Regional Partnership Grant Program:
Enhanced Collaboration, Promising Results

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Agenda

- Introductions, Background and History of the RPG Program
- RPG Program Overview
- RPG Program Highlights and Key Implementation Lessons
- Program Evaluation Lessons and Key Outcomes
- Sustaining Regional Partnerships: Challenges and Successes
- Closing
Regional Partnership Grant Program: Enhanced Collaboration, Promising Results

Introductions, Background and History of the RPG Program

Elaine Voces Stedt, MSW

Leadership of the Federal Government - Five National Goals Established

- Building collaborative relationships
- Assuring timely access to comprehensive substance abuse treatment services
- Improving our ability to engage and retain clients in care and to support ongoing recovery
- Enhancing children’s services
- Filling information gaps

Regional Partnership Grants (RPGs)

A Program of the Administration on Children, Youth and Families
Children's Bureau
Office on Child Abuse and Neglect

Progress Since ASFA (1997) - Leadership of Federal Government on Substance Abuse and Child Welfare

- Adoption and Safe Families Act (ASFA)
- National Center on Substance Abuse and Child Welfare
- Blending Perspectives and Building Common Ground Congressional Report
- Regional Partnership Grants
- Substance Exposed Newborns Grants
- Family Drug Court Grants
- Children Affected by Methamphetamine Grants
- Building collaborative relationships
- Assuring timely access to comprehensive substance abuse treatment services
- Improving our ability to engage and retain clients in care and to support ongoing recovery
- Enhancing children’s services
- Filling information gaps
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RPG Authorization

In September 2007, Children’s Bureau awarded 53 RPGs:
- Authorized by the Child and Family Services Improvement Act of 2006 (P.L. 109-288)
- “Targeted Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Methamphetamine or Other Substance Abuse.”
- $145 million over 5 years

In September 2012, 17 RPGs were awarded:
- An additional 8 grantees were awarded 2-year extension grants from the first 53 grantees
- This was made possible by the Child and Family Services Improvement and Innovation Act (Pub. L. 112-34) signed into law in September 2011

RPG Program – Background

Congress required HHS to develop:
- A set of performance indicators through broad consultation with the field and grantees;
- Partnerships with child welfare and substance abuse treatment providers; and,
- An annual report on the “services provided and activities conducted...the progress made addressing the needs of families and performance indicators established to assess performance.”

Reports to Congress:
The First, Second, and Third Reports to Congress can be retrieved from: http://www.cffutures.org/projects/regional-partnership-grants.

Support for Grantees

ACF awarded a support contract to the Center for Children and Family Futures (CCFF) to:
- Refine and develop final set of RPG performance indicators
- Develop a RPG Data Collection and Reporting System
- Provide technical assistance (TA) to grantees on evaluation, data collection and reporting, and other performance measurement matters and programmatic issues

Each grantees had a team of two Federal Project Officers (FPOs) and a Performance Management Liaison (PML)

RPG Program Purpose

Establish or enhance a collaborative infrastructure to build the region’s capacity

Address common systemic and practice challenges

Improve the safety, permanency, and well-being of children affected by substance abuse in child welfare
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Overview of RPGs

The 53 grantee lead agencies were based in 29 States and included 6 Tribes

- Agencies represented a wide range of governmental and private sector organizations representing child welfare, substance abuse treatment, the courts and other child and family services entities

Overall membership was broad, extending well beyond the two-partner minimum legislative requirement

- State child welfare agency was a required partner

Geographic Area Served and Target Populations

- 48 grantees (91 percent) provided services to families in a specified region
- Nearly all (92 percent) provided services to both in-home (at risk of removal) and out-of-home cases
- Programs addressed methamphetamine as well as other types of substance abuse impacting their regions and target populations

Some grantees emphasized specific subpopulations (e.g., pregnant and parenting women, parents with children 0 to 5)
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RPG Member Agencies Representing Child Welfare, Substance Abuse, Mental Health and Tribes

<table>
<thead>
<tr>
<th>RPG Member Agency Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Abuse Treatment Provider (n=44)</td>
<td>80.9%</td>
</tr>
<tr>
<td>Regional/County Child Welfare Agency (n=68)</td>
<td>74.6%</td>
</tr>
<tr>
<td>Mental Health Services Provider (n=17)</td>
<td>67.0%</td>
</tr>
<tr>
<td>State/County Mental Health Agency (n=19)</td>
<td>64.7%</td>
</tr>
<tr>
<td>State Child Welfare Agency (n=17)</td>
<td>63.0%</td>
</tr>
<tr>
<td>Tribal Substance Abuse Agency (n=16)</td>
<td>47.2%</td>
</tr>
<tr>
<td>Child Welfare Services Provider (n=12)</td>
<td>47.2%</td>
</tr>
<tr>
<td>State Substance Abuse Agency (n=17)</td>
<td>47.2%</td>
</tr>
<tr>
<td>Tribal Substance Abuse Agency (n=5)</td>
<td>44.0%</td>
</tr>
<tr>
<td>Tribal Child Welfare Agency/Consorcsa (n=6)</td>
<td>44.0%</td>
</tr>
<tr>
<td>Tribal Child Welfare Agency (n=20)</td>
<td>40.5%</td>
</tr>
</tbody>
</table>

70% of Grantees had 10 or more partners in their collaborations.

RPG Member Agencies Representing Courts and Criminal Justice and Legal System

<table>
<thead>
<tr>
<th>RPG Member Agency Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family Treatment Drug Court/EDC (n=64)</td>
<td>54.0%</td>
</tr>
<tr>
<td>Attorney/legalsen (n=82)</td>
<td>43.1%</td>
</tr>
<tr>
<td>Dependency or Other Court* (n=57)</td>
<td>43.8%</td>
</tr>
<tr>
<td>Court Appointed Special Advocate – Child (n=46)</td>
<td>34.0%</td>
</tr>
<tr>
<td>Local Law Enforcement (n=10)</td>
<td>34.0%</td>
</tr>
<tr>
<td>State/County Corrections (n=62)</td>
<td>34.6%</td>
</tr>
<tr>
<td>Attorney General (n=21)</td>
<td>29.5%</td>
</tr>
<tr>
<td>Office of State Courts/OP (n=19)</td>
<td>19.5%</td>
</tr>
<tr>
<td>Juvenile Justice Agency (n=19)</td>
<td>19.5%</td>
</tr>
<tr>
<td>Drug Endangered Children (DEC) (n=9)</td>
<td>17.0%</td>
</tr>
<tr>
<td>Other Criminal Justice (n=8)</td>
<td>15.1%</td>
</tr>
</tbody>
</table>

*Other court includes criminal court, adult drug court or mental health court.

RPG Member Agencies Representing Other Community and Supportive Services

<table>
<thead>
<tr>
<th>RPG Member Agency Type</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child/Adult Health Services Agencies or Providers (n=122)</td>
<td>60.4%</td>
</tr>
<tr>
<td>Parenting or Early Childhood Education/Services* (n=18)</td>
<td>52.8%</td>
</tr>
<tr>
<td>Employment Agencies or Service Providers (n=21)</td>
<td>43.4%</td>
</tr>
<tr>
<td>Housing Agencies or Service Providers (n=20)</td>
<td>37.7%</td>
</tr>
<tr>
<td>Domestic Violence Services (n=10)</td>
<td>35.8%</td>
</tr>
<tr>
<td>Education Agencies or Schools** (n=18)</td>
<td>34.0%</td>
</tr>
<tr>
<td>Home Visiting (n=16)</td>
<td>20.2%</td>
</tr>
<tr>
<td>Other Community Child/Family Service Providers*** (n=31)</td>
<td>16.5%</td>
</tr>
</tbody>
</table>

*Also includes early childhood coalitions or networks.
**Includes state departments of education, schools or school districts, and colleges or universities.
***Includes faith-based organizations, peer сетент networks, and other child and family direct service providers not otherwise specified.

Families Served

53 Grant Programs

17,820 adults
25,541 children
15,031 families

(Through September 30, 2012)
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Broad Program Strategy Categories

- Case management
- Mental health and trauma services
- Collaborative clinical practice activities
- Screening and assessment
- Parenting and family therapy
- Collaborative program and policy activities
- Substance abuse treatment
- Children’s services

RPG Program Highlights and Key Implementation Lessons

- Collaboration is essential to address the complex and multiple needs of families and sustain integrated service delivery.
- Collaboration to establish cross-systems linkages and effective sustainability planning takes time and is developmental and iterative in nature.

- Intensive multi-faceted outreach is needed at the client, partner, agency, and community levels.
- The collaborative must continually assess its progress and adapt its program and services to meet families’ unmet and emerging needs and facilitate client engagement and retention.

"I’ve been involved with criminal type cases and juvenile and dependency issues for 30 years. I was a cynic to the idea of the [RPG] to begin with…. Now, with this collaboration, I see different people in six months than when people came in. Their attitudes are different and their joy of life is back." - RPG FDC Judge

"At first I didn’t want to come (for treatment) and I didn’t want to stop using, but the outreach worker came knocking on my door every day, telling me I was going to make it to treatment no matter what. She would do whatever it took to get me involved... she’s changed my whole life." - RPG Program Participant
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- Treating the family system—rather than an individual child or parent in isolation—is far more effective in addressing a family’s underlying and complex issues. Over the course of the grant, grantees moved from individual-focused services to more comprehensive family-centered treatment.

• Broadening the partnership beyond child welfare and substance abuse treatment to work with other community agencies is critical to securing important core treatment and supportive services.

- Clear roles, responsibilities, and expectations are required of partners, providers, and families to promote both individual and shared accountability.

- Ongoing communication, information sharing, monitoring, and supervision are crucial at both the systems and direct service levels.

- The importance of staffing issues in [developing, achieving, building] collaborative capacity cannot be underestimated, particularly for programs working in sparsely populated, rural areas. Staff training and development need to be a key project component in larger implementation and sustainability plans.

- The partnership and program need to be integrated into other existing systems’ efforts and infrastructures and leverage all available resources to facilitate sustainability.

“When you look at child welfare, there’s a single child that they’re focusing on… They wouldn’t necessarily look at the needs of another child. And that other child wouldn’t get services, even though they need them.” Through case management services, this grantee was able to connect children throughout the entire county to needed services.

“[The] most important thing I learned is that one cannot spend too much time planning ahead and setting up a clear line (chain) of communication and accountability. When entering such a partnership, there must be an agreed outcome or goal.”

RPG I: KEY PROGRAM IMPLEMENTATION LESSONS
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• The larger economic and fiscal environment has a notable impact on collaborative service delivery and sustainability planning efforts.

At the start, we were fully aware of the critical need to develop a sustainability plan. However, no one could predict the degree to which the economic downturn would affect funding, resources, and policies at both the state and local level. It became evident that options were limited in terms of raising the funds necessary for sustaining [RPG] program services beyond the award period.

- Grantee

RPG I: Key Evaluation Lessons and Performance Indicators

• Collaboration, broad-based partner support, and shared values are prerequisites for establishing cross-systems information sharing.

• Considerable staff and financial resources are needed to implement cross-systems information sharing and performance monitoring.

"By not pre-establishing the time and financial resources required to do ongoing data pulls, we were understandably met with resistance and a lack of options for getting us data, due to their staffing limitations."

RPG I: Key Evaluation Lessons and Performance Indicators

• Process and outcomes evaluation data need to be communicated internally, to partners and with key stakeholders on a regular basis.

"The schools, courts, and other community partners to emphasize need for early identification and referrals for children with prenatal and environmental substance and trauma exposure; the community-based health center staff and physicians to address no-show issues, increase coordination and planning, and develop single case files; and State policy makers to inform development of the state’s home visitation model.”
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RPG I: Key Evaluation Lessons and Performance Indicators

- Program evaluation in a real-world setting is inherently difficult.

One grantee found important considerations for selecting limitations with the Trauma Symptom Inventory:
- Instruments need to measure the full range of experiences and persistent trauma that an individual may encounter.
- Standardized instruments must be appropriate for a client’s literacy level.
- Programs need to consider the conditions under which the assessment takes place and clients’ perceptions of services.

Lack of shared accountability and consistent, systematic guidelines impacted data quality of some grantees and their ability to use data for program improvements and sustainability. Further, evaluators need to convey to all project staff (e.g., administrators, supervisors, clinicians) the value and usefulness of the data.

* Ongoing training and monitoring are needed to ensure data quality and consistency.

During the course of the grant, nearly three-fourths of grantees (73.6 percent) encountered challenges with and worked to improve the overall quality, consistency, and timeliness of their data.

“Qualitative information enabled the partnership to better portray families’ challenges and complexities and the role the RPG project played in helping them reunify with or retain custody of their children. Often in child welfare, outcomes are not black and white, successful or unsuccessful, but various places in between.” Qualitative information thus provided important, additional context for interpreting the performance measures.” -Grantee

- A mixed-methods design best captures the partnerships’ full impact on families and communities.

RPG I: Key Evaluation Lessons and Performance Indicators
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Performance Indicators

Children were kept safe

- 92.0% of children who were in the custody of their parent or caregiver at the time of RPG program enrollment remained at home through RPG program case closure.
- The percentage of children who remained at home significantly increased through program implementation from 85.1% in Year 1 to 96.4% in Year 5.
- Within the first six months following their RPG Program enrollment, 4.2% of children experienced maltreatment.

Households were stable

- 4,078 children were discharged from foster care – 83.0% to reunification.
- Median length of stay for reunified children: 9.5 months.
- Percentage reunified within 12 months: 63.6%.
  - 17.9% were reunified in less than 3 months
- Timely reunification increased significantly from 55.4% in Year 1 to 72.9% in Year 4.
- Infants and young children (~ 1 year) had significantly higher rates of reunification within 12 months (72.7%) than children of all other ages (61.5%).
- Only 7.3% of children re-entered foster care at any point within 24 months following reunification.

Safety and Permanency Outcomes: Program Results in the Context of Statewide Data

<table>
<thead>
<tr>
<th>Safety and Permanency Outcomes (Median Performance)</th>
<th>Children in RPG Program</th>
<th>State Contextual Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percentage of Children who had Substantiated Maltreatment within Six Months after RPG Program Enrollment (N=22,558)</td>
<td>4.2%</td>
<td>5.8%</td>
</tr>
<tr>
<td>Discharge to Reunification - Median Length of Stay in Foster Care (N=3,340)</td>
<td>9.5 months</td>
<td>7.5 months</td>
</tr>
<tr>
<td>Percentage of Children Reunified in Less than 12 Months (N=3,627)</td>
<td>63.6%</td>
<td>69.4%</td>
</tr>
<tr>
<td>Percentage of Children Reunified who Re-entered Foster Care in Less than 12 Months (N=3,575)</td>
<td>5.1%</td>
<td>13.1%</td>
</tr>
<tr>
<td>Discharge to Finalized Adoption – Median Length of Stay in Foster Care (N=418)</td>
<td>24.2 months</td>
<td>29.3 months</td>
</tr>
</tbody>
</table>

*Contextual State Data are 2011 NCANDS/AFCARS median results for the states in which the RPG programs are operating. The state contextual data are not intended to serve as a comparison group for the RPG Program and do not allow for statistical comparisons to RPG participants.
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Parents accessed and remained in treatment

- RPG adults accessed treatment quickly:
  - Within 13 days of entering the RPG program, on average
  - 36.4 percent entered treatment within 3 days
- Participants remained in treatment a median of 4.8 months
- 65.2 percent stayed in treatment more than 90 days
- 45.0 percent completed treatment*
  
*Includes discharges for treatment completion and transferred to another facility and known to report to continue further treatment. Federal treatment outcome reporting considers such transfers a successful discharge.

Parents succeeded in treatment

Additional Substance Abuse Treatment Outcomes

From substance abuse treatment admission to discharge:

- The majority of adults – between 61.1 and 76.2 percent, depending on the substance – reduced their use of alcohol, marijuana, cocaine, methamphetamine, and heroin*
- The percentage of adults employed (full or part time) increased significantly from 22.8 percent to 41.3 percent
- 80.0 percent reported decreased criminal behavior (among adults with any recent arrests prior to treatment admission)
  
*Among adults who reported any substance use in the past 30 days at treatment admission

Parents received supportive services

Child well-being improved

From RPG program admission to discharge:

- The percentage of children for whom overall child well-being was rated a strength significantly increased from 24.8 percent to 53.0 percent.
- The percentage for whom overall well-being was rated as a problem significantly decreased from 31.9 percent to 12.7 percent.
- Children made the greatest gains in the areas of mental health, behavior, and parent relations.

p. <.001

*Data represent the subset of 8 grantees reporting these NCFAS data

Adults Connected to Needed Supportive Services*

- Continuing Care
- Transportation
- Parenting Training/Education
- Mental Health Services
- Primary Medical Care
- Dental Care
- Employment or Vocational Training
- Housing Assistance
- Domestic Violence Services

*Among adults who were assessed and for whom a given service was identified as a need
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### Child Well-being Outcomes

<table>
<thead>
<tr>
<th></th>
<th>RPG Program Admission</th>
<th>RPG Program Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Relationship with Parents (N=724)</td>
<td>32.5%</td>
<td>56.8%</td>
</tr>
<tr>
<td>Mental Health (N=558)</td>
<td>27.9%</td>
<td>52.1%</td>
</tr>
<tr>
<td>Behavior (N=714)</td>
<td>26.9%</td>
<td>49.1%</td>
</tr>
<tr>
<td>Cooperation (N=783)</td>
<td>45.5%</td>
<td>66.0%</td>
</tr>
<tr>
<td>Relationship with Siblings (N=532)</td>
<td>40.9%</td>
<td>59.4%</td>
</tr>
<tr>
<td>School Performance (N=523)</td>
<td>21.2%</td>
<td>39.6%</td>
</tr>
<tr>
<td>Relationship with Peers (N=486)</td>
<td>28.9%</td>
<td>45.7%</td>
</tr>
</tbody>
</table>

*p < .001 for all items

Notes: Data represent the subset of eight grantees reporting these NCFAS data.

### Children received supportive services

<table>
<thead>
<tr>
<th>Service</th>
<th>Admission</th>
<th>Discharge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substance Abuse Prevention and Education</td>
<td>95%</td>
<td>91%</td>
</tr>
<tr>
<td>Primary Pediatric Care</td>
<td>67%</td>
<td>65%</td>
</tr>
<tr>
<td>Educational Services</td>
<td>43%</td>
<td>42%</td>
</tr>
<tr>
<td>Mental Health or Counseling Services</td>
<td>82%</td>
<td>85%</td>
</tr>
<tr>
<td>Developmental Services</td>
<td>5%</td>
<td>5%</td>
</tr>
<tr>
<td>Substance Abuse Treatment</td>
<td>0%</td>
<td>4%</td>
</tr>
</tbody>
</table>

### Adults improved their parenting skills

**Parenting Capacity**

From RPG program admission to discharge:*

- The percentage of parents for whom overall parental capabilities was rated a strength significantly increased from 14.9 percent to 46.5 percent.
- Similarly, the percentage for whom overall parental capabilities was rated a problem significantly declined from 51.0 percent to 20.4 percent.
- Parents showed the most progress in no or decreased substance use and appropriate supervision of children.

*p < .001

* Data represent a subset of 8-10 grantees reporting these NCFAS data

### Family well-being improved

From RPG program admission to discharge, the percentage of parents for whom overall:*  
- **Family interactions** was a strength increased 21.8 percent to 47.0 percent.
- **Environment** (stability and safety in their home and community) was a strength increased from 18.4 percent to 41.5 percent.
- **Family safety** was a strength increased from 17.2 percent to 41.0 percent.

*p < .001

* Data represent a subset of 8-10 grantees reporting these NCFAS data
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Overall Results

- The majority of children at risk of removal remained in their parent’s custody.
- Most children in out-of-home placement achieved timely reunifications with their parent(s). After returning home, very few children re-entered foster care.
- Parents/caregivers achieved timely access to substance abuse treatment, stayed in treatment (on average, more than 90 days), and reported reduced substance use and gains in employment.

Overall Results

- Overall child, adult, and family well-being improved from RPG program admission to discharge*.
- Selected performance measures improved steadily over the course of the grant period, indicating it takes adequate time to establish effective, broad-based cross-systems collaboration and comprehensive, integrated services to facilitate positive family outcomes.

* Among those grantees reporting well-being

Next Steps in Data Analysis

- Understanding the relationships between family composition and characteristics, service access, and outcomes.
- Assessing the relationships between child outcomes and parent substance abuse treatment access, engagement, retention and completion.
- Identifying promising grantee practices in terms of success in recovery, safety, permanency, and well-being.

Sustaining Regional Partnerships: Challenges and Successes

Ken DeCerchio, MSW, CAP
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**Sustainability Barriers**

**Key stakeholders**
- Lack of in-depth collaboration and relationships with key stakeholders (community and state leadership)
- Difficulty engaging state agencies and key leadership stakeholders

**Engagement and Retention**
- Grantees reported challenges with turnover or retention in frontline/direct service staff
- Nearly two-thirds experienced turnover or retention difficulties with key management or administrative positions

Despite this context, grantees achieved a substantial level of success with sustaining at least part of their collaborative activities!

**Sustainability Results**

- 73.2% of the major services and activities provided as part of the grant were sustained
- 53.3% sustained specific components or a scaled down or modified version of their program model
- 33.3% sustained their project in its current form or model beyond their grant period
- 11.1% were not able to sustain any of their program

- Of the 44 regional partnerships whose grants were not extended:
  - 90.6% moved to more advanced stages of collaboration
  - About 30% of grantees had undertaken joint projects or shared grants to sustain services
  - About 43.4% progressed to change the rules for how families are served
  - About 17% of grantees were able to institutionalize RPG practices and services with system-wide

Grantees who sustained their program component generally were able to institutionalize and integrate RPG practices into existing systems of care.

**Getting Better at Getting Along**

**FOUR STAGES OF COLLABORATION**

- Information Exchange
- Joint Projects
- Changing the Rules
- Changing the System

Sid Gardner, 1994
Beyond Collaboration to Results

- Getting Better at Getting Along
- Changing the Rules
- Changing the System
- Information Exchange
- Joint Projects
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Stages of Collaboration and Sustainability Results

- Of the 5 grantees who were in the preliminary stages of collaboration (information exchange), only 2 expected to sustain all/part of their model.
- All 7 grantees who had attained the most advanced level of collaboration (changing the systems) expected to sustain all (5 grantees) or part (2 grantees) of their program model.

Successful Financing Strategies

<table>
<thead>
<tr>
<th>Widening the definition of available or potential resources</th>
<th>Connecting with other related grants or initiatives</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changing the business as usual practices to incorporate RPG innovations</td>
<td>Incorporating RPG efforts within their own agency</td>
</tr>
<tr>
<td>Integrating with other child welfare systems improvements</td>
<td>Transitioning services and staff to other partner organizations</td>
</tr>
<tr>
<td>Negotiating third party payments for what the grant had initiated</td>
<td>Joining with larger health care reform and care coordination efforts</td>
</tr>
<tr>
<td>Institutionalizing RPG practices into existing systems of care</td>
<td>Third-party billing, Medi-cad</td>
</tr>
<tr>
<td>Redirecting existing, currently funded resources to adopt new case management and client engagement strategies</td>
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</tr>
</tbody>
</table>

Cost Studies: Promise and Challenge

- While recognizing the importance of conducting a cost study, most did not include in local evaluation plans.
- Many lacked knowledge, capacity, and collaborative relationships (budget staff), and financial and human resources.

Nonetheless, almost one-third did a cost study or were in the process of conducting one!

Cost Studies: Promise and Challenge

- One grantee reported cost avoidance of $3.51 million to $6.75 million in out-of-home care costs as result of their program. For every $1.00 spent on the program, the State avoids up to $2.52 on the cost of out-of-home care.
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Cost Studies: Promise and Challenge

A Strengthening Families Program found the typical program child participant spent 190 fewer days in out-of-home care.

- The program saved approximately $16,340 in out-of-home care costs per child. Every $1.00 invested in the program yielded an average savings of $9.83.

A FDC site estimated more than $154,000 in annual cost avoidance related to filing of fewer dependency petitions.

- In program year four, the grantee found 16.9 percent of children in the RPG program had petitions filed compared to 33.6 percent of comparison group children (the site estimated a per petition cost of $2,614).

One site calculated a total of 19,318 days in foster care were saved by allowing parents to reunite with their children more quickly.

- The grantee reported a cost savings of approximately $313,300 to the foster care system.

Collaborative Capacity

The regional partnerships showed improvement in all 10 areas of collaborative practice.

Underlying values and principles of collaborative relationships was rated as the strongest of the 10 areas throughout the grant period. Grantees agreed that:

- The regional partnership prioritized parents in the child welfare system for substance abuse treatment services;
- Child welfare system and the courts consider alcohol abuse as important as illicit drugs as a contributing factor to child maltreatment.

Collaborative Capacity

Services to children showed the greatest amount of improvement over the course of the grant period. The partnerships made the greatest gains in:

- Ensuring all children receive comprehensive mental health assessments;
- Developing a range of programs that target children’s special developmental needs;
- Implementing substance abuse prevention and early intervention services for children.

Partners agreed most strongly that their projects were now familiar with national prevention and intervention models for substance-affected children.

Collaborative Capacity

The area of information sharing and data systems showed the second greatest amount of change from baseline to final administration. Grantees reported they were able to strengthen their ability to collect, report, and use their data for program improvement.

Responses also suggested project staff became more knowledgeable about their own and each other’s data system capacities.
Regional Partnership Grant Program:
Enhanced Collaboration, Promising Results

Summary

• Programs continually evolved and their partnerships expanded and matured.
• Engagement of core partners from the child welfare, substance abuse treatment, court and other service systems was essential to overall success.
• Moved from individual-focused services to more comprehensive family-centered treatment.

Summary

• To expand direct services, grantees developed linkages with other community partners and leverage existing community resources.
• To build and sustain the necessary cross-systems collaborative infrastructure requires a shared commitment of both financial and human resources.

Summary

• Staff training and development need to be a key project component in project implementation and sustainability plans.
• Sufficient time, funding, and staff are required to develop collaborative performance monitoring and program evaluation capacity.

Summary

Grantees used their data to:
• Increase awareness about the complexity of families’ needs
• Communicate their programs’ effectiveness in producing positive family outcomes, and make the case for sustaining collaborative practice and integrated services.
Regional Partnership Grant Program: Enhanced Collaboration, Promising Results

Summary

- The RPG projects evolved into changed practice models that reached beyond the scope and duration of the RPG initiatives.
- Grantees stated increased collaboration has been the most important catalyst for improving services and shifting ideology on how best to serve families.

Conclusion

Considering the promising results reflected in the performance measurement of the RPG grants, the level of collaboration that most grantees achieved, and the extent to which most sites are sustaining their services and collaborative activities...

Conclusion

Through interagency partnerships and collaboration, the RPG Program:
- Enhanced the well-being of children
- Lead to safety and permanence for children
- Decreased or prevented out-of-home placements
- Improved the capacity of parents to care safely for their children

After RPG-I: What’s Next?
Regional Partnership Grant Program:
Enhanced Collaboration, Promising Results

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