

Partnership for Strong Families
Family Connection Grant: Family Engagement through Family Team Conferencing

EVALUATION BRIEF:
Interviews with Family Care Counselors and FTC Facilitators – 2012

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Introduction

The Partnership for Strong Families (herein referred to as the Partnership) was awarded a federal grant from the Children’s Bureau in 2009 to evaluate three models of Family Team Conferencing (FTC). The FTC is a practice of gathering family members, friends, community providers, and other interested people who join together to strengthen a family and to collectively develop a plan-of-care for the family. Prior to being awarded the grant, families receiving child welfare services from the Partnership engaged in an FTC process that represented basic elements of Family Team Conferencing. The grant afforded the Partnership the opportunity to design, implement and evaluate enhanced models of FTC – models based on empirical and conceptual developments that showed promise for improving a family’s experience in the child welfare system, as well as child and family outcomes such as safety, reunification and permanency.

In brief, the three FTC models being tested are described as pathways. As part of the evaluation, the families are randomly assigned to one of three pathways. Pathway 1 mirrors the FTC practice prior to the grant, with a slight timeline modification. Families in this pathway meet with a Family Care Counselor (FCC) to convene an FTC within 14 days of the decision to shelter the child or keep the child at home under in-home supervision. There is no dedicated, neutral facilitator; the FCC facilitates the FTC meeting. The initial FTC is followed up by additional FTC meetings at 3.5 months, 6.5 months and 10 months. Cases that are open past 10 months have an FTC at 14 months, 18 months and 24 months.

Pathway 2 is a new, experimental model in which families meet with the FCC as well as other key individuals, including the FTC Facilitator, prospective service providers, and family supports that are invited by the family. The FTC Facilitator (as well as the FTC Coordinator who helps arrange the meeting but does not attend it) is a grant-funded position. The FTC Facilitator is a

skilled facilitator who is trained to incorporate the key principles of Family Team Conferencing to motivate family engagement and to mobilize services for families. The initial FTC for In-Home Supervision cases in Pathway 2 takes place within 5 business days of the early engagement home visit by the FCC. For Shelter cases, the initial FTC takes place within 10 business days from the shelter hearing. As in Pathway 1, the initial FTC is followed up by additional FTC meetings at 3.5 months, 6.5 months and 10 months. Cases that are open past 10 months have an FTC at 14 months, 18 months and 24 months.

Pathway 3 is essentially the same as Pathway 2 with the addition of family alone time, which affords families the opportunity to meet alone after the FTC to discuss their family plan and to further develop the plan.

Purpose

An annual interview with Family Care Counselors (FCC) and FTC Facilitators was proposed as part of the grant's evaluation plan. The first annual interview was completed in February 2011. An evaluation brief is available for that first set of interviews. This current evaluation brief reports on the second set of interviews, which was completed in May 2012. The interviews were conducted as part of the evaluation of the three FTC models; they represent one component of the larger process evaluation for the grant. Process studies are important for revealing program strengths and strategies – as well as program limitations – that could be preserved or improved. The findings from the interviews do not represent program outcomes, nor do they represent a summative judgment of the merit or worth of the FTC models. This second set of interviews bears important implications for program sustainability.

Research Method

Sample

As described in the grant proposal, the goal was to interview approximately 20 percent of FCCs (including all FTC Facilitators). There were 68 FCCs and 3 FTC Facilitators at the time of sampling (March 2012) for a total of 71 potential interviewees. Based on the proposed 20 percent random sample, the target number of interviews was 14. All 71 FCCs and FTC Facilitators were invited to participate in an interview. The response was positive and fast; 14 FCCs and all 3 FTC Facilitators agreed to participate, for a total of 17 interviews. The interviews were conducted between April and May 2012.

All the FCCs and FTC Facilitators that participated in the interview had experience with FTC. Most of them had participated in well over 25 FTCs. On average, the interview respondents worked for the Partnership for 2.75 years. The range of years was one-half to eight. Interview respondents had a great deal of experience across FTC Pathways. Eleven (11) said they had

been involved in all of the Pathways, and five had experienced two of the Pathways. One respondent, who was an FCC supervisor, had only experienced Pathway 1.

Data Collection Procedures

Initial contact with prospective participants was made via e-mail. The e-mail correspondence explained the purpose of the interview and the protocol for participation. A consent form, which was approved by the Western Institutional Review Board (WIRB), was attached with instructions for submission to Dr. Robin Perry (Principal Investigator for the grant). Upon receiving the consent form, Dr. Jane Yoo (Co-Principal Investigator for the grant) contacted the prospective participants via e-mail and/or telephone to schedule an interview. All interviews were conducted by telephone by Dr. Yoo and Dr. Kristin Ward (Senior Researcher). A \$25 Visa gift card was mailed to the participant after completion of the interview.

Interview Questions

The interview questions were developed using several interview guides. The first set of interviews with FCCs and FTC Facilitators used an adapted questionnaire developed for a study of FTC in Ireland (Brady, 2006).¹ This questionnaire was further adapted for this second set of interviews, taking into consideration study questions asked in other process evaluations conducted for the grant.

The interview questions for this current study focused on the FCCs' and FTC Facilitators' perceptions of the aspects of FTC that work well or not well. Because the interview findings have implications for program sustainability, the interview questions emphasize the aspects of FTC that have the greatest potential for long lasting success in terms of implementation and outcomes.

Data Analysis

The qualitative data derived from the interviews were analyzed using a grounded theory approach. Systematic procedures for analyzing these data include coding the data, developing themes and categories, and analyzing relationships. To decrease the possibility of idiosyncratic interpretation, and to involve primary users and stakeholders in the evaluation process, the observations and conclusions are reviewed by grant staff.

¹ Brady, B. (2006). *Facilitating family decision making: A study of the family welfare conference service in the HSE western area (Galway, Mayo and Roscommon)*. Galway, Ireland: Galway Child & Family Research and Policy Unit.

Findings

Findings from the interviews are organized into two overarching themes. The first – “application of FTC principles in practice” – captures how key principles of FTC such as sharing decision making power and directly linking families to services are applied in practice. The second – “implications for sustainability” – focuses on important issues of sustainability of the FTC models.

Application of FTC Principles in Practice

Power Sharing Between Families and Professionals

On the topic of whether FTCs facilitate power sharing between families and professionals, the findings from this second set of interviews did not differ from other study findings for this grant. That is, there was overwhelming consensus among the FCCs and FTC Facilitators that families have decision making power in the FTCs and that professionals freely share that power with families in developing the family plan. The following quotes support this consensus and affirm that power sharing is practiced in the FTCs:

“I think it does greatly. With the cases I had before FTCs, the PIs would come in and tell the families what to do, where and how. They never gave the families a say. With the FTC conference with a neutral facilitator, they have more freedom to say what they want and how they feel about the case. They can say what they want to participate in and what they don’t without being judged... it gives more power to the family than it did in the past.”

“I feel families have decision making power. There have been times when we’ve been talking and the family says ‘I don’t think we need this.’ So we respected their opinion and they didn’t get that service. It’s more of a conversation. We talk about their issues, why we’re involved, what the purpose is of the FTC. And sometimes there is disagreement about services, and so we talk about it. There have been instances where we review the plan and they don’t like the wording. We’ll change the wording; we’ll change it to whatever the families want.”

“Oh definitely there is power sharing. I think the FTC has done a great job of incorporating everything, every side into the conversation through FTCs... I think that’s the key. The families take ownership and responsibility.”

There was greater variation in the interview responses to the question about whether more families have been involving their supports in the FTCs over time. Only two FCCs were confident that more family supports were getting involved. Most others, including all three FTC Facilitators, acknowledged that involvement of family supports has not necessarily improved over time for various reasons, including the continued lack of transportation to attend the FTC and the insufficient time allotted in planning for the FTC to involve more family supports.

On a related topic, FCCs and FTC Facilitators were asked to assess the family-to-professional ratio in the FTCs they have experienced. In about half of the responses, interviewees said that more professionals attended the FTCs. The other half said that more family members attend the FTCs. The quotes below describe these bifurcated scenarios:

“I’ve seen both – where there’s more professionals than family and more family than professionals. Overall, I would probably say there have been more professionals than families.”

“More family members always... At least one parent, sometimes two. And a lot of times their parents are there – so the children’s grandparents are there. Those are the main ones. Occasionally a friend will come for support, but I would say the most is grandparents.”

FTC Links Families to Community-Based Services

FTCs are perceived as making a positive difference in linking families to community-based services in several ways. The reason for improved linkage – particularly in Pathways 2 and 3 – most frequently noted by interview respondents was the fact that the FTC Facilitators (present in Pathways 2 and 3 only) are more knowledgeable about community resources and can offer ideas and connections that FCCs may not think about. One FCC offered the following example:

“[The FTC Facilitator] may know a community service I don’t necessarily know. Or they’ve worked with someone I haven’t worked with. One situation where a facilitator had suggestions for the parent about employment things that I didn’t know existed.”

Another added, “The facilitators get to know different things outside that may help. I work a particular county, and the facilitator knows what is involved in the next county and that they are willing to come to my county, and I wouldn’t know that. The facilitator knows things like that.” A third agreed, “They know a lot of the resources that I don’t know... and are really excellent at finding those resources and really looking at what the family actually needs versus automatically referring to [a service].”

As explained by one FTC Facilitator, this makes sense, given the training that FTC Facilitators have received:

“The way that we were trained through the grant is to make referrals to services that have nothing to do with being a facilitator, really. That [training] allows me to know the different providers and different services in a way that they FCCs really don’t. All the facilitators... have training in different things that allows us to make recommendations in maybe a more informed way... We also have an understanding of some ethical and safety concerns because of our training that the FCCs might not have. So, maybe some FCCs are more experienced in these areas, but overall we wouldn’t expect them to be.”

The second most frequently cited explanation for improved service linkage through FTCs was improved timeliness. According to respondents, a main reason is because FTC Facilitators are able to make their own referrals directly, rather than going through a process of review.

“[FTC Facilitators] have a variable that we don’t have – they have the luxury of approving their own referrals and we don’t. We have to go through our referral coordinator, which is great because she is very knowledgeable. But we [FCCs] do the referrals, then send to a second person who reviews and approves and then sends it on back to [us]. Whereas, the FTC Facilitators can approve their own referrals and send them out. So [FCCs] have a slight delay in getting out the referrals [compared to the FTC Facilitators].”

Other reasons suggested for the improved timeliness of service linkage include a perception that FTC Facilitators have a closer or better relationship with service providers than FCCs, and that FTC Facilitators have more time to concentrate on referrals than FCCs have. A small handful of respondents also credit FTCs for improving service linkages in terms of quality – that is, increased family engagement and knowledge through the FTC process helps provide services that are more closely matched to family needs. One FCC shared the following based on her experience:

“Yes, once you get a sense of what they think they need or what they are going to do, you can tell them which providers do what. Then they ask us about other services, and we can give them other options. I definitely think that FTCs help with linkages.”

Another explained:

“I believe that it does [facilitate service linkage], because at the FTC you start to explore why you were involved, what the family may think would impact their situation, and to talk about resources. So you start to explain, identify, answer questions about resources that are there, and a part of the linkage is getting the family to understand what services are there... They know what the service options are and have already started to identify that. So I think that’s an important part of the linkage – not just making the referral but helping the family understand what that provider can help with.”

Three interview respondents reported that, in their experience, FTCs have not improved service linkages for families. One additional respondent believed that FTCs can delay the linkage to services when FTCs are not scheduled in a timely manner.

Meeting Families' Needs with or without FTC

Interview participants were asked whether families' needs would be met if there were no FTCs. In four interviews, the response was "no", as respondents strongly believed that the FTC is a critical component of the overall service. For example, one interview respondent said:

"No, I don't because I can't imagine it. You have no family meeting. You'd have people independently scrimmaging around to come up with a plan and you wouldn't have one place identified as a support system. [FTC] makes you identify the support system. Without that FTC, you don't have a team. You don't know who all the players are... You will get valuable information from people the family invites to the FTC and they will give input. I cannot imagine that. You would lose a vital piece that you need to help a family address issues that brought them to our attention."

Most of the interview responses to this question were "yes", coming from the perspective that the FTC is a necessary process for helping families with their service needs but alone does not determine whether or not families meet those needs. In other words, the FTC has the potential to change the entire family experience with services and being involved in the child welfare system. Two FCCs and two FTC Facilitators cautioned that eliminating the FTC could slow down the service referral process. Another five respondents cautioned that families would not be driving the services, hence risking family engagement. Overall, FCCs felt that families' perception of their experience would be less positive.

"I think the family's needs would be met, but the perception would be different because the family would perceive it more as us telling them what to do as opposed to us listening to them."

"Well, I think we could make those blanket referrals and tell them they have to do X, Y, and Z, but having the FTC gives the family more control, so they will be more apt to engage..."

"They'd still receive services and the process would go on. I'd like to think that they're heard better [through FTC], that we engaged them better. That they are more empowered and feel they are driving the services. I'd like to think it helps their relationship with their FCC. [But] I'm not going to say that their needs wouldn't be met if they didn't have FTCs."

Implications for Sustainability

FTCs Help FCCs Do Their Job Better

All but one of the FCCs who were interviewed agreed that FTCs are a tool that helps them do their job better. Interview respondents offered several reasons for this. First, the FTC approach is meant to give families more of a voice in the process and in this way is hopefully more

respectful and involves a greater level of two-way communication. The following quotes from two FCCs help to describe how FTCs are helpful in this regard:

“Before we became FTC focused, we just went in and said this is what we want you to do – no ifs, ands or buts. [An FTC] allows the families more freedom to communicate and not just for us to take the information in.”

“That’s why I like having a facilitator there, because they will hear both sides of the situation. Sometimes they can listen to the family and make them feel like they’re important and that their perspective is needed. They may also be able to better link services to families or present options to families in a way that doesn’t make it seem so authoritative. They respect families’ ideas and concerns about what exactly the problem is.”

Second, many stated that as families open up through the FTC process, the FCC is provided with a greater level of case information and detail about the family to work with, including a richer understanding of family strengths and needs. This translates into being better prepared and able to offer more appropriate and targeted options for the family to utilize. One FCC explained it this way:

“I use FTC to go into more detail... When I’m going through the FTC with the parents, I ask them directly to reflect on why we are involved. Then I get into their case with them about what really happened. A lot of them really open up about that and go into detail... So it helps me [and the providers] know what [we’re] going to be facing with them. Especially when there’s an addiction or something, and the parents don’t see the addiction problem. It lets us know how much we’re going to have to overcome and bypass in order to get results.”

Another FCC added:

“When we go over it, we’re getting their opinion about what they feel their needs are. It helps us lay out the options for them. We lay out what we have that may be able to help them. We can ask them what they prefer or what would help with their schedule better... [For example,] I talk to them if they have a preference of male or female, someone more experienced with DV, or a counselor who is better with marriage counseling or addiction counseling, so it’s not just a general thing, giving parents options.”

This focus on hearing the voice of the family and recognizing family strengths also helps to better prepare and involve families as partners in the change process. Following are quotes from three FCCs:

“I am a firm believer in FTC... Having families take a look at who they are and where they were before the problems started. Usually people have some strengths. I see the FTC as being the catalyst for acknowledging the family’s strengths. Once you get people to look at their power then you can get them to look at changes that are needed.”

“It gives them the control and allows them to make decisions. They feel like they have input and control of the plan... It helps them, it directs the families to do more self-help that is going to matter. They have a clearly defined role in what their role is in keeping the child safe. They own it. They feel instead of being told what to do, they came up with the plan themselves.”

“When an FTC is facilitated where the family is actually in control and guiding and having their input, then when barriers come up, the family comes up with a plan to overcome it. They have more resources than we could ever give [them].”

Altogether, a majority of the FCCs interviewed believed that the FTCs help them do their job better by strengthening their relationships with the families they serve.

“The FTC is like an introduction where you get to start to develop a working relationship with families. That’s critical – the working relationship – and the FTC is critical for that. If you start off getting to know the family and let them know you’re there to partner with them rather than beat them on the head, then you’re half way to the finish line.”

“The FTC is set up where we are listening to the family. We are asking them what they need and what they want to see happen. So the family feels that “they’re really listening to me and they want to hear from me.” It really helps to build that relationship between the family and the FCC because it feels like we’re working together. We’re not here to make decisions for you or tell you what you need. So I think the FTC is a great foundation for the relationship between the FCC and the family.”

Preference for Pathways

Nine out of 17 interview respondents reported a preference for Pathway 2, explaining that the FTC “goes more smoothly when there’s someone there to help” and that it “takes the pressure off the FCC and provides a neutral party” that “gives families more of a voice.” These respondents further noted that FTC Facilitators are better trained to, for example, diffuse tense situations and engender greater participation from the family, and that they often have a better handle on resources for service referrals. In the words of one interview respondent:

“The FTC [Facilitators] are very valuable because they know exactly what services are appropriate for the family, which services to steer toward for the family that meet the identified needs – things that the family feels they need. I feel that [FTC Facilitators] play a big part in the FTCs running how they are supposed to. I’ll be honest, when I run the FTCs, they are nothing like the FTC with the facilitator. I think because when you do the meeting with the facilitator, they have more of an open/full experience with it. When they do it with me, it goes faster. With the facilitators it’s more unbiased – not unbiased but more that they are facilitating, they are asking [the family] how they feel and are open about everything. [The facilitators] aren’t telling them

what to do. Facilitators seem to know – they’re trained on it, they know the steps and exactly what to do and what not to do. [FCCs] do have some training, but it’s not specifically what we do. I don’t mind being honest about it.”

Four interview respondents said they prefer to conduct FTCs under Pathway 1. One of these respondents reported that “families do not feel comfortable talking in front of other people” and that they “get confused about the role” of the FCC versus the FTC Facilitator. Others who prefer Pathway 1 believe that Pathway 1 FTCs are more easily and efficiently scheduled.

Just two respondents reported Pathway 3 as their preference; the remaining two said they had no preference among the different Pathways.

Ideal Timeframe for FTCs

When FCCs and FTC Facilitators were asked to comment on the ideal timeframe for having FTCs, the responses varied in terms of specific days, with some interview respondents suggesting fewer days for the initial FTC and others suggesting more days. Generally speaking, however, most of the FCCs and FTC Facilitators said the current timeline for all Pathways are reasonable, meaning that the range in timeframes (from 5 to 14 business days, depending on the Pathway and type of case) is not as critical, as long as the FTC is done as soon as possible. In three interviews, the FCC did voice needing more than 14 days for the initial FTC, but this was not the norm. As suggested in the following quotes, the overwhelming response was that it is important to engage the families early and to conduct the FTC to continue that engagement in developing the family’s service plan:

“Honestly, in a perfect world if they could have an FTC as quickly as possible after children were removed, then that would be the best thing. Do I think that’s realistic? No. ... I’m a big believer in FTCs. If they were in there with the families within 5 days, I think that would be better, because you would really get the emotion and everything right there when it’s fresh. You get in there, get to meet with them and how they feel, address those emergencies with them and use FTCs to stabilize the family at that moment... I just think in the perfect world, the FTC would happen in a shorter amount of time. I think 10 days is too long. But I just don’t think that’s realistic. But I think if we could do the FTC immediately, it needs to happen sooner than within 10 days.”

“It should be ASAP. Having 2 weeks gives everyone a chance to plan. If you can’t get everything coordinated within the first few days, then you have that target date that you need to push for. In my area it’s trying to get folks to put together a support team. Sometimes they have transportation issues, but we do them where it’s convenient. Bottom line is that as soon as possible. When you push it beyond two weeks, it’s hard to engage the family.”

The FCCs and FTC Facilitators also commented on the timeframes for the follow up FTCs. In more than half of the interviews, FCCs believed that a follow up FTC was not always necessary, helpful, or possible, especially given the shorter service period for in-home supervision cases.

“No, I didn’t find the follow ups to be helpful. Most families don’t understand why we’re having another one. They don’t understand, and I don’t find them helpful. Most of the stuff we are following up on, I’ve already followed up on that stuff (for example, with providers) to keep up with the family.”

“With in-home cases, the case may be closed before follow up happens, or the case is about to close, and the parents don’t want to deal with it. ... So most of mine even with the FTC Facilitator, [the families] don’t want the follow up.”

“To be honest, I don’t really get the purpose of the follow up FTC if they’ve already had one and they are getting the services they need. I don’t see the point. They should have received services, other professional eyes are on them, they’ve built the relationship with the FCC. So I don’t see the reasons for them.”

However, at least two FCCs and one FTC Facilitator thought that the current timeframes were good, largely because the follow up FTCs give families an opportunity to get back on track, as well as to celebrate their accomplishments. An FTC Facilitator commented:

“[Follow ups] are really good especially when families hit a brick wall. Then to me, it’s time to revisit. I can talk to them, but there’s something about the FTC where there’s that accountability. It gives them the opportunity to – sort of like getting a report card. I give families a chance to rate themselves on a scale of 1-10 about how well they are doing on their case plan. They are honest, and we decide we can take it to the follow-up FTC and come up with another plan about getting these things accomplished. I like having a closure FTC where it’s like a celebration ... some families want to bring cake and balloons!”

As summarized in other evaluation briefs for the grant, there is also the sentiment that follow up FTCs should be available to families without a prescribed timeline. As one interview respondent said below, the follow up FTCs should be done on a case by case basis:

“I think there are times when an FTC follow up may not be needed. We have been unified and the parents have done what was agreed upon and they are doing great, so they don’t need a follow up. I think we need to look at them on a case by case basis.”

FTC in the Future

Interview respondents were asked to comment on what decisions should be made on the practice of FTCs in the future. Several aspects of FTCs were discussed by the FCCs and FTC Facilitators.

Six FCCs suggested changes to the scheduling of the FTC, as well as the location of the FTC. These FCCs wanted more flexibility in the FTC Facilitators' schedule to better accommodate their own schedules. They also expressed giving clients the option to choose the location of the FTC. There were differences in opinion of the ideal location of the FTC. As indicated in the quotes below, some feel that the client's home is ideal, whereas others feel a location outside of the home is better:

"Usually the home is a safe haven for the parent and when you have it at our office, it's not neutral location for them. I always give the parents an option of where they want to have it, and they always want it in their home. I think that would be what I would change is giving the parents an option, and I don't think they allow that when there's a facilitator. I know all my parents would rather do it in their home."

"I think when it's inside the home, I don't think we get enough from the family. Usually when I've had it at the home, they have to engage with their children. When they come to the office, they don't bring the kids and have the time and can really focus on the needs of the family. So I think having it outside the home is really helpful."

Eight FCCs and one FTC Facilitator gave suggestions on improving the efficiency of FTCs. For example, two of these FCCs said the FTCs would go faster if the surveys and instruments used for the evaluation were not a part of the FTCs. Another FCC thought carefully about the use of technology to improve the FTCs – for example, using a digital pen to write notes that could be electronically transferred to a computer. This was suggested as a way to avoid redundancy and to promote efficiency. One FCC noted that the paperwork involved in making the referral during the FTC prolonged the FTC meeting time. She suggested doing the paperwork after the FTC is completed in order to decrease the overall FTC time.

Comments about the preference of Pathways were made throughout the interviews for many respondents. When asked what changes would be made to the FTC models, three FCCs noted their preference for conducting the FTCs without FTC Facilitators. Furthermore, an FCC supervisor commented that FCCs and FTC Facilitators should collectively choose the Pathway because some FCCs prefer to do the FTCs on their own, whereas others prefer to team up with the FTC Facilitator:

"Make the FCC and facilitator choose which Pathway, not just be assigned a Pathway. Have that as a mutual decision. Some of my FCCs are stronger at facilitating than others... About half of my

FCCs would appreciate the support of the facilitator and the other half would like to do it themselves. Some are really confident in doing it alone, and then others would prefer to have some support.”

Conversely, seven FCCs reiterated their preference for having FTC Facilitators in all FTCs. In the same vein, several interview participants said FCCs need better training to facilitate the FTCs (under Pathway 1). Overall, as demonstrated by these quotes, more FCCs agreed that the FTC, including the families themselves, benefit from the FTC Facilitator’s involvement:

“I definitely would say that the facilitator should be involved. I don’t mind doing the FTCs, but I don’t feel the family gets the same benefit from it with a facilitator. The facilitator is unbiased. The FCC may already be biased and say ‘you need to do this and you need to do that.’ The facilitators don’t do that. They are open and unbiased and want to make sure the family knows it’s their meeting. They want the family involved and that they actually have choices and aren’t told what to do. So I’d keep the facilitators first and foremost.”

“I think when [FTCs] are facilitated – when they have a facilitator, I think it is done better. I think the families get more from an FTC if a facilitator does it.”

“I love the FTC when the facilitator does it because it gives me a lot of information, a lot of insight, and it seems more comfortable with the parent. I really would like it to happen more like that, because the parent is open and talking and the family seems less afraid.”

Strengths and Limitations of FTC

Many positive perceptions of FTC came out of the interviews with FCCs and FTC Facilitators. These perceptions are consistent with findings from previous studies conducted as part of the process evaluation for the grant. In summary, FTC was considered to be strengths-based and essential to the work that is done by FCCs. As one FCC noted, “I can’t see us functioning without it. I’d hate to see it disappear because it’s a tremendous tool that helps the family and sends the message that you’re not a horrible family...”. The perception that families are empowered by the FTC process resonated in the feedback that many FCCs provided in the interviews. For example, an FCC explained: “The most important aspect [of the FTC] is giving the parents the opportunity and the time to speak for themselves about what their opinion is of the situation and what happened...”. The FTC model using a facilitator was also considered integral to working with families on their service plan. The FCCs overwhelmingly perceived the FTC Facilitators to be skilled at facilitating. Moreover, the FTC was perceived to be useful in providing a concrete plan of action. An FCC explained:

“One of the things that the FTC model is good for FCCs, families, and providers is to provide, to stipulate what is a concrete plan of action. And that’s something we were trying for years to get

providers to do – from a clinical perspective, a treatment plan. How are you addressing mom’s needs, etc.? I think the FTC model, for me, leads to that because I break out in concrete steps how to address each issue.”

While the positive aspects of FTCs dominated the feedback provided by FCCs and FTC Facilitators, there were perceived weaknesses of particular aspects of the FTC models. In summary, the follow up FTCs were not considered to be helpful. A number of FCCs agreed that families do not understand why they need another FTC and that they are not far along enough in services to have a follow up FTC that could be helpful to them. Moreover, the strong preference for Pathway 2 was supported by arguments against Pathway 1. As exemplified in the quote below, there was a strong belief that FCCs should not have the dual role of case manager and facilitator:

“I don’t think a typical FCC is skilled to be the facilitator in these conferences. You have to be neutral; you have to be able to mediate... You have to understand family dynamics, group dynamics. If an FCC has not had the whole training, no, they don’t understand it. Some FCCs still don’t see the benefits of having an FTC... Unfortunately, I don’t see a lot of time in FTCs for the families to tell their stories or process. To me, that’s so valuable. I really feel FTCs should be facilitated by someone who is not the case manager.”

At the same time, there was limited support for Pathway 3 because FCCs perceived that most families do not utilize the alone time as intended. Also, as explained by an FCC below, the alone time was perceived to be sequenced in a way that is not helpful:

“Pathway 3 – I wouldn’t do because the families are not prepared for the alone time. Because pretty much the plan is already made when they have the family alone time. Family alone time should be to come up with a plan, so what’s the point when we already have a plan?”

Conclusion

Because the grant is nearing its end, this evaluation brief is intended to focus on the issue of sustainability. The following is a summary of the aspects of FTC that have the most support from the FCCs and FTC Facilitators interviewed for this study. These aspects have implications for the future design and implementation of FTC and should be thought about in the context of the outcome evaluation findings that will be finalized at the end of the grant period this fall.

- The FTC – regardless of the Pathway – was perceived to be an integral part of managing both in-home supervision and shelter cases. At the same time, both FCCs and FTC Facilitators unanimously believed that the FTC engaged families in decision making and linked families to services that families themselves identified as potentially helpful.

- There was a strong preference for Pathway 2, which involves the FCC and FTC Facilitator as co-facilitators. This FTC model utilizes the skills of FTC Facilitators to facilitate FTCs with families and promotes direct and immediate linkage of services through the FTC Facilitators. The FTC Facilitators were perceived to play an important supportive role for the FCC. Pathway 3 is identical to Pathway 2 with respect to the FTC Facilitator roles, but the FCCs supported Pathway 2 over Pathway 3. They believed that families underutilize family alone time and that family alone time is redundant to the FTC itself.
- A shorter, rather than a longer, period of time to conduct the initial FTC was preferred because immediate contact with families through the FTC helps the engagement process. There was no consensus on a specific timeline for the initial FTC, but there was strong support for conducting the initial FTC as soon as possible upon case transfer to an FCC.
- There was support for redesigning the follow up FTC. In particular, FCCs believed that families should decide whether or not – and when - they want or need a follow up FTC.
- In light of the heavy workload of FCCs, there was support for streamlining the FTC process by reducing paperwork (e.g., service referrals and grant related instruments) and duplicative note taking. Overall, FCCs agreed that FTCs through Pathway 2 and 3 are time consuming; however, they also agreed that FTCs conducted with FTC Facilitators help them do their job better because FCCs receive important support to provide better case management services to their families.