

welcome! **THE TRAINING WILL BEGIN SHORTLY**
While you're waiting...

Icebreaker Question
Tell us your favorite way to show appreciation for your staff or colleagues
Please enter your answer in the Chat.

Recording & Resources
Sent to your registration email within the next 2 days.

Survey & Certificate of Completion
Available following the training.

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Housekeeping

Microphone icon: This presentation is being recorded.

Mobile phone icon: Locate the controls on the toolbar at the bottom of your screen.

Screen icon: Access the presentation slides now! The link can be found in the chat.

Chat icon: When using the chat, please reply to all panelists and attendees (when appropriate and within comfort level).

Clipboard icon: A brief survey will be available after the training.

Envelope icon: A follow-up email will be sent to all participants within 2 days.

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Hi, We're CalTrin!

Who we are

- The California Training Institute
- Funded by the State of California, Dept. of Social Services, Office of Child Abuse Prevention (OCAP)
- We support child abuse prevention in California through professional development and extended learning.

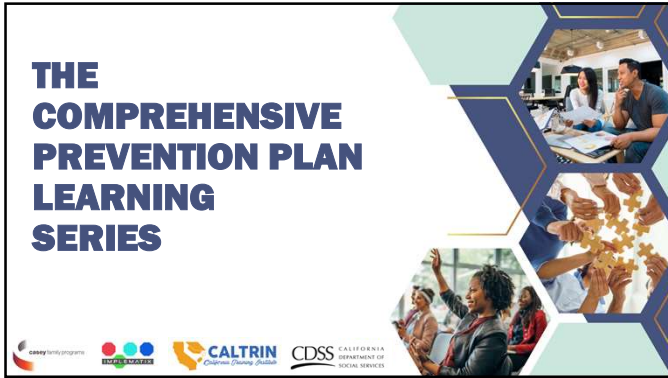
Training Domains

Direct Service Delivery Skills Evidence-Based/Evidence-Informed Service Delivery Management & Leadership Development Trauma-Informed Systems

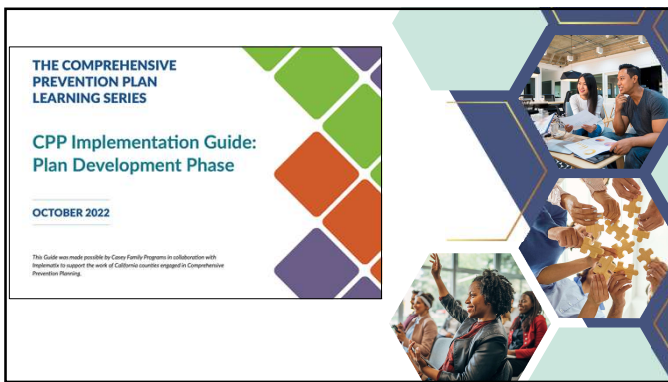
CALTRIN
California Training Institute

This training was made possible with funding from the California Department of Social Services, Office of Child Abuse Prevention. Any opinions, findings, conclusions, and/or recommendations expressed are those of the CABC-CalTrin and do not necessarily reflect the views of the California Department of Social Services.

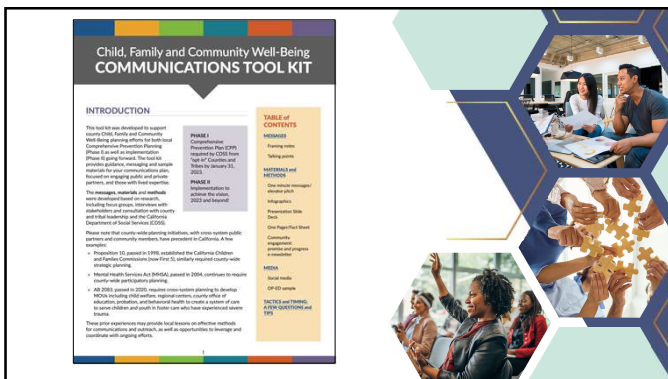
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**THE COMPREHENSIVE PREVENTION PLAN
LEARNING SERIES**

TODAY'S TOPIC:
**PREPARING THE
WORKFORCE TO
DELIVER FAMILY FIRST
PREVENTION SERVICES**



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**THE COMPREHENSIVE PREVENTION
PLAN LEARNING SERIES**

Dan Edwards, PhD, Licensed Clinical Psychologist; EBP Consultant
Jennifer Rolls Reutz, MPH, Director, CA Evidence-Based Clearinghouse for Child Welfare (CEBC) and CA Training Institute (CalTrin)
Kelly Winston, LCSW; Chief, Family Centered Safety and Support Bureau, California Department of Social Services

Moderator: **Khush Cooper**, MSW, PHD, President & CEO Implematix


OUR PRESENTERS



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AGENDA


10:15 am	Agenda & Introduction to the Domain – Khush Cooper
10:25 am	CDSS Statewide FFPS Workforce Development Plan – Kelly Winston
10:35 am	Training to Prevention Principles: Tier 1 – Jennifer Rolls Reutz
11:05 am	Break
11:15 am	FFPS Foundational for Direct Services Staff: Tier 2 – Kelly Winston
11:25 pm	EBP-Specific Training for Practitioners: Tier 3 – Dan Edwards
11:55 am	Break
12:05 pm	Reflections
12:20 pm	Open Q&A
12:50 pm	Wrap-up
1:00 pm	Webinar Ends



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WORKFORCE TRAINING DOMAIN OVERVIEW


Khush Cooper



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READINESS DOMAINS

1. Governance (Jul 20, 2022)	2. Stakeholder Collaboration (Jul 20, 2022)	3. Fiscal and funding (Jun 29, 2022)
4. Program design and service array (Aug 17, 2022)	5. Service quality and outcomes (Sep 21, 2022)	6. Workforce training and development • County • Service providers TODAY
7. Policies, rules, and regulations	8. Reporting	9. Automation




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ELEMENTS OF THIS DOMAIN

Workforce development resources for and training in three Tiers:

1. Prevention frameworks, mindsets and principles, including linking prevention and the Integrated Core Practice Model (ICPM)
2. Casework
 - Assessment
 - Candidacy
 - Safety monitoring
 - Risk assessment
 - ICPM
3. Evidence-Based Practice (EBP) practitioners for locally-selected EBPs

Training plans, schedules, curricula, trainers, contracts, funding for all the above



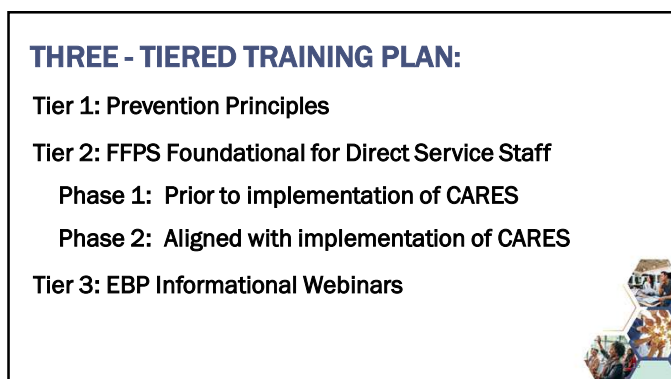
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TWO PRIMARY TARGET AUDIENCES:

Title IV-E Staff

- CWS Social Workers and Supervisors
- Probation Officers and Supervisors
- IV-E Tribal Staff

Community Pathway Staff

- Family Resource Centers (FRCs)
- California Child Abuse Prevention Councils (CAPCs)
- Other community and county agencies



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TRAINING TO PREVENTION PRINCIPLES - TIER 1

MOVING UPSTREAM TO SUPPORT AND PROMOTE CHILD AND FAMILY WELL-BEING

Jennifer Rolis Reutz



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Source: Public Health Sudbury & Districts www.phsd.ca

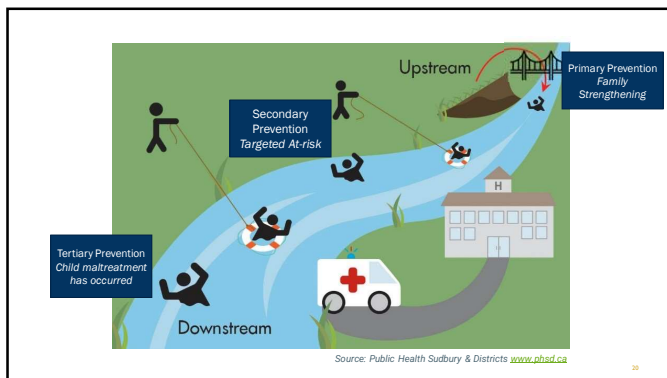
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LEVELS OF PREVENTION

PRIMARY	SECONDARY	TERTIARY
<p>These activities are directed at the general population to strengthen communities and improve child well-being by focusing on the social determinants of health, defined as the conditions into which people are born, grow, work, live, and age, and the wider set of forces and systems shaping the conditions of daily life.</p>	<p>These activities are offered to populations that have one or more risk factors associated with compromised well-being or child maltreatment, such as poverty, parental substance abuse, young parental age, parental mental health concerns, exposure to violence, and parental or child disabilities. Programs seek to build protective factors and mitigate the risk factors.</p>	<p>These activities focus on families where child maltreatment has occurred, seeking to mitigate its trauma and reduce the negative consequences of the maltreatment and to prevent its recurrence.</p>



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LEVELS OF PREVENTION STRATEGIES

PRIMARY STRATEGIES MAY INCLUDE:	SECONDARY STRATEGIES MAY INCLUDE:	TERTIARY STRATEGIES MAY INCLUDE:
<ul style="list-style-type: none"> Reducing poverty and drug use Improving economic stability, transportation and access to supports Increasing social connections within the community Improving health and access to healthcare Improving school readiness, neighborhood safety and play areas for children Increasing communication and public awareness strategies for education, engagement, and outreach 	<ul style="list-style-type: none"> Increasing accessibility to family resource centers that offer information and referral services to families living in low income areas Offering parent education programs in strategic locations Providing home visiting programs that provide support and assistance to expecting and new mothers Providing respite care for families that have children with special needs Increasing access to family-centered substance abuse treatment services Connecting families to public assistance programs such as CalWORKS and CalFresh 	<ul style="list-style-type: none"> Providing family reunification services Providing permanency planning Offering parent support groups that help parents transform negative practices and beliefs into positive parenting behaviors and attitudes Providing mental health services for children and families affected by maltreatment Providing parent mentoring programs to families in crisis




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REIMAGINING PREVENTION

To reimagine prevention, we need to:

- Explore what a prevention mindset entails
- Examine how you are already doing prevention
- Take action to strengthen families through your work



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WHAT IS PREVENTION MINDSET?

- Accepting a collective challenge to reduce child abuse and neglect and increase child, family, & community well-being
- Enacting change through shared vision
- Changing community conditions, building on community strengths and enhancing individual family services and supports
- Centering goals and work in equity
- Making community voice and partnership need to be the drivers of change
- Everyone has a role. Nobody holds the whole solution. Collaboration is a necessity.
- Finding "upstream" primary prevention solutions by looking beyond silos and current funding structures focused on improvement and intervention
- Determining definitions of need and measures of progress using data on disparities and inequities



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WHY DO WE NEED A PREVENTION MINDSET?

- Overhaul needed in prevention work
- Breaking down silos of care
- Equity-centered and Culturally-responsive
- Cross-collaboration across systems



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HOW IS A PREVENTION MINDSET BENEFICIAL?

- Early intervention and support decreases likelihood of higher-level services
- Builds child and family wellbeing system throughout counties and State
- Access to primary prevention services uplifts all
- Healthy, thriving families who receive support before their level of need escalates



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Primary Prevention: Strengthening Families & Improving Community Well-Being



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PROTECTIVE FACTORS FRAMEWORK

Parental
Resilience

Social-
Emotional
Competence

Social Support

Concrete
Support in
Times of Need

Understanding
Child
Development



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Parental Resilience

The ability to recover from difficult life experiences, and often to be strengthened by and even transformed by those experiences



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Social Connections

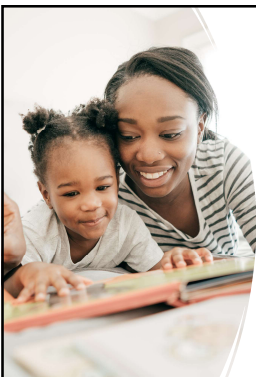
The ability and opportunity to develop positive relationships that lessen stress and isolation and help to build a supportive network



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Knowledge of child development

The ability to exercise effective parenting strategies to guide and know what to expect as children develop in multiple domains (physical, cognitive, language and social and emotional)



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Concrete Support In Times of Need

Access to supports and services that reduce stress and help to make families stronger.



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Social & Emotional Competence of Children


Family and child interactions that help children develop the ability to communicate clearly, recognize and regulate their emotions and establish and maintain relationships



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Social Determinants of Health

The conditions in which you live, learn, work and age affect your health



Social Determinants of Health
Copyright-free

Healthy People 2030

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TWO COMMON FRAMEWORKS

Protective Factors

- Family-focused
- 5 Factors
- Protective factors are characteristics or strengths of individuals, families, communities or societies that act to mitigate risks and promote positive well-being and healthy development

Social Determinants of Health

- System-focused
- 5 Domains
- Social determinants of health (SDOH) are the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.



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WHERE DO WE START?

- Individual Mindset
- Organizational Mindset
- Community Collaboration



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PREVENTION MINDSET

Individual

- Knowledge, understanding or thoughts about Primary Prevention
- Reframing: "I used to think...now I'm wondering if..."

Organization

- Building a shared vision around prevention mindset
- Professional staff training and development

Community

- Upstream support from prevention planning team
- Get familiar with CAPC and FRCs in your area



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TIER ONE: PREVENTION PRINCIPLES

- Training modules/theoretical approaches designed to impact larger change by teaching **common principles** across diverse agencies.
- Training that focuses on reaching a large audience of the workforce to help them in understanding their place in prevention work and to **develop consistent prevention knowledge and approaches** to be diffused across California.



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TIER ONE: PREVENTION PRINCIPLES

- **Audiences:**
 - Caseworkers, supervisors, managers, directors from child welfare, juvenile probation, local service providers, community-based agencies, tribal agencies
 - County and community partners from behavioral health, substance use, public health, family resource centers, prevention networks



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TIER ONE TOPICS

Family First Prevention Services (FFPS) Overview

- Federal and state legislation
- Main elements required to implement FFPS
- Roles & responsibilities of staff and cross-sector partners



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TIER ONE TOPICS

Shifting the Mindset

- Shifting perspective & practice from intervention to prevention
- Role of Community Provider in Supporting Families Overview of Integrated Core Practice Model (for those not familiar with ICPM)



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TIER ONE TOPICS

Implicit Bias/Disproportionality: Alignment with CPP

- Understanding how implicit bias affects work and practice
- Learning about current data on disproportionality with marginalized populations and how data contributes to disproportionality
- Learning how to identify and assist families with accessing culturally relevant services



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HOW WILL TIER ONE TRAINING BE PROVIDED?

- Curricula and materials are being developed at the state level
- Training for Trainers (T4T) will be provided
- Title IV-E staff will be trained through usual mechanisms
 - Child Welfare – RTAs, LA County
 - Probation - CPOC
 - Tribes – Northern RTA



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WHAT ABOUT COMMUNITY PATHWAY PROVIDERS?

- Details to be determined in conversation between counties, CDSS, and training contractors
 - Each county's plan is unique
- Statewide training
 - Webinars and large group training
- Individual county responsibility
 - Small group / discussion format
 - Goal is to build local capacity to deliver training for sustainability purposes



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TIER ONE TIMING

Aiming to Start in Mid-2023

Exact timing depends on contracting and capacity



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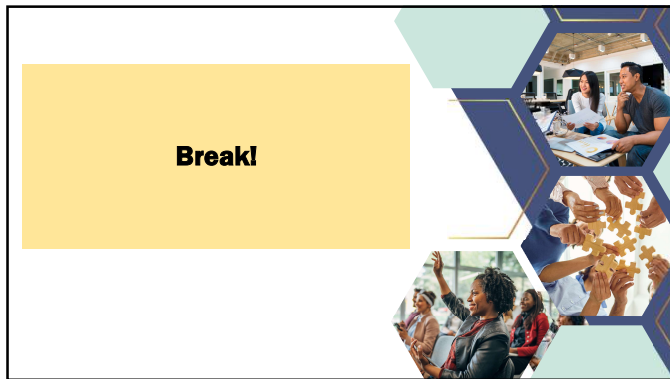
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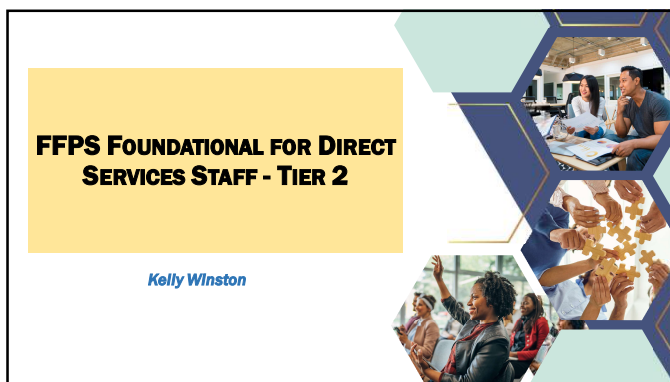
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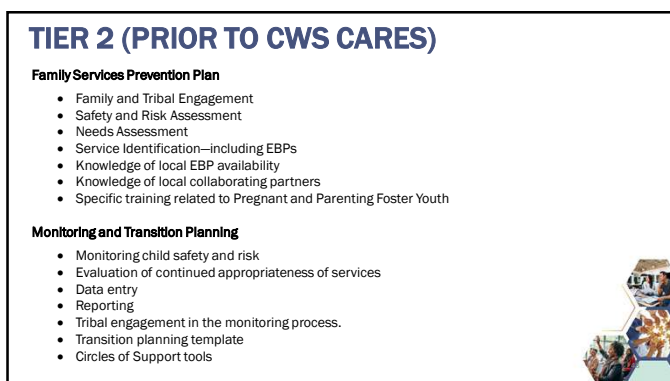
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TIER 2 (AFTER CWS CARES LAUNCH)

Candidacy and Eligibility

- Including compliance with ICWA

FFPSA Part 1 Prevention Plan

Build on FFPS Prevention Plan Development in first phase & add

- Documentation
- Data entry
- Reporting

Monitoring and Transition Planning

Build on Family Services Prevention Plan Development in first phase & add

- Documentation
- Data entry
- Reporting



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WORKFORCE DEVELOPMENT PLAN LOGISTICS

Curriculum Development and T4T:

- TBD

Training Delivery: Title IV-E Agencies

- Regional Training Academies
- Los Angeles County Training Bureau
- Chief Probation Officers of California (CPOC)

Training Delivery: Community Pathways

- Some statewide provision (using entities with widespread reach)
- Some Individual County Responsibility (using local expertise such as FRC's, CAPCs, others)
- Details to be determined in conversation between counties and CDSS and contractors

Timing

- Tier 1: Spring/Summer 2023
- Tier 2 (first phase): Following Tier 1
- Tier 2 (second phase): Aligned with implementation of CARES



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EBP-SPECIFIC TRAINING FOR PRACTITIONERS - TIER 3

Dan Edwards



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SELECTED EBP^s IN CA (FFPSA)

1. Brief Strategic Family Therapy (BSFT)
2. Family Check-Up (FCU)
3. Functional Family Therapy (FFT)
4. Healthy Families America (HFA)
5. Homebuilders
6. Motivational Interviewing (MI)
7. Multi-Systemic Therapy (MST)
8. Nurse Family Partnership (NFP)
9. Parent-Child Interaction Therapy (PCIT)
10. Parents as Teachers (PAT)

**EACH EBP APPROACHES TRAINING IN THEIR OWN WAY*



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OLD-FASHIONED APPROACH TO TRAINING

The usual approach:

Step One: Attend a half-day training (sometimes for CEUs)

Step Two: while there, get a binder and take good notes

Step Three: go back to the office and 'try it out'

[AKA - Train and Hope! (Spray and Pray!)]



The usual results:

- unsuccessful experience implementing wholesale; adopt the 'parts that work' → an 'eclectic approach'

- not much change in practice (but ...

a nice "Shelf of Shame" on the bookshelf)...



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A MORE MODERN VIEW

- I. **Scope of Work:** not just training but also licensing, QA, coaching, and implementation support
- II. **Training Requirements:** Vary, but generally the purveyors have firm guidelines about who gets trained, how, for how long, and how that training and coaching relationship is sustained
Training and Licensing (T&L) are not 'one and done' – but rather ongoing, annually-recurring relationships
- III. **Ongoing Licensing:** dependent upon providing consistent proof of EBP fidelity
- IV. **Economies of scale:** EBP purveyors offer discounts – but approaches vary
- V. *(Fortunately/Unfortunately)...* EBP Training Partners (aka Purveyors): there are sometimes one, sometimes two, and sometimes multiple options to choose from re EBP training and licensing – and each one may approach issues of training (including coaching support, QA, fidelity monitoring, and licensing) differently



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THINKING ABOUT EBP ‘CAPACITY-BUILDING’

Seven “Layers” or Levels of training needed to scale and sustain an EBP at scale

1. Stakeholder Orientation: Introduction for community (what are we getting ourselves into?)
2. Introductory Training: Basic information for clinical team / practitioners
3. Supervisory (and program director) training for those in charge on site
4. Booster training / ongoing ‘CEU’ training: to address evolving, complex needs of complex families
5. Quality Assurance / Database management (fidelity monitoring) training
6. Train the Trainer training (Expert training) – i.e., capacity building
7. Replacement Training: assume 30% turnover per year, per team, at every level



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EXAMPLE ONE: NFP

[One T&L organization]

Nurse-Family Partnership (NFP) Education Overview

Nurse-Family Partnership's (NFP) education for nurse home visitors (NHV) and nurse supervisors (NS) consists of three categories:

- **Initial Required Education** (from hire to 6 months after Unit 2)
- **Advanced Required Education** (from 6-24 months after Unit 2)
- **Building Mastery** (optional education available any time after Unit 2)

Provided by the NFP National Service Office (NSO), Denver CO
Updated: April 1, 2019



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EXAMPLE TWO: BSFT

[Two T&L organizations]

Option One: Family Therapy Training Institute of Miami (FTTIM)

<https://brief-strategic-family-therapy.com/>

• "...FTTIM is renowned for providing exceptional training in **Brief Strategic Family Therapy (BSFT®)** to behavioral health and mental health professionals. It was founded in 2003 by our Executive Director Olga E. Hervis, who co-developed BSFT® along with Jose Szapocznik in the 1970s."

• Our training packages include: all travel costs, training materials and handouts, PowerPoint presentations, organizational review and recommendations, and ongoing support activities.

Onsite Training Format

- Workshop # 1 – 3 days
- Workshop # 2 – 2 days
- Workshop # 3 – 2 days

Online Training Format

- Workshop # 1 – 6 half days
- Workshop # 2 – 4 half days
- Workshop # 3 – 4 half days



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EXAMPLE TWO: BSFT

Option Two: Brief Strategic Family Therapy Institute

<http://www.bsft.org/>

... The Brief Strategic Family Therapy® Institute Model Managers offer an unparalleled depth and range of experiences with regard to their higher education, certification, licensure, professional experience, publications, funded research performed, honors and awards, editorial responsibilities, professional and honorary organizations, professional associations, teaching, invited and keynote presentations, and community service.

I. Three 3-day Interactive Workshops

- conducted at the agency site by a BSFT Model Manager; consists of three days that include interactive lectures, taped demonstrations of family therapy sessions, clinical case consultations, and class exercises.

II. Regular Group Supervision Sessions

- Group supervision commences after the completion of workshop; the supervision is conducted via video conference and the **BSFT Model Manager provides feedback on pre-submitted DVDs of therapists' family sessions** (therapists need minimum caseload of 10 families to progress adequately through the supervision process)
- ...family therapy sessions must be recorded digitally and sent to the BSFT Model Manager 48 hours before supervision.

III. Booster Workshops



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EXAMPLE THREE: MI

- One oversight organization (MINT) but multiple MINT-certified trainers / training organizations

• <https://motivationalinterviewing.org/>

From the site: "MINT is a professional organization of independent MI trainers and as such does not provide recommendations for trainers/specific events. If you are looking to engage an MI trainer for your organization or event, please review training profiles, and obtain contact information by clicking on "MINT Trainer Listings". If you are interested in attending a scheduled public training by a MINT member, see the advertised trainings under "Training Events."

- Approximately 60 MINT-certified MI trainers in CA alone - there is guidance on the website regarding "What might you expect out of different lengths and types of training?," but the onus of responsibility for ensuring that "you get what you pay for" is on the buyer (<https://motivationalinterviewing.org/training-expectations>)



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"CONTROL ISSUES"

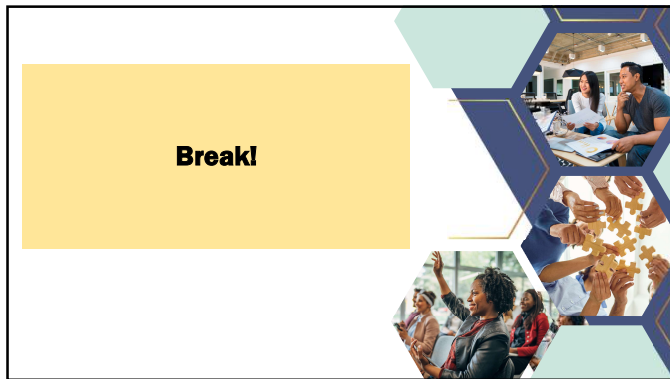


EBP PURVEYOR "OWNS" THE RESPONSIBILITY FOR TRAINING
(ASSUMED TO BE A CONTRACTUAL OBLIGATION)

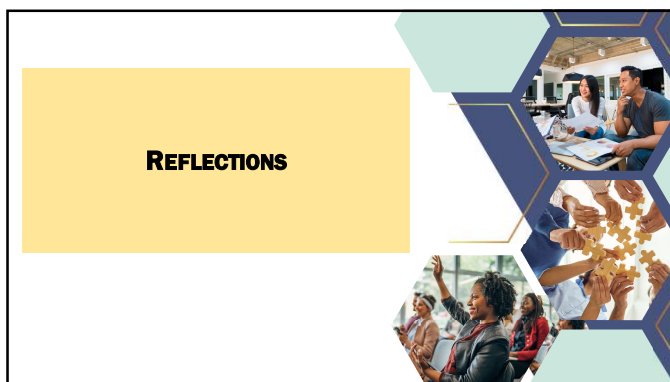
END USER "OWNS" RESPONSIBILITY
FOR IMPLEMENTATION TRAINING



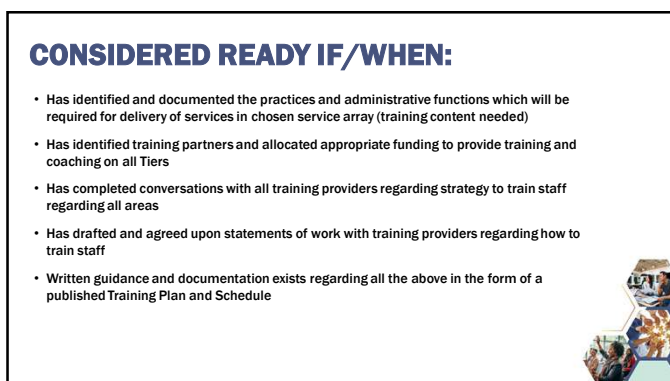
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OPEN Q&A



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ACKNOWLEDGEMENTS

This Learning Forum would not have been possible without the contribution of our esteemed colleagues.



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CALIFORNIA DEPARTMENT OF
SOCIAL SERVICES



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SERIES SCHEDULE

**Getting Ready to Deliver Family First Prevention Services -
Special Emphasis on Fiscal and Funding**

Learning
Forum Q&A Session

Building the Team – Prevention System Governance and Collaboration

Recording and Resources
Available at caltrin.org

Designing a Comprehensive County Prevention System

Ensuring Quality and Fidelity to Achieve Outcomes

Preparing the Workforce to Deliver Family First Prevention Services

11/2/22

Putting It All Together

11/16/22

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UPCOMING TRAININGS

mark your calendars!

Visit caltrin.org to view the full training calendar
and the self-paced online training options



10/20 | Utilizing Logic Models to Demonstrate
Outcome Accountability



10/26 | Deepening Constituent Engagement



11/03 | Logic Model Development Support
Workshop



11/09 | Historical & Racial Trauma



11/10 | The Data Playbook for Prevention
Action Planning



12/02 | Culture of Once: Moving Beyond
Cultural Competence

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Thanks for joining us!

WHAT'S NEXT?

- Survey and certificate in the chat now
- Register for the Q&A!
- Recording and resources available within two days
- Watch your inbox for the next issue of *CalTrin Connect*

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