

Brief Description	<p>Family Connections (FC) is a multi-faceted community-based program that works with vulnerable families in their homes, in the context of their neighborhoods, to help them meet the basic needs of their children and prevent child maltreatment and out-of-home placement.</p>  <p>Since 2013, eight Preventive Programs have been implementing Family Connections in The Bronx, Manhattan, and Brooklyn</p>
FC Core Components	<ol style="list-style-type: none"> 1. Intake & screening 2. Outreach & engagement 3. Concrete/emergency needs assessment and services 4. Comprehensive family assessment (including the use of standardized clinical assessment instruments) 5. Outcome driven service plans with SMART goals 6. Change focused intervention <ol style="list-style-type: none"> a) Facilitation of change b) Advocacy/service facilitation 7. Evaluation of Change (at least every 90 days after the initial service plan) – including the assessment of change over time using standardized assessment instruments 8. Case closure
Target Population	Families with children (birth to 18) who meet risk criteria (criteria are adapted from the New York State Risk Assessment Profile)
Outcomes	Original research indicated positive change over time in protective factors (parenting attitudes, parenting competence, social support); diminished risk factors (parental depressive symptoms, parenting stress, life stress); and improved child safety (physical and psychological care of children) and child behavior (internalizing and externalizing behavior). Agencies replicating FC have demonstrated similar changes in risk and protective factors over time.
Length of Service	In NYC, the initial service period is 6-7 months, with the option of extending intervention in 90-day increments when outcomes have not been achieved. As a Family Support Intervention, services may be provided up to 12 months. <i>NOTE: shorter interventions have demonstrated greater cost effectiveness in the original demonstration and the federally funded cross site evaluation.</i>
Staff Qualifications	BSW or MSW under the supervision of an Advanced MSW Clinical Social Work

	Supervisor. At least one hour of individual supervisory coaching and 1 hour of group supervision are required every week.
Workload/Caseload	Fidelity criteria focus on performance of core intervention components rather than a pre-determined caseload size.
Overview of General Requirements	
<ol style="list-style-type: none"> 1. Comply with all Family Connections Fidelity Criteria (see Attached) 2. Participate in a Readiness to Implement Family Connections assessment at start up. 3. Supervisors complete the ACS Workforce Institute Building Coaching Competency 2-day course and participate in Coaching Collaboratives and Coaching Skill Refreshers available on a monthly basis in each borough 4. All staff complete the Building Competence for Family Connections Practice hybrid course (partially online and live), all staff complete homework that guides FC practice in all components 5. All staff implement the intervention as outlined in the NYC Family Connections Intervention Manual 6. Directors/Managers meet monthly in a Family Connections Collaborative Leadership Team 7. Supervisors meet monthly for peer coaching and technical assistance. 8. QI staff build competence in using Qualtrics to support the Computer Assisted Interview and the Qualtrics case review fidelity tool 9. All programs must provide electronic devices (tablets, smart phones, laptops) that case planners use with families for the Computer Assisted Self Interview (CASI) required during the comprehensive family assessment and evaluation of change intervention components. 10. Programs agree to participate in data sharing and evaluation. 11. Programs participate in an assessment of fidelity every six months 	
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Published Papers about Family Connections:

- Brodowski, M. L., & Filene, J. H. (2009). Engaging program staff in economic evaluation: Lessons learned and recommendations for practice. *Protecting Children, 24*(3), 70-77.
- Bridge, T. J., Massie, E. G., & Mills, C. S. (2008). Prioritizing cultural competence in the implementation of an evidence-based practice model. *Children and Youth Services Review, 30*, 1111-1118. doi: 10.1016/j.chilyouth.2008.02.005
- Collins, K. S., Strieder, F., DePanfilis, D., Tabor, M., Freeman, P., Linde, L., & Greenberg, P. (2011). Trauma Adapted Family Connections (TA--FC): Reducing developmental and complex trauma symptomatology to prevent child abuse and neglect. *Child Welfare, 90*, 29-47.
- Corso, P., & Filene, J. H. (2009). Programmatic cost analysis of the Family Connections Program. *Protecting Children, 24*(3), 78-88.
- DePanfilis, D. (2015). Family Connections: Using collaborative partnerships to support dissemination. *New Directions in Child and Adolescent Development, 149*, 57-67. coi:10.1002/cad.20113.
- DePanfilis, D. (2009). Using prevention science to reduce the risk of child neglect. *Children Australia, 34*(1), 40-44.
- DePanfilis, D., & Dubowitz, H. (2005). Family Connections: A program for preventing child neglect. *Child Maltreatment, 10*, 108-123. doi: 10.1177/1077559505275252
- DePanfilis, D., Dubowitz, H., & Kunz, J. (2008). Assessing the cost-effectiveness of Family Connections. *Child Abuse & Neglect, 32*, 335-351. doi:10.1016/j.chiabu.2007.06.005
- DePanfilis, D., Filene, J. H., & Brodowski, M. L. (2009). Introduction to Family Connections and the national replication effort. *Protecting Children, 24*(3), 4-14.
- Filene, J. H., Brodowski, M. L., & Bell, J. (2014). Using cost analysis to examine variability in replications of an efficacious child neglect prevention program. *Journal of Public Child Welfare, 8*(4), 375- 396. doi: 10.1080/15548732.2014.939249
- Girvin, H., DePanfilis, D., & Daining, C. (2007). Predicting program completion among families enrolled in a child neglect preventive intervention. *Research on Social Work Practice, 17*, 674-685. doi: 10.1177/1049731507300285
- Lindsey, M. A., Hayward, R. A., & DePanfilis, D. (2010). Gender differences in behavioral outcomes among children at risk of neglect: Findings from a family-focused prevention intervention. *Research on Social Work Practice, 20*, 572---581. doi: 10.1177/1049731509349713
- Sharpe, T., DePanfilis, D., Strieder, F., & Gregory, G. (2009). Replication of Family Connections: Lessons learned from grandparents. *Protecting Children, 24*(3), 58-68.

- Simpson, G. M. (2017). Social support and survival strategies of older African American grandmother Caregivers. *GrandFamilies: The Contemporary Journal of Research, Practice and Policy*, 4(2), 24-51.
- Stephens, K., Mills, C., Williams, C., Bridge, T., & Massie, E. (2009). Maximizing the therapeutic helping alliance with high-risk families. *Protecting Children*, 24(3), 28-38.
- Swanson Ernst, J., Meyer, M., & DePanfilis, D. (2004). Housing characteristics and adequacy of physical care of children: An exploratory analysis. *Child Welfare, Special Issue on Housing and Homelessness*, 83, 437-452.
- Theriot, M.T., O'Day, K. R., & Hatfield, K. (2009). Client and service use predictors of successfully completing a child maltreatment prevention program. *Protecting Children*, 24(3), 39-50.
- Wu, S. T, Mimura-Lazare, A., Petrucci, C. J., Kageyama, N., & Suh, C. (2009). Culturally competent practice with Cambodian and Korean families in Los Angeles: Results from a 5-year replication project of Family Connections. *Protecting Children*, 24(3), 16-27.
- Zaid, S., Eames, C., Driver, D., & LeGendre, A. (2009). Integrating research and clinical practice through collaborative therapeutic assessment. *Protecting Children*, 24(3), 51-58.

Dissertations using Family Connections data:

- Leah Bartley – Making it happen: Understanding worker and organizational factors related to fidelity to Family Connections, a child maltreatment prevention program. Ph.D. 2017, University of Maryland, Baltimore.
- Melissa Lim Brodowski – Factors associated with changes in parental depressive symptoms: A longitudinal multilevel analysis of parents at high risk for child maltreatment. Ph.D. 2012, University of Maryland, Baltimore.
- R. Anna Hayward, Neighborhood conditions, father involvement, parenting competence, and behavior problems in a sample of children at risk for neglect: A structural equation model. Ph.D. 2009, University of Maryland, Baltimore.
- Gaynell M. Simpson – An exploration of social support and coping and the impact on caregiver well-being among African American grandmothers who provide care for their grandchildren. Ph.D. 2003, University of Maryland, Baltimore.



NYC-FCC Fidelity Criteria

The table presented below specifies the conditions necessary to replicate Family Connections by NYC FCC preventive service programs. The FCC works with the FCC Technical Assistance Team to develop and test methods for assessing these fidelity criteria.

Fidelity Criteria
REQUIREMENTS FOR NYC FCC PREVENTIVE PROGRAMS
Family Connections Philosophical Principles
<p>Uses & Supports Family Connections (FC) philosophical principles in the delivery of services (see NYC FCC Intervention Manual):</p> <ol style="list-style-type: none"> 1. community outreach 2. comprehensive family assessment 3. individualized, tailored intervention 4. helping alliance 5. empowerment approaches 6. strengths perspective 7. cultural competence 8. developmental appropriateness 9. outcome driven service plans with SMART goals 10. focus on the practitioner
Administrative Activities
Establishes an implementation Team that meets regularly
Establishes safety policies for practitioners related to their work in the community.
Affirms that the program has developed and implemented risk management procedures (e.g., child abuse and neglect reporting, self-injurious behavior, etc.).
Develops and implements marketing and recruitment procedures targeted toward potential program clients.
Establishes and manages referral procedures for actively reaching out to eligible families with offers of service.
Forms and utilizes a community advisory committee that incorporates consumer input.
Provides electronic devices to all case planners so that primary caregivers may complete computer assisted self-interviews (CASI) that incorporate standardized assessment instruments.
Professional Development Activities
Recruits and supports a professional workforce (social work education or equivalent)
Ensures that all staff complete the Building Competency for Family Connections learning program.



Fidelity Criteria
Provides at least an hour of weekly individual supervisory coaching to FC staff.
Supervisors participate in regular ACS Workforce Institute Coaching Collaboratives and Skill Refreshers to reinforce use of the coach approach in Supervision.
Fosters an organizational culture that reinforces the FC philosophical principles, intervention methods, and procedures via weekly group supervision of at least one hour.
Provides opportunities for staff to participate in seminars, conferences, and/or other training to support their continuous professional development in FC related social work practice methods. For example, all case planners must complete ACS Workforce Institute Motivational Interviewing courses, Safety & Risk Assessment, and other available courses that reinforce strengths-based engagement, assessment, and interpersonal helping skills.
Fidelity Assessment & Outcome Evaluation Activities
Follows the FC logic model to specify the connections between outputs and outcomes
Develops, implements, and manages continuous methods for assessing the quality of services through a continuous quality improvement system
Implements a self-assessment of fidelity at least every six months and participates in on-site fidelity assessments by the developer at least every six months
Measures change over time in risk factors, protective factors, and child safety outcomes at the family level and aggregates agency data for all families served.
Implements strategies that document the process of implementation and the service delivery process.
Participates in data sharing and evaluation activities with other Family Connections Providers and with the developer.
Implements all FC Practice Components
INTAKE/SCREENING Uses, the FC Intake screening criteria to identify families eligible for FC. Enrolls families deemed eligible using the criteria and screens out families who do not meet eligibility criteria. Documents the process of screening for eligibility including the basis for decision-making, and the supervisor's involvement in decisions.
OUTREACH & ENGAGEMENT After clients are assigned to the FC intervention, the FC case planner initiates the therapeutic alliance through face-to-face contact with the family <u>within one business day of screening</u> a family as eligible for FC intervention. Provides <u>most</u> services in the family home, meeting families where they live.
CONCRETE/EMERGENCY SERVICES Assesses families related to concrete and emergency needs and provides services to address initial concrete and emergency needs and on an ongoing basis.



Fidelity Criteria

COMPREHENSIVE FAMILY ASSESSMENT

Conducts comprehensive family assessments to guide the service delivery process within 30-45 days of a family signing for services.

Uses Family Connections selected standardized assessment instruments to guide the identification of risk and protective factors associated with child maltreatment as part of the comprehensive family assessment. Completes the New York State Family Assessment Service Plan Strengths and Needs Scales and incorporates results in the comprehensive family assessment.

Selects at least one outcome from a standard set of FC case outcomes to drive the development of the service plan.

OUTCOME DRIVEN SERVICE PLANS WITH SMART GOALS

Engages the family in a goal setting & planning process. Develops outcome driven service plans with SMART goals geared to decrease risk and increase protective factors associated with child maltreatment following the completion of the comprehensive family assessment.

CHANGE FOCUSED INTERVENTION

Delivers tailored, direct change focused services to help families reduce risks, maximize protective factors, and achieve case/service outcomes and SMART goals.

Facilitates change focused intervention to each family with the expectation that a higher intensity of services will be delivered when a child may be unsafe and/or when the family is identified with higher risk or emergency needs.

Advocates on behalf of child and family clients in the community and facilitates services provision by other organizations/individuals as appropriate to support the achievement of case outcomes and SMART goals.

EVALUATION OF CHANGE

Implements a process for evaluation of client change over time by employing the use of Family Connections standardized client assessment instruments and completes the New York State Family Assessment Service Plan Strengths and Needs Scales 90 days post service plan.

If insufficient change has occurred to sufficiently reduce the risk of child maltreatment at the 90-day evaluation or change, negotiates a new service plan with families if the children can be safely maintained at home.

Plans and implement new service plan evaluations of change including the use of self-report and observational assessment instruments within 90 days post a 2nd service plan (if applicable).



Fidelity Criteria

CASE CLOSURE

Implements a planned and purposeful review of change and progress with the family prior to closing, including using the evaluation of change to document the basis for case closure.

Documents the case closure decision with supervisory approval.