



Center for Workforce
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Functional Family Therapy (FFT) for CFTSS Providers

June 14, 2023



Agenda

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- Q&A



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Project Overview



Timeline

- Office hours
 - 6/22 at 12pm
- Application due date
 - 7/10
- Notification date
 - Early/mid August
- Learning Community Session
 - October
- Staff training in November/December 2023

Application



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Email

- Applicants must email Provider Designation (OMH-Childrens-Designation@omh.ny.gov) to request an application for EBP Authorization. The following information must be provided in the email request:
 - **Program Name**
 - **Number of sites and addresses** (How many sites will be providing the EBP?)
 - **Type of EBP**

Apply

- Based on the information provided in the email request, NYS will provide the applicant with the necessary forms to apply.
- All forms must be completely filled out prior to submission.
- Applications must be submitted to Provider Designation (OMH-Childrens-Designation@omh.ny.gov) by July 10th.
- Incomplete or missing forms may result in an applicant not being authorized for a specific cohort but may reapply for future cohorts.

Train

- NYS will notify all applicants of authorization determination.
- If authorized, the provider agency will receive an updated designation letter indicating the approved EBP type and site(s).
- Authorized providers will be connected with information regarding training and other applicable processes.



Learning Community Sessions

- 3 sessions
 - October 2023
 - March/April 2024
 - September 2024
- FFT trainers, CWE staff, and Agency representatives
- Sessions will focus on agency implementation, highlight successful approaches, work to overcome barriers, and share project data



Functional
Family Therapy



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- FFT Model and Outcomes
- Agency Requirements
- Training and Consultation
- Tools and Data





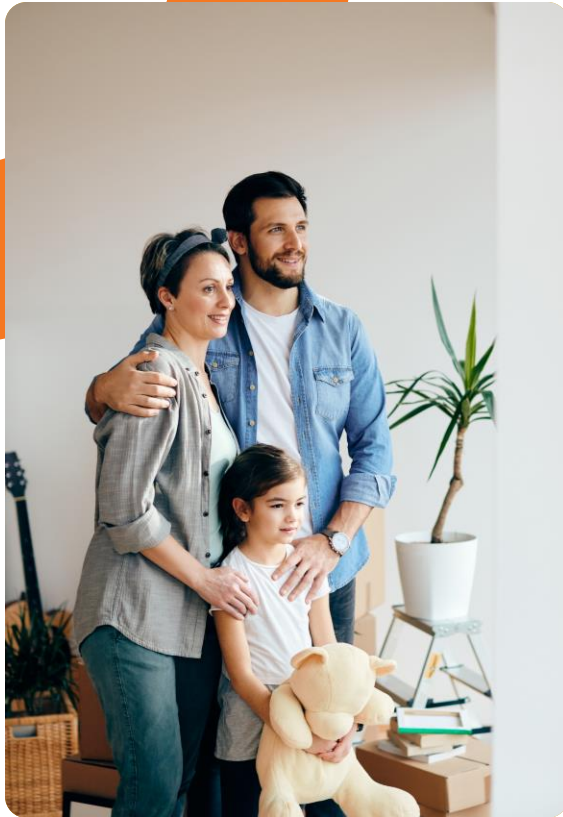
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FFT Model and Outcomes



What is Functional Family Therapy?



- Research-based prevention (Indicated) and intervention (Selective) program for at-risk youth
- Targets youth 11-18 years of age
- Prevention intervention--status/diversion youth/at risk for outplacement or further penetration into care systems
- Treatment intervention--moderate and serious system-involved youth
- Short-term, family-based/relational program
 - 12-16 for moderate cases, 26-30 for more serious cases spread over 3 to 5 months provided mostly in-home but....
- Range of youth concerns
 - Violence, drug abuse/use, emotional and behavioral concerns, gang involvement, family/relationship conflict



FFT's Underlying Philosophy

01

FFT draws from family systems theory and behavioral approaches.

02

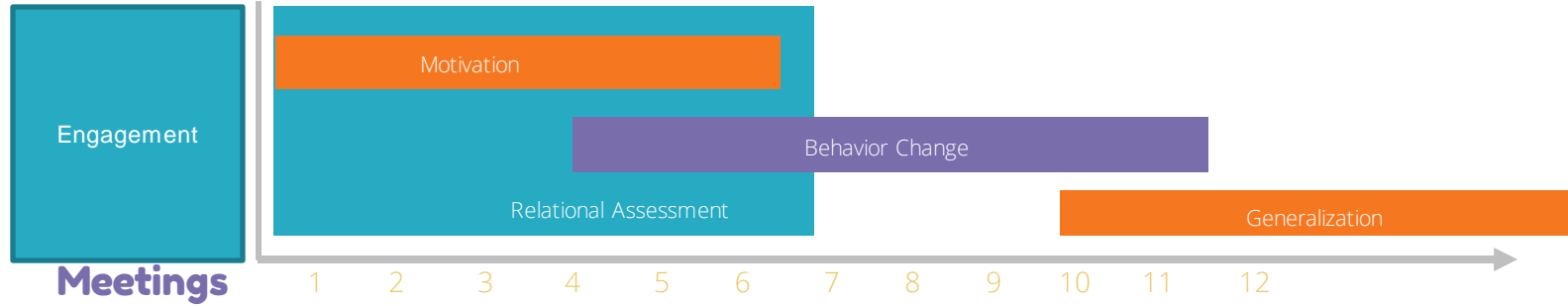
It is based on the theory that problem behaviors serve a function within the family. Family members develop ways of interacting that help them to get their relational needs for closeness or distance met, but these patterns of interacting may also create or maintain behavior problems.

03

FFT achieves changes by improving family interactions and developing family member skills that are directly linked to risk factors and issues leading to the need for formal therapeutic intervention.



5 Phases of FFT



- Each phase has its own assessment focus, intervention goals, strategies, and techniques.
- Interventions start with creating a motivational context for change; and
- Build to changing individual behaviors and patterns of family interaction
- Therapists utilize different strategies over the course of treatment: Relational vs. Structuring/Directive - Interventions include an ecological focus, particularly in generalizing change



What good model fidelity can do:

- Effectively treating youth within the entire range of Behavioral & Emotional Disorders
- Interrupting the matriculation of youth into more restrictive, higher-cost services
- Preventing younger children in the family from penetrating the system of care
- Preventing youth from penetrating and/or re-entering the adult criminal justice system and child welfare systems
- Reduce costs

Agency Requirements



Therapist Caseload

A site = a working group of 3 to 8 therapists

Therapists sees cases on individual basis

- Working groups attend all training/consult together
- Functions: collaborative staffing of cases
- Purpose: sustainability; support; model Fidelity

Caseload Standards

- 2-3 cycles of cases per yr.
- F/T therapist: max 10 cases – 20-30 per year
- P/T therapist: min 5 cases (20 hrs/wk) – 10-15 per year

Case Needs— #s of cases / year

- 8 F/T therapist site – 200-300 per year
- 3 F/T site– 60-90 per year





Therapist Caseload & Expectations

- Working group of 3 to 8 clinicians trained in year one of implementation, with a case carrying supervisor trained in year two of implementation. Supervisor is case carrying. Masters level clinicians and supervisor.
- Meet weekly in consultation on FFT cases provided by trained supervisor/consultant (2 hrs per week).
- Maintain minimum caseload of 5 cases at any given time (20 hrs. per week) and no more than 10 to 12 cases at any given time if full time.
- Each therapist minimum of initial clinical training, follow-ups and on-going case consultation (initial dosage of training)
- Individual therapist and group receiving level of supervision, consult and training appropriate to degree of adherence and competency
- Web based system to assist with staying on track and ongoing fidelity monitoring and quality improvement (CSS provides in the moment data and feedback on performance, TYPE reports, GTR
- We respect agency “know how....” FFT teaches therapists....Looks for local ownership



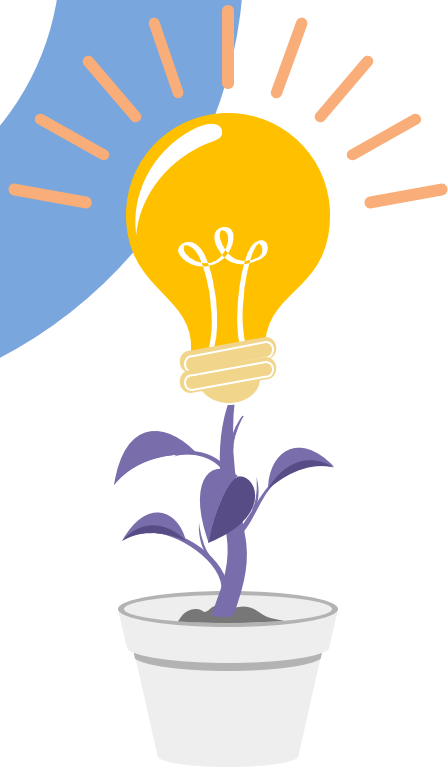
Where Services are Provided

Recommended Locations/Delivery Settings

Typically, FFT is conducted in home and clinic settings. What matches to the families we work with?

It can also be delivered in schools, child welfare facilities, probation and parole offices, aftercare systems, and mental health facilities.

Most importantly is who is in the room, however homebased services are always preferred as long as it matches to the family.



Training & Consultation



Goals: Model adherence; Clinical and supervisory competence, Increasing self-sufficiency, Lasting and adhering sites...

Site Application/Dialogue -> Review/ Feedback -> Site Start-Up

Phase 1: CLINICAL TRAINING: adherence, accountability, competence

- Initial Implementation/technical training
- Initial clinical training/CT2
- Phone consultation (weekly w/ FFT Consultant) and Peer Consultation
- Follow-up training (FFT Consultant) – 3x year at 2 days each
- Externship
- Clinical Services System (FFT-CSS)

Phase 2: SITE SUPERVISOR TRAINING: building self-sufficiency

- 2x of 2 days each at Supervisor Training; weekly or every other week supervisor consultation; site visit; CSS review

Phase 3: ONGOING ADHERENCE

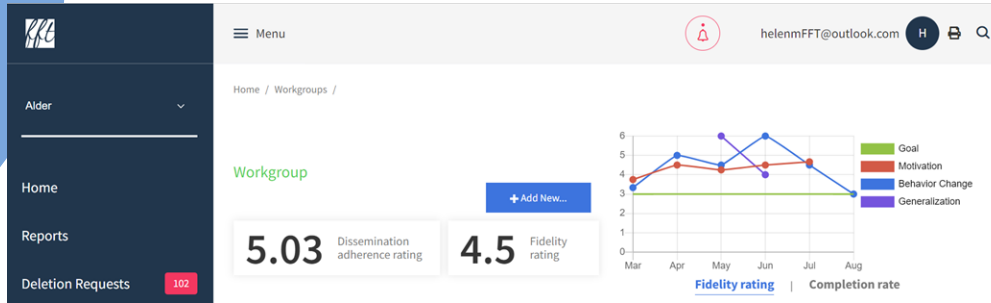
- Monthly consult, one day on-site, CSS review



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Tools and Data

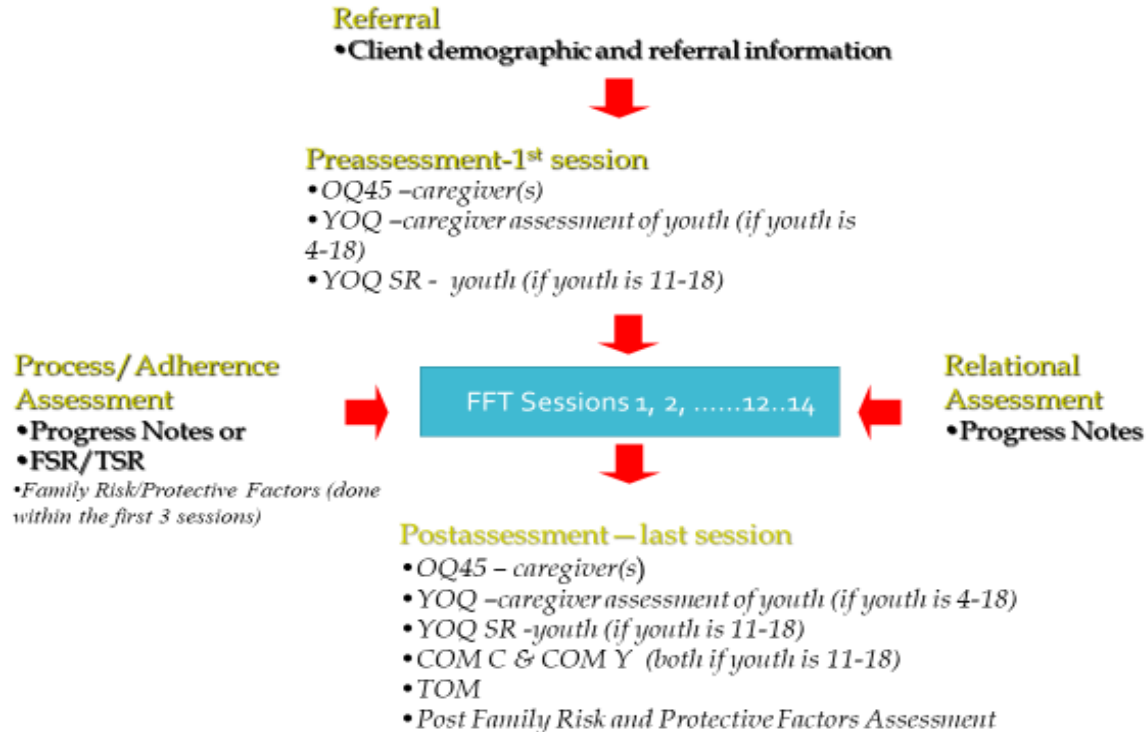


FFT Client Services System or “CSS”

- Exclusively used in current FFT Projects
- Easy to use by providers and administrators for caseload monitoring and outcomes reporting (pre/post, outcomes, qualitative assessments)
- Provides in-the-moment support, data and training to all FFT therapists
- Guides therapists in their work with families (session notes match the phase of model)
- Aggregate Reporting features for Stakeholders and Funders
- Can interface with EMRs, notes accepted by MCO's in many states



FFT Assessments & Documents





Funding

- Enhanced rate Components
 - Reduced productivity- accounts for training, extra staff supervisory hours, paperwork, and enhanced assessment protocols
 - Enhanced expectations of supervisor
 - Enhanced funding for clinicians and supervisors once credentialed
- CWE
 - All training and supervision
 - Costs of credentialing
 - Assessment tools
 - Replacement therapists



Evaluation Expectations

- Your feedback and input is important to us! This is a new initiative and we want to know what works and doesn't work to inform future programming.
- Expectations:
 - Online survey during the first training session
 - Training satisfaction survey at the end of the trainings
 - A series of online follow-up surveys (every 6 months) for clinicians and supervisors
 - Participation in focus group discussions during a LC session



Immediate Next Steps

- Request application at OMH-Childrens-Designation@omh.ny.gov
- Participate in Office Hours on 6/22 @ 12pm if needed
 - Submit questions in advance to cwe.info@nyu.edu
- Submit Application on or prior to 7/10.

Q&A



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Thank you!

<https://www.centerforworkforceexcellenceinebp.org/>

Cwe.info@nyu.edu