



WELCOME to the third issue of the Family First newsletter. This newsletter will be published quarterly to keep our colleagues, stakeholders and community members abreast of all the work related to Family First being done at DCFS. If you aren't familiar with Family First, please visit the [Family First page on the DCFS website](#). Then, please enjoy these highlights from the many sides of the Family First Prevention Services umbrella at DCFS.



Introducing Melissa Box

Melissa has joined DCFS this year as the new Family First Prevention Services administrator. Melissa worked for 12 years in a clinical setting with children who have experienced abuse, neglect and other forms of trauma. Through this experience, Melissa became familiar with the challenges that families in Illinois experience

when they encounter the child welfare system and became passionate about the importance of preventing child abuse and neglect. Melissa sees the potential for the Family First Prevention Services Act to be a launchpad for system transformation by challenging DCFS, and the state of Illinois, to improve child well-being through innovative, community-based collaboration. You will see her as the face of Family First and can contact her at DCFS.FamilyFirst@Illinois.gov.

“Keeping busy and doing the work”

You may be wondering why there has been such a delay since the last newsletter in 2021. We are proud to report that MUCH has been happening behind the scenes with Family First here at DCFS. A great deal of planning, preparation, evaluation, information- and resource-gathering and infrastructure-building has been happening. Hundreds

of people behind the scenes have been developing new technical systems in order to allow the state of Illinois to capitalize on the incredible benefits of the Family First Act. We've worked out the kinks in the Provider Module to allow workers to easily and efficiently refer families to prevention services around the state. We're constantly expanding where we can offer prevention services around the state. We've elevated our trauma-informed, individualized care to youth in Qualified Residential Treatment Programs. The remainder of this newsletter summarizes the results of all this hard work over the past year.

Finally, we held a successful, thought-provoking Family First Summit in November 2022. Representatives from Casey Family Programs, ICOY, DHS, ISBE and the Foster Care Alumni of America, among others, joined DCFS to discuss how the Family First Prevention Services Act challenges us to transform the child welfare system in ways that help children and families stay safe and stay together. During the summit, workgroups generated action plans and recommendations for ways we can improve the child welfare system and our collaboration with other child-serving systems in Illinois. Thank you to Casey Family Programs for their generous support; we are already planning how to actualize the recommendations from that summit! We are excited to continue working with our partners toward a 21st Century Child and Family Well-Being System.

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Building and implementing prevention services

We continue to develop, implement, refine and expand the Family First Prevention Services Evidence Based Interventions (EBIs) statewide. Over the last year we have used data, surveys and engagement with caseworkers, supervisors, families and Child Welfare Contributing Agencies (CWCA) EBI providers to improve service delivery of EBIs. This section will highlight a few of our accomplishments for FY23.

Data from the field

The numbers really demonstrate the measured success of our prevention services. Significant progress has been made in the following Evidence-Based Interventions:

- **Nurturing Parenting Program (NPP)** – 73 new referrals since January – referral leader!
- **Positive Parenting Program (Triple P)** – Over 80% of caregivers “mostly” or “very” engaged in services.
- **Child Parent Psychotherapy (CPP)** – Seven providers engaged in a clinical learning collaborative.
- **Trauma-Focused Cognitive-Behavioral Therapy (TF-CBT)** – 111% increase in referrals in June.
- **Multi-Systemic Therapy (MST)** – 100% of cases discharged in February were successful.

New in FY23:

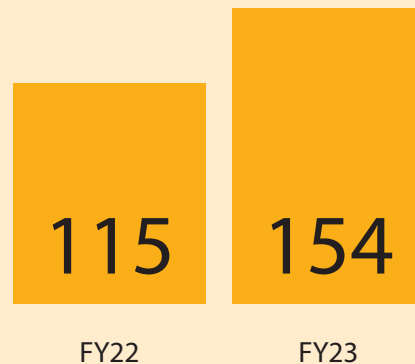
The Office of Evidence Based Interventions amplified their efforts to attract and retain agencies that were interested in providing FFPSA EBIs that support families as they grow and develop. By the end of FY23, significant progress toward increasing the number of providers, contracts and coverage was made by the Office of Evidence Based Intervention team. Progress included:

- **Four new providers.**
- **Six new contracts.**
- **Seven providers expanded coverage to 19 counties.**

Engaging the field

Intact Family Services’ commitment to the implementation of Family First Evidence Based Interventions has been seen across the state since the inception of Family First. In 2023, Intact Family Services leadership made every effort to better understand the experiences of intact supervisors and caseworkers as they implemented Family First practices all over the state. The deputy of intact, along with the intact area administrators (AA), provided support to workers through training, reminders and walk-throughs of the Provider Module. Because of their hard work, we have seen a 34% increase in referrals to EBIs in FY23. We continue to see the number of referrals increase daily.

Provider Module Referrals



Each new provider and contract continue to be supported by implementation support specialists (ISS) in the Office of Evidence Based Intervention. In the past year, the implementation specialists have used strategies, tools and data to assist new and existing agencies with the expansion of their EBIs.

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Home visiting highlight:

- As of July 17, 2023, 75% of enrolled families are engaged after 6+ months.
- The Erikson DCFS Early Childhood Project and their team of home visiting specialists develop relationships with DCFS involved families to provide increased support and opportunities for families eligible for Home Visiting (HV) services to receive them.
- A special thank you to home visiting specialists for all the work they do to get families connected to services and supports around the state.

Credit where credit is due:

As of July 1, 2023, the Provider Module became the primary referral source for Family First Prevention Services. After working through some reported challenges and technical issues, we are seeing a steady increase in referral submissions. We'd like to send a huge shout-out to our Office of Evidence-Based Interventions, intact leadership, SPIDER, OITS and contracted agencies, who collaboratively worked together to provide training, resolve Provider Module challenges, conduct fantastic outreach to caseworkers/supervisors and support EBI providers. Our Office of Evidence-Based Interventions team and intact leadership have:

- Connected Family First providers with the DCFS SPIDER and Microsoft Development teams when Provider Module issues occurred.
- Attended quarterly Intact statewide supervisor meetings and regional Provider Module trainings.
- Provided updated training materials to Family First providers and intact caseworkers.
- Contacted caseworkers individually to resolve issues with referral submissions and consult on specific cases.
- Provided utilization reports of local EBI availability to Intact leadership.

- Scheduled monthly office hours to offer providers a space to report successes and challenges and problem solve issues.
- Met with community stakeholders and Intact providers to offer guidance, consultation and information on Family First EBIs.

Implementation support specialists are the oars that keeps this ship moving forward and in the right direction and we wouldn't have seen such amazing successes this year without them.

What's next for prevention services?

Goal 1: Increase the use of the Provider Module

The Provider Module was originally introduced as a way to enhance the referral process and build a pipeline to the EBI that was a "good fit" for the youth and parent. To continue the support and enhancement of the referral process we will continue to focus on ensuring that all referrals are submitted and accepted through the Provider Module.

Goal 2: Add High-Fidelity Wraparound as a Family First EBI

The Evidence-Based Interventions team is committed to expanding Family First EBIs and is in the process of developing plans to add High-Fidelity Wraparound as a Family First EBI.

Goal 3: Successfully expand existing EBIs

We recognize that there are longstanding gaps in services in certain geographical areas of the state. To address this, the evaluation team has worked with OITS to enable our system to document when a child or family is recommended for an EBI but there are no providers in that area who can provide that EBI. We will use this data to identify counties where there is a high need for prevention services and target these areas to identify additional providers and add new contracts in FY24.

Our electronic 1042 billing process is still under construction. Thanks for your patience.

QRTPs: Pushing our limits

Vision: Reshape the system culture to view congregate care as a time-limited, focused treatment intervention with a purpose and outcome to support youth pathways to permanency and youth living in family homes.

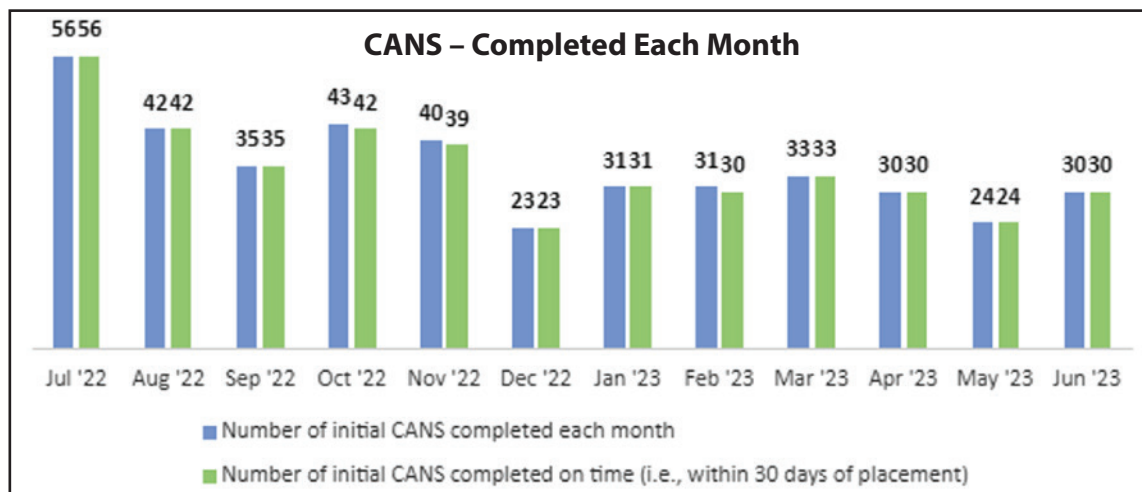
Updates:

FFPSA is, in part, targeted at improving youth’s quality of treatment and experiences in QRTP. This past year, we are particularly proud of the work of the QRTP implementation committee. This committee has been a strength from the beginning of FFSPA planning, which began a little over five years ago. The committee is comprised of many divisions from within DCFS and has brought subject matter experts to the table to plan for and develop solid implementation strategies. We have established 42 contracts with 24 different agencies across the state. Our QRTP providers have offered valuable front-line feedback about strengths and areas of need as we continue to transform the use of QRTP for youth in care and their families. The QRTP implementation committee has also continued to work on the development of data reporting and IT functionality to track QRTP placements more efficiently and accurately. These data and technology improvements will support improved decision-making, planning and outcomes for youth. Along with this technical work, DCFS offered individual trainings on FFSPA to all QRTP providers in FY23. In addition, a Training of Trainers (TOT) event was provided to all DCFS permanency area administrators and regional administrators as well as all training coordinators from our community-based partners. On-demand training remains available to Illinois courts to ensure consistency and knowledge-building across systems.

Point of pride:

It has proven challenging to transform how DCFS uses QRTP as a treatment modality vs. a placement. The process has been slow and requires both those providing case management and those treating youth to participate in a culture shift around how we think and plan for residential treatment. In addition, there must be adaptations and changes in how we treat youth in QRTP, which focuses on increased family engagement, youth voice/engagement and reduced lengths of stay. Nevertheless, DCFS, in cooperation with Northern Illinois University, has established and maintained an Independent Assessment Program. NIU has been able to fill positions and train new staff, relieving the workload stress on the entire team. The Independent Assessment Program makes it possible for youth who are placed in a QRTP to have their level of care assessed independently on a regular and consistent basis to determine their continued clinical need for this treatment level, which has never been done before. By collaborating with a multi-disciplinary team to identify and address problems and concerns related to implementation, we have built a new process that has a 99.5% successful completion rate! *See Chart 1 (below)* for a visualization of how effective and consistent the IA program has been in FY23.

Chart 1: Number of Independent Assessments (CANS) Completed Each Month for FY'23



What's next:

Qualified Residential Treatment Programs, or QRTPs, have an annual review to monitor compliance with FFSPA requirements. Beginning this fall, we will again begin making redetermination visits to assess each individual QRTP's compliance with the FFSPA requirements for FY24. We are excited to see the work that QRTP programs have done in the last year to enhance their programming, improve the quality of treatment and enhance family engagement in treatment. We are also looking forward to increased collaboration with Intensive Placement Stabilization (IPS) to assist with discharge planning with youth under 13 in QRTPs.



Mark your calendars

We are excited to offer a day and a half Family First conference for workers and providers across the state in spring 2024! This intensive training opportunity will include two tracks for different types of cases and a special focus on building Motivational Interviewing skills. Motivational Interviewing is the one Family First evidence-based intervention that we can train ALL workers to use across the life of EVERY case that comes to the attention of DCFS, and it has so much potential for increasing family engagement and participation in services. Stay tuned for more information, and we hope to see you there!



Questions? DCFS.FamilyFirst@Illinois.gov

[DCFS.illinois.gov](https://www.dcf.illinois.gov)