**Indiana Family Preservation Services**

**Agenda and Questions**

**February 4, 2022**

1. Concrete supports reminder—Please complete this form for any concrete spend, and send to Bridget McIntyre ([*Bridget.McIntyre@dcs.in.gov*](mailto:Bridget.McIntyre@dcs.in.gov)) or the Child Welfare Plan ([*ChildWelfarePlan@dcs.in.gov*](mailto:ChildWelfarePlan@dcs.in.gov)):

<https://www.in.gov/dcs/files/Expense-Tracking-Agencies.xlsx>

1. Current case information: *(as of 2/3/22)*

|  |  |
| --- | --- |
| **Regions** | **Family Pres Case Count** |
| 1 | 121 |
| 2 | 53 |
| 3 | 98 |
| 4 | 95 |
| 5 | 56 |
| 6 | 59 |
| 7 | 90 |
| 8 | 81 |
| 9 | 79 |
| 10 | 189 |
| 11 | 103 |
| 12 | 65 |
| 13 | 68 |
| 14 | 63 |
| 15 | 71 |
| 16 | 116 |
| 17 | 56 |
| 18 | 97 |
| **Grand Total** | **1560** |

*Up 45 cases since last meeting on 1/21/2022*

1. *“Family Pres Fridays” for DCS staff update*

*Meeting was held on 1/28. Next one scheduled for 2/25.*

*-Themes were perception that providers don’t spend enough time with INFPS cases, appropriate uses of concrete supports, utilization of Service Guide, accessing SUD treatment, and closing INFPS cases*

*a.* David let providers in this meeting know that he stressed to the FCMs during the Family Pres Friday that providers determine how much time is needed/services to provide for families, based on the provider’s clinical judgment and chosen EBPs used in each case

*b.* Encouraged FCMs to look at provider outcomes overall before determining if they are serving the family properly

*c.* Focused on not judging how many hours the provider is in the home, but how the provider is impacting families with regard to repeated maltreatment and removal rates.

1. Updated point-in-time data—

Statewide Point-in-time, as of 2/3/2022:

Total Families: 6,151

Total Children: 12,674

Total Families served at least 90 days: 4,073

Total Children served at least 90 days: 8,519

Of cases served at least 90 days (Point-in-time):

421 families (6.84%) have had another subbed assessment

776 children (6.12%) have had another subbed assessment

456 families (7.41%) have experienced a removal

887 children (7.0%) have experienced a removal

Race breakdown Point-in-Time (total/>90 days):

American Indian or Native Alaskan—6 families, 6 children/2 families, 6 children

Asian—38 families, 61 children/31 families, 46 children

Black—1,143 families, 1,896 children/752 families, 1,278 children

Hispanic—711 families, 1,143 children/492 families, 804 children

Multiracial-757 families, 1,072 children/492 families, 715 children

Native Hawaiian—13 families, 5 children/8 families, 4 children

Unknown/other—228 families, 90 children/146 families, 66 children

White—4,916 families, 8,398 children/3,243 families, 5,600 children

Point-in-Time by race served over 90 days (**families**):

American Indian or Native Alaskan—0 subbed assessments, 0 removals

Asian—2 (3.28%) families subbed assess, 1 (2.63%) removals

Black—111 (5.85%) families subbed assess, 42 (3.67%) removal

Hispanic-55 (4.80%) families subbed assess, 34 (4.78%) removal

Multiracial-51 (4.76%) families subbed assess, 45 (5.94%) removal

Native Hawaiian-0 families subbed, 0 removals

Unknown/other-0 subbed, 0 removals

White—557 (6.63%) families subbed assessment, 356 (7.24%) removal

Regional Point-in-Time Breakdown (**families** served > 90 days):

Region 1: 30 (5.85%) subbed assessment/29 (5.65%) removals

Region 2: 18 (6.27%) subbed assessment/17 (5.92%) removals

Region 3: 20 (6.51%) subbed assessment/18 (5.86%) removals

Region 4: 16 (4.94%) subbed assessment/21 (6.48%) removals

Region 5: 16 (6.69%) subbed assessment/19 (7.95%) removals

Region 6: 13 (4.45%) subbed assessment/19 (6.51%) removals

Region 7: 36 (9.67%) subbed assessment/33 (8.94%) removals

Region 8: 36 (10.26%) subbed assessment/39 (11.11%) removals

Region 9: 20 (7.22%) subbed assessment/17 (6.14%) removals

Region 10: 50 (7.19%) subbed assessment/42 (6.04%) removals

Region 11: 26 (7.08%) subbed assessment/33 (8.99%) removals

Region 12: 26 (9.35%) subbed assessment/25 (8.99%) removals

Region 13: 18 (6.84%) subbed assessment/24 (9.13%) removals

Region 14: 8 (4.62%) subbed assessment/14 (8.09%) removals

Region 15: 20 (6.58%) subbed assessment/20 (6.58%) removals

Region 16: 23 (4.82%) subbed assessment/28 (5.87%) removals

Region 17: 19 (6.27%) subbed assessment/18 (5.94%) removals

Region 18: 26 (7.83%) subbed assessment/40 (12.05%) removal

1. Removal rate for IAs is much lower than it is for CHINS cases.
2. Repeat maltreatment rate for the two is about the same.
3. This might lend to the idea that we perceive CHINS cases much differently than IA cases, and these perceived differences seem to impact removal rates, even absent maltreatment.
4. Engaging and supporting families—continued discussion from our last meeting on 1/21.

Some themes from the last meeting were around families refusing to engage and the impacts of substance use and abuse on treatment. How do we engage families who are resistant and who are not voluntarily asking for help?

Relationships are critical, and predictive of outcomes (positive and negative)

[csi\_fedders\_relationship\_with\_therapist.pdf (family-institute.org)](https://www.family-institute.org/sites/default/files/pdfs/csi_fedders_relationship_with_therapist.pdf#:~:text=The%20Importance%20of%20theRelationship%20With%20the%20Therapist%3A%20Research,of%20the%20strongest%20predictors%20of%20successful%20treatment%20by%09Lynne%09Knobloch-Fedders%2C%09PhD)

[Research summary on the therapeutic relationship and psychotherapy outcome. - PsycNET (apa.org)](https://psycnet.apa.org/record/2002-01390-002)

[Better relationships with patients lead to better outcomes (apa.org)](https://www.apa.org/monitor/2019/11/ce-corner-relationships)

“Anyone who dispassionately looks at effect sizes can now say that the therapeutic relationship is as powerful, if not more powerful, than the particular treatment method a therapist is using,” says University of Scranton professor John C. Norcross, PhD, ABPP, chair of the APA task force, which was co-sponsored by APA Div. 17 (Society of Counseling Psychology) and Div. 29 (Society for the Advancement of Psychotherapy). “We now know that some of these therapeutic elements not only predict but probably cause improvement,” he says (see ["What the evidence shows"](https://www.apa.org/monitor/2019/11/ce-corner-sidebar)).

A good relationship, the research finds, is essential to helping the client connect with, remain in and get the most from therapy. “It’s primary in the sense of being the horse that comes before the carriage, with the carriage being the interventions,” says Simon Fraser University emeritus professor Adam O. Horvath, PhD, who studies the therapy alliance.”

* 1. Expect families to be initially resistant to your services
  2. Continue engaging with the goals of keeping kids safe and keeping families together
* Most families don’t welcome DCS, or DCS-connected providers, into their lives. Working through resistance needs to be part of our goal if we are going to be able to influence the caregivers so they can learn how to safely parent their children.
* Initial discussions with families should establish that you are there to help, not to create barriers
  1. Decisions should be driven on child safety, not families’ attitude toward services, resistance, etc.
* Include child and family team in the plan
  1. Research on relationships suggest that they are predictive of treatment outcomes (see ["What the evidence shows"](https://www.apa.org/monitor/2019/11/ce-corner-sidebar))

1. Questions received:

None for this call.

1. Anything else?
   1. We have a Family Pres case that is moving to Illinois to escape an abusive boyfriend, and needs deposit and first month rent paid. Can we pay for rent in another state?
      1. There's no prohibition on that. If that makes sense for the family, sure.
   2. Provider Recommended reading
      1. ‘Do One Thing Different’
      2. ‘Motivational Interviewing: Helping People Change’ 3rd edition, William Miller

Next meeting 2/18/2022 @ 1:00 EST

THANK YOU!