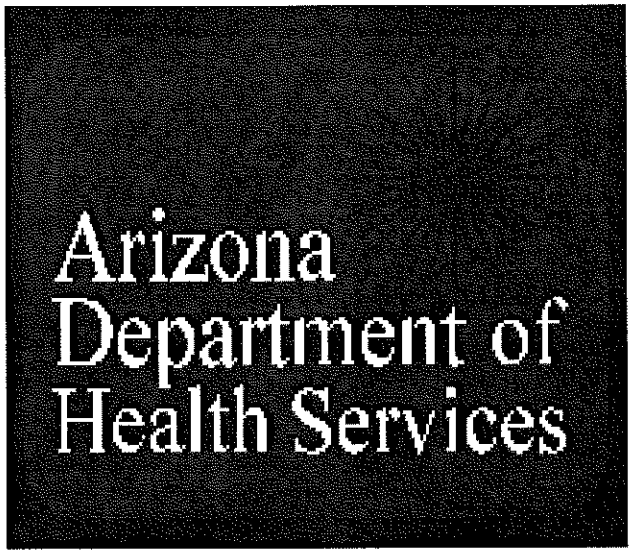
DBHS Practice Protocol

Family and Youth Involvement in the Children's Behavioral Health System



Developed by the
Arizona Department of Health Services
Division of Behavioral Health Services
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Title
Family and Youth Involvement in the Children's Behavioral Health System

Goal/What Do We Want to Achieve Through the Use of this Protocol?
- To define quality family involvement as a necessary and effective component to Arizona's behavioral health system.
- To define roles that are uniquely intended for parents/caregivers of children receiving services; youth and young adults who receive or have received services.
- To describe the roles that family-run organizations play in optimizing family involvement and roles for parents/caregivers, youth and young adults who receive or have received services.
- To set the expectation for culturally and linguistically responsive practice
- To present a wide array of family involvement opportunities
- To prepare the Behavioral Health System to build and sustain the infrastructure and agency culture to support and involve family members at all levels of the system

Target Audience
T/RBHA and their subcontracted network and provider agency behavioral health staff, State partner agencies, family organizations and advocacy groups.

Target Population(s)
All TXIX and TXXI children, youth and young adults, under the age of 21, enrolled in the Tribal and Regional Behavioral Health Authority (T/RBHA) systems, and their families.

Attachments

Attachment 1: Youth Partner Sample Job Description

Attachment 2: Family Support Partner Sample Job Description

Attachment 3: Parent Partner Sample Job Description

Definitions
Emerging Family Leaders

Family Involvement

Family Leaders

Family Member

Family–Driven Care

Family-Professional Partnerships

Family-Run Organizations

Parent-Delivered Support or Service

Youth/Young Adult-Delivered Support

Background

Arizona holds a distinction in the United States for promoting various family roles in relation to the children's behavioral health system. The involvement of families is credited as making a significant contribution in improving the service system. This document will present a review of the various roles that families may and do play within the children's behavioral health system.

This document is organized around three categories of roles for families:

- First, families are encouraged and supported to participate as active and respected members of their child's Child and Family Team (CFT). In that capacity, families influence the development and implementation of a service plan that will respond to the unique strengths and needs of the child and family.
- Second, families participate in various activities that influence the local, regional and state service system. This type of activity is commonly called "Family Involvement". In Arizona, families are afforded a range of opportunities to offer their unique insight and experience to the development and implementation of programs and policy, as well as various other advisory activities on Boards, advisory committees and policy making groups that work to improve children's behavioral health services.
- Third, family members may work in a professional capacity in the children's behavioral health system. In this capacity, they offer a special type of support (peer-delivered) to the families and children that they serve. Further, families who work in the system may also influence the service system in which they are a part by contributing the family perspective to the service environment.

This protocol will provide guidance on the scope and quality of family involvement and family support in the children's behavioral health system. It addresses the types of roles families play when they are employed, volunteer or compensated in other ways such as stipends or contracts for project work and the elements that help families become effective in these roles.

Recommended Process/Procedures

This document discusses how families can be supported successfully in their assumption of the general roles listed above. The following is a more detailed listing of roles for families in the Arizona Children's Behavioral Health System:

Family Participation in Service Planning

- The First Arizona Principle, *Collaboration with the Child and Family* is the foundation for the mandate that all children served by the children's behavioral health system will have a Child and Family Team. Through the team process, parents/caregivers and youth are treated as full partners in the planning, delivery and evaluation of services. The team process is most effective when the family is welcomed (access), empowered to have a strong voice (voice) and has a thorough sense of commitment to the plan that they have created (ownership). Even though this participation is only on an individual basis, it is an example of family involvement, which brings about quality service for the child and family. Effective CFTs have a broader system impact by serving as an example for other CFTs.
- Through the CFT process with respect to service planning, families must be able to access services tailored to their unique needs and circumstances based on the families' individual culture which goes beyond race and ethnicity. They should not be expected to fit their needs into a list of categorical services. Special care and attention needs to be paid to the families' readiness to receive potential services that are being offered, and should be explored before putting services and supports in place.
- The CFT must honor and give careful consideration and weight to the family's preference to end one service and/or request another. Families should feel free to express their concerns without consequences

Challenges or considerations for this family role: Historically in our behavioral health system the implementation of the first of the 12 Principles, *collaboration with the child and family*, has often not been as full and complete as desired. Even now, while recognizing the benefits of this collaboration, our system sometimes struggles as professionals learn to embrace this still relatively new approach. This is for a variety of reasons:

- Agency staff members, including supervisors and leadership, may vary in their understanding of what constitutes true collaboration between professionals and families. Although a basic tenant for the children's behavioral health system, this Principle is still not uniformly taught in educational settings where behavioral health staff receive their professional training. Where there is not uniform understanding regarding the principle of partnership with the parent and child, the experience of the parent, child and team can suffer.
- Families vary in their capacity to know what they need and to communicate these needs effectively. This can happen for a variety of reasons. The youth's challenges can be complex. The family situation can also be complex. In addition, the environment that the family comes from (family, community, work situation, school, etc.) can create an unfair burden of guilt and self-blame which leads parents/caregivers children and youth to feel that many of their problems are their "fault". When the family feels that their challenges are their fault, they have a harder time asking for resources to assist with these challenges.
- When they encounter individuals within the behavioral health system who do not appear to embrace this Principle , families may not know where to go to express their concerns or may be uncomfortable expressing their concerns
- Some CFTs include a Family Support Partner (FSP) (see below) who can assist the parent with their participation. Although some families are very capable to express their perspectives, others cannot. When this is the case, some type of adjustment in the CFT process, either through staffing or through the role of the facilitator, is needed.
- Attention to the value of family-professional partnerships paying particular attention to shared power in the relationship, including joint decision making and problem solving as well as mutual accountability.

Family Involvement in Local, Regional and State Systems

Family involvement opportunities should be available at agency, RBHA and State levels and in the community. Family leaders will represent the family perspective as participants in system transformation activities, including but not limited to:

1. Policy and program advisory committees
2. Trainings for families and professionals
3. System monitoring
4. Leading focus groups, conducting satisfaction interviews and other new initiatives related to family involvement and family support.
5. Identifying, developing and supporting, coaching and mentoring emerging and existing family leaders
6. Distributing information about resources to families

Generally, these family member roles are within formal structures that are reflected in procedures and policies. They are formalized in documents such as contracts or agreements within in the service system, (articles of incorporation, by-laws, founding documents) and Memorandums of Understanding. These elements assure that family involvement continues even when there are disagreements in perspectives. An important element is that the structures that are created for family involvement reflect a value placed on the family perspective. These include:

- A range of persons are engaged in Family Involvement activities (parents, caregivers, extended families, siblings and youth and other natural supports).
- A budget for family involvement is clearly identified. For example, family members are compensated for their time and travel; there are funds dedicated to the training and support of family members who participate in various family involvement activities, etc.
- Opportunities are in a form that indicate that the organization values family involvement (participants are provided information about the topic, meetings are in-person, family input is incorporated in final decisions, meeting times and places agreed upon by families).
- There are multiple venues for family involvement. For example, families may advise on or deliver a training program; they may participate in a quality management review body; and they may participate in a children's services policy making group). When there are multiple opportunities for family involvement, there is greater expectation that the family perspective will be heard and reflected in the operation of the organization.

Challenges or considerations for this family role: Family Involvement calls for real change in the way organizations and the system functions. It means that power is genuinely shared with family members. For genuine family involvement to occur:

- Decision making needs to be shared with families.
- Organizations need to be able to partner with families and hear their message. This may mean that system's jargon is discarded and issues are discussed in every day language.
- There is a cost associated with family involvement. Parents/caregivers and youth need to receive compensation for their time and travel. Further, there is a cost associated with the preparation and support parents/caregivers and youth receive. Nevertheless, family involvement is effective. It helps programs and services to be more responsive and successful. This is the payoff for the expense of family involvement.
- Problem solving and negotiation for a solution shall be part of the process.
- Families requiring assistance often need training on:
    - the terms used in the work;
    - how to read financial statements or quality management reports
    - background on policies or programs
    - organizational structure and decision making process, etc

Family-Run Organizations often are a resource to families to train and support them in these roles. In order for families to be truly independent and significant contributors to the system, they need to have a safe and supportive place where they can receive assistance in carrying out this role. Also, families are strengthened in their Family Involvement role when they can connect with other family members to interact and exchange views. Family-Run Organizations are a place where this can happen.

Family Work Roles in the Children's Behavioral Health System

The Arizona Children's Behavioral Health System offers many opportunities for parents/caregivers and young adults to participate at all levels as family and system resources. As stated above, the Children's System has been enriched through the array of contributions that family members have made in their work within the system. Some roles involve full-time or part-time employment while others may offer stipends for participation. Flexibility and sensitivity are essential in determining how to best compensate the family member for their contribution. The following is a brief list describing the functions or roles:

Family Support Partner (FSP)
This is a family member (see definitions). The FSP will assist the parent/caregiver of a child, who is receiving services, to identify needs and communicate those needs to the team so that the family's perspective is well represented in the child's treatment plan. Part of this role may be to exercise non-adversarial advocacy to assure that the family's needs are addressed in treatment planning. On behalf of the family, the unique role of the FSP may involve assisting the family in sharing their perspective to meet

their needs that are addressed in the plan. The FSP will further assist the family to assure that the plan is implemented and is progress is made. Finally, the FSP will assist the family to achieve self-efficacy resulting in decreased reliance on the formal system. (see attached sample job description)

Parent Partner
This is a family member. Often the Parent Partner helps the parent with skill building or problem solving. Also, the Parent Partner may assist with resource or system challenges, such as obtaining housing or developing an effective educational plan for the child. It is important to note that the Parent Partner primarily acts as an interventionist, while the primary role of the FSP is to support the family in their involvement in the planning process. The parent partner may also need to employ non-adversarial advocacy in order to effectively assist the family (see attached sample).

Youth Partner
This is a young adult who has received services in the Children's Behavioral Health System. The Youth Partner provides support and services to youth who are receiving services from the system. This is a new role that has been used primarily for work with older teens that are being prepared for transition to the adult behavioral health system. (See attached sample job description)

Greeter (Connector)
This is a family member. This person's role is to welcome a new family during the time of intake to the Children's Behavioral Health System. Since this can often be an intimidating time, the Greeter can offer support and information to the family by telephone or in person to give reassurance during this difficult time. Another supportive resource for families is other parents/caregivers who also have a child receiving behavioral health services. Often this connection is made through parent support groups. The Greeter can help the parent to become involved in such a group.

Navigator (Child Serving Systems)
This is a family member. The Navigator is sometimes called an *advocate* and often works through telephonic support. This person assists the parent/caregiver in working their way through various child serving systems including behavioral health, Child Protective Services, Juvenile Justice or the school system. This person's knowledge of the child serving system and relationships can be a resource to help the parent of the child receiving services to understand the expectations of the applicable system. This knowledge can often be a resource for families to obtain answers or services in areas beyond behavioral health.

Telephone Support
This is a family member. Families in the Children's Behavioral Health System often need advice or direction in the many challenges they face. Through telephone support, families can often get the help they need. This support may vary including:

- coaching on how to make an initial contact to obtain behavioral health services
- provision of information about a behavioral health diagnosis
- provision of information about benefits or resources for treatment or medication
- information about special education or other school issues

Family Interviewer
This is a family member having had at least one year of experience with the Child and Family Team process. With the implementation of the Practice Improvement Reviews in the Children's Behavioral Health System, there are now opportunities for parents/caregivers to be employed to conduct interviews. The parent perspective is a valuable asset to this role. It is a good example of how parents/caregivers add value to the system.

Family Trainer
This is a family member. The Family Trainer provides training to agency staff and to parents/caregivers on various behavioral health topics. There are numerous topics in the behavioral health system where

parents/caregivers or youth can offer a fresh and rich perspective on the topics. Example topics include: Child and Family Teams, Direct Support Services, various parent work roles such as Family Support Partner and Parent Partner, etc.

Community and Family Integration Coordinator/Consultant
This is a family member who promotes family access, voice and choice at all levels of the agency. This individual creates opportunities for youth and families to partner with agency professionals, welcomes and engages families, and encourages their partnership in the sharing of ideas and connection to community resources. In addition, the Community and Family Integration Coordinator/Consultant collaborates with local family-run organizations to promote family voice, family-driven care and family involvement at the local state and national levels.

Family Members/Youth/Young Adults Serving on Task Forces, Committee Groups, Etc.
These family/youth members bring a unique perspective and out-of-the-box thinking, along with their personal life expertise, to the decision-making process in conjunction with professionals who bring their technical expertise to the table. The collaboration and interaction within this group create an authentic family-professional partnership in which both are treated as equals and collaboratively bring an enriched understanding of the needs of families as well as establishing meaning full family involvement.

Note: In smaller agencies, these parent roles may be combined and assumed by one person. In larger agencies, there may be much more specialization. These roles are described to give an impression of the types of functions family members can play. This is not meant to imply that each role must be assumed by a separate individual. In addition, it should be emphasized that whenever family members filling any of the above roles are encountering services from the ADHS Covered Services Guide, they must adhere to all the guidelines associated with providing and documenting these services.

Considerations for family members working within the system

Parent/Caregiver/Youth/Young Adult Delivered Support or Service*
As noted in the section above, there are many roles for families within the system. Not all of them are direct support roles (See Family Involvement above) but those that are direct support have common characteristics. Please note for the purposes of this section, the role will be called Parent/Youth Partner. As direct support staff they share the following characteristics.
**Please note this does not include the role of the Family Support Partner, whose primary purpose is to support the family in their involvement in the planning process.*

- **Provide direct person to person work with family members or youth receiving services.** This is a range of roles/functions including; providing support, helping people learn new skills, accessing resources and providing family education.
- **Using personal experience to enhance the relationship:** Parent/Youth partners have to be prepared to make their personal experiences available within the system. Extension of self is one way that peer support roles differ fundamentally from other supportive system roles. Training will be readily available to Parent/Youth Partners to validate the optimal way to offer their experience as a resource.
- **Collaborative model of problem solving:** There is no expert in a parent-to-parent support role. The decision making model is a shared model in which the peer parent and the family jointly make decisions that blend the information the Partner brings to the table with the family's expertise on their own situation.
- **Shared first person system experience:** Parent/Youth Partners have first person system experience and are able to share, compare and connect with the experience of the family as they are going through the system.
- **Support to hold a different perspective:** Parent/Youth Partners are hired because they bring a different perspective to the way that services and systems operate. Effective Parent/Youth Partners

are buoyed by an organizational commitment which demonstrates the ability to appreciate different perspectives. In other words, family members can hold different opinions.

Parent/Youth Partners will flourish when the employing organization demonstrates coherence with the role and unique perspective of that position. This means that the organization, in addition to demonstrating a commitment to family involvement, also demonstrates the organizational capacity to support the uniqueness of this role administratively and programmatically. Examples of this include:

- **Administrative Supports:** Ability to recruit parents/caregivers and young adults with first person experience as well as providing orientation, necessary tools etc. Other administrative supports should include:
    - *Ability to connect with others with first person experience*: Persons in these roles benefit from an ability to network with others, both inside and outside their organization, in similar circumstances. Organizations employing Parent/Youth Partners should build the capacity for these connections to happen.
    - *Promotes choice for advancement*: Parent/Youth Partner roles shall have opportunities to advance while not giving up their ability to contribute their unique perspective in their work. This means that in order to get promoted the worker should not have to change job roles (such as moving into a case management role) but is able to move ahead while staying in a family/youth partner role. On the other hand, if the employee desires moving into other types of roles the organization should create solid career paths for that to happen.
    - *Values Personal Experience*: The organization shall demonstrate an organizational commitment to the personal experience of family members. This means that salary scales are based on more than formal training but also have the capacity to take into account first person experience in setting salary ranges.
    - *Accommodations for Personal Experience*: The organization shall demonstrate a commitment to the personal experience of parents, grandparents, caregivers and young adults employed in these roles by offering flexible schedules, unique employee assistance options for people in the Parent/Youth Partner roles, flexible family leave policies and, in the case of families with youth/children in the system, flexibility for sons/daughters to be welcomed into the workplace.

- **Programmatic Supports:** Supports in this category reflect the host environment to blend perspectives and to value first person experience along with formal training. These should include:
    - *Appreciative Capacity of Supervisor*: Supervisor shall be able to demonstrate a sincere and authentic strength based appreciation of the Parent/Youth Partner. The supervisor must support growth and development of each parent/youth partner to help them realize their professional goals. Often the most successful supervisors of Parent/Youth Partners are those who are also a parent/caregiver of a youth who is receiving or has received services in the behavioral health system.
    - *Strong commitment to protect the integrity of the role*: Organizational supervision, management and leadership shall demonstrate a commitment to preserve the integrity of the role and the unique perspective brought by first person experience.
    - *Ongoing commitment to assuring equal status*: Those who come into paid roles within the formal system may run the risk of being seen as secondary players. The host environment has to demonstrate the ability to assure this position is as valued as those positions that represent formal training versus personal experience.
    - *Meaningful and Independent Roles:* Programmatically, these positions are involved in providing direct support to a parent/caregiver or youth which may include education, resource access and development, non-adversarial advocacy or skills development delivered in a group, individual or family setting. The employing agency will demonstrate the ability to allow these roles to play a meaningful role with families.

Organizational Commitment to Parent/Caregiver/Young Adult Delivered Support or Service

Administrative Supports	Programmatic Supports
Parents/Caregivers/Young Adults have the ability to connect with others in similar roles	Supervisor supports growth and development of parents/caregivers and young adult employees
Parents/caregivers/Young Adults have opportunities to advance without leaving peer support role	Integrity of the role is protected and kept pure to its purpose.
The organization values personal experience in salaries and organizational status.	There is an on-going value placed on the contribution to the service environment made by parents/caregivers and young adults
The organization accommodates the ups and downs that parents/caregivers and young adults may experience.	The roles of parents/caregivers and young adults are valued in their own right and do not require formal education qualifications (beyond high school) to be delivered.
The organization sets a clear expectation for culturally and linguistically responsive support	Administrative staff and supervisors demonstrate a value system that honor diversity, and staff and supervisors responsively practice cultural and linguistic diversity

Family-Run Organizations

For decades Family-Run Organizations have offered parents/caregivers of children with behavioral health challenges a range of services and supports. Inherent in the identity of Family-Run Organizations is the natural ability and necessary environment to link families to individuals in their communities who share similar experiences in their life's journey. Without these peer connections to other families, stigma creates isolation, self-blame and other unneeded barriers that prevent families from reaching out and connecting with available supports and services. The growth of the family's natural support network is an important means for achieving higher levels of community integration and decreasing reliance on formal services. An important benefit of this informal family-driven network of support is the opportunity to build sincere, authentic lifetime connections.

In Family-Run Organizations, parent/youth support happens in a variety of ways and through a variety of strategies. It is recommended that each family be connected with a Family-Run Organization as soon as they are enrolled so as to receive informal support and to learn how to access the type of support that is meaningful for them; for instance, some families experience healing through connection with other families in a support group format. Other families find resiliency, recovery, and balance through connection with an individual who has a similar story to tell. Some discover their own capacity for resilience in fellowship with others in a social or training setting, or may need one-on-one support to achieve a specific outcome as identified by the Child and Family Team within the context of individual cultural environments and needs.

Family-Run Organizations are seen as "safe places" in the community for parents and youth to process/discuss their challenges and to seek solutions through services or through systems change. It is a place where families learn how the behavioral health and other child-serving systems work; how they can

articulate the issues that concern them, and parents and youth who participate in committees or boards are able to obtain on-going support to continue and grow in this role.

Family-Run Organizations provide a leadership role in, not only building family support and involvement, but in system development or transformation at all levels. Through leadership and technical assistance activities on systems transformation, the Family-Run Organizations assist in developing and connecting the "authentic" family voice to shape sustainable systems transformation. This technical support and leadership is instrumental in the family professional partnerships throughout the systems. By building a mutual partnership which is characterized by interdependence and cooperation, family members and behavioral health professionals are able to improve service, the quality of opportunities available and change the values and attitudes of society toward children with emotional, behavioral and mental disorders. (Federation of Families for children's Mental Illness) http://www.ffcmh.org/moving forwardtog.pdf.

National research indicates there are nine key components and characteristics of effective and sustainable family-run organizations. These are described by the Research and Training Center for Children's Mental Health at the University of Southern Florida[1] as follows:

- ***Values*** *– The value of family partnership is evident, with families and youth involved in all aspects of the system in a variety of capacities, including setting policies, developing programs, delivering services, providing training and technical assistance to enhance/expand family partnerships across system of care.*

- ***Leadership Development*** *– Family-run organizations recruit, engage, and nurture diverse family leaders and nurture their development as a leader to interface effectively with the system of care in a variety of capacities*

- ***Partnerships*** *– Families and youth are encouraged, supported and paid to participate in all operations of the system of care, including setting policies, developing programs, delivering services, providing training and technical assistance and assessing the impact of the system of care on children, youth and families served, agencies and systems and the community. .*

- ***Access and Referrals*** *– Family-Run Organizations are adequately funded and supported to develop and sustain a diverse group of families who collectively and effectively are the "family voice" in shaping their community's response to children with mental health needs and their families. In order to accomplish this goal, family-run organizations must make themselves accessible to all families.*

- ***Meeting Family Needs*** *– the primary role and responsibility is to meet the needs of families. They do so by helping families in a peer support role to access services, by addressing requests of all families about their systems of care community, by helping families have direct connections to mental health providers and other child serving agencies; and by helping develop skills and knowledge of families in changing policy.*

- ***Productive Working Relationships*** *– Family-Run Organizations have productive working relationships with state and local agencies and with providers in order to strengthen policy commitment and service delivery to children with mental health needs.*

- ***Sustainability and Growth*** *– Mechanisms are in place to sustain a Family-Run Organization. Funding and in-kind support from multiple and varied sources are important to the sustainability of these organizations.*

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[1] ***Quick Guide for Self-Assessment of Family-Run Organizations in Systems of Care, February 2007***

- ***Youth Involvement*** *– The development of youth leadership opportunities and organizations. Youth are encouraged and supported to participate in all operations of the system of care, including setting policies, developing programs, delivering services, and assessing the impact of the system of care on children, youth, and families served.*

Throughout the country, Family-Run Organizations provide an important function in systems development by supporting, mentoring and connecting parents and youth to become spokespersons and leaders. Through the Family-Run Organizations, parents and youth receive education and training about the organization and availability of services, funding, data collection, quality improvement initiatives, and policy or legal considerations that affect how families and youth with behavioral health needs are served. Family members serving in these roles are increasingly recognized as valued and necessary partners in working with leadership at all levels to bring positive change to the children's behavioral health system. Similarly, the Family-run Organizations are providing increased technical assistance and leadership on family support, family involvement and systems transformation topics at the local, state and national levels.

How families grow in their capacity to become involved or to be a service provider:

Parents/Caregivers who are raising a child with behavioral health challenges often travel a journey of personal growth and change. At points along this journey, parents/caregivers may feel ready to take advantage of opportunities to become involved in the children's system through participation in family involvement activities or through employment in the children's system. Keys for Networking, a Family-Run Organization in Kansas, has developed a ten step tracking system measuring each parent's growth as they are supported and face new challenges with their child. This system illustrates how parents/caregivers grow, change and become candidates for family involvement or family employment opportunities. It also illustrates the role the Family-Run Organization plays in helping each parent along this journey.

The following is a list of the ten steps associated with the process:

Step 1: Seeks Information
Step 2: Initiates additional contact
Step 3: Commits to address problem
Step 4: Works on the problem
Step 5: Resolves initial problem/feels success/accomplishment
Step 6: Takes on new problems
Step 7: Offers to help others
Step 8: Completes training to help others
Step 9: Helps others
Step 10: Impacts local, state, national policy

Parents/caregivers move through these steps at different paces based on differences in their personal and family circumstances. At each step the Family-Run Organization can offer parents/caregivers opportunities for growth. Also the Organization has an obligation to offer support and reassurance at each step as families face each day's challenges. As parents/caregivers grow in their mastery over the struggles they face, they often grow in their motivation to assist and support other parents in their journey. This motivation is a rich potential resource to the Arizona Children's Behavioral Health System. Great payoff can be gained from these families when they are able to work in a context where they are valued and supported.

Capacity Expectations:
Because family involvement and family support are critical to systems transformation, the number of Parent Partner and Family Support Partner positions should increase as the system builds capacity. In a fully developed system, additional family roles should be incorporated in the agency's staffing requirements to build and sustain family involvement. Agencies should hire a diverse cadre of staff that are reflective of the community they are serving.

Anticipated Outcomes

Anticipated outcomes include:

- To define quality family involvement as a necessary and effective component to Arizona's behavioral health system.
- To define roles that are uniquely intended for parents/caregivers of children receiving services; youth and young adults who receive or have received services.
- To describe the roles that family-run organizations play in optimizing family involvement and roles for parents/caregivers, youth and young adults who receive or have received services.
- To set the expectation for culturally and linguistically responsive practice
- To present a wide array of family involvement opportunities
- To prepare the Behavioral Health System to build and sustain the infrastructure and agency culture to support and involve family members at all levels of the system
- Increased statewide practice in accordance with the 12 Arizona Principles.

In order to achieve organizational change as recommended in this protocol, the following tenets should be at the core of this change:

- The following essential features of effective family participation on the service planning and delivery level must be honored during the process:
  - Families shall be recognized as primary decision-makers in the care of their own children, central to service planning and delivery.
  - Families can expect culturally and linguistically relevant services that appropriately respond to their unique needs.
  - Families shall have voice and choice in the array of services/supports they choose to meet the needs of their child and family.
  - Families shall feel free to contact all levels of personnel within their provider agency, T/RBHA, and the Division of Behavioral Health Services (DBHS).
  - Peer-Delivered Support shall be offered and available to family members and shall be available to the CFT when requested.
- T/RBHAs and their provider networks:
  - Shall put parents/caregivers and youth forward into roles that have influence with support and authority.
  - Recruitment, hiring and retention practices shall reflect the cultures and languages of the communities served.
  - Shall assign resources to promote family involvement including committing money, space, time, personnel, supplies and organizational attention.
  - Shall build an inclusive agenda at all levels of activity, ranging from involving families as partners within the delivery of services to management and funding decisions, demonstrating that families always have a place at the table; and
  - Shall demonstrate the commitment to share power at all levels of the system.
- Behavioral Health Employing Organizations shall demonstrate organizational commitment to employment of family members by:
  - Providing positions that value the first person experience these persons bring.
  - Establishing and maintaining a work environment that values the contribution of families in the work place.
  - Setting an expectation for the family role in the workplace and among systems partners.
  - Providing supervision that supports the family role.
  - Providing flexibility needed to accommodate the family members being employed in the system.
  - Providing compensation that reflects the value an organization places on first person experience commensurate with training and education.
- T/RBHAs and their provider agencies shall recognize the important functions of family-run organizations by:
  - Building and sustaining committed partnerships with family-run organizations.
  - Partnering with family-run organizations to provide on-going technical assistance and consultation to transform the system to move towards Family Driven Care.
  - Recognizing family-run organizations as able to provide a leadership role, not only in building and sustaining family support and involvement, but in system development and transformation at all levels. Through leadership and technical assistance on activities of systems transformation, the family-run organization can assist in developing and connecting "authentic" family voice to shape sustainable systems transformation.

- **Connecting each family member with a family-run organization as soon as they are enrolled to receive informal supports and learn how to access the type of support that is meaningful to them.**
- **Allowing family-run organizations to provide coaching mentoring and training to family members employed in the system as well as family leaders in the community.**

➢ **Training on family and youth Involvement in the Children's Behavioral Health System should meet the following requirements:**

- **T/RBHAs and their provider networks should establish committed partnerships with family-run organizations to co-facilitate trainings on family-professional partnerships at all levels of the behavioral health system (executive leadership to direct service delivery)**
- **Family leadership/spokesperson trainings for family members actively involved in system transformation efforts should be designed, implemented and delivered in partnership between family leaders/spokespersons from the T/RBHAs, their providers and family-run organizations.**
- **Family-run organizations should take the lead role in the delivery of trainings on peer-to-peer roles for family members employed in the system.**
- **In an effort to develop a diverse statewide cadre of family leaders/spokespersons, family-run organizations should design a training curriculum for families specific to the Arizona Vision, 12 Principles, CFT practice and family-driven and youth-guided care.**

Key elements to remember about this best practice:

➢ Families are encouraged and supported to participate as active and respected members of their child's Child and Family Team. In that capacity, families influence the development and implementation of a service plan that will respond to the unique strengths and needs of the child and family.

➢ Families participate in various activities that influence the local, regional and state service system. This type of activity is commonly called "Family Involvement". In Arizona, families are afforded a range of opportunities to offer their unique insight and first-hand experience to the development and implementation of programs and policy as well as various other advisory activities on Boards, advisory committees and policy making groups that work to improve the children's behavioral health services.

➢ Family members may work in a professional capacity in the children's behavioral health system. In this capacity, they offer a special type of support and service to the families and children that they serve. Further, families who work in the system may also influence the service system in which they are a part by contributing the family perspective to the service environment.

Benefits of using this best practice:

➢ Strengthening Family and Youth voice will lead to more culturally appropriate, individualized and strengths-based service planning for youth and young adults in our behavioral health system.

➢ Respecting and understanding the diverse roles of families in our behavioral health system will foster stronger partnerships between families and professionals.

➢ Ensuring strong "voice and choice" for families and youth in the service planning process will produce improved outcomes with respect to helping families achieve their stated goals.

➢ Understanding the potential contributions of family members will strengthen the skill level and capacity of our behavioral health workforce.

ATTACHMENT #1

SAMPLE JOB DESCRIPTION

POSITION:
Youth Partner

REPORTING RELATIONSHIP:
Youth Activities Coordinator of Family Organization

PURPOSE OF POSITION:
The role of the Youth Partner is to provide support, guidance, and training to the youth with the goal of enhancing the youths' life skills.

CAPABILITIES/REQUIREMENTS:
- High school diploma or GED preferred
- Must be 21 years of age
- Must have clean driving record, reliable transportation and proof of registration and insurance as required by the Law in Arizona.
- Must have excellent organizational and time management skills
- Must have good verbal and written communication skills
- Must have basic computer skills
- Must have skills necessary to engage and work with others from diverse backgrounds
- Ability to affirm and promote the philosophies, policies and goals of _____, together with the ability to apply these positively and constructively in the performance of duties
- Physical and mental capabilities to perform essential elements of the job
- Collaborate with State, RHBA and community Agency's and Parent Partners to maintain open communication and community supports for families

STAFF CODE OF CONDUCT:
- Model and support options that assure solutions are compatible with the Arizona Vision and 12 Principles.
- Attend at minimum, bi-monthly individual or group supervision sessions with _____
- Share information about barriers and successes with Youth Activities Coordinator.

ESSENTIAL FUNCTIONS:

1. **Engagement:**
   - Meet, greet and welcome youth and families
   - Explain and clarify the role and services
   - Assess youths' strengths and needs
   - Build mutual respect, confidence and trust with youth and parents/caregivers
   - Listen to the personal stories of youth and their families

2. **Planning:**
   - Develop basic understanding of youth/family history including past interventions
   - Communicate and translate information with staff, parents/caregivers, and youth in a way everyone can hear
   - Gather and share information with other Child and Family Team members to promote consistency of planned interventions
   - Reach agreement with others about implementing those interventions in a way that moves you closer to the mission statement

- Communicate needs of the youth to the Child and Family Team

3. **Implementation:**
   - Maintain a healing and helpful relationship with the youth and their family.
   - Utilize parent/family expertise in problem solving around specific needs and patterns of youth
   - Encourage empowerment and connection to natural supports in the youths' community
   - Listen
   - Implement interventions from the Plan
   - Modify and adjust individual intervention techniques for each situation without changing the direction of the Plan
   - Assess and respond to a crisis in a prompt and effective and collaborative manner.
   - Share information, resources, and other educational materials with families and people your work with.

4. **Transition:**

   - Develop a transition plan with youth and families when goals close to being met
   - Generate and communicate enthusiasm about next steps
   - Inspire confidence in youth and family about their strengths and ability to successfully transition
   - Celebrate successes that honor youth and family

_____ _____

Employee Date

ATTACHMENT #2

SAMPLE JOB DESCRIPTION

Position Title:
Family Support Partner

Reporting Relationship:
Supervision varies by Site

Purpose of the Position:
The Family Support Partner builds partnerships with parents/caregivers and professionals, and is committed to promoting a non-judgmental and respectful attitude with regards to families. The Partner focuses on the needs of the parent/caregiver within the Child and Family Team (CFT) and 1) helps the parent recognize self-efficacy, 2) pushes the parent's perspective, 3) builds partnership values between families, communities and system stakeholders in achieving the CFT's desired outcomes.

Essential Role Functions:

1. Advocate for change in the community and child-serving systems.
2. Support families as a peer and someone with a common background.
3. Provide information, resources and linkage with other networks of support available within the community.
4. Participate with facilitator and the family in forming and maintaining effective Child & Family Teams.
5. Build partnerships with professionals through *non-adversarial* advocacy.
6. Promote the individual family culture in the Child and Family Team milieu.
7. Represent Parent/Family voice in all program activities at the agency.
8. Link parents/caregivers with other parents/caregivers in community to reduce isolation that occurs when parenting a child with complex needs.
9. Offer support and encouragement to families as needed.
10. Serve as role model and advocate to families involved in the Child and Family Team process.
11. Participate in all Child and Family Team activities and training.
12. Assist in the ongoing development and evaluation of the service plan.
13. Participate in the 24-hour on-call system with Child and Family Team members.
14. Establish and maintain positive and effective working relationship with internal staff and external resources

Education, Experience and Skill Requirements:

1. Ability to work flexible hours including some evening / weekend availability.
2. Must be the parent of a child with behavioral health needs and experienced in navigating at least two child-serving systems and utilizing community/informal resources.
3. Possess a high school diploma or GED.
4. Must have excellent verbal and written communications skills.
5. Have basic typing/computer processing skills.
6. Requires good organization and time management skills.
7. Must have skills necessary to engage and work with others from diverse backgrounds.
8. Requires own transportation and proof of insurance.

ATTACHMENT #3

NON-EXEMPT JOB DESCRIPTION

Generic Title:	Parent Partner	**Job Grade:**	
Working Title:	Same	**Issue of:**	2/25/2008
Reports to:	Family Involvement Coordinator		

Primary Functions:

Under the supervision of the Family Involvement Coordinator and the agency's program definition and policies, the Parent Partner will:

1. Provide peer to peer support and intervention to parents/caregivers of enrolled children and youth.
2. Assist family members to achieve their stated goals.
3. Deliver interventions and activities that meet needs, build on strengths and achieve outcomes.
4. Collaborate with other individuals involved in providing support and care to families enrolled in services.

This position is established to directly provide peer to peer parent support to parents/caregivers of children enrolled in the Behavioral Health system. It exists as a key role for the purpose of fulfilling The Arizona Vision, which means:

"In collaboration with each child, family and others, Arizona will provide accessible behavioral health services designed to aid children to achieve success in school, live with their families, avoid delinquency and become stable and productive adults. Services will be tailored to the child and family and provided in the most appropriate setting, in a timely fashion, and in accordance with best practices, while respecting the child and family's unique cultural heritage."

As with employees of the Southwest Network, this position is expected, above all else, to support services to children and families that meets the following 12 Arizona Principles:

1. Collaboration with the child and family
2. Emphasis on achieving functional outcomes
3. Collaboration with others, including participation in unified assessment, planning and service approaches when children or families are involved with multiple systems
4. Access for children to a comprehensive array of sufficient behavioral health services to meet their needs
5. Best practices
6. Most appropriate setting
7. Timeliness
8. Services tailored to the child and family
9. Stability in placements
10. Respect for the child and family's unique cultural heritage
11. Independence
12. Connection to natural supports

All employees are expected to practice in a manner that is consistently mindful of our Arizona Vision and Principles.

Knowledge and Ability:

Must be able to demonstrate an accepting stance while responding with empathy and clarity to the family. Must be able to encourage collaboration and have knowledge of the systems of care in the community in

which he/she is working. The ability to present to small groups or provide training is an asset to this position. Must be able to obtain fingerprint clearance through the Arizona Department of Public Safety. Must have a valid driver's license and proof of car insurance and dependable transportation. Must possess excellent verbal and written communication skills. Must have basic typing/computer processing skills. Must have good organizational and time management skills.

Education and Experience:
High School Diploma or G.E.D. required. Must be a parent or caregiver that has raised a child with behavioral health needs and have experience in at least two child serving systems. (Example: Education, Juvenile Justice, Child Protective Services, Developmental Disabilities, etc.)

Typical Physical Demands:
Requires prolonged sitting and standing. Requires frequent bending, stooping or stretching. Requires the use of office equipment, such as computer terminals, fax machines, voice mail, security systems, typewriters, copying machines and cell phones.

Typical Working Conditions:
Work is performed in the community. Parent Partner services occur in families' homes, schools and other community based settings. Flexible work schedule based on the needs of the family served.

Supervision Received:
Reports to Family Involvement Coordinator for supervision to accomplish the objectives of the position.

Essential Skill Requirements:

Engagement Skills
- Meet, greet, and welcome families.
- Support families as a peer and someone with a common background.
- Represent Parent/Family perspective in all program activities at the agency.
- Work intensively with the family to identify formal and informal supports.
- Assist parents/caregivers with information regarding family involvement activities and provide assistance for their attendance in these events.
- Utilize personal and professional experiences to provide peer support to parents/caregivers.

Strengths, Needs and Culture
- Assist the family in identifying its strengths, family culture and concerns
- Promote the individual family culture in the development of the Work Plan and Agreement.
- Offer support and encouragement as well as respect and curiosity to parents/caregivers/caregivers.
- Listen to the parent's story to identify strengths and natural supports.
- Communicate with referring agency about newly identified strengths and needs.
- Participate in Network Quality Reviews as a parent interviewer.

Planning Skills
- Provide ongoing support through listening and helping communicate what is and isn't working.
- Identify emergency or urgent needs and work with agency staff or community organizations to meet these needs.
- Locate and orient the family about natural supports available in the community and help them connect with them.
- Redirect statements that assign blame.
- Reach agreement with the parent about child/family needs and objectives to measure success.

- Respond to phone calls and emails from families in a timely fashion that fits with family needs & their expressed concerns.

Implementation

- Perform assignments agreed to by the Child and Family Team and processed through the Children's referral system.
- Regularly monitor implementation and progress of Work Plan objectives with the family.
- Summarize and communicate Work Plan revisions with the team.
- Attend other meetings such as IEP, court hearings, and probation meetings to achieve Work Plan objectives.
- Document Progress Notes, Work Plans, and Measuring Tools that are clear and concise and capture the work performed for a specific day and time.
- Modify and adjust individual interventions/action steps in working toward completing objectives.

Transition

- Reach agreement with the parent about ending services.
- Summarize and distribute the family and referral person of accomplishments.
- Arrange and negotiate ongoing communication between the parent and community resources in the future.
- Create a resource packet to assist the parent in connecting to natural supports in preparation for transition.
- Plan, develop and host a culturally appropriate leaving/ending event.
- Other duties as assigned.

_____ _____

Print Name **Date**

_____

Employee Signature