

Collaborating to Meet the Needs of Families Affected by Parental Substance Use

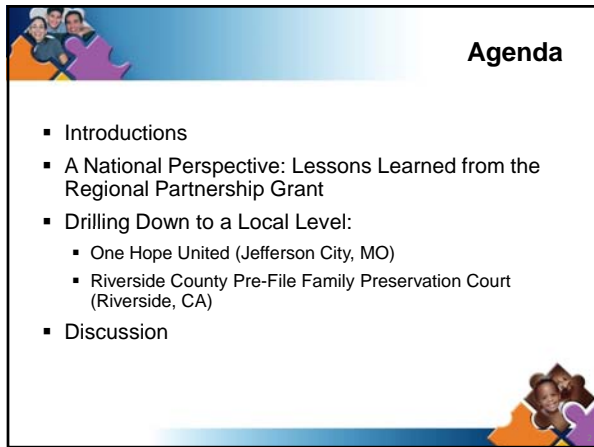
2010 National Alliance for Drug Endangered Children Conference

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In-Depth Technical Assistance Program Director
National Center on Substance Abuse and Child Welfare*

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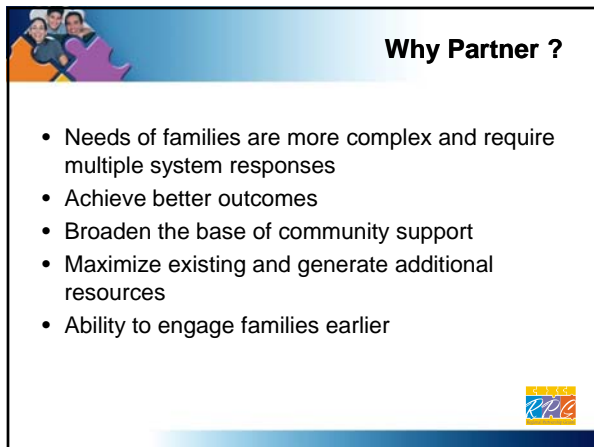
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National Center on Substance Abuse and Child Welfare
Advancing Evidence-Based Approaches to Family Resilience, Safety, and Stability




Agenda


- Introductions
- A National Perspective: Lessons Learned from the Regional Partnership Grant
- Drilling Down to a Local Level:
 - One Hope United (Jefferson City, MO)
 - Riverside County Pre-File Family Preservation Court (Riverside, CA)
- Discussion



Why Partner ?

- Needs of families are more complex and require multiple system responses
- Achieve better outcomes
- Broaden the base of community support
- Maximize existing and generate additional resources
- Ability to engage families earlier






A Program of the

Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment

and the

Administration on Children, Youth and Families
Children's Bureau
Office on Child Abuse and Neglect



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Administration on Children and Families
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**A National Perspective:
Lessons Learned from
the Regional
Partnership Grant**



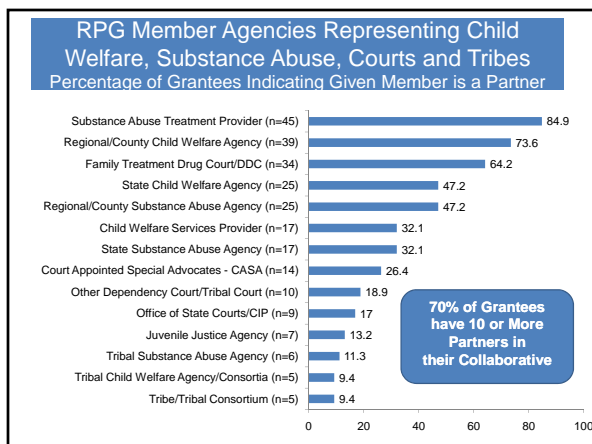


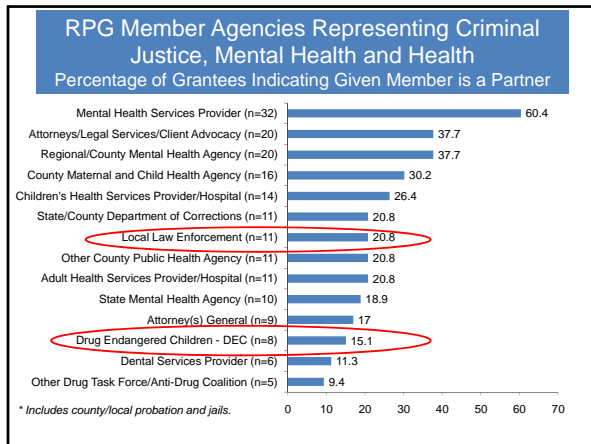
Background

- Authorized by the Child and Family Services Improvement Act of 2006.
- 53 Regional Partnership Grants awarded in September, 2007.
- Improve the safety, permanency, and well-being of children affected by methamphetamine and other substance abuse.
- The grants address a variety of common systemic and practice challenges that are barriers to optimal family outcomes.

Geographic Area Served and Target Populations


- 48 grantees (91 percent) are providing services to families in a specified *region* encompassing multiple counties or in a *single county* in their State.
 - Regions served vary greatly in scope – from 2 to 20 counties
- Nearly all (92 percent) provide services to both in-home (at risk of removal) and out-of-home cases.
 - Some emphasize specific subpopulation (e.g., pregnant and parenting women, parents with children 0 to 5)
- Programs are addressing methamphetamine as well as other types of substance abuse impacting their regions and target populations .





Five Broad Program Strategy Areas (and selected examples of specific grantee activities)

- **Systems Collaboration and Improvements**
 - Cross-systems training
 - Cross-systems information-sharing and data collection
 - Intensive coordinated case management
 - Family Group Decision Making
- **Substance Abuse Treatment Linkages and Services**
 - Improved substance abuse screening and assessment
 - Specialized outreach, engagement and retention
 - Family-centered treatment for parents with children
- **Services for Children and Youth**
 - Early intervention and developmental services
 - Trauma and other therapeutic services




Five Broad Program Strategy Areas (and selected examples of specific grantee activities)

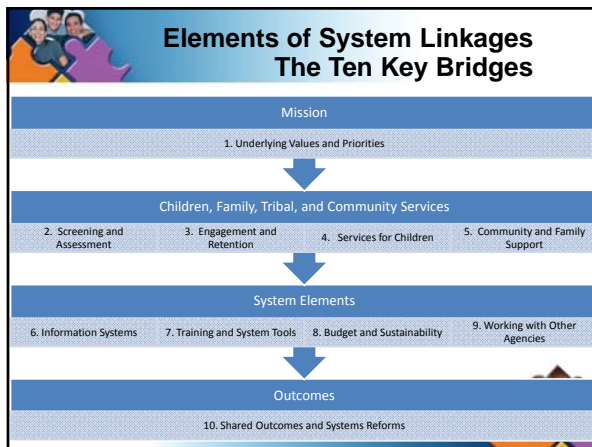
- **Clinical and Community Support Services for Children, Parents and Families**
 - Parenting education and family strengthening programs
 - Continuing care and recovery support services
 - Housing, child care, transportation and other ancillary services
 - Mental health and trauma-specific services
- **Expanded Capacity to Provide Treatment and Services to Families**
 - Implementation of new and/or expansion and enhancement of existing Family Treatment Drug Courts (FTDCs)
 - Increased number of residential treatment beds for parents
 - Co-located and out-stationed staff

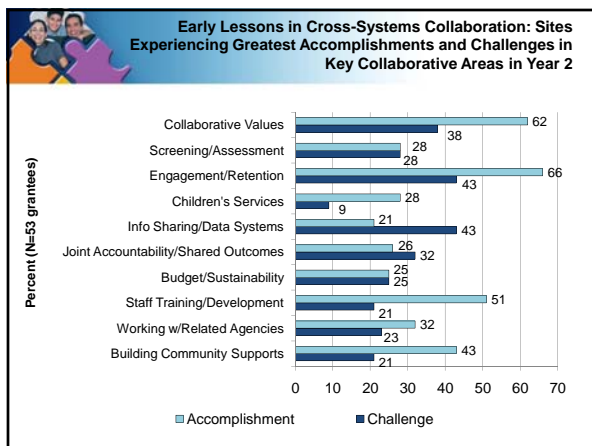


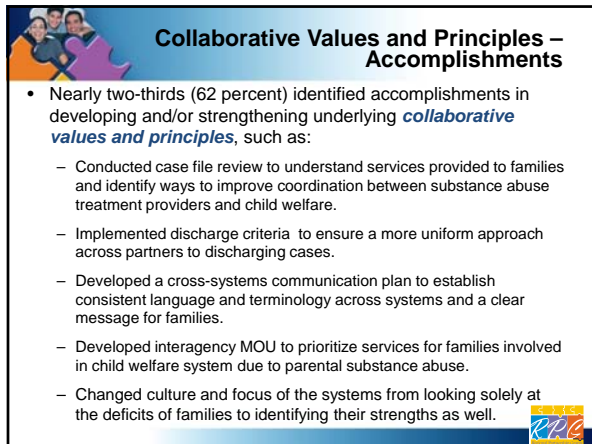
10-Element Framework of Systems Linkages

- Method to organize collaborative activities in specific practice and policy areas
 - Defines key elements of collaboration
 - Describes components of an initiative
- Provides systematic way to assess effectiveness of collaborative work
 - Assists in measuring their implementation
 - Helps assess progress in building stronger cross-systems linkages and where those linkages are most effective






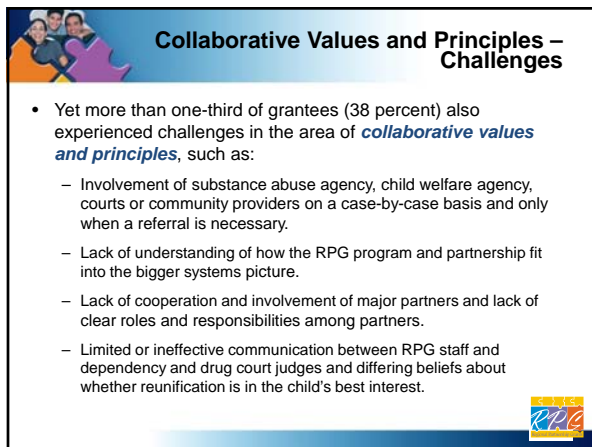




Collaborative Values and Principles – Accomplishments


- Nearly two-thirds (62 percent) identified accomplishments in developing and/or strengthening underlying *collaborative values and principles*, such as:
 - Conducted case file review to understand services provided to families and identify ways to improve coordination between substance abuse treatment providers and child welfare.
 - Implemented discharge criteria to ensure a more uniform approach across partners to discharging cases.
 - Developed a cross-systems communication plan to establish consistent language and terminology across systems and a clear message for families.
 - Developed interagency MOU to prioritize services for families involved in child welfare system due to parental substance abuse.
 - Changed culture and focus of the systems from looking solely at the deficits of families to identifying their strengths as well.

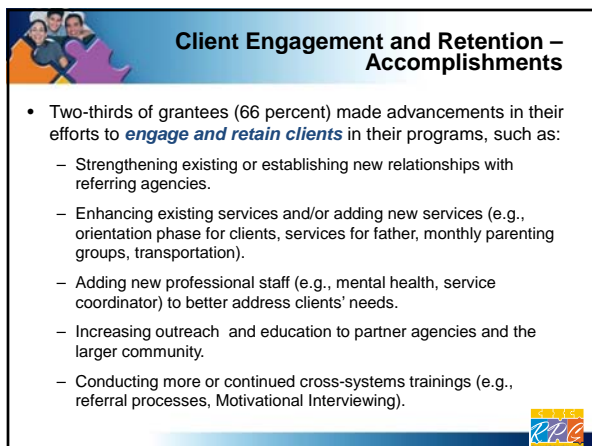




Collaborative Values and Principles – Challenges


- Yet more than one-third of grantees (38 percent) also experienced challenges in the area of *collaborative values and principles*, such as:
 - Involvement of substance abuse agency, child welfare agency, courts or community providers on a case-by-case basis and only when a referral is necessary.
 - Lack of understanding of how the RPG program and partnership fit into the bigger systems picture.
 - Lack of cooperation and involvement of major partners and lack of clear roles and responsibilities among partners.
 - Limited or ineffective communication between RPG staff and dependency and drug court judges and differing beliefs about whether reunification is in the child's best interest.






Client Engagement and Retention – Accomplishments


- Two-thirds of grantees (66 percent) made advancements in their efforts to *engage and retain clients* in their programs, such as:
 - Strengthening existing or establishing new relationships with referring agencies.
 - Enhancing existing services and/or adding new services (e.g., orientation phase for clients, services for father, monthly parenting groups, transportation).
 - Adding new professional staff (e.g., mental health, service coordinator) to better address clients' needs.
 - Increasing outreach and education to partner agencies and the larger community.
 - Conducting more or continued cross-systems trainings (e.g., referral processes, Motivational Interviewing).






Client Engagement and Retention – Challenges


- Yet *client engagement and/or retention* was also one of the areas in which the most grantees (43 percent) experienced challenges. Challenges with obtaining consistent referrals and enrolling and engaging clients once referred included:
 - Shifts in target populations so the RPG program is serving a wider range of families and for longer duration.
 - Needs of clients are more complex and/or of greater magnitude than anticipated.
 - Lack of clarity or agreement on the target population to be served or the referral process.
 - Lack of leverage or ability to enforce compliance with voluntary cases.






Children’s Services – Accomplishments

- Providing *services to children* of parents with substance use disorders services was an area in which a smaller number of grantees experienced either accomplishments (28 percent) or challenges (9 percent). Successes in this area include:
 - Opening an onsite Head Start center in a residential substance abuse treatment facility
 - Incorporating routine child developmental and mental health screenings within the substance abuse treatment provider community
 - Addition of various educational groups for children (e.g., a “Supportive Education for Children of Addicted Parents” specialty groups for children ages 6-12 during summer vacation)
 - Working with the schools to begin to develop an early screening and intervention pilot project to improve school attendance and performance.






Children’s Services – Challenges

- Challenges in the area of *children’s services* include:
 - Difficulty in linking children to needed services once problems are identified through screening/assessment.
 - Lack of available and appropriate intervention and treatment services for children in the community.
 - Lack of adequate staff knowledge and need for training about child development, how parental substance use affects children, and other related topics.

While many grantees did not consider children’s services to be a central program component or primary focus originally, they have since identified it as an area of program development to be addressed in Year 3





Collaborative Relationships – Key Themes/Lessons

- Collaboration takes time and is developmental and interactive in nature
- Collaboration needs to occur at multiple levels
 - Front-line and larger systems levels
 - State and local levels
- Importance of oversight and feedback structures (e.g., advisory boards, steering committees)
 - Provide leadership, direction, problem-solving
 - Continually review project goals and progress
 - Address emerging or specific issues



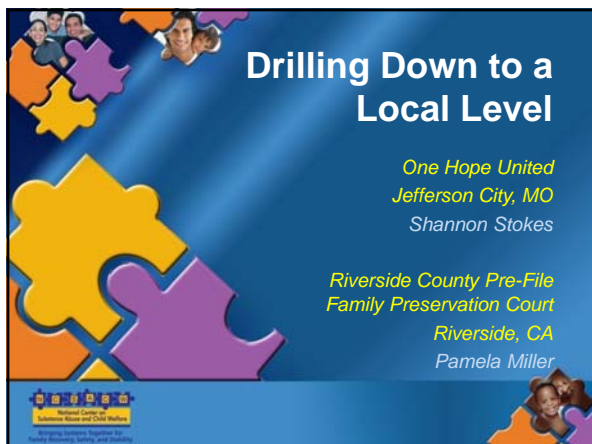


Collaborative Relationships – Key Themes/Lessons

Fundamentals of successful collaboration and active engagement of partners include:

- Alignment of project and partner goals
- Communication of concrete benefits to prospective partners
- Ability to integrate the collaborative work into existing efforts or infrastructures
- Clarification, understanding and agreement on roles, responsibilities and processes
- Ongoing communication (all levels), reporting and monitoring
 - Establishing relationships is an event, maintaining relationships is a process







Drilling Down to a Local Level

*One Hope United
Jefferson City, MO
Shannon Stokes*

*Riverside County Pre-File
Family Preservation Court
Riverside, CA
Pamela Miller*






MISSOURI ALLIANCE
FOR DRUG ENDANGERED CHILDREN
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Developing a State DEC in Missouri

Shannon Stokes

RPG Program Description 


. Circle of Hope: Keeping Children Safe and Families Together

- October 1, 2007 to September 30, 2012
- Part of Systems Collaboration & Improvements cluster

. Purpose

- Increase the well-being of and improve the permanency outcomes for children affected by methamphetamine or other substance abuse.

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RPG Program: Circle of Hope 

. Partners

- Missouri Department of Social Services – Children’s Division
- Missouri Department of Mental Health – Division of Alcohol and Drug Abuse
- Missouri Juvenile Justice Association
- Missouri Institute of Mental Health
- One Hope United

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RPG Program: Circle of Hope



• Objectives

- Enhanced services to families
- Increased state and local capacity
- Increased awareness

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MODEC History



• *Missouri Guidelines for the Safe Removal of Children from Methamphetamine Labs*

- Recognized continued shared interest of state agencies, non-profits, and professionals around the state

• Efforts resulted in inclusion of MODEC in the Regional Partnership Grant Application

- Provides small amount of funding for forming / building MODEC

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MODEC Development



• Notice of funding award for RPG

• Initial meeting held at NADEC annual conference in Kansas City, MO

- Lori Moriarty spoke with the group about next steps in forming a statewide DEC
- Added to existing list of interested agencies and individuals from Missouri

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MODEC Development



- **First official meeting held on February 19, 2008**

- Convened by Missouri Juvenile Justice Association

- **Facilitator for quarterly meetings**

- Removed "ownership" of effort from a particular agency or individual
- Facilitator used developmental phases outlined by NADEC
- Facilitator provided quarterly updates on progress of group
 - What the group has accomplished
 - What the group has left to be accomplished

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MODEC Development



- **Initial months spent on . . .**

- Organizational structure
- Bylaws
 - Elected steering committee
 - Established criteria for membership
- Committees

- **Inaugural Summit**

- July 2009
- Speakers from NADEC, local DEC organizations
- Town hall to learn what local communities would like to see from a state DE

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Our Mission



The Missouri Alliance for Drug Endangered Children supports communities in serving and protecting children and families from drug environments.

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Our Goals



- To provide services to local groups that address drug endangered children and promote effective services resulting in the well-being of children and families.
- To create public awareness through effective media and strategies using a variety of tools and resources.
- To provide educational opportunities, assistance, support, and resources about drug endangered children.
- Advocate for policy/practice changes impacting drug endangered children.

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Planning Committees



- **Support/Training/Coordination**
- **Capacity and Sustainability**
- **Public Awareness/Outreach**

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Sample of Participating Agencies



- ACT Missouri
- Children's Mercy Hospitals and Clinics
- Children's Trust Fund
- Health Care Foundation of Greater Kansas City
- One Hope United
- Missouri CASA
- Missouri Department of Health & Senior Services
- Missouri Department of Mental Health
- Missouri Department of Public Safety
- Missouri Department of Social Services
- Missouri Foundation for Health
- Missouri Institute of Mental Health
- Missouri Juvenile Justice Association
- Missouri KidsFirst
- Missouri Narcotic Office's Association
- Missouri Office of State Courts Administrator
- Missouri State Highway Patrol
- United States Attorney's Office Western District of Missouri

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Challenges in Collaboration



- **Bringing the right partners to the table at the right time.**
- **Connecting state and local efforts for drug endangered children.**
- **Sustaining efforts.**

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Strategies to Overcome Challenges



- **Challenge: Bringing the right partners to the table at the right time.**
- **RPG Benefits**
 - Subcontract for MODEC development with an agency with established relationships around the issue
 - Partners for RPG funding are key to MODEC

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Strategies to Overcome Challenges



- **Challenge: Connecting state and local efforts for drug endangered children.**
- **RPG Benefits**
 - Funding provided for a survey of local jurisdictions to identify DEC or DEC-like teams in a community
 - Lessons learned through collaborative challenges at the local level in the course of service delivery can help inform actions for MODEC
 - At the local level, working to re-invigorate DEC efforts in the service delivery area

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Strategies to Overcome Challenges



- **Challenge: Sustaining efforts**

- **RPG Benefits**

- Funding allowed for continuous “push” during organizational development
- With structure in place, natural champions / leaders have emerged
- Task oriented goals for the future allow all partners to provide time, talent, treasure

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Program Outcomes



- **Establishment of MODEC**

- Multidisciplinary efforts and knowledge around drug endangered children issues at the state level
- Mechanism in place to reach communities
- Reaching policy makers and legislators to advocate for the needs of drug endangered children
- Component of RPG efforts likely sustainable beyond funding period

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Program Outcomes



- **Long-term**

- MODEC will drive efforts to:
 - Enhance services to families through joint local and state efforts.
 - Increase capacity to provide services through mutual identification and understanding of the needs of drug endangered children.
 - Increase awareness of the affect of substance abuse on children and families .

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Pre-Filing Family Preservation Court (Dependency Drug Court)

Pamela Miller
Collaborative Justice Coordinator
Superior Court of Riverside County,
California

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In a Nutshell

"Pre-Filing Family Preservation Court: Savings & Workload Reduction - Working to meet the NATIONAL goal of reducing the number of children in Foster Care by 50% by year 2020."

1. What is a Pre-Filing Family Preservation Court (FPC) ?
2. Opportunities and New Relationships
3. What's this DEC Thing?
4. Program successes

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Family Preservation Court

- Alternative Response Program
- Voluntary Drug Court Program
- Controversial



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FPC Framework

- An intensified, minimum of one year, court-supervised substance abuse recovery program.
- Designed to enhance the sobriety efforts of parents.
- Prior to filing a dependency petition.
- To enable their children to be safely maintained with their parents.

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Major Components

1. Comprehensive Services for the Entire Family
2. Collaboration/Partnership with Key Stakeholders
3. Community Support from Ancillary Agencies
4. Child Safety

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Family Preservation Courts are Needed

- Large and continuing to skyrocket Child Welfare caseloads
- Children & Family Services Review (CFSR): Reduce FC caseload by 50% by year 2020
- Budget Cuts
- Lack of foster facilities - children housed out of county/state.

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**Family Preservation Courts
are Needed:**

- Programs are proven to be effective
- "Call me Tuesday" reasonable efforts no longer apply.
 - Pre-Placement Preventative Effort:
Reasonable effort to prevent or eliminate the need for child removal.
[42 USC 671(b)(i), 45 CFR 1356.21(b)
WIC § 319(d)(1) & CRC Rule 5.678(c)(1)]

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**FPCs Provide Both New
Opportunities and Relationships**

- No Child Welfare case management
- Reduced Caseloads for Child Welfare & Attorneys
 - No case before the Court
 - Keep Families Together (Medi-cal-Medicaid Funding, Housing Resources, Children Maintained in School)
 - In-Home Visitation
 - Home visits by Sheriff's Department for Drug Endangered Children

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**Sheriff's Department
Drug Endangered Children (DEC) Team**

- House Checks
- Failure to appear
- Non-compliant behavior
- DEC Officer reports back to the program
- Steering Committee member

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DEC /CPS

- DEC in Riverside
- DEC Relationship with CPS
- Training for DEC with families
- DEC Relationship with Family Preservation Court
- Trusting Partners

FAMILY PRESERVATION COURT
AND DEC
TRACKING FORM

TO BE COMPLETED BY FAMILY PRESERVATION COURT CLERK

Name of Person Requesting Response: _____
Contact Phone Number (for Questions): _____
Harris Case Number: _____
Date: _____
Address: _____
Parent(s) Name(s): _____
Date of Birth: _____
Brief description of reason for referral: _____

Number of Children: _____ Age: _____
Date Completed by DEC (MM/YY/BB): _____
Name of DEC Investigator: _____
Date of Response: _____
Total hours DEC spent on investigation: _____
Brief Outcome of Investigation: _____

DEC Case number: 01-915-1712
Notes: _____

FPCs Have Shown

- Faster and more successful reunification of families
- Reduction in Court Caseloads
- Pre-Filing children kept out of Foster Care
- Child safety
- Substantial Cost Savings

Riverside CPS Stats

FY 07/08 and 08/09

- In **2008**, the number of children entering foster care decreased by **1,400** children - with **2009** holding that number steady.
- Riverside DPSS attributes this to the combined efforts of:
 - Pre-Filing FPC
 - Team Decision Making
 - Differential response working together to keep these families together

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Riverside CPS Stats.,

FY 07/08 and 08/09

The cost savings to the County- for social services is averaged out to:

- Decreased CSW Case Load
1,400 Children = 35 Social Workers w/Case Load of 40
35 Social Workers x \$80,000 (Yearly Salary) = \$2,800,000.00
- Decreased Foster Care Rates
1 Child Foster Care Costs = \$1,300 per month
\$1,300 x 12 months = \$15,600 per child per year minimal cost
\$15,600 x 1400 Children = \$21,840,000.00
- Total Savings
\$2,800,000.00 (Savings- Decreased CSW Case Load)
+ \$21,840,000.00 (Savings- Decreased Foster Care Costs)
\$24,640,000.00 (Total Savings per year for two years)

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*STATS FOR Riverside FPC:

- **724 Graduates**
- 569 post file graduates (6 years)
- 155 Pre-file graduates (3 years)
- **Only 14 graduates re-entered the system**
 - Represents 2% of re-entry into Foster Care
 - Riverside County Re-Entry (13%)
 - State of California Re-Entry (11.3%)
 - National Average Re-Entry (9.9%)
- Cost per client \$5,000

*As of 08/31/10

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STATS FOR Riverside FPC:

- Post filing has a 65% retention rate
 - 35% fail out
- Pre filing has a 68% retention rate
 - 32% quit or fail out
 - 15% go to post file
- **1613** children stayed out of the system

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Saving of Court Resources

Court costs over the life of one case:

Judge: 14.5 hours X \$130.07/hour = \$1,886.02

Court Reporter: 25.5 hours X \$66.70/hour = \$1,700.85

Courtroom Assist: 13.5 hours X \$40.25/hour = \$543.38

Sheriff: 13.5 hours X \$54.76/hour = \$739.26

Mediator: 5 hours X \$55.30/hour = \$276.50

Crt Serves Assist: 13.5 hours X \$34.00/hour = \$459.00

Total = \$5,605.00 per case

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Saving of Court Resources

Attorney costs over life of case:

Consultations/Interviews – 9 hours

Detention Hearing – 1.5 hours

Juris/Dispo(2) – 3 hours

Review Hearings(4) – 8 hours

SUBTOTAL: 23.5 hours X \$50 per hour X 4 Attorneys per case = \$4700.00

Support Staff: Reception/Case Prep/Filing – 30 hours X \$22 per hour = \$660.00

Investigation - 15 hours x \$20.00 per hour = \$300.00

Total = \$5,660.00 per case

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MINIMUM Court and Attorney Costs Per Case:

\$5,605.00 (Court Costs)
 +\$5,660.00 (Attorney Costs)

\$11,265.00

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Need to Deal with Increasing Dependency Caseloads

YEAR (Jan-Dec)	# OF CASES FILED	INCREASE OVER PRECEDING YEAR
2001	3724	
2002	4109	10%
2003	4155	1%
2004	4779	15%
2005	6302	38%
2006	6898	11%
(75% increase in 6 years)		
2007	6547	-5%
2008	4603	-30%
2009	4022	-13%

Original & Subsequent Petitions

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Average Court Cost to Social Services Per Case FY 06/07

Court Officer (CSSW V):

Petition and File - 1 hour
 Detention Hearing - 1.5 hours
 Juris/Dispo(2) - 3 hours
 Review Hearings(4) - 8 hours
 TOTAL: 13.5 hours X \$48 hour = **\$648.00**

Noticing Assistant (OAIII):

Notice for 6 hearings X 5 parties - 30 hours
 TOTAL: 30 hours X \$37/hour = **\$1,110.00**

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Average Court Cost to Social Services Per Case FY 06/07 (cont)

Attorney (County Counsel):

Consultations - 5 hours

Pretrial/Trial - 5 hours

Motions/Evidence - 4 hours

SUBTOTAL: 14 hours X \$65/hour = **\$910.00**

Support Staff (County Counsel):

Reception/Case Prep/Filing - 30 hours

SUBTOTAL: 10 x \$26/hour = \$260.00

TOTAL: \$910.00 + \$260.00 = **\$1,170.00**

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Average Court Cost to Social Services Per Case FY 06/07 (cont)

Regional Support Staff (OAIID):

Copying and Prep - 8 hours

TOTAL: 8 hours X \$37/hour = **\$296.00**

DPSS Courier/SSA:

Delivery - 6 hours

TOTAL: 6 hours X \$37/hour = **\$222.00**

65

Total Average Court Cost to Social Services Per Case FY 06/07

Social Services Total Court Costs Per Family (mother, father, father, child 1, child 2) = \$3,446.00

Note: Wages are intended to include benefits, retirement, facility leasing and maintenance, and worker's compensation costs.

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Combined Court and Social Services Costs

\$11,265.00 (Court)
\$3,446.00 (Social Services)
\$14,711.00 (Total Court Costs)

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Summary




Bringing Evidence Together for Family Economic Safety and Stability

Technical Assistance Resources





Bringing Evidence Together for Family Economic Safety and Stability



Types of TA Products

- Collaborative practice and policy tools
- Information and sharing of models
- Expert consultation and research
- Development of issue-specific products
 - Monographs, white papers, fact sheets
- **Training resources and collaborative facilitation**
 - On-line courses and other training materials
- Longer-term strategic planning and development of protocols and practice models






Online Training Resources

All trainings are 1) Available at no cost, 2) Issued a Certificate of Completion and 3) Eligible for CEUs!


- Understanding Substance Abuse and Facilitating Recovery: A Guide for Child Welfare Workers
- Understanding Child Welfare and the Dependency Court: A Guide for Substance Abuse Treatment Professionals
- Understanding Substance Use Disorders, Treatment and Family Recovery: A Guide for Legal Professionals



National Center on Substance Abuse and Child Welfare

How do I access technical assistance?

- Visit Melissa Lujan at the NCSACW exhibit booth!
- Visit the NCSACW website for resources and products at <http://ncsacw.samhsa.gov>
- Email us at ncsacw@cffutures.org
- Call us: 1-866-493-2758





Contact Information

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Discussion



National Center on
 Substance Abuse and Child Welfare
 Bringing Children Together for
 Family Reunification, Safety, and Stability
