

Breaking Down Barriers: Partnering with DFCS to Increase FTC Referrals

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Training Agenda

- Overview of Family Treatment Courts
- Purpose of Family Treatment Court
- The DFCS FTC Referral Protocol
- Barriers to Entry
- Barriers to Participation
- Institutional Keys to Success

◀ Photo Slides Purpose of Family Treatment Court ▶

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Overview of Family Treatment Court

What exactly is a FTC?

◀ Aspects of FTC Children In Foster Care ▶

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What does Family Treatment Court offer?

18-month program with-

- bi-weekly or weekly court reviews
- community policing supervision
- weekly case management and individual counseling sessions
- more frequent drug testing (usually 2-4 times per week) and
- multiple evidence-based curriculum which address:
 - substance abuse
 - cognitive behavioral intervention
 - parenting
 - trauma
 - criminal addictive thinking

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Some FTCs also offer:

- life skills
- anger management
- grief groups
- codependency
- co-occurring treatment groups
- other therapeutic interventions

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Purpose of Family Treatment Court

Statistics behind what motivates us

◀ Aspects of FTC Children In Foster Care ▶

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Goals of Family Treatment Court

- Return the children to their parents as quickly as possible
- Ensure closer supervision of the parents and safety of children after return
- Enhance services to family- parents and children
- Reduce subsequent return of children to the foster care system
- Facilitate better long-term results and less overall time that children are in foster care or prevent entry into foster care.

◀ Children in Foster Care The Protocol ▶

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The DFCS FTC Referral Protocol

What is it and why is it utilized?

◀ Goals of FTC What is the Protocol? ▶

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What is the DFCS FTC Referral Protocol?

- Very basic screening tool to be completed by DFCS investigators, FP workers, and FC workers where there is a substantiation of maltreatment OR where risk and dependency exist related to substance abuse.
 - Screening tool is in Slides – under the legal tab
- If there is maltreatment/dependency related to one of the criminogenic drugs (cocaine, heroin, methamphetamine) AND one other factor on the screening tool, the county MUST staff with their SAAG to evaluate dependency and seek FTC interventions.
- Other factors include but are not limited to previous treatment failure, pending charges or under criminal justice supervision, previous CPS history
- Benefit is a structured decision-making approach to Family Treatment Court referrals, consistent among all DFCS staff and among all Departments with an FTC Program

◀ The Protocol Why use the Protocol? ▶

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Why use the Protocol?

- Develop consistent practice within the Division for Family Treatment Court referrals
- Provide the Division with an opportunity for early intervention with families that could minimize family disruptions, including placement.
- Prioritize FTCS to improve outcomes for moderate to higher risk substance abuse disorder cases given the intensity of supervision as well as extensive and expansive treatment
- FTCS typically offer evidence-based substance abuse treatment, relapse prevention, trauma therapy, multiple parenting curriculum, criminal addictive thinking as well as increased drug screening, community policing, court supervision and individual counseling

◀ What is the Protocol? Pilot Programs ▶

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Why use the Protocol? (continued)

- Improved partnership between DFCS and Family Treatment Courts in providing additional services and resources for families
- Ensure the Division and Family Treatment Courts are operating within the law and policy
- Increase reasonable efforts to prevent removal and achieve earlier reunifications
- Align agency practices with the Families First Prevention Services Act

◀ What is the Protocol? Pilot Programs ▶

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Barriers to Entry

◀ Pilot Programs Barriers to Quick Entry into FTC ▶

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Barriers to Quick Entry into FTC

- Delay in getting information to the coordinator
 - Quality of information being given
 - Info must get routed through SAAGs first
- Confusion about the process
- Readiness prior to adjudication
 - Lack of communication/understanding of what will happen with kids
 - Uneasiness about making a commitment until they know what will happen in Court.

◀ Barriers to Entry Solutions to Barriers to Quick Entry ▶

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Solutions to Barriers to Quick Entry

- Self-referral to FTC
 - Although this gives rise to its own variant of confusion and problems
- Comprehensive information from investigators
- Earlier access to duty attorneys, making sure everyone knows the Department's position prior to entry (i.e. the child attorney, SAAG, parent and placement).

◀ Barriers to Quick Entry into FTC Barriers to Participation ▶

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Barriers to Participation

◀ Solutions to Barriers to Quick Entry Common Barriers to Participation ▶

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Common Barriers to Participation

- Time Commitment
- Confusion about what the result of court will be
- "I can do it on my own"
- "I'm using but I'm still capable of caring for my kids"
- "I'm not an addict"
- Desire to preserve legal prescriptions or lifestyle
- Transportation, Housing, and Child Care

◀ Barriers to Participation Solutions to Time Commitment ▶

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Solutions to Court Outcome concerns

- Early access to a duty attorney
- Partnering with SAAG to understand DFCS' position on removal and what DFCS is asking for prior to return, communication with child attorney/GAL.
- Asking the parent what they are willing to risk and attempting to make them think realistically (MOTIVATIONAL INTERVIEWING)

◀ Solutions to Time Commitment "I Can Do It On My Own" ▶

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Keys to Institutional Success

- DFCS has shifted training to increase referrals by case managers
- SAAGs and Supervisors continuing the conversation at every level
- Adaptability with the individual parent, working them through parent specific challenges
- Continual problem solving
- Referrals from all sides of the process (parent attorneys, child attorneys, SAAGs, CASAs, GALs, and other Judges)

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Keys to maintaining referrals

- Be willing to accept feedback
- Have open communication with FTC partners
- Refresher trainings for new staff
- Ensuring staff have the screening tools and understand the process
- Maintain a spreadsheet to identify trends within the county
- Encourage referrals and set goals

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Thank you
Any question? !?

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Making the DFCS referral protocol work for your FTC

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Recap of Session One Training

- Front Line staff training regarding use of DFCS referral protocol
 - Capture and refer all eligible candidates
 - Use of form in SHINES
 - Completing form and making referral = reasonable effort
- Central point person for DFCS responsible for consistent follow up with the team during implementation of the identification and screening protocol
- Reminders by Supervisors and consistent follow up
- Follow up by Court and attorneys for eligible cases

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Why was Hall County successful?

- Regular communication between Regional Director, County Leadership, Judge, FTC Coordinator and SAAG to assess progress and problem solve through barriers--- buy in from all levels
- Central point person for DFCS responsible for consistent follow up with the team during implementation of the identification and screening protocol
- Tracking of progress and assessment of outcomes through data
- Engagement of Judge and FTC Coordinator with front line and supervisory staff

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Keys to success in making regular referrals

- Regular, consistent use of referral form by front line staff, without regard by DFCS case workers as to likelihood of success or interest
- Regular training and coordination by Supervisors because of turnover
- Judge coordinating with other judges to look out for FTC Cases in DROs, PPHs, etc.
- Coordinating with clerks, judges, attorneys in all courtrooms
 - FTC referral sheet with petition to all attorneys as appointed
 - Follow up at Adjudication, Disposition, IPR
 - Coordinated emails before staffing to ensure no objections
- Good will tours by Judge, Coordinator

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Keys to turning referrals into participants

- Use of FTC attorneys before entry
- Require observation and meeting with coordinator for all eligible/referred cases
- Good motivational interviewing by Coordinator
- Coordinated communication

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◀ Barriers to Participation Solutions to Time Commitment ▶

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Solutions to Transportation, Housing, and Child Care Barriers

- Reliable transportation and housing must be handled before admittance to FIC, failure to do so sets the parent up for failure
- Have the parent reach out to family or friends to see if they are willing to provide transportation or housing, brainstorm who can help them, offer resources they may not have been aware of
- Parent may know somebody already in the program
- Residential if needed
- Partner with DFCS for CAPS assistance

◀ Lifestyle and Prescription Preservation

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Solutions to Lifestyle or Prescription Preservation

- Motivational interview
- Focus on how long the parent has had their legal prescription
- Ask how many places the parent has to go
- Suggest healthier alternatives to the lifestyle
- Releases of information, have parents draw timeline of their drug use

◀ "My Kids Are Fine" or "I'm Not An Addict" Transportation and Housing ▶

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"My Kids are Fine" or "I'm not an Addict"

- Motivational interviewing regarding the parent's children and the parent's drug use.
- Educating the parent about addict mentality.
- Illustrate where the children are academically, medically, and mentally and let the parent reach their own conclusions.
- Drug screens after every interview
- Advocate for the benefit and support system rather than their needs.
 - Indicate that everyone would benefit from the curriculum and support system available, regardless of their drug use.

◀ "I Can Do It On My Own" Lifestyle and Prescription Preservation ▶

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◀ Solutions to Time Commitment "I Can Do It On My Own" ▶

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"I Can Do It On My Own"

- Most people cannot do so, only a small number achieve reunification through non-FTC routes.
- Going alone requires coordinating treatment and assessments, getting certificates back to the case manager, finding employment, and making a budget and childcare plan all alone.
- Revolving door of care managers, fewer court reviews to prove success, and less contact with both your attorney and the Judge.
- May wait too late to join and miss the opportunity to utilize FTC.

◀ Solutions to Confusion "My Kids are Fine" or "I'm Not An Addict" ▶

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Solutions to Time Commitment Barriers

- Sell the potential of returning the kids sooner and removing DFCS involvement prior to 18 months
- One stop shop with both a cheerleader and coach to maximize potential for success— we roll the curriculum out to the participant instead of them needing to locate and manage
- Time clock— the Department is going to be making announcements about Permanency in 9-12 months
- Offers more than just substance abuse counseling, including vital life skills, parenting support, a support network

◀ Common Barriers to Participation Solutions to Confusion ▶

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Tracking Data by DFCS

- Weekly tracking on a spreadsheet monitored by leadership
- Follow up with case managers regularly during staffing
- Refresher trainings due to turnover
- Regular reminder emails

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Debunking Myths

- FTC is 18 month program so that means child is in foster care for 18 months: FALSE
 - Reunification before completion of program
 - DFCS can close their case prior to completion of FTC, just have to have dependency case remain open
- FTC sets participants up for failure
 - Yes it is a lot more intensive, but long term, much better outcomes
 - One stop shop with people to help meet your needs
- FTC only works for foster care cases
 - Should be equal emphasis on Family Preservation cases

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What makes for a successful program?

- Regular communication and problem solving
 - Tune Up trainings, conference, engagement by whole team
 - Regular policy meetings to work out kinks, consider policy changes
- Same SAAG, Child Attorney, CASA, DFCS, Parent attorney for dependency case
- Coordination between Courtrooms

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Questions

- Timelines for FTC
- Reconciliation of Drug Screens
 - Hair Follicle
 - Use of sobriety dates
- Transfers from Superior Court
- When to sign contract (can this be done before entry)
- How to refer a case through Family Preservation

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