

A Q&A Report



Talk about the origins and elements of your Safe at Home program.

Kendra Boley-Rogers, LSW, Foster Care/Homefinding Policy Specialist, Bureau for Children and Families: The West Virginia Department of Health and Human Resources (DHHR), Bureau for Children and Families was awarded a Title IV-E waiver to conduct a Demonstration Project in October 2014 by the United States Administration for Children and Families, Children's Bureau. The waiver is being used to implement a child welfare reform project called Safe at Home West Virginia.

Safe at Home W.V. is a wraparound model program, designed as a strengths-based service delivery system, that is child- and family-driven and founded on an ongoing, outcomes-focused planning process. It is a multi-agency collaboration intended to offer flexible assistance through a coordinating agency that ensures accountability. The following core components are utilized to allow a family's needs to truly be met, by building skills and capacity within the family and the family's community to empower the family with the tools they need to sustain change:

- Family teams that think creatively are developed to drive the process.
- Creative methods are utilized to develop services that fit needs identified by the family, allowing the process to be needs-driven.
- Interagency collaboration is relied upon to guide the family to develop a path toward natural community supports composed of community resources that are identified or developed in the family's community.
- Family-driven, strengths-based planning and facilitation assist the family in creating a plan to meet the needs they identify for themselves.

The wraparound process is built on family strengths; guided by interagency collaboration; rooted in the family's community; created by the family, for the family; and a path to natural community supports.

To be referred to Safe at Home W.V., the DHHR Regional Program Manager (RPM) must first approve the youth. The child welfare worker or the multidisciplinary treatment team may

recommend a referral for a specific youth. Under the current Title IV-E Demonstration Project, Safe at Home W.V. serves a targeted population based on the following framework:

- Youth ages 12 to 17 (up to the youth’s 17th birthday)—with a diagnosis of a severe emotional or behavioral disturbance, according to standardized diagnostic criteria, that impedes his or her daily functioning currently in out-of-state residential placement—who cannot return successfully without extra support, linkage and services provided by wraparound;
- Youth ages 12 to 17 (up to the youth’s 17th birthday)—with a diagnosis of a severe emotional or behavioral disturbance, according to standardized diagnostic criteria, that impedes his or her daily functioning currently in in-state residential placement—who cannot be reunified successfully without extra support, linkage and services provided by wraparound;
- Youth ages 12 to 17 (up to the youth’s 17th birthday)—with a possible diagnosis of a severe emotional or behavioral disturbance, according to standardized diagnostic criteria, that impedes his or her daily functioning—who is at risk of out-of-state residential placement, and the utilization of wraparound can safely prevent the placement;
- Youth ages 12 to 17 (up to the youth’s 17th birthday)—with a possible diagnosis of a severe emotional or behavioral disturbance, according to standardized diagnostic criteria, that impedes his or her daily functioning—who is at risk of in-state or psychiatric residential treatment facility placement, and can be safely served at home by utilizing wraparound.



How is the family engaged in this process?

KBR: The Wraparound Facilitator plays a critical role regarding fidelity to the wraparound model, which is designed to be family-driven. This model of service delivery is often foreign to families who are used to encountering numerous barriers to getting the help they need for their youth. In their facilitation of “family joining,” the Wraparound Facilitator creates an environment that focuses on the youth and family’s strengths so they feel comfortable enough to truly be engaged in the process and take an active role in the collaboration. The family may initially have difficulty trusting that the professionals involved intend to interact with them in a different manner. It is critical that the Wraparound Facilitator set the tone of the family being the expert.

This role comprises additional aspects: coordinating seamless multi-agency service provision, which decreases frustration on the part of the family by making the system easier to navigate; and engaging community partners in the process and facilitating creative service delivery to fit

the family's unique needs, which prevents the family from feeling as if they are spinning their wheels trying to elicit the services they need.

Throughout the process, the Wraparound Facilitator is responsible for facilitating all Child and Family Team Meetings. Although each team member is responsible for adhering to the model, the Wraparound Facilitator guides this process from the very beginning and is responsible for teaching the family team important skills, such as brainstorming, conflict resolution and others designed to elicit full team collaboration; listening closely to the family to assist them in identifying strengths, needs, natural supports and other components that are essential to the process; guiding the family in developing a crisis plan; and acting as a liaison, coach and support to the family team throughout the process.



What role does the family play in the process?

KBR: Child and Family Teams are groups of people chosen by the family and connected to them through natural, community and formal support relationships. Child and Family Teams develop and implement the family's plan, address unmet needs and work toward the family's vision by monitoring the family's progress on the wraparound plan, revising and refining it as needed. Child and Family Teams are the forum through which families' goals are identified and decisions are made on how to achieve the goals.

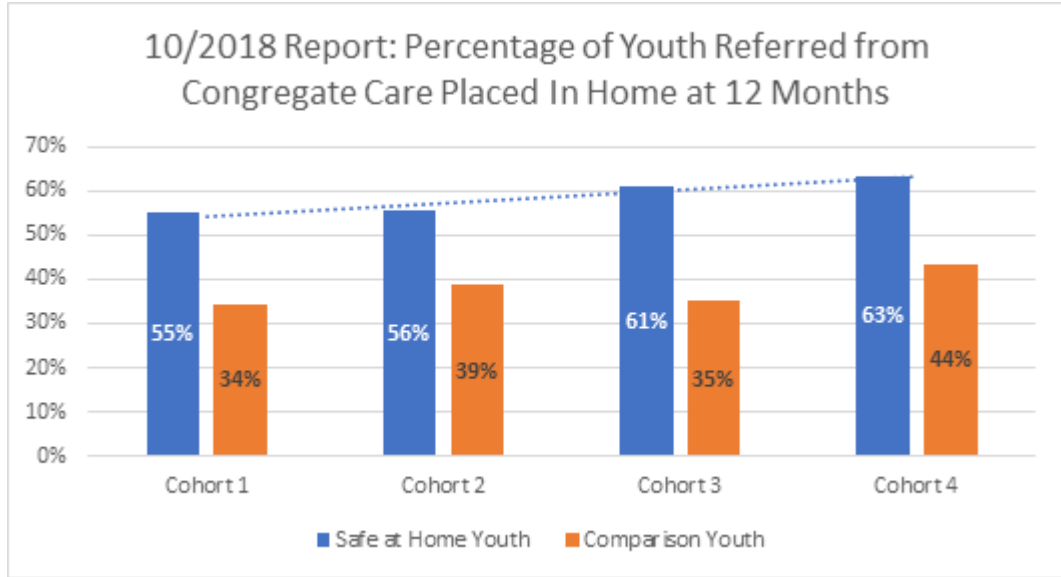
Child and Family Team members can be chosen from informal, formal or community groups. Some possible team members are:

- Informal: Family, relatives, friends, co-workers, neighbors;
- Formal: Wraparound staff, mental health therapist, occupational therapist, applied behavioral analysis therapist, behavioral support professional, social worker, probation officer, agency staff, police;
- Community: Parks and recreation staff, regional youth service centers, school staff, library staff, local merchants, church members, social-club members, community organization staff and volunteers.



What has been the impact of Safe at Home W.V. on placements in the child welfare system?

KBR: At 12 months, Safe at Home youth were more likely to have returned home from congregate care than youth from the historical comparison group.



Safe at Home youth spend less time in congregate care than do the matched comparison youth, and at a statistically significant rate ($p < .01$).

| October 2018 Report: Average Length of Stay in Congregate Care Within 6 and 12 Months | | | |
|--|--------------|---|--|
| Cohort | Group | Average Days in Congregate Care within 6 Months | Average Days in Congregate Care within 12 Months |
| 1 | Safe at Home | 101 | 167 |
| | Comparison | 137 | 239 |
| 2 | Safe at Home | 84 | 144 |
| | Comparison | 131 | 237 |
| 3 | Safe at Home | 61 | 126 |
| | Comparison | 122 | 219 |
| 4 | Safe at Home | 70 | 139 |
| | Comparison | 127 | 217 |
| 5 | Safe at Home | 64 | - |
| | Comparison | 115 | - |

Safe at Home youth are also more likely to return to their home counties than are youth in the historically matched comparison group. Most results are statistically significant as well.

| October 2018 Report: Youth County Movements | | | | |
|--|--------------|-------------|---------------------|----------------------|
| Cohort | Group | Denominator | Percent at 6 Months | Percent at 12 Months |
| From Out-of-County to Home-County | | | | |
| 1 | Safe at Home | 66 | 59% | 64% |
| | Comparison | 69 | 28% | 39% |
| 2 | Safe at Home | 96 | 61% | 59% |
| | Comparison | 103 | 29% | 48% |

| October 2018 Report: Youth County Movements | | | | |
|---|--------------|-------------|---------------------|----------------------|
| Cohort | Group | Denominator | Percent at 6 Months | Percent at 12 Months |
| From Out-of-County to Home-County | | | | |
| 3 | Safe at Home | 74 | 81% | 72% |
| | Comparison | 85 | 33% | 45% |
| 4 | Safe at Home | 87 | 75% | 69% |
| | Comparison | 107 | 28% | 50% |
| 5 | Safe at Home | 91 | 66% | - |
| | Comparison | 97 | 35% | - |

When youth do need to enter foster care, Safe at Home youth are more likely to be placed in relative homes at a statistically significant rate ($p < .01$).

| October 2018 Report: Percentage of Youth Placed in Relative Homes | | | |
|---|-------------|---|--|
| Group | Denominator | Percentage in Relative Foster Homes at 6 Months | Percentage in Relative Foster Homes at 12 Months |
| Safe at Home | 87 | 70% | 65% |
| Comparison | 100 | 24% | 31% |

Safe at Home youth are also more likely to reunify, with many cohorts doing so at a statistically significant rate.

| October 2018 Report: Youth Reunified Within Six and Twelve Months of Referral | | | | |
|---|--------------|-----------------------------|-----------------------------------|------------------------------------|
| Cohort | Group | Number of Out-of-Home Cases | Percent Reunified within 6 Months | Percent Reunified within 12 Months |
| 1 | Safe at Home | 78 | 35% | 47% |
| | Comparison | 77 | 14% | 29% |
| 2 | Safe at Home | 120 | 40% | 49% |
| | Comparison | 118 | 16% | 36% |
| 3 | Safe at Home | 92 | 52% | 61% |
| | Comparison | 100 | 17% | 32% |
| 4 | Safe at Home | 112 | 53% | 60% |
| | Comparison | 133 | 17% | 35% |
| 5 | Safe at Home | 125 | 48% | - |
| | Comparison | 129 | 17% | - |

Some of the most common successes achieved by youth and families as reported by stakeholders interviewed in August 2018 were:

- Improved grades and school attendance;
- Improved behavior or emotional regulation;
- Youth sobriety;
- Youth taking responsibility for themselves;
- Healthier family and peer relationships;
- Living in a safer location;

- Increased parenting skills;
- Achieving permanency.

Local coordinating agencies did particularly well in developing high-quality wraparound and Crisis Safety Plans, where the content of those plans demonstrated a strong adherence to the wraparound model. Fidelity measures were created by the National Wraparound Initiative and scored by the extent to which those standards were met by reviewers in each case. Overall, fidelity scores were higher than what was reported in 2018, and improvement was often demonstrable between the initial and most recently created plans within a case.

Youth/family feedback about the program in August 2018 was overwhelmingly positive.

The outcome analysis looks at youth in six-month cohort periods based on the date of referral. This allows the evaluative team to see the extent to which there are improvements over time. Additionally, youth from Safe at Home W.V. are matched to youth in a historical comparison group through a statistical technique called propensity score matching.



What are your future plans for Safe at Home W.V.?

KBR: DHHR's Bureau for Children and Families is committed to sustaining and expanding Safe at Home W.V. to the appropriate children and families of West Virginia. Sustainability work and planning continue from a program and financial perspective.



Do you see it moving into a prevention piece with no age restrictions as a Family First response?

KBR: DHHR's Bureau for Children and Families currently anticipates expansion of the availability of Safe at Home W.V. to include children of other ages when Safe at Home W.V. is found to be appropriate.

For additional information on Safe at Home West Virginia, please visit <http://safe.wvdhhr.org>, email SafeatHome@wv.gov or contact Amy Lawson Hymes, LSW, MSW, Deputy Commissioner of Operations, Bureau for Children and Families, DHHR at 304-356-4543.