![RPG Regional Partnership Grants logo]

Lessons from the Regional Partnership Grants Program:

What Works for Families

TABLE OF CONTENTS

Drawing on nearly two decades of implementation, the Regional Partnership Grants (RPG) Program has revealed critical lessons about what works to improve outcomes for families affected by substance use disorders (SUD). This brief covers five key ingredients of collaborative practice shown to enhance service delivery, improve engagement with families, and strengthen family-serving systems.

Recipe for Effective Collaborative Practice

Servings: Countless families and communities served

Prep Time: Ongoing

Yield: Long-term effects

Difficulty Level: Varies (shared effort required)

Ingredients:

1. Shared mission, vision, and goals
2. Formalized structures and agreements
3. Regular communication and trust
4. Integrated service delivery
5. Data-informed decision making

This brief:

- Identifies key collaborative strategies that strengthen partnerships and improve coordination
- Provides examples of RPG recipients who have successfully advanced their cross-systems collaboration
- Highlights considerations for sustaining policy and practice changes that support successful collaboration

The resource is designed to inform the planning, implementation, and sustainability efforts of current and future RPG recipients and their cross-system partners, including child welfare agencies, SUD treatment providers, dependency courts, and family treatment courts (FTCs). Using various sources (e.g., Reports to Congress, site-level experience, technical assistance efforts), it provides lessons across multiple RPG cohorts to help program administrators, supervisors, and cross-system leaders implement proven collaborative strategies, policy innovations, and practice enhancements that consistently lead to better outcomes for children and families affected by SUDs. The brief includes key insights, real-world examples, and sustainability lessons to strengthen cross-system collaboration and drive meaningful, lasting change for families.
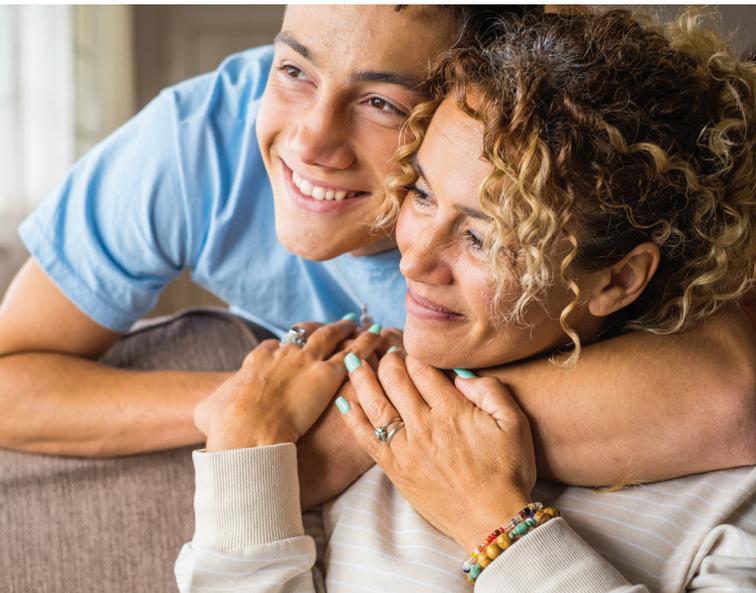
INTRODUCTION AND OVERVIEW

The Children's Bureau seeks to improve the safety, permanency, and well-being of children through leadership, support for necessary services, and productive partnerships with states, tribes, and communities.

The Regional Partnership Grants (RPG) Program, administered by the Administration on Children, Youth and Families (ACYF), Children's Bureau, aims to improve safety, permanency, and well-being outcomes for children affected by parental SUDs. Initially authorized by the Child and Family Services Improvement Act of 2006 (P.L. 109–288), and most recently reauthorized under the Supporting America's Children and Families Act of 2024 (P.L. 118–258).

Since 2007, the Children's Bureau has awarded seven rounds of RPG funding which include 127 projects across 41 states, including Tribal communities and has served tens of thousands of children, parents, and families.[1,2,3]

59,000+ CHILDREN   **48,000+ ADULTS**   **43,000+ FAMILIES**

These innovative projects are designed to promote interagency collaboration and integration of services to improve the well-being, permanency, and safety outcomes of children who were in, or at risk of, out-of-home placements due to parental SUDs. This involves implementing regional partnerships among child welfare, SUD treatment, and related organizations to enhance and expand effective services for children, parents, and families.

RPG projects have demonstrated positive outcomes:[4]

- Increased SUD treatment completion among adults
- Reduced substance use severity
- Fewer removals of children from the home, comparing the year before RPG enrollment to the year after enrollment
- Increased rates of reunification and permanency when removal does occur, comparing the year before RPG enrollment to the year after enrollment
- Improved child safety

Beyond aligning services with the unique needs of families and using data to inform implementation and continuous improvement, RPGs have underscored another important lesson: building effective collaboration—particularly through the development of multi-level, cross-system partnerships—is the cornerstone to improving outcomes for families. These efforts have contributed to more coordinated service delivery, improved engagement with families, and sustainable practices.[5,6,7]
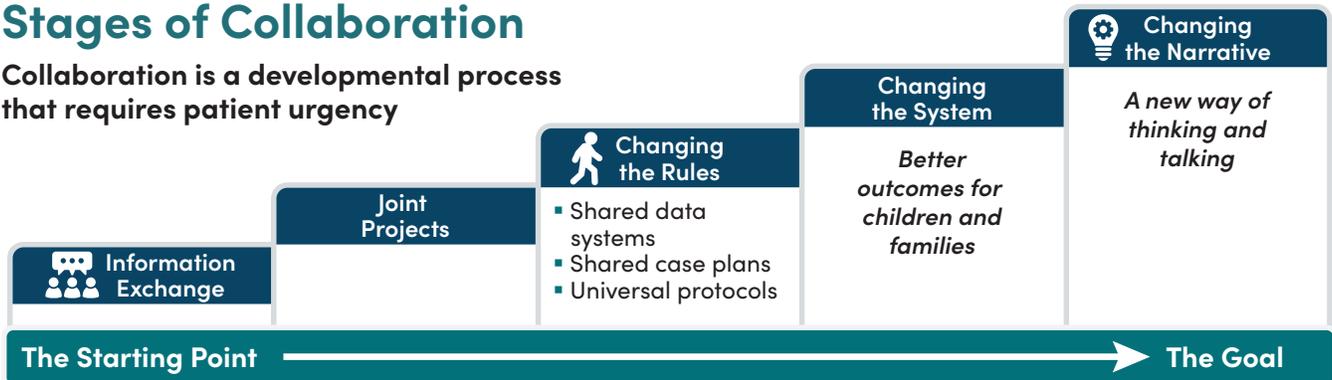
4

KEY INGREDIENTS FOR EFFECTIVE COLLABORATIVE PRACTICE

Collaboration is not a check box. It is an intentional, developmental process that takes time. It begins with building a shared understanding among partners, aligning goals and formalizing structures, and deepens as partners integrate services and use data to drive decisions. Effective collaboration requires ongoing investment, adaptation, and commitment to ensure success and longevity.

Stages of Collaboration

Collaboration is a developmental process that requires patient urgency

- **Information Exchange**
- **Joint Projects**
- **Changing the Rules**
  - Shared data systems
  - Shared case plans
  - Universal protocols
- **Changing the System**
  - *Better outcomes for children and families*
- **Changing the Narrative**
  - *A new way of thinking and talking*

The Starting Point ⟶ **The Goal**

(Children and Family Futures, 2011)

Source for graphic: Children and Family Futures. (2011). The collaborative practice model for family recovery, safety, and stability.

Across RPG recipients, five key ingredients and associated strategies were identified as foundational to successful collaboration.[8,9,10,11] Evidence from RPG recipients indicates that when these ingredients are effectively implemented, families are more likely to experience improved outcomes related to safety, permanency, and SUD recovery.[12,13]

These ingredients also reflect proven strategies included in the *Comprehensive Framework to Improve Outcomes for Families Affected by Substance Use Disorders and Child Welfare Involvement*, developed over decades of experience working with hundreds of collaborative partnerships serving families.

This section defines each key ingredient in the context of RPG projects and explains why they are critical for improving outcomes for children, parents, and families. It highlights practical examples of how RPG recipients put these ingredients into action and demonstrates how each one is essential for sustaining and scaling these efforts over time.

> Scaling is the process of growing what works. It is about expanding the reach of proven strategies to serve more families, improving quality and fidelity to process, and embedding proven practices and policies into everyday operations. Scaling is more than increasing the size of an operation, it is about building shared capacity and improving capabilities across systems resulting in sustainable change.

Key Insights	Real-World Examples	Sustainability Lessons

INGREDIENT #1: SHARED MISSION, VISION, AND GOALS

Having a unified mission, vision, and set of goals ensure partners are aligned in their purpose—to improve outcomes for children and families affected by substance use. This alignment enhances decision-making, resource allocation, and service delivery.

During implementation, a Round 4 site expanded their definition of *family* to better reflect the caregiving realities of the communities they served. Guided by a shared mission and vision, the collaborative team aligned on the principle that eligibility should extend beyond parents to include extended kin (e.g., aunts, uncles, grandparents) who play an active role in caring for children. This shift broadened access for families and supported conditions that were associated with strong engagement, high satisfaction, and solid retention.*

A shared mission, vision, and set of goals provide collaborative teams with a strong foundation for maintaining alignment, particularly through staff turnover or leadership changes. In addition to guiding long-term planning, these elements enable teams to be responsive to evolving family needs, policy changes, new legislation, and insights from data and evaluation findings.

INGREDIENT #2: FORMALIZED STRUCTURES AND AGREEMENTS

Development of Memoranda of Understanding (MOUs), data sharing agreements, and governance bodies serve to: 1) clarify roles, responsibilities, and expectations; 2) develop solutions to practice-level barriers; and 3) institutionalize collaborative practices and reduce reliance on informal relationships.

A Round 5 treatment agency formalized their collaboration through a partnership board that operated under documented Rules of Operation. In addition, they secured a Data Use Agreement with the state child welfare agency to enable data sharing. The implementation of these structures clarified roles and reinforced accountability by creating formal expectations for participation, information sharing, and progress monitoring to move their collaboration beyond informal relationships to shared responsibility for outcomes. These structures supported stronger referral pathways, data-driven decision-making, and the implementation fidelity that contributed to the project's positive child and family outcomes.*

Formalized structures and agreements are meant to embed collaboration into organizational and system infrastructures, making changes and improvements more durable and less vulnerable to changes in personnel.

---

*The sources of these findings are recipient Semi-Annual Progress Reports and Final Progress Reports.

Resource Spotlight

The *RPG Technical Assistance Brief Series* includes three resources that highlight the importance of relationships, resources, and results in effective and lasting collaboration.

- *RPG Technical Assistance Brief 1: Practice-Level Strategies to Create Systems-Level Change: Relationships* provides implementation strategies, considerations, and examples of RPG lessons for strengthening partnerships and cross-systems collaboration to improve outcomes for children, parents, and their families.

- *RPG Technical Assistance Brief 2: Practice-Level Strategies to Create Systems-Level Change: Resources* outlines key elements of successful resource development, sustainability considerations, and strategies for building cross-system collaboration to enhance family-centered treatment and services.

- *RPG Technical Assistance Brief 3: Practice-Level Strategies to Create Systems-Level Change: Results* highlights examples of successes and challenges in using results to sustain systems change by RPG projects.

INGREDIENT #3: REGULAR COMMUNICATION AND TRUST

Trust and communication are foundational to effective cross-system collaboration. Structured interactions such as standing meetings with shared agenda development, conflict resolution processes, cross-training, and onboarding protocols, create consistent opportunities for partners to stay informed, aligned, and engaged. These practices foster transparency, understanding, and reinforce the shared commitment to improving outcomes for children, parents, and family members.

A selected goal for one Round 7 child and family serving agency is to improve the capabilities of the partners by increasing the awareness and significance of trauma-informed care and improve support for families through evidence-based practice changes in service delivery. The site does this by strengthening its collaborative relationships through consistent community outreach and involvement, and comprehensive training sessions twice a year for RPG partners and other agencies that interact with youth, including schools, law enforcement, and health care providers on topics such as human trafficking prevention and awareness, available local shelter and services, and foundational SUD education. These opportunities promote shared understanding, reinforce trust, and ensure partners remain aligned in supporting positive outcomes for children and families. Although it is too soon to measure quantifiably, site staff and partners report improved collaboration, coordination, and ability to advocate on behalf of youth due to RPG and the training offered.*

Strong relationships and consistent, structured interactions make collaborative teams more resilient to challenges such as competing priorities and organizational change. Without trust, partners may disengage or block progress. Collaboration is a developmental process and sustaining it requires intentional investment in relationships that are actively cultivated at all levels.

---

* The sources of these findings are recipient Semi-Annual Progress Reports and Final Progress Reports.

INGREDIENT #4: INTEGRATED SERVICE DELIVERY

Integrated service delivery and information sharing help ensure families receive coordinated, timely, and comprehensive support across multiple systems. Strategies include co-location of staff, joint case planning, or other protocols that help improve communication and coordination of service delivery.

Staff Co-Location

A Round 4 managing entity responsible for clinical quality oversight of substance use, mental health, and co-occurring disorders co-located a "behavioral health consultant" (BHC) within both the child protection and child welfare agencies. The BHCs facilitate training, case consultation, and ongoing Motivational Interviewing coaching, strengthening consistent, trauma-informed engagement across systems. This integrated support structure contributed to improved family outcomes, including stronger engagement in services, more effective case planning, and higher rates of successful, stable child welfare case closure.*

Joint Case Planning

A Round 5 multi-service nonprofit agency operated a residential treatment program in their state. Program staff and child protective services workers engaged in regular joint case planning meetings to share treatment progress, identify family needs, and focus on reunification efforts. These meetings strengthened cross-system relationships and improved coordination between treatment and child welfare teams.*

Universal Screening

A Round 4 site implemented a universal screening protocol across its obstetric clinics. This approach enabled early identification of substance use and facilitated timely, coordinated referrals to the RPG program where pregnant women received a range of services including specialized prenatal care through group-based sessions, postpartum parenting support delivered through SafeCare©, and peer recovery support with case management to navigate treatment and community resources. Patients engaged in more prenatal visits and were far less likely to test positive for illegal substances at the time of delivery compared to similar patients receiving standard care, demonstrating the value of universal screening and integrated coordinated care in improving maternal engagement and birth outcomes.*

Service integration and information sharing reduce duplication, improve efficiency, and build a more capable, comprehensive, and responsive system of care. These collaborative practices support long-term sustainability by demonstrating their effectiveness through improved service delivery efficiencies and improved outcomes for children, parents, and families.

*The sources of these findings are recipient Semi-Annual Progress Reports and Final Progress Reports.

INGREDIENT #5: DATA-INFORMED DECISION MAKING

Data-informed decision making is the intentional use of quantitative and qualitative data to guide program design, service delivery, and continuous quality improvement (CQI). It enables the collaborative team to monitor progress, identify gaps, assess effectiveness, and make meaningful adjustments.

A Round 1 treatment agency and their partners committed themselves to a rigorous evaluation and cost analysis. By tracking progress, outcomes, and return on investment, the collaborative team successfully advocated for policy change, resulting in the passage of a state senate bill that secured ongoing state funding to sustain and replicate statewide the entire collaborative model that included emergency and transitional housing, developmental screening and services for children, and family-centered case management.*

Data are essential to demonstrating effectiveness, securing funding, and informing policy and practice changes. When data systems and CQI processes are integrated into operations, they contribute to long-term sustainability by making programs more responsive, accountable, and outcome driven.

SUSTAINABILITY

With the key ingredients of effective collaboration established, the next step focuses on how collaborative teams can leverage these efforts for long-term sustainability of policies, practices, and interventions. Sustainability is not the final phase of implementation; it is a process that begins at project inception and focuses on institutionalizing practices that improve outcomes for children, parents, and family members. Sustainability is achieved when cross-system strategies are embedded into daily operations. The following example highlights how an RPG recipient put the five key ingredients into action and contributed to systems change.

Institute for Health and Recovery, Inc (IHR) (MA, Round 5) partnered with the Massachusetts Department of Children and Families (DCF) and Bureau of Substance Addiction Services (BSAS) to implement the Family Recovery Project (FRP), demonstrating how the five key ingredients can be operationalized. IHR engaged state and local leaders early to align priorities and outcomes, formalized roles and responsibilities through MOUs and data sharing agreements, and built trust through cross-training and structured, standardized communication at multiple levels, including weekly clinical meetings and quarterly leadership reviews. Services were integrated through shared caseloads and joint provision of services by clinicians and peer recovery specialists, supported by cross-training in evidence-based practices.

RESOURCE SPOTLIGHT

The National Center on Substance Abuse and Child Welfare (NCSACW) developed the *Sustainability Toolkit: Five Steps to Build a Sustainability Plan for Systems Change* to provide collaborative teams, organizations, and programs with the tools needed for planning and implementing a sustainability approach for innovative projects. It includes a sustainability planning matrix, community mapping guide, cost analysis checklist, a sustainability assessment, and data and funding inventory templates.

---

* The sources of these findings are recipient Semi-Annual Progress Reports and Final Progress Reports.

Real-time evaluation findings informed continuous quality improvement and guided adjustments to implementation strategies. These efforts resulted in embedded evidence-informed practices, expansion from two to five service locations, and sustainability through changes in state policy that rebid contracts with provisions for peer-support.

The Sobriety Treatment and Recovery Team (START) intervention is another example of an RPG recipient demonstrating sustainable success through building a strong evidence base to secure long-term funding and policy support. This intervention was developed over time and "uses a variety of strategies to promote collaboration and system-level change within and between child welfare agencies, substance use and mental health treatment providers, the judicial system, and other family-serving entities."[14] **Kentucky Department for Community Based Services (Rounds 1 and 2)** provided START with the opportunity to rigorously test the model. RPG funding and support was instrumental in generating the level of evidence required to earn a "Supported" rating on the Title IV-E Prevention Services Clearinghouse. This demonstrates that RPG can serve as a launchpad for developing, refining, and validating evidence-based interventions.

TAKE ACTION

Members of the collaborative team may be at different stages of developing effective collaboration. Whether teams are just starting or already established, there are opportunities to enhance their partnerships. The following provides guiding questions and actionable next steps to strengthen cross-system collaboration, which is essential to improving outcomes for children, parents, and families.

SHARED MISSION, VISION, AND GOALS

How have we engaged partners in shaping a shared mission, vision, and definition of success?

- Convene all partners to collaboratively develop shared mission and vision statements and establish a common definition of success supported by specific, measurable goals and objectives
- Implement a standardized process to review and update the mission, vision, and goals, maintaining alignment with partners' priorities and identifying new partners to help meet emerging family needs

FORMALIZED STRUCTURES AND AGREEMENTS

What structures or agreements are currently supporting our collaboration?

- Develop MOUs that clearly define the roles, responsibilities, and expectations of each partner to ensure transparency and accountability
- Build a governance structure including a Steering Committee comprised of representatives from all partner agencies to guide planning, implementation, operations, and ongoing collaboration and decision-making

REGULAR COMMUNICATION AND TRUST

What communication practices are helping build trust among partners?

- Establish communication practices such as consistent meetings, collaborative agenda development, cross-training, and team retreats to build trust and enhance teamwork
- Use a tool such as the *Collaborative Values Inventory* to identify and understand both shared and differing values among partners, promoting more effective collaboration

INTEGRATED SERVICE DELIVERY

In what ways are our services coordinated across agencies and what opportunities exist to improve integration?

- Map existing services to identify overlaps, gaps, and opportunities for service integration across partner organizations
- Develop communication protocols including what information will be shared across agencies, who will receive it, how often it will be shared, and for what purpose

DATA-INFORMED DECISION MAKING

How are we using data to inform our decisions and improve outcomes across systems?

- Identify a common set of agreed-upon outcome indicators to monitor program success
- Create a data dashboard to regularly review outcomes with all partners and collaboratively identify opportunities for program improvement

RESOURCES FOR CONTINUED LEARNING

- *Building Hope for Families Affected by Substance Use and Mental Health Disorders: A Blueprint for an Effective System of Care to Promote Lasting Recovery and Family Well-Being* describes concrete strategies collaborative teams can use to enhance the system of care while improving outcomes for families affected by substance use and mental health disorders.
- *Collaborative Values Inventory* is a tool used to assess the extent to which collaborative team members share ideas about values underlying their collaborative efforts.

REFERENCES

1 Children and Family Futures. (2012). *Targeted grants to increase the well-being of, and to improve the permanency outcomes for, children affected by methamphetamine or other substance abuse: Fourth annual report to Congress.* Prepared for the U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau.

2 Children and Family Futures. (2013). *Regional Partnership Grant (RPG) Program: Final synthesis and summary report.* Prepared for Administration on Children, Youth and Families, Children's Bureau.

3 *RPG grantee semi-annual progress reports through April 2025.*

4 U.S. Department of Health and Human Services, Administration for Children & Families, Administration on Children, Youth & Families, Children's Bureau. (2025). *Regional Partnership Grants to increase the well-being of, and to improve the permanency outcomes for, children affected by substance abuse: Eighth report to Congress.*

5 Children and Family Futures. (2012). *Targeted grants to increase the well-being of, and to improve the permanency outcomes for, children affected by methamphetamine or other substance abuse: Fourth annual report to Congress.* Prepared for the U.S. Department of Health and Human Services, Administration for Children and Families, Administration on Children, Youth and Families, Children's Bureau.

6 Children and Family Futures. (2013). *Regional Partnership Grant (RPG) Program: Final synthesis and summary report.* Prepared for Administration on Children, Youth and Families, Children's Bureau.

7 U.S. Department of Health and Human Services, Administration for Children & Families, Administration on Children, Youth & Families, Children's Bureau. (2025). *Regional Partnership Grants to increase the well-being of, and to improve the permanency outcomes for, children affected by substance abuse: Eighth report to Congress.*

8 Boles, S., Young, N., Dennis, K., & DeCerchio, K. (2012). The Regional Partnership Grant (RPG) Program: Enhancing collaboration, promising results. *Journal of Public Child Welfare, 6*(4), 482–496.

9 National Center on Substance Abuse and Child Welfare. (2023). *Building hope for families affected by substance use and mental health disorders: A blueprint for an effective system of care to promote lasting recovery and family well-being (Part 1).* https://ncsacw.acf.hhs.gov/files/building-hope-blueprint-part1.pdf

10 National Center on Substance Abuse and Child Welfare (2023). *Building hope for families affected by substance use and mental health disorders: A blueprint for an effective system of care to promote lasting recovery and family well-being (Part 2).* https://ncsacw.acf.hhs.gov/files/building-hope-blueprint-part2.pdf

11 *RPG grantee semi-annual reports through October 2019.*

12 National Center on Substance Abuse and Child Welfare. (2023). *Building hope for families affected by substance use and mental health disorders: A blueprint for an effective system of care to promote lasting recovery and family well-being (Part 1).* https://ncsacw.acf.hhs.gov/files/building-hope-blueprint-part1.pdf

13 Children and Family Futures. (2023). *Comprehensive framework to improve outcomes for families affected by substance use disorders and child welfare involvement.*

14 Children and Family Futures. (n.d.). Sobriety Treatment and Recovery Teams (START). https://www.cffutures.org/start/

CONTACT US

Email NCSACW at
ncsacw@cffutures.org

Visit the website at
https://ncsacw.acf.gov/

Call toll-free at
866.493.2758

National Center on Substance Abuse and Child Welfare

Children's Bureau

SAMHSA
Substance Abuse and Mental Health Services Administration