Functional Family Therapy – Child Welfare

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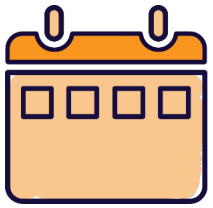
FFT-CW is an evidence-based, therapeutic early intervention program that works with children and young people, their family and/or kin.

Aims: to help strengthen family relationships by fostering hope, reducing negativity, and practicing new skills to provide lasting safety for all members of the family

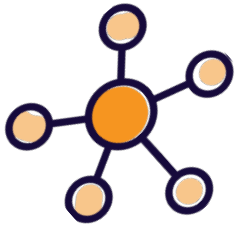
Objectives: first objective is engagement and motivation, the second is to change the problem behavior/s, and the third is to generalise change. We hope to improve communication, respond to challenging behaviours, reduce the number of children entering or remaining in out-of-home-care and support placement stability.

How are services delivered?

All FFT- CW sessions take place in the family home at a time of the family's convenience



Delivered across five separate phases, treatment lasting between four and six months. 12-20 sessions.



Facilitated by experienced and suitably qualified therapists to help identify strengths and challenges within the family behaviours and develop effective strategies for changing them within the family system

Referral Criteria

- Families with children 0-17 years with a ROSH report for child abuse and/or neglect
- Families with a child in OOHC but who will be restored to the family in 6-8 weeks and case plan with goal of restoration
- Families where the child has been in a placement with a relative for a minimum of 12 months and a plan exist for permanency FFT-CW is not an additional case management intervention. It works conjointly and collaboratively with other practitioners to achieve case goals by assisting families to identify and reshape negative relational patterns.
- Program is voluntary – requires consent.

Exclusionary criteria

- No child in the home/ no plan for restoration within 8 weeks.
- Where all caregivers have a cognitive delay
- Where active sexual abuse is the only risk factor in referral
- Active suicidal ideation/psychosis.

**Referrals via DCJ with limited capacity for community referrals – if we hold vacancies for >2 weeks.*

NSW Overview

ozchild

OzChild's footprint

2 teams in Blacktown

2 teams in Campbelltown

2 teams in Edgeworth

Team structure

Team Leader

Family Therapists

Caseload

4 4 Families per Team Leader

8 8 Families per therapist

Staff training

FFT-CW involves a series of training phases for staff which is a requirement as part of certification

Phase 1

Clinical Training
Goal is to build infrastructure that supports clinicians to take maximum advantage of FFT training/consultation

Phase 2

Supervision Training
Goal is to create greater self-sufficiency in FFT and includes 3 days of training

Phase 3

Maintenance Training
Goal is to assure model fidelity and incorporates one-day onsite training for continuing education in FFT

Measuring success

- Fidelity to model demonstrated in TYPE report (Tri Yearly Performance Evaluation) four monthly reporting showing detailed areas of strength and development.
- Consistently tracking outputs and outcomes by therapists and families. Including use of various assessment tools (SDQ, OQ, TOM's) and utilising online database for reporting. This is reporting from families, from therapists and supervisors.
- Ozchild track fidelity and measure it regularly to make decisions based on evidence to ensure the best outcomes for families.
- FFT LLC Consultants provide specific training in areas of model highlighted in TYPE report (CQI)

What does success look like (quantitatively)

- FFT national and international completion benchmarks for implementation phase two and beyond is 80% (all OzChild teams in NSW are in phase 2 and 3 of implementation – this means they have full autonomy and internal clinical supervision.

What's working for OzChild?

Since 2017

1119

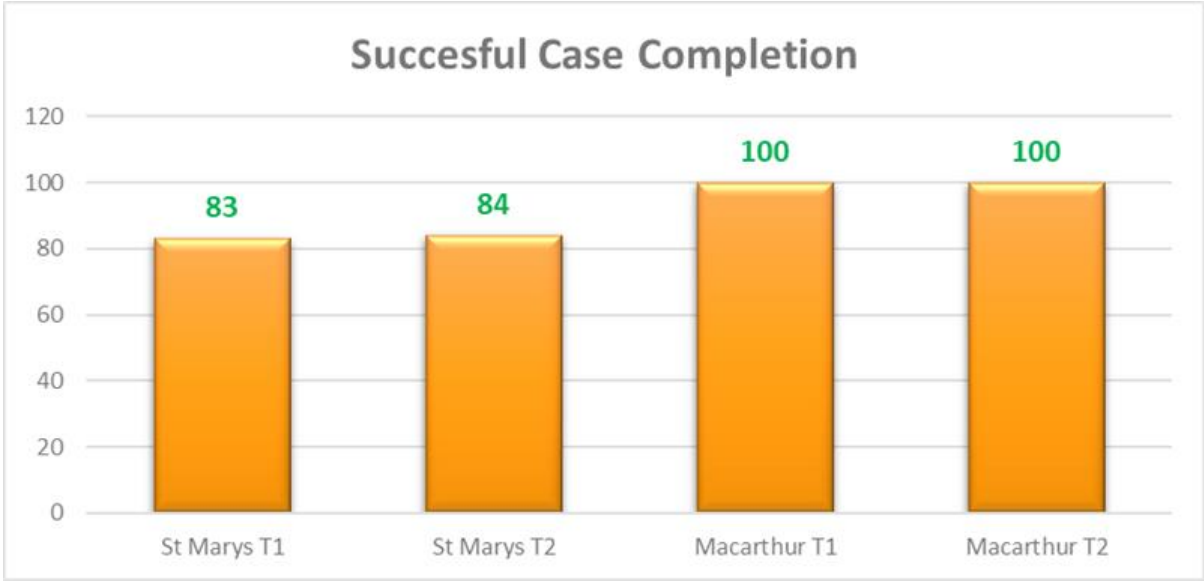
NSW families have successfully completed.

87% of children and young people remaining with their families through program completion.

NSW in 2022-23

158 families completed FFT-CW **44 were first nations families.**

OzChild's FFT-CW team are **practicing at a high level of model fidelity adherence and competence.** (Target >80%)



What's working for OzChild

Changes/adaptations and other factors for success:

- OzChild has added the Bridging Cultures Unit – Dhiyaan Mirri and Aboriginal practice leads.
- We've successful unified the intake process across all teams.
- Collaborated with other agencies to open up FFT-CW to community referrals.
- Enhanced support and mentoring to therapists with an emphasis on engagement and motivation phases, with a goal of first 3 sessions in 10 days.
- Collaboration between teams - Group Supervision and Peer Support (not model specific). Transparent discussion between colleagues,
- Organisational congruence, embracing success and sharing of data organisationally. (EBM and services nationally)
- Staff retention – average 5+ years for leadership roles across our six teams.

Outcomes

It taught me how to advocate for myself and my kids.

And support my kids with the situation we were in and coming out of as well.

I'm more confident now with handling things with the schools and with any other sort of companies and things like that.

I'm quite confident in being able to speak up for myself and my kids

You could actually talk to them calmly and nicely.

Normally I get uncomfortable around other people but with [Family Practitioner] it was completely different. I could sit and talk to him.