# Recovery Specialist Voluntary Program (RSVP): Preliminary Evaluation Findings

JANE A. UNGEMACK, DR.P.H.
UNIVERSITY OF CONNECTICUT SCHOOL OF
MEDICINE
FARMINGTON, CT
MARCH 7, 2011

#### **RSVP Program**

- A voluntary program for parents/caregivers who have had a child removed by an Order of Temporary Custody (OTC) and need support for recovery from problematic use of alcohol and/or drugs
- The result of a joint collaboration between the Department of Children and Families (DCF), the Judicial Branch, and the Department of Mental Health and Addiction Services (DMHAS)
- Administered by Advanced Behavioral Health (ABH) in three pilot sites: Bridgeport/Norwalk, New Britain, and Willimantic
- RSVP assists the parent/caregiver in engaging in substance abuse treatment, conducts random alcohol/drug screens, supports parents in increasing their recovery capital, and provides timely documentation to the courts and DCF on the parents' efforts and progress

#### **RSVP Program Objectives**

- Develop an integrated system of care for substance-involved OTC families by changing policies, procedures and practices
- Promote inter-agency collaboration and data sharing for program development and strategic planning
- Improve substance abusing parents' access, engagement and retention in substance abuse treatment
- Increase access to case management, support and recovery services
- Show improvements in rates and timeliness of child permanency decisions
- Reduce repeat cases of child maltreatment and re-entry to DCF due to parental substance abuse
- Reduce costs associated with out of home placements and court proceedings
- Develop a plan for outcomes and performance monitoring

#### **RSVP** Eligibility Criteria

- A parent/caregiver whose child has been removed pursuant to an OTC and for whom substance abuse has been identified as one of the factors in the child(ren)'s removal
- Parent has an open DCF case and an active child welfare case at Juvenile Court in one of the three pilot areas
- Parent referred and the client and his/her attorney sign the *Agreement to Participate in RSVP* which is then entered as a standing order in the court files

#### **Program Description**

#### • Phase I (90 days):

- Meet with Recovery Specialist 2x/wk if outpatient or 1x/wk if residential
- Submit to random, observed alcohol/drug testing at RSVP office 2x/wk or more (not applicable if in residential setting)
- o Obtain substance abuse treatment evaluation
- Engage in treatment with verified attendance
- Attend 6+ self-help groups per month with verification

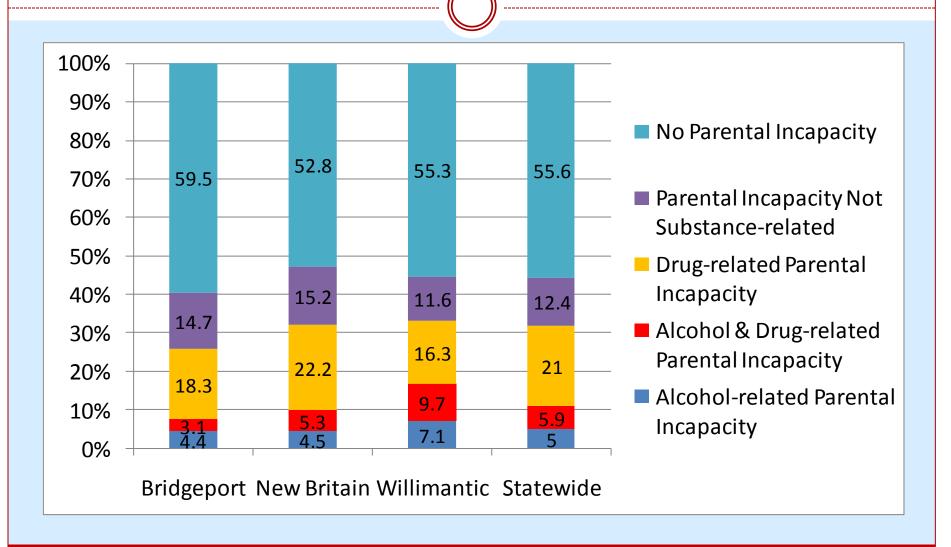
#### • Phase II (91-180 days or until discharged from program):

- Comply with recommended substance abuse treatment with verified attendance
- Meet with Recovery Specialist 1x/wk if outpatient or biweekly if residential
- Submit to random alcohol/drug testing minimum 1x/wk
- Attend 6+ self-help groups per month with verification

#### **Program Description**

- Phase III (181-270 days or until case closure):
  - Have contact with Recovery Specialist at least biweekly, including 1 face-to-face per month
  - Comply with recommended treatment with verification
  - Attend 6+ self-help groups per month with verification
  - o Comply with random alcohol/drug testing a minimum 2x/month
- RSVP provides a written report to the court and DCF at the initial 2-week case conference and at monthly intervals until discharge
- Written reports include information on parent's RSVP participation, attendance at treatment and self-help groups, and compliance with and results of random drug testing

## Rates of Substance-Related Parental Incapacity in OTC Removal Cases by RSVP Site and Statewide: DCF Link, 2006-2009



## Comparison of Mean Days in DCF Placement by Parental Alcohol/Drug Use as a Reason for Child Removal, 2006-2009

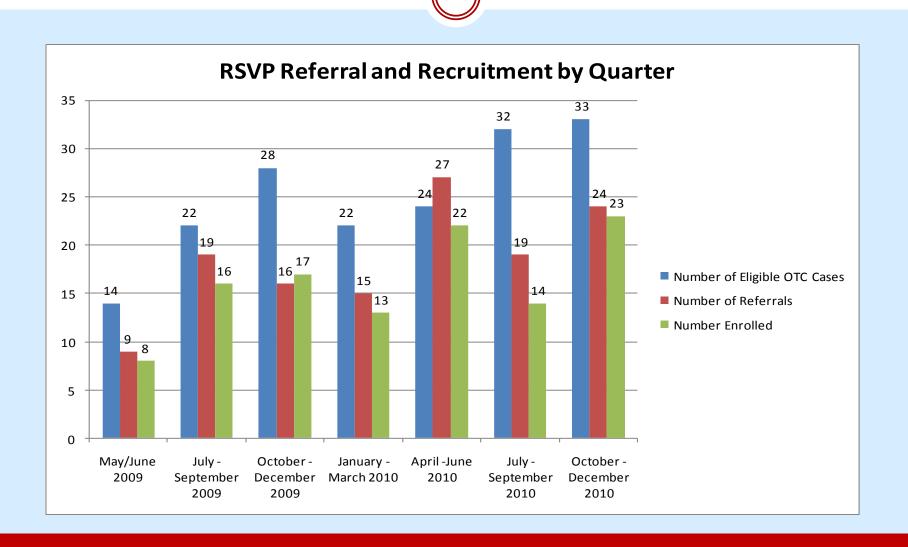
Parental Alcohol/Drug Use Identified as a Reason for Removal	Days in DCF Custody	Days in DCF Placement	
No	372.51	377.16	
Yes	433.86	424.90	
Difference in days	61.35**	47.74**	
**p<.001			

#### Number of OTC Parents Enrolled in RSVP: May 2009 – December 2010

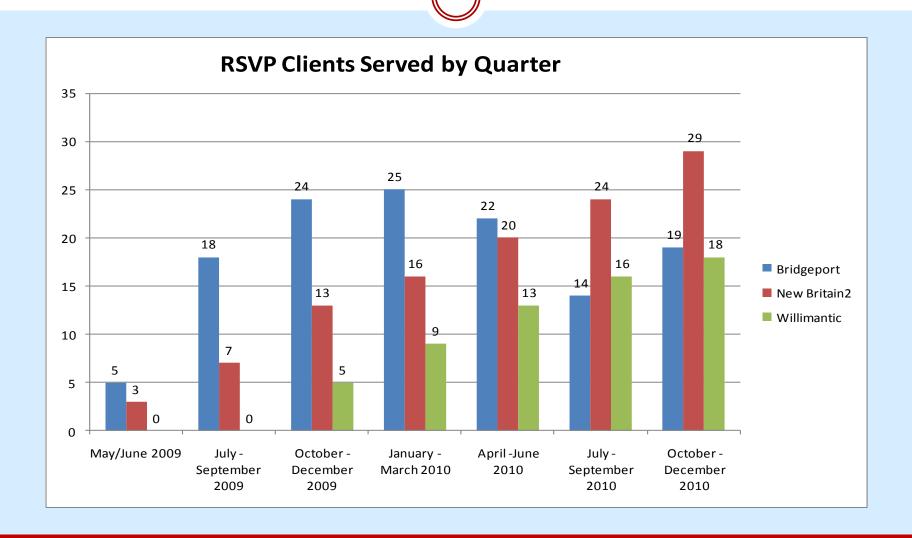
#### • Number served:

o Bridgeport	43
o New Britain	36
<ul> <li>Willimantic</li> </ul>	34
o Total	113

#### Referrals to and Enrollment in RSVP over Time: May 2009 – December 2010



#### Number of RSVP Clients Served by Site over Time: May 2009 – December 2010



## RSVP Client Characteristics: May 2009-Nevember 2010

<ul> <li>Gender</li> </ul>	
<ul> <li>Female</li> </ul>	82%
• Age	
• 18-29 yrs.	49%
• 30-39 yrs.	35%
<ul><li>40 or older</li></ul>	16%
<ul> <li>Marital status</li> </ul>	
<ul> <li>Married</li> </ul>	23%
<ul> <li>Never married</li> </ul>	58%
<ul><li>Other</li></ul>	19%
<ul> <li>Income per month</li> </ul>	
<ul><li>None</li></ul>	40%
• \$1 <b>-</b> \$600	31%
• \$601-1,000	15%
<ul><li>More than \$1,000</li></ul>	14%

## Racial/Ethnic Characteristics of RSVP Clients by Site: May 2009-November 2010



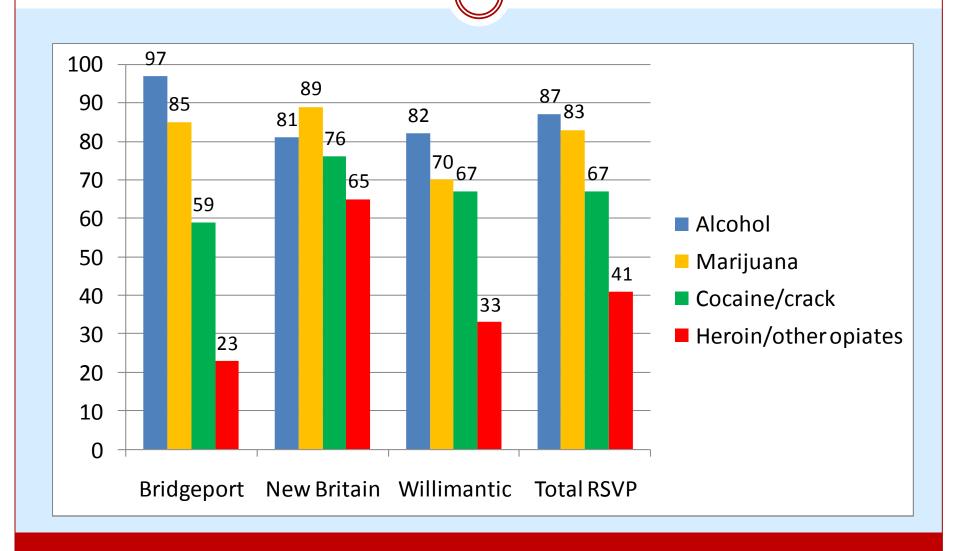
#### RSVP Client Characteristics: May 2009 – November 2010

<ul> <li>Housing situation</li> </ul>	
<ul> <li>Homeless/shelter/supportive housing</li> </ul>	12%
• Rent	50%
<ul> <li>Living by self</li> </ul>	55%
<ul> <li>At risk of eviction</li> </ul>	18%
• Employed	17%
• Entitlements	
<ul> <li>General assistance/Medicaid</li> </ul>	75%
<ul> <li>None</li> </ul>	14%
<ul> <li>Has drivers license</li> </ul>	51%
Has auto available	32%

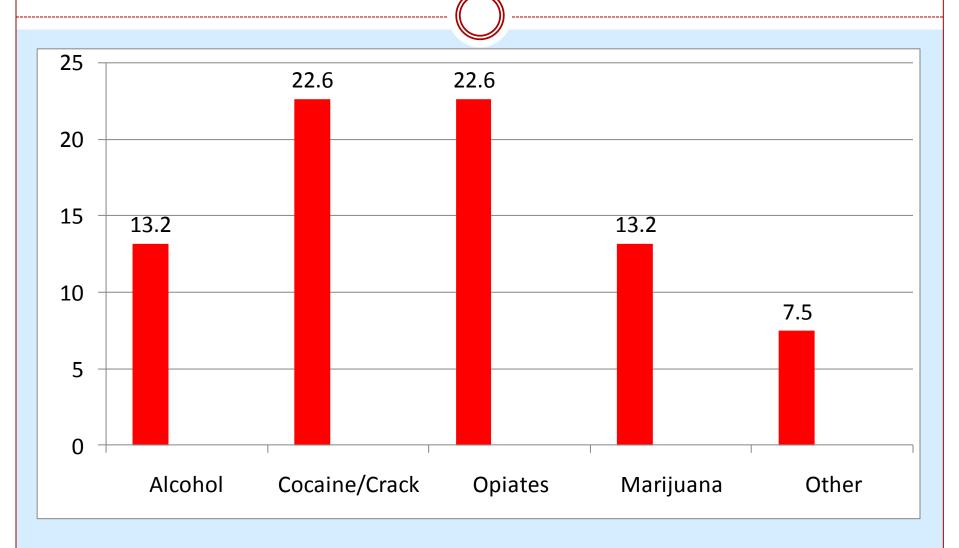
#### Co-occurring Problems among RSVP Clients: May 2009 – November 2010

• Ever arrested	70%
<ul> <li>Current criminal justice involvement</li> </ul>	48%
<ul> <li>History of domestic violence</li> </ul>	49%
<ul> <li>History of trauma</li> </ul>	25%
<ul> <li>Family history of mental health problems</li> </ul>	36%
<ul> <li>Personal history of mental health problems</li> </ul>	49%
<ul> <li>Currently receiving MH services</li> </ul>	25%

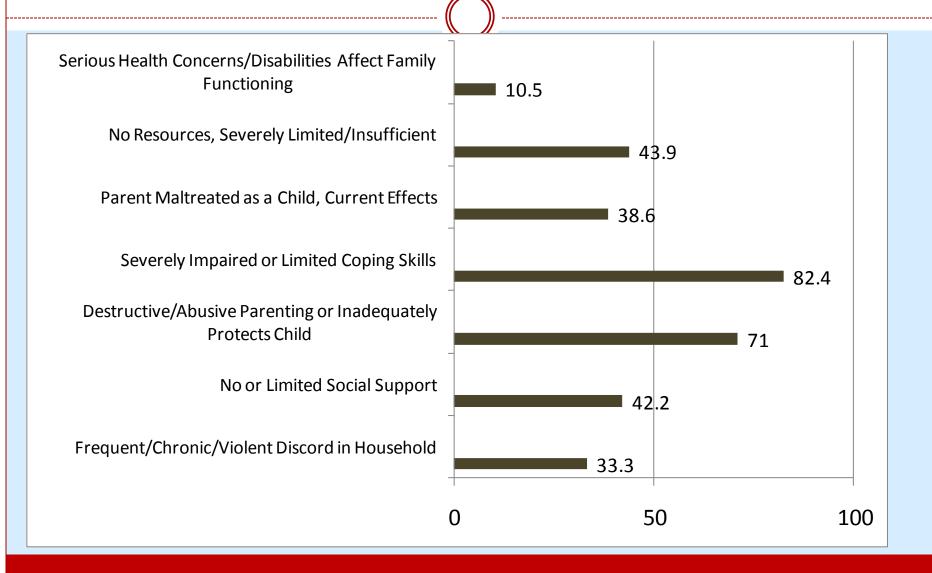
#### Alcohol and Other Drug Use by RSVP Clients: May 2009 – November 2010



## Primary Problem Substance for RSVP Clients in Treatment: DMHAS, May 2009-May 2010



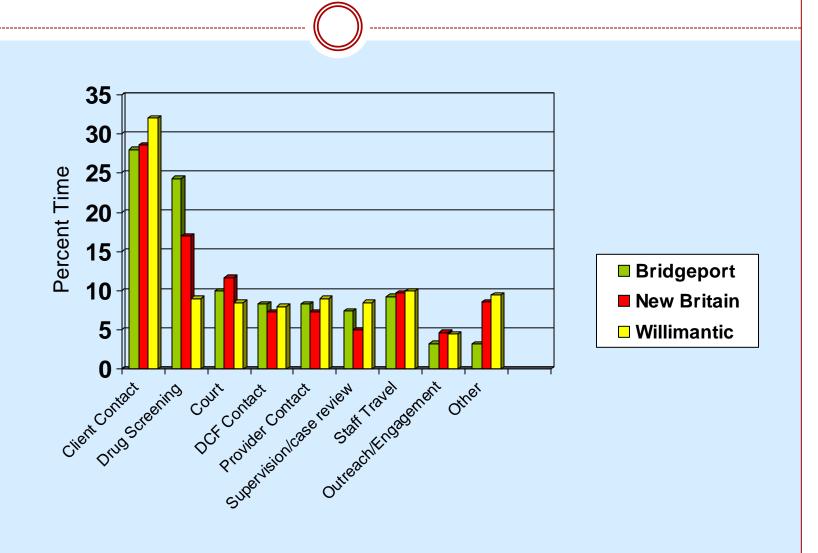
## RSVP Clients' Baseline Family Strengths and Needs Assessment: DCF SMD Data, May 2009-May 2010



## Other Reasons for Removal for OTC Cases with or without Parental Incapacity Due to Alcohol/Drug Use, DCF, 2006-2009

Other Removal Reasons as Coded in LINK	Parental Alcohol/Drug Use Identified as a Factor in Removal		
	<u>No</u>	<u>Yes</u>	
Abandonment-Relinquishment	14%	8%	
Child Behavior – Parent Incapacity	14%	6%	
Disability	10%	6%	
Inadequate Housing	16%	22%	
Neglect	68%	73%	
Physical Abuse	16%	6%	
Sexual Abuse	5%	1%	

### Percentage of Staff Time Spent by Activity by Site: RSVP FY2010



## Discharge Status of RSVP Clients by Site: May 2009-November 2010

Discharge Reason	Total RSVP (n=52)*	
Family reunification	19.2	
Transfer of guardianship	9.6	
Goals met/fully compliant	3.8	
Moved	15.4	
Incarcerated	5.8	
Deceased	1.9	
Non-compliant for 2 reporting periods	36.5	
Client declined further services	7.7	
*2 clients found not to need treatment		

## Cumulative RSVP Child Exit Outcomes by Site: Judicial, May 2009-November 2010

Child Exit Outcomes	Bridgeport (n=58) %	New Britain (n=48) %	Willimantic (n=29) %	Total RSVP (n=135) %
Exited Care	37.9%	16.7%	31.0%	28.9%
Reason:				
Reunification	81.8%	87.5%	100.0%	87.2%
Transfer of guardianship	18.2%	12.5%%	0.0%	12.8%
Mean number of days to exit	156 days	158 days	186 days	163 days