

Families Achieving Success Today

Motivation – How did this start?

Long Reach of Early Childhood Poverty

Concern about deficit based approach to services

Growing number of FSS families

Experience with transitional work and FSS

Experience with SSI advocacy service

Problem

How to improve outcomes for children.

Staff see themselves working only with parents

Staff overwhelmed by high bar for success on WPR
and state measure called Self Support Index

Focused on barriers

- Pressure to move families into FSS & out of WPR

Not trained in evidence based practices

Depend on referrals – little service integration

Theory of Change

Relatively small increase in income can make a dramatic difference for children

Parents don't have to get a full time job at a livable wage to make this happen

Use a different message and different measure

- The goal doesn't have to be full time work; off welfare
- Success is lessening poverty; part time work is OK
- Less pressure on staff and families - smaller steps
- Measured increased in income

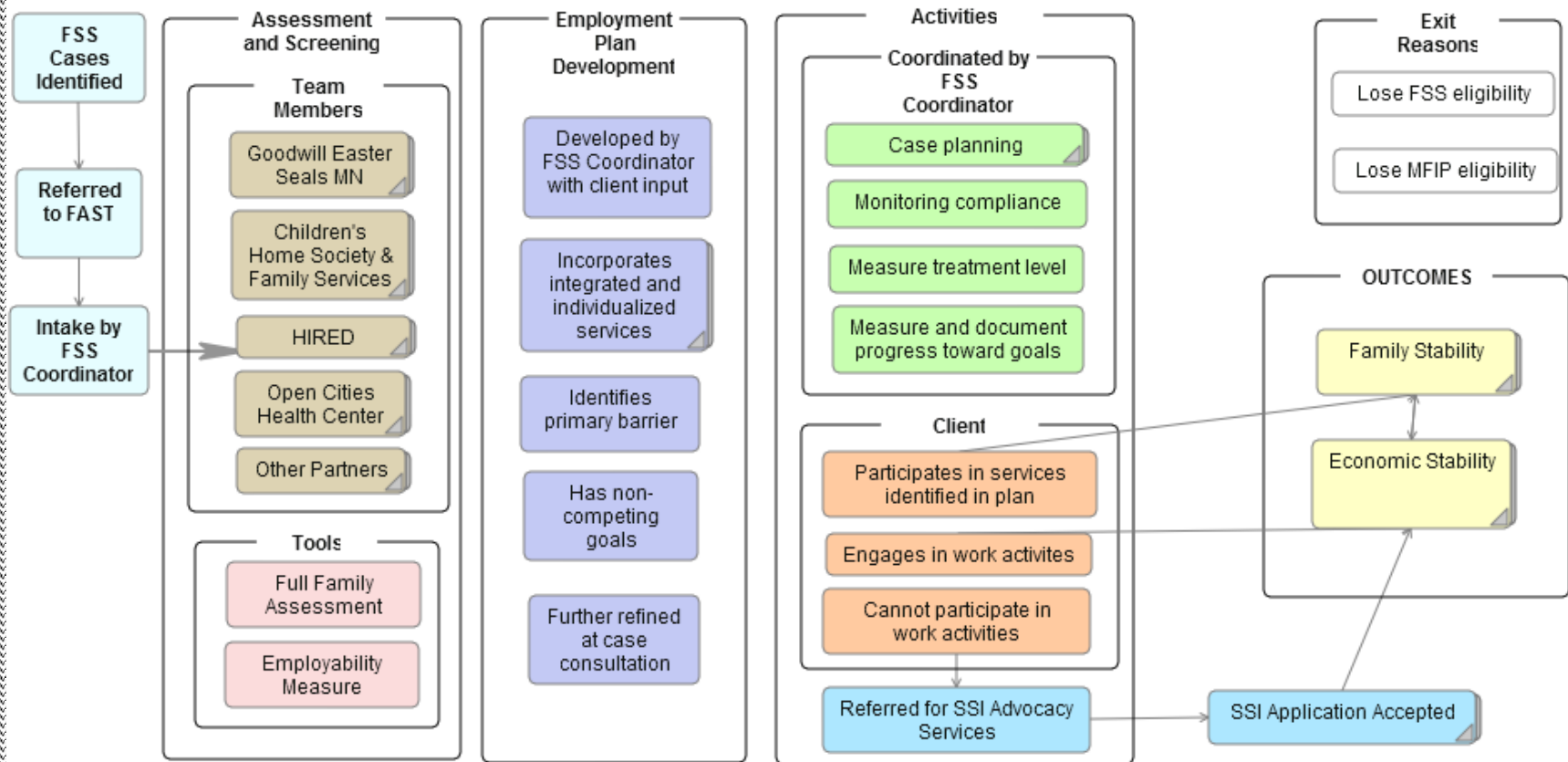
Work with families

Using evidence -based practice is critical

Integrate services instead of relying on referrals

- providers share a philosophy and agree on goals
- eliminate multiple plan is possible; if not, no competing goals
- family has a cross-disciplinary team & services they can access
- communication improves

FAST Logic Model



Looking for Integrated Services

Built on past experience with integration pilots

- Horizontal - training, location and weekly meetings
- Vertical - Oversight Committee and staff management
- Include 4 service areas
 - Adult and children's mental health
 - Vocational rehabilitation
 - Community medical clinic
 - MFIP employment services
 - Must use a whole family and strength based approach
- Must use evidence-based practices
 - Adult Mental Health Supported Employment
 - Motivational Interviewing

Result was the FAST project - started January 2011.
Funded by state, county and private foundations

Goals

Primary

Reduce poverty

Stabilize families

Make appropriate referrals to SSI / Reduce number of people churning in SSI system

Secondary

To identify gaps and eliminate overlap in services

To increase access and coordination of services in a manner that meets the needs of families as opposed to individuals.

Inline with goals of federal TANF-SSI Disability Transition Project (TSDTP)
- collaboration between SSA, HHS and TANF

Why Random Assignment

Experience with earlier integrated services projects

Want to know what works and why - impacts

- Priority - is IPS effective in a TANF population?
- IPS research is random assignment

Wanted research that decision makers consider credible

Justify expense – reason to use money differently

Rationale for expanding services

Random assignment was not hard

- Biggest issue was changes in status between identifying eligibles and screening.

What we hope to learn

Are messages about work, abilities and strengths successfully conveyed?

Are more FAST families engaged than regular FSS participants?

Can the success of the IPS model be replicated with TANF participants who have a variety of disabilities?

Are more people working? No longer in an FSS status? Leaving assistance before 60 months?

Is family stability improved – higher ratings on the Employability Measure?

Are there improvements in the mental and physical health of adults and children?

Is this the right mix of services for these families? Are these the right agency partners?