



**Family Engagement Steering Committee**

**White Paper:**

**Recommendations for Increasing Families' Awareness of Resources; Enhancing Family Advocacy; and Strengthening Parent/Professional Partnerships in Ohio**

**September 2012**

**614-752-4044**

[www.fcf.ohio.gov](http://www.fcf.ohio.gov)

# OFCF Family Engagement Steering Committee White Paper

## Background

### Research

Beginning in 2008, Ohio Family and Children First (OFCF) Cabinet Council prioritized family engagement so to determine effective methods for strengthening family engagement in Ohio while also being cost effective. OFCF conducted interviews and focus groups with parents, parent associations, state leaders, and other key stakeholders across the state to assess current family engagement efforts. In addition, an inventory of each OFCF cabinet agency revealed the level of state investment in family engagement. Both the research and the inventory indicated Ohio is “rich” in resources to support families, but “poor” in coordination of such resources; thus, duplication and gaps exist. This is evidenced by parents, across Ohio, struggling to locate the right services and supports for their children and family. Oftentimes, the right services and supports exist, but parents are unable to navigate between systems to be connected.

Based on recommendations from the research, the OFCF Cabinet Council established the Family Engagement Steering Committee to begin strategic planning facilitated by the Ohio Department of Administrative Services from June 2009 through January 2010. The plan was shared with parent associations, advocates, and other key Ohio stakeholders for feedback and approval in March 2010. The plan was approved by the OFCF Cabinet Council in May 2010 and implementation began in June 2010.

### Strategic Intent

The Family Engagement Strategic Plan focused on addressing the lack of coordination among existing state and local family engagement efforts. The OFCF Family Engagement Steering Committee believes Ohio can be most effective for parents and professionals, by increasing the coordination and awareness of Ohio’s family engagement efforts.

### Purpose

- To align, coordinate, and/or consolidate parent/family engagement resources, policies, services, and efforts across state departments.
- To better engage and serve families.

### Goals

- Increase coordination among existing and new family involvement efforts to reduce duplication and increase the impact of existing and future efforts.
- Increase families’ awareness, access, and utilization of existing resources.

### Target Population

The target population is parents (mothers, fathers, extended families, military families, and other primary caregivers) with children who are prenatal through age 25. The terms “family” and “parent” are seen as interchangeable throughout this plan.

### Top Priorities

1. Increasing Families’ Awareness of Resources
2. Enhancing Family Advocacy
3. Strengthening Parent/Professional Partnerships

## 1. Increasing Families' Awareness of Resources

While this white paper will primarily focus on Enhancing Family Advocacy and Strengthening Parent/Professional Partnerships, much work has been accomplished by the Steering Committee to increase families' awareness of resources. The planning process determined that families and professionals need a universal, centralized website that contains information about issues affecting families; for children ages prenatal through 25; that connects families in similar situations or could help support them; and provides education about other supports available to meet their needs, and the needs of their children. A Website Sub-Committee worked to develop a statewide website in partnership with Ronald McDonald House of Cleveland. Ronald McDonald House of Cleveland was selected to be a private partner, as they currently were operating a similar website for families in Cuyahoga County. In October 2011, Red Treehouse ([www.RedTreehouse.org](http://www.RedTreehouse.org)) was launched.

The purpose of Red Treehouse is to increase families' and young adults' access to local, state, and national parent trainings, educational resources, supports and events. Red Treehouse can be used by professionals serving families to provide information and referrals to families based on their unique and multiple needs. In addition, professionals can use the site to access information and professional development opportunities related to family engagement. Red Treehouse allows state agencies to review and streamline resources and identify gaps in services and supports for families and young adults.



Red Treehouse connects a diverse and passionate community of families, young adults, professionals and organizations to:

- share information, knowledge and resources to help individuals from prenatal to young adulthood;
- discover answers to questions and concerns to meet needs and overcome challenges;
- make community connections and build support networks for help and encouragement;
- be a personal resource and reference tool for timely, reliable, easy-to-access information when needed; and
- find hope for today to look forward to tomorrow with greater confidence, support and expectation.

Ohio's financial support of Red Treehouse has included the following Departments: Aging, Developmental Disabilities, Education, Health, Job and Family Services, Mental Health, Youth Services, and the Ohio Children's Trust Fund. Red Treehouse will be launching its final regions this state fiscal year (completed by June 30, 2013).

### **Policy Recommendations**

1. Connect state efforts, services, and programs for children and families through Red Treehouse.
2. Link existing family resources to the Red Treehouse to reduce duplication.
3. Promote state, regional, local, and national events through Red Treehouse.

### **Funding Recommendations**

1. Identify funding support for continued operations of the Red Treehouse website. The state will co-own the website, with the Ronald McDonald House of Cleveland, by January 2013.
2. Identify additional partners, who could benefit from the website, and seek new supporters, such as businesses, foundations, and Children's Hospitals.

## 2. Enhancing Family Advocacy

### **Preface**

The Family Advocacy Sub-Committee was charged with enhancing family advocacy throughout Ohio. The research conducted in 2008 revealed that there are many family advocacy (parent advocacy) organizations in Ohio, but they do not connect to share resources and strengthen family advocacy efforts. This often leads to duplication of efforts, inconsistent support received by families, and/or families unable to access much needed support. In addition, Ohio has no uniform parent advocacy training curriculum that is shared across systems. Therefore, the skill level and approach of family advocacy varies greatly throughout the state.

The Sub-Committee has conducted intensive research leading to the following recommendations for enhancing family advocacy in Ohio: (1) creating a Family Advocacy Network; and (2) standardizing family advocacy training. The OFCF Family Engagement Steering Committee believes such recommendations would enhance family advocacy by increasing access to services, reducing duplication of efforts, and improving consistency of family advocacy. In fact, in a [2008 Informational Letter](#) from the New York State Office of Children and Family Services, it states that “parent advocate programs suggests these services not only enhance the well-being of those families served, but may also prove cost effective if children are able to be safely maintained in their own home or returned home sooner. These programs can also have related positive impacts...Overall, it appears that parent advocate programs can be a valuable resource in the delivery of child welfare services”.

Note: This section approaches family advocacy from a lifespan perspective and is not, specifically, limited to children and their families.

### **Recommendation One: Establish a Family Advocacy Network**

#### **Background**

Advocacy organizations throughout Ohio provide support to individuals and families that need help working with and/or navigating the public service systems in Ohio. This support includes:

Family Advocacy (Parent Advocacy): Providing support to educate and empower individuals or families to advocate for themselves.

Trained Family Advocates: Providing an advocate that attends meetings with individuals and/or families to assist them in understanding communications, obtaining services, and empowering them to advocate for themselves.

Families needing services of a trained advocate is one of the main requests to advocacy organizations. The need for this type of service is in high demand throughout Ohio. Currently, many agencies and organizations provide various advocacy services to individuals and families seeking assistance related to developmental disability, mental health, education, child protection and juvenile justice services. Many of these providers operate independent of each other to address individual and family needs across multiple service systems.

In the fall of 2011, the Ohio Family and Children First (OFCF), in conjunction with the Ohio Developmental Disabilities Council (ODDC) and the Department of Developmental Disabilities (DODD), engaged the Human Services Research Institute (HSRI) to design and administer the Ohio Family Advocacy Survey. The purpose of the survey was to understand the availability of family advocacy services across Ohio and the nature and availability of trained advocate programs.

Family advocacy programs provide critical services to individuals and families throughout Ohio. Trained advocates complement these services by assisting clients to access and navigate multiple systems related to education, disabilities, mental health, safety and other issues. Advocates also enhance the capacity of local service systems to address the complex needs of the people they serve. Results from the Ohio Family Advocacy Survey provide a snapshot of family advocacy services and describe characteristics of trained advocate programs across the state. Many of these programs serve similar populations, yet many operate in isolation from each other, though informal relationships exist.

As local agencies and organizations reported, Ohio's current economic climate presents many obstacles in the efforts to provide family advocacy services. Notably, state budget cuts to service organizations present significant challenges to obtaining qualified staff and maintaining program funding. As a result, community agencies and organizations are challenged to do more with less while maintaining the integrity of their services.

### **Findings**

The results of the Ohio Family Advocacy Survey (Attachment A) reveal both strengths and weaknesses of family advocacy programs that a cohesive statewide network could address:

- Family advocate programs attend to the needs of a wide range of target populations, with many programs serving more than one target population. A family advocacy network could ensure consistency in practices across populations and reduce duplication of efforts.
- Trained Advocate programs are utilized throughout the state to address complex needs and to support individuals and families to get what they need from their service systems. These advocates are recognized as an effective solution to addressing complex needs. Yet, findings reveal that many of these programs are unable to document program outcomes and costs. Since many funders are interested in supporting efforts that produce successful outcomes, such data is critical to program development and fundraising efforts. A family advocacy network could develop evaluation standards and methods to assess and enhance these types of programs.
- There is a recognized demand for services provided by trained advocates. About two-thirds of programs surveyed (62.5 percent; 30/48) report they receive three or more requests for specific services offered by trained Advocates per month. This amounts to at least 90 requests per month or about 1,100 requests per year. This demand for services offered by trained advocates could be addressed by a cohesive network of family advocacy service providers.
- There is considerable variance in training standards. Many programs require advocates to meet specific training requirements, while others do not. Training standards have an impact on the quality of services provided. A family advocacy network could share resources and expertise to develop training standards to improve the quality of services offered with appropriately trained advocates.
- While organizations with trained advocate programs report a demand for family advocacy services, respondents identified several barriers that interfere with the ability to meet this demand. Most frequently reported barriers are state budget cuts to services and lack of program resources. In the current economic climate, these issues are likely to continue. A family advocacy network could share expertise, pool resources and streamline processes to reduce duplication of efforts and increase efficiency. Organizations within this network could collaborate to pursue grants and other fundraising initiatives to increase service capacity.
- While some public agencies may hire family advocates, there is an inherent conflict of interest when these advocates work with families having difficulties with the same agency paying the advocate's salary. There may be a question as to whether these types of advocates are effective in helping and empowering families.

## **Policy Recommendations**

Given the results of the survey, the following recommendations are proposed to address the need for trained advocates in Ohio:

1. Create a consortium of agencies to develop a network of trained advocates in Ohio that would address the lifespan of family advocacy needs. This would include the main organizations that provide advocacy services and gathering their ideas and support for a network
2. Develop a common training curriculum and ongoing training for advocates
3. Develop a referral protocol for families to access advocates with an emphasis on serving the families most in need due to limited capacity
4. Develop a plan for increasing and expanding the network when greater capacity is available
5. The consortium should look at existing models (example: Parent Advocacy Connection which is funded through various state departments and fiscally administered by NAMI Ohio) as a basis for the network
6. Develop private-public partnership to fiscally support this network
7. Use the consortium to determine how to engage other organizations providing advocacy services with this network
8. Consider consolidating state departments funding for family advocacy into funding this single network
9. Research the possibility of a certification for family advocates for Ohio to adopt

An effective network will promote collaboration among members, increase community capacity to respond to individual and family needs, engage the individual at the grassroots level to advocate for systems improvement, and increase desired outcomes for each target population. Such outcomes may include improved social skills and school performance, family stability, independent living, community-based employment, and service systems that respond adequately to the needs of the people they are designed to serve. Ohio family advocacy programs and the individuals and families they serve would benefit from such a network. This concept is also being supported through the Interagency Workgroup on Autism recommendations.

## **Funding Options**

While little doubt remains about the effectiveness of trained family advocates, efforts to promote the expansion of family advocacy programs are often unsuccessful due to competing interests and limited available funding. As highlighted by the Ohio Family Advocacy Survey, some parent advocates are volunteers, some are paid a fee for their service and others are only paid a small stipend to cover their expenses. Given the amount of training and time involved in becoming a family advocate, some stipend and coverage for expenses should be provided to family advocates. Advocates should be provided any combination of stipend and/or mileage reimbursement that is individually flexible enough to cover expenses. Additionally, there are expenses associated with administration, training and oversight. Finding a consistent funding mechanism that maximizes resources is critical to the success of a cohesive Family Advocacy Network. There are several options to be explored to fund such a network:

### **1. State Funding Options:**

Currently, several state agencies (ie. ODH, ODODD, ODE, ODMH) provide funding for family advocates or family advocacy/empowerment. There is currently no coordination of these efforts or the funding from the different agencies. There would be a definite economy of scale, better oversight and better results if these different funding streams were combined or coordinated to fund a family advocacy network such as the one described herein.

### **2. Private Partnership Funding Options:**

In addition to state funding, there are a variety of private and non-profit agencies that are providing or

funding family advocates or similar services. These include:

- Children's Hospitals
- Non-Profit Disability Related Organizations
- Service Providers

As highlighted by the survey, these organizations often work in isolation and/or in competition with other services. Getting these different private entities to partner with the public sector on a cohesive family advocacy network would greatly expand the capacity and availability of trained family advocates.

### 3. Medicaid Option:

Another option for funding is looking at family advocate services as a Medicaid billable service similar to the way that "peer support specialists" are part of the Medicaid service array in states such as North Carolina and Pennsylvania. The advantage of making parent advocacy a Medicaid billable service is obvious -- the federal government picks up a little over 60% of the cost of the service, thereby freeing up state and local resources to expand such programs. There are, however, disadvantages of going this route that must be explored such as required services, training, and expectations of this role. While certainly an option, there would need to be careful research on the pros and cons of utilizing Medicaid to fund trained family advocacy services.

## **Recommendation Two: Adopt a Universal Family Advocacy Training Program**

### **Background**

As indicated at the beginning of this priority section, trained family advocacy provides consistency and assurance that all families accessing family advocates will receive similar services and supports. This could be accomplished by Ohio adopting one cross-system family advocacy training program that would address the key core competencies for family advocates as outlined below. It would be recommended that all organizations connected to the Family Advocacy Network would use the one adopted curriculum.

### **Findings**

The Ohio Family Advocacy Survey revealed some important data that Ohio needs one multi-systems training program for all family advocacy services.

- 70.9% (117/165 responses) of those surveyed provide family advocacy services across multiple systems.
- Only half of those respondents also have trained advocate programs.
  - About a third of trained advocate programs use a formal family advocacy curricula
- 55% identified collaborating across service systems as a barrier

The Sub-Committee researched competencies that would be desired in an Ohio adopted cross-system family advocate training program. The recommended core competencies are as follows:

1. Understanding:
  - a. Systems
    - i. External factors that affect families and systems (micro, meso, macro)
  - b. Communities
  - c. Budgeting and funding
  - d. Resources and where to find them
2. Knowing how to define problems and solutions
  - a. Prioritizing
3. Understanding program evaluation

- a. Helping parents evaluate programs and services
- b. Quality
- c. Evidence based
4. Learning how to build support
  - a. Positive relationships
  - b. Natural supports
5. Valuing the roles of families/individuals
  - a. Viewing parents as partners and being able to leverage the strength of parents
  - b. Taking into consideration the role of the individual in the process
  - c. Empowerment
6. Cultural Diversity
7. Ethical/Moral issues
  - a. Confidentiality
  - b. Boundary issues
8. Liability and legal rights
9. Advocacy Techniques
  - a. Conflict mediation
  - b. Roles and responsibilities
  - c. Group process and dynamics
  - d. Communication skills – body language, listening, public speaking
  - e. Documentation of work done by advocate
10. Developing Documentation
  - a. Importance of developing a system for families

The committee completed a cursory review of the following existing curricula: Parent Advocacy Connection-in Ohio; Vanderbilt's Volunteer Advocacy Project; Special Education Advocacy Training program (SEAT); Connecticut's Parent Leadership Training Institute (PLTI); and Peer Support Partners. The committee's review revealed that Ohio's Parent Advocacy Connection (PAC) training program most closely aligns with the above desired core competencies (Attachment B). Further review needs to be conducted on the four curricula identified by the Parent-Professional Sub-Committee (Attachment G) and determine if any align with the desired core competencies.

PAC's curriculum contains a one-year training program of 40 hours of core curriculum with 40-50 additional hours of elective training designed to support the geographic needs in which the advocate will be assigned. The 40 core hours contain "systems" modules, only allowing an advocate to provide services in systems in which they have completed that module.

### **Another Consideration to Explore**

The Federation of Families for Children's Mental Health is leading a national effort, with input from experts in Ohio, to develop a certification process for "Certified Parent Support Providers". According to FFCMH, the purpose of establishing national standards is "to ensure that people employed in any state in this field, meet high standards of performance." Other reasons listed on the national organization's website regarding the need for national certification include:

- Endorses continuing professional development and credibility,
- Provides recognition of specialty certification such as Wraparound, youth-in-transition to adulthood, cognitive disabilities.

In our zeal to identify funding sources, proponents of parent advocacy need to be careful not to mischaracterize the service that is being provided. References to "professional development" and "specialty certification" that give the program the appearance of being a professionally delivered service (something

Medicaid may view as desirable) could tarnish the image of a parent advocate being “someone who has walked a mile in my shoes”, which is the foundation of the parent advocacy movement.

Ohio has much to be proud of when it comes to our parent advocacy programs. Together, proponents need to deliver a unified message to funders that these programs are worthy of investment. At the same time we must resist any effort to compromise the integrity of those programs for the sake of much needed dollars.

### **Policy Recommendations**

1. Ohio should adopt a universal cross-system family advocacy training for all family advocacy organizations to use, especially those that could be connected with the Family Advocacy Network.
2. Enhance the PAC curriculum that already exists to better address such areas as public speaking; understanding external factors that affect systems; and evaluating the impact of the advocacy services provided.
3. Have the training program (or at least the curriculum) accessible via the Red Treehouse statewide website.
4. Further explore the impact of the Certification of Parent Support Providers.

### **Funding Options**

1. Continue the support of the Parent Advocacy Connection program through the pooled funding of the Ohio Departments of Job and Family Services, Mental Health, Alcohol and Drug Addiction Services, Developmental Disabilities, and Youth Services. A portion of the funding supports training development therefore, PAC could strengthen its curriculum to incorporate all necessary core competencies as outlined in this section.
2. Ensure the Network has funding to support training future family advocates and broadening trained family advocates competencies. This funding could derive from the options explored in the first recommendation of this section – state and private partnerships.

### 3. Strengthening Parent-Professional Partnerships

#### **Preface**

The Parent-Professional Partnerships Subcommittee was charged with strengthening the partnership between parents and professionals. The feedback from the family focus groups revealed that parents need to be equal partners at the table with professionals. The effectiveness of state funded services and supports are compromised when families are not equal partners in the design and implementation of needed interventions. Professionals must utilize the best practices of collaboration with parental expertise to improve outcomes for Ohio's children and families. Research shows the primary vehicle to accomplish this charge is through effective research-based family engagement and parent leadership trainings. However, research also shows that state funds a variety of models for family engagement, parent leadership, and parent professional partnerships trainings or programs which leads to duplication or inconsistency in statewide approaches.

The Parent-Professional Subcommittee chose to focus on the following objectives:

1. Inventory existing family engagement, parent leadership, and family/professional partnership trainings
2. Identify additional research-based training modules for family engagement, parent leadership, and family/professional partnerships

From January to December 2011 the subcommittee embarked on the development, distribution, and analysis of a Family Friendliness Survey (Attachment C) and Family Engagement Training Survey (Attachment D). The purpose of the surveys was to provide the Family Engagement Steering Committee with an initial overview of existing family engagement training programs and to identify possible training needs for service providers in the area of family engagement.

The volume of survey responses demonstrates that there is a high level of interest in family engagement among Ohio's child and family service system; including, but not limited to, social service agencies and schools. However, the lack of uniformity in the design, scope, and evaluation of existing programs highlights the need for more rigorous analysis of local programs. An examination of outcome data from successful local programs would provide a foundation for the widespread dissemination (and replication) of best practices across all training categories and service agencies.

The results of the Family Friendliness Survey as provided in the Results of the Family Friendliness Survey of Ohio's Service Providers (Attachment E) demonstrated the potential usefulness of this type of tool, but also provided suggestions about how the tool could be revised and improved. The suggested changes may make the tool more useful in obtaining the desired information from both professionals and consumers.

In order to ensure the collection of a large number of responses, the surveys were widely and freely disseminated across many different agencies, service communities, schools, and juvenile justice system partners. Both surveys were designed by subcommittee members and should not be considered rigorous enough to meet empirical standards associated with scientifically-based qualitative or quantitative research. Considering this, the Subcommittee believes the data and subsequent recommendations provide the Family Engagement Steering Committee with a unique perspective as it explores strategies to enhance family engagement throughout Ohio.

## **Policy Recommendations**

### **Recommendation One: Develop Greater Consensus on the Type of Training Programs that Support Family Engagement**

#### **Background**

As part of the survey design process, the Subcommittee defined four training categories: parent advocacy; parent leadership; family engagement training for service providers; and parent professional partnership training. Less than 20% of the 155 responses to the Family Engagement Training Survey met the broad definitions established by the Subcommittee for each training category.

#### **Policy Recommendation**

1. The state needs to adopt clearly defined criteria that separate the various training categories so to assist policy makers, parents, and local leaders with identifying training needs, developing policy solutions, and prioritizing fiscal support. A summary of the survey results is provided in the Parent/Professional Sub-Committee Training Survey Results (Attachment F).

#### **Funding Recommendation**

1. Align, coordinate, or consolidate state departments' funding related to family engagement, parent leadership, and parent professional trainings into one line item that would fund evidence based trainings for families and professionals across systems.

### **Recommendation Two: Identify and Disseminate Information about Promising Practices and Evidence Based Training Models that Support Family Engagement**

#### **Background**

A lack of programs with an evaluation component makes it difficult to move toward a more data informed approach to providing family engagement training. Only one-third of respondents reported that their program was aligned with an evidence based model or best practice.

The Subcommittee researched national Family Engagement Training Models that would align with the four training categories as defined by the Subcommittee (Parent Advocacy; Parent Leadership; Family Engagement; and Parent Professional Partnership). The Subcommittee searched for models that: (1) met the criteria established for each training category; (2) had a strong research base supporting positive outcomes; and (3) had been broadly replicated with consistent results.

The ability to replicate a training model from one geographic area to another across diverse populations, while maintaining fidelity, was an important consideration in our research. Maintaining fidelity with minimal adaptations is critical both for achieving effective outcomes and for taking initiatives to scale. The Subcommittee looked for innovative policy and practice approaches that included principles of:

1. Valuing and strengthening family engagement;
2. Encouraging partnership and family leadership roles across the community continuum;
3. Supporting, reinforcing, and respecting involved families; and,
4. Empowering families to grow into meaningful roles in the transformation of their schools and communities.

The research resulted in several models, at least one of which has already been implemented in areas of Ohio, which matched the criteria established.

### **Policy Recommendation**

1. The Subcommittee recommends that the state consider these training models and encourage broad replication in Ohio. The national parent engagement training models recommended are included in the Parent Engagement National Training Chart (Attachment G).

### **Funding Recommendation**

1. Align, coordinate, or consolidate state departments' funding related to family engagement, parent leadership, and parent professional trainings into one line item. Use this consolidated line item to fund at least one of the researched national parent engagement training models statewide as identified in Attachment G.

### **Recommendation Three: Encourage the Incorporation of Family Engagement Training into Undergraduate and Graduate Degree Programs**

#### **Background**

Research by the Harvard Family Research Center and numerous other institutions of higher learning indicates that the implementation of effective family engagement strategies improves consumer outcomes. Unfortunately, most professionals do not receive significant training on effective family engagement during their undergraduate or graduate degree programs.

#### **Policy Recommendation**

1. Professionals entering human service fields should have at least one semester of coursework on the application of family engagement strategies and their impact on consumer success.

#### **Funding Recommendation**

1. The state would need to work with the institutes of higher education to determine the cost of adding one semester of coursework related to effective family engagement strategies. However, pre-service training should reduce professional development costs for organizations and provide a solid foundation for practitioners as they enter their prospective fields.

### **Recommendation Four: Incorporate the Regular Use of a Family Friendliness Survey Tool in Ohio's System of Care**

#### **Background**

Several years ago, the Family Support Council with a grant from the Ohio Developmental Disabilities Council developed a family friendliness survey. The results can be used by agencies that want to strengthen their family engagement approaches. The Subcommittee reviewed the survey and updated it with permission from the Ohio Developmental Disabilities Council in 2011. The survey was transferred to Survey Monkey and the link was sent out to various local agencies (children's services, developmental disabilities, juvenile justice, mental health, etc.) to complete. To date, 450 survey responses have been received. The survey may be used by any agency that would like to improve the family friendliness of its services. The survey is still available on Survey Monkey at the following link: <http://www.surveymonkey.com/s/PLPDVD6>.

#### **Policy Recommendations**

1. The State should officially recommend that all state agencies encourage service providers to implement tools to measure the "family friendliness" of provider practices.
2. Agencies should be encouraged by the State to use this type of tool as an element of their strategic

planning or continuous improvement process. This form of feedback can provide a valuable perspective on how services are being perceived and received.

### **Funding Recommendation**

1. The survey is available and free for any agency to use, therefore, there is no cost associated with this recommendation.

### **Recommendation Five: Incorporate the Principles of Family Engagement at All State Sponsored Conferences**

#### **Background**

The Family Engagement Steering Committee was charged with identifying opportunities to align, coordinate, and/or consolidate parent/family engagement resources, policies, services, and efforts across state departments. From the research the Steering Committee conducted, it revealed that quite a few of the OFCF Cabinet Agencies sponsor statewide conferences for professionals and consumers. Therefore, these state agencies could further advance family engagement by including such evidence-based trainings in their own sponsored or coordinated conferences.

#### **Policy Recommendation**

1. State agencies should incorporate family engagement training into statewide conferences sponsored or coordinated by any state agency that serves families. Trainings offered should align with those identified as effective based on the research conducted by the Subcommittee.

#### **Funding Recommendation**

1. Since the state agencies are already sponsoring or coordinating the conference, there would be minimal to no cost to implement this recommendation.

#### **Acknowledgement**

The Subcommittee would like to thank Bowling Green State University's Center for Excellence for their gracious support and preliminary analysis of the Family Engagement Training Survey data. BGSU further supported the subcommittee by uploading both surveys to Survey Monkey and downloading data into a format that could be utilized by the subcommittee for analysis. Additional thanks goes to the Supreme Court of Ohio for drafting the Family Friendliness Survey summary. Without the support of both organizations this work would not have been possible.

## Summary of Policy and Funding Recommendations

In summary, the White Paper is recommending that Ohio consolidate state level investments in family advocacy, engagement, leadership, and professional development into one line item that would then be used to enhance family advocacy through the creation of a Family Advocacy Network (outside state government); endorse the training curriculum for family advocacy for all organizations connected to the network; invest in evidence based trainings for parent leadership, family engagement, and parent-professional partnerships; and continue the support and promotion of the Red Treehouse to increase families' awareness of resources.

### **Priority One: Increasing Family Awareness of Resources**

#### Policy Recommendations

1. Connect state efforts, services, and programs for children and families through Red Treehouse.
2. Link existing family resources to others to reduce duplication.
3. Promote regional events through Red Treehouse.

#### Funding Recommendations

1. Identify funding support for continued operations of the Red Treehouse website. The state will co-own the website, with the Ronald McDonald House of Cleveland, by January 2013.
2. Identify additional partners, who could benefit from the website, and seek new supporters, such as businesses, foundations, and Children's Hospitals.

### **Priority Two: Enhancing Family Advocacy**

#### Policy Recommendations

1. Create a consortium of agencies and to develop a network of trained advocates in Ohio that would address the lifespan of family advocacy needs. This would include the main organizations that do provide advocacy services and gathering their ideas and support for a network
2. Develop a common training curriculum and ongoing training for advocates
3. Develop a referral protocol for families to access advocates with an emphasis on serving the families most in need due to limited capacity
4. Develop a plan for increasing and expanding the network when greater capacity is available
5. The consortium should look at existing models (example: Parent Advocacy Connection which is funded through various state departments and fiscally administered by NAMI-Ohio) as a basis for the network.
6. Develop private-public partnership to fiscally support this network
7. Use the consortium to determine how to engage other organizations providing advocacy services with this network
8. Consider consolidating state departments funding for family advocacy into funding this single network
9. Research the possibility of a certification for family advocates for Ohio to adopt
10. Ohio should adopt a universal cross-system family advocacy training for all family advocacy organizations to use, especially those that could be connected with the Family Advocacy Network.
11. Enhance the PAC curriculum that already exists to better address such areas as public speaking; understanding external factors that affect systems; and evaluating the impact of the advocacy services provided.
12. Have the training program (or at least the curriculum) accessible via the Red Treehouse statewide website.
13. Further explore the impact of the Certification of Parent Support Providers.

## Funding Options

1. State Funding Options for the Family Advocacy Network: Currently, several state agencies (ie. ODH, ODODD, ODE, ODMH) provide funding for family advocates or family advocacy/empowerment. There is currently no coordination of these efforts or the funding from the different agencies. There would be a definite economy of scale, better oversight and better results if these different funding streams were combined or coordinated to fund a family advocacy network such as the one described herein.
2. Private Partnership Funding Options for the Family Advocacy Network: In addition to state funding, there are a variety of private and non-profit agencies that are providing or funding family advocates or similar services. These options include Children's Hospitals, Non-Profit Disability Related Organizations, and Service Providers.
3. Medicaid Option for the Family Advocacy Network: Another option for funding is looking at family advocate services a Medicaid billable service similar to the way that "peer support specialists" are part of the Medicaid service array in states such as North Carolina and Pennsylvania. The advantage of making parent advocacy a Medicaid billable service is obvious -- the federal government picks up a little over 60% of the cost of the service, thereby freeing up state and local resources to expand such programs. There are, however, disadvantages of going this route that must be explored such as required services, training, and expectations of this role. While certainly an option, there would need to be careful research on the pros and cons of utilizing Medicaid to fund trained family advocacy services.
4. Continue the support of the Parent Advocacy Connection program through the pooled funding of the Ohio Departments of Job and Family Services, Mental Health, Alcohol and Drug Addiction Services, Developmental Disabilities, and Youth Services. A portion of the funding supports training development therefore, PAC could strengthen its curriculum to incorporate all necessary core competencies as outlined in this section.
5. Ensure the Network has funding to support training future family advocates and broadening trained family advocates competencies. This funding could derive from the options explored in the first recommendation of this section – state and private partnerships.

## **Priority Three: Strengthening Parent-Professional Partnerships**

### Policy Recommendations

1. The state needs to adopt clearly defined criteria that separate the various training categories so to assist policy makers, parents, and local leaders with identifying training needs, developing policy solutions, and prioritizing fiscal support. A summary of the survey results is provided in the Parent/Professional Sub-Committee Training Survey Results (Attachment G).
2. The Subcommittee recommends that the state consider these training models and encourage broad replication in Ohio. The national parent engagement training models recommended are included in the Parent Engagement National Training Chart (Attachment G).
3. Professionals entering human service fields should have at least one semester of coursework on the application of family engagement strategies and their impact on consumer success.
4. The State should officially recommend that all state agencies encourage service providers to implement tools to measure the "family friendliness" of provider practices.
5. Agencies should be encouraged by the State to use this type of tool as an element of their strategic planning or continuous improvement process. This form of feedback can provide a valuable perspective on how services are being perceived and received.
6. State agencies should incorporate family engagement training into statewide conferences sponsored or coordinated by any state agency that serves families. Trainings offered should align with those

identified as effective based on the research conducted by the Subcommittee.

#### Funding Recommendations

1. Align, coordinate, or consolidate state departments' funding related to family engagement, parent leadership, and parent professional trainings into one line item that would fund evidence based trainings for families and professionals across systems.
2. Align, coordinate, or consolidate state departments' funding related to family engagement, parent leadership, and parent professional trainings into one line item. Use this consolidated line item to fund at least one of the researched national parent engagement training models statewide as identified in Attachment F.
3. The state would need to work with the institutes of higher education to determine the cost of adding one semester of coursework related to effective family engagement strategies. However, pre-service training should reduce professional development costs for organizations and provide a solid foundation for practitioners as they enter their prospective fields.

\*Attachments A-G noted in the White Paper are available on OFCF's website at:

<http://www.fcf.ohio.gov/initiatives/family-engagement.dot>

## Family Engagement Steering Committee Members

This very active Steering Committee met from June 2009 – September 2012. The Steering Committee would meet quarterly, whereas the three sub-committees would meet monthly or as needed. Over the course of the four years, twelve state agencies (including boards and commissions), twenty-five parents, and thirty-two external stakeholder groups including associations, advocacy groups, local government entities, and non-profit organizations participated in either the needs assessment research, strategic planning, and/or implementation. OFCF extends sincere thanks to everyone that has been involved since 2009.

Over the three years, members who have left positions were often replaced by another representative. The below list reflects the membership of the Steering Committee over the past two years.

Krista Allison

Amy Armstrong, *Action for Children*

Kathy Arnold, *Ohio Department of Health*

Kathy Bachmann

Diane Bennett, *Action for Children*

Sue Bitsko, *Consultant*

Sue Bobson, *Action for Children*

Barbara Boone, *Ohio Department of Education*

Tanya Braden, *State Support Team, Region 1*

Peg Burns, *The Ohio Council for Behavioral Health and Family Services Providers*

Joyce Calland, *Ohio Family and Children First*

Sam Chapman, *Ohio Department of Health*

Marjorie Cook, *Ohio Federation for Children's Mental Health*

Joyce Dennis, *Parent*

Elisa Dixon, *Parent*

Patty Dovell, *Family Voices*

Marissa Doyle, *Supreme Court of Ohio*

Amy Eaton, *Ohio Department of Job and Family Services*

Scotte Elliott, *Parent*

Dot Erickson, *Ohio Family Care Association*

Karen Ezirim, *Parent*

Linda Garrick

Wendy Grove, *Ohio Department of Health*

Glenn Harris, *Parent*

Pamela Harris, *Parent Advocacy Connection*

Steve Hanson, *Supreme Court of Ohio*

Esther Hawkins, *Parent Advocacy Connection*

Kim Hettel, *Governor's Office of Faith Based and*

*Community Initiatives*

Janice Houchins, *Stark County Family Council*

Yvonne Hunnicutt

Jill Huynh, *Beech Acres Parenting Center*

Vernon Jackson, *Parent*

Betsy Johnson, *NAMI-Ohio*

Cathy Keltner, *Parent*

Teresa King

Linda Kresnye, *Ronald McDonald House, Cleveland*

Teresa Lampl, *Ohio Council of Behavioral Health & Family Services Providers*

Carol Lichtenwalter

Lisa Mack, *Ohio PTA*

Mozelle Mackey, *Ohio Department of Aging*

Rob Manning, *Ohio Department of Youth Services*

Peggy Martin, *Ohio Department of Developmental Disabilities*

Cheryl Mays, *Neighborhood Leadership Institute*

Pat McCollum, *Parent Advocacy Connection*

Shawn McElroy, *Shelby County Education Service Center*

Mary Murray, *Bowling Green State University*

Kathleen Nichols, *Ohio Attorney General*

Debbie Nixon-Hughes, *Ohio Department of Mental Health*

Melinda Norman, *Ohio Department of Alcohol and Drug Addiction Services*

Sue Owen, *Ohio PTA*

Donna Owens, *Ohio Center for Autism and Low Incidence*

Tammy Payton, *Ohio Family and Children First*

Melissa Poole, *PAC of Stark County*  
Alisa Powell, *Ronald McDonald House, Cleveland*  
Juanita Ray, *Parent Advocacy Connection*  
Rose Reed, *Ohio Rehabilitation Services Commission*  
Teresa Reed-McGlashan, *Ohio Family and Children First*  
June Rich, *Parent*  
Kay Rietz  
Suzanne Robinson, *NAMI-Ohio*  
Tracy Robinson  
Melissa Ross, *Center for Learning Excellence*  
Kristen Rost, *Ohio Children's Trust Fund*  
Cathy Ruiz, *Western Buckeye ESC*  
Ruth Satterfield  
Angela Sausser Short, *Ohio Family and Children First*  
Angela Schoepflin, *Parent Advocacy Connection*  
Don Slocum, *Neighborhood Leadership Institute*  
Sarah Smitley, *Parent Advocacy Connection*  
Monique Sparks, *Neighborhood Leadership Institute*  
Jean Stevens, *Guernsey County Juvenile Court*  
Amy Swanson, *Voices for Ohio's Children*  
Hannah Thomas, *Ohio Department of Youth Services*  
Debbie Tidwell, *Ohio PTA*  
Jennifer Vargo, *Ohio Department of Education*  
Karen Wagenbrenner, *Parent*  
Kim Weimer, *Ohio Department of Health*  
Rebecca Wheelersburg, *Scioto County FCFC*  
Sue Williams, *Ohio Department of Job and Family Services*  
Betty Willis, *Parent*  
Barbara Yavorcik, *Autism Society of Ohio*