Preparing Staff to Present at FAPT

Presented by:

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Geocaching!



THE KEY I S THE KEY

The Keys to FAPT



What's the Logo?
What does it represent?



What's the Logo? What does it represent?

WHAT'S YOUR LOGO?

HOW DO YOU REPRESENT...



YOURSELF?

YOUR FAMILIES?

YOUR AGENCY?

REPRESENT WELL

- Know your BRAND
- Know your AUDIENCE
- ADVOCATE for your CHILD/ FAMILY
- PREPARE

1. REPRESENT WELL.

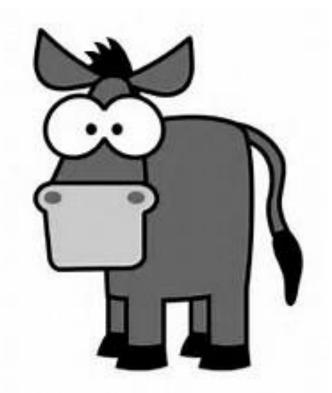
Know the ASSUMPTIONS



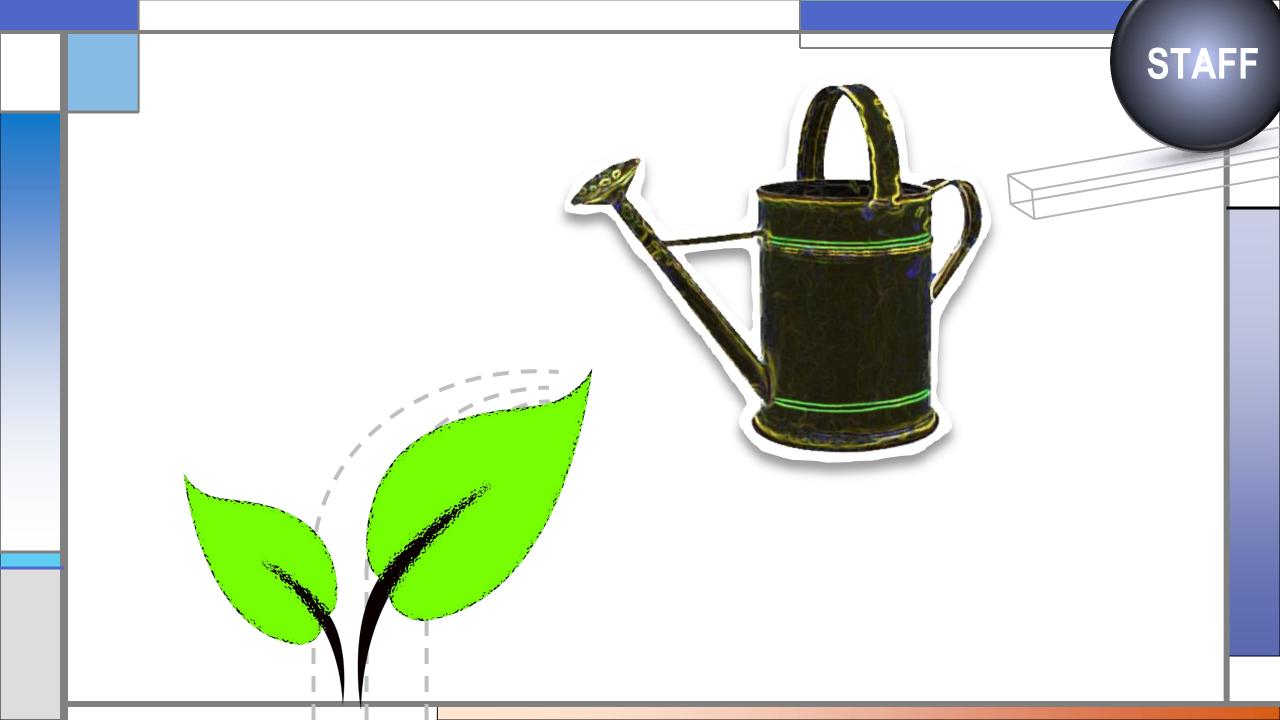
Common sense is not that common

We are not always as clear as we intend

FAPT is **not** just part of the job



Do we THROW them in?



- 1. REPRESENT WELL.
- 2. KNOW AND RECOGNIZE THE ASSUMPTIONS.

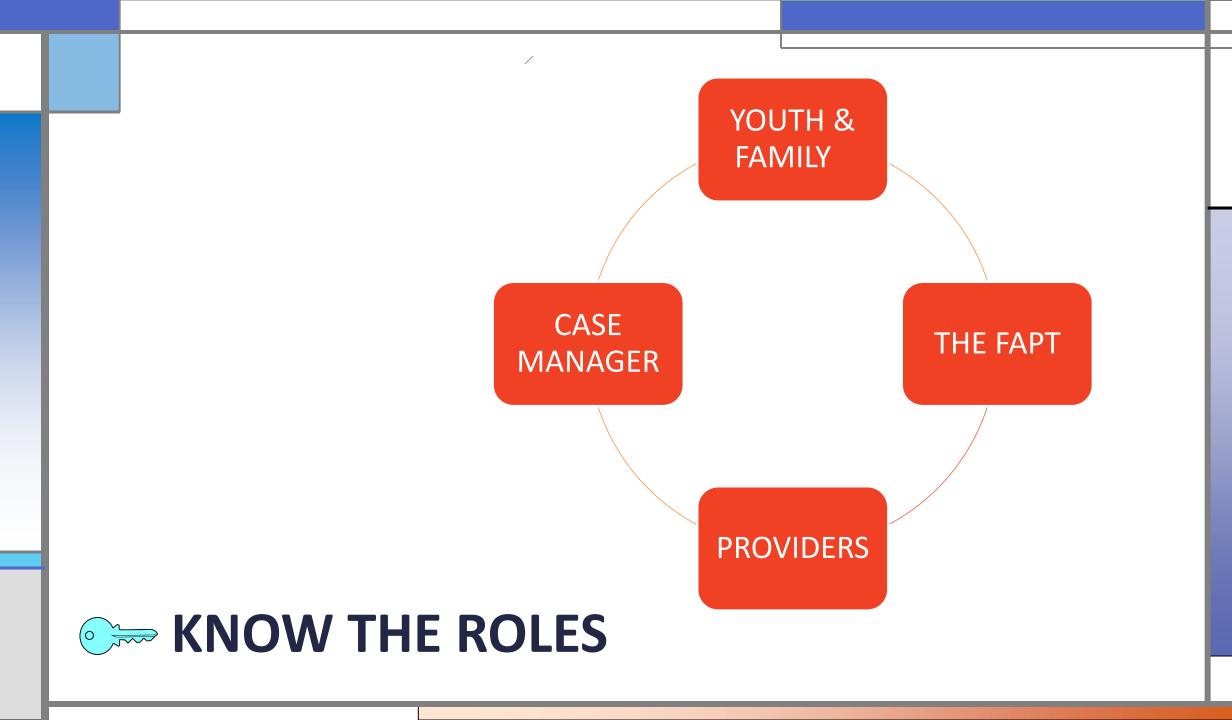
It's more than just showing up or reporting...



DO MORE THAN MONITOR

Providers | CSA Staff

- 1. REPRESENT WELL.
- 2. KNOW AND RECOGNIZE THE ASSUMPTIONS.
- 3. DO MORE THAN MONITOR.



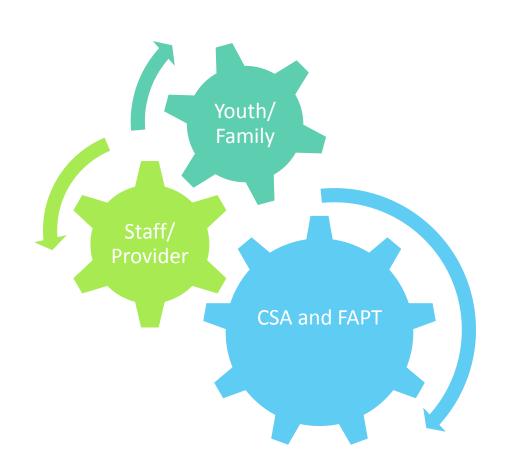


OWN YOUR ROLE

- Make the introductions
- Set boundaries and ground rules
- Identify the expectations... What's the goal?

KNOW THE ROLES: Ownership

When do you stay in your lane?

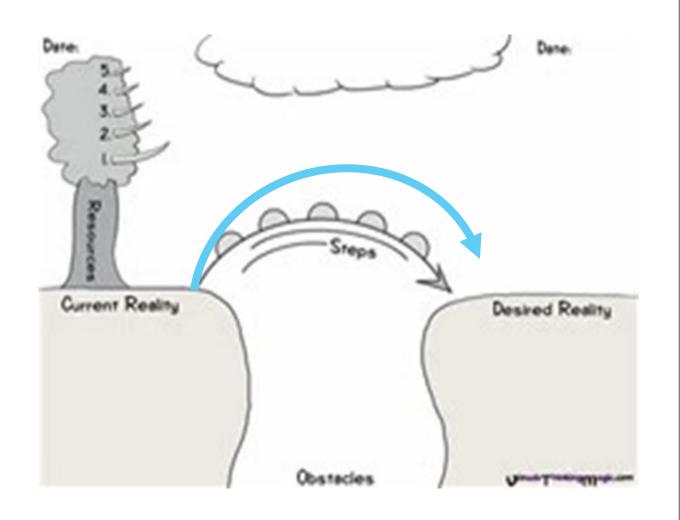


- 1. REPRESENT WELL.
- 2. KNOW AND RECOGNIZE THE ASSUMPTIONS.
- 3. DO MORE THAN MONITOR.
- 4. KNOW THE ROLES (AND OWN YOURS)



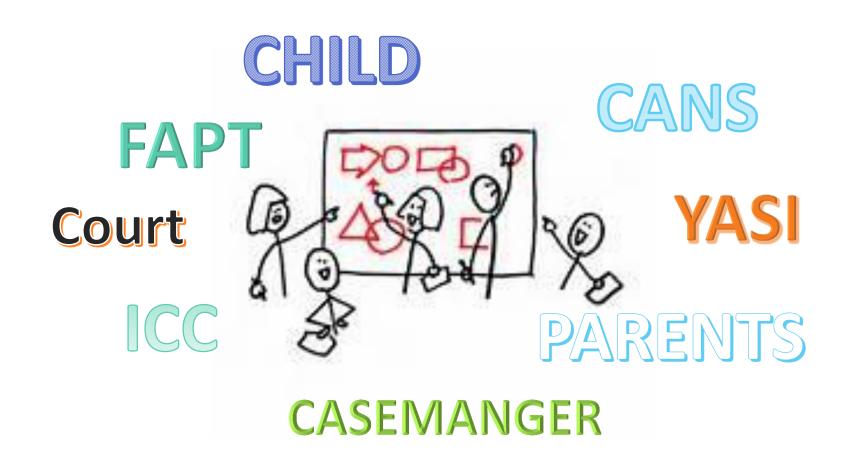
KNOW THE GOALS

SEE THE **BIG** PICTURE

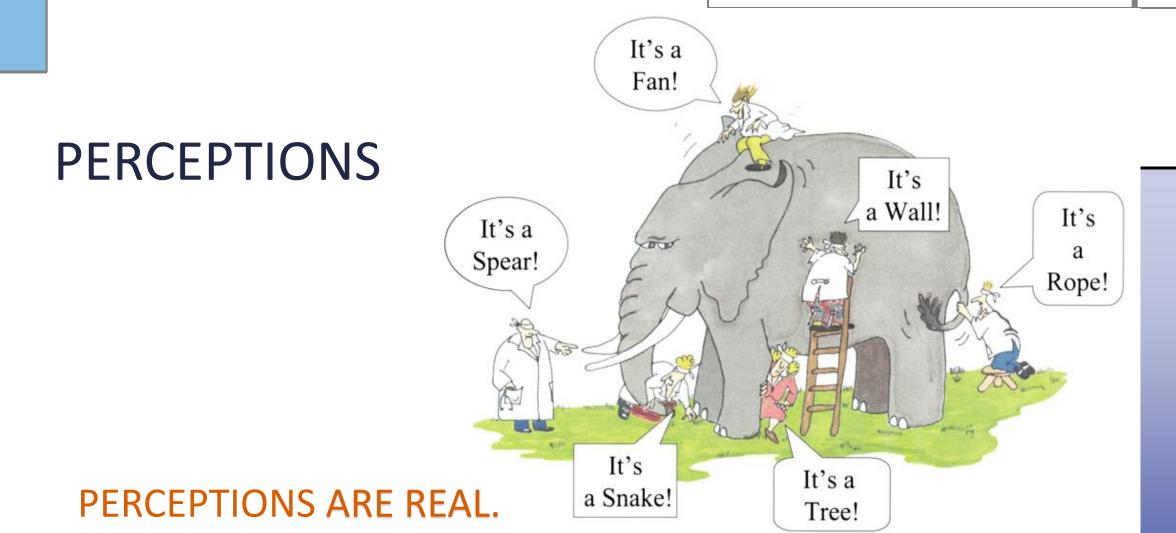


ANOTHER MERING

What goes into the PLAN, the updates and FAPT?



- 1. REPRESENT WELL.
- 2. KNOW AND RECOGNIZE THE ASSUMPTIONS.
- 3. DO MORE THAN MONITOR.
- 4. KNOW THE ROLES (AND OWN YOURS)
- 5. KNOW THE GOALS.



IDENTIFY | RECOGNIZE | ADDRESS

- 1. REPRESENT WELL.
- 2. KNOW AND RECOGNIZE THE ASSUMPTIONS.
- 3. DO MORE THAN MONITOR.
- 4. KNOW THE ROLES (AND OWN YOURS)
- 5. KNOW THE GOALS.

6. SEE THE DIFFERENT PERSPECTIVES.





CALL IT LIKE YOU SEE IT....



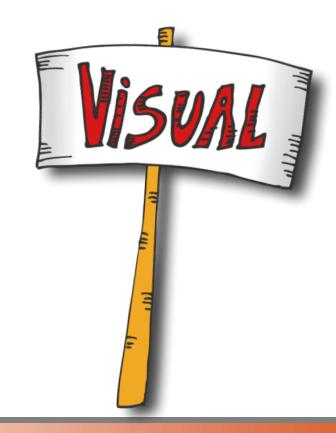
SHARE WHAT YOU KNOW...

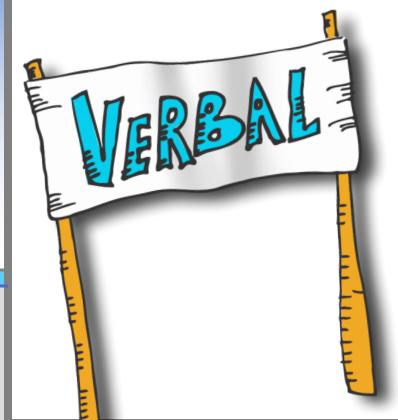


- 1. REPRESENT WELL.
- 2. KNOW AND RECOGNIZE THE ASSUMPTIONS.
- 3. DO MORE THAN MONITOR.
- 4. KNOW THE ROLES (AND OWN YOURS).
- 5. KNOW THE GOALS.
- 6. SEE THE DIFFERENT PERSPECTIVES.
- 7. IDENTIFY THE BARRIERS.



HELP THEM SEE WHAT YOU ARE SAYING





- 1. REPRESENT WELL.
- 2. KNOW AND RECOGNIZE THE ASSUMPTIONS.
- 3. DO MORE THAN MONITOR.
- 4. KNOW THE ROLES (AND OWN YOURS).
- 5. KNOW THE GOALS.
- 6. SEE THE DIFFERENT PERSPECTIVES.
- 7. IDENTIFY THE BARRIERS.

8. STAND OUT.





CULTIVATE

HEALTHY RELATIONSHIPS

- 1. REPRESENT WELL.
- 2. KNOW AND RECOGNIZE THE ASSUMPTIONS.
- 3. DO MORE THAN MONITOR.
- 4. KNOW THE ROLES (AND OWN YOURS)
- 5. KNOW THE GOALS.
- 6. SEE THE DIFFERENT PERSPECTIVES.
- 7. IDENTIFY THE BARRIERS.
- 8. STAND OUT.
- 9. MOVE FORWARD AND GET UNSTUCK.

Questions

The 9 KEYS

- 1. REPRESENT WELL.
- 2. KNOW AND RECOGNIZE THE ASSUMPTIONS.
- 3. DO MORE THAN MONITOR.
- 4. KNOW THE ROLES (AND OWN YOURS).
- 5. KNOW THE GOALS.
- 6. SEE THE DIFFERENT PERSPECTIVES.
- 7. IDENTIFY THE BARRIERS.
- 8. STAND OUT.
- 9. MOVE FORWARD AND GET UNSTUCK.



Contact information

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ADDITIONAL RESOURCES

Evidence-Based Practices & Where to Find Them

The Office of Juvenile Justice and Delinquency Prevention's (OJJDP's)

Model Programs Guide (MPG) contains information about evidence-based juvenile justice and youth prevention, intervention, and reentry programs. It is a resource for practitioners and communities about what works, what is promising, and what does not work in juvenile justice, delinquency prevention, and child protection and safety. https://www.ojjdp.gov/mpg/



Blueprints

www.blueprintsprograms.com

Welcome to the very first Blueprints Bulletin, our quarterly newsletter!

We look forward to helping elevate evidence-based programs by sharing information about our programs and what we are doing at Blueprints. Enjoy!



-- Child -- Adolescent PSYCHOTHERAPY

THE PERSON NAMED THE PERSON

Treatment Planner

With Statement Speed by A Chapter

COMMONWEALTH OF VIRGINIA

Commission on Youth







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Collection of Evidence-based Practices for Children and Adolescents with Mental Health Treatment Needs

To print the Collection in its entirety, please access the legislative report 🖹 on the General Assembly's Legislative Information System. To view an individual chapter of the Collection in its entirety, please access the legislative report 🖺 on the General Assembly's Legislative Information System. To view an individual chapter of the Collection in its entirety, please access the legislative report 🖺 on the General Assembly's Legislative Information System. To view an individual chapter of the Collection in its entirety, please access the legislative report 🖺 on the General Assembly's Legislative Information System. To view an individual chapter of the Collection in its entirety, please access the legislative report 🖺 on the General Assembly's Legislative Information System. To view an individual chapter of the Collection in its entirety in the Collection in its entirety i

The Adolescent Psychotherapy PROGRESS NOTES PLANNER

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Marine Street Street, Sant Street,

nent Programs

Mood Disorders

- Depression and Dysthymia
- Pediatric Bipolar Disorder

Summary of Treatments for Substance Use Disorder What Works Cognitive Behavioral Therapy (CBT) A structured therapeutic approach that involves teaching youth about the thought-behavior link and working with them to modify their thinking patterns in a way that will lead to more adaptive behavior in challenging situations. Family Therapy A family-based therapy aimed at providing education, improving communication, and functioning among family members, and reestablishing parental influence through parent management training. Multisystemic Therapy (MST) An integrative, family-based treatment with a focus on integrative, family-based treatment with a focus on

Multisystemic Therapy (MST)	An integrative, family-based treatment with a focus improving psychosocial functioning for youth and families
What Seems to Work	Description -
Behavioral Therapies	Behavioral therapies focus on identifying specific problems and areas of deficit and working on imp these behaviors.
Motivational Interviewing	A brief treatment approach aimed to increase mo for behavior change. It is focused on expressing empathy, discrepancies, avoiding argumentation, with resistance, and supporting self-efficacy.
Some Medications	Psychopharmological medication can be used for detoxification purposes, as directed by a doctor.
	Medication may also be used to treat co-existing health disorders.

What Does Not Work	Description
Interpersonal and Psychodynamic	Interpersonal and psychodynamic therapies are
Therapies	methods of individual counseling that are often
	incorporated into the treatment plan and focus on
	unconscious psychological conflicts, distortions, and
	faulty learning.
Client-centered Therapies	A type of therapy focused on creating a non-judgmental
	environment, such that the therapist provides empathy
	and unconditional positive regard. This facilitates
	change and solution making on behalf of the youth.
Psychoeducation	Programs aimed at educating youth on substance use
	and may cover topics like peer pressure and
	consequences of substance use.
Project CARE	A program aimed at raising awareness about chemical
	dependency among youth through education and
	training.
Twelve-step Programs	A twelve-step program that uses the steps of Alcoholics
	Anonymous as principles for recovery and treating
	addictive behaviors.
Process Groups	A type of psychotherapy that is conducted in a small
	group setting. Groups can be specialized for specific
	purposes and therapy utilizes the group as a
	mechanism of change.

Are you starting with the right staff?

ESSENTIAL COMPONENTS OF A SUCCESSFUL FFT THERAPIST

What are the requirements for the FFT therapist? Below is a partial list:

HOURS

- Being available for your client- You will be expected to adjust your working hours to family's availability which could mean working evenings, sometimes very early mornings, and sometimes weekends.
- Frequency of contact with each family will range from daily to every two days; frequency is more intense in the initial phases of treatment.
- Frequency of contact will depend on the family's risk factors.
- You could be on call 24/7 should a crisis occur with one of your families. You will most likely
 be the first person they call should they need help handling a situation. You will be expected
 to follow model policy, and any mandated agency policies.

WORKING CONDITIONS

- You will be driving to and working in neighborhoods with low economic resources and high crime. You will be working in homes that range in conditions of cleanliness and upkeep to disorganization, untidiness, and debris, depending on the family resources and level of functioning.
- Working independently. Co-worker and supervisor interaction is often via telephone; face to face minimum once per week, depending on model. Increased face to face available to address support needs.
- Travelling to surrounding cities depending on where the referral has been received and where your assigned families reside.
- Working with and delivering successful therapy to clients who have been placed (referred) by

And Now We're Really Finished!