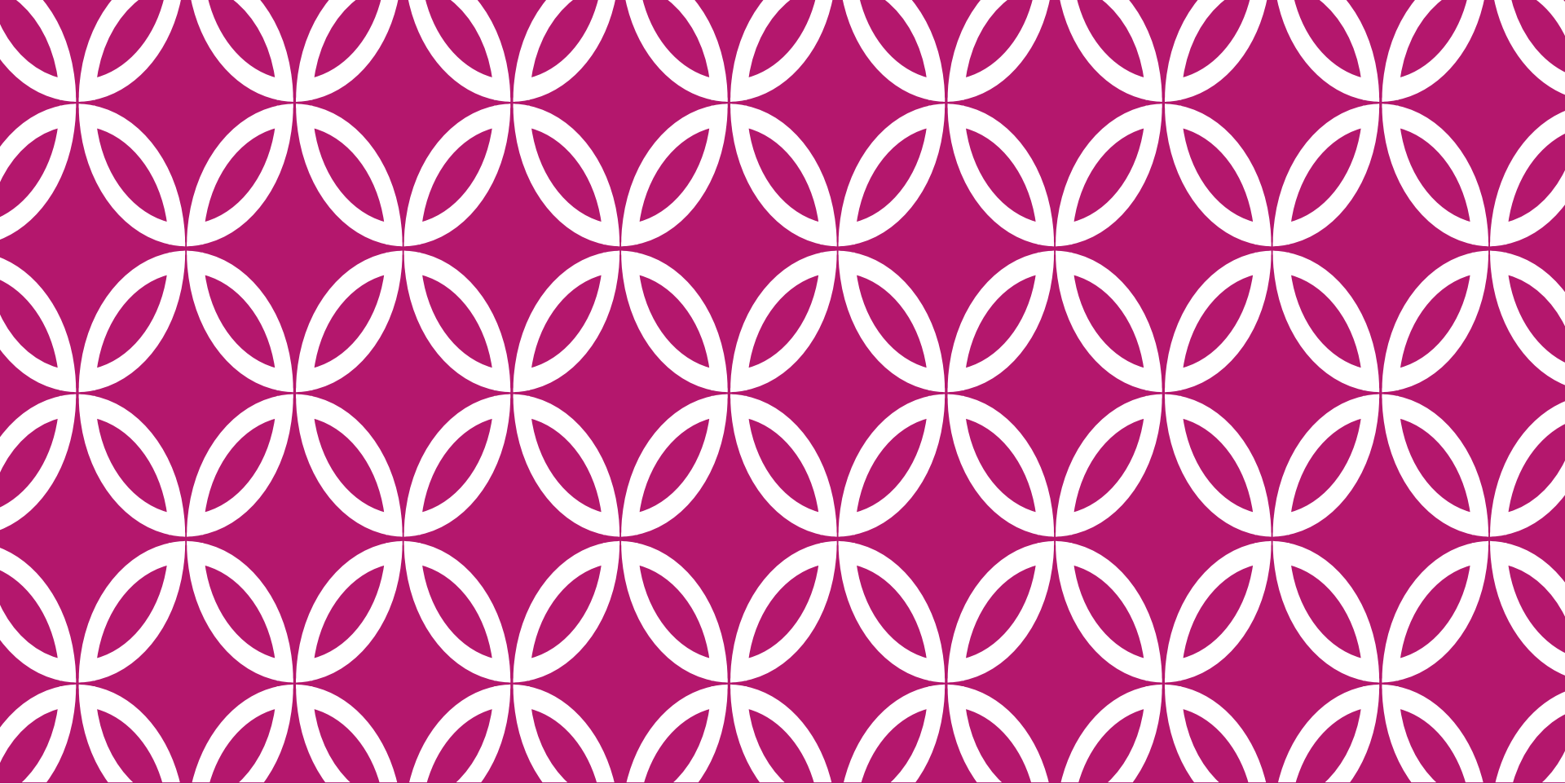
Family Support
PARTNERS OF VIRGINIA



CFBHS

Background/History of Family Support Partners in VA

- 2012-2016: DBHDS received federal System of Care Implementation grant funding
- 2016-2020: DBHDS received System of Care Expansion Grant
- 2017-Cristy Corbin first Family Support Partner (FSP) to complete the DBHDS Peer Recovery Specialist (PRS) training & become a trainer of the curriculum.
- July 2021: \$2,817,000 General Fund Allocation to Community Services Boards (CSBs) for implementation of STEP VA Peer & Family Services
- 23 CSBs submitted proposals to DBHDS requesting to hire or support Family Support Partner (FSP) positions

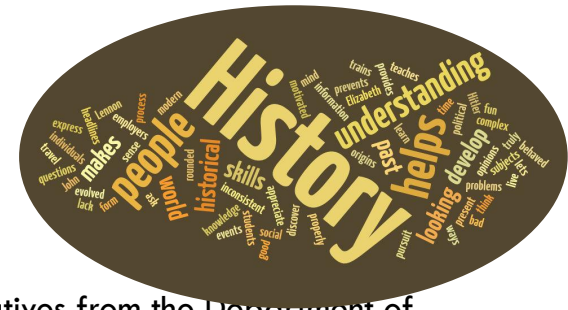


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LINK



THE HISTORY OF LINK



- Innovated approach created through the collaboration of representatives from the Department of Behavioral Health and Developmental Services (DBHDS), Virginia Department of Health, Virginia Department of Social Services, and Virginia Cooperative Extension.

- LINK was designed to reduce the existing barriers to accessing services needed by substance using women and their infants.

- LINK functions were to:
 - coordinate existing services
 - improve communication on behalf of the client
 - enhance the knowledge and skills of service providers
 - reinforce the existing services to address the special needs of substance using women and their children.

THE HISTORY OF LINK



- Initial funding for Project LINK was from Safe and Drug Free Schools and Communities Act, Child Care Development Block Grant and the Substance Abuse Prevention and Treatment Block Grant (SAPTBG).
 - The model was replicated in five localities: Charlottesville, Newport News, Rappahannock (Fredericksburg site), Roanoke, and Virginia Beach; a sixth site- Petersburg, was added in 1999.
 - In 2001, two additional sites were added, Cumberland and Northern Virginia.
 - Some sites use additional state and local funds to supplement their services.
- RRCS LINK program was modeled and created as a solution to the rising number of foster care placements that were occurring within our region due to parental substance use.
- As a solution, RRCS, DSS, and CSA coordinators developed a LINK program to be funded by CSA and provide services to parents (male or female) who are currently using substances or have a history of substance use.

WHAT IS LINK?

- LINK is an interagency, community-based, collaborative program designed to coordinate and enhance existing services in order to help meet needs of parents and children whose lives have been affected by parental substance use.
- LINK began as a collaboration between DSS, CSA, & RRCS.
- The goal is to reduce the number or length of foster care placements that are associated with parental substance use.
- It is classified as Intensive Case management (limit of 12 active clients).
- RRCS LINK services is available in our 5 county catchment area.



LINK'S MISSION

- The LINK mission is to assure that all parents whose lives are affected by substance use are linked with resources that foster their physical, emotional, spiritual, and family well-being.



LINK'S GOALS

- Decrease the incidence of substance use among parents.
- Reduce the length of foster care placements.
- Enhance availability and accessibility of prevention, early intervention, and treatment services.
- Optimize the healthy growth and development of infants born to LINK mothers. LINK coordinators can collaborate with Infant and Toddler connection professionals and help encourage families to participate in the activities that aide in their child's development.
- Strengthen the family unit, promote positive parenting and support the optimal development and functioning of all children in the family.
- Increase interagency service collaboration.



ELIGIBILITY TO THE LINK PROGRAM

- Parents, men or women, who are using substances or have a history of substance use.
- Postpartum women who have delivered Substance Exposed Infants (SEIs).
- Children with a CSA mandate of foster care, foster care prevention, CHINS.



COORDINATION OF THERAPEUTIC SERVICES

- A LINK coordinator can provide- Substance abuse screenings & assessments, Agency referrals & follow up, aide in creating relapse prevention plans, and Home Visits.
- Assists individuals in navigating the system and obtain Substance abuse treatment (inpatient, IOP, recovery groups, peer services, etc.).
 - The LINK coordinator can also make referrals to primary care physicians, domestic violence services, sexual assault/trauma services, support meetings, and the Virginia Dept of Aging and Rehab services.
- Provide psychoeducation, parenting techniques and resources, techniques for time management and organization, medication management etc.
- LINK staff have been trained on the evidenced based program, Seeking Safety



LINK, PEERS, AND COMMUNITY COLLABORATIONS

- The success of the LINK program within our community has been in part due to the involvement LINK staff have had in various community coalitions centered around SA services and prevention.
 - Provided collaboration on community resources and education around substance use.
 - Advocated for representation of a peer specialist in community decisions.
- In order to meet the needs of their communities, LINK coordinators began offering their support in other settings.
 - Child Care centers
 - Free clinics
 - SEE Recovery Center



Peer Recovery Program Family Support Partners



Rappahannock Rapidan
Community Services

Programs that matter. People who care.

Program Development

2015 – PRS and FSP for Early Intervention for adolescents and young adults who experienced their first episode of psychosis.

-Fully integrated multi-disciplinary treatment team

Only peers in the agency

2020 – Peer Recovery Program Established

-Peers used outside of other services as stand alone service or coinciding with other services



Current FSP Programming

- Family Support Partner with FEP team
- Mental Health background, family member previously utilized the program
- Fully integrated team treatment plan and notes
- Due to a small case load, we were able to utilize the FSP within our community based peer program
- The FSP is on the Marcus Alert committee and runs multiple family support groups



Current FSP Programming

2020 – Peer Recovery Specialist who also has family experience on the Community Based Team

-Works collaboratively with the SA Link Program and Case Manager in her area

-Increased engagement in services

-Improved outcomes at home with family involvement

-Education piece has been the biggest factor

“I didn’t know what I didn’t know...” Cristy Corbin



Growth Areas

- Higher rates of Substance Use with negative impact on the family units
- Supports and Family Involvement Limited
 - Systemic
- Freedom of Movement within Roles
- Areas of Contact and Connection



Future FSP Roles

- Family Support Partner with an SUD background
 - Based at the S.E.E. Recovery Center
 - Partner with the FSP-MH with Outreach
 - Co-occurring Support Groups for Families
 - Educational Groups for Families
 - SUD Treatment/Recovery System Education



Future FSP Roles

-Family Support Partner-SUD with Child Services

***DBHDS Pilot Project CY 2022*

-Integrated with SA Link

-Targeted Outreach/Engagement

-Substance Exposed Births

-Family Services

-Pre-DSS Involvement

-Family Dynamics Education and Support



Recruiting Efforts

Targeted Recruiting

- NAMI Peer to Peer Groups and Trainings
- Mutual Aid Meetings (AA, NA)
- Family Aid Meetings (Al Anon, Nar Anon)

Advertisement Through Current Systems

- Child / Family Services
- Parent Skills Development Programs



City of Alexandria, Virginia

Department of Community and Human Services/Community Services Board

Family Support Partner Program



Alexandria FSP Program Origins



- Ongoing System of Care funds in FY '07 included funding for two half time peer positions
- SOC expansion funds from 2014 – 2018 allowed for implementation of High Fidelity-Wraparound (HFW) and an additional two half time FSPs
- FSP part-time positions consolidated in 2018 to two full-time positions
- 2019 FSP Coordinator position was created through reclassification

Early FSP Activities



- Education
- Linkages to services
- Groups for caregivers
- Work with parent leadership groups

Current FSP Services



Mission: Support Caregivers as leaders in their children's services

Prioritized population: Families with multisystem involved youth at risk for out of home placement.

Primary Activities: High Fidelity Wraparound
Family Support Services (non-HFW)

FSP Recruitment



- Community family leadership networks
- CSA List serve
- Religious/spiritual organizations
- Local stakeholders

FSP Onboarding



- Warm welcome
- Introduction to internal partners and key stakeholders
- City, Department, Program training
- Shadowing opportunities to observe system activities including FAPT
- Initiate FSP competency training in key skills

FSP Administrative



- FSP program embedded in Child and Family Behavioral Health Services (CFBHS)
- Dedicated FSP Coordinator
- Administrative and supervisory support from CFBHS Supervisory Analyst and Team Leader
- Referrals from Public Child Serving Agencies
- Funding: CSA, PSSF, Self-Pay
- Documentation: Credible – Electronic Health Record

FSP Supervision



Supervision Modalities:

Individual, Peer group, HFW/FSP program and statewide coaching groups

Supervision Themes:

- Balancing FSP staff needs with the needs of caregivers
- Vicarious Trauma related to direct service work
- Peer vs clinical interventions
- Setting professional boundaries while maintaining authentic relationships with caregivers
- Utilizing a racial equity lens in direct services
- Collaborating with other team members
- Supervision for the supervisor

FSP Racial Equity Commitment



- Membership on the DCHS Racial Equity Core Team
- Participation in BIPOC Caucus
- CFBHS HisCla Workgroup
- Racial equity specific professional goals in all Performance Evaluations
- Department and Program Racial Equity Training

FSP Participation in Alexandria System of Care



- Community and Policy Management Team
- Crossover Youth Practice Model (CYPM)
- Alexandria City Public Schools Attendance Panel
- All CFBHS Interview Panels
- Active member in each family's multidisciplinary treatment team meetings

FSP Impact



Residential treatment use since onset of System of Care programming including FSP services.

Fiscal Year	# Youth in Residential Tx
2008	66
2018	22
2019	19
2020	14

FSP Future Initiatives



- Expand FSP Services for Adult CSB clients
- Develop a network of former Alexandria system involved youth and caregivers for future peer positions
- Build a Youth Support Partner program

FSP Lessons Learned



- Support from leadership and systems partners
- Solid onboarding process
- Importance of FSP specific competency training
- Critical need for FSP Supervisor to be a FSP
- Advocacy for livable salaries

Coming Soon

- Training and TA to support providers interested in FSP Implementation
 - Specific TA from Cristy is available upon request
 - Planning to Partner with the national Family Run Executive Director Leadership Association to provide one or more training sessions on these topics:
 - Recruitment/Hiring
 - Onboarding/Supporting Peer
 - Ethics
 - Boundaries
 - Compassion Fatigue
 - Trauma Informed Care and how to support workforce taking care of self especially when triggered by workplace experiences

Q & A



Contact Information

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