



Family First Program: Intensive In-Home Treatment

Description: The Family First Program focuses on families that are struggling to raise children who have had adverse childhood experiences, children who have recently come out of treatment and need to be integrated back into the family and community, and/or families who need help supporting their children in long-term recovery. Family First is an in-home therapy program that guides parents in making their home a safe and secure place, increases family functioning, and helps the child to build trust and stability. The program utilizes family therapy in conjunction with the Strengthening Families approach and the protective factors framework, as well as a multidisciplinary approach to encourage families towards resiliency and healthy functioning in the home and community. Intensive in-home family therapy and multidisciplinary therapy is considered to be the highest level of effective, evidenced-based treatment for at-risk youth and children with adverse childhood experiences.

The Goals: Goals are based on the strengthening families' five protective factors that promote healthy family functioning and strong attachments.

- **Build strong social connections** through creating a safe environment in the home for the parents, for siblings, and for the identified child. Help the family to repair and reconstruct broken family interactions and areas of trust. A new foundation is placed for the child and family to build healthy, sustained relationships with people, institutions, the community, or a force greater than oneself.
- **Build concrete support** by helping the family to utilize and also give back to community services and in community involvement. Identifying, seeking, accessing, advocating for, and receiving needed adult, child, and family services; receiving a quality of service designed to preserve parents' dignity and promote healthy development.
- **Build knowledge of parenting and child development** through empowering the adults to understand and implement structure and nurture while rebuilding strong attachments. Helping parents to utilize appropriate best parenting practice that also help the child to control themselves in the home and in the community.
- **Build social emotional competency for family stability.** Help provide the child with a safe home and teaching the family members to interact positively with one another and others in their social network. Help the child to value others' feelings as well as identify their own emotional awareness. Teaching the child to form close and secure adult and peer relationships, and to experience, regulate, and express emotions.

- **Build parental resilience** to manage general life and parenting stress and functioning when faced with stressors, challenges, or adversity; the outcome is positive change and growth.

Interventions Used: Parenting skills in avoiding and stopping power struggles, de-escalation with aggressive and angry family members, and positive parenting support with additional skills in creating and holding boundaries are taught throughout the program. Increase knowledge about trauma and how to create a safe and stable home through a positive parenting approach. Social skills and appropriate understanding of conflict resolution are taught in the home environment. As the family begins to understand their family patterns they also uncover conditions that might contribute to the child's unwanted behavior and parents are taught to support the child and other family members and work proactively.

Implementation :

- Train parents, care providers and caring adults in trauma-informed approaches.
- Validate and encourage the family as a whole to work toward resilience and future goals.
- Work with parents to be steadfast in providing 100% unwavering commitment to supervision and involvement.
- Use an intensive home-based model created to bring safety and healing to families (Family First Plan).
- Provide family counseling to bring greater cohesiveness in the home and health to family.
- Provide wrap-around services so that child and the family are supported in the community through our community-based therapy.

Training Standards: In-home family therapist must have be master-level counselor or licensed professional counselors or licensed clinical social workers with a background and knowledge in family therapy with a systemic family approach. Our in-home workers must have a bachelor's degree in social work, psychology, juvenile justice or related field. Staff will have knowledge of curriculum and ongoing education as mandated by the licensing board and organizations we contract with.

EBPP Criteria: Sources of Best Practice endorsement for in-home family therapy include Society of Clinical Child & Adolescent Psychology, Effective Child Therapy, OJJDP.

Rationale: Family First Plan adheres to the science of resilience and utilizes a Strengthening Family lens that identifies factors that help children and families to achieve positive outcomes and providing supportive adult-child relationships as a foundations for hope and stability. In-home family therapy is EBP and highly effective in working with at-risk youth

Our execution strategy incorporates proven methodologies, extremely qualified personnel, and a highly responsive approach to managing deliverables. Following is a description of our project methods, including how the project will be developed, a proposed timeline of events, and reasons for why we suggest developing the project as described.

Timeline for Execution: Key project dates are outlined below. Dates are best-guess estimates and are subject to change until a contract is executed. This timeline is based on the child coming home from treatment center. Adjustments can be made according to family needs.

Description	Start Date	End Date	Duration
Training for the Parents and team members	2-4 weeks before child comes home	Days before child re-entry to home	8-10 hours
Prep for child to return home. Making posters, setting up schedule, school meetings, and in-home readiness for siblings and parents	During 2 week of prep time after training		2-4 Hours
Start Date for family: home visit from counselors to kick off the program	2 or 3 weeks from initial training		
Level one: 24/7 parents are maintaining 3 foot rule and working on goals with the child.	Day of the kick off	At least 30 days later	30-90 days
Transition to wrap-around services: therapy services, community-based mentoring, help with moving on to less restrictive levels	Once on probation	Agreed by team	3-6 months

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