



Myth Busters

Myth 1 - START Caseworkers can never hold a mixed caseload (START and non-START cases).

START model fidelity expects caseloads to be comprised solely of START cases, but we understand this takes time to achieve and there may be circumstances that prolong achieving this goal. The following are understandable circumstances:

- When a Caseworker is onboarding to START, they may transition with non-START cases that close or transfer as time passes.
- During staffing challenges, a START caseworker may be asked to assist with non-START cases to lighten the load of others.
- There are some extremely small agencies where a full START caseload may be difficult to attain.

These situations are permissible. We encourage you to discuss your specific situation with your START TA consultant to jointly create a plan that works for the agency while working towards model fidelity. For further information, please refer to the *Transitioning to a Dedicated START Caseload* document.

Myth 1.5 - START Family Peer Mentors can never hold a mixed caseload (START and non-START Cases) or work part-time at the PCSA.

START model fidelity expects Family Peer Mentors to work full-time for START and carry a caseload comprised solely of START cases. However, we understand this takes time to achieve and there may be circumstances that prolong achieving this goal. Similarly to the above myth, Family Peer Mentors can transition to a full caseload slowly over time and some specific circumstances may require creative solutions. We encourage you to discuss your specific situation with your START TA consultant to jointly create a plan that works for the agency while working towards model fidelity.

Myth 2 - The START team can never accept cases with risk factors including domestic violence, mental health concerns, or parental incarceration.

Cases with risk factors in addition to parental SUD (such as domestic violence, mental health diagnoses, low cognitive functioning, developmental delays, and/or incarceration) should be evaluated on a case-by-case basis to determine appropriateness for Ohio START. None of these risk factors automatically prohibit participation in START.

- First, the START team should look at each case and determine if SUD is the primary risk factor.
- If the primary risk factor is SUD, then the team needs to investigate and determine (as best you can in the early stage of the case), if the SUD concerns are rectified, will the children be safe with the parent?
- If the answer to both questions is yes, the case may be appropriate for START.

For further information, please refer to the *Ohio START Case Eligibility and Selection Criteria* document.

Myth 3 - After meeting the “Minimum Work Guidelines” initial 60-day contact standard, the Caseworker may reduce to the once monthly family visit standard for the remainder of the case.

Per the Ohio START Minimum Work Guidelines (MWGs), Ohio START caseworkers must make weekly face-to-face visits with the parent for the first 60 days; two of the weekly contacts per month occur in the home with the parent. After 60 days and until case closure, there must be at least two face-to-face visits per month (bi-weekly) with the parent.

Myth 4 - Ohio START Caseworkers and FPMs must complete all required training prior to serving their first START family.

Foundations 4 is the only training that must be completed by the START Caseworker and FPM prior to serving families. This training is offered once per quarter. On the months it is not offered, Ohio START provides an abbreviated version known as *Introduction to START*. Staff who complete *Introduction to START* will fulfill the requirement until the Caseworker or FPM can attend the full *Foundations 4* training. All other required training should be attended as soon as possible after hiring but are not required before serving families. Staff can register for training at <https://ohiostart.org/training-assistance/>.

Myth 5 - All START cases must be accepted into START within 14 days of agency screen-in.

The goal is for families to be identified and referred to Ohio START within 14 days or less of the PCSA screening in the CA/N report. If circumstances prohibited the referral within 14 days, a case may be referred and accepted up to 30 days from the date of the screened in report. No referrals may be accepted after 30 days. START model fidelity expects that 75% of all START cases are accepted within 14 days.

Myth 6 - Direct Line Meetings discuss the same items as Steering Committees but with different audiences.

The purposes of the Steering Committee, Direct Line and Case Review meetings are all different.

- **Steering Committee Meetings:** The Steering Committee is comprised of *directors, managers, and supervisors from children services, SUD/MH treatment and/or the FPM hiring entity, and community partners*. This group guides the implementation of START and related initiatives, sets guidelines, monitors progress, and addresses barriers. This committee addresses issues gathered from Direct Line meetings on system and service delivery challenges, service gaps, and needs of front-line staff.
- **Direct Line Meetings:** Direct Line meetings are working meetings among the *direct-line staff* who are serving START families. The focus is resolution of service-related issues and barriers; improving communication, information sharing, and networking among team members; provision of engagement and cross-training among system partners; and reinforcing and spreading START practice. These topics are intended to be ongoing discussions. They do not replace case reviews.
- **Case Review Meetings:** Each case must be formally consulted and documented monthly with the *children services supervisor, caseworker and FPM*. The treatment provider may also participate. Case Review meetings provide a forum for children services and other agency providers to gather and collectively discuss START cases and agree on a course of action. Cross-disciplinary Case Reviews do not replace Direct Line meetings.

For further information, please refer to the following documents: *Ohio START Minimum Work Guidelines; National START Model Steering Committee Meeting Structure and Agenda Guidance; National START Model Direct Line Meeting Structure and Agenda Guidance; National START Model Case Review Meeting Structure and Agenda Guidance.*