

REFERRAL AND ENGAGEMENT OF FAMILIES IN SERVICES

REGIONAL PARTNERSHIP GRANTS



Ensuring that families are referred to and engaged in substance use disorder (SUD) treatment and other services and supports is a key component of any successful Regional Partnership Grant (RPG) project and is integral to planning and implementing new programs and innovations. In the early stages of planning, partners must clearly define the population of focus to be served, by carefully considering needs of the community and the collaborative partners. Clear eligibility criteria and referral processes need to be established. These preliminary tasks have a direct effect on the number of referrals generated and retention of families in services. Long-term engagement is vital for retaining families and enabling them to successfully complete program services.

Below are key referral and engagement strategies learned from over 100 RPG projects.

KEY STRATEGY #1: COLLABORATIVE PLANNING AND PROGRAM DESIGN

Collaborative planning and program design begin with strong and effective partnerships and leadership. Identifying and coordinating with key partners early in the planning and project development stages make it easier to develop a shared vision of desired outcomes and a clear process for ongoing collective decision-making. Having a designated lead who is responsible for clear communication with partners strengthens collaborative efforts, and results in being better able to work through barriers. Partnerships are important in ensuring a complete and inclusive referral process and developing a clear definition of the population of focus. Partners are often referral sources that can become ambassadors for the project and build project recognition in the community, which can also support sustainability efforts. Engaging the broader community is also key. Conducting a community needs assessment can further clarify the systems of care, identify service gaps, and assist in understanding the strengths and needs of the families to be served. This process also helps to avoid competing for referrals and duplication of services for families. Evaluation partners are essential at all stages of program planning, implementation, and operations. Establishing a plan for [continuous quality improvement](#) that includes regular feedback, evaluation updates, data dashboards, and fidelity reviews will help ensure the success of the program, shift practice and keep key partners involved.

Some jurisdictions have co-located substance abuse counselors at child welfare offices to help in specific situations, provide consultation, and conduct comprehensive SUD treatment assessments.¹

KEY STRATEGY #2: RECRUITMENT, IDENTIFICATION, AND SCREENING AND ASSESSMENT

Prior to engaging parents and children, collaborations should establish detailed recruitment, identification, screening and assessment protocols, and define the methods of each of the following four areas.

RECRUITMENT

- Develop strong collaborative partnerships
- Determine effective recruitment methods for focus population
- Provide clear referral process information to partnering agencies and primary referral sources

IDENTIFICATION

- Clearly identify focus population
- Identify eligible participants

SCREENING

- Establish eligibility and exclusionary criteria
- Use screening process to identify SUD and other issues that require further assessment

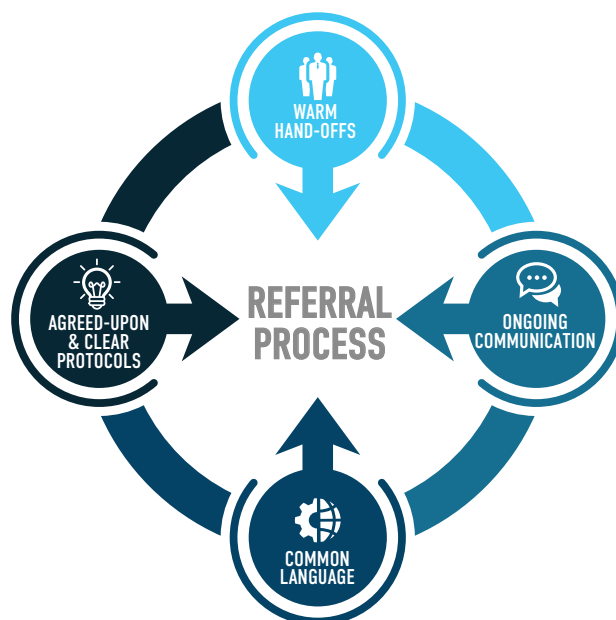
ASSESSMENT

- Use formal assessment process to identify the needs of children, parents, and families
- Conduct ongoing assessments of children, parents, and families
- Mitigate barriers to recovery and reunification

KEY STRATEGY #3: REFERRAL

The collaborative partnership including all referral sources work together to develop a process for referring families to services and supports. The objective is to accurately identify the focus population and eligibility criteria and refer individuals in a timely manner. The procedures and protocols need to be clear for making referrals. The referral process sets the stage for strong engagement and rapport-building with clients throughout the duration of service delivery.

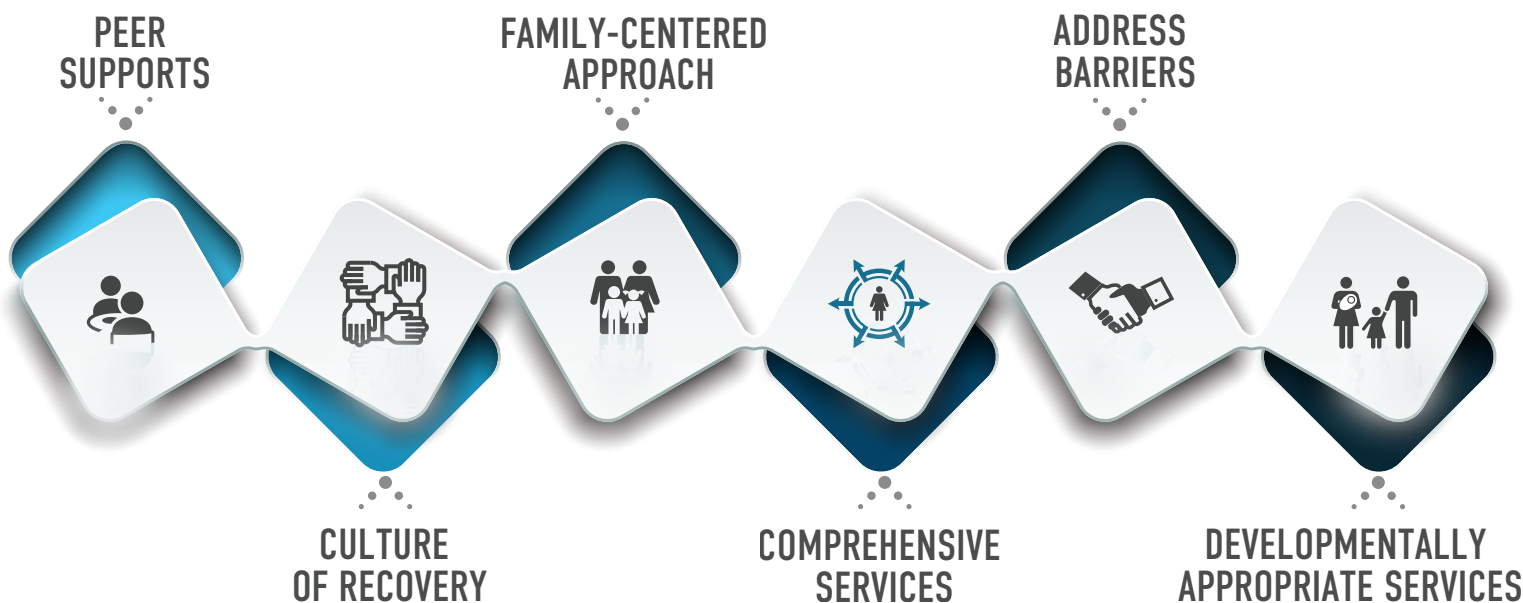
Note that all partners should provide a "warm hand-off," meaning an individualized, person-to-person connection between referral source and service provider. This process should include follow-up connection with parents when making a direct referral.



KEY STRATEGY #4: ENGAGEMENT

Engaging families is a key component in ensuring family safety, permanency, well-being, and recovery. It is likely that families have faced obstacles in the treatment and recovery process. Lessons from prior RPG grantees to improve family engagement include:

- A non-stigmatizing approach supports a culture of recovery and helps families feel they are part of a collaborative team. Person-first language engages the parent in conversations about observations or concerns.
- A family-centered approach that is strengths-based improves parenting and family outcomes.
- Peer support helps parents enter and navigate systems of care, removes barriers to recovery, and fosters engagement in the recovery process.
- Families benefit when comprehensive services and community supports are provided to all family members.
- Families and service providers must work together to identify and overcome barriers.
- Family engagement improves when children are provided developmentally appropriate services.



¹ Young, N. K., Nakashian, M., Yeh, S., & Amatetti, S. Screening and Assessment for Family Engagement, Retention, and Recovery (SAFERR). DHHS Pub. No. 0000. Rockville, MD: Substance Abuse and Mental Health Services Administration, 2006.

References:

National Center on Substance Abuse and Child Welfare
Peer and Recovery Support Specialists