OVERVIEW

Planning for the Family First Prevention Services Act is framed based on an Implementation Science Framework. Our goal is to define;

- **The What** (What is the Vision for Family First in Ohio? What is the vision or direction for Prevention Services and Qualified Residential Treatment programs?)
- **The How** (How will the recommendations be implemented and sustained?)
- **The Who** (Who are the subject matter experts who should be a part of each Implementation Team?)

DEFINING THE WHAT

Although the Family First Prevention Services Act outlines federal requirements, Ohio needed to establish, “What does this mean for Ohio?” Ohio was intentional about engaging multiple stakeholders in defining the “what”. This mean, outlining the different parts of the act that needed to be further defined with input from stakeholders.

*Parts of Family First Prevention Services Provision that needed Ohio-Specific Customization*

1. Will Ohio Opt in or out of Prevention Services?
2. How will Ohio Define Candidacy for Foster Care?
3. Which programs will make up Ohio’s Evidence-Based Program Service Array?
4. How will Ohio align Family First to other Prevention Services across the state?

*Parts of Family First QRTP Provision that needed Ohio-Specific Customization*

1. Who will need to comply with QRTP Requirements?
   - Ohio decided to align licensure requirements with QRTP Requirements
2. When will facilities have to comply?
   - Phase-in Strategy for residential QRTP compliance
3. What will the requirements for QRTP look like in Ohio in the areas of:
   a. Treatment Model Criteria, Family engagement, 6-month after care, nursing/clinical staff requirements, Background checks
   b. Accreditation requirements and planning
   c. Court oversight plan and training
   d. Agency Readiness planning
   e. Level of care Assessment Tool and Process
Leadership Advisory Committee
Because Ohio was very intentional about ensuring a collaborative and representative approach to planning for Family First, a leadership advisory committee was established to weigh in and vote on recommendations to define Ohio’s “what”. This committee was comprised of voting members including:

- People with Lived Expertise (parents, foster care alumni, caregivers); and
  - Leadership from county public children service agencies and private child and family service agencies. Agencies include: Ohio Department of Job and Family Services, Department of Mental Health, Ohio Department of Developmental Disabilities, Ohio Department of Health, Ohio Department of Youth Services, Ohio Family Care Association, Ohio Job and Family Services Directors Association, Public Children Services Association of Ohio, Ohio Children’s Alliance, Ohio Family and Children First Council, Supreme Court of Ohio, Department of Education

The Leadership was designed to define the direction of Ohio’s “what”. After this is defined, there is a need to reframe the structure of this team to define the “how”.

DEFINING THE HOW

After the recommendations from the Leadership Committee are solidified, Ohio should have a solid direction for Family First. Now, there is a need to think about “how” the recommendations will be installed and implemented. This will take place in four stages based on [Implementation Stages Framework](#):

1. **Exploration** – Identify the recommendations through skillful planning and research, engage stakeholders and establish joint ownership and buy-in, develop communication processes to support the work.
   a. Establish the Implementation Teams (*The Implementation Team needs to be comprised of individuals who, collectively, have the expertise necessary to implement the new program or practice, and to develop and maintain the system and infrastructures to support effective implementation.*)
   b. Define the Changes (*Translate recommendations into system changes*)
   c. Assess Readiness Assessment
   d. Create work plans based on Implementation Drivers (Roadmap Document)
   e. Draft a Communications Plan to engage key stakeholders

2. **Installation** – Develop the Infrastructure needed to put recommendations into practice, feedback loops between practice and leadership, gather feedback.
   a. Establish Implementation Drivers Infrastructure
   b. Engage program developers, external consultants, and intermediary organizations to ensure they have competencies to support implementation
c. Select early implementers (Pilot or Phase approach)
d. Training and Coaching plans

3. **Initial Implementation** – Test new skills and practices, gather data to check implementation, develop improvement strategies
   a. Coaching and data systems support adaptations to the changes
   b. Data collection to make improvements

4. **Full Implementation** – Well integrated, skillful use of Family First Policies and Practices

*Implementation Drivers*

Implementation Drivers are key components of capacity and infrastructure that influence a program’s success. For the sake of Ohio’s Family First work, we adapted the Implementation Drivers to reflect internal areas that need to be addressed in order to ensure successful implementation. These are:

- Communication
- Systems and Processes
- Fiscal Impacts
- Rules and Statutes
- Training and Technical Assistance
- Capacity Building / Workforce Development
- Fidelity and Monitoring