


Sustainability of an EBT Within a Statewide System of Care Framework



FFT Functional Family Therapy

An evidence-based and systematic family-based model for working with at risk adolescents and their families

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FFT National Trainer*

SITE LEVEL SUSTAINABILITY

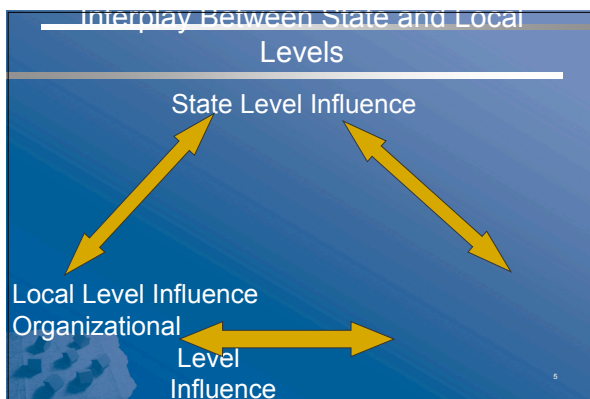
External Influence Factors	Organizational Components	Core Implementation Components	Possible Fidelity Outcomes	Possible Sustainability Outcomes
Enabling	Strong	Strong	→ High	Long Term
Enabling	Strong	Weak	→ Low/Medium	Medium Term
Enabling	Weak	Strong	→ High	Medium Term
Enabling	Weak	Weak	→ Low	Short Term
Hindering	Strong	Strong	→ High	Medium Term
Hindering	Strong	Weak	→ Low	Medium Term
Hindering	Weak	Strong	→ Low/Medium	Short Term
Hindering	Weak	Weak	→ Low	Short Term

STATE LEVEL SUSTAINABILITY

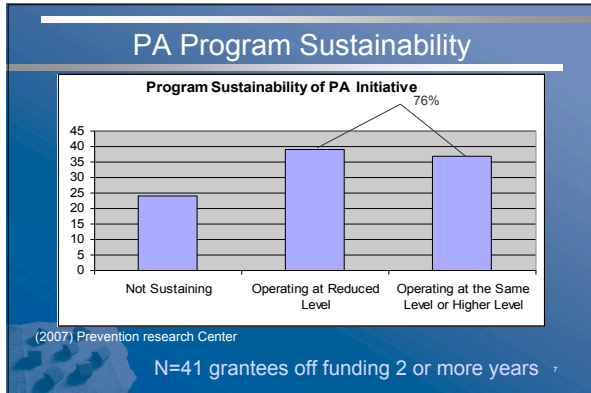
*Emphasize External Influence Factors: The Key to Sustainability of FFT in a Statewide Framework

*Organizational and Core Factors are critical, but are mostly monitored and maintained by FFT, LLC

- ### FFT External Influence Factors
- Support for evaluated programs -(State and Local)
 - Support for adequate referral numbers -(Local)
 - Systemic support for fidelity: -(State and Local)
 - **Sustainable funding strategies -(State and Local)**
 - Ongoing support for outcomes -(State and Local)



- ### Players in a Statewide System
- Statewide system is implemented by a "state or nationwide entity" PCCD and FFT through collaboration with:
- State FFT Coordinator: Creates and oversees infrastructure and QA/QI system (Who then collaborates with the following):
 - Statewide Stakeholders: Provides direction regarding statewide funding trends and needs OMHSAS/DPW
 - Local Stakeholders: Provides the vision of an EBP for local community
 - State FFT Supervisors: Clinical Consultants for the state supervised by a State Coordinator
 - Provider Agencies: Participates in the statewide project through an ongoing relationship with FFT



Historical Context of the PA Statewide System

1998- Implementation of a statewide adoption of the Blueprints for Violence Prevention

- *CTC Model: Community Risk and Protective Factors
- *PA Youth Surveys
- *Continuous Grant Opportunities (since 1999): State funding appropriated to create stable funding source
- *9 million in grant dollars committed to date

Proliferation of EBP in PA

Historical Context of the PA Statewide System

2002- Investment into Sustainability resulting in high profile for FFT in the State

- *Statewide Coordinator
- *Local Needs Assessed
- *State and Local trends shared

Statewide Project Functions

- Annual State FFT Replacement Training
- State Follow-Up Trainings
- Phase 2 Consultation with State Supervisor
- Transition to Phase 3
- Phase 3 Consultation

Statewide Project Functions

- Annual Externship
- Semi-Annual Site Supervisors and Administrators Meetings
- Annual State Conference for Sites, Local and State Representatives
- Technical and Implementation Assistance
- Site Certification Review

Historical Context of the PA Statewide System

2004/2005
PA Quality Assurance and Quality Improvement System is created to impact long term sustainability

Site Certification-drives system

- *Systemic support for fidelity
- *Ongoing support for outcomes
- *Site Level Assessment and Therapist Level Assessment (Informal and Formal Plans)

Historical Context of the PA Statewide System

2005-2006 Medical Assistance Realignment

PA DPW permits Medicaid reimbursement for FFT services. MA reimbursement depends upon FFT Certification thereby creating a continued need for a well-defined and targeted QA/QI system

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Historical Context of the PA Statewide System

Medical Assistance Realignment

Created a sustainable funding strategies = diversity of funding

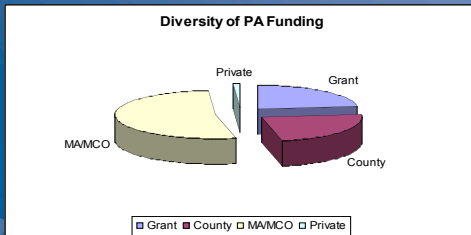
Requires a statewide infrastructure to work: how to meet the needs across the state?

- Increasing capacity (therapists and referrals)
- Increasing oversight of sites to uphold site certification
- Educating the state (DPW/OMHSAS) and local (MCOs) players on the model and costs
- Structuring FFT to meet MA requirements (ex. Treatment Plans)

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Key to Sustainability: Diversity of Funding

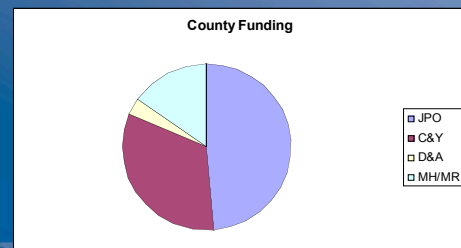
Diversity of PA Funding



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Key to Sustainability: Diversity of Funding

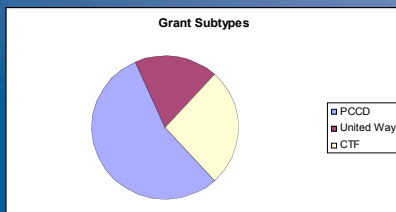
County Funding



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Key to Sustainability: Diversity of Funding

Grant Subtypes

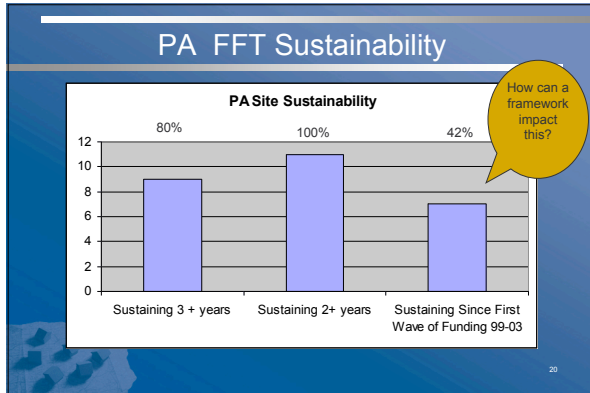


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Impact of MA Funding

- 80% of sites are on MA funding
- Per unit reimbursement ranging from \$19 to \$37
- Weekly cases rates at about \$215 per case
- Per event rates in the \$200s
- Increasing team size to meet referral sources needs:
 - 50% of the sites have added at least one therapist
- Increase in referral numbers:
 - 2006: 605 youth referred
 - 2007: 844 youth referred (more than half MA ref.)

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- ### Preventing Failure from a Statewide Perspective
- Earlier Site Certification
 - Planning for attrition
 - Emphasis on External Factors from early on
 - Emphasizing collaboration (with PCCD, with DPW)
 - Decrease dependence on grants and emphasize diversity of funding (2 year grants, vs. 4)

- ### Shared large scale dissemination traits
- Dedicated coordinator
 - Ongoing training for new therapists and for therapists that need additional help
 - On going supervisory support
 - Data based improvement planning (at therapist, team and system level)

- ### Shared large scale dissemination traits
- Administrative and clinical partnering at a larger oversight level
 - Multi system (and multi-level) advisory groups
 - Themes: strength based, collaborative, accountable, supportive
 - Creating a context for local ownership and expertise

- ### Operating FFT statewide systems
- Washington county and state collaborative
 - Washington State JRA FFT and FFP
 - Florida DJJ
 - New Mexico Child Youth and Families
 - Emerging FFT Systems
 - California (Cal Institute for MH)
 - Oregon OYA
 - Netherlands
 - In Planning
 - Hawaii

More Information:

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