

# Family Driven Care Virtual Learning Community: Partners in Care

## TRAINING 1

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# Overview of our Training 1:

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- **Welcome and Review**
  - Introductions
  - Timeline Review
- **Defining Family Driven Care, Trauma Informed Care and Impact on Care/Outcomes**
  - Activity around attitudes and perceptions of families
- **Organizational Self-Assessment**
  - Aggregate Report
  - The 3 Domains: Leadership and Governance; Workforce Development; The Service Experience
  - Resources
- **Next Steps:**
  - Meet as a CIT.
  - Consider the Improvement Planning Guide

# Introductions

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**Welcome Everyone!**

**This is our 4-month partnership with organizations across NYS who have an interest in building family-driven policies and practices in care.**

**Each CIT: Please introduce yourselves and share what you hope to get out of the training.**

# CTAC Resource Team

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# Aims of the FDC LC and Achieving Them!

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## 1. Build awareness and understanding of FDC:

- ✓ Two short online modules which review FDC and the three domains
- Materials for families and providers

## 2. Support CITs in conducting an organizational assessment of its practices and policies consistent with FDC domains:

- ✓ The Organizational Self-Assessment

## 3. Assist CITs on the selected FDC domain to be improved:

- ✓ OSA call to review and prepare to work on FDC domain
- Two virtual trainings with domain-specific content and assistance completing the Improvement Planning Guide
- Two 1-hour consultation calls with CTAC Resource Team to check-in on progress of your efforts
- A Sustainability Webinar to review how to continue current efforts

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## Family Driven Care Virtual Learning Community (FDC VLC) 2021

### Overview

The FDC Virtual Learning Community (VLC) will enable providers to adapt a framework that assists with the implementation and applications of the principles and practices of FDC. The 4-month long FDC VLC will consist of check-ins, assessment tools, resources, and guidance utilized by behavioral health organizations and the families they serve to promote the use of family-driven policies and practices. You and your fellow core implementation team (CIT) members will work closely to support your selected goals!

Timeline ([click here](#)): Mark your calendars! This table will help orient, organize and prepare you to actively participate in the FDC VLC. You can download it for easier access and as a reminder of upcoming tasks and events.

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### Helpful Information



# Activity: Who's Driving ?

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Please answer the following questions based upon the scenarios below with the pop-up poll.

Scenario 1: A family has been referred to you for services. The agency making the referral shared with you that the family has “a lot of issues” and really doesn’t want help, but they agreed to talk to you.

- ▶ Who is driving in the scenario? (Poll)
- ▶ Is this scenario family-driven? (Poll)
- ▶ How would you correct the situation?  
(Chat in to “All Panelists”)

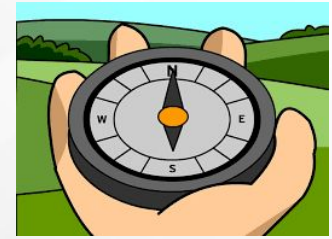




**Family Driven Care: What is it?**



# Family Driven Care



*Family-driven means families have the primary role in decisions regarding their children as well as the policies and procedures governing the well-being of all children in their community, state, tribe, territory and nation.*

- **Identifying** their strengths, challenges, desired outcomes/goals, and the steps needed to achieve those outcomes/goals
- **Designing, implementing, monitoring, and evaluating** services, supports, programs, and systems
- **Choosing** supports, services, and providers who are culturally and linguistically responsive and aware
- **Partnering** in decision-making at all levels.

# Guiding Values of FDC

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## Families...

- ▶ Are provided with information to support shared decision-making
- ▶ They define who is 'family'
- ▶ Have access to peer support
- ▶ Have a voice

## Organizations....

- ▶ Take steps to shift from provider-driven to family-driven
- ▶ Make funding available
- ▶ Take steps to reduce stigma and bias
- ▶ Work to eliminate disparities
- ▶ Commit to culturally responsive practice

# Common Misconceptions

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Family-driven care does NOT mean a reduced focus on goals and outcomes.

Family-driven care does NOT mean that families can demand what they want.

# Common Misconceptions

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**Family-driven does NOT mean that families are responsible for implementing their own plan of care.**

**Family-driven does NOT mean that professionals should keep their opinions to themselves.**



# Common Misconceptions

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Family-driven care does NOT take a lot of time and slow things down.

Family-driven care does NOT mean that clinicians' help is less valued.

# Why Family-Driven Practice?

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- ▶ Responsibility is shared
- ▶ Builds skills and confidence
- ▶ Brings nontraditional supports to the table
- ▶ Values peer support
- ▶ Reduces stigma
- ▶ Moves beyond blame
- ▶ Promotes ongoing feedback to improve outcomes
- ▶ Improves engagement
- ▶ Understanding of a family's strengths
- ▶ Improves outcomes and satisfaction

# Trauma Informed Care

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It may be helpful for organizations, programs, and staff to create a trauma informed approach to best support families and to keep in mind some of the difficult, scary, or overwhelming experiences that they have had.

Creating a trauma informed and family-driven service environment includes taking universal precautions and focusing on ‘what has happened to children and families’ *instead of* ‘what is wrong with them’.



# Organizational Self Assessment

## FAMILY-DRIVEN CARE

### Organizational Self-Assessment

This Organizational Self-Assessment (OSA) is the first step toward advancing Family Driven Care (FDC) principles and practices. Think about the extent to which your organization has implemented family-driven policies and practices in the following areas:

- 1) Leadership & Governance    2) Workforce Development & Support    3) Service Experience

Please read through each item and use the scale ranging from “We do this well” to “We partially do this” to “We don’t do this” to evaluate the extent to which your organization follows each practice. To help orient you, examples that embody the practice have been included. Base your responses on your experience over the past 12 months.

Your responses are confidential. We encourage you to complete this together with your team and to answer with your initial impression, as honestly and accurately as possible. Remember, you are not evaluating your own individual performance but rather the practice of the organization as a whole. Please complete the OSA with your team when you have ample time to consider your responses and talk through any disagreement; it may be completed in one sitting or section-by-section.

**1) Leadership and Governance** considers the extent to which an organization has made a commitment to advancing family-driven practice at the organizational level.

Does your organization strive to make Family Driven Care a ‘standard practice’ in all parts of the organization by:	We do this well	We partially do this	We don’t do this
<b>Having family members serve on governing and key committees across the organization?</b> <i>Example: Board of Directors, leadership teams, standing committees (i.e., fundraising or communications), work groups</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Utilizing feedback from families as a part of the quality assurance process to improve services and experiences for all?</b> <i>Example: Families’ perspective, preferences, needs, and recommendations are shared with leadership for improvement efforts</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Implementing policies, procedures and training(s) that emphasize a shift in culture to relay the importance of family participation, expertise, and feedback throughout the organization?</b> <i>Example: FDC guiding principles inform all policies, procedures and trainings</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Implementing standards of cultural sensitivity or responsiveness that enable respectful family/provider partnerships?</b> <i>Example: Workforce at all levels is representative of the community served, written information is offered in the preferred language of participants, w</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Eliciting family input to design and interpret program and outcome evaluations?</b> <i>Example: Assess families’ perceptions and experiences via surveys, focus groups, or interviews</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



# Aggregated OSAs

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Domain	Total Possible Score	Actual Average Score	Average Score%
Leadership + Governance	18	7	38.89
Workforce Development & Support	22	10	45.45
Service Experience	34	22	64.71
Total Score	74	39	52.70

# Poll Question

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- **What have you learned from this OSA process? (select all that apply)**
  - It's helpful to take time to reflect on our work
  - We have a lot of work to do to become more family-driven
  - We are more family-driven than we thought we were
  - We are looking forward to making some changes
  - We are committed, but given all that is going on, we need to figure out how to create space to do this work.

# How do we Manage Change?

- ❑ Understanding the human response to change enables leaders to engage the workforce in a way that is more likely to promote successful change
- ❑ Change is inevitable but forces exist in organizations to maintain the status quo
- ❑ Engaging the workforce to support an innovation or a change in organizational expectations is not a nice thing...It is a critical thing



John Kotter's- Eight Stages of Change.

\*Woodward, H. and Woodward, M.B. (1994). Navigating Through Change. NY: McGraw Hill.

# The 3 Domains of the OSA

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1. LEADERSHIP AND GOVERNANCE
2. WORKFORCE DEVELOPMENT and SUPPORT
3. SERVICE EXPERIENCE



# Leadership and Governance

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**Family-driven leadership and governance considers the extent to which an organization has made a commitment to advancing family-driven practice at the organizational level.**



# Strategies to Increase

## The Family-Driven Leadership and Governance

### FAMILY-DRIVEN CARE

## Strategies to Increase Family-Driven Leadership and Governance

**Leadership and Governance considers the extent to which an organization has made a commitment to advancing family-driven practice at the organizational level. Below are strategies to help you advance family driven care in this domain.**

### COMMITMENT TO FAMILY INCLUSION

Agencies and organizations affirm the valuable and critical contribution of families and explicitly communicate their dedication to the incorporation of families. This accountability serves as a public reminder for family inclusion at all levels of the organization.

### ACTIVE REPRESENTATION AND IMPACT

Opportunities to enhance the role of family members are created and supported by policies and procedures at the individual and policy level. Family leaders have formal roles within the organization, agency or program along with active decision-making power.

### UTILIZATION OF FAMILY FEEDBACK

Staff actively pursue family input in evaluation, policies and procedures and make any necessary changes to support families and to align policies and practices to be family-driven.

### HIRE AND SUPPORT FAMILY PEER ADVOCATES (FPAs)

Have FPAs with lived experience on staff to support full family participation in all aspects of children's care.

Develop opportunities for FPAs to advance within the organization.

# Strategies to Increase Family Driven Leadership and Governance

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## Commitment to Family Inclusion

- ▶ *Family members' time and expertise are valued*
- ▶ *Family members are given support to enable them to fully participate in governance.*
- ▶ *Mission and vision statements are written collaboratively with families and employees can be shared with the entire workforce and displayed for families to see across several platforms (e.g., posters, website).*

## Active Representation & Impact

- ▶ *Family members are on boards, workgroups, and committees with active decision-making power.*

## Utilization of Family Feedback

- ▶ *Families have opportunities to give input directly & through representatives.*
- ▶ *Family members have access to meeting minutes and are welcome at meetings.*

## Hire and Support Family Peer Advocates (FPA)

- ▶ *Ensure that Family Peer Advocates on staff have access to regular supervision from experienced Family Peer Advocates (perhaps alongside clinical supervision/consultation).*

## Guiding Principles of Family-Driven Care

### Families have accurate and complete information

Educate yourself so you can educate families! Help families ask questions so they can make informed choices. Help the family explore ALL their options for support.

### Remove barriers created by stigma

Your willingness to speak out and take on this role is a critical way to combat stigma. Stigma and blame are heavy burdens for families. When you partner with them as a peer, you send a strong message to families and providers.

### Celebrate diversity and honor each family's culture

Culture has many dimensions and each family is unique. Be aware of your own bias and alert to stereotypes that can interfere with your ability to form a strong relationship with the caregivers and families you work with.

### There are resources to support everyone to adopt family-driven practice

Be an active learner and an active teacher! Help your agency make this a priority by working with leadership to fund training for staff and supervisors. Advocate for family-driven measures to be a part of your staff evaluation and program outcomes.

### Continually advance cultural and linguistic responsiveness as your community changes

Stay in touch with your community. Actively reach out and establish relationships with groups in the community that may not be connected with services. Let the families you work with help you build these relationships.

### Families and family-run organizations provide direction on funding, policies, and service options.

Connect the families you work with to family-run organizations and support them to serve on committees so that the family perspective shapes policy.

### Shared decision making and responsibility

Find creative ways to ensure that the family is a part of any team of people working on their behalf. This means the family is present for all meetings and working together with you and other providers to develop their plan of care. You can play a vital role in helping the family shift from the passive role they might be accustomed to, to a more active role.

### Practice changes from provider driven to family driven

As you gain experience, you will begin to see many opportunities to shift practice. Change doesn't have to happen all at once and small changes can add up to a big difference. Be ready to suggest alternatives to business as usual when you see opportunities to empower family voice.

### Families have access to peer support

You are a part of helping the system become more family-driven! You bring the passion and perspective that comes from your experience. Outreach will always be a part of your job so that families and service providers understand the importance of peer support and how to access it in your community. Also, you can connect families to one another and grow their peer networks!



# Workforce Development & Support

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Family-driven workforce development and support considers to what extent the organization deems family-driven practice to be a core competency for all staff.



# Strategies to Increase

## The Family-Driven Workforce Development and Support

### Strategies to Increase Family-Driven Workforce Development and Support

Workforce Development and Support considers the extent to which an organization considers family-driven practice to be a core competency for all staff. Below are strategies to help you advance family driven care in this domain.

#### OFFER AWARENESS BUILDING EDUCATION

Agencies and organizations provide general education including basic information about family driven care and its impact on treatment outcomes. It is crucially important that all staff members learn and understand the what, why and how of adapting this framework.

#### BUILD SPECIFIC CAPACITIES

Training opportunities include specific practices of family driven care relevant to the practitioners' role and responsibilities. Knowledge offerings emphasize the benefits of incorporating family driven care to both family and staff.

#### PROMOTE INTEGRATION OF FAMILY PEER ADVOCATES (FPAs) INTO AGENCY

Engage other staff in the process of adding FPAs to agency staff. Work with experienced FPAs (perhaps from outside the organization, at first) to train staff on the role of an FPA, assistant interviews/hiring.

Empower FPAs to assist the organization to identify opportunities to improve family-driven, culturally responsive practice throughout the organization.

#### PROVIDE SUPPORT

Adequate and continued support is an essential component for staff to appropriately engage in family driven practices and policies. Time to discuss the successes and challenges of working with families is important so as practitioners can receive feedback (e.g., supervision).

Ensure that Family Peer Advocates on staff have access to regular supervision from other experienced FPAs (perhaps alongside clinical supervision/consultation).

# FDC Quick Reference Guide

## What:

- Definition of Family-Driven Care
- Explanation and prioritizing of the commitment to families
- Summary of core competencies
- An overview of what FDC looks like in practice

## Why:

- To offer families and professionals a brief reference that includes best practices to increase FDC

## How it is used:

- Both providers and families can become familiar with these best practices AND, it's available in Spanish!

### FAMILY-DRIVEN CARE

#### Quick Reference Guide

"If it is ABOUT families, it must be WITH families... child and youth mental health is about families."

#### ABOUT FAMILY-DRIVEN CARE

Family-driven care means families are expert partners and primary decision-makers in the care their family receives from your organization.

#### FAMILY-DRIVEN CARE:

- Acknowledges the family as a constant presence in a child's life
- Builds on family strengths
- Supports family members to have a strong voice in the services they receive
- Focuses on families' strengths, talents, interests, values and beliefs
- Ensures family members are a part of their child's treatment
- Uses strategies that empower families
- Seeks out the expertise of family members
- Respects family choice
- Believes in each family's potential to learn and grow

#### SUPPORTING FAMILY INVOLVEMENT



Part of family-driven care is encouraging all families to be involved. If families are reluctant, work to understand their concerns and address them.

#### Families might...

- Feel overwhelmed and isolated
- Not have enough information or support
- Have had negative experiences in the past
- Feel intimidated by an unequal power structure
- Feel the stigma of blame and a lack of respect
- Be skeptical that providers will listen to them

#### You can help by...

- Creating an atmosphere of acceptance and respect
- Building a collaborative "team" culture
- Providing access to family peer support
- Exploring and honoring each family's culture
- Supporting families' decisions
- Reducing the use of jargon and technical talk
- Building confidence and hopefulness by recognizing progress

#### IS YOUR ORGANIZATION FAMILY DRIVEN?



This is what you might see as your organization puts families in the driver's seat!

- ✓ Families identify their priorities, needs and resources to create an individualized plan
- ✓ Families collaborate with providers to make all decisions about their services
- ✓ Families openly express preferences, needs, priorities, and disagreements
- ✓ Families collaborate actively in identifying goals and activities
- ✓ Families are given the information and support they need to actively participate
- ✓ Families determine key outcomes and assess what is working or not working

Source:

\* Chavil, N. (2009), p. 33

# Service Experience

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**Family-driven service planning and delivery considers the extent to which an organization supports families to be active and informed partners in their child's care..**





# Strategies to Increase

## The Family-Driven Service Experience, p.1

### Strategies to Increase the Family-Driven Service Experience

Service Experience considers the extent to which an organization supports families to be active and informed partners in planning their child's care by delivering services that are respectful of and responsive to the needs of individual families. Below are strategies to help you advance family driven care in this domain.

#### FAMILY REPRESENTATION

Families feel seen and heard and receive information in their language. Programs identify the cultures in the community and make efforts to learn about their customs and values. This information can be used to ensure program materials and resources are relevant to those served.

#### ENGAGEMENT IN SERVICES

The engagement of families in services is essential to the provider-family relationship and continues throughout treatment. This begins by instilling hope in families and validating their unique lived experiences.

It is helpful to include families and their voice in the assessment, diagnosis, and treatment process at all times and ensure that family's strengths and identity are identified and honored.

It is important for families to understand their role in their child's services and have an opportunity to provide feedback to treatment providers. Providers also asking for feedback throughout the course of treatment and asking the family members how services can be improved to fit their needs is helpful.

#### CULTURALLY INCLUSIVE SERVICES (FAMILY IDENTITIES ARE HONORED)

Cultural Humility with families starts with the understanding that each family is unique in how they define themselves and relate to one another.

Families are considered a part of the solution rather than the source of the problem it is helpful for programs, agencies, service providers, and organizations to do regular cultural and linguistic evaluation and develop reports that outlined their strengths, challenges, and progress from year to year. This information can be used to offer targeted orientations and regular trainings to build the cultural and linguistic competence of staff.



# Strategies to Increase

The Family-Driven Service Experience, p.2

It is helpful for providers to acknowledge and understand the cultural practices of families and their internal and external environment and how that impacts their relationships and experience with services. Many cultural norms and practices may be different from those of the provider and the institutions that the family encounters, so it is helpful to develop multicultural respect and understanding by labeling and discussing cultural differences.

It can be helpful to collaboratively develop a visual representation of the family (i.e. genogram, eco-map) to understand familial dynamics, relationships, strengths and challenges.

## STRENGTH-BASED SERVICES

Every family has strengths and strengths-based approaches to family driven care can often lead to positive outcomes including increased engagement in treatment for children and caregivers, motivation, and performance.

It is helpful to creatively draw on identified strengths to address needs and areas of concern. It is also helpful to collaborate with families to identify internal and external strengths (i.e. individuals, within their family, and within their community) and collaboratively identify resources that families have that strengthen and empower them.

It can be helpful to view challenges as opportunities to learn new skills rather than as deficits. Offering peer support services to better align with experiences and build trust may also be helpful.

## PROVIDE ALL FAMILIES WITH ACCESS TO FAMILY PEER SUPPORT SERVICES

Proactively connect all families to Family Peer Support within your organization and through community-based Family Peer Support Programs both to offer choice of service provider and for ongoing support.

## FAMILY OPPORTUNITIES

Families understand all service options and have choices in treatment approaches and scheduling and have opportunities to ask questions.

It can be helpful for programs to either offer or make referrals to accessible, affordable, and effective services to help treat the child and that both group and individual approaches to healing are available.

# FDC Tips for Partnering with Your Child's Service Providers

## What:

- Examples of what parents/caregivers can do to advocate for their children
- Tips on how they can contribute to get the results they want from treatment

## Why:

- To help families see the different ways in which they can work collaboratively with their child's providers and envision the ways in which they can help services become more family-driven

## How it's used:

- Given to caregivers to know how to best collaborate with their child's provider AND, it's available in Spanish!

### FAMILY-DRIVEN CARE

## Tips for Partnering with Your Child's Service Providers

Parent-provider partnerships are important to the services your child receives. Below are some basic principles for forming effective parent-provider partnerships.



### PARTICIPATE

An effective parent-provider partnership requires active participation from both you and your child's service providers. Below are some ways you can participate in your child's services:

**Speak up.** Don't be afraid to be vocal with providers about wanting to take an active role in your child's treatment. At first, this may be uncomfortable for you, but with practice and support you can learn to engage with your provider.

**Provide information.** Parents know a lot about their child, but sometimes you may not have the opportunity to share your knowledge with your child's provider. As a parent, you have vital information about what has been going well for your family and where there have been struggles. It's important to let your provider know all that you can about your child's history, interest and needs. Also be clear with your provider about what your vision is for your child and family, and how you can work together.



### KNOW YOUR RIGHTS

Become informed about your rights as a parent. Most agencies list these rights in a document entitled the **Patients' Bill of Rights**. Reviewing these documents and knowing your rights may help you feel empowered to take appropriate action if you feel your rights or your child's rights are being violated. If your agency or private provider does not have a Patients' Bill of Rights posted, ask for one.



### SHARE FEEDBACK

People, including providers, learn best when given timely and constructive feedback. Talk with your provider about your experiences with them. Be honest and respectful in your communication. Tell them what has gone well and ways in which each of you can communicate better with one another. Such feedback can help strengthen and keep a healthy, respectful and working partnership.



### PARENTS ARE EXPERTS TOO!

As a parent, you are the most knowledgeable expert concerning your child. You can get advice and input from others, but if you are told something that doesn't fit with your prior experiences, ask questions and share with your provider why you disagree.

In addition to realizing that you too are an expert in your child's treatment, you must also know your limits when it comes to collaborating with your child's provider. Discussing your role in the treatment process with your provider may be helpful for you to know how to work together as a team.



### GET THE FACTS

It's important to get accurate information about your child's diagnosis and services. This requires asking questions. If you don't understand something a provider has said, ask questions until it is clear. A provider will assume you understand unless you let them know. Here are some helpful tips for getting the facts about the services your child will receive:

**Take notes.** Writing down what your provider says can help you remember what you need to know about your child's treatment.

**Make a list of questions.** Asking your provider questions may be difficult at first. Writing down your questions before you meet with your provider will make it easier.

**Repeat what you heard.** It may be helpful when discussing important information with your provider to repeat what you heard in your own words. This is an effective way of confirming that you understand what is being said.

**Keep a file.** Keep all the important documents related to your child's services in a file or binder that's accessible. Review the information regularly to make sure you have all the most up-to-date important facts related to your child's treatment.



# FDC The Caregiver Perspective

## What:

- Brief survey for parents/caregivers to provide feedback based on their experience in care
- Examples of what these practices look like when they are happening

## Why:

- Enables parents/caregivers and providers to evaluate the provider's use of FDC practices
- Gives families and providers an opportunity to review with each other to improve their work together and ultimately improve outcomes

## How it is used:

- Providers share with parents/caregivers to fill out to help improve care AND, it's available in Spanish!

### FAMILY-DRIVEN CARE

## The Caregiver Perspective

Family-Driven Care means families are expert partners and are given a decision-making role in the care their children receive. It means caregivers and families work as partners with providers. The goal of this evaluation is to review how much the provider you work with is able to meet your needs as a family. Thank you for completing this form.

Some helpful information before you start:

- Please answer the questions only about the provider you are working with at this time.
- You are free to skip any questions but it helps us to know your opinion on all of the questions.
- For each statement choose only one answer from the rating scale (Rarely, Sometimes or Often).
- Your responses to these questions will not, in any way, affect the services you receive and may help to improve them.
- If you have questions or are unsure about something in this survey, please talk to your provider or contact us at [ctac.info@nyu.edu](mailto:ctac.info@nyu.edu).

Please rate how often each of these happens with your service provider:

Rarely Sometimes Often

#### 1 Our provider asks me if they are helpful.

**Examples:** Our provider wants to know if the work we are doing together is making or can make a difference for our family, and responds to our concerns and suggestions.

☐ Rarely ☐ Sometimes ☐ Often

Comments: \_\_\_\_\_

#### 2 When we first started working together, our provider described each of our roles, how we would work together, and the ways we would coordinate with other service providers working with my family.

**Examples:** Our provider describes what I can expect from them and also gives me this information in writing. Our provider asks questions like: How can we work together to reach your family's goals? Do you think this plan will work for you and your family?

☐ Rarely ☐ Sometimes ☐ Often

Comments: \_\_\_\_\_

#### 3 Our provider gets back to me within two business days when I contact them.

**Examples:** I know how to contact our provider by phone, email, or using the on-call system. They usually get back to me quickly and are responsive to us when we reach out.

☐ Rarely ☐ Sometimes ☐ Often

Comments: \_\_\_\_\_

#### 4 Our provider asks me about our family's previous experiences with treatment and services.

**Examples:** Our provider asks us how treatment and services have gone for us in the past. Our provider asks questions like: What types of services or treatment were helpful and not helpful? What can I do to help treatment go better for you than in the past?

☐ Rarely ☐ Sometimes ☐ Often

Comments: \_\_\_\_\_

# Next Steps:

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- ▶ Set up ongoing meetings with your CIT
- ▶ If you haven't, confirm the domain you want to focus on
- ▶ Identify 2 changes you want to work on
- ▶ Attend Training #2 on Wednesday, Oct 6 at 1-2:30pm

# FDC Improvement Planning Guide

## What:

- A framework to organize the steps involved in planning, implementing, evaluating and making adjustments in order to advance FDC in the organization.

## Why:

- To help CIT members organize around the selected FDC domain
- Provides tips to help choose the area for improvement and the strategies

## How it's used:

- CIT members brainstorm and list action steps to reach the domain-specific goal
- A plan is developed and documented to accomplish the first action step. This sets the stage for future action steps.

### FAMILY-DRIVEN CARE

## Improvement Planning Guide

This guide is designed to provide you with a framework to organize the steps involved in planning, implementing, evaluating and making adjustments related to family driven care in your organization.

To advance family driven care it may be most helpful to choose an improvement area from the 5 domains of the Family Driven Care Organizational Self-Assessment listed below:

1. **Leadership and Governance** considers the extent to which an organization has made a commitment to advancing family-driven practices at the family and organizational levels.
2. **Workforce Development and Support** considers the extent to which an organization prioritizes family-driven practice as a core competency for all staff.
3. **Service Planning** considers the extent to which an organization supports families to be active and informed partners in planning their child's care and treatment.
4. **Service Delivery** considers the extent to which an organization's service delivery approach is respectful of and responsive to the needs of individual families.
5. **Family Peer Support** considers the extent to which the organization has taken steps to promote parent empowerment through the hiring of Family Peer Advocates and by providing parents with opportunities to connect with and support one another.



Choose one area to improve that will be addressed during your participation in the FDC LC. Consider focusing on a high priority area. As you consider the improvement area as well as the strategies you plan to implement in the near future, consider the following:

It's best to select an improvement strategy that is:

\*In your control and likely to have stakeholder support

\*Likely to affect a significant number of individuals

\*Likely to be accomplished in the next 2 months or less

\*Likely to include steps that you can take immediately

\*Consistent with program values and mission

\*Not likely to cause other problems

\*Not expensive

\*Measurable

What is the domain you plan to improve during your participation in the FDC LC? What exactly do you hope to improve? \_\_\_\_\_

List the various action steps involved in making significant progress and/ or accomplishing this improvement goal in few months.

Action Step 1: \_\_\_\_\_

Action Step 2: \_\_\_\_\_

Action Step 3: \_\_\_\_\_

### Develop a PLAN for Action Step 1

Role of specific individuals in accomplishing the first action step:

Project leader: \_\_\_\_\_

Supervisor: \_\_\_\_\_

Other: \_\_\_\_\_

When will this action step be completed?: \_\_\_\_\_

DO: How will this action step be implemented?: \_\_\_\_\_

CHECK: How will you know if the action step is accomplished? \_\_\_\_\_

ACT: If first step is not successful, what action will you take? \_\_\_\_\_



# A practical checklist of improvement strategies:

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- ☐ Can you obtain “buy-in” at multiple levels
- ☐ Is it in your team’s control
- ☐ Is it likely to affect a significant number of individuals
- ☐ Is it Not likely to cause other problems (unintended consequences, or disruption of other high priority activities of the health center)
- ☐ Is it consistent with program values and mission
- ☐ Is it likely to include initial steps that you can take immediately
- ☐ Is it likely to know early if the strategy is not working (best to find out that the strategy is not working as early as possible)
- ☐ Is it inexpensive
- ☐ Is it likely to have leadership support
- ☐ Is it likely to have staff and family support
- ☐ Can you measure if the strategy is working (qualitative and quantitative data)
- ☐ Do you have a way to keep an eye on the implementation of the strategies

# Q and A

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Please type any questions into the chat box.

## *Other Questions?*

If you have additional questions following today's training, please email us at [ctac.info@nyu.edu](mailto:ctac.info@nyu.edu) with the **subject line: FDC LC**



# Thank You!

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Visit [www.ctacny.org](http://www.ctacny.org) to view past trainings, sign-up for updates and event announcements, and to access resources.

Please complete the [feedback survey](#) at the end of this training.

Contact CTAC at [ctac.info@nyu.edu](mailto:ctac.info@nyu.edu)

# Evidence-Based and Best Practices

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When utilizing evidence-based and best practices, consider the following strategies:

- ▶ Provide families with information on the evidence-based practices that are offered and your recommendation for treatment
- ▶ Explain how family members will be involved and their role
- ▶ Discuss how each treatment can be utilized, cultural and family-specific considerations, and areas of concern
- ▶ Discuss how various treatments align with the family's goals
- ▶ Discuss the details of each practice, including the rationale, past experiences, duration, and expected outcomes
- ▶ Ask if the family has any concerns regarding each practice