



ICTP
Implementation
Capacity for Triple P

NC CHILD WELFARE TRIPLE P LEARNING COLLABORATIVE

Christina DiSalvo, Implementation Specialist
Impact Center at FPG, UNC-CH

April 7, 2022



FRANK PORTER GRAHAM
CHILD DEVELOPMENT INSTITUTE



Waterfall Chat

What wishes and aspirations do you have for today?



FRANK PORTER GRAHAM
CHILD DEVELOPMENT INSTITUTE



Objectives



Lift up & share local experiences



Revisiting challenges and peer ideas



Discuss implementation challenges and successes among peers and broader NC Triple P network.

What We Are Trying to Accomplish



Increased likelihood of Triple P being used as intended.



Increased likelihood families will benefit from the program.

Implementation Matters



- Implementation focuses on the “HOW” we get there.
- Programs are implemented within agencies and by people – we must attend to the things that will enable the agencies and people implement well.
- Readiness for implementing Triple P is not a state of being. It needs active and ongoing support to be developed, nurtured, and sustained

What Are Our Goals?

Increased awareness of Triple P and fit with child welfare needs.

Increased knowledge of practices and structures that support successful program delivery.

Increased use of implementation tools, resources, and support.

Values

Creating a safe
space for learning
together

Allow for peer-to-
peer support

Enhance service
through practice

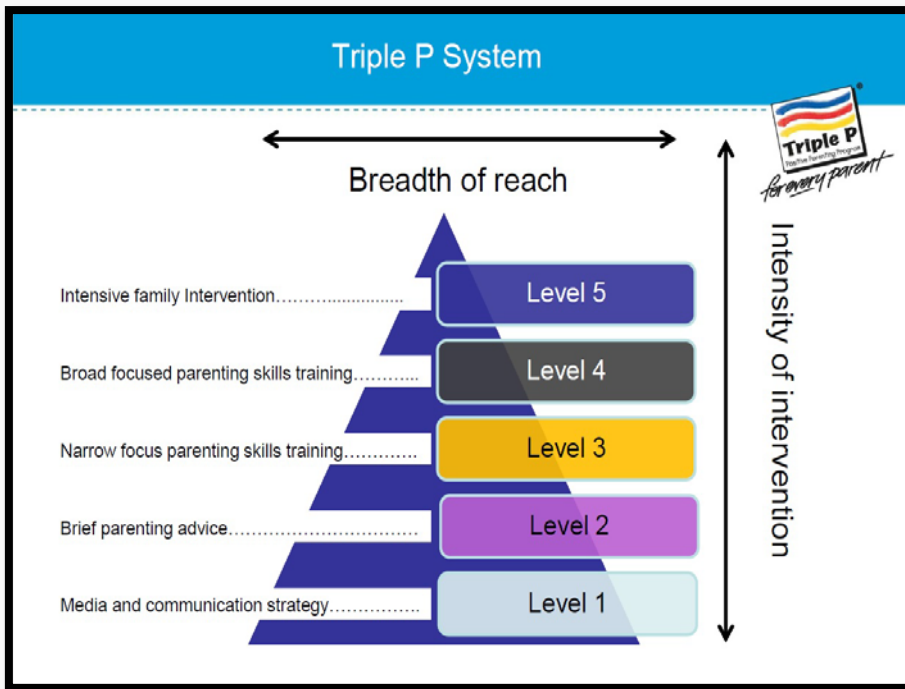
Support based on
context/needs

Encourage different
perspectives and
experiences.

Overview and History of North Carolina's Investments in Triple P Infrastructure and Implementation Support

NC Child Welfare Learning Collaborative
April 7, 2022

Overview of Triple P



Evidence-based program

Prevention/early intervention approach

Flexible system of parenting support

Levels of increasing intensity

Triple P Goals for Parents



Creating a Safe, Interesting Environment

Having a Positive Learning Environment

Using Assertive Discipline

Having Realistic Expectations

Taking Care of Yourself as a Parent

Triple P Outcomes



- Improved behavior and social emotional skills
- Better self-regulation
- Improved health
- Better parent-child relationships



- Decreased stress, anxiety, and depression
- Increased confidence and competence in parenting
- Better parent-child relationships



- Decreased out-of-home placements
- Decreased child maltreatment cases
- Decreased child maltreatment injuries
- Improved health
- Decreased juvenile justice cases

Why Triple P in North Carolina?

Population-based approach to parenting

Destigmatized process for families seeking help and information

Training of existing workforce to deliver Triple P by incorporating it into their current practice

Positive approach to parenting support

Evidence-based and a good investment

Ultimate Goal = “Triple P Spoken Here”



Agency Elements for Success

Organization Readiness for Change

Leadership and Implementation Teams to Support Triple P Implementation

Workforce Development – from Recruitment / Hiring through Training and Ongoing Coaching

Process and Outcome Monitoring for Continuous Quality Improvement



Value of Infrastructure and Implementation Support

- Leads to Higher Quality Services
- Results in More Effective Outcomes
- Decreases Staff Turnover
- Saves Money
- Promotes Sustainability



History of Triple P Implementation

2008–2011 Exploration

- Alliance for Evidence-Based Family Strengthening Programs
- North Carolina Division of Public Health (DPH) as Lead Agency

2012–2016 Startup and Expansion

- 37 counties
- 9 regional local implementing agencies
- Triple P Online: free to all parents in North Carolina

2016–Present NCDSS Investment and Statewide Coverage

- North Carolina Division of Social Services investing almost \$2 million per year in Triple P infrastructure and implementation support
- Expanding to all 100 counties within 9 LIAs

Selecting EBPs for NC FFPSA Prevention Plan

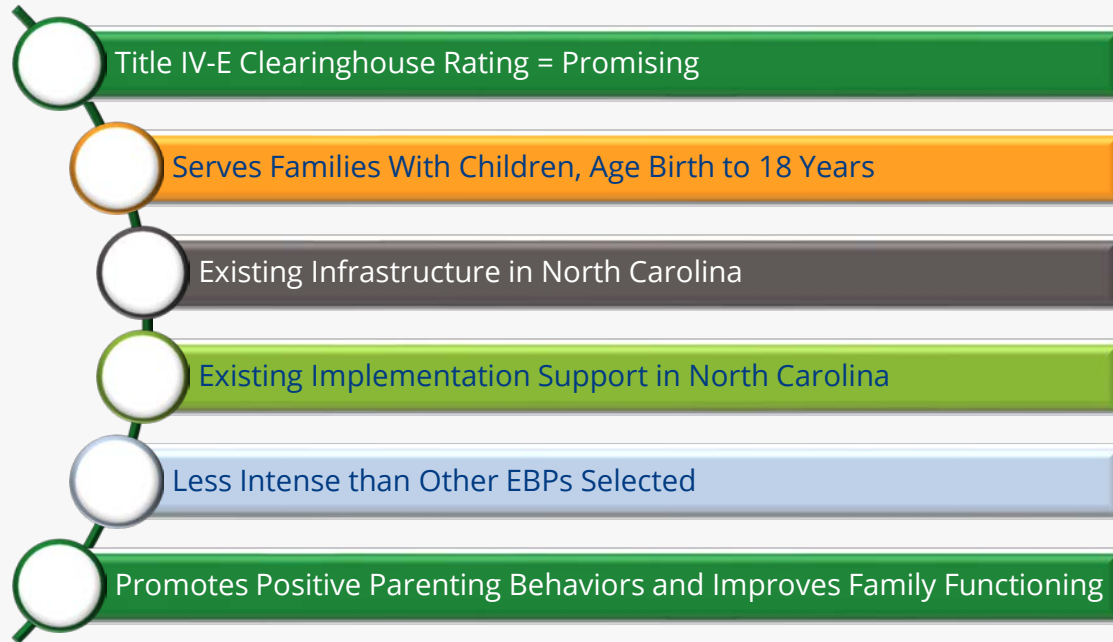
The needs of the candidacy population was the most important criteria in selecting North Carolina's Family First Prevention evidence-based services (EBPs).



Other Considerations included:

- Title IV-E Clearinghouse Rated
- Services for Children and Parents
- Existing Infrastructure in North Carolina
- Existing Implementation Support
- Covered Age Range
- Range of Intensity Provided
- Medicaid Covered Service
- Evaluation Requirements

Alignment of Triple P with FFPSA Prevention Plan



FFPSA Staffing Structure

Once the Administration of Children, Youth, and Families has approved NC's Family First plan, NCDSS will enact the following staffing structure to support FFPSA connections between NCDSS, county child welfare agencies, and FFPSA service providers.

- Family First Program Services Manager - Heather McAllister
- Regional Prevention Consultants – to be hired

DSS Regional Support Map



■ 1 ■ 2 ■ 3 ■ 4 ■ 5 ■ 6 ■ 7

Contact Information

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Stories from the Field: Lee County



**WHY THEY
SELECTED TRIPLE P**



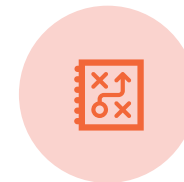
**HOW THEY GOT
READY**



LESSONS LEARNED



SUCCESSES



**CHALLENGES AND
MITIGATION
STRATEGIES**



LEE COUNTY

Our Journey to Triple P
Trista Palmer

VALUE

- Lack of resources in the community
- We identified the need for a certified program with measurable results and concluded the value it could bring to our agency

GOALS

- **Frontloading-** Assessments team can use this program to provide to families in need of parenting education
- **Preventing-** We want to prevent removal as much as possible and can use for In-Home planning
- **Assisting-** Assist families in Reunification within Foster Care

How we Got Ready

- Parenting educator to implement to all programs
- Identified an in-home worker that can implement program
- Identifying which families and their specific needs

Challenges

- Learning the levels and figuring out what was best for our agency and the families we work with.

Previous Peer-Support Takeaways



What do you hope to learn more about today from your peers?

Remote delivery is difficult right now - ideas on how to make that a little easier.

How to get family buy-in in order to complete .

How to promote Triple P as a safe, supportive, desirable program for families.

Buy-in from family perspective as a new program in the region

interested in how other DSS's rolled out and integrated Triple P into their day-to-day

high case loads make implementation difficult - wondering how other agencies provide Triple P interventions with limited time available

Leadership (supervisors and DSS Triple P Coordinator) would like more on how to incorporate Triple P into our work.

Providing more information on the program as a whole because no one at my agency is Triple P certified we out source the Triple P program via our Health Department.

Want to gain knowledge and insight on how everyone got here. I will be supervising staff that will be delivering and I want to soak up the information to be knowledgeable.

How to start the process of implementation of Triple P

What challenges do you face when you first implemented

Information on how to recruit and train more Triple P practitioners.

How can we move beyond making referrals only and have staff who can provide services?

How do we get staff trained? We had one or two providers who left and we can only make referrals.

Looking for ideas from other areas on how to get local DSS buy in

Getting DSS Leadership Buy-in

Overcoming Challenges: Turnover



Assessing turnover during
the selection process

Assessing staff readiness
(willing and able)

Selecting 3 practitioners,
when possible

Overcoming Challenges: Integrating the Program



Assessing Need & Fit



Assess Team Capacity



Talk to Other Agencies



Think Outside the Box



Understand Program Delivery Requirements

Quotes

“Consider personal qualities and performance when selecting staff to train”

“Have conversations about competing priorities in Child Welfare”

“Consider less intensive levels such as Level 3 or 2 to still provide briefer, yet tangible family supports.”

“Groups have been effective and promote peer-support and normalization of parenting challenges.”

“Consider referring out to other community agencies”

“Worth looking at other parts of DSS to deliver, like economic services, child support, social worker assistants, or kinship and community social workers.”

Overcoming Challenges: Virtual Delivery



Access Virtual Delivery Triple P
Guide Document

Works well for families with limited
availability

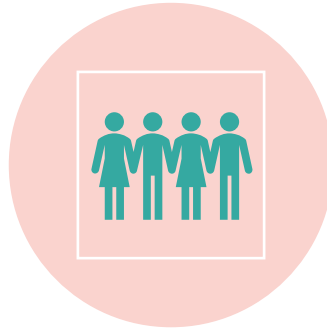
Revisiting ground rules for virtual
participation

Use of TPOL

Theme Discussions



ATTENDING ONGOING
READINESS



IMPORTANCE OF
RECRUITMENT & SELECTION
OF PRACTITIONERS



VALUE OF SUPPORTS &
RESOURCES

5-MINUTE BREAK IDEAS



Take a walk in the sunshine



Listen to your favorite song



Apply pressure on trigger points



Organize your workspace



Watch a funny video



Stretch

Peer Support Time



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Getting DSS Leadership Buy-in

Small Group Breakouts



Getting Started



Engaging Families

Getting Started

Set a Start Date

Family Selection Considerations:

- ✓ Relationship with family
- ✓ Known discrete parenting issue
- ✓ New family
- ✓ Consideration of multiple issues a family may be experiencing

Let Go of Perfect Expectations

Access Supports Before and Afterwards

- ✓ Peer support
- ✓ Coaching
- ✓ [Self-Assessment tools](#)

Peer-to-Peer Support

Consider sharing:

- How you went about selecting a family for the first time.
- How you are considering getting started.
- Experiences you have had in starting delivery for the first time.
- What supports help you with your Triple P delivery.
- Other suggestions that may help folks.

Group Report Out

Strategies Shared:

- Making sure you have the right referral for the right family
- Think about alternative program recipients like kinship providers or grandparents.
- Be aware of other family issues and assess if the timing is right.
- Finding discrete parenting issue to start with.
- Tailor delivery based on needs.
- Access support from peers with Triple P or other family support program experience.

Small Group Breakouts



Getting Started



Engaging Families

Engaging Families

Self-Regulatory Framework

You are a guide, not necessarily an educator
Parents are in the driver's seat

Be Aware of Power Differences

Parents can be afraid to share a problem
Reframe the ask: "What do you want for you and your child?"

Build Trust

Simple goals can be an opportunity to praise, normalize, provide feedback, etc.
Small successes build readiness for additional services

Peer-to-Peer Support

Consider sharing:

- Strategies for presenting the program to gain buy-in.
- Ways you reinforce the self-regulatory framework.
- How you empower families during service delivery.
- How you have adapted based on families needs or interests.
- Other suggestions.

Group Report Out

Strategies Shared:

- Building relationships with families is essential
- Offer clear description about the Triple P program (benefits, timeframe, example strategies, participation expectations)
- Be flexible – example shared of meeting with a family at McDonalds.
- Look for small wins and build on those successes.
- Acknowledge the family is the expert.
- Start with where the family is at – focus on a discrete issue.
- Be okay with having families walk away with 1-3 takeaways from the program. Those takeaways are a success!
- Some families are more open to services, such as those served through prevention programs/teams.

Waterfall Chat

One idea I am leaving with or plan to try...