

## **Ecosystemic Structural Family Therapy (ESFT) Questions & Answers**

- 1. I am inquiring about when the projected start date for this training will be? I have several candidates in mind; however, they are completing the PCIT training as well, so wondering about the start date.**

The “kick off” meeting will occur in September, and training will begin in October 2017. Training will be held approximately one day per month throughout the year. Official training dates have not yet been determined.

- 2. Can this training be implemented in residential facilities?**

The goal of the training is to build a family systems continuum across levels of care. Priority will be given to applications from CBH in-network providers who are already trained in ESFT or programs with in-depth family systems training (e.g. Family Based Services [FBS] or trained in CBH-funded ESFT in outpatient or BHRS) and wish to expand family systems therapy into other community-based levels of care (e.g. outpatient, Behavioral Health Rehabilitative Services [BHRS], children’s crisis services).

Unfortunately, the RFA posted on the DBHIDS website includes the following error on page 15:

“Please indicate if your agency has a current license from the Department of Human Services (DHS) for outpatient or residential levels of care.”

This RFA is open to community-based levels of care only as described above.

- 3. Is ESFT as effective in an office setting as in the home?**

Yes. Activities that promote attachment, communication, and connection can be facilitated by an ESFT therapist in an office setting. ESFT clinicians are encouraged to use creativity in their interventions in the office setting.

- 4. Can ESFT be implemented with children autism spectrum disorders?**

Yes. ESFT is a “doing” therapy rather than a “talking” therapy and targets many of the core areas impacted by autism spectrum disorders including communication, attachment, intellectual functioning, and relationships.

- 5. Do you give remedial instruction to clinicians who come into the initiative later and are new to the ESFT model?**

The identified supervisors and clinicians are expected to attend all designated training days throughout the three (3) year training. We recognize that staff changes are a reality

and expect supervisors or clinicians who leave the training program to be replaced. New supervisors and clinicians will be integrated into the training immediately upon joining the program. Additionally, agencies are encouraged to consider their own process for orienting and integrating staff into ESFT, along with support from the ESFT trainers.

**6. What happens if you only have one supervisor and two clinicians?**

Agencies should have two (2) supervisors and four (4) clinicians participate in the ESFT training. Exceptions may be considered on a case-by-case basis. Applicants proposing a different number of supervisors or clinicians should detail the reasons within the RFA application, including explaining how the program will be sustained operationally and clinically with the proposed number of supervisors and/or clinicians. Each agency's unique circumstances will be taken into consideration.

**7. Is there any reimbursement for clinician time dedicated to the training?**

There is no reimbursement for clinician time in training.

**8. Will the training offer CEUs to different licensures?**

Yes, the training will offer CEUs to the following licensures: LSW, LCSW, LPC, PCB, psychologists, and the general CEUs for unlicensed individuals regardless of education level. Continuing Education credit will be given for each training day.

**9. Is the EBP Designation mandatory?**

Providers who participate in this initiative are expected to develop capacities and procedures during the course of the initiative to enable them to receive the EBP Program Designation at the end of the initiative via an EBP Program Designation application. Providers are expected to demonstrate sustained capacity for the ESFT program via annual resubmission of the EBP Program Designation Application. Achieving and maintaining EBP Program Designation status will be required for inclusion in DBHIDS rosters of EBP providers and for any financial incentives that may become available to EBP providers.