



REGIONAL PARTNERSHIP GRANTS - EXTENSION

MASSACHUSETTS FAMILY RECOVERY PROJECT-HAMPDEN COUNTY

Lead Agency: **COMMON WEALTH OF MASSACHUSETTS**

LOCATION: Boston, MA

PROGRAM OPTION: Two-Year Extension

GEOGRAPHIC AREA AND CONGRESSIONAL DISTRICT SERVED:

City of Boston; 7th Congressional District; Urban

NUMBER SERVED: Children: 157 | Adults: 88 | Families: 83

Project Abstract

In 2007, with funding from the Administration for Children and Families (ACF), the Family Recovery Project (FRP) of Hampden County was implemented as intensive home-based services with DCF-involved families affected by substance use whose children had been removed or were at risk of removal. The project served nearly 200 families in the first five years of the grant project and data collected indicated that the service model was effective in stabilizing families, reducing the length of time children were in foster care, strengthening recovery, improving access to a comprehensive range of services for all family members, and reducing trauma and mental health symptoms.

During the extension period, the Massachusetts Department of Public Health Bureau of Substance Abuse Services (BSAS) and the Department of Children and Family Services (DCF), in collaboration with the Institute for Health and Recovery (IHR) and Brandeis University, sought to continue the FRP of Hampden County. The grantee sought two additional years of funding to further demonstrate the effectiveness of the approach and share methods and results with other states considering similar approaches to care.

The FRP service model focused on stabilizing families, strengthening recovery, improving family and child access to a range of therapeutic and developmental services, and improving child outcomes and well-being. FRP services were family-centered, strengths-based, trauma informed, and employed the evidence-based approaches of Motivational Interviewing to engage parents in recovery, Child Parent Psychotherapy to improve parent-child attachment, the Nurturing Program to improve parenting skills and empathy, and Seeking Safety to help heal the impact of trauma.

In addition to FRP services, a Family Recovery Council (FR Council) of 38 substance abuse treatment, child welfare, early intervention, and social service agencies met regularly to increase cooperation, communication, and collaboration.

Target Population

The target population for this project included high-risk families who had open cases with DCF, had children who have been removed from the family and had a goal of reunification, or had children who were at imminent risk for removal because of parental substance abuse. Families who had substance abuse/co-occurring mental health concerns and who were not adequately engaged in treatment were given priority. The project served both court-involved and voluntary families following completion of a child welfare investigation/initial assessment.

Major Program Services

Case Management and In-Home Services

- Intensive/Coordinated Case Management
- “Regular” or “Traditional” In-Home Services

Parenting/Family Strengthening

- Evidence-Based Parenting or Family Strengthening Program - Nurturing Program for Families in Substance Abuse Treatment and Recovery

Family Therapy/Counseling

Mental Health and Trauma Services for Adults

- Mental Health Services
- Trauma-Informed Services
- Trauma-Specific Services – Seeking Safety

Substance Abuse Treatment for Adults

- Non-Intensive Outpatient or Other Step-Down

Specialized Outreach, Engagement, and Retention

- Cognitive Behavioral Strategies – Motivational Interviewing/Motivational Enhancement Therapy
- Substance Abuse Specialist
- Family Team Meetings
- Co-location of Staff

Screening and Assessment – Child Welfare and Other Children’s Issues

- Screening and Assessment for Child Welfare Issues
- Other Specialized Child Screening and Assessment – Behavioral/Socio-Emotional, Developmental

Screening and Assessment – Substance Use and Other Adult Issues

- Screening and Assessment for Substance Use Disorders
- Other Specialized Adult Screening and Assessment – Trauma/Domestic Violence, Parenting, Psycho-social

Children’s Services

- Mental Health Counseling
- Trauma Services for Children/Youth - Child Parent Psychotherapy (CPP), Attachment, Self-Regulation and Competency (ARC)

Cross-Systems Collaboration

- Clinical and Program Training
- Cross-systems Policies and Procedures
- Regular Joint Case Staffing Meetings
- Co-location of Staff
- Cross-systems Information Sharing and Data Analysis
- Partner Meetings – Regional Partnership and Program Management

Major Program Goals

The overarching goal of the FRP was to promote child well-being and family stability.

Goal 1: Improve the well-being, permanency outcomes, and safety for children

Goal 2: Improve parents' stability in recovery, well-being, and family interactions

Goal 3: Improve children's developmental outcomes

Goal 4: Improve system-level capacity and effectiveness in Hampden County

Goal 5: Disseminate the project model and outcomes across the state and nationally

Goal 6: Sustain FRP services after grant funding

Key Partner Agencies

The RPG encouraged service providers to develop and/or strengthen cross-system linkages between substance abuse treatment, child welfare, dependency court, and other service systems. The FRP project included the following partners:

Child Welfare

- Massachusetts Department of Children and Families

Substance Abuse

- AdCare Hospital
- Carlson Recovery Center
- Carson Center for Adults and Families

- Massachusetts Department of Public Health, Bureau of Substance Abuse Services
- CleanSlate Centers
- Community Substance Abuse Centers
- Dual Diagnosis Taskforce
- FRESH Start
- Gandara Center
- Griswold Behavioral Health Center
- Habit OpCo
- Massachusetts Behavioral Health Partnership
- MOAR
- Phoenix Houses of NE
- Providence Behavioral Health Hospital
- Watershed Recovery Home
- ATR (Access to Recovery)
- TAPE Projects
- Crossroads Agency
- The Village (BHN)

Criminal Justice, Law Enforcement, Legal and Related Organizations

- Hampden County
- Committee for Public Counsel Services (CPCS)/ Children and Family Law Division
- W Massachusetts Regional Women’s Correctional Center
- Western MA Correctional Alcohol Center

Housing

- City of Springfield, Housing Department
- Massachusetts Department of Housing and Community Development
- Department of Transitional Assistance
- Housing Allowance Program (HAP)

Mental Health

- Child Guidance Clinic

Health Services

- Baystate Medical Center
 - Baystate Lactation and Parent Education Program
 - Baystate Neonatal Intensive Care Unit
- Behavioral Health Network – The Village
- Center for Human Development

- Holyoke Medical Center
- Mercy Medical Center
- The Consortium
- Tapestry Health
- Brightside for Families and Children (Mercy Medical Center)

Education

- Holyoke Public Schools
- Massachusetts Center for Early Intervention
- Springfield Public Schools
- Thom Child and Family Services
- Westfield State University
- Baystate Continuing Education Program
- Liberty Prep High School

Other Community and Child and Family Services

- MotherWoman, INC.
- Square One
- Enlace De Familias
- SOAR
- Learn to Cope
- Western MA Parent Support Group
- Gandara Center, NIA Program
- Springfield Family Support Programs/Family Resource Center
- Faith Unlimited Institute
- New North Citizen's Council Inc.
- Northeast Parent & Child Society
- Tenancy Preservation Program
- West Central Family and Counseling

Other Evaluation and Training

- Brandeis University

Evaluation

This project proposed a quasi-experimental design. The treatment group consisted of clients receiving FRP services. The comparison group consisted of clients receiving typical child welfare and substance abuse services during the RPG grant period but not the RPG enhanced services. Data for the comparison group was matched at the population level.

Grantees measured performance indicators in the following domains: safety, permanency, child and adult well-being, and adult recovery. For additional information regarding program outcomes, please contact key personnel.

Sustainability Strategies and Activities

Massachusetts DPH was able to sustain a scaled-down version of the FRP. They secured funding to sustain clinical services at a reduced length of time and were able to bill Medicaid and several commercial insurers for eligible services. The State as a whole was moving away from fee-for-service payment and the grantee and partners have taken part in discussions with Medicaid and other managed care organizations regarding home-based services treatment as a reimbursable service.

Key Personnel Information

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This grantee profile is supported by the Administration on Children, Youth, and Families Children's Bureau, under contract HHSP23320072911YC. This content represents the work of The Center for Children and Family Futures, and does not reflect the opinions of the Administration on Children, Youth, and Families.