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Children and Family Futures
September 2018



Acknowledgement

This presentation is supported by:

Grant #2016-DC-BX-K003 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice.



This project was supported by Grant #2016-DC-BX-K003 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice. The opinions, findings, and conclusions or recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect those of the Department of Justice.

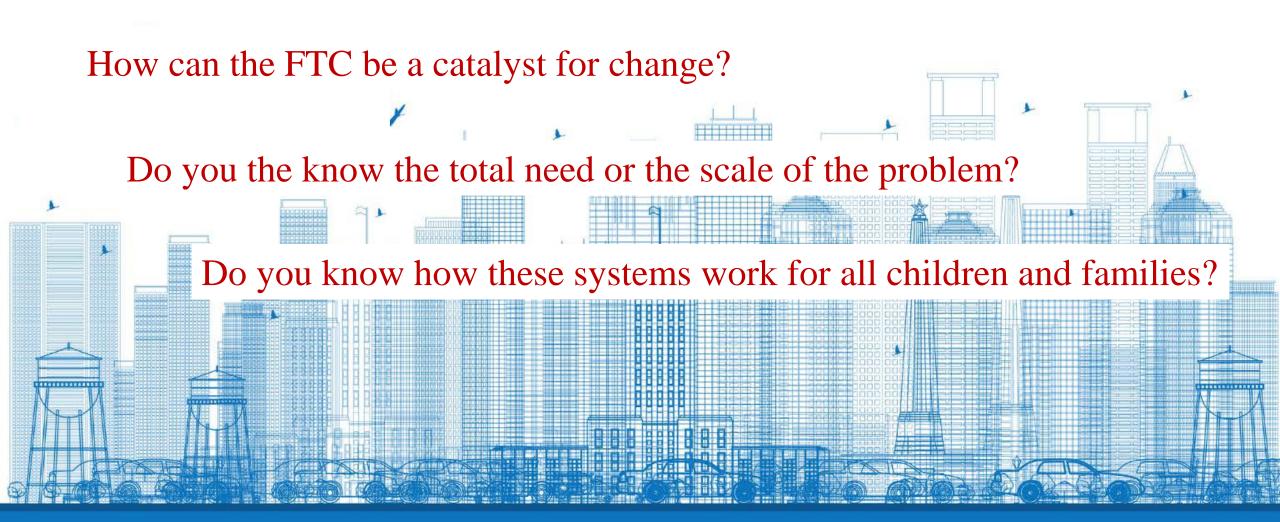
Learning Objectives

- 1. Gain an overview of the FTC model and national outcomes, and the key common practice ingredients to ensure effective practice
- 2. Learn the challenges, barriers, and solutions that have supported effective implementation of each of the Big Seven
- 3. Find out how to access training and technical assistance resources to equip you and your team



Part of the Greater Whole

FTCs are part of larger systems







Developing a Plan of Safe Care: What Your Family Treatment Court Needs to Know about Serving Pregnant and Parenting Women with Opioid Use Disorders

Family First Prevention Services Act (2018)

Makes changes to federal child welfare financing, including allowing for federal Title IV-E dollars to reimburse states for substance use and mental health prevention and treatment services for children at imminent risk of being placed in foster care and their families.

- Provisions Related to Substance Use and Mental Health Treatment for Families:
 - Reimbursement for Family Residential Substance Use Disorder Treatment
 - Use of Title IV-E Funds to Prevent Child Placement in Out-of-Home Care
 - Reauthorization of Regional Partnership Grants



National Strategic Plan For Family Drug Courts

MARCH 2017



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A Road Map for the Movement

Family Drug Court National Strategic Plan

- Ensure Quality
 Implementation
- 2 Expansion of FDC Reach
 - Build Evidence Base



Every family in the child welfare system affected by parental/caregiver substance use disorders will have timely access to comprehensive and coordinated screening, assessment and service delivery for family's success.

National Strategic Plan For Family Drug Courts



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LEADERS CALL TO ACTION!

Session Name:	
Presenter Name(s):	
During this session, I identified the fo	llowing immediate
action steps that I can take in my rol	le as a leader/champion
in my state or jurisdiction to advance	the FTC movement:

- 1)_____
- 2)_____
- 3)_____

Every attendee after every session!

Working Together Differently

What is it going to take?



To better serve more children and families

Ensure best practices

Systems Change

Session Format

Closer Look – FTC Ingredients (7)



Learning Exchange Discussion











The Need to Do Better for Families



Substance use disorders (SUDs) can negatively affect a parent's ability to provide a stable, nurturing home and environment. Most children involved in the child welfare system and placed in out-of-home care have a parent with a SUD (Young, Boles & Otero, 2007).



Families affected by parental SUDs have a lower likelihood of successful reunification with their children, and their children tend to stay in the foster care system longer than children of parents without SUDs (Gregorie & Shultz, 2001).



The lack of coordination and collaboration across child welfare, substance use disorder treatment, and family or dependency drug court systems has hindered their ability to fully support these families (US Depart. of Health and Human Services, 1999).

- System of identifying families
- Timely access to assessment and treatment services
- •Increased management of recovery services and compliance with treatment
- Improved family-centered services and parent-child relationships
- Increased judicial oversight
- •Systematic response for participants contingency management
- Collaborative non-adversarial approach grounded in efficient communication across service systems and court

How are they identified and assessed?

How are they supported and served?

How are cases and outcomes monitored?

• System of identifying families

• Timely access to assessment and treatment services

Sources: 2002 Process Evaluation and Findings from 2015 CAM Evaluation

Timely and structured screening and identification of parental substance use in child welfare cases is critical.

- 61% of confirmed drug or alcohol dependence among substantiated abuse or neglect cases are missed by front line CWS social workers (Gibbons, Barth, & Martin, 2005)
- There is no time to lose given the ASFA, recovery, and development time clocks





Who Do FTCs Work For?

Who Do FTCs Work For?

Studies show equivalent or better outcomes:

- Co-occurring mental health problems
- Unemployed
- Less than a high school education
- Criminal history
- Inadequate housing
- Risk for domestic violence
- Methamphetamine, crack cocaine, or alcohol
- Prior CWS history

What Do We Mean by Systematic Approach?

Objective & Systematic

- Clearly defined protocols and procedures with timelines and communication pathways (who needs to know what and when)
- Eligibility criteria based on clinical and legal assessments
- Match appropriate services to identified needs

Subjective & Informal

- I refer all my clients to FTC because I know the people there
- I only refer clients who really want to participate
- Let me know when you get in the program
- I prefer to refer clients who are doing well on their CWS case plan
- I refer all my clients with a drug history to the FTC

Referral into CWS Hotline

What Do We Mean by Timely? A Model for Early Identification, Assessment, and Referral

CWS Safety and Risk Assessment Referral to FTC or Appropriate LOC



AOD Screening & Assessment

Detention Hearing

Jurisdictional-Dispositional Hearing

Typical Referral to FTC or Other LOC

Warm Hand-off (at multiple points)

Status Review Hearing



Process

Screening

Assessment

Treatment

Primary Question | Tools

Is substance use a factor? Yes or No? UNCOPE, CAGE

How severe is the substance use disorder?

DSM-5 Criteria

Does level of treatment match the identified need?

ASAM Continuum of Care

Diagnosing Substance Use Disorders

The FDC should ensure that structured clinical assessments are congruent with DSM-5 diagnostic criteria

Substance Use Disorders

Substance Use Disorders

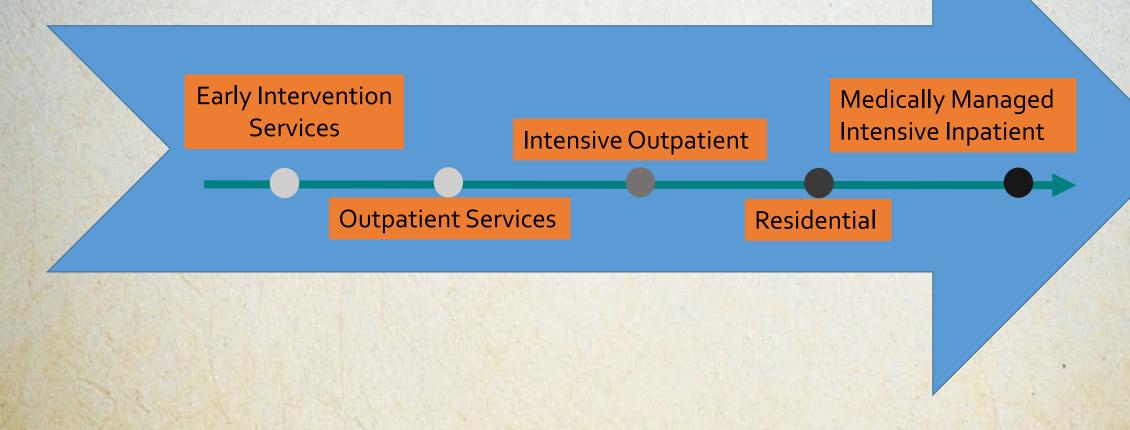
Experimental Use





DSM-5 Criteria (11 total)

Levels of Treatment Services Across A Continuum of Care



- •System of identifying families
- •Timely access to assessment and treatment services
- •Increased management of recovery services and compliance with treatment

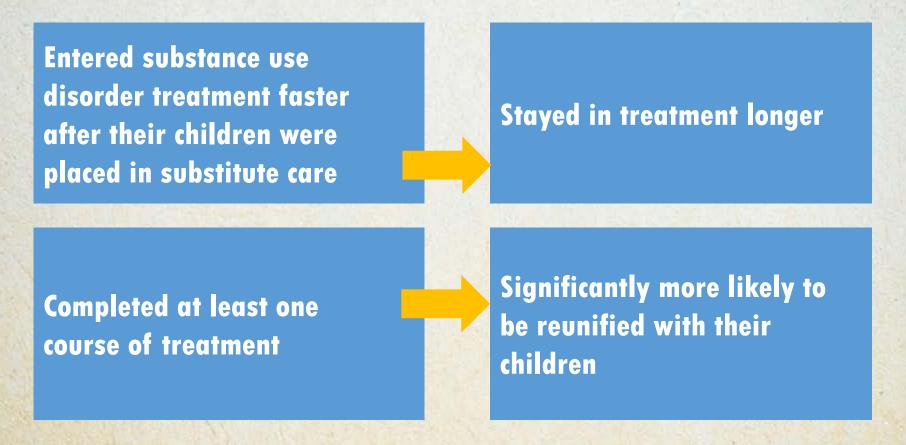


Better Outcomes for Children and Families:

- Ensure parents enter substance use disorder treatment quickly, ideally within 30-60 days of child welfare petition (Green et al., 2007)
- Retain high-need parents in treatment for at least 15 months (Green et al., 2007; Roche, 2005; Worcel et al., 2007)

Time To & Time In Treatment Matters

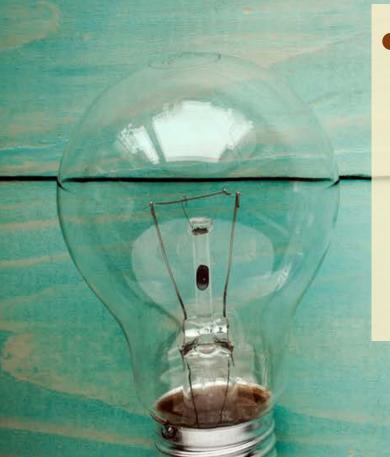
In a longitudinal study of mothers (N=1,911)



Source: Green, Rockhill & Furrer (2007)



For quality implementation



 Recovery Coaches or Recovery Specialists to provide enhanced early recovery support and engagement



Functions of Recovery Support

LIAISON

Links participants to ancillary supports;
 identifies service gaps

TREATMENT BROKER

- Facilitates access to treatment by addressing barriers and identify local resources
- Monitors participant progress and compliance
- Enters case data

ADVISOR

- Educates community; garners local support
- Communicates with FTC team, staff and service providers

Titles and Models

- Peer Mentor
- Peer Specialist
- Peer Providers
- Parent Partner

Experiential Knowledge,
Expertise

- Recovery Support Specialist
- Substance Abuse Specialist
- Recovery Coach
- Recovery Specialist
- Parent Recovery Specialist

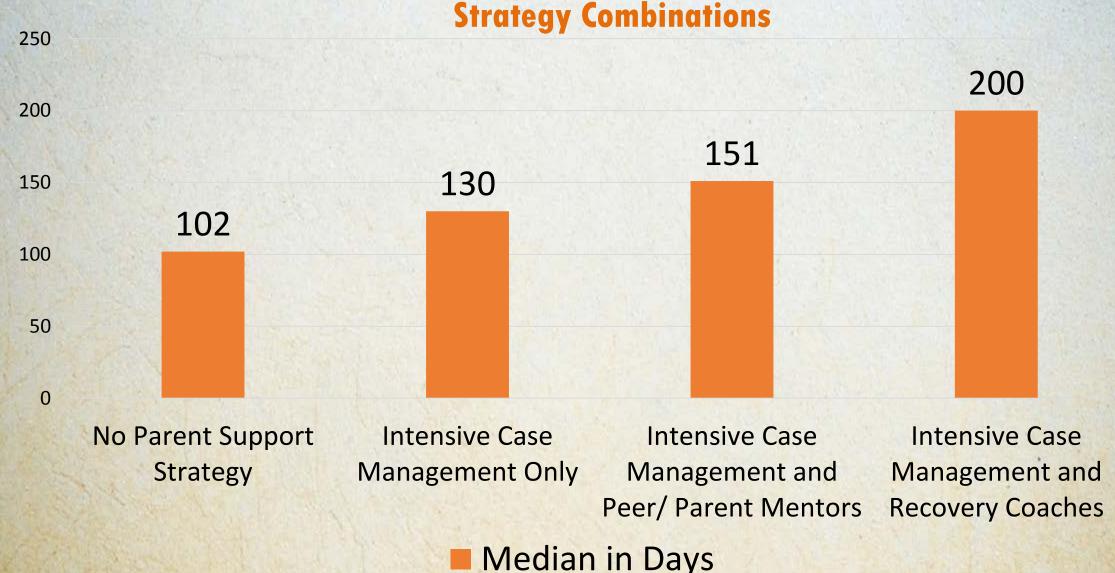
Experiential Knowledge, Expertise + Specialized Trainings

YOU NEED TO ASK:

What does our program and community need?

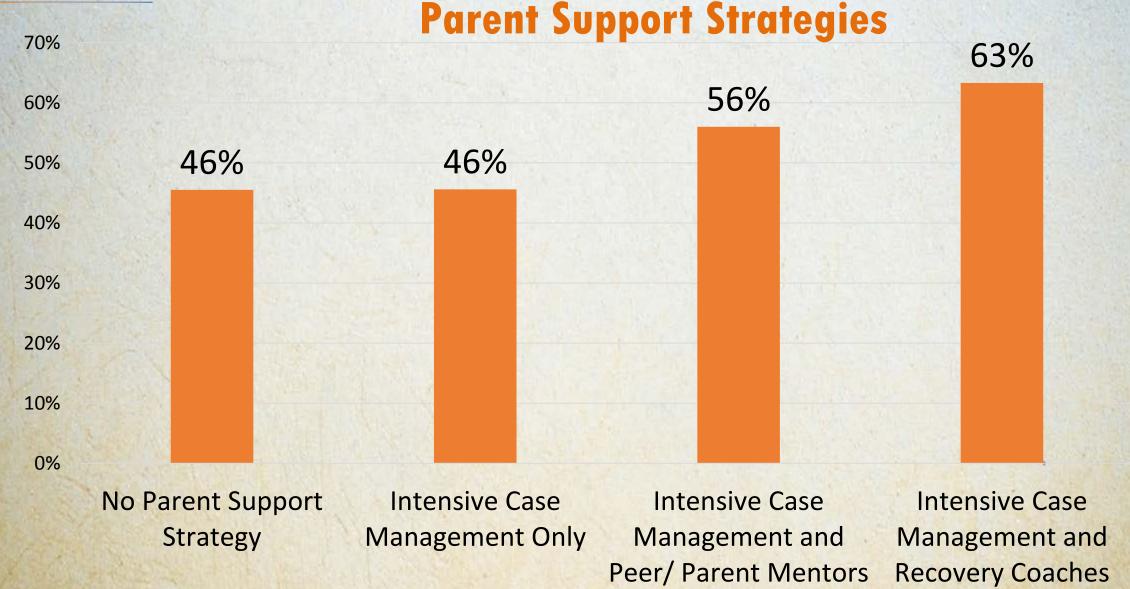


Median Length of Stay in Most Recent Episode of Substance Use Disorder Treatment After RPG Entry by Grantee Parent Support Strategy Combinations





Substance Use Disorder Treatment Completion Rate by



Recovery Support Matters

A Randomized Control Trial - Cook County, IL (n=3440)

Timely
Comprehensive
Assessment



Early Access to Treatment

Ryan, J. P., Perron, B. E., Moore, A., Victor, B. G., & Park, K. (2017). Timing matters: A randomized control trial of recovery coaches in foster care. Journal of Substance Abuse Treatment, 77, 178-184.

Recovery Support Matters

A Randomized Control Trial – Cook County, IL (n=3440)



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Practice Innovation: Recovery Support

Alameda, CA:

- All petitions reviewed for substance use by specialized trained court clerks
- Recovery Support Specialist attends hearings
- Engagement at the earliest point improves treatment outcomes



What Is Recovery?

SAMHSA's Working Definition

Recovery is a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential.



Access to evidence-based substance use disorder treatment and recovery support services are important building blocks to recovery.

Four Major Dimensions

Health

Overcoming or managing one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional wellbeing

Home

Maintaining a stable and safe place to live

Purpose

Conducting meaningful daily activities, such as a job, school, or volunteerism, and having the independence of income and resources to participate in society

Community

Having relationships and social networks that provide support, friendship, love, and hope

Resource: Quality Treatment Assessment



Understanding Substance Use Disorder Treatment in Your Community

A Draft Discussion Guide for Child Welfare and Court Professionals to Identify the Best Treatment Fit for Families Designed to help CWS and Court professionals increase their knowledge of effective treatment

Part 1: Overview of Effective Treatment – provides a brief summary of principles of effective substance use disorder treatment and comprehensive family-centered care.

Part 2: Discussion Questions – Professionals can use questions to begin ongoing dialogue with community treatment providers about operations and services. These questions will help professionals gain a better understanding of available treatment in the community and how it may (or may not) align with their clients' needs.



Length of Stay in Treatment — Why It Matters

- Research shows that clients with severe substance use disorders require three months (90 days) in treatment to significantly reduce or stop their drug use and that the best outcomes occur with longer durations of treatment
- For families involved in child welfare due to a parent's substance use disorder, treatment retention and completion are the strongest predictors of reunification

(Green, Rockhill, & Furrer, 2007; Marsh, Smith, & Bruni, 2010)

View the Recorded Webinar!

Early Screening & Assessment



How Effective Family Drug Courts Match Service to Need

Includes Team
Discussion Guide!

Visit: www.familydrugcourts.blogspot.com

Important Practices of FTCs

- •System of identifying families
- Timely access to assessment and treatment services
- •Increased management of recovery services and compliance with treatment
- Improved family-centered services and parent-child relationships



Child wellbeing occurs in the context of relationships

Adult recovery
should have a
parent-child
component

FTC Practice Improvements

Approaches to child well-being in FTCs need to change

In the context of parent's recovery

Child-focused assessments and services

Familycentered
treatment
(includes parentchild dyad)

Developmental & behavioral screenings and assessments

Parent-Child: Key Service Components

Quality and frequent visitation

Parent-child relationship-based interventions

Trauma

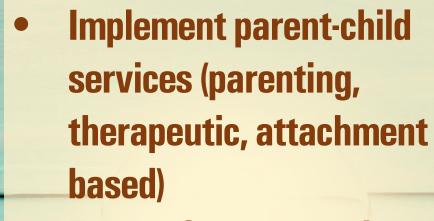
Early and ongoing peer recovery support

Evidence-based parenting

Community and auxiliary support



For quality implementation



Ensure frequent and quality Parenting Time

Considerations for Selecting a Parenting Program



- Have you conducted a needs assessment?
 What do families need? How will it help achieved desired outcomes?
- Have realistic expectations of their ability to participate – especially in early recovery?
- Does it have a parent-child component?
- Is it evidence-based for this **population**?
- Do you have staffing and logistical support for successful implementation?

Parenting Programs Specific to Families Affected by Substance Use Disorders

- Celebrating Families! http://www.celebratingfamilies.net/
- Strengthening Families http://www.strengtheningfamiliesprogram.org/
- Nurturing Program for Families in Substance Abuse Treatment and Recovery http://www.healthrecovery.org/publications/detail.php?p=28

Please visit:

California Evidence-Based Clearing House - <u>www.cebc4cw.org</u>
National Registry of Evidence-Based Programs and Practices - <u>www.nrepp.samhsa.gov</u>

View the Recorded Webinar!!

Supporting Families in Family Drug Courts for Recovery, Reunification

Includes Team Discussion Guide!







and Permanency



Parent-Child Relationship

Visit: www.familydrugcourts.blogspot.com

Important Practices of FTCs

- System of identifying families
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- Increased judicial oversight
- Systematic response for participants contingency management

Better Outcomes for Children and Families:

- Schedule frequent status hearings
 - Judicial Officer or Administrative Review
- Ensure judges speak directly to participants in court
- Treats them with respect and dignity

The state of the s

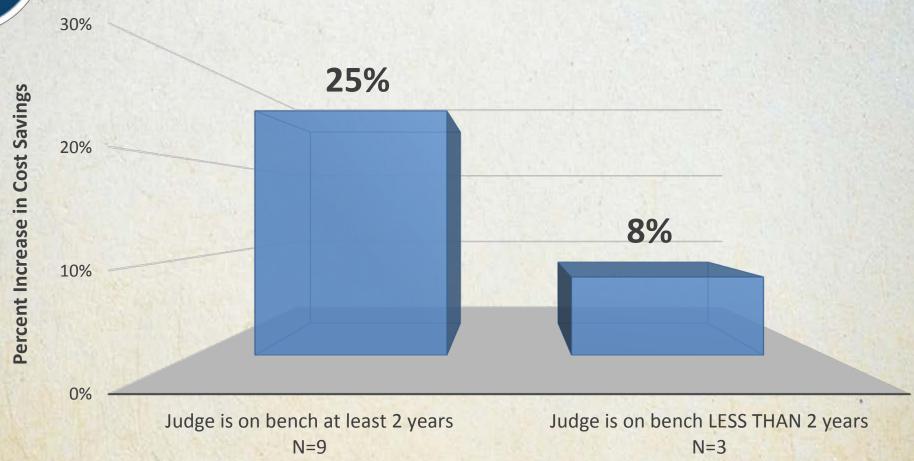
Expresses support and optimism for their recovery

The Judge Effect

- The judge was the single biggest influence on the outcome, with judicial praise, support and other positive attributes translating into fewer crimes and less use of drugs by participants (Rossman et al., 2011)
- Positive supportive comments by judge were correlated with few failed drug tests, while negative comments led to the opposite (Senjo & Leip, 2001)
- The ritual of appearing before a judge and receiving support and accolodes, and "tough love" when warranted and reasonable, helped them stick with court-ordered treatment (Farole & Cissner, 2005; see also Satel, 1998)



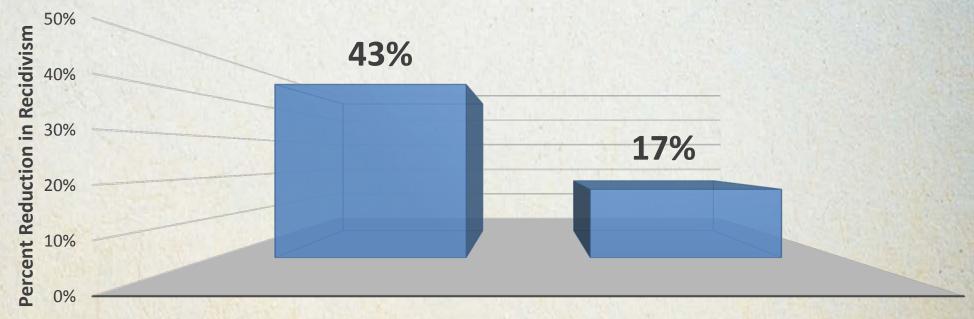
Drug Courts That Have Judges Stay Longer Than 2 Years Had 3 Times Greater Cost Savings



Note: Difference is significant at p<.05



Judges Who Spent at Least 3 Minutes Talking to Each Participant in Court Had More Than Twice the Savings



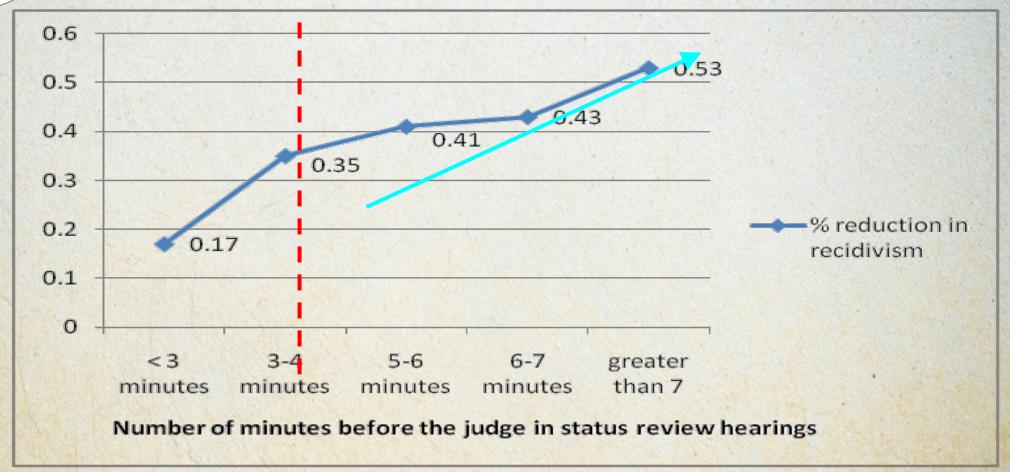
Judge spends at least 3 min. per participant N=23

Judge spends LESS THAN 3 min. per participant N=12

Note: Difference is significant at p<.05



Drug Courts Where the Judge Spends an Average of 3 Minutes or Greater per Participant During Court Hearings Had 153% Greater Reductions in Recidivism



Three Essential Elements of Responses to Behavior

Addiction is a brain disorder

The longer time in treatment, the greater probability of a successful outcome

Purpose of sanctions and incentives is to keep participants engaged in treatment

Setting Range of Responses

Consistent for individuals similarly situated (phase, length of sobriety time)

Avoid singular responses, which fail to account for other progress

Aim for "flexible certainty"

Proximal vs. Distal Responses

- Timing is everything; delay is the enemy
- Intervening behaviors may mix up the message
- Brain research supports
 behavioral observation;
 dopamine reward system
 responds better to immediacy



Important Practices of FTCs

- •System of identifying families
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- •Improved family-centered services and parent-child relationships
- •Increased judicial oversight
- •Systematic response for participants contingency management
- Collaborative non-adversarial approach grounded in efficient communication across service systems and court



For quality implementation



 Develop data dashboard/monitor case and program outcomes

The Collaborative Structure for Leading Change



Family Treatment Courts: The Core Team

Child Welfare

- ✓ Screen for substance use and refer to services
- Coordination with ongoing dependency cases
- Monitor and report on progress of clients and compliance with case plan

Substance Use Disorder Treatment

- ✓ Perform assessments
- ✓ Develop treatment plans
- ✓ Provide substanceuse disordertreatment thatmatches client need
- Monitor and report on treatment progress of clients

Court

- ✓ Judicial Oversight
- ✓ Referral mechanism: Attorney, CASA, Coordinator
- ✓ Client advocacy and legal guidance
- ✓ FTC program oversight and coordination

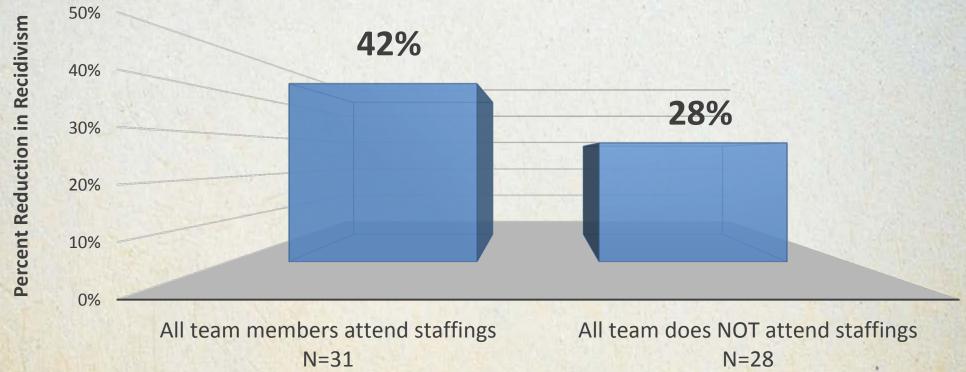
Five Standing Agenda Items for Steering Committee Meetings



- 1. Data dashboard
- 2. Systems barriers
- 3. Funding and sustainability
- 4. Staff training and knowledge development
- 5. Outreach efforts



Drug Courts That Required All Team Members to Attend Staffings Had 50% Greater Reductions in Recidivism and 20% Greater Savings



Note 1: Difference is significant at p<.05

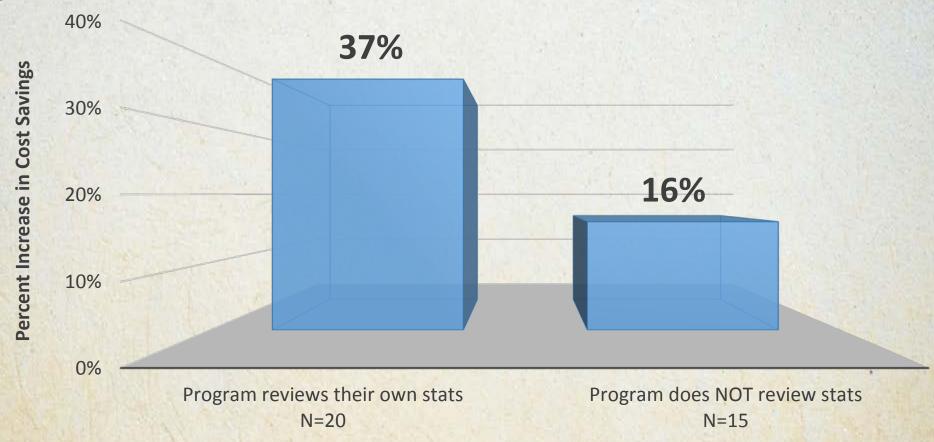
Note 2: "Team Members" = Judge, Both Attorneys, Treatment Provider, Coordinator



- What needles are you trying to move?
- What outcomes are the most important?
- Is there shared accountability for "moving the needle" in a measurable way, in FTC and larger systems?
- Who are we comparing to?

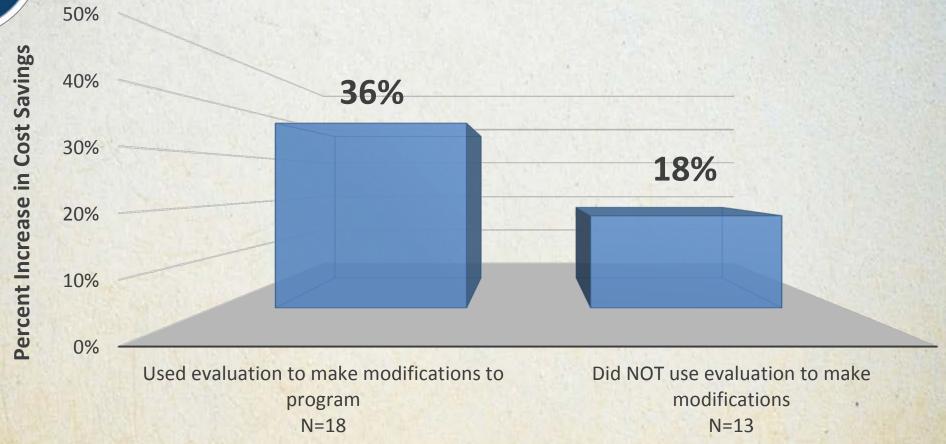


Drug Courts Where Review of the Data and Stats Has Led to Modifications in Drug Court Operations Had a 131% Increase in Cost Savings



Note: Difference is significant at p<.05

Drug Courts Where the Results of Program Evaluations
Have Led to Modifications in Drug Court Operations
Had a 100% Increase in Cost Savings



Note: Difference is significant at p<.05



Resources and Next Steps

TRANSITIONING TO A FAMILY CENTERED APPROACH:

Best Practices and Lessons Learned from Three Adult Drug Courts



Transitioning to a Family Centered Approach: Best Practices and Lessons Learned from Three Adult Drugs Courts

To download a copy:

https://www.ndci.org/wpcontent/uploads/2016/05/Transition ing-to-a-Family-Centered-Approach.pdf

Family Drug Court Learning Academy







Team Discussion Guides for selected presentations

www.cffutures.org/fdc-learning-academy/



Governance Structure & Leadership

Is Your FDC Built to Last or Left to Fade

View the Recorded Webinar!



Includes Team
Discussion Guide!

View the Recorded Webinar!

Early Screening & Assessment



How Effective Family Drug Courts Match Service to Need

Includes Team
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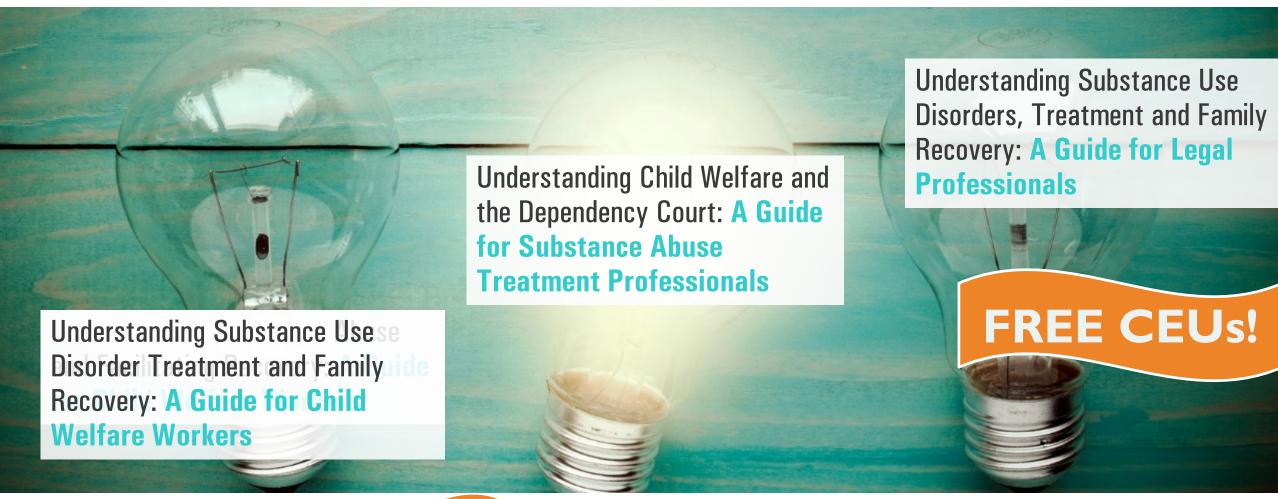
Supporting Families in Family Drug Courts for Recovery, Reunification



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NCSACW Online Tutorials Cross-Systems Learning





www.ncsacw.samhsa.gov/training

Family Drug Court Online Tutorial



Family Drug Court Guidelines



Collaborate with Children and Family Futures to Design and Implement Your Evaluation

Measure the Difference You Are Making



CFF is a leading provider of **Research and Evaluation** support to national, state, and county efforts to address the needs of children and families

For more information visit: www.cffutures.org/evaluation or

Contact us at evaluation@cffutures.org



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