

# Georgia Council of Accountability Court Judges Annual Conference

## Maintaining Active Engagement for Long-term Recovery and Stable Reunification

September 12, 2023

Kirstin Frescoln, PhD, CPM | Center for Children and Family Futures

Claudia Alvarez-Valber, MSW | Center for Children and Family Futures

Carroll County FTC Team Members

Monica Bernal; Melinda Cowan; Judge Tom Parmer; Andy Pham;

David Rossi-Espanet; Shelia Storey



**CENTER FOR CHILDREN AND FAMILY FUTURES**  
Strengthening Partnerships, Improving Family Outcomes

# Acknowledgment

This presentation is supported by Grant #15PJDP-22-GK-03559-DGCT awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice.



*This project is supported by Grant # 15PJDP-22-GK-03559-DGCT 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.*



## OJJDP's Mission

OJJDP provides national leadership, coordination, and resources to prevent and respond to youth delinquency and victimization. The Office helps states, localities, and Tribes develop effective and equitable juvenile justice systems that create safer communities and empower youth to lead productive lives.

## OJJDP's Three Priorities

- ✓ Treat Children As Children
- ✓ Serve Children at Home, With Their Families, in Their Communities
- ✓ Open Up Opportunities for System-Involved Youth

To find out more about OJJDP, visit: [www.ojp.ojjdp.gov](http://www.ojp.ojjdp.gov)





# Our Mission

Center For Children and Family Futures (CCFF) strives to prevent child abuse and neglect while improving safety, permanency, well-being and recovery outcomes with equity for all children, parents and families affected by trauma, substance use and mental health disorders.



**CENTER FOR CHILDREN AND FAMILY FUTURES**  
Strengthening Partnerships, Improving Family Outcomes



# Our Mission

Center For Children and Family Futures (CCFF) strives to prevent child abuse and neglect while improving safety, permanency, well-being and recovery outcomes with equity for all children, parents and families affected by trauma, substance use and mental health disorders.



**CENTER FOR CHILDREN AND FAMILY FUTURES**  
Strengthening Partnerships, Improving Family Outcomes



# Our Mission

Center For Children and Family Futures (CCFF) strives to prevent child abuse and neglect while improving safety, permanency, well-being and recovery outcomes with equity for all children, parents and families affected by trauma, substance use and mental health disorders.



**CENTER FOR CHILDREN AND FAMILY FUTURES**  
Strengthening Partnerships, Improving Family Outcomes

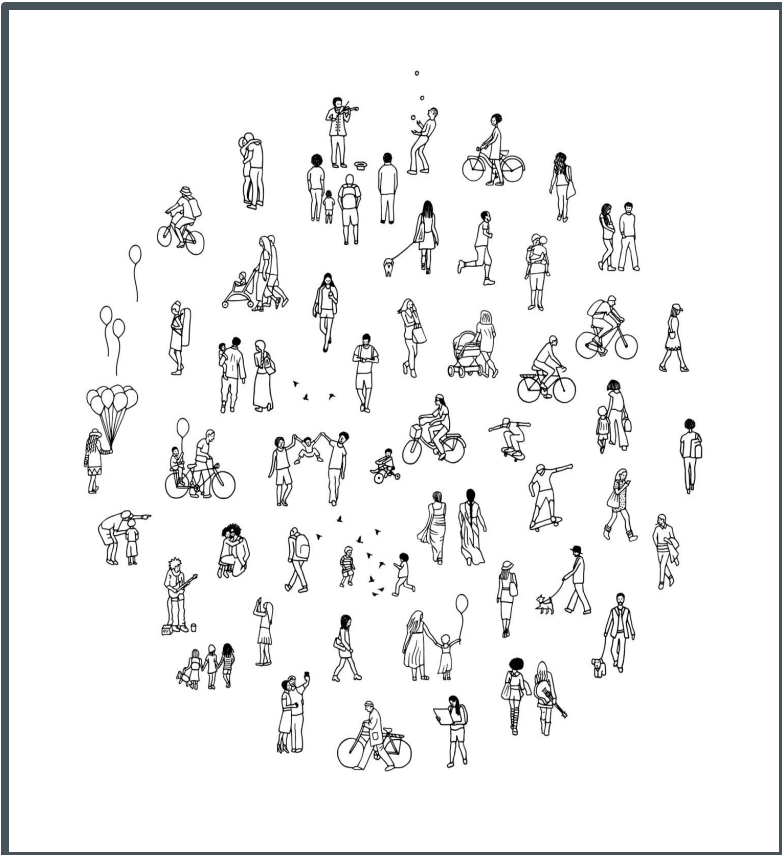


**NATIONAL  
FAMILY  
TREATMENT  
COURT  
PROGRAM**

Training and Technical Assistance



# PANELISTS – CARROLL COUNTY FAMILY TREATMENT COURT




- Judge Tom Parmer
- Shelia Storey, Coordinator
- Melinda Cowan, SAAG
- Benisha Wood, DFCS Case Manager
- Monica Bernal, Peer Support
- David Rossi-Espanet, Parent Attorney



# Learning Objectives

Participants will be able to:

- Describe the research associated with stable recovery and effective parenting.
  - Identify and apply strategies that support lasting engagement in activities that support healthy recovery and parenting.
  - Make changes to phase and other FTC structures to better support long-term engagement and behavior change.
- 
- A large yellow triangle is positioned in the bottom right corner of the slide, pointing towards the top right.

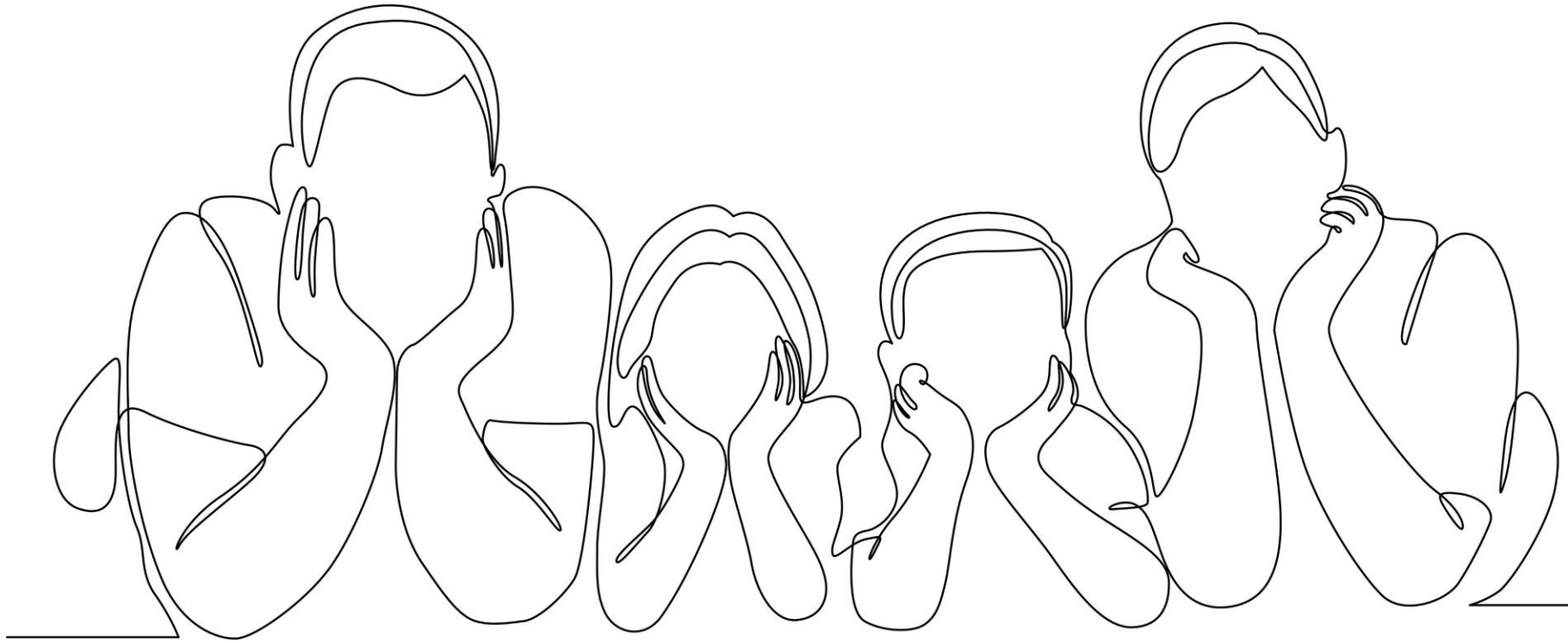
# Setting the Stage: Family-Centered Treatment

---





# Defining Family



A family-centered approach recognizes that **family** is defined by the individual receiving services.

(National Center on Substance Abuse and Child Welfare, 2021)

# Family-Centered Approach



Recognizes that a substance use disorder is a **brain disease** that affects the entire **family**, and that recovery and well-being occurs **in the context of the family**

---



Provides a comprehensive array of clinical treatment and related support services that meet the needs of **each member in the family**, not only the individual requesting care

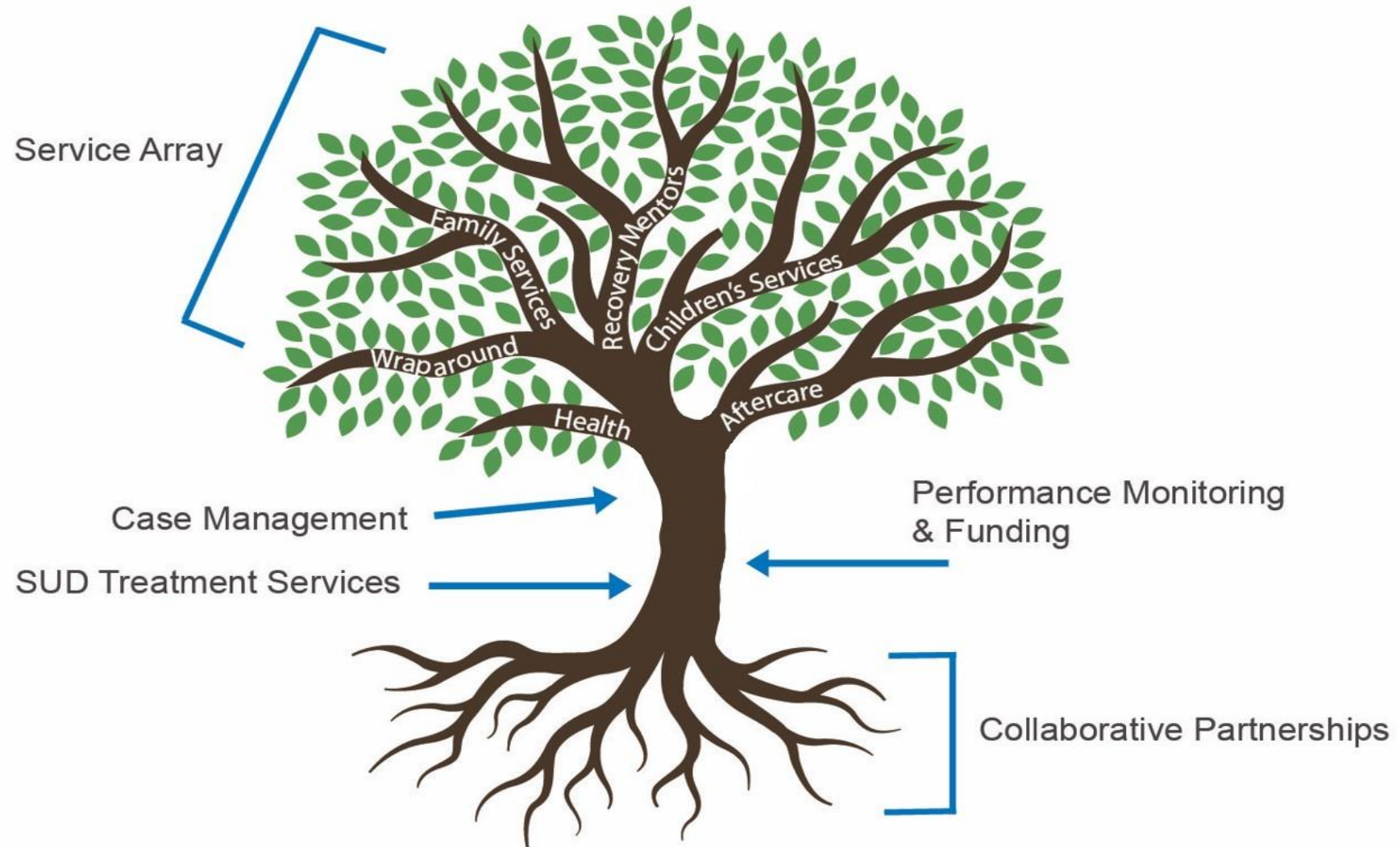
---



Extends well beyond the substance use disorder (SUD) treatment system, the child welfare system, the courts, and mental health services, and includes **all other agencies and individuals** that interact with and serve families

# Essential Ingredients of a Family-Centered Approach

## Essential Ingredients of a Family-Centered Approach



(National Center on Substance Abuse and Child Welfare, 2021)



# Family

Early  
Childhood  
Services

Child  
Welfare

Substance  
Use  
Disorder  
Treatment

Mental  
Health  
Treatment

Housing

Courts

Family  
Education  
Services



# 10 Guiding Principles for Applying a Family-Centered Approach

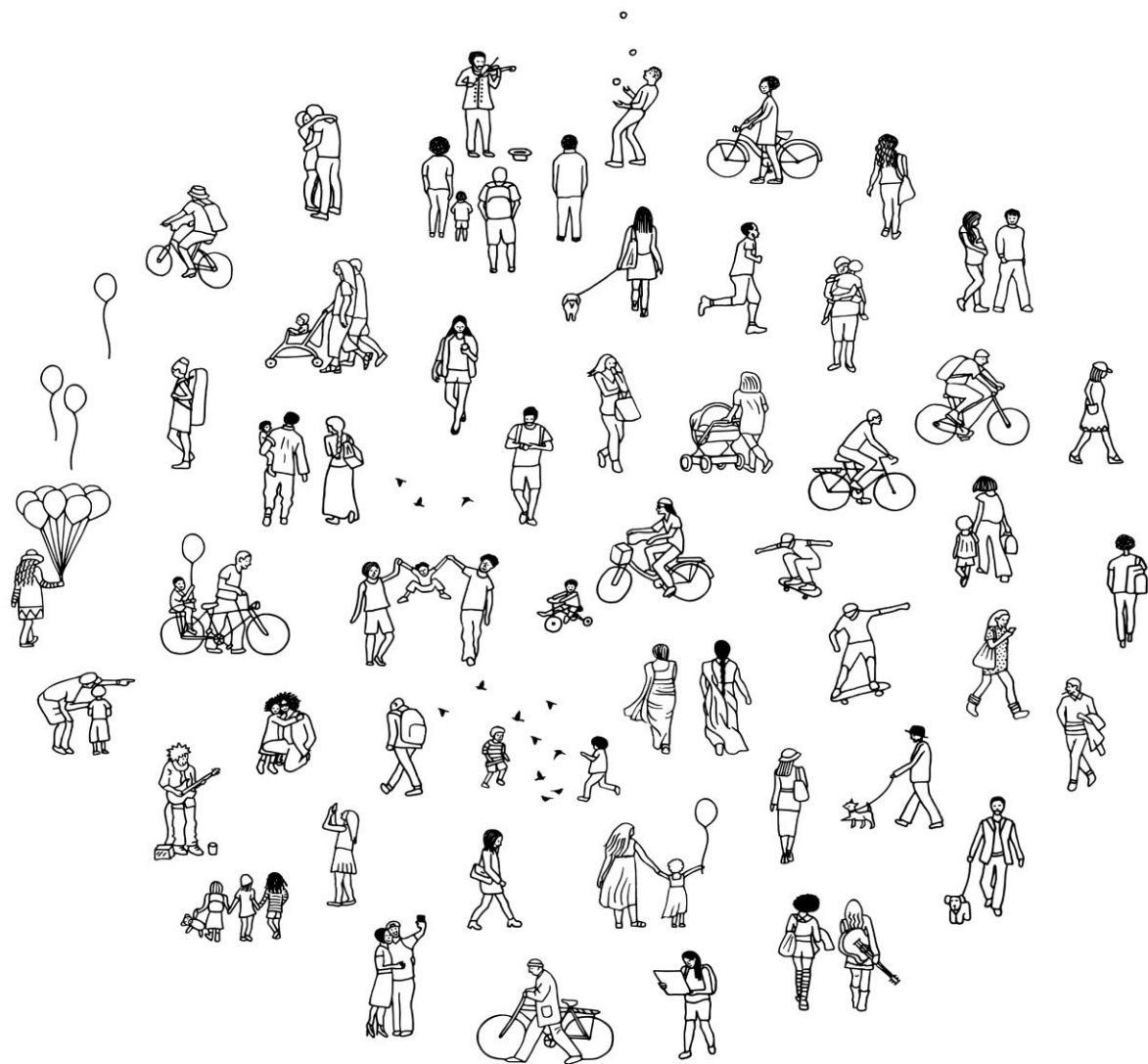


- The parent defines **“family.”**
- The FTC team recognizes the family as an essential collaborative **partner with an equal voice** in the process.
- The FTC team recognizes **participants are parents** and strong parental capacity is an integral part of family recovery and well-being.
- The FTC team uses a **holistic, integrated approach** to serving the family together as a unit rather than treating the individual parent or child separately.
- The FTC team recognizes and seeks to **engage resource parents** as a valuable support for the family.

# 10 Guiding Principles for Applying a Family-Centered Approach



- The FTC team uses a supportive, nurturing, **strengths-based approach** rather than a punitive one.
- The FTC and partner agencies are **trauma-responsive** to parents, children, and families.
- The FTC team is **culturally responsive** to parents and their families.
- The FTC team defines and measures parent progress and success in terms of desired **behavioral changes**, not solely compliance and attendance.
- A family-centered approach needs to be a **cross-systems effort** involving all partners rather than simply a *court* endeavor.



# PANELISTS REFLECTION



# Family Engagement

---





# **Engagement is Everyone's Job**

Engagement begins during the first interaction and continues throughout the entire case

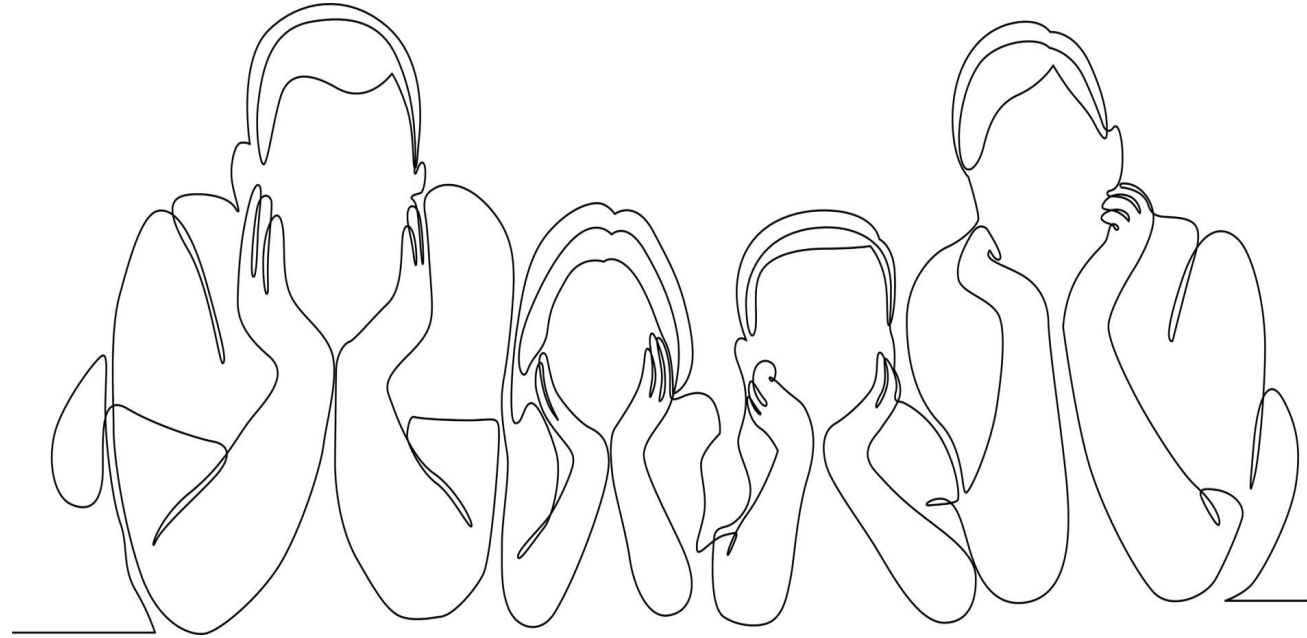
# Early Engagement Techniques



- Automatic referral
- Attend Shelter Care Hearings
- Consistent messaging about FTC benefits
- Train stakeholders (judges, attorneys, child welfare)
- Require all eligible parents to observe an FTC Hearing
- Implement an “Orientation” phase
- Utilize Peer Recovery Support Specialists (PRSS)
- If declines entry – back on docket in 30-45 days

# Child and Family Services Reviews Round 3 Findings 2015-2016

- Families did better when **parents and children were involved in case planning**
- Families did better when there was **frequent quality parenting time**



# The Coordinated, Family-Centered Case Plan

## Family Team Meetings:

- Are facilitated meetings.
- ACTIVELY engages parent(s), child(ren), other family members (as appropriate) in meeting.
- Focuses on determining individual and family strengths and needs.
- Results in written plans that the family understands with clearly articulated action steps and who is responsible.

## Family Group Decision Making:

- Sets out broad steps needed for successful case closure.
- Seeks to reduce the number of times a family has to tell their story or engage with professionals in developing a case plan.

*Professionals accommodate the needs of the family - Not the other way around!*



# The Coordinated, Family-Centered Case Plan

Embraces each family's unique culture, including race, ethnicity, gender and gender identity, sexual orientation, socioeconomic status, geographic location, and other factors associated with the family's identity

Considers how to build upon the family's culture to strengthen parenting capacity, safety, and support networks

Reduces disparities in outcomes by ensuring all children, parents, and families are supported and engaged equitably



# The Coordinated, Family-Centered Case Plan



Sequence and timing of services are realistic and achievable

Participant's immediate needs are balanced with their long-term goals

Plans are individualized, family-driven, culturally competent, and community and strengths-based

Plans are family-focused and address family functioning with special attention paid to coordinating child and adolescent services with those of the parent

Collaboration reveals potential areas of multiple and potentially conflicting requirements from different systems so conflicts can be resolved

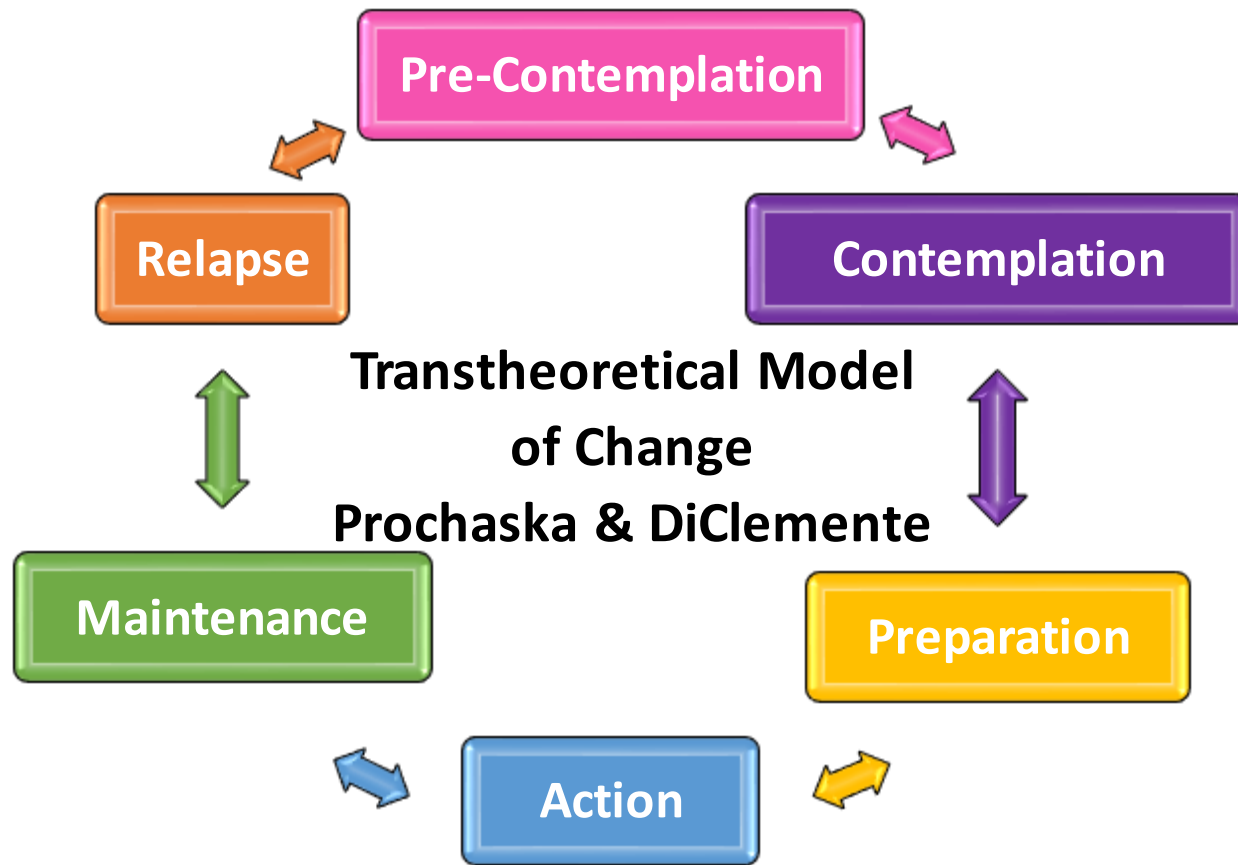
# Case Plans are Developed with the Family

- Include a broad definition of family to include all individuals whom the child and parent consider “family”
- Prioritize a family’s cultural beliefs, values, and traditions
- Increase parent and child engagement in case plans
- Support the parent’s commitment to achieving case objectives as well as relationships between the parent, child, and service providers
- Enhance the fit between the family member’s needs and services

Include the parent’s attorney or legal team’s social worker and/or peer support in case planning and team/family meetings to provide additional support



# Stages of Change



- Family Treatment Court requires participants to engage in major change in many life domains
- The participant will be ready for some of these changes
- Other changes may require additional coaching

**Motivational Interviewing is an effective strategy to help participants progress along the Stages of Change**

# Functions of Recovery Support Specialists



## Liaison

- Links participants to ancillary supports; identifies service gaps

## Treatment Broker

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



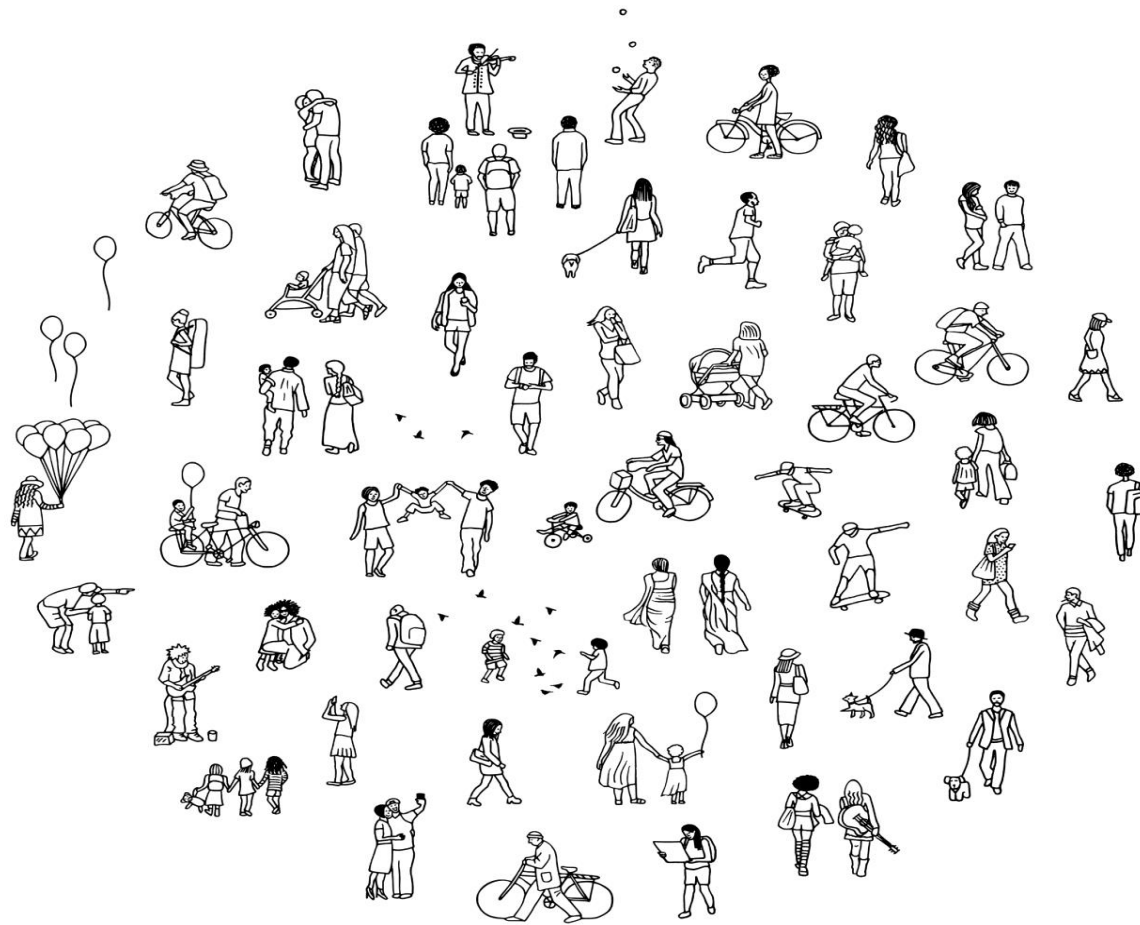
## Advisor

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



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

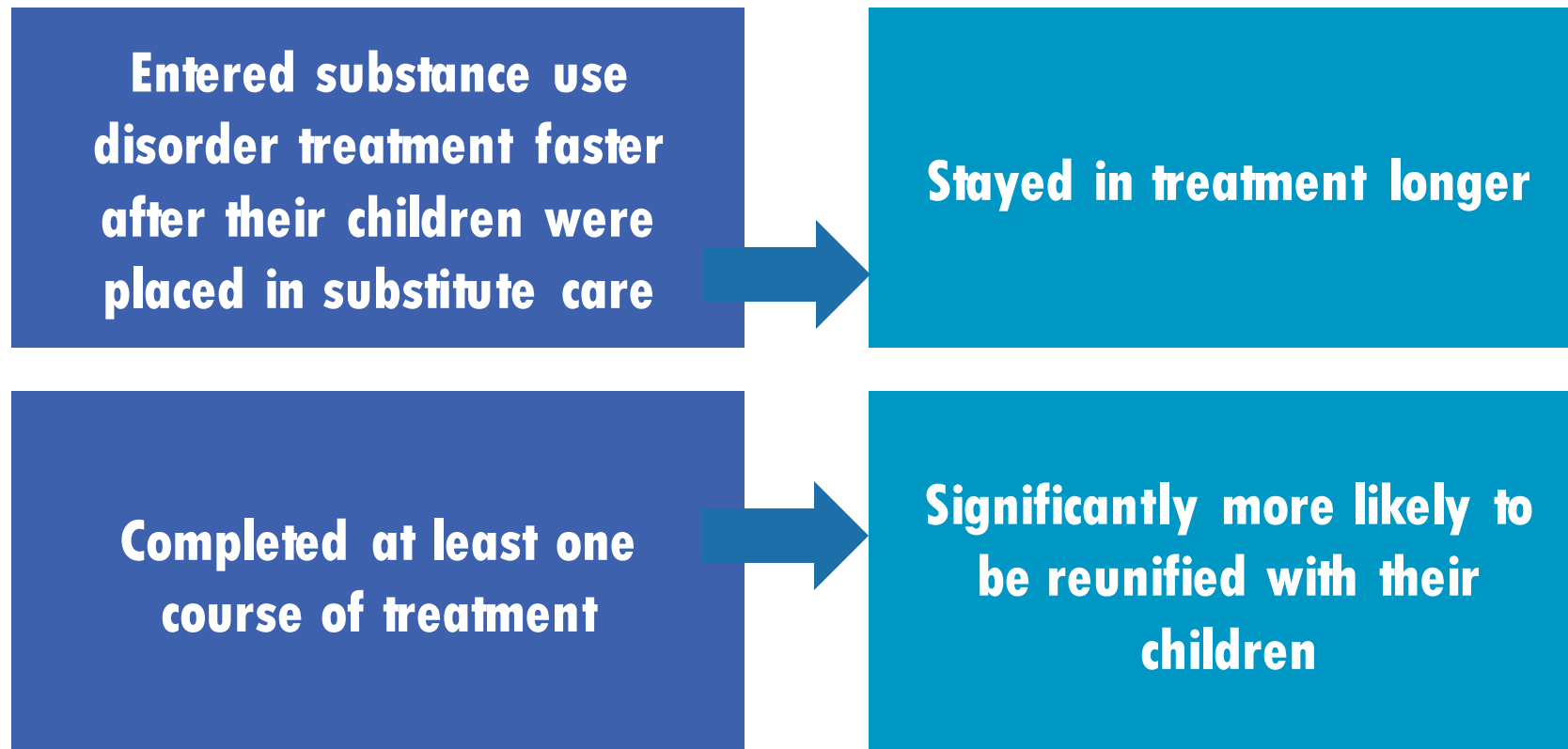




# PANELISTS REFLECTION

# Time To & Time In Treatment Matters

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



*Source: Green, Rockhill & Furrer (2007)*

# Treatment Matches Assessed Need

*Individuals who receive the level of care indicated by the ASAM Patient Placement Criteria have significantly higher treatment completion rates and fewer returns to substance use than those who receive a level of care higher or lower than clinically needed.*

(Source: DeLeon, et al., 2010; Gastfried & Lu, 200; Magura, et al., 2003; Mee-Lee & Gastfried, 2008)

*Drug court participants who received psychiatric medications for psychological or emotional problems, in addition to their SUD treatment, were 7x more likely to graduate than participants with psychiatric symptoms who did not receive psychiatric medications.*

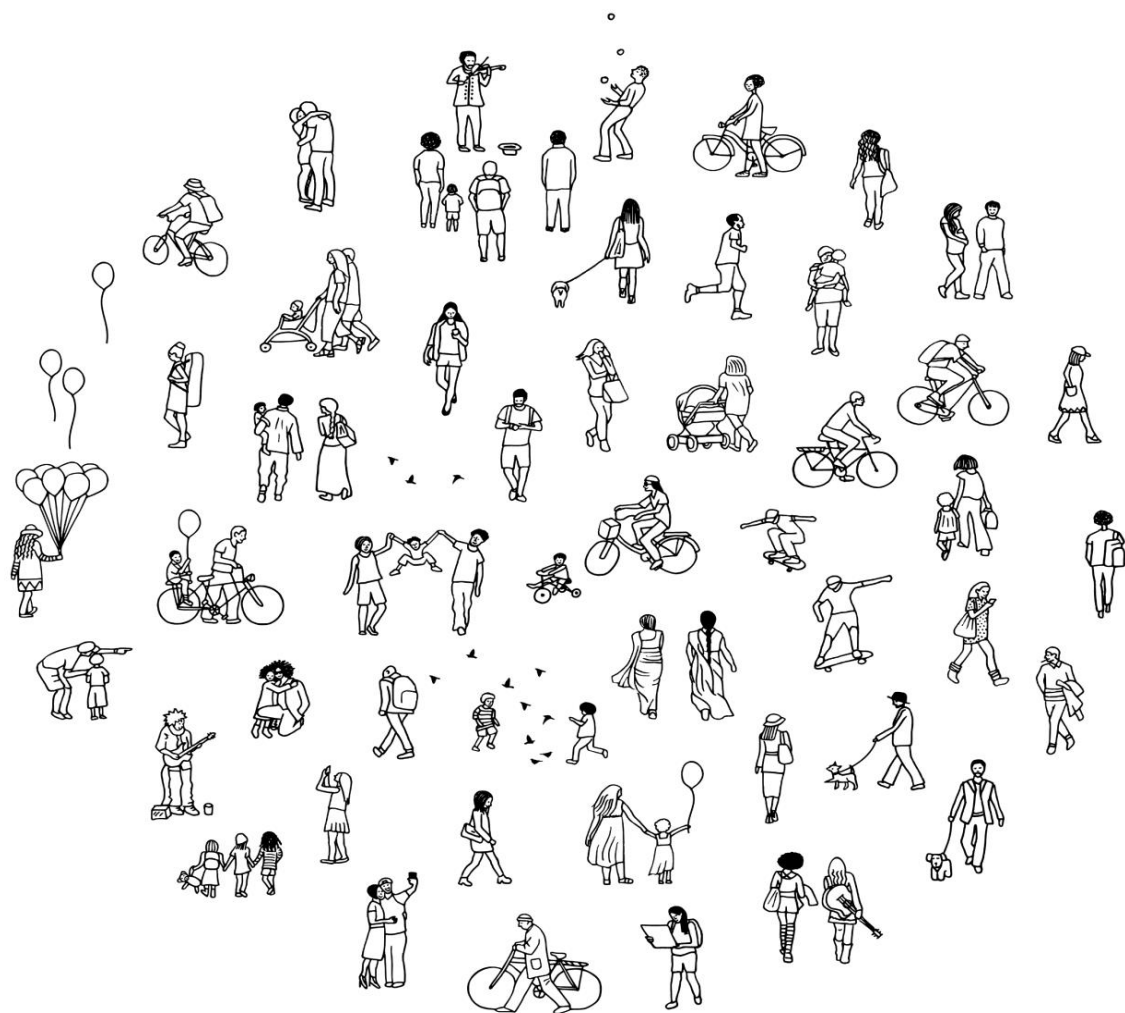
(Source: Gray, 2005)

# Effect of Parenting Time on Reunification Outcomes



- Children and youth who have **regular, frequent contact** with their families are **more likely to reunify and less likely to reenter foster care** after reunification (Mallon, 2011).
- Visits provide an important **opportunity to gather information** about a parent's capacity to appropriately address and provide for their child's needs, as well as the family's overall readiness for reunification. (Child Welfare Information Gateway, 2017; Bullen, et al., 2015; Wentz, 2013)
- Parent-Child Contact (Visitation): Research shows **frequent visitation increases the likelihood** of reunification, **reduces time** in out-of-home care (Hess, 2003), and **promotes healthy attachment** and **reduces negative effects** of separation (Dougherty, 2004).





# PANELISTS REFLECTION

# Phases as an Engagement Strategy

- Leverage the phase structure to create a behavior-based, family-centered program
- Allow parents to see how their progress through the phases moves them to THEIR goal
- Creates shared goals and coordinated case plans for all partners including the family
- Focus on vital services
- Lay out steps towards reunification

## Phase 1



**Goal:** Acute Stabilization, Orientation, and Engagement

Participant is oriented to FTC, experiences positive support and successful orientation – believes it will be possible to be healthy, whole family again

## Phase 2



**Goal:** Clinical Stabilization of parent's SUD, MH, and physical health and address the acute and chronic needs of children

Participant acknowledges harm associated with SUDs considers need for change, move toward internal motivation for recovery

## Phase 3



**Goal:** Demonstration of recovery skills and insight and development of skills to meet the safety and well-being needs of children and family members

Participant continues to work toward recovery and reunification/successful case closure; FTC team works to meet needs of family for successful case closure

## Phase 4



**Goal:** Demonstration of life skills (e.g., employment, financial, housing) and parenting skills

Participant demonstrating recovery and parenting skills; FTC team continues to work to meet needs of family for successful case closure

## Phase 5

**Goal:** Maintenance of recovery, parenting and life skills

Family unit (parents, children, support system) is demonstrating healthy skills and behavior and use community-based resources to meet their continuing needs



# PANELISTS REFLECTION



# Family Treatment Court Best Practice Standards

## 8 *Standards* and Key Provisions

*Scan the QR code  
to obtain a copy:*





# FTC Best Practice Alignment Tool



Identify strengths, opportunities for improvement, and TTA needs



Develop an action plan



Work towards aligning with best practices



Improve outcomes for children and families

Contact the FTC TTA team to get started!



# FTC Best Practice Alignment Tool

*Rate your practices:*



Not  
Implemented



Partially  
Implemented



Fully  
Implemented

Contact the FTC TTA  
team to get started!



*Identify opportunities  
for growth:*

Advanced

Enhanced

Minimum

Do no harm

# 2023 Family Treatment Court Practice Academy

## *BLUEPRINTS TO THE FUTURE*

### **Building Strong Futures:**

Increasing FTC Capacity and Scale

**Live Conversation:** July 25, 2023

**Idea Exchange:** August 22, 2023

### **Building Secure Futures:**

Bonding and Attachment Support for  
Parents and Their Infants Affected by  
Substance Use

**Live Conversation:** October 26, 2023

**Idea Exchange:** November 16, 2023



### Course Map:



Watch short video

Join *Live Conversation*  
and *Idea Exchange*



Access *Exploration Tool*

### Register Here:



# Family Treatment Court

## Peer Learning Court Program



CENTER FOR CHILDREN AND FAMILY FUTURES  
Strengthening Partnerships, Improving Family Outcomes

King County FTC, WA

Tompkins County FTC, NY

Wapello County FTC, IA

Baltimore City FRP, MD

Jefferson County FIT Court, CO

Grant County FRC, IN

Pima County RAISE FTC, AZ

Travis County PIR/FDTC, TX

### PEER-TO-PEER SUPPORT INCLUDES:

- ♦ Virtual and in-person observation of FTC staffing and court sessions
- ♦ Discipline-specific discussions
- ♦ Technical assistance support
- ♦ Access to operational documents (e.g., policy and procedure manual, parent handbook, reporting templates, MOU, etc.)
- ♦ And much more

To learn more scan the QR code  
or visit our webpage



[www.cffutures.org/plc/](http://www.cffutures.org/plc/)



To participate in a peer-to-peer  
connection, contact us!



[peerlearningcourts@cffutures.org](mailto:peerlearningcourts@cffutures.org)



**CENTER FOR CHILDREN AND FAMILY FUTURES**  
Strengthening Partnerships, Improving Family Outcomes

**Join Our  
CCFF listserv**



**Visit Our  
Website**



**Join Our FTC TTA  
Program listserv**





## CONTACT US:

Center for Children and Family Futures

FTC TTA Program

[www.cffutures.org](http://www.cffutures.org)

[FTC@cffutures.org](mailto:FTC@cffutures.org)



**CENTER FOR CHILDREN AND FAMILY FUTURES**  
Strengthening Partnerships, Improving Family Outcomes