

CFP Evaluation Results and Recommendations

A total of 225 Family Partners have been certified by Via Hope since 2011 and were reachable via a valid email address. A total of 75 responded to the survey (cooperation rate = 33.33%).

Results

Demographics

Respondents represented:

- 42 zip codes and 32 counties across Texas
- 27 of the 39 existing LMHA service areas

Respondents were:

- Primarily female (98.5%)
- Non-Latino (65.7%), Hispanic or Latino (34.3%)
- White/Caucasian (72.1%), Black or African American (25.6%), two or more races (2.3%)
- Educated at the high school level (24.6%), some college (32.3%), Associate's degree (7.7%), Bachelor's degree (24.6%), post-college training (10.8%)

Household characteristics

- Most respondents lived with at least two other people in their home (79.1%).
- Most respondents were the primary caretaker for their child(ren) (85.1%).
- Most respondents lived with this child (83.6%).

Training background

- Most respondents were currently certified by Via Hope (93.8%).
- Most respondents had received additional training as a Family Partner by their employer (65.7%).
- However, fewer than half had shadowed another Family Partner as a part of their employee training (48.5%).
- This year, 10 respondents (15.4%) were from the most recent CFP cohort (2017).

Employment status

- Most respondents were currently employed full-time (75.8%) or part-time (7.8%).
- Few were contract employees (4.5%), volunteers (1.5%), or unemployed (6.0%).
- Average salary was \$14.94 (SD = \$4.63).
- Most respondents worked at LMHAs (76.2%).
- Average tenure at their organization was 5.14 years (SD = 5.0 years).
- Most respondents reported working 40 hours/week (65.6%). However, many worked more than this (13.1%).

Characteristics of employment

- Most respondents reported that their employer does have expectations for productivity (77.4%).
- Respondents reported that these expectations included an average of 6% direct contact hours (SD = 2.9%). Many reported that only face-to-face hours counted towards productivity expectations (81.3%).
- Respondents reported that they work at an organization with an average of 5 other Family Partners (SD = 5.5).

Understanding and supportiveness of the Family Partner role

- Respondents rated their supervisor's understanding (M = 8.2, SD = 2.6) and supportiveness (M = 8.8, SD = 2.1) of the Family Partner role very favorably.
- Respondents rated their non-Family-Partner colleagues as slightly less understanding (M = 7.2, SD = 2.62) and supportive (M = 7.8, SD = 2.5) of their roles as Family Partners.

Recommendations

For training organizations.

- 1) Develop new trainings and further develop existing trainings
 - Webinar on Help and Hope after trauma.
 - Examine this report and last year's and develop more trainings on the top areas of focus.
 - Develop reference list of additional trainings.
 - Poll participants at endorsement trainings to develop additional content.
 - Develop certification program and endorsement trainings in Spanish.
 - Develop a resource list for CFPs who want to learn advocacy skills.
 - Online trainings for people who cannot travel and archiving past webinars for on demand viewing
 - Implement a training for non-peer staff/interdisciplinary teams on the family partner role and how to integrate peers successfully (this training has already been developed and is awaiting implementation)
- 2) Help with the current retention and expansion of the profession
 - Ongoing effort to increase the geographical range of CFP training
 - Proposal "to get peer specialists in more places than just LMHAs" ... Respondent reported they wished there were more opportunities outside LMHAs
 - Endeavor to continue recruiting diverse and representative family partners
- 3) Develop mentorship program and additional educational opportunities for supervisors
 - Increase number of CFPs who are able to shadow a more experienced Family Partner (may not always be possible if they are the first family partner at their organization). Via Hope is examining a process to introduce a mentoring program for CFPs. Consideration is being given to how this will help or affect employees at agencies with only one or two CFPs, that are not able to offer mentoring to their CFP employees for these reasons. Consideration is being given to how mentoring will occur and whether or not shadowing will be involved.
 - Develop and provide family partner supervisor training

For state agencies or other entities.

- Develop resource list for trainings
- Develop community for CFPs. Could be developed and supported by the state, organizations, or grassroots efforts.
- Increase funding opportunities for CFPs, e.g., Peer Provider Medicaid billing

For employers.

- Review this report to see areas of recovery orientation that can improve.
- Review this report to see areas of supervision that need to be addressed more frequently, including career advancement and more time for discussion of skills and employee well-being and self-care.
- Review job descriptions
- Discuss opportunities for career advancement
- Discuss opportunities for additional training
- Attend supervisor training
- Provide information on peer services and the role of Family Partners for all new employees
- Model value and respect for the CFP role
- Consider opportunities to involve family partners in roles that increase the voice of families, supporting the agency in becoming family-driven at services and organizational levels. This could include identifying families to serve in decision-making roles in the agency, enhancing family leadership skills, and gathering feedback from families in care.

