LEAD AGENCY: Center Point, Inc.
LOCATION: San Rafael, CA
PROGRAM FUNDING: $625,000/Year; $500,000 Federal; $125,000 Match

GEOGRAPHIC AREA AND CONGRESSIONAL DISTRICT SERVED: CA-06, San Francisco, Contra Costa, Marin, Sonoma and Alameda Counties, CA

NUMBER SERVED: Children: 150 total; Adults: 125 women total; Families: 125 total over the grant period.

PROJECT ABSTRACT

Center Point, Inc. is building on the successes of its five-year-old FamilyLink program by expanding the program’s service continuum to include both residential and outpatient substance abuse treatment services for women and their children, 0-5 years of age, who are at risk for out-of-home placement. These services result in: 1) enrolled mothers achieving high rates of substance abstinence and improved parenting skills; and 2) enrolled children having improved well-being. Additionally, Center Point staff continues to work toward strong interagency collaboration in the targeted five counties in the San Francisco Bay area. The FamilyLink project addresses the substance abuse and co-occurring treatment needs of pregnant and parenting women while systematically addressing the needs of the mothers’ children resulting in increased physical, developmental, and socio-emotional well-being and permanency. Program activities are directed at: 1) the mother's recovery from addiction; 2) the mother's transition into full-time sober parenting and 3) the physical, developmental, and socio-emotional health of her children.

TARGET POPULATION

General: Residential Program: Women with a diagnosable substance use disorder who are either pregnant or have at least one child 0-5 years of age for whom they have custody or are seeking reunification. Outpatient Program: Women served in this program may have children up to 17 years of age.

Adult Inclusion/Exclusion Criteria: Participants come from one of five geographically connected counties in northern California: San Francisco, Contra Costa, Marin, Sonoma and Alameda.

In-home/Out-of-home Focus: Both, “for whom they have custody or are seeking reunification.”
**MAJOR PROGRAM SERVICES**

- **Case Management and Case Conferencing**
  - Intensive Case Management

- **Parenting/Family Strengthening**
  - Enhanced Parenting
  - Partners in Parenting and Celebrating Families

- **Mental Health and Trauma Services for Adults**
  - Integrated EB SBIRT model for Co-Occurring and MH

- **Substance Abuse Treatment for Adults**
  - Integrated SBIRT model for Co-Occurring and MH
  - Matrix Model and Living in Balance
  - Long-term Residential, Intensive Outpatient, Step-down and Aftercare

- **Specialized Outreach, Engagement and Retention**
  - Motivational Interviewing

- **Family-Centered Substance Abuse Treatment:**
  - Residential and IOP for mother’s w/their children

- **Children’s Screening and Assessment**
  - Developmental
  - Behavioral/Social-Emotional
  - Mental Health/Psychosocial
  - Health/Medical, Dental
  - Educational/Academic
  - Other: Substance Use

- **Adult Screening and Assessment**
  - Substance Use
  - Mental Health/Co-Occurring
  - Domestic Violence
  - Psychosocial
  - Health/Medical, Dental
  - Parenting
  - Other: Risk Behavior Assessment

- **Children’s Services**
  - Early Intervention
  - Developmental Services
  - Other: Pediatric Medical Care

- **Cross-Systems Collaboration**
  - Clinical Activities
- Program/Policy Activities

- Evidence-Based Practices:
  - Partners in Parenting
  - Celebrating Families
  - Integrated SBIRT Model
  - Matrix Model
  - Living Balance
  - Motivational Interviewing

**MAJOR PROGRAM GOALS**

**Goal 1:** Promote the well-being of children who are exposed to maternal substance abuse and are in, or at-risk of being place in, an out-of-home placement by providing children with needed services.

**Goal 2:** Increase the permanency of children who are exposed to maternal substance use and are in, or at risk of being placed in, an out of home placement by promoting family stability.

**Goal 3:** Ensure the physical and emotional safety of children who are exposed to maternal substance use and are in, or at risk of being placed in, an out-of-home placement by promoting family functioning.

**Goal 4:** Enhance the collaboration of organizations serving children who are exposed to maternal substance use and are in or at risk of being placed in, an out-of-home placement.

**KEY PARTNER AGENCIES**

The Regional Partnership Grants encourages service providers to develop and/or strengthen cross-system linkages between substance abuse treatment, child welfare, dependency court and other service systems. The following partners are included:

- **Child Welfare**
  - Marin County Child Protective Services

- **Early Care and Education**
  - Marin County Head Start

- **Courts**
  - Marin County Dependency and Family Courts, Family Violence Court

- **Health Services**
  - Marin Perinatal Council, Marin Maternity Clinic; Marin Specialty Clinic; Marin Community Clinic

**DISSEMINATION ACTIVITIES**
Reports to staff: Occurs every six months. The project evaluator shares the results with program staff and organizational executives. Staff has the opportunity to discuss the meaning of the results with the evaluator and determines any needed midcourse changes to the content or delivery of the curricula and activities to promote achievement of program objectives.

Reports to funder: Occurs as requested by the funder. These written reports detail the status of the project and progress toward the achievement of its planned outcomes.

Reports to local stakeholders: The evaluator or project manager disseminates reports at least annually. As was true with the reports to staff, this information sharing includes a facilitated process whereby the stakeholders have the opportunity to assign meaning to the results and offer insight into potential program improvements. The invited stakeholders includes representatives of all project partners.

Reports to the community: Occurs at least two times during the course of the project through local media channels. For example, an OpEd or byline story published in the local newspaper or a news story on a local radio or television station.

Reports to the professional field: Occurs at least two times during the course of the project. These reports are in the form of either poster session submissions or submitted papers for publication. These most likely occur in the third and fourth year.

SUSTAINABILITY STRATEGIES AND ACTIVITIES

1. Center Point staff sits on multiple local and county coalitions and commissions dedicated to addressing substance abuse, housing and child welfare, employment, crime and poverty. Center Point furthers its relationships with all referral partners to promote recovery and the effective elements of the service design.

2. Evaluation findings are disseminated to community stakeholders annually with the purpose of informing the community about successful substance use treatment services for homeless populations that lead to stable housing and employment and to inform community substance abuse and addiction prevention strategic plans.

3. Center Point works with key community stakeholders to develop and implement a plan of sustainability for the continuation of these expanded services after federal funding concludes. One component of that plan is to submit competitive applications for funding, including three public or private sector proposals. To improve the chances of funding from local sources, Center Point regularly disseminates programmatic outcomes and shares project successes with state, county, and city behavioral health providers and funders.

EVALUATION

Each RPG grantee is conducting an evaluation to assess participant outcomes and other aspects of its program, in order to add to the knowledge base on approaches that improves the well-being and functioning of families affected by substance abuse and where children are at risk of maltreatment. Center Point is evaluating FamilyLink using a matched comparison group design with an expected sample size of approximately 84 mothers and their children in the program group, and a comparison group of approximately 75 clients. Mothers receiving FamilyLink services receive residential substance use and mental health disorder treatment in combination
with on-site parenting and family strengthening services, trauma and abuse services, employment preparedness services, job placement and income enhancement services, Head Start and other child development services for children and comprehensive case management. Comparison group members receive alternative substance abuse treatment services in a different facility. In addition to studying the outcomes of its program, Center Point’s evaluation also includes an analysis of partner collaboration.

**Outcome Study Design:** Most women who enter FamilyLink receive a referral to the program from a county child welfare agency, self-refer or receive a referral from a probation officer. The grantee has identified a comparison site serving a similar population for the study, the Family Recovery Center in Oceanside, CA. The evaluation team identifies comparison group members with characteristics – including demographics and maternal substance use history – similar to those of the program group members.

Center Point is collecting data on outcomes in five areas: (1) child well-being, (2) family functioning and stability, (3) adult recovery, (4) child safety and (5) child permanency. Child well-being, family functioning and adult recovery data are collected at program intake and exit. Administrative data on permanency and safety as well as substance abuse treatment episodes covering the year prior to enrollment through one year post discharge come from child welfare and treatment records that the grantee and comparison site obtain through data sharing agreements with the California Department of Social Services (CDSS) and the California Department of Health Care Services (DHCS).

**Additional Evaluation Components:** In addition to its program outcomes, Center Point is analyzing its collaboration with partners as part of its local evaluation.

**RPG National Cross-Site Evaluation Participation:** Center Point is participating in the RPG cross-site evaluation studies of family and child outcomes, program implementation, and collaboration among RPG grantees and partners.

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**ADMINISTRATIVE STRUCTURE**

The lead agency is Center Point, Inc. The Executive Director is Sushma D. Taylor, Ph.D. Dr. Taylor directly supervises training, clinical treatment and evaluation and assumes responsibility for communications between Center Point and ACF. Harriet Gaines is the FamilyLink Program Manager. Ms. Gaines provides oversight of program services and staff is responsible for overall implementation and all facets of operation of the program. Ms. Gaines is directly supervised by Executive Director is Sushma D. Taylor, Ph.D. and Joe Hegedus, Director Administration and Compliance, who are involved in all aspects of the program and evaluation.

There is no formal structure of Oversight or Steering Committees. As the lead agency, Center Point proposes to meet with program partners as follows:

- Center Point facilitates the completion of the Collaborative Values Inventory (CVI) and a discussion of shared values with all partners
- Center Point facilitates the completion of the Collaborative Values Instrument (CCI) to assess readiness to work together for child and family well-being
- Center Point participates in the Marin Perinatal Council monthly meetings to improve the system of care for children
- Center Point meets quarterly with Head Start Director and daily with staff
- Center Point and CPS develops a process for addressing client and program issues