

# A New Approach – Family Treatment Courts as Part of a Continuum of Care



Advancing Justice for All Families  
**NADCP 2018 | Houston, TX**

**Theresa Lemus and Tessa Richter**, Children and Family Futures | May 31, 2018



# Acknowledgement

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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. Discuss opportunities and challenges of building a continuum of care responsive to families' needs that provides proven practices to all families in your child welfare system affected by substance use disorders
2. Explore the lessons and experiences of Jefferson County, Colorado and Wapello County, Iowa as they integrate their FTC into a continuum of care
3. Identify opportunities to apply key lessons from the Statewide System Improvement Program (SSIP) initiative

# Key Messages

*Part of a greater  
whole*

*Provide proven practices  
to all families*

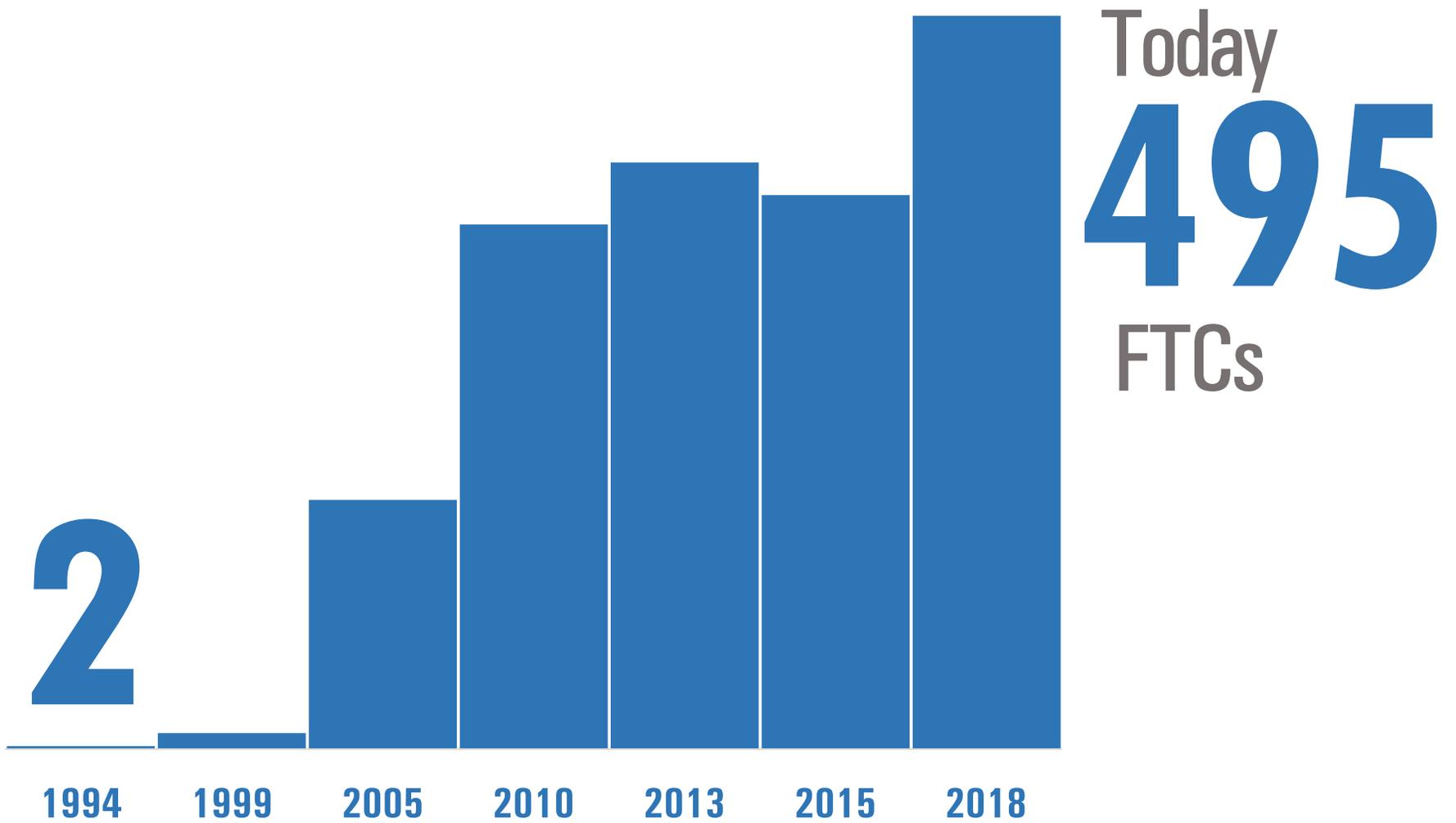
*You know your clients and  
community best*

*Key Concepts every  
community will face*



8,700,000 children

*\* 2002 – 2007 SAMHSA National Survey on Drug Use and Health (NSDUH)*



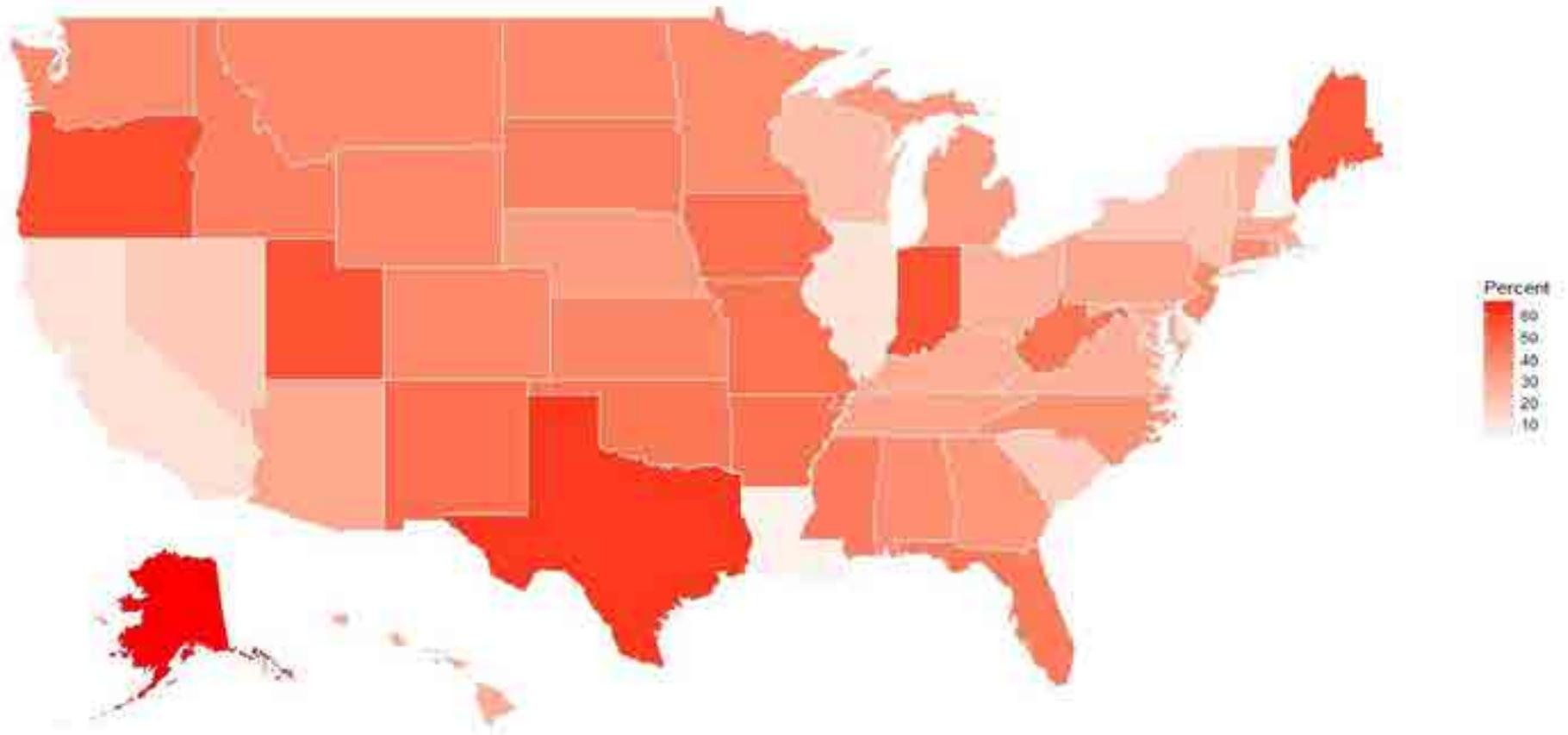


**495 FTCs –  
many serving only  
5-10% of eligible  
families**

**The Need > FTC**

- Jurisdictions with largest proportion of out-of-home care
- States experiencing increases in out-of-home care caseloads due to opioid crisis

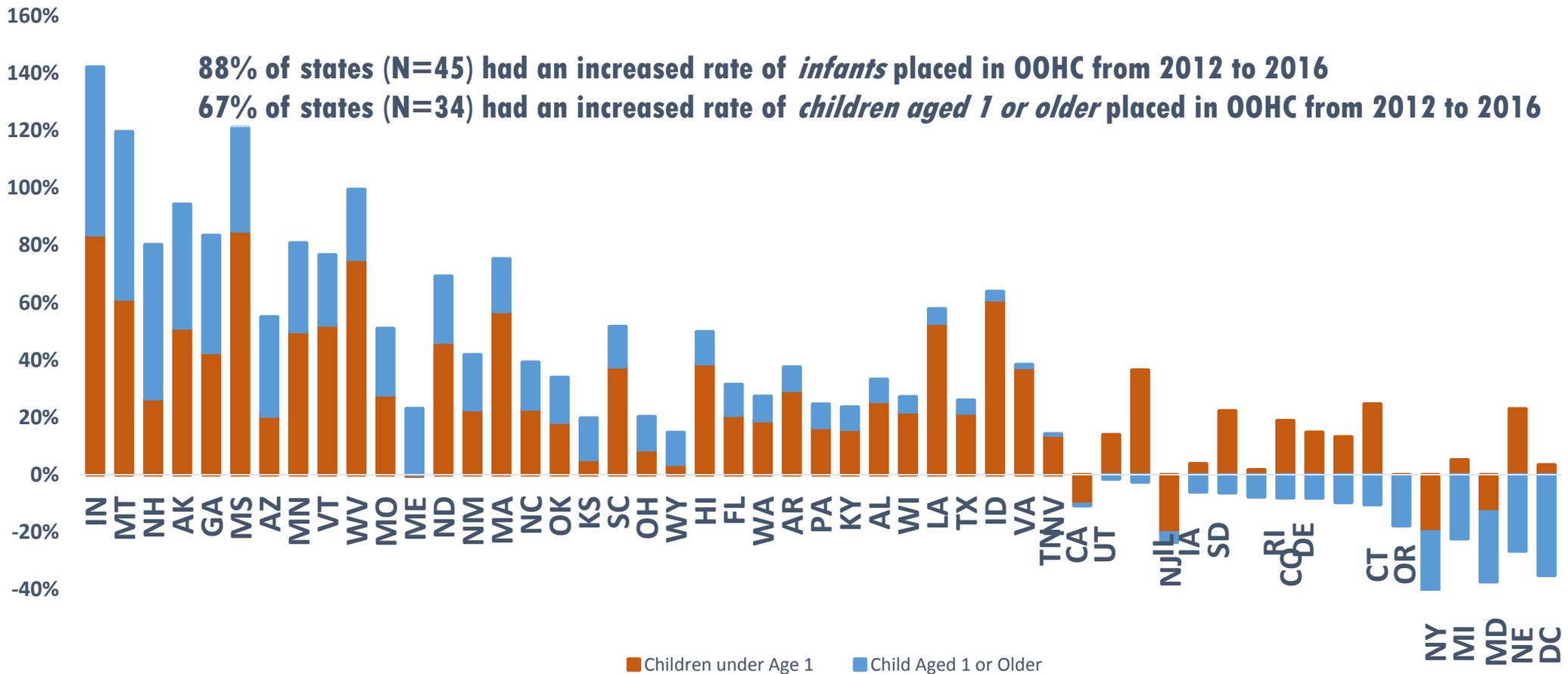
## Of Children Placed in Out of Home Care in 2016, Percent with Parental Alcohol or Drug Use as a Factor for Child's Removal by State



Note: Estimates based on all children in out of home care at some point during Fiscal Year

Source: AFCARS Data, 2016

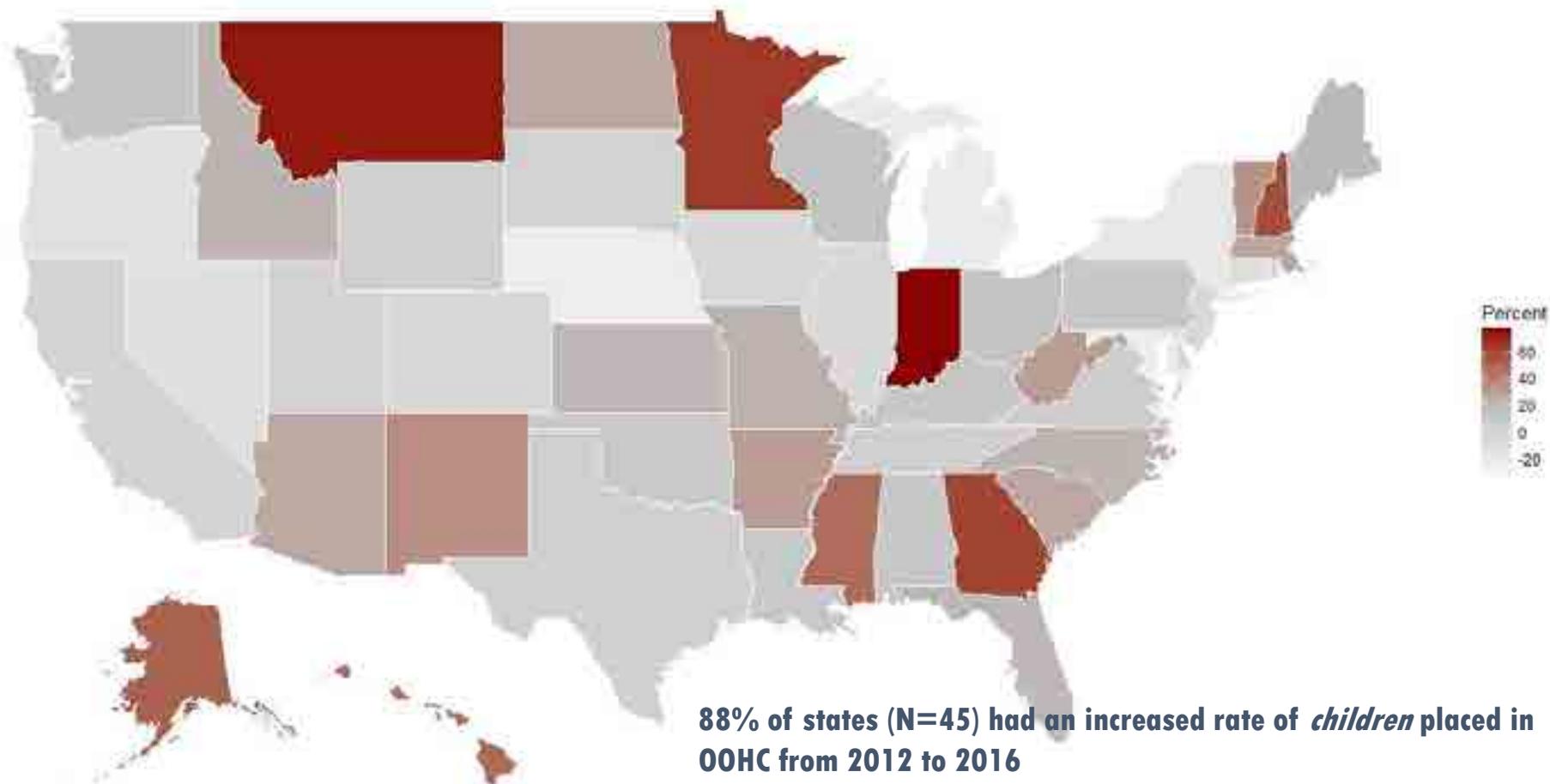
# Percent Change of Children Under Age 1 or Older Placed in Out of Home Care by State, 2012-2016



Note: Estimates based on children who entered out of home care during Fiscal Year

Source: AFCARS Data, 2012-2016

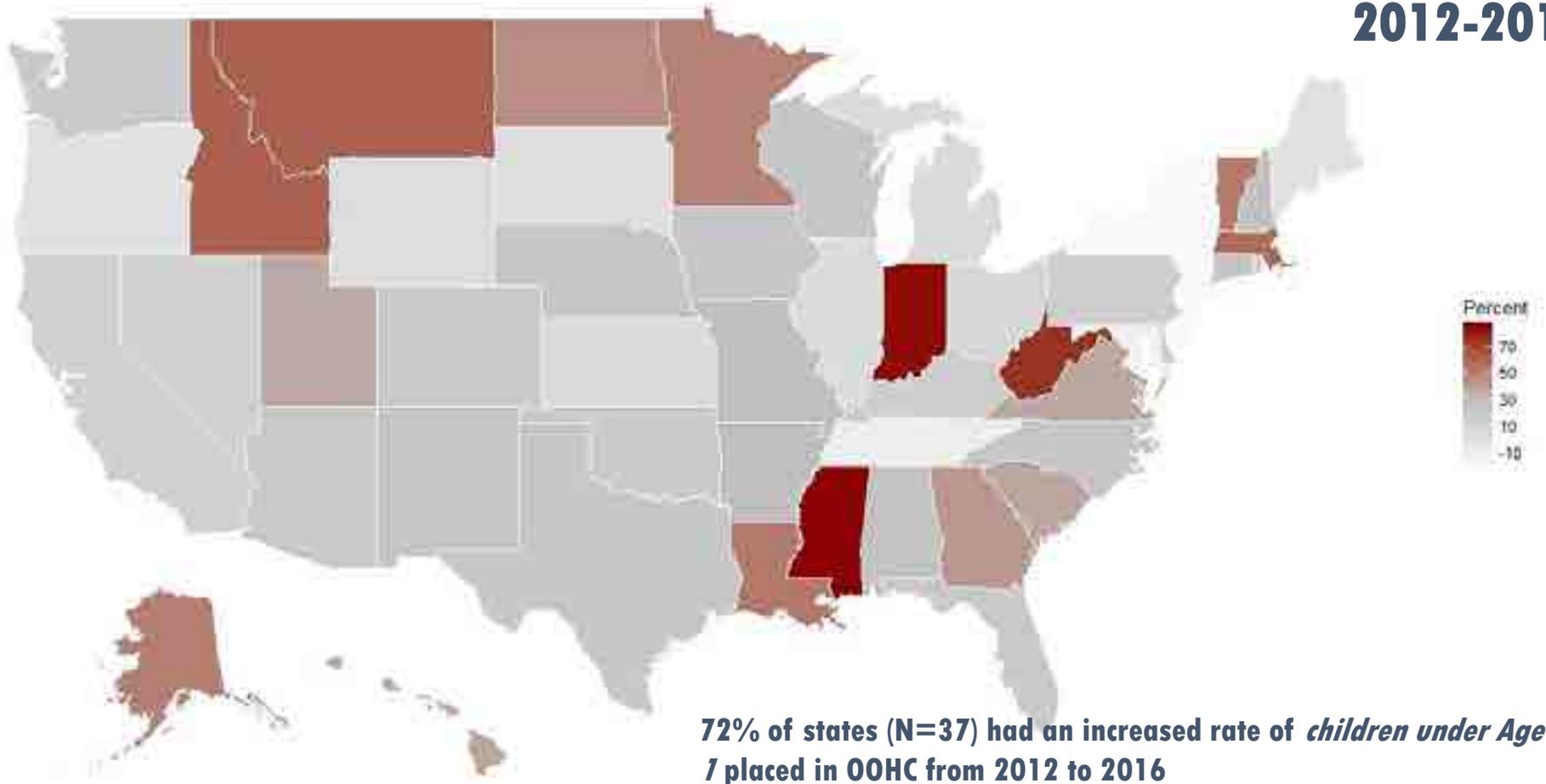
## Percent Change of Children Placed in Out of Home Care by State, 2012-2016



Note: Estimates based on children who entered out of home care during Fiscal Year

Source: AFCARS Data, 2012-2016

# Percent Change of Children Under Age 1 Placed in Out of Home Care by State, 2012-2016



Note: Estimates based on children who entered out of home care during Fiscal Year

Source: AFCARS Data, 2012-2016



**What's going to happen to these families and kids?**

National Strategic Plan  
For Family Drug Courts

MARCH 2017



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# One Vision

*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

MARCH 2017



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# Three Goals

1

Ensure Quality  
Implementation

2

Expansion of  
FDC Reach

3

Build Evidence  
Base

# National Strategic Plan For Family Drug Courts

MARCH 2017



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## GOAL

# 1

Improve the effectiveness of the existing FDC network by assuring it operates with fidelity to the FDC model

## STRATEGY



Develop model standards

# National Strategic Plan For Family Drug Courts

MARCH 2017



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## GOAL

# 2

Expand the reach of FDCs to keep families together and reduce maltreatment

## STRATEGY



Infuse FDC strategies into dependency court and CWS systems

# Taking What Works to Serve More Families



**FDC – Key Ingredients**



**Larger Dependency Court System**

# National Strategic Plan For Family Drug Courts

MARCH 2017



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## GOAL

# 2

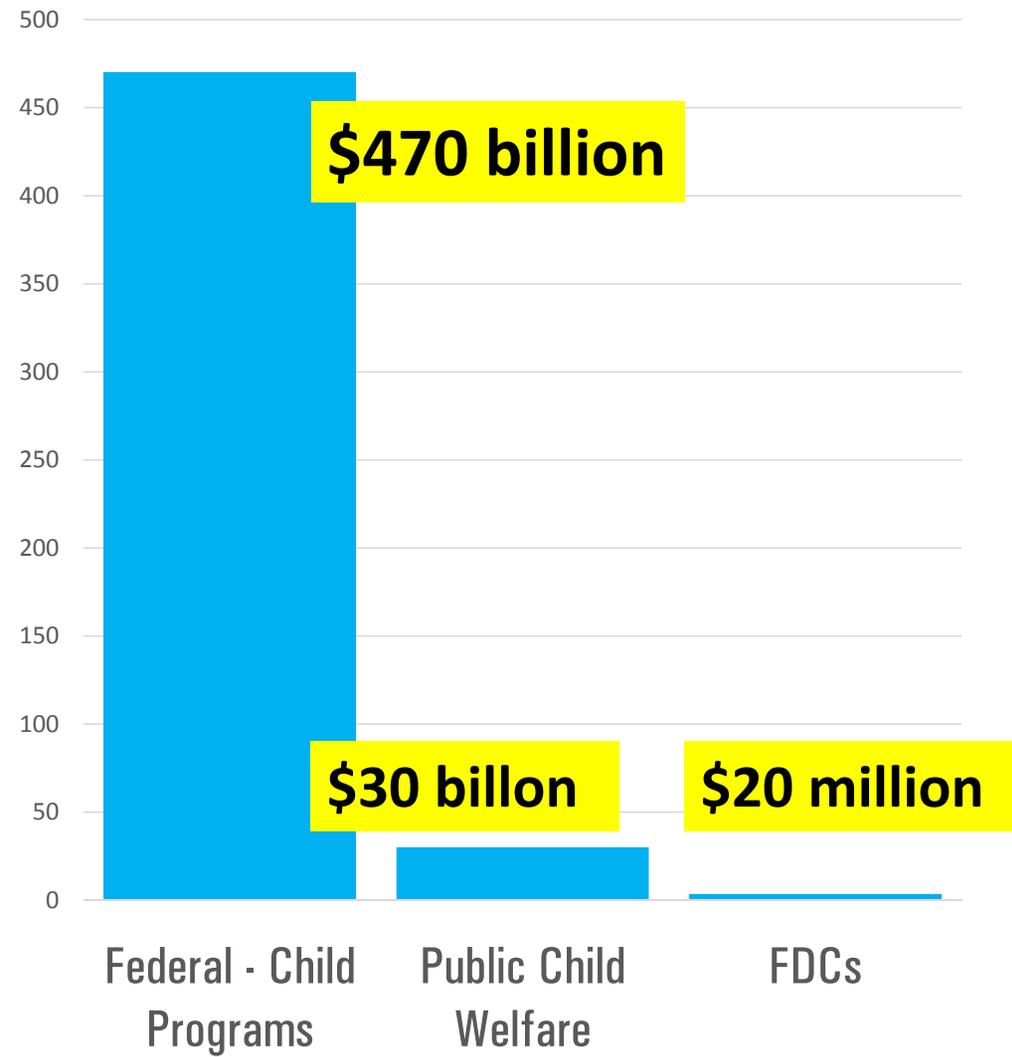
Expand the reach of FDCs to keep families together and reduce maltreatment

## STRATEGY



Elevate opportunities for states to leverage ongoing federal, state, and private funding

# Getting a Piece of the Pie



A photograph of a man, a woman, and a baby looking at each other affectionately. The man is on the left, the woman is on the right, and the baby is in the center, looking up at the man. The image is framed by a white border.

# Opportunity

- Child Abuse Prevention and Treatment Act (CAPTA)
- Comprehensive Addiction and Recovery Act (CARA)
- Plans of Safe Care (PoSC)
- Families First Prevention Services Act

**\$60 million**

CAPTA state grants to implement  
Plans of Safe Care

*Just Appropriated*

*Funds will be contracted by September 30, 2018*

**\$20 million**

Kinship Navigator Programs

**\$40 million**

ACF to provide substance abuse and  
mental health services to families in CWS

**Opportunities**

**\$70 million**

SAMHSA Drug Courts

**\$1 billion**

Treatment funds to SAMHSA for states

**35%**

SAMHSA budget increase

# National Strategic Plan For Family Drug Courts

MARCH 2017



This document was developed by the Office of the Attorney General, Office of the Statewide Public Defender, and the Office of the Statewide Juvenile Defender, in collaboration with the National Center for Family Drug Courts. The opinions, findings, and conclusions are those of the authors and do not necessarily reflect those of the State of New Jersey.

## GOAL

# 3

Continue to build evidence base about what works for FDCs to improve outcomes for children and parents

## STRATEGY



Develop a “second generation” research agenda



## 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

(Boles & Young, 2011; Carey et al. 2010a, 2010b; Worcel et al., 2007)

# We Need a Research Agenda To Better Understand

Target Population

True Need for FDCs

Matching Service  
to Need

Who needs FDCs?

Who do FDCs work for? Why?

Racial disproportionality and  
disparity

# National Strategic Plan For Family Drug Courts

MARCH 2017



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## GOAL

# 2

Expand the reach of FDCs to keep families together and reduce maltreatment

## STRATEGY



Infuse FDC strategies into dependency court and CWS systems



# Statewide System Improvement Program

*Expanding the Reach of FTCs*





## SSIP Goals

- 1. Implement and institutionalize effective FTC practices at the larger state-level child welfare, SUD treatment, and court systems**
- 2. Ensure all families affected by substance use disorders and involved with child welfare have access to a comprehensive array of services to improve child, parent, and family outcomes**
- 3. Strengthen cross-system collaboration at the state and local level**

A map of the United States is shown in the background. The western half of the map is shaded in a dark purple color, and the eastern half is shaded in a dark green color. Two callout boxes are overlaid on the map. The first callout box is orange and contains the names of four grant recipients for FY 2017. The second callout box is also orange and contains the name of the grant recipient for FY 2016.

**FY 2017 OJJDP SSIP Grantees**

**Colorado Judicial Department  
Judicial Branch of Iowa  
New York State Unified Court System  
Supreme Court of Ohio**

**FY 2016 OJJDP SSIP Grantee**

**Judiciary of Guam**

The Statewide System Improvement Program is more than just an FTC initiative; rather it is about taking on **“a new approach”** or **“new way of doing business”** to serving **all families** involved in the child welfare system affected by parental substance use.

# The Vision – For All Families

*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



# We Know What Works

## 7

- 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

*Sources: 2002 Process Evaluation and Findings from 2015 CAM Evaluation*



**“If it works, why is it not working for more children and families?”**

**And what happens to those families that are not participating in an FTC – what happens to them?”**

# Which Doors?



Not every  
parent needs  
treatment

Not every child  
needs  
CWS  
intervention

Not every family  
needs Family  
Treatment Court

Safety | Well-Being | Permanency

 An early system of identifying families in need of SUD treatment

 Timely access to assessment and treatment services

 Family Relationship Therapies

 Evidence-Based Parenting



New Approach



Family Treatment Court



Low Risk  
Low Need

# Families Affected by Substance Use Disorders Continuum

High Risk  
High Need

 Increased judicial oversight

 Collaborative non-adversarial approach and efficient cross-system communication

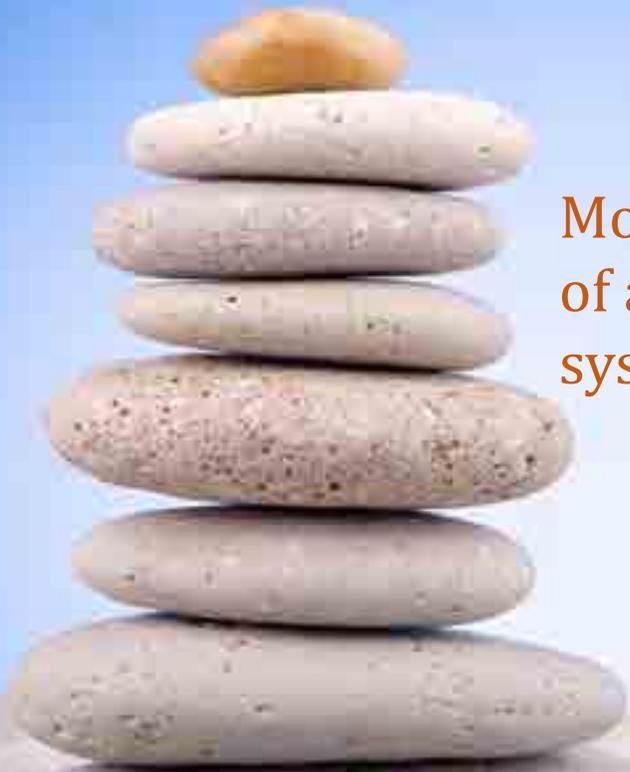
 Increased management of recovery services and compliance with treatment

# 3 Key Concepts

Continuum of

*Care*





Most sit on top  
of an unchanged  
system

As a marginal  
reform strategy

Separate from  
larger system

**Where does your FTC fit in the larger system?**

# FTCs are part of larger system

1. Knowing extent which the FDC meets larger child welfare and substance use disorder treatment needs **(scale)**
2. Knowing how the FDC “compliments” other child welfare and substance disorder initiatives in your community in deciding on who they will serve **(target population)**
3. Knowing how your work will impact outcomes for court, child welfare, and substance use disorder treatment and knowing how resources will be shared, redirected, and leveraged across systems in a meaningful way; understanding that these are not “new” clients/parents but rather **“our clients”**

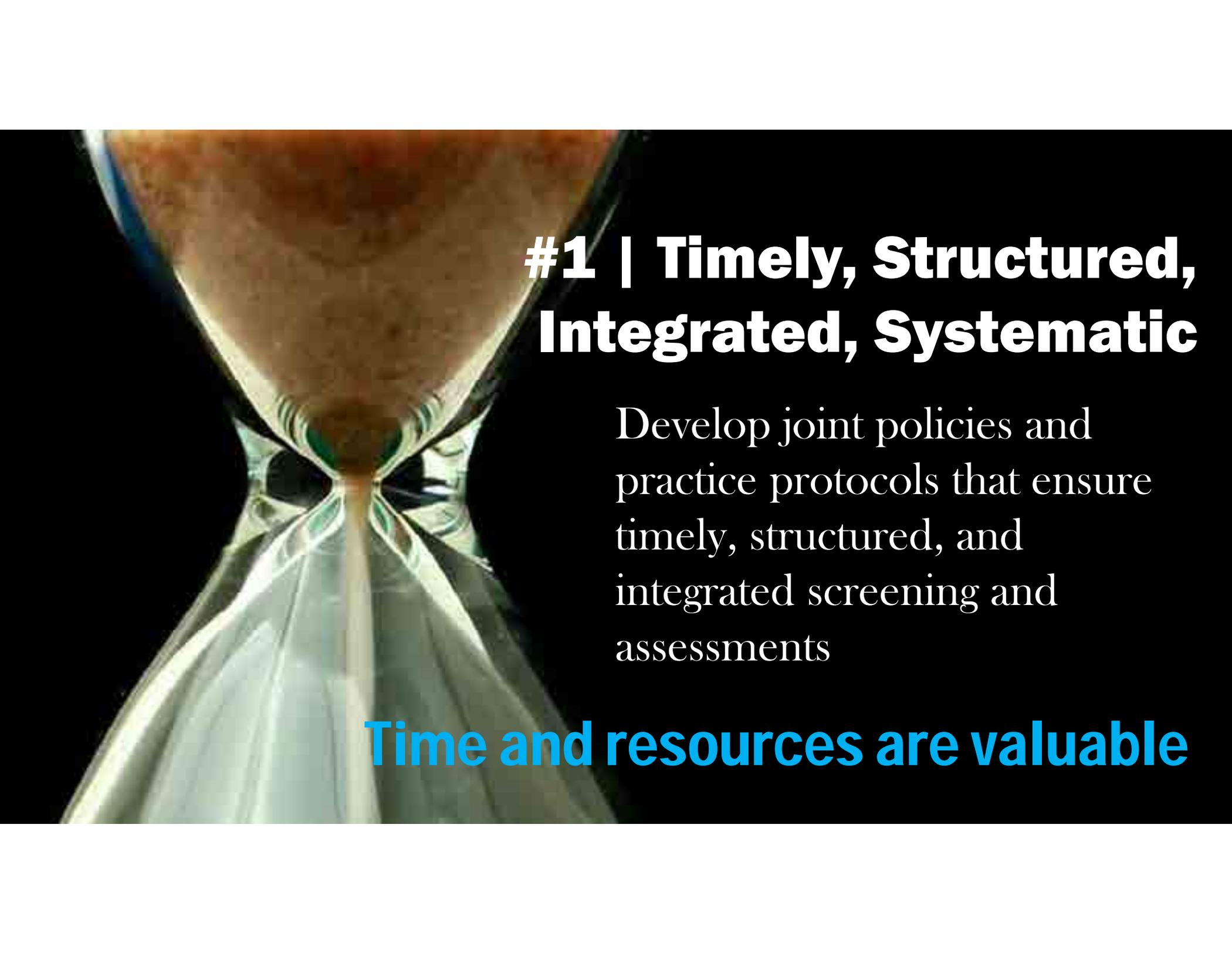
# Each Community is Unique

Continuum of

*Care*



Legislation | Policies | Geography | Needs | Resources

A close-up, vertical view of an hourglass. The top bulb is filled with dark brown sand, while the bottom bulb is filled with light-colored sand. The narrow neck in the middle shows the transition between the two colors. The background is black, making the hourglass stand out.

# **#1 | Timely, Structured, Integrated, Systematic**

Develop joint policies and practice protocols that ensure timely, structured, and integrated screening and assessments

**Time and resources are valuable**

# What Do We Mean by Systematic Approach?

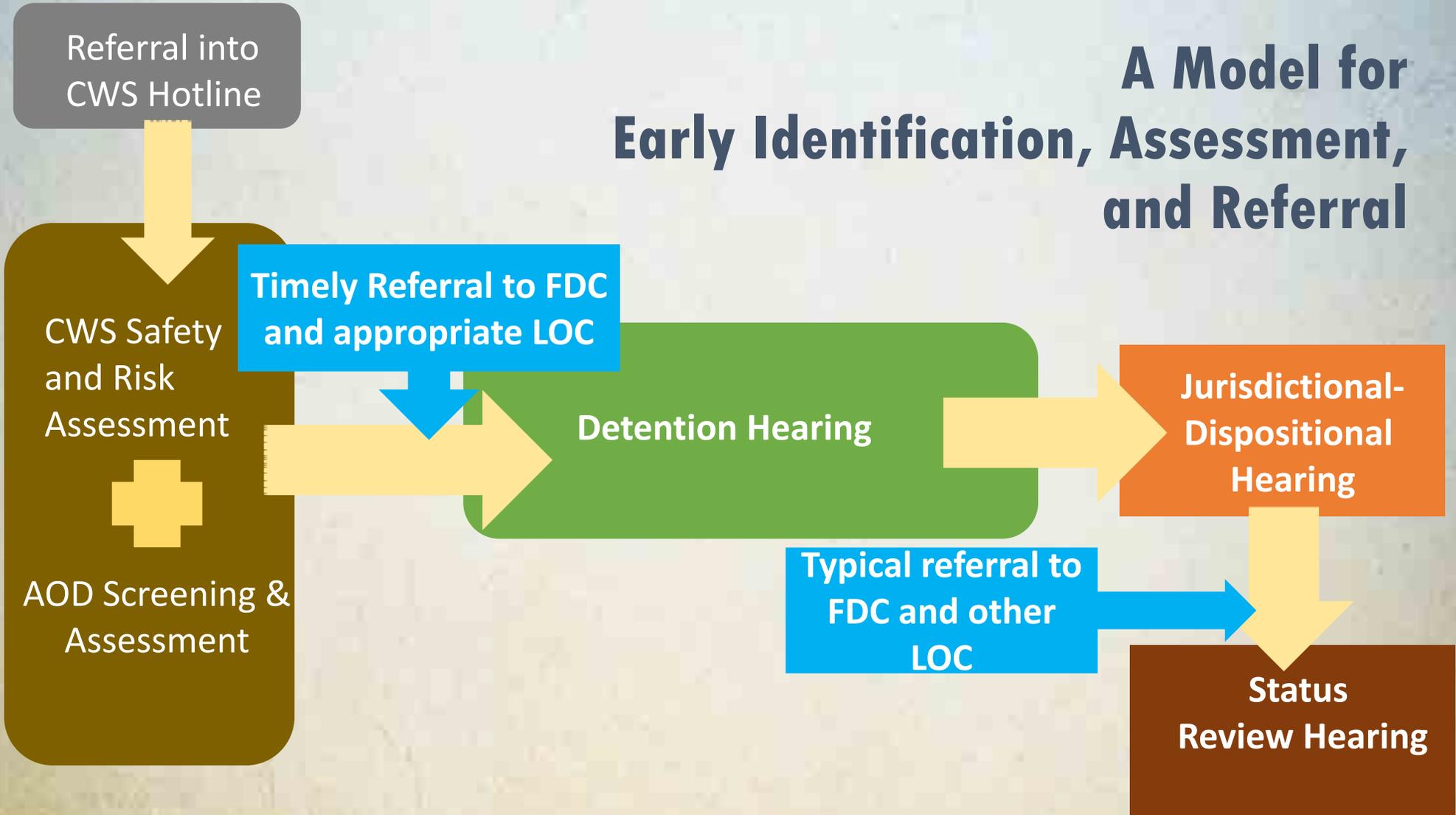
## Objective & Systematic

- 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 FDC 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 FDC*

# A Model for Early Identification, Assessment, and Referral



# SSIP Highlight

**Universal  
Screening**

**SACWIS  
Changes**



# What makes effective protocols?

- Shared mission and vision—agreement and understanding of target population and expected outcomes
- Clear and consistent referral process—preferably warm hand-off
- Coordinated case planning, information sharing,
- Timely and ongoing communication and follow-up
- Understanding of and attention to competing “clocks”—timeframes—recognizing that time is of the essence

# Child Welfare Intervention Continuum

## DIMENSIONS OF DECISION-MAKING

### SAFETY

Current conditions within family or home which pose an immediate threat of danger to child

&

### RISK

The likelihood that maltreatment will occur or reoccur in future

NO-LOW

LOW-MODERATE

MODERATE

SEVERE

No  
Intervention

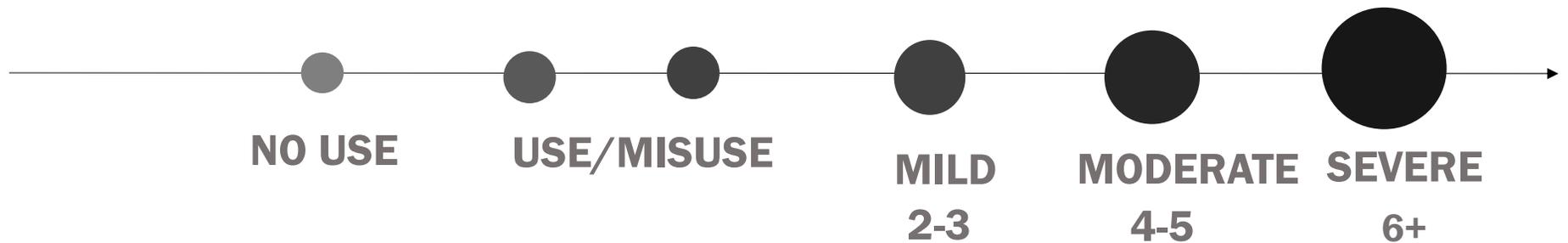
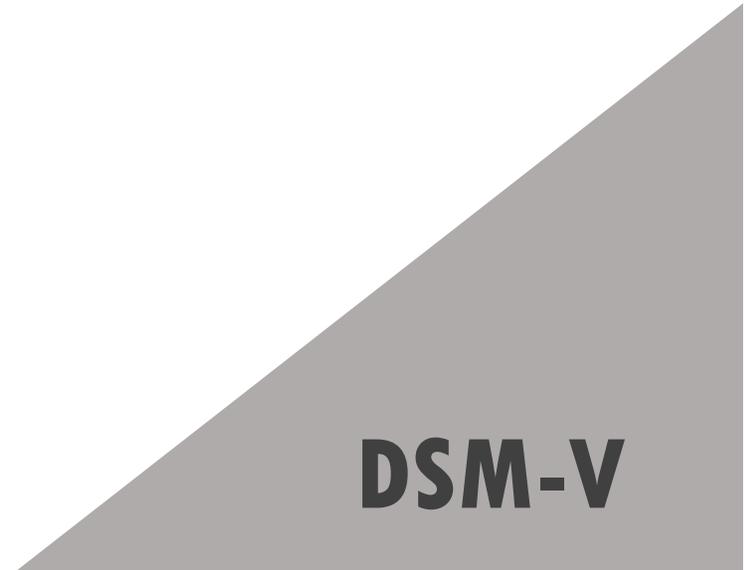
Differential  
Response

In-Home

Removal

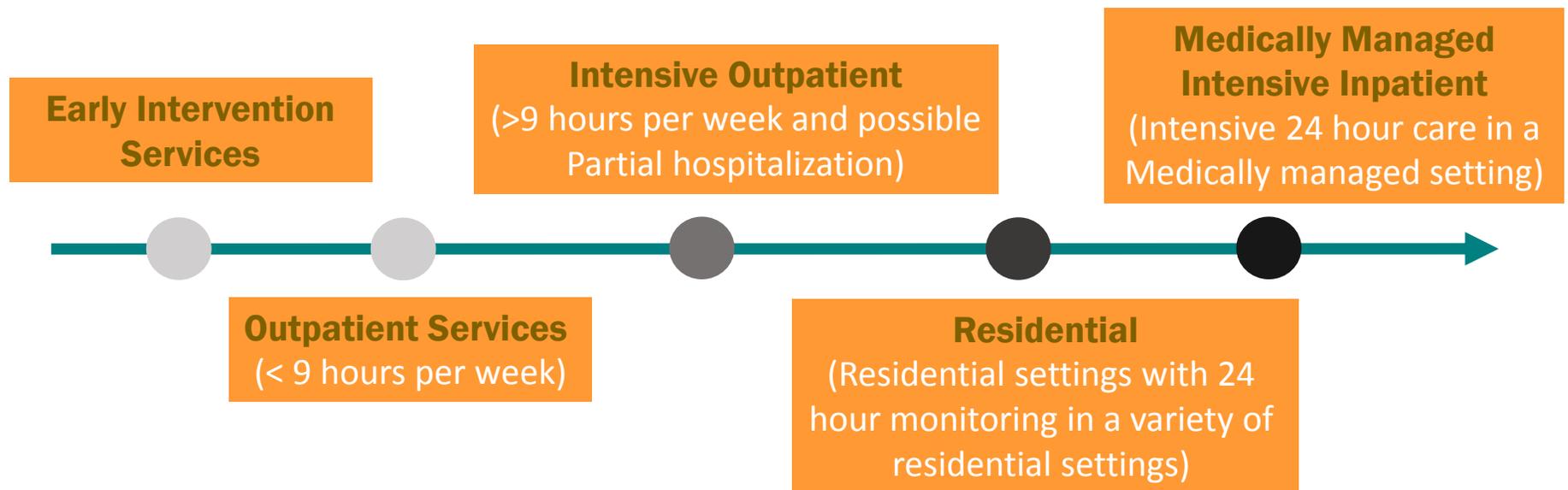
# DSM-V: Substance Use Disorders

The Court should ensure that structured clinical assessments are congruent with DSM-V diagnostic criteria



*DSM-V Criteria (11 total)*

# ASAM Levels of Treatment Continuum



Source: American Society of Addiction Medicine, 2016



**How will you  
determine which  
families go where?**

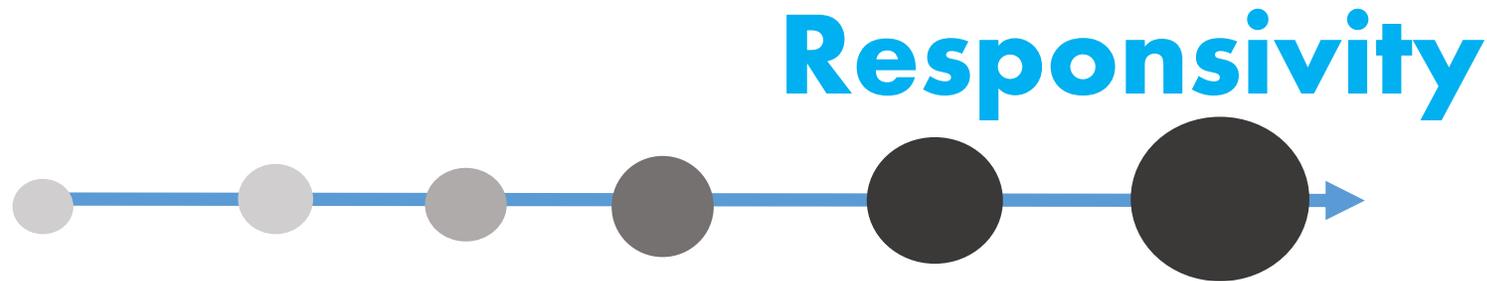


## **#2 | Matching Service to Needs to Support Family Recovery**

Ensure clients are properly matched with the appropriate level of services, supervision, and scope of services.

The higher the risk, the more intensive the supervision and contingencies — and vice versa

The higher the need, the more intensive the treatment and rehabilitation — and vice versa



The higher the risk to the child in in-home cases and the higher the parents' need for treatment in out-of-home cases, the more intensive the supervision of parents' status and compliance is needed —

**Six-month review hearings may not be sufficient**

# Risk and Need Assessment

- **Risk** is the likelihood and imminence of risky behavior (e.g., abuse, neglect, other criminal behavior).
- **Risk factor** is something related to the behavior that precedes it (and you can use to predict it)
- **Risk Assessment** Process of using risk factors to estimate the likelihood (i.e. probability) of an outcome in a particular population (Kraemer et al, 1997)
- **Note:**
  - A risk assessment should be more than scoring an instrument
  - Should inform likelihood, case planning and risk management
- **Needs Assessment** Specifically clinical assessment of substance or mental health disorders

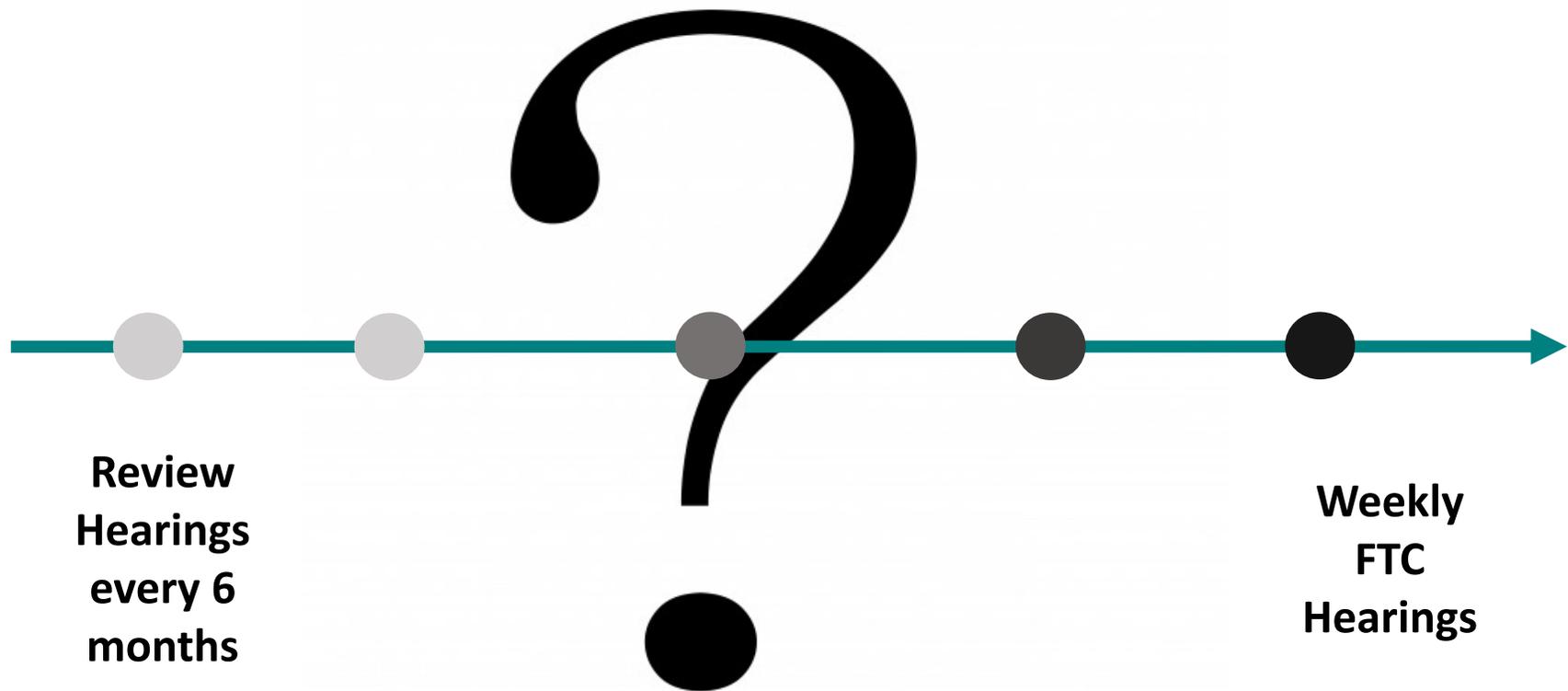
# You May Need to Provide



- *More judicial oversight*
- *More frequent review hearings*
- *Offer responses to behavior*

- *Intensive case management*
- *Enhanced recovery support*
- *Family-centered treatment*

# Judicial Oversight Continuum of Care



# SSIP Highlight

**Judicial  
Bench Card**

**Increased  
Judicial  
Oversight**



# **#3 | SCOPE OF SERVICES TO SUPPORT FAMILY RECOVERY**

Provide the scope of services needed to address the effects of parental substance use on family relationships – family based and family – strengthening approaches towards recovery.

# Family Recovery

*Needs*



## **PARENTS**

- Parenting skills and competencies
- Family connections and resources
- Parental mental health; co-occurring
- Medication management
- Parental substance use
- Domestic violence



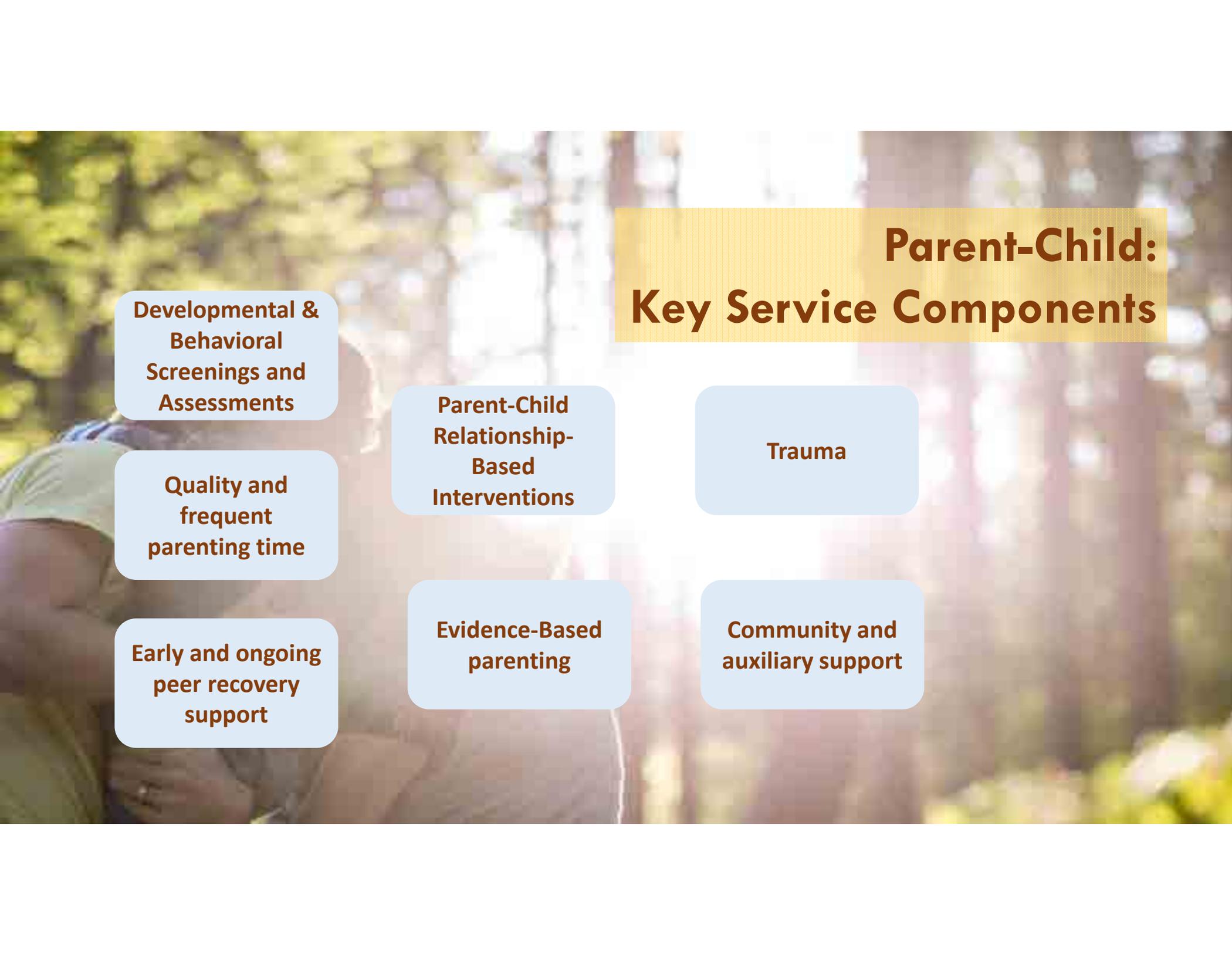
## **FAMILY**

- Basic necessities
- Employment
- Housing
- Child care
- Transportation
- Family counseling



## **CHILD**

- Well-being/behavior
- Developmental/health
- School readiness
- Trauma
- Mental health
- Adolescent substance abuse
- At-risk youth prevention



# Parent-Child: Key Service Components

**Developmental &  
Behavioral  
Screenings and  
Assessments**

**Quality and  
frequent  
parenting time**

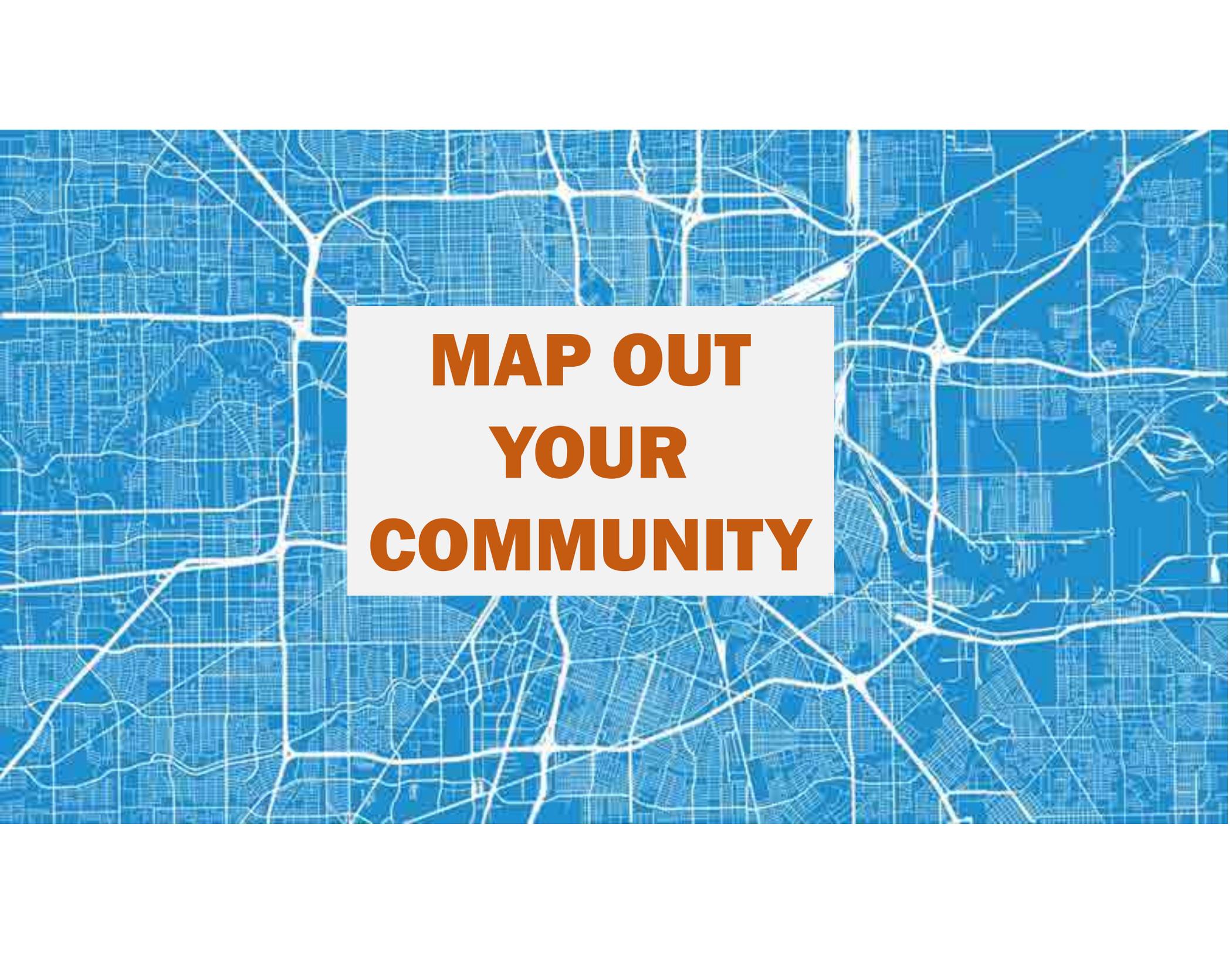
**Early and ongoing  
peer recovery  
support**

**Parent-Child  
Relationship-  
Based  
Interventions**

**Evidence-Based  
parenting**

**Trauma**

**Community and  
auxiliary support**

The background is a blue-toned map of a city street grid. The streets are represented by white lines of varying thickness, creating a complex network. A white rectangular box is centered on the map, containing the text "MAP OUT YOUR COMMUNITY" in bold, orange, sans-serif capital letters.

**MAP OUT  
YOUR  
COMMUNITY**

# SSIP Highlight

**Evidence-based  
Parenting**

**Peer Recovery**

**Increasing  
Access to  
Quality  
Treatment**



# Panelists



**Honorable Gail Meinster**

Presiding Juvenile Judge  
1<sup>st</sup> Judicial District; Colorado

**Honorable William Owens**

Associate Juvenile Judge  
Judicial District 8; Iowa

**Brenidy Rice**

State Problem Solving Court Coordinator  
Colorado Judicial Branch

**How have you begun  
to see your FTC as  
part of a continuum  
of care in your  
jurisdiction?**

**How has that changed  
stakeholders'  
viewpoints of the  
program?**





**How can the state  
support a  
Continuum of  
Care at the local  
level?**

**How have you  
incorporated the 7  
Key Components at  
different levels into  
your dockets?**





**Which of the 7  
practices have been-**

**The most impactful?**

**Hardest to implement?**

**What can we learn from  
adult drug courts about  
systemic screening and  
referral?**





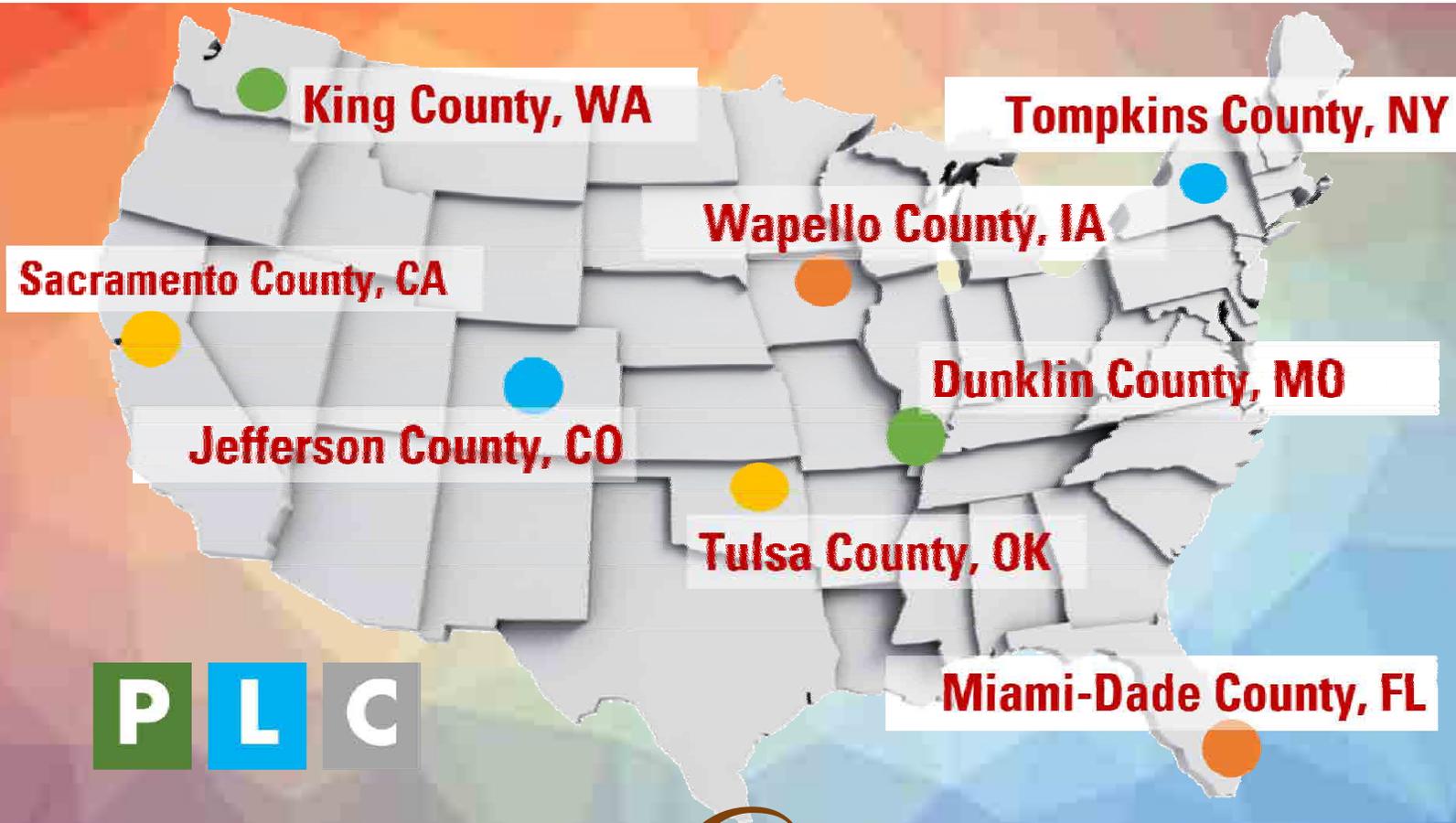
**What data or observations demonstrate how this is impacting outcomes for families?**

# **Q&A and Discussion**



# **Resources and Next Steps**

# Family Drug Court *Peer Learning Court Program*



<http://www.cffutures.org/plc/>

# LEADERS CALL TO ACTION!

**Session Name:** \_\_\_\_\_

**Presenter Name(s):**  
\_\_\_\_\_

During this session, I identified the following **immediate action steps** that I can take in my role as a leader/champion in my state or jurisdiction to advance the FDC movement:

1) \_\_\_\_\_

2) \_\_\_\_\_

3) \_\_\_\_\_

**Every attendee after every session!**

**Makes changes to federal child welfare financing**, including allowing for federal Title IV-E dollars to reimburse states for substance use, mental health prevention and treatment services and parenting programs 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 – **October 1, 2018**
  - Use of Title IV-E Funds to Prevent Child Placement in Out-of-Home Care – **October 1, 2019**
  - Reauthorization of Regional Partnership Grants

# Family First Prevention Services Act (2018)



# Family Drug Court *Orientation Materials*



**Discipline Specific**

**Child Welfare | AOD Treatment | Judges | Attorneys**



**[www.cffutures.org/national-fdc-tta-program/](http://www.cffutures.org/national-fdc-tta-program/)**

# NCSACW Online Tutorials *Cross-Systems Learning*

Understanding Substance Use Disorder Treatment and Family Recovery: **A Guide for Child Welfare Workers**

Understanding Child Welfare and the Dependency Court: **A Guide for Substance Abuse Treatment Professionals**

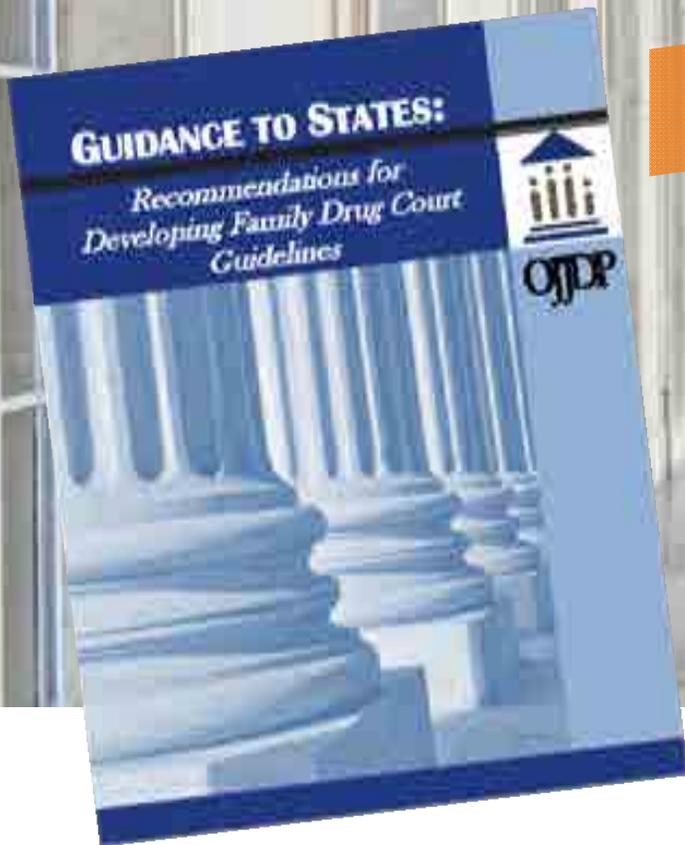
Understanding Substance Use Disorders, Treatment and Family Recovery: **A Guide for Legal Professionals**

**FREE CEUs!**



[www.ncsacw.samhsa.gov/training](http://www.ncsacw.samhsa.gov/training)

# Family Drug Court *Guidelines*



*2<sup>nd</sup> Edition – Research Update*



[www.cffutures.org/guidance-to-states-guidelines-2015-update](http://www.cffutures.org/guidance-to-states-guidelines-2015-update)



# Family Drug Court *Learning Academy*

- Over 40 webinar presentations
- 5 Learning Communities along FDC development
- Team Discussion Guides for selected presentations



[www.cffutures.org/fdc-learning-academy/](http://www.cffutures.org/fdc-learning-academy/)



# Family Drug Court *Online Tutorial*

*Download Flyer in Handouts Panel*

- Self-paced learning
- Five modules cover basic overview of FDC Model
- Certificate of Completion



**Start Learning Today**



**[www.fdctutorials.org](http://www.fdctutorials.org)**

# Family Drug Court *National Strategic Plan*

## **Vision:**

*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.*

Expansion of  
FDC Reach

Ensure Quality  
Implementation

Build Evidence Base

National Strategic Plan  
For Family Drug Courts



<http://www.cffutures.org/report/national-strategic-plan/>

# 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:

[www.cffutures.org/publication/transitioning-to-a-family-centered-approach/](http://www.cffutures.org/publication/transitioning-to-a-family-centered-approach/)

# Family Drug Court *Blog*



- Webinar Recordings
- FDC Resources
- FDC News



[www.familydrugcourts.blogspot.com](http://www.familydrugcourts.blogspot.com)

# Discussion Guide *Understanding Treatment*



- For Child Welfare and Court Professionals
- Build stronger partnerships with treatment
- Ensure best treatment fit for families



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

# Contact Information

Visit our table in  
the Exhibit Hall

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(714) 505-3525

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



Strengthening Partnerships | Improving Outcomes

# Practice Brief

## Matching Service to Need: How Family Drug Courts Identify, Assess and Support Families to Achieve Recovery, Safety, and Permanency

A Practice Brief presented by  
Children and Family Futures  
Lake Forest, California  
June 2016

Visit [www.cffutures.org](http://www.cffutures.org)  
to download a copy



### Matching Service to Need: How Family Drug Courts Identify, Assess and Support Families to Achieve Recovery, Safety, and Permanency

A Practice Brief presented by  
Children and Family Futures  
Lake Forest, California  
June 2016

**P**arental substance use disorders are a prevalent risk factor among families in child welfare services. Studies with substance use histories in the US are more than twice as likely to have custody of their children than non-affected mothers (Scully, DeGru, Long, & Bernal, 2010) and their children are vulnerable to physical, sexual, and other child abuse and neglect. Children of parents affected by substance use disorders are at least likely to comply with court orders and more likely to permanently lose custody of their children (Ramaiah & Mullen, 2004; DeGru, Bernal, Gu, & Lee, 2009). The child welfare system is a complex and costly system. Therefore, there is a need to improve child welfare outcomes for families who have children placed in foster care. This brief focuses on the identification and assessment of families who have children placed in foster care. It discusses the role of the Adoption and Safe Families Act (ASFA) (1997) and the need for children to have permanency in their caregiving relationships. This brief focuses on the identification and assessment of families who have children placed in foster care.

The identification of the adult caregiver drug court model, Family Drug Courts (FDCs) have used the adult drug court approach, structure, and research to guide identification and implementation of FDCs. Through intensive monitoring, high levels of communication, effective communication, and coordination services, FDCs offer a unique and intensive approach for families affected by parental substance use and child involvement. FDCs emerged in the mid-1990s to address underserved courts to address the substance use disorder among parents in child welfare and to support families' outcomes in child welfare services and permanency goals. With over 100 FDCs in operation across the nation, FDCs continue to show significant positive results as parents' participation in treatment, higher rates of family reunification, higher rates of family care, and reduced incidence of repeat placement and return to care of their care compared to non-FDC drug court participants (DeGru, Bernal, Gu, & Lee, 2009).



## Expanding the Reach of Family Drug Courts



OJJDP

Statewide System Improvement Program



The Office of Juvenile Justice and Delinquency Prevention (OJJDP) and Center for Children and Family Futures (CCFF) announced the selection of five States who received funding under the Family Drug Court (FDC) Statewide System Improvement Program (SSIP).

The five 2014 SSIP grantees are:

- Alabama Administrative Office of Courts
- New York State Unified Court system
- Colorado Judicial Department
- Judicial Branch of Iowa
- Supreme Court of Ohio

With over 360 FDCs nationwide serving approximately 19,000 families, FDCs are a growing response to the problem of families affected by parental substance abuse and child abuse and neglect. FDCs at the individual project level have shown they are effective in achieving child welfare and treatment outcomes superior to those achieved by the core collaborative partners—child welfare, treatment and the courts—operating without key FDC components. These outcomes include higher rates of parental participation in substance use

disorder treatment; longer stays in substance use disorder treatment; higher rates of family reunification; shorter lengths of stay in foster care for children; and less recurrence of maltreatment. This research base strongly supports the move towards institutionalizing the principles and methods of FDCs more broadly across state systems.

The purpose of this state system improvement effort is to:

- Expand FDCs' scale (i.e., penetration rate of the larger child welfare and substance use disorder treatment systems) and scope (i.e., range of comprehensive services for families)
- Infuse effective FDC practices to serve more families in the child welfare system affected by parental substance use disorders

CCFF will provide In-Depth Technical Assistance (IDTA) to the awardees to produce a first-year plan and begin implementation in the second year. The goal of the two-year IDTA is the formation of a multi-year (5 year) strategic plan to implement state-, county- or jurisdiction-wide improvement of courts' handling of cases involving children and parents in the family court docket who are affected by substance use and co-occurring disorders.

For more information please visit: [www.cffutures.org](http://www.cffutures.org) or email: [fdc@cffutures.org](mailto:fdc@cffutures.org)

# STATEWIDE SYSTEM IMPROVEMENT PROGRAM

## PURPOSE

The purpose of Statewide System Improvement (SSIP) is to:

1. Implement and institutionalize effective Family Drug Court (FDC) practices in the larger state-level child welfare, substance use disorder treatment, and court systems.
2. Ensure families affected by substance use disorders and involved with child welfare have access to a comprehensive array of services.
3. Strengthen cross-system collaboration at the state and local level.



## SYSTEMS CHANGE

A permanent shift in doing business that relies on strengthening **relationships** across systems and within the community to secure needed **resources** to achieve better **results** and outcomes for all children and families affected by substance use disorders.

**2014 GRANTEES:** AL, CO, IA, OH, and NY

**2016 GRANTEE:** Guam (GU)



## KEY SUCCESSES

- **2014 Grantees worked to develop organizational structures to manage their planning processes** – Each state’s governance structure includes an Oversight or Executive Committee, Core Planning Team or Steering Committee, and workgroups charged with specific tasks to advance system improvement efforts.
- **2014 Grantees are piloting the system improvement strategies** – Selected pilots sites in all states have implemented universal screening in their jurisdictions and are testing strategies including the timing of administration and methods for data collection and follow-up
- **2014 Grantees have established workgroups focusing on data systems** – Efforts on data systems range from securing a data vendor, data mapping across systems, and identifying existing data sources and gaps in data collection

## EARLY LESSONS

### 1 LEADERSHIP

Effective systems change requires the right leadership at all levels to spark progress. The SSIP lessons include CCFF identifying the following competencies among project directors and managers that have led to more successful advancements of the initiative:

- Leads with a shared vision and motivates partners in the process
- Possesses knowledge and expertise in the areas of substance use disorder treatment, child welfare, and court systems
- Builds and strengthens existing partnerships
- Bolsters local sites through guidance, structure, and support
- Identifies and solves unnecessary policy barriers
- Prioritizes system improvement activities and/or aligns efforts with competing initiatives
- Understands the cultural context of partner agencies and possesses effective communication skills; politically savvy
- Considers macro and micro-level approaches
- Ensures a model for sustainable change

### 2 SYSTEMS CHANGES AS A PARADIGM SHIFT

While Grantees recognize systems change is a multi-year process; there may be a tendency for a partner agency or local site to expect immediate outcomes. Therefore, SSIP leadership must be consistent and intentional in their messaging to regard systems change as a culture shift, emphasizing that ample time is required for individuals within systems to become aware and clearly understand the purpose, modify existing attitudes and beliefs, adopt and apply new practices, and challenge the status quo.

### 3 STATES' CAPACITY AND STRUCTURE TO SERVE LOCAL PILOT SITES

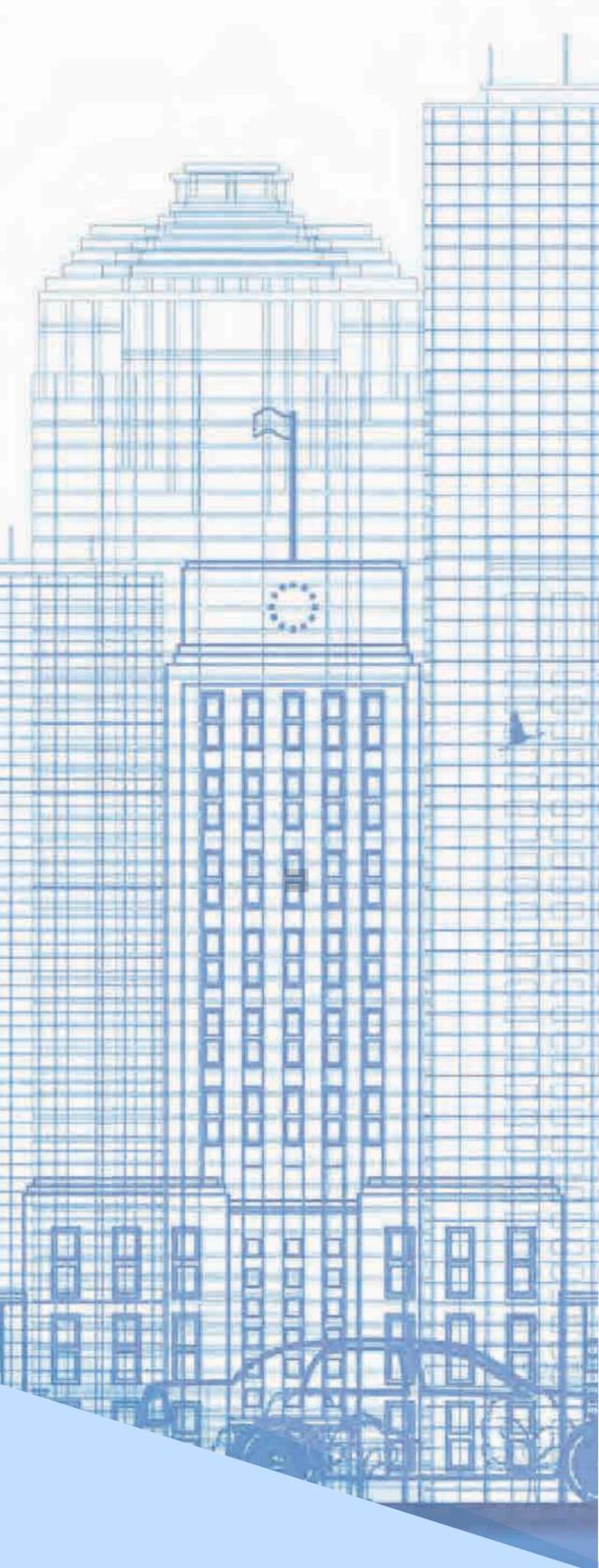
The level of effort needed to integrate the identified practices for all child welfare cases affected by substance use disorders requires resources **and** a structure in place to support and guide each community’s efforts. An approach that has been particularly effective in bolstering local jurisdictions is the assignment of a state-level liaison to each site. The liaison offers guidance and support through monthly calls or in-person meetings, and attempts to address and resolve barriers as they emerge.

### 4 SSIP AS MULTI-PARTNER INITIATIVE

Substantial collaboration, establishment of trust, and mutual investment across agencies is an essential element to effectively achieve the objectives of statewide system improvement. Several Grantees built on experience from previous collaborative efforts and were able to quickly establish effective governance structures and garner cross-system support. Contributing factors in garnering greater engagement include Grantees’ ability to: 1) listen without judgement; 2) respond to questions and address concerns; and, 3) a willingness to understand the other systems’ perspective. Giving partners the time and space to work through emerging issues and providing the opportunity for partner agencies to take the lead or have an active role strengthens collaborative buy-in and cultivates mutual respect.

### 5 DATA SYSTEMS AND INFORMATION-SHARING CAPACITY

State and local level leadership must prioritize information and data sharing to assist families involved with child welfare and affected by substance use disorders achieve positive outcomes. Data collection at the local level is imperative to capture the infusion strategies tested, document cross-site activities, identify if particular factors were critical to success or hindered improvement efforts, and understand the key challenges and policy barriers. While systems are in place to collect local-level data through online portals or databases, Grantees will need to develop cross-system linkages to identify service gaps, manage resources, monitor family and treatment outcomes, and validate if processes work as intended.



# Advancing Justice *for all* Children and Families

# Children and Families Program

NADCP ANNUAL TRAINING CONFERENCE

May 30 - June 2, 2018 | Houston, Texas



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



#nadcp  
#forallfamilies  
#TakingAction4Families  
#CFFStrengtheningPartnerships  
ImprovingFamilyOutcomes



Acknowledgement: 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.

# Welcome

Welcome to Houston - the city of champions (see #AstrosWSChamps) and strength and resiliency (see #HoustonStrong). This is a perfect place to convene the largest gathering of drug court professionals.

The Center for Children and Family Futures and the National Association of Drug Court Professionals are excited to partner once again to develop workshops and plenary sessions focused on better meeting the needs of children and families. These sessions will cut across all types of drug courts to bring a family-focus to treatment and recovery. This year we also begin to explore opportunities to take on a "new approach" by taking what works in Family Treatment Courts (FTCs) into serving the larger child welfare population in a continuum of care. The vision is that FTCs be part of larger systems change in their states and communities so that all families can have access to the services and supports they need to successfully achieve recovery and family safety.

The vision is big because the need is huge. We continue to see an increase in the foster care population, particularly infants affected by parental substance use. The opioid epidemic is drawing both public attention and federal resources to address this national tragedy. In the most recent appropriations, the Substance Abuse and Mental Health Services Administration (SAMHSA) will be funding over \$70 million dollars in drug courts. Funding will also be provided to support states meet the requirements of the Child Abuse Prevention and Treatment Act (CAPTA), which includes the development of Plans of Safe Care for infants and their family/caregivers. The Families First Prevention Services Act (2018) was recently enacted and makes landmark changes to federal child welfare financing. This important piece of legislation will allow for federal Title IV-E dollars to reimburse states for substance use and mental health prevention and treatment services for families with children at imminent risk of being placed in foster care. These federal investments and legislative action will certainly open opportunities for the drug court field, including FTCs and their partner agencies.

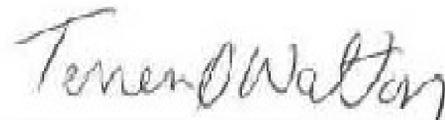
But with added resources comes added responsibility and accountability. For the FTC field, this means adhering to quality implementation and evidence-based practices and examining issues of inclusion and equity in its programs. The FTC model was designed to mitigate the poor outcomes of families previously marginalized as a result of their substance use. Going forward, it is imperative that FTCs move beyond operating as set-aside projects and separate from the larger court, treatment, and child welfare systems. FTCs like all drug courts are problem-solving courts. By focusing on becoming part of the solution rather than contributing to existing problems, FTCs will ensure that they will seize the opportunity and leverage expanded resources to serve *all children and families*.

We encourage you to read the *National Strategic Plan for Family Drug Courts* released in March 2017. The Plan offers a roadmap for a coordinated national strategy to enhance and expand the FTC model to reach more children and families. Each of the presentations in the Children and Families track will connect to the Plan's goals. Session attendees will be encouraged to complete a *Call to Action Card* to help direct their next steps. We hope you find this *Children and Families Program* helpful as you plan your conference session attendance and take what you learned back to your community.

We have resources and a roadmap to achieve the big vision "*for all families*." We need champions, leadership, and every one of us to bring hope and promise to every community. After these few days in Houston, we want to hear about the steps you are taking to realize the FTC vision in your communities. Please be in touch with us and thank you for all you do for our nation's children and families.



Phil Breitenbucher, MSW  
Director of the National Family Drug Court  
Training and Technical Assistance Program



Terrence Walton, MSW, CSAC  
Chief Operating Officer, National  
Association of Drug Court Professionals

**1994** First Family Drug Court established in Reno, NV

**2002** Six Family Drug Court ingredients identified

**2004** Federal funding for Family Drug Courts, including Office of Juvenile Justice and Delinquency Prevention, Substance Abuse and Mental Health Services Administration, Children's Bureau

**2007** Program improvements - children's services, trauma, evidence-based programming



# For All Children and Families

by Sidney L. Gardner, MPA, MA  
President, Center for Children  
and Family Futures

Drug courts are about serving families, whether or not they are family treatment courts, because a sizable segment of every drug court includes parents. And when parents are involved with the justice system and treatment systems, their children are often affected in ways that can last a lifetime.

Serving all families in drug court requires the kind of leadership that acts beyond the boundaries of a single project. Families in the child welfare system who are affected by substance use disorders need help from whole systems, not just isolated projects.

That kind of leadership demands specific strategies that respond to entire systems—the court system, the treatment system, the child welfare system, and the other child- and family-serving systems that can work together as a team. The kind of leadership that can move systems toward change has been visible in the most outstanding drug courts in the nation.

Common strategies include:

- Asking about children in the caseload—caring enough to count the whole family
- Setting goals that can be measured as part of a dashboard or score card that the collaborative court team uses as guideposts that measures not what agencies are doing, but whether families are doing better
- Using benchmark outcomes in the “business as usual” system to ask *are we producing better results* in reunification, remaining at home, recovery, re-entry, and re-occurrence—which can be summarized as “the 5Rs”
- Preparing sustainability plans that ask the question *what results do we need to prove to justify continued and expanded funding for our collaborative court*, and emphasizing to all partners in the collaborative court that accountability for better results means fidelity to national standards in staffing, data capacity, and evaluation of the impact on children and families.

This conference will spotlight innovative leadership that brings systems together to help children and parents. The challenge from here forward, as you return home, is to assess how well your collaborative courts are moving in that direction—and how to accelerate that progress.

Good luck on your journey!

**2010**

Continued federally-funded initiatives, including Children Affected by Methamphetamines

**2014**

Statewide Systems Improvement initiatives; Prevention and Family Recovery (private foundation-funded)

**2013**

Family Drug Court Guidelines published

**2018**

Family Drug Court Standards (planned release in Fall 2018)

**2017**

450 Family Drug Courts in operation nationwide

# What You Need to Know

## Family First Prevention Services Act (2018)

**What is it?** On February 9, 2018, the Family First Prevention Services Act (FFPSA), as part of Division E of the Bipartisan Budget Act of 2018 (H.R. 1892) was signed into law. The bill makes historic changes to federal child welfare financing, including allowing, for the first time, 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.

There are three areas of FFPSA that relate to families affected by substance use and mental health services:

- **Reimbursement for Family Residential Substance Use Disorder Treatment** - Beginning October 1, 2018, states can receive Title IV-E reimbursement for up to 12 months for a child who has been placed with a parent in a licensed residential family-based treatment facility for substance abuse, provided that the child's case plan recommends this placement, the facility provides parenting skills training and individual and family counseling, and the treatment services be trauma-informed.
- **Reauthorization of Regional Partnership Grants** - FFPSA extends the RPG program in the Title IV-B, Subpart through FY2021 and makes some changes to the program effective October 1, 2018.
- **Use of Title IV-E Funds to Prevent Child Placement in Out-of-Home Care** - Beginning October 1, 2019, states will have the option to use Title IV-E funds for prevention services for children who are considered "candidates" for foster care – meaning, at imminent risk of entering foster care but able to safely remain at home or in a kinship placement if provided services. This includes children whose adoption or guardianship arrangement is at risk of disruption, and it includes young people in foster care who are pregnant and/or parenting. Parents or kin caregivers of these young people are also eligible to receive services.

Title IV-E dollars can only be used to provide services for a maximum of 12 months beginning on the date the child is identified in a prevention plan as a candidate for foster care or a pregnant and parenting foster youth in need of services. Children and families can receive these services more than once if they are later identified again as a candidate for foster care.

Two primary categories of services and programs are eligible: (1) Mental health and substance abuse prevention and treatment services provided by a qualified clinician; (2) In-home parent skill-based programs, which include parenting skills training, parent education, and individual and family counseling.

These services and programs must be trauma-informed, and they must meet certain evidence-based requirements that follow promising, supported, or well-supported practices as defined in the bill.

**How can I learn more?** On April 12, 2018, the Children's Bureau of the Administration for Children and Families released an Information Memorandum (IM) providing information on Family First Act (PL 115-123). Please visit: <https://www.acf.hhs.gov/cb/resource/im1802>

For more information, please contact your assigned Regional Program Managers of the Children Bureau (see Attachment D of the IM)

For information on child welfare financing, Child Trends has created an infographic Child Welfare Financing 101 (December 2017). To download, visit: [https://www.childtrends.org/wp-content/uploads/2017/12/ChildWelfareFinancing\\_Childtrends\\_December2017.pdf](https://www.childtrends.org/wp-content/uploads/2017/12/ChildWelfareFinancing_Childtrends_December2017.pdf)



# What You Need to Know

**What is it?** The Child Abuse Prevention and Treatment Act (CAPTA) was created in 1974 to provide Federal funding to States to support prevention, assessment, investigation, prosecution, and treatment activities related to child abuse and neglect. Since its initial passage, there have been three changes to CAPTA pertinent to infants with prenatal substance exposure. Most recently are amendments in the Comprehensive Addiction and Recovery Act (CARA) of 2016.

**What does it do?** CARA makes several changes to CAPTA, including:

- Requires that the Plan of Safe Care address the needs of both infant and the family or caregiver
- Specified data to be reported by States, to the extent practical, through National Child Abuse and Neglect Data System (NCANDS)
- Specified increased monitoring and oversight to ensure that Plans of Safe Care (POSC) are implemented and that families have access to appropriate services
- Removes the term "illegal" in regard to substance abuse

**What is a Plan of Safe Care?** POSC help systems and families prepare for a baby's safe arrival and beyond. In practice, POSC may be defined as a document that inventories and directs services and supports to ensure the safety and well-being of an infant affected by substance abuse, withdrawal symptoms or Fetal Alcohol Spectrum Disorders, including services for the infant and their family/caregiver. POSC are collaborative and involve systems outside of child welfare services. POSC can specify the agencies that provide specific services, outline communication procedures among the family and provider team, and guide the coordination of services across various agencies with the family. POSC are family-focused to assess and meet the needs of each family member as well as overall family functioning and well-being. POSC are completed, when possible, in the prenatal period to facilitate early engagement of the family.

**How is a Plan of Safe Care different than a CWS Safety Plan, Substance Use Disorder Treatment Plan, or Hospital Discharge Plan?** CPS safety plans may focus on immediate safety of a child, while POSC focus on the safety and well-being of infants by addressing the health and substance use disorder treatment needs of the infant and family or caregiver.

## Child Abuse Prevention & Treatment Act (CAPTA) and Comprehensive Addiction and Recovery Act (CARA) OF 2016

This process may include more extensive follow-up plans that support families and focus on the longer-term well-being of the infant and caregiver. Substance use treatment plans may focus on treatment of adults, while POSC may include the treatment and broad services of the whole family including the infant and parent-child dyad. Hospital discharge plans may focus on the health and well-being of the infant, while POSC include the ongoing health and development of the infant as well as the educational and substance use disorder treatment needs of the family/caregiver who will be caring for the infant.

**Why is this important?** Children under age 1 are the largest number of children placed in protective custody, nearly 50,000 infants in 2016. FDCs can play an important role to respond to this population. Built on a foundation of cross-system collaboration and comprehensive family-focused services, FDCs are well-positioned to partner with larger child welfare, substance use disorder treatment, court, and health care systems to implement POSC and other CAPTA provisions.



### How do I learn more?

Attend the Concurrent General Session (CG-28): *Developing a Plan of Safe Care: What You Need to Know about Serving Pregnant and Parenting Women with Opioid Use Disorders* on Friday, June 1st at 3:15 pm. You will learn from Dr. Nancy Young strategies to expand FTC collaborative approach to effectively serve mothers and their infants and how collaborative teams can develop an approach to implement comprehensive and effective Plans of Safe Care.

Register for our upcoming Family Drug Court Learning Academy Webinar on this same topic. A pre-recorded webinar is currently available and a live panel discussion is scheduled for June 14th. Additional learning materials and resources will be provided. Please visit: [www.cffutures.org](http://www.cffutures.org)

**2018 NADCP ANNUAL TRAINING CONFERENCE  
CHILDREN AND FAMILIES PROGRAM**

# AT-A-GLANCE

<b>WEDNESDAY, MAY 30, 2018</b>			
<b>SESSION TIME &amp; LOCATION</b>	<b>TRACK</b>	<b>SESSION TITLE</b>	<b>PRESENTER(S)</b>
7:15am – 8:30am <i>Room 320 C</i>	DSB-3	Discipline Specific Breakout: Judges – Juvenile, Family, and Mental Health Courts	Hon. Jeri Beth Cohen, Hon. Stephen Goss, Hon. Gail Meinster
7:15am – 8:30am <i>Room 381 A/B</i>	DSB-16	Discipline Specific Breakout: Family Treatment Court Practitioners	Russ Bermejo, Tessa Richter
8:45am – 11:45am <i>Room 381 A/B</i>	SB-13	Leading Change – Transforming, Expanding, and Advancing the Family Treatment Court Movement to Better Serve Children and Families	Alexis Balkey, Phil Breitenbucher, Theresa Lemus
1:15pm – 2:30pm <i>Room 340 A/B</i>	TS-13	Moving Beyond Guidance: A Sneak Preview of the Upcoming National Family Drug Court Standards	Phil Breitenbucher, Jane Pfeifer, Terrence Walton, Meghan Wheeler
<b>THURSDAY, MAY 31, 2018</b>			
<b>SESSION TIME &amp; LOCATION</b>	<b>TRACK</b>	<b>SESSION TITLE</b>	<b>PRESENTER(S)</b>
9:30am – 10:45am <i>Room 370 A/D</i>	A-4	Checklist to Change – Readiness to Reality	Alexis Balkey, Tessa Richter
11:00am – 12:15pm <i>Room 370 A/D</i>	B-4	Part of the Problem or Solution? Ensuring Equity and Inclusion in Family Treatment Courts	Russ Bermejo, Phil Breitenbucher
11:00am – 12:15pm <i>General Assembly C</i>	B-16	What Does Quality Treatment Look Like? Identifying Effective Substance Use Disorder Treatment for Families	Theresa Lemus
11:00am – 12:15pm <i>Room 340 A/B</i>	VCC-B-3	Connecting Veteran Treatment Courts and Veteran Justice Outreach Services Through Collaborative Court Staffing: Improving Service Delivery to Veterans, Their Children, and Families Through Family-Centered Approaches	Jeremiah Jones, Larisa Owen, Hon. Mary Kreber Varipapa
1:45pm – 3:00pm <i>Room 370 A/D</i>	C-4	Strengthening Families and Supporting Success	Jennifer Foley, Margaret Lloyd, Jill Murphy, Hon. William Owens, Semret Nicodimos, Michelle Thomas

**THURSDAY, MAY 31, 2018**

<b>SESSION TIME &amp; LOCATION</b>	<b>TRACK</b>	<b>SESSION TITLE</b>	<b>PRESENTER(S)</b>
3:15pm – 4:30pm <i>Room 370 A/D</i>	D-4	Ready-Set-Go! 5 Key Planning Decisions to Help You Successfully Launch Your Family Treatment Court	Alexis Balkey, Jane Pfeifer
3:15pm – 4:30pm <i>Room 361 C/F</i>	D-7	Healing the Family: Tribes and Counties Working Together Within the Family Treatment Court and Family Tribal Healing to Wellness Court	Hon. Mary Cardoza, Jennifer Foley, Hon. Charlene Jackson, Lauren van Schilfgaarde,
4:45pm – 6:00pm <i>Room 370 A/D</i>	E-4	A New Approach – Family Treatment Courts as Part of a Continuum of Care	Theresa Lemus, Judge Gail Meinster, Judge William Owens, Brenidy Rice, Tessa Richter

**FRIDAY, JUNE 1, 2018**

<b>SESSION TIME &amp; LOCATION</b>	<b>TRACK</b>	<b>SESSION TITLE</b>	<b>PRESENTER(S)</b>
10:30am – 12:00pm <i>Room 310, Level 3</i>	Closed Meeting	2018 Annual OJJDP Family Drug Court Training and Technical Assistance Grantee Gathering	Alexis Balkey, Phil Breitenbucher, Jennifer Foley
1:45pm – 3:00pm <i>Grand Ballroom A</i>	CG-17	Family Matters – Transitioning to a Family-Centered Approach in All Drug Courts	Phil Breitenbucher, Carolyn Hardin
3:15pm – 4:30pm <i>Grand Ballroom A</i>	CG-28	Developing a Plan of Safe Care: What You Need to Know about Serving Pregnant and Parenting Women with Opioid Use Disorders	Nancy K. Young



# WEDNESDAY, MAY 30, 2018

## Discipline Specific Breakout - Judges- Juvenile, Family, and Mental Health Court

Wednesday, May 30, 2018  
7:15am – 8:30am  
Session: DSB-3  
Room: 320 C

Facilitators: Hon. Jeri Beth Cohen, Hon. Stephen Goss, & Hon. Gail Meinster

## Discipline Specific Breakout- Family Treatment Court Practitioners

Wednesday, May 30, 2018  
7:15am – 8:30am  
Session: DS-16  
Room: 381 A/B

Facilitators: Russ Bermejo & Tessa Richter



Want to know what sessions you should attend? Have questions about the conference agenda? Need to discuss burning issues impacting your program? This year's discipline-specific sessions are for you! This year's conference includes opportunities for disciplines to meet and resolve burning issues and critical questions. Starting on Wednesday morning at 7:15am, expert practitioners who share your role on the team will facilitate the breakout designated for your discipline. The facilitator will review the conference program, identify sessions specifically designed for your role on the team, and lead discussion to address your burning issues.

## HOLDING PROMISE GIVING HOPE



*Access to effective FDCs is urgent as child welfare agencies struggle with the increasing number of children, particularly infants, entering out-of-home care as a result of the opioid crisis and the resurgence of methamphetamine and other drugs. Most importantly, FDCs hold promise to engage and motivate families in a way that gives hope for future generation.*

*- Dr. Nancy K. Young, Executive Director of Children and Family Futures.*



## Leading Change – Transforming, Expanding, and Advancing the Family Treatment Court Movement to Better Serve Children and Families

Wednesday, May 30, 2018  
8:45am – 11:45am  
Session: SB-13  
Room: 381 A/B

Presenters: Alexis Balkey, Phil Breitenbucher, & Theresa Lemus

Family Treatment Courts (FTCs) are problem-solving courts that emerged during the 1990s as an adaptation of the adult criminal drug court model to address the unique and complex needs of families affected by substance use disorders who are involved in the child welfare system. Well-functioning FTCs rely on multi-disciplinary and collaborative family-centered approaches, and experience outcomes that include significantly higher rates of participation and longer stays in treatment, higher rates of family reunification, and less time for children in foster care when compared to standard services.

This skills-building workshop provides a brief history of the FTC movement, highlights the state of the movement today, and identifies the issues that threaten to disrupt the future of FTCs. Using the National Strategic Plan for FTCs as a framework for this presentation, practitioners will discover the critical role of FTCs in achieving larger systems change including solution-oriented strategies to advance justice for all families affected by substance use disorders. Practitioners will develop their leadership skills by engaging in breakout discussions to explore innovative approaches that transform operations, expand the reach of services, and promote systems change.

### Learning Objectives:

1. Explore progression of FTC movement from inception, to program enhancement and expansion, and towards systems change
2. Understand the goals of the *National Strategic Plan* and how they provide a roadmap for larger systems change
3. Develop leadership capacity to become a champion for the FTC movement and advance policy and practice in your jurisdiction

# WEDNESDAY MAY 30, 2018

## Moving Beyond Guidance: A Sneak Preview of the Upcoming National Family Drug Court Standards

Wednesday, May 30, 2018  
1:15pm – 2:30pm  
Session: TS-13  
Room: 340 A/B

Presenters: Phil Breitenbucher, Jane Pfeifer,  
Terrence Walton, & Meghan Wheeler

In 2017, the *National Strategic Plan for Family Drug Courts (FDCs)* was released outlining a coordinated national strategy to enhance and expand the use of FDCs to reach more children and families. Development of National FDC Standards is documented as one of the strategies and builds on the work of the *Guidance to States:*

*Recommendations for Developing Family Drug Court Guidelines*. The Center for Children and Family Futures and the National Association of Drug Court Professionals through the support of the Office of Juvenile Justice and Delinquency Prevention have partnered in the development of the National Family Drug Court Standards. The goal of this effort is to create model standards to guide the daily operations of FDCs.

These Standards will help advance the FDC movement as they 1) provide a mutual understanding of the components necessary for a quality family treatment court and 2) guide the planning, implementation, operation, and assessment of FDCs. The Standards are expected to be published in late 2018. This listening session will provide an update on the development process of the National FDC Standards. This will also be an interactive session designed for FDC professionals to share their feedback and help advance the work of the National FDC Standards.

### Learning Objectives:

1. Explore the need and development of National FDC Standards and how they align with the National FDC Strategic Plan
2. Gain understanding of how National FDC Standards are aimed at both practice-level and systems-level change
3. Learn how states and local jurisdictions can use National FDC Standards to improve FDC practice



#### Notes



#### Ah-Ha Moments



#### Networking



#### Follow-Ups

# THURSDAY, MAY 31, 2018

## Checklist to Change – Readiness to Reality

Thursday, May 31, 2018  
9:30am – 10:45am  
Session: A-4  
Room: 370 A/D

Facilitators: Alexis  
Balkey & Tessa Richter

Families involved in the child welfare system and affected by parental substance use disorders face a difficult and arduous journey towards achieving their recovery and reunification goals within the time limits set forth by the Adoption and Safe Families Act (1997). Family Treatment Courts (FTCs) provide a pathway for achieving positive outcomes through interagency collaboration, coordinated and comprehensive service delivery, and enhanced accountability. The phasing system of the FTC model, in particular, provides participants and the team visible steps for measuring progress and success. Many FTCs have moved beyond the traditional pre-set phasing structure focused on compliance and completing a checklist of requirements to one that accounts for parents' strengths, readiness, and desired behavioral change. While some FTCs have redesigned their phasing system to align with the stages of reunification, others have integrated behavioral benchmarks into their current phasing structure. This presentation will explore the innovative and meaningful approach FTCs have adopted to better assess and prepare families for successful recovery and reunification. Attendees will be encouraged to define what "success" means for participant families by examining program requirements around perfect vs. safe, compliance vs. behavior change, and treatment vs. recovery.



### Learning Objectives:

1. Understand phasing structure and assessing client progress and family readiness as a collaborative practice issue by raising the need for coordinated case plans and effective communication protocols across child welfare, treatment, and court systems
2. Highlight different FTC program designs and phasing strategies which align with the timing and phasing of reunification, family maintenance supervision, and case termination in the dependency case
3. Learn strategies to shift court staffing sessions from monitoring check boxes to identifying true behavior change

**I love you more than  
anyone else, that's why I  
stayed in the hospital.  
Bug Burt.**

- Family Drug Court  
Participant (from the  
National Strategic Plan  
for Family Drug Courts)

# THURSDAY, MAY 31, 2018

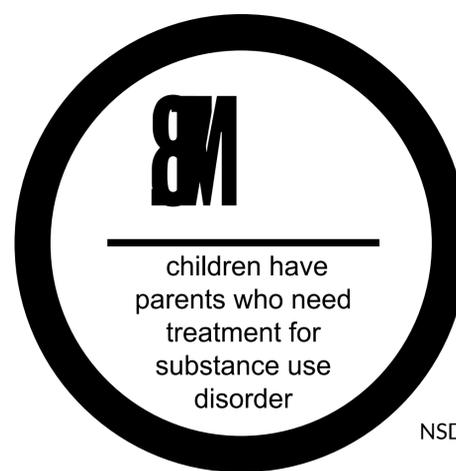
## Part of the Problem or Solution? Ensuring Equity and Inclusion in Family Treatment Courts

Thursday, May 31, 2018  
11:00am – 12:15pm  
Session: B-4  
Room: 370 A/D

Presenters: Phil Breitenbucher  
& Russ Bermejo

Family Treatment Courts (FTCs) have been identified as a promising model in achieving positive outcomes for families affected by substance use disorders and involved in the child welfare system. In 2017, the National Strategic Plan for FTCs was released outlining a coordinated national strategy to expand the reach, ensure quality implementation, and build the evidence base of FTCs. As FTCs work towards these goals, it is important to assess whether the improved recovery, safety, and permanency outcomes achieved for FTC participants are similarly experienced by individuals of diverse racial and ethnic groups. The issue of racial injustice remains a national concern with continued attention on how various systems, including the courts, treatment and child welfare are serving families of color.

This session will share key opportunities for the FTC field and partner agencies to more closely examine their programs to ensure fairness, equal access, and proper matching of services for participant families. This session will share the descriptive findings of a data set from a federal initiative on whether racial disproportionality and disparities existed amongst a cohort of families participating in FTCs. This session will also highlight examples of FTCs that have examined this issue in their programs and taken important steps to ensure fairness and equity for families of color.



### Learning Objectives:

1. Explore the topic of equity and inclusion along age, gender, race and ethnicity in court, treatment and child welfare systems
2. Understand how FTCs are in a unique position to be part of the solution to ensure equity and inclusion
3. Learn how other FTCs are monitoring and addressing racial disproportionality and disparities in their programs
4. Identify practical next steps for FTC practitioners and teams to ensure equity and inclusion for all participant families

Drug Courts have an affirmative obligation to take reasonable steps to prevent or correct racial or ethnic disparities in their programs.

Drug Courts have an affirmative obligation to take reasonable steps to prevent or correct racial or ethnic disparities that may be found to exist.

## MORE THAN 1/5

Drug Courts could not report reliable information on the representation of racial and ethnic minorities in their programs (NADCP, 2010)

NADCP Resolution of the Board of Directors, June 2010 - *On the Equivalent Treatment of Racial and Ethnic Minority Participants in Drug Courts*

# THURSDAY, MAY 31, 2018

## What Does Quality Treatment Look Like? Identifying Effective Substance Use Disorder Treatment for Families

Thursday, May 31, 2018  
11:00 am – 12:15 pm  
Session: B-16  
Room: General Assembly C

Presenter: Theresa Lemus

Court-involved families affected by substance use disorder often have complex and co-occurring needs which make them a challenging population to serve, especially when dependent children are involved.

A client's successful involvement in an effective substance use treatment program is essential to promote family well-being and achieve positive court outcomes. When caregivers are referred to treatment as a condition to keeping or reunifying with their children, court systems must ensure that the most effective treatment for overall family recovery is available. It is critical that all systems and community partners have a common and thorough understanding of what effective and quality substance abuse treatment programs look like.

The National Center on Substance Abuse and Child Welfare (NCSACW) has developed a discussion guide designed to help court and other professionals increase their knowledge and understanding of the treatment available in their communities, and how it may (or may not) align with their clients' needs. These guiding questions can help generate discussion with treatment partners, and assist court and other professionals to gain a better understanding of the types of services that fit the multiple needs of families.



The presenter will provide an overview of quality treatment, along with key concepts to consider that best aligns with the needs of parents, children, and families. The session will also provide attendees with an introduction to other cross-system training and technical assistance resources offered through NCSACW.

### Learning Objectives:

1. Identify key elements of quality substance use treatment for families affected by substance use disorder
2. Learn about the treatment and recovery processes and how it impacts family well-being and the court case
3. Identify strategies and opportunities for judicial leaders to partner with substance use treatment providers to better serve families

Research indicates that a collaborative approach to the treatment of pregnant women with substance use disorders is the most effective way to improve outcomes.

Research indicates that a collaborative approach to the treatment of pregnant women with substance use disorders is the most effective way to improve outcomes.

- from Collaborative Approach to the Treatment of Pregnant Women with Opioid Use Disorders (2016)

# THURSDAY, MAY 31, 2018

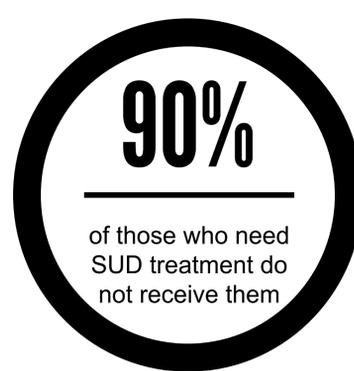
## Connecting Veteran Treatment Courts and Veteran Justice Outreach Services through Collaborative Court Staffing: Improving Service Delivery to Veterans, their Children, and Families through Family-Centered Approaches

Thursday, May 31, 2018  
11:00am – 12:15pm  
Session: VCC-B-3  
Room: 340 A/B

Presenters: Jeremiah Jones,  
Larisa Owen, & Hon. Mary  
Kreber Varipapa

All collaborative courts are family courts when their participants include adults who have children. Recent survey results indicate that more than half of the participants served by Veteran Treatment Courts (VTCs) are parents with children. Prioritizing family-centered approaches in VTCs is justified based upon the trauma and substance use disorder service needs of veterans, their children, and families.

This session will explore the need to establish connections between VTCs with Veteran Justice Outreach programs while drawing upon existing family- and child-servicing agencies within the community. Participants will gain a greater understanding about how to improve service delivery by examining the collaborative strategies within the Ten Element VTC Framework. Highlights of this presentation include particular attention to parental stress, family trauma, and the associative factors of disrupted parent-child relationships including deployment, reintegration, and separation from service.



Center for Behavioral  
Health Statistics and  
Quality, SAMHSA. (2014)

Presenters will make the case for family-centered approaches by drawing upon their collective experience as part of a coalition in Orange County, California which collaboratively operates service provisions to veterans involved in collaborative courts (i.e., Veterans Treatment Court, Domestic Violence Court) and mental health systems.

### Learning Objectives:

1. Develop an understanding about the importance of applying family-centered approaches through a continuum of services to address the unique needs of veterans, their children, and families
2. Learn how to apply the key principles of the Ten Element VTC Framework to enhance collaboration, develop community partnerships, and improve service delivery to VTC participants
3. Increase an awareness and advance knowledge about the associative factors affecting parent-child relationships including deployment, reintegration, and separation from service

# THURSDAY, MAY 31, 2018

## Strengthening Families and Supporting Success

Thursday, May 31, 2018  
1:45pm – 3:00pm  
Session: C-4  
Room: 370 A/D

Presenters: Jennifer Foley,  
Margaret Lloyd, Jill Murphy,  
Hon. William Owens, Semret  
Nicodimos, & Michelle Thomas

The accountable, time-limited mandate for achieving permanency for children set forth in the 1997 Adoption and Safe Families Act (ASFA) drove the demand for a better and coordinated system response to meet the needs of families affected by parental substance use. This presentation will explore the impact of parental substance use on the parent-child relationship and the essential service components needed to address these issues. The King County Family Treatment Court (KCFTC) with the support of SAMHSA funds, enhanced services and achieved stronger outcomes for all clients through the addition of a new peer support position called the Family Recovery Support Specialist (FRSS). KCFTC will share how the FRSS position was created, the role it plays in the KCFTC program, and what was discovered through their process evaluation.

Judge Owens of Wapello County Family Treatment Court and Margaret Lloyd, PhD from the University of Kansas, will present the expansion of their court via the five-year federally-funded Regional Partnership Grant (RPG) project. The goal of this project was to provide a system of service coordination and implementation of *Celebrating Families!* and *Strengthening Families* programs. Attendees will examine evaluation outcomes including an increased likelihood of reunification and significant cost savings for those receiving these services.



### Learning Objectives:

1. Understand the impact of parental substance use on the parent-child relationship and the essential service components needed to support healing, recovery, and reunification
2. Understand the importance of family recovery support and evidence-based parenting in achieving desired outcomes
3. Highlight the importance of evaluation to demonstrate effectiveness and secure resources for sustainability

## Ready-Set-Go! 5 Key Planning Decisions to Help You Successfully Launch Your Family Treatment Court

Thursday, May 31, 2018  
3:15pm – 4:30pm  
Session: D-4  
Room: 370 A/D

Presenters: Alexis  
Balkey & Jane Pfeifer

As the number of children in foster care continue to rise, communities across the nation are seeking strategies to improve outcomes for children and families involved in the child welfare system affected by parental substance use disorders (SUDs). The Family Treatment Court (FTC) model continues to garner attention nationwide as a promising solution for families affected by SUD and state and local leaders are seeking guidance on how to thoughtfully plan and launch an FTC program.

# THURSDAY, MAY 31, 2018

"Ready-Set-Go" continued

This presentation will explore essential decision points your Planning Team will encounter to ensure that your Family Treatment Court (FTC) is truly a collaborative effort designed to achieve improved outcomes for children and families. Drawing from the experiences of successful FTC leaders and the steps outlined in the newly published *Family Drug Court Planning Guide (National Drug Court Institute, 2018)*, this presentation will share strategies and lessons to help make your planning process a success. Regardless of your role or discipline or where you are in the planning and implementation process, this presentation and highlighted resources will equip your team with the knowledge needed to successfully accomplish your mission and vision for children and families.

## Learning Objectives:

1. Identify key decision and planning points for all Family Treatment Courts
2. Explore the important role of governance structure, leadership, and data during the planning process
3. Learn from the experiences of FTC teams that have successfully launched a FTC and hear about a newly published resource, *Family Treatment Court Planning Guide*



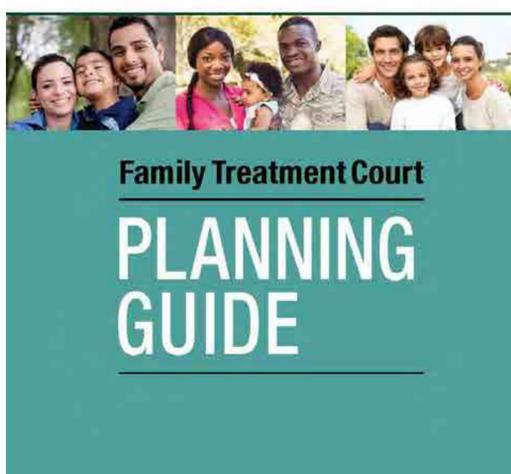
## Healing the Family: Tribes and Counties Working Together Within the Family Treatment Court and Family Tribal Healing to Wellness Court

Thursday, May 31, 2018  
3:00pm - 4:30 pm  
Session: D-7  
Room: 361 C/F

Presenters: Honorable Mary Cardoza, Honorable Charlene Jackson, Jennifer Foley, & Lauren van Schilfgaarde

The drug court movement led to numerous adaptations by jurisdictions and communities who wanted to take a problem-solving approach to better serve individuals and families affected by substance use disorders and other co-occurring issues. Child welfare and dependency court advocates developed the Family Treatment Court (FTC) model to improve the poor recovery, safety, and permanency outcomes for families affected by parental substance use. For tribal communities, the development of Family Tribal Healing to Wellness courts integrated drug court principles with tribal values, laws, and resources.

This workshop will discuss both movements, best practices, and strategies to improve collaboration between county and tribal communities. Each of the presenters will draw from available research and their own professional experience and expertise working with a multitude of programs.



# THURSDAY, MAY 31, 2018

*"Healing the Family" continued*

The presentation will highlight how tribal child welfare systems differ from State and County systems and how the family-centered approach of both models uniquely promote family recovery and stability. Attendees who want to increase their understanding of tribal communities and learn strategies to better serve tribal families in their jurisdiction are invited to attend this session.

## Learning Objectives:

1. Highlight the achievements and challenges of the Family Treatment Court and Tribal Healing to Wellness Court movements as adaptations of the drug court model
2. Explore the unique role and importance of tribal justice systems, family and holistic approach to recovery, and cultural values imbedded in Healing to Wellness Courts
3. Increase knowledge about the referral and other partnership considerations between tribes and counties



## A New Approach – Family Treatment Courts as Part of a Continuum of Care

Thursday, May 31, 2018  
4:45pm - 6:00pm  
Session: E-4  
Room: 370 A/D

Presenters: Theresa Lemus, Judge Gail Meinster, Judge William Owens, Brenidy Rice, & Tessa Richter

Families affected by substance use disorders who enter the dependency system are often given two options: standard dependency court or family treatment court. Yet, these families have a wide range of needs and protective and risk factors that require a more tailored approach. This presentation will explore how to build a continuum of care in your jurisdiction by matching service to need for all families in the child welfare system affected by SUDs. Family Treatment Courts (FTCs) are one part of this larger system of care designed to improve safety, permanency, and well-being outcomes for high-risk/high-need families.

Presenters will share lessons from the Statewide System Improvement Program (SSIP) where states institutionalized effective practices used by FTCs and incorporated them into the larger dependency systems to ensure all families have timely access to comprehensive and coordinated screening, assessment, and enhanced service delivery.

# THURSDAY, MAY 31, 2018

*"A New Approach" continued*

Panelists from Colorado and Iowa will discuss how they are applying FTC research to create “a new approach” in dependency court while utilizing the FTC intervention for families who need a more intensive level of care.

**Learning Objectives:**

- 1. Discuss opportunities and challenges of building a continuum of care responsive to families’ needs that provides proven practices to all families in your child welfare system affected by substance use disorders
- 2. Explore the lessons and experiences of Jefferson County, Colorado and Wapello County, Iowa as they integrate their FTC into a continuum of care
- 3. Identify opportunities to apply key lessons from the Statewide System Improvement Program (SSIP) initiative

The form consists of four vertically stacked writing sections. Each section is represented by a dark blue circular icon on the left, a light green header box with a dark border, and a series of horizontal blue lines for writing. The sections are labeled as follows:

- Notes**: The top section, with a circular icon to its left.
- Ah-Ha Moments**: The second section, with a circular icon to its left.
- Networking**: The third section, with a circular icon to its left.
- Follow-ups**: The bottom section, with a circular icon to its left.

# FRIDAY, JUNE 1, 2018

## Family Matters – Transitioning To a Family- Centered Approach in All Drug Courts

Friday, June 1, 2018  
1:45pm - 3:00 pm  
Session: CG-17  
Room: Grand Ballroom A

Presenters: Phil Breitenbacher  
& Carolyn Hardin

All collaborative courts are family courts if their clients are part of a family system. Substance use disorders have a profound effect on all relationships in the family unit and recovery support must extend beyond the client to a more family-centered approach. This concurrent general session will offer judicial leaders and drug court professionals working in any drug court key strategies for implementing a family-focused approach. This presentation will make the case for why all drug courts should pay greater attention to children and families and that cross-system collaboration and communication are critical for family safety and recovery.

This concurrent session will draw from the findings of the recently published study by Center for Children and Family Futures and NADCP - *Transitioning to a Family Centered Approach: Best Practices and Lessons Learned from Three Adult Drug Courts*. Presenters will share lessons from three drug courts that transitioned from a traditional adult drug court to one that expanded services to families and children.

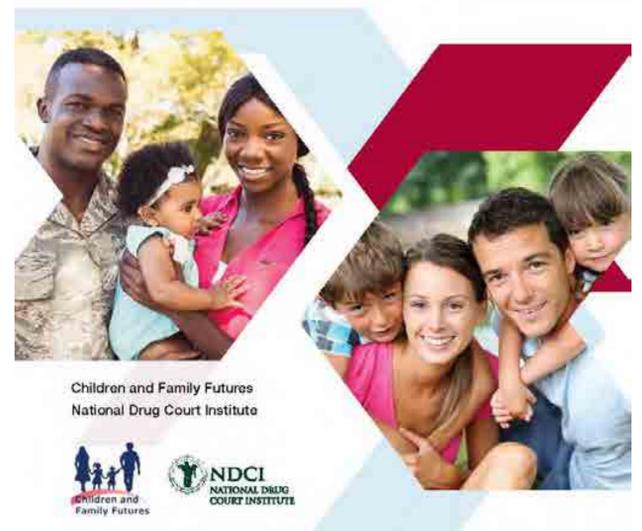


### Learning Objectives:

1. Gain a greater understanding of the effect of substance use on the family, and the importance of addressing their needs as a critical part of recovery
2. Learn how cross-systems collaboration, communication, and community partnerships are critical in serving the complex needs of children and families in your drug court
3. Highlight key lessons, take-aways, and challenges from case studies conducted with three adult drug court programs at different points in transition to a family-centered approach

### TRANSITIONING TO A FAMILY CENTERED APPROACH:

Best Practices and Lessons Learned  
from Three Adult Drug Courts



The parenting role  
of both women and  
men with substance  
disorders is a  
complex matter  
that cannot be  
separated from  
their treatment.

Transitioning to a Family-  
Centered Approach, 2017



# FRIDAY, JUN 1, 2018

## Developing a Plan of Safe Care: What You Need to Know about Serving Pregnant and Parenting Women with Opioid Use Disorders

Friday, June 1, 2018  
3:15pm - 4:30pm  
Session: CG-28  
Room: Grand Ballroom A

Presenters: Nancy K. Young

The nation's prescription drug and the opioid crisis have led to an increase in opioid use disorders among pregnant and parenting women. Best practices suggest the need for a collaborative response across systems to improve outcomes, reduce risks and adverse consequences for pregnant and parenting women and their infants, and help families remain together safely.

In July 2016, the Comprehensive Addiction and Recovery Act (CARA) was signed into law including amendments to the Child Abuse Prevention and Treatment Act (CAPTA). The CAPTA amendments focused on improving well-being and safety for infants affected by prenatal substance exposure and their families or caregivers by: including both legal and illegal substances in the categories of infants to be identified, specifying requirements for notification to child protective services, stipulating the development of a plan of safe care that includes the treatment needs of the family/caregiver in the plan, and increasing the monitoring requirements



Family treatment courts are uniquely positioned to implement the changes to CAPTA because of their emphasis on collaborative practice and improving outcomes for families involved in the child welfare system who are affected by substance use disorders. This workshop will highlight strategies and best practices for serving pregnant and parenting women with opioid use disorders, expanding services within the family treatment court to serve the needs of mothers, families and their infants, and developing a family-centered Plan of Safe Care to improve the well-being and safety of infants with prenatal exposure and their families.

### Learning Objectives:

1. Understand best practices in serving parenting and pregnant women with opioid use disorders and their infants
2. Identify strategies to expand the family treatment court collaborative approach to effectively work with parenting and pregnant women affected by opioid use disorders and their families
3. Learn how collaborative teams can develop an approach to implement comprehensive and effective CAPTA Plans of Safe Care

# 88%

of states (N=44) had an increased rate of infants placed in out-of-home care from 2012 to 2016 (AFCARS Data, 2012-2016)

# BIO SUMMARIES

## **Alexis Balkey, MPA, RAS**

FDC TTA Program Manager  
Center for Children and Family Futures, Inc.,  
25371 Commercentre Drive, Suite 250 | Lake Forest, CA 92630  
(714) 505-3525 | abalkey@cffutures.org

Alexis Balkey currently serves as the Program Manager for the National FDC Training and Technical Assistance Program at Center for Children and Family Futures (CCFF). She assists with project management and reporting tasks to compile and synthesize information on the lessons, results and policy and practice innovations of the FDC TTA Program. Additionally, she provides training and technical assistance to FDCs across the nation responding to over 900 requests in less than five years. Ms. Balkey is a Change Leader for the Statewide System reform initiative aimed at spreading the reach of Family Treatment Courts to all families within the child welfare system impacted by substance use disorders. Additionally, Ms. Balkey is a Change Leader for the Prevention and Family Recovery (PFR) initiative funded by the Duke Foundation Charitable Trust assisting jurisdictions to advance the capacity of their FDCs to provide more comprehensive family-centered care to children, parents and families affected by substance use disorders through integration and institutionalization of proven parenting services and developmental and therapeutic services for children.

Previous to her employment with CCFF, Ms. Balkey was the Program Manager for Riverside County Family Preservation Court, located in Indio, CA where she successfully managed a Family Treatment Court with multiple funding streams including the SAMHSA Children Affected by Methamphetamine (CAM) Federal grant. Ms. Balkey is an instructor for the William R. Mead Academy located in San Diego, CA with a teaching emphasis on case management, criminal justice, ethics, gender studies, cultural competency and co-occurring disorders.

Ms. Balkey is a certified addictive disorder counselor by the Breining Institute, College for the Advanced Study of Addictive Disorders with robust knowledge of alcohol and other drug treatment programs. Ms. Balkey received a Bachelor of Arts in Psychology and Bachelor of Arts in Criminal Justice from Temple University and a Masters of Public Administration from California State University, San Bernardino.

## **Russ Bermejo, MSW**

Senior Program Associate  
Center for Children and Family Futures  
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Russ Bermejo currently serves as a Senior Program Associate with the National Center on Substance Abuse and Child Welfare at Center for Children and Family Futures (CCFF). In this capacity, he facilitates technical assistance regarding child welfare and substance use disorder related issues for multiple projects. He has managed the Family Drug Court Learning Academy since 2010 and currently serves as a Change Leader Associate for the State-wide Systems Improvement Program (SSIP) supporting state leaders to develop and successful implement statewide plans to expand the reach of Family Treatment Courts (FTCs) and institutionalize FTC practices across state systems to serve more families. Mr. Bermejo also served as the Performance Management Liaison providing support to six FTCs awarded by the Children Affected by Methamphetamine (CAM) federal grant program (2010-2014).

Mr. Bermejo has 12 years of experience in public child welfare practice, including nearly 10 years as a Senior Social Worker with Orange County Children and Family Services. Prior to joining CCFF, Mr. Bermejo served in the Philippines as an Aftercare Fellow for International Justice Mission, where he worked on numerous aftercare projects focused on rescue and protection, reintegration, and economic self-sufficiency.

Mr. Bermejo earned a BA in Sociology from the University of California, Los Angeles and a Masters in Social Work, from California State University, San Bernardino.

## **Phil Breitenbucher, MSW**

Director of Family Drug Court Programs  
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Phil Breitenbucher is a nationally recognized expert, author and speaker on family treatment courts. He currently is a Director at Center for Children and Family Futures, where he manages multiple programs and initiatives. Mr. Breitenbucher currently directs the National Family Drug Court Training and Technical Assistance Program and the Statewide System Improvement Program supported by the U.S. Office of Juvenile Justice and Delinquency Prevention. He is directing the Family Drug Treatment Court Grantee Performance Measurement and Technical Assistance project of the U.S. Substance Abuse and Mental Health Services Administration (SAMHSA) and the Prevention and Family Recovery Initiative supported by the Doris Duke Charitable Foundation and Duke Endowment.

He has nearly 20 years of experience in the management of public child welfare and community-based prevention services, including the implementation and management of three Family Drug Court programs and four Family Resource Centers as well as various prevention, diversion and early intervention programs for children and families. He Co-Directed the Children Affected by Methamphetamine program supported by SAMHSA. He managed the design and implementation of an effective national training model, utilizing a wide range of computer-based and communications technologies. He directed the development and co-authored the *Family Drug Court Guidelines* publication and created the nation's first Family Drug Court Mentor sites. He serves as a consultant to states and local jurisdictions for the National Center on Substance Abuse and Child Welfare. He is the Vice-President and co-Founder of the California Collaborative Justice Courts Foundation.

Mr. Breitenbucher received his Master of Social Work from California State University, San Bernardino, Bachelor of Arts in Psychology from California Baptist University and his certificate in Addiction and Recovery from Light University.

## **Honorable Mary Cardoza**

Chief Judge, Lummi Tribal Court  
2665 Kwina Road, Bellingham, WA 98226  
MaryC@lummi-nsn.gov

Mary Cardoza has been Chief Judge of the Lummi Tribal Court since 2012 and is a Lummi Tribal member. She graduated from Hastings College of the Law in San Francisco and Seattle University as an Undergraduate. After working for a major Insurance Defense firm in San Francisco she honed her trial skills in the Alameda County District Attorney's Office in Oakland California trying over 100 cases. After returning home to the Bellingham Washington area she practiced as a Private Defense Attorney for the Lummi Nation for several years prior to taking the Bench.

## **Jennifer Foley, BS, CADC**

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Jennifer Foley currently serves as Senior Program Associate at Center for Children and Family Futures (CCFF). In this role, Ms. Foley provides training and technical assistance to FTCs across the U.S., is a Change Liaison for grantees in the Regional Partnership Grant program and also provides training and consultation to assist with the implementation of the OH START program. Previous to her employment at CCFF, Ms. Foley spent 11 years in Eugene, Oregon at the Relief Nursery's Accessing Success Recovery Support Program. Initially a Peer Support Specialist, she advanced to Alcohol & Drug Counselor, eventually managing the recovery support program for six years. Ms. Foley's focus was serving parents with substance use disorders who were involved in the child welfare system. Then, she spent seven years as a child welfare caseworker. In 2013, she accepted the position as the Women's Treatment Services Coordinator and the Access to Recovery Project Director with the Oregon Health Authority, and Oregon's (NASADAD) Women's Service Network Coordinator.

Originally from California, she moved to Oregon for college, receiving a B.S. degree from the University of Oregon in Sociology, with an area of concentration in Substance Abuse and Prevention

## **Carolyn Hardin, MPA**

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Carolyn Hardin is the chief of training and research for the National Association of Drug Court Professionals (NADCP), a non-governmental organization based in Washington, DC. Hardin oversees daily operations for NADCP's three divisions: the National Drug Court Institute, National Center for DWI Courts and Justice For Vets. Hardin oversees the development and implementation of training for the organization. She currently travels nationally and internationally, assisting drug court teams with planning and operating successful drug courts. She received her master's degree in public administration from the University of Akron in Ohio. She received her bachelor's degree in public administration from Talladega College in Alabama. Her work experience includes resource development and acquisition, program planning and evaluation, and database management. Hardin has supervised probationers, parolees, and federal inmates. She has supervised special caseloads to include sex offenders, dual-diagnosis offenders and violent offenders.



## **Honorable Charlene Jackson**

Owner/Managing Attorney  
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Charlene Jackson is the Owner/Managing Attorney of the Jackson Law Firm, PLLC in Arizona. Her practice focuses primarily on representing and assisting Tribes with various legal issues as well as policy and organizational development and improvement. In addition to her legal practice, Charlene serves as an Associate Judge for the Town of Paradise Valley, Arizona, Chief Judge of the Fort Mohave Tribal Court of Appeals, Chief Judge of the Cedarville Rancheria Court of Appeals, Associate Justice for the Colorado River Indian Tribe, Judge Pro Tem for the Tonto Apache Tribe and Judge Pro Tem for the Washoe Tribe of California and Nevada. In addition, Charlene is a consultant for the Tribal Law & Policy Institute in West Hollywood, California providing training and technical assistance to tribes throughout Indian Country. She is also a consultant for the National Drug Court Institute, the training division of the National Association of Drug Court Professionals in Alexandria, Virginia.

In 2007, Charlene was invited to serve on the faculty of the National Tribal Justice Center at the National Judicial College and frequently trains tribal court judges from across the on issues including civil and criminal jurisdiction, domestic violence, child custody and protective orders. Prior to returning to private practice, Charlene previously served as the Chief Judge of the Fort McDowell Yavapai Nation, a Judge for the Gila River Indian Community, the Ak-Chin Indian Community and as a Judge Pro Tem for the City of Chandler. She also has served as an Appellate Judge for the Hualapai. Before her appointment to the bench, Charlene served as assistant counsel for two Arizona tribes.

## **Jeremiah Jones, AB, AS**

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Jeremiah Jones is a combat veteran who served five years as a 25S (satellite communication systems operator-maintainer) with the U.S. Army. Deployed in 2007, he spent 15 months in the Diyala Province of Iraq in support of Operation Iraqi Freedom (OIF). Following his honorable discharge, Jeremiah returned home to his native California and earned an associate's degree in business administration and an associate's degree in sociology.

He is currently pursuing his bachelor's in sociology at California State University, Los Angeles. When he's not working or studying, Jeremiah can be found interacting with his fellow veterans through his affiliation with several veteran organizations, including Wounded Warrior Project (alumni), Team RWB (member) and The Mission Continues (member).



## **Theresa Lemus, MBA, RN, LADC**

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Theresa Lemus is a Senior Program Associate at Center for Children and Family Futures where she works across multiple programs and initiatives to provide guidance, technical assistance, coaching, and training to states, counties, and jurisdictions across the United States and U.S. territories. She is nationally recognized for the work she does with family treatment courts and for her expertise in developing comprehensive withdrawal management services. In her role as Senior Program Associate, she works with programs and initiatives through the U.S. Office of Juvenile Justice and Delinquency Prevention (OJJDP), U.S. Substance Abuse and Mental Health Services Administration (SAMHSA), the Doris Duke Charitable Foundation, and The Duke Endowment. Ms. Lemus serves as a consultant to state and local jurisdictions at the National Center on Substance Abuse and Child Welfare (NCSACW).

Her past experience includes administering and providing direct clinical services in the Health and Human Services field, in both physical and behavioral healthcare. She is the former Executive Director of a large non-profit treatment organization where she managed a multi-million dollar budget and a comprehensive continuum of care which included modified medical detoxification services. Her non-profit organization was a treatment partner in the nation's first family treatment court in Reno, Nevada. Ms. Lemus served as a consultant to the National Drug Court Institute (NDCI) for almost a decade where she was an expert speaker/trainer and facilitated the development of new and expanding family treatment courts throughout the country.

Ms. Lemus has considerable knowledge and experience in program management, cross-system collaboration, integrated service delivery, program and resource development, sustainability, persuasive and technical writing, needs assessment and planning, research, evaluation, and policy analysis. She has extensive experience working with multidisciplinary teams, problem-solving courts, and collaborative practice programs. She is an effective facilitator and consensus builder. Ms. Lemus communicates effectively and draws upon her knowledge of effective clinical and business practice in substance use and mental health services, health care, child welfare, and the courts to provide the highest quality support to states and localities.

Ms. Lemus is a Registered Nurse, Licensed Alcohol and Drug Counselor, and a Certified Clinical Supervisor. She is a co-author and contributor to several publications, including the *Family Drug Court Training and Technical Assistance Needs Assessment* and the *Family Drug Court Guidelines*.

## **Margaret H. Lloyd, Ph.D.**

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Margaret H. Lloyd, Ph.D. is an Assistant Professor at the University of Connecticut School of Social Work. Dr. Lloyd's research focuses on practice and policy addressing substance use disorders in child welfare, with particular attention to mothers of young children. Dr. Lloyd has over six years of experience evaluating family drug treatment courts in Iowa and Oklahoma and currently serves as Principal Investigator of a five-year SAMHSA-funded expansion of services for parents and children ages 0-5 in the Oklahoma County Family Drug Court. Additionally, Dr. Lloyd is investigating state-level changes to policies requiring child protective services notification of newborns prenatally exposed to substances, and whether these policies increase rates of child welfare referrals and foster care placement. She teaches MSW-level courses on policy and research.

## **Honorable Gail Meinster**

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Ann Gail Meinster, was appointed as a District Court Magistrate in the First Judicial District in Colorado in January 2009 and heard primarily juvenile and domestic matters. In 2011, she was appointed as the Presiding Juvenile Judge for the First Judicial District. Judge Meinster hears dependency, delinquency and adoption matters and presides over the Family Integrated Treatment (FIT) Court which is a dependency drug court. Prior to her appointment to the bench, she was a partner in the firm of Meinster & Meinster, PC, where she practiced as a Guardian *Ad Litem* (GAL), Child and Family Investigator (CFI), and attorney for respondent parents throughout the state. Judge Meinster is a graduate of Mt. Holyoke College in Massachusetts, received her law degree from the University of San Diego School Of Law in California, and is licensed to practice law in California, Colorado, and Maryland. She formerly served as Assistant Park County Attorney representing the Department of Human Services. She has taught and facilitated trainings across the country relating to dependency and juvenile matters. Prior to her appointment to the bench, Judge Meinster served on various non-profit boards including the board for the Office of the Child's Representative in Colorado.

In 2004 she was awarded the Linda T. Palmieri Award for Outstanding Service on Behalf of Children. Judge Meinster was named the Family Treatment Drug Court Judge of the Year at the Colorado Best Practice Team Convening in April 2015. In May 2016 Judge Meinster received the Leader of the Year Award from the Colorado Association of Addiction Professionals. Judge Meinster holds a Child Welfare Legal Expert accreditation (CWLE) from the ABA and NACC.

## **Jill Murphy, MA**

Program Supervisor  
King County Family Treatment Court  
516 Third Avenue  
Seattle, WA 98104  
(206) 477-2311 | Jill.Murphy@kingcounty.gov

Jill Murphy is the Program Supervisor of Washington's King County Family Treatment Court, a therapeutic court designed to assist substance using parents who have lost custody of their children. She is also the Program Supervisor for the Parents for Parents Program in King County. This program pairs parents new to the dependency system with peer mentors to provide the new parents with additional support and education as they encounter the child welfare process. Prior to moving to Seattle, Mrs. Murphy worked for the Cook County Juvenile Court Clinic (CCJCC), where she facilitated requests for clinical information, evaluated parents' ability to surrender their parental rights, and provided training and consulting on the CCJCC model. She has worked internationally helping legal professionals interview traumatized prisoners and conducting mental health evaluations for incarcerated men and women in Malawi.

She holds a Master of Arts degree in Clinical Social Work from the School of Social Service Administration at the University of Chicago and is licensed in the State of Washington.

## **Semret Nicodimos, MPH**

Research Associate  
University of Washington, Division of  
Behavioral Health and Justice Policy  
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Seattle, WA 98102  
(206) 616-9392 | nicods@uw.edu

Semret Nicodimos is a Research Associate in the Division of Public Behavioral Health and Justice Policy in the Department of Psychiatry and Behavioral Sciences at the University of Washington (UW). She earned her master's degree in epidemiology in the School of Public Health at UW. She has over 5 years of experience in evaluation research methodologies for social, educational and behavioral interventions. She also has experience in population-based research in a variety of settings including Family Treatment Courts, Public Schools and school-based mental health clinics. She is currently the evaluator for the King County Family Treatment Court Expansion and Enhancement project.

## **Larisa Owen, PhD, MBA**

Director, Veterans Programs  
Center for Children and Family Futures  
25371 Commercentre Drive, Suite 250  
Lake Forest, CA 92630  
(714) 505-3525 | lowen@cffutures.org

Dr. Larisa Owen is a Program Director with the Center for Children and Family Futures (CCFF) since 2004. Dr. Owen serves as a Veterans and Special Projects Program Director who works on several programs including leading the Veterans and Military Families (VMF) projects within the organization in addition to research and evaluation of VMF projects. She is responsible for all veteran projects, including assistance in the planning and implementation of veteran treatment courts evaluation and technical assistance involving families in the VTC. Dr. Owen also coordinates the review of extensive resources and of new project development in several areas, including veterans and military families, health care reform, home visiting, and legal remedies for children and families affected by substance use disorders. She is the Co-Chair of the Center for Children and Families subcommittee working group of the Orange County Veterans and Military Families Collaborative.

Dr. Owen has extensive experience with issues facing active military personnel, veterans, reservists and their families. She managed the tracking and monitoring of all training and technical assistance provided by the National Center on Substance Abuse and Child Welfare (NCSACW), one of CCFF's primary training and technical assistance programs. Prior to her work at CCFF, she held several senior management roles with experience in corporate and nonprofit organizations, where she was responsible for financial, administrative, human resources, legal, operations process improvements and decision making including the training curricula and logistics for corporate-wide training events focused on legal, human resources, safety, IT and risk management. She negotiated with government agencies on compliance issues, and on external funding development including identifying and preparing proposals for foundation and corporate funding prospects.

Dr. Owen currently serves as a member of the California State Military Reserve (CSMR). CSMR is a state-supported agency with the primary mission of supporting the Soldiers and Airmen of the California National Guard (CNG) in its Homeland Defense, Homeland Security missions and service to California during times of state emergencies. Captain Owen works with the Legal Support Command which provides legal services to deploying and returning military personnel. Dr. Owen is the wife of a Marine Corps veteran and the daughter of an Army veteran.

Dr. Owen received her Bachelor of Science in Criminology and Legal Studies, holds a Master's degree in Business Administration, and has a Ph.D. in Public Policy and Law.

## **Honorable William S. Owens**

Associate Juvenile Judge  
Wapello County Courthouse  
101 West Fourth Street, Suite 401  
Ottumwa, Iowa 52501  
(641) 683-1791 | [William.Owens@iowacourts.gov](mailto:William.Owens@iowacourts.gov)

Judge William Owens was appointed as an Associate Juvenile Judge in November 1998. Judge Owens received his Bachelor of Arts degree from the University of Kansas in May 1981, and his Juris Doctor degree from Drake University Law School in May 1984.

Prior to his appointment to the bench Judge Owens served as Assistant Monroe County Attorney from 1984-1989, and Monroe County Attorney from 1990-1998. At the time of his appointment to the bench Judge Owens was President-Elect of the Iowa County Attorney's Association. Judge Owens also was engaged in the private practice of law until his appointment to the bench, and at the time of his appointment was a partner in the law firm of Owens & Albers, L.L.P.

Judge Owens currently serves as co-chair of the Iowa Supreme Court's Advisory Committee for Children's Justice; is a member of the State Council of the Iowa Supreme Court Commission for Children's Justice; and is chair of the Juvenile Judge Committee of the Iowa Judge's Association.

Judge Owens was the recipient of the Outstanding Contributor to Recovery Award from Harold Hughes Hall Association in Ottumwa, Iowa in 2007 for his work with drug courts. In 2008 Judge Owens received the Supreme Court of Iowa Court Innovation Award for initiating a Family Treatment Court in Wapello County that serves the five counties where Judge Owens serves as an Associate Juvenile Judge. In 2013 Judge Owens received the Harold E. Hughes, Exceptional Rural Professional - Award of Excellence. This award is given annually by the National Rural Drug Abuse Network and goes to a rural professional who exemplifies outstanding contribution to the rural alcohol and drug abuse field. In 2015 the Wapello County Family Treatment Court was selected as a National Peer Learning Court by Center for Children and Family Futures, Inc., and United States Department of Justice, Office of Juvenile Justice and Delinquency Prevention.

Judge Owens is a member of the Iowa State Bar Association, Iowa Judges Association, and National Association of Drug Court Professionals. In 2015, in honor of their 150th Anniversary, Drake Law School named Judge Owens one of 150 alumni, students or faculty members who have best demonstrated the values of the Law School and have helped shape Drake Law into what it is today. In 2018 Judge Owens was appointed to the National Court Appointed Special Advocate (CASA) Judicial Leadership Council.

Judge Owens and his wife Heidi reside in Ottumwa, Iowa, and they have three daughters. Judge Owens is an avid runner and has competed in nine marathons.

## **Jane Pfeifer, MPA**

Senior Program Associate  
Center for Children and Family Futures, Inc.  
25371 Commercentre Drive, Suite 250  
Lake Forest, CA 92630  
(714) 505-3525 | [jpfeifer@cffutures.org](mailto:jpfeifer@cffutures.org)

Jane Pfeifer currently serves as Senior Program Associate at Center for Children and Family Futures (CCFF). In this role, Ms. Pfeifer provides training and technical assistance to jurisdictions across the US, is a Program Management Liaison for grantees in the Regional Partnership Grant project and also acts as Change Liaison for Quality Improvement Center—Collaborative Community Court Teams. Past assignments include leading the Family Drug Court Peer Learning Court Project and the Family Drug Court Guidelines Project. Prior to her employment at CCFF she worked in the justice system, focusing on systems improvement and collaborative justice. As a consultant, Ms. Pfeifer has worked with public and private organizations providing training and technical assistance, grant writing and community resource development with an emphasis on case management, cultural proficiency, and effective collaboration.

Ms. Pfeifer has served as faculty to national organizations including the National Judicial College, the National Development and Research Institutes, the National Council of Juvenile and Family Court Judges, the National Drug Court Institute and the Justice Management Institute. Her teaching and training experience includes in-person as well as remote/virtual events and distance learning settings. She was also an adjunct professor at California State University—Chico in the Department of Political Science and Department of Sociology.

Ms. Pfeifer holds Bachelor's Degrees in Social Work and Psychology, and a Master's Degree in Public Administration and has been published in peer-reviewed journals.

## **Brenidy Rice, MPA**

Colorado State Problem Solving Court Coordinator and Manager of Criminal Justice Programs Unit  
Colorado Judicial Branch  
1300 Broadway Avenue, 12th Floor  
Denver, CO 80201  
(720)625-5945 | [brenidy.rice@judicial.state.co.us](mailto:brenidy.rice@judicial.state.co.us)

Brenidy Rice attended the University of Colorado, Denver where she received a graduate degree in Public Administration with a concentration in local government and policy. She has worked with the judicial department and problem-solving courts for over twelve years. She was the Colorado State Problem Solving Court Coordinator for six years and is now the Criminal Justice Programs manager with the State Court Administrator's Office overseeing problem-solving courts, diversion and restorative justice programs. Brenidy has extensive experience in strategic planning, group facilitation, program implementation and evaluation. She speaks nationally on problem-solving courts, trauma-informed courtrooms and implicit bias and the impact on the criminal and child welfare system.



## **Tessa Richter, LCSW, MSW**

Program Associate  
SSIP Program Manager  
Center for Children and Family Futures  
25371 Commercentre Drive, Suite 250  
Lake Forest, CA 92630  
(714) 505-3525 | [trichter@cffutures.org](mailto:trichter@cffutures.org)

Tessa Richter currently serves as a Program Associate for the National Family Drug Court Training and Technical Assistance Program at the Center for Children and Family Futures (CCFF). In this role, she provides technical assistance and support to FDCs across the nation. Additionally, Ms. Richter serves as the Program Manager for the Statewide System Improvement Program (SSIP), where she supports and oversees efforts to improve outcomes for families impacted by substance use disorders within the child welfare system through the institutionalization of effective FDC practices into larger statewide systems. Prior to her position with Center for CCFF, Ms. Richter was the Problem Solving Court Coordinator and Juvenile Programs Coordinator for the 1st Judicial District in Colorado, where she coordinated the family treatment court program in Jefferson County, Colorado. She also has experience as a child welfare caseworker. She completed the Women's Addiction Services Leadership Institute (WASLI) through the Substance Abuse and Mental Health Services Administration (SAMHSA) in 2015.

Ms. Richter received her MSW from the University of Denver with an emphasis in Child Welfare and holds a Bachelor of Science in Human Development and Family Studies from the University of Missouri. She is a Licensed Clinical Social Worker.

## **Michelle Thomas**

King County Family Treatment Court  
516 Third Avenue, Seattle, WA 98104  
(206)477-6902 | [michelle.thomas@kingcounty.gov](mailto:michelle.thomas@kingcounty.gov)

Michelle Thomas is a Family Recovery Support Specialist employed by King County Family Treatment Court (KCFTC). She previously worked as a supervisor for Seattle Goodwill working as a liaison for the Job Training Program. In this position, she was able to help families find and reach employment while navigating barriers, such as criminal background, single parenting, and citizenship concerns. She is also a graduate from King County Drug Diversion Court (KCDDC) and continues to be a peer support for KCDDC participants, sharing her story and giving hope to those in need. As a Drug Court Alumni, she is active in helping find ways to improve the program, and making suggestions and supporting clients in their recovery. She helps run a recovery retreat for women twice a year. As a parent in recovery who has previous experience with both tribal and state child welfare systems, Ms. Thomas also brings a wealth of personal experience to this position.



## **Lauren van Schilfgaarde**

Tribal Law Specialist Tribal Law  
and Policy Institute  
8235 Santa Monica Blvd., Suite 211  
West Hollywood, CA 90046  
(323) 650-5467 | Lauren@TLPI.org

Lauren van Schilfgaarde serves as the Tribal Law and Policy Institute's Tribal Law Specialist, which includes facilitating technical assistance to tribal courts, including Healing to Wellness Courts, and researching legal and policy issues as they face tribal governance and sovereignty. Prior to TLPI, Lauren served as law clerk for the Native American Rights Fund and the Legal Aid Foundation of Los Angeles. Lauren is licensed in the State of California, and currently serves on the board of the National Native American Bar Association, the American Bar Association's Center for Racial and Ethnic Justice, and the American Bar Association's Tribal Courts Council. She recently finished serving a 3-year term on the board of the California Indian Law Association. Lauren graduated from the UCLA School of Law, where she focused her studies on tribal and federal Indian law. While in law school, she served as president of the Native American Law Students Association and on the board of the National Native American Law Students Association. Lauren participated in two tribal clinics, including the Tribal Legal Development Clinic and the Tribal Appellate Court Clinic.

## **Honorable Mary Kreber Varipapa**

Veteran Treatment Court Judge Superior Court of California  
County of Orange Community Court  
909 N. Main Street  
Santa Ana, CA 92701  
(657) 622-5801 | lowen@cffutures.org

Judge Mary Kreber Varipapa, has served as an attorney in the Orange County Public Defender's Office since 1998. She was an adjunct professor at the University of Phoenix Criminology Department from 2004 to 2007 and an attorney at Orange County Juvenile Defenders from 1996 to 1998 and at Santa Clara Juvenile Defenders from 1996 to 1997. Hon. Kreber Varipapa earned a Juris Doctor degree from the Western State University College of Law and a Bachelor of Arts degree from California State University, Long Beach. She fills the vacancy created by the retirement of Judge Ronald P. Kreber. Kreber Varipapa is registered without party reference. Hon. Mary Kreber presides over the programs at the Community Court. The sessions of the Drug Court and DUI court held there to serve residents of the Central Justice Center jurisdiction, while the several mental health courts, the Veterans Treatment Court, and the Homeless Outreach Court programs which are held there serve residents of the entire county. Veterans Treatment Court, which is convened at the Community Court, has attracted national attention as an innovative and effective way to help veterans overcome the issues that impede their full re-integration into society, while protecting public safety and reducing the costs associated with recidivism. The program, guided initially in 2016 by Hon. Joe Perez and thereafter by Hon. Mary Kreber, served during the year as a Mentor Court, as designated by Justice for Vets and the National Drug Court Institute.

## **Terrence D. Walton, MSW**

Chief Operating Officer National Association of Drug Court Professionals  
625 N. Washington, Suite 212  
Alexandria, VA 22314  
(703) 575-9400 | [twalton@allrise.org](mailto:twalton@allrise.org)

Terrence D. Walton, chief operating officer for the National Association of Drug Court Professionals (NADCP), is among the nation's leading experts in providing training and technical assistance to drug courts and other problem solving courts. Prior to being named COO in October 2015, Mr. Walton was the NADCP's chief of standards. In addition to being responsible for the daily operation of NADCP and planning the national conference, he retains his responsibility for establishing and implementing best practice standards nationwide. Mr. Walton was director of treatment for the Pretrial Services Agency for the District of Columbia (PSA). During his nearly 15 years at PSA, he was responsible for directing operations providing substance use disorder and mental health assessment, treatment, and social services for all adults released under PSA supervision in the District of Columbia. His responsibilities included, overseeing the city's adult drug court, the DWI initiative, the mental health units and various other programs for assessing, treating and supervising justice system involved men and women. Previously, he excelled as the director of what was then the District of Columbia's leading adolescent outpatient substance abuse treatment center.

Mr. Walton has directed programs in Dayton, Ohio and Milwaukee, Wisconsin. He has helped evaluate a multi-million dollar White House anti-drug media campaign and served on the substance abuse task force as a part of the White House Best Practices Collaborative. In addition to his extensive work domestically, he has assisted addiction treatment programs in Bangladesh, Barbados, Guam, Mexico and Bermuda.

Mr. Walton is an internationally certified alcohol and other drug abuse counselor with over twenty-five years of experience helping individuals and organizations champion positive change. He holds a Bachelor of Arts in Psychology and a Master of Social Work degree with specializations in program administration and substance abuse. Noted for his practical strength-based approaches to complex issues, Mr. Walton is actively sought out for insight on treating and supervising justice system involved individuals who are living with substance use and mental health disorders. Mr. Walton is a member of the Motivational Interviewing Network of Trainers (MINT). A gifted and entertaining speaker, Mr. Walton travels extensively informing and inspiring audiences across the globe.

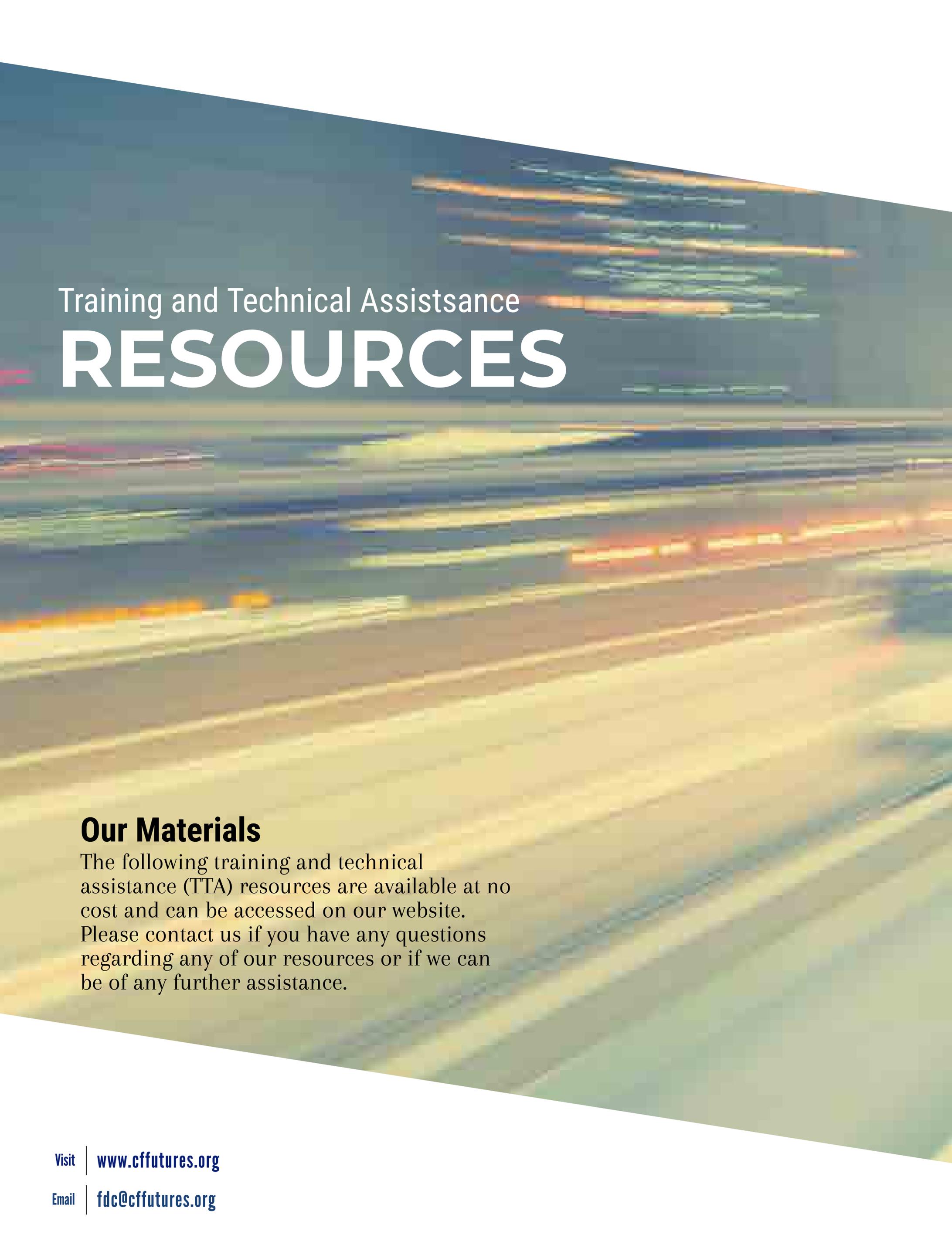
## **Nancy K. Young, PhD, MSW**

Executive Director  
Center for Children and Family Futures  
25371 Commercentre Drive, Suite 250  
Lake Forest, CA 92630  
(714) 505-3525 | [nkyoung@cffutures.org](mailto:nkyoung@cffutures.org)

Dr. Nancy K. Young is the Executive Director of Center for Children and Family Futures (CCFF), a California-based research and policy institute whose mission is to improve safety, permanency, well-being and recovery outcomes for children, parents and families affected by trauma, substance use and mental disorders. CCFF operates a number of evaluation and technical assistance programs. Since 2002, she has served as the Director of the federally-funded National Center on Substance Abuse and Child Welfare and the Director of the Administration on Children and Families technical assistance program for the Regional Partnership Grants since 2007. In 2010, Dr. Young began serving as the Director of the Office of Juvenile Justice and Delinquency Prevention's technical assistance program for Family Drug Courts and the Statewide System Improvement Program in 2014. She led the effort to create the foundation-funded Prevention and Family Recovery Program to implement evidence-based parenting and children's intervention in family drug courts in 2013.

In addition, Dr. Young has been involved in numerous projects related to public policy analysis, strategic planning and program evaluation through her work with these programs and serving as a consultant to various states, counties, tribes, communities and foundations on behalf of the children, parents and families affected by substance use and mental disorders involved in the child welfare and judicial systems.

Dr. Young is a graduate of California State University Fullerton and received her M.S.W. and her Ph.D. from the University of Southern California, School of Social Work.



# Training and Technical Assistance **RESOURCES**

## **Our Materials**

The following training and technical assistance (TTA) resources are available at no cost and can be accessed on our website. Please contact us if you have any questions regarding any of our resources or if we can be of any further assistance.

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

Email | [fdc@cffutures.org](mailto:fdc@cffutures.org)

# National Family Drug Court Strategic Plan

**3 GOALS** | Ensure Quality Implementation | Expand FDC Reach | Expand Research Base

A coordinated national strategy to enhance and expand the use of FDCs to reach more children and families

National Strategic Plan  
For Family Drug Courts

MARCH 2017



This project is supported by Award No. 2013-D0-BX-0002 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs. The opinions, findings, and conclusions or recommendations expressed in this publication are those of the author(s) and do not necessarily reflect the views of the Department of Justice.

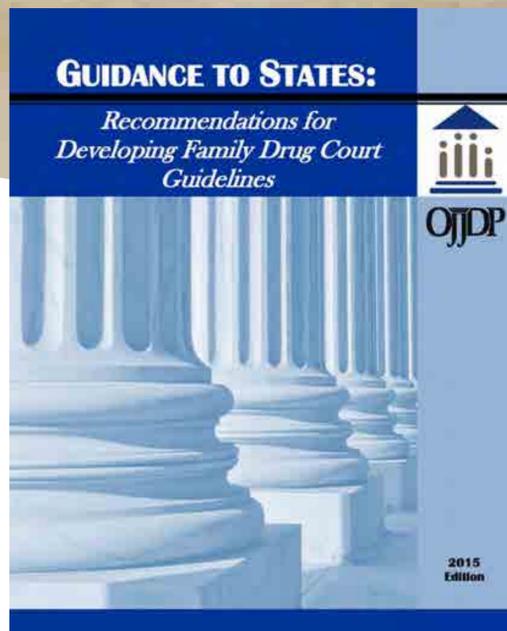
## The Vision

*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*

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

# *Guidance to States: Recommendations for Developing Family Drug Court Guidelines*

**Research Update - 2015**



This publication provides information on best practices and collaborative principles to develop and sustain Family Drug Courts, and incorporates up-to-date research supporting key strategies. The *Guidelines* will assist policy makers and practitioners to enhance and expand these programs.

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

# Family Treatment Planning Guide

**Attend the Session!**

Workshop Session (D-4)  
on Thursday, May 31st  
3:15 - 4:30 pm  
at Room 370 A/D

**Just Released!**



Center for Children and Family Futures  
Strengthening Partnerships, Improving Family Outcomes

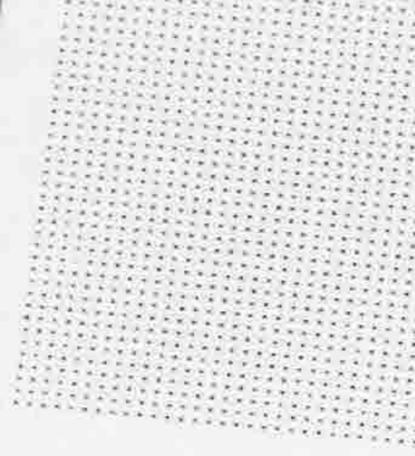


Family Treatment Court

**PLANNING  
GUIDE**

The *Family Treatment Court (FTC) Planning Guide* published by the National Drug Court Institute and the Center for Children and Family Futures (2018) is designed to provide step-by-step instructions for a team planning to start and implement an FTC in their community.





# 50+

## Webinar Presentations

Visit our website @ [www.cffutures.org](http://www.cffutures.org) to view our archived library

# Family Drug Court Learning Academy

# 4,000 Attendees

from all 50 states with a level of satisfaction of 3.65 out of 4.0

Launched in 2010, the *Family Drug Court Learning Academy* offers a series of web-based training events to help FDCs assess their needs, initiate strategic planning, improve programs, evaluate performance and sustain their programs. *The Learning Academy* meets the wide range of learning needs of the FDC field by offering different levels of "learning communities" that focus on the needs of FDCs at different developmental stages (i.e., planning, early implementation, enhanced and advanced practices, systems change).



### APRIL 2018

Ready-Set-Go! Key Planning Decisions to Help You Successfully Launch Your Family Drug Court

### JUNE 2018

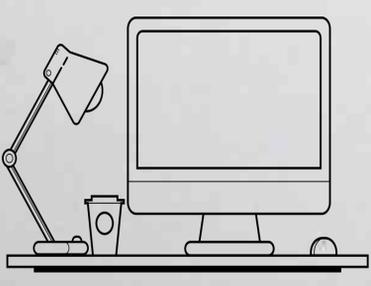
Planning for Safe Care - What Your FDC Needs to Know About Women and Infants Affected by Opioid Use Disorders

### AUGUST 2018

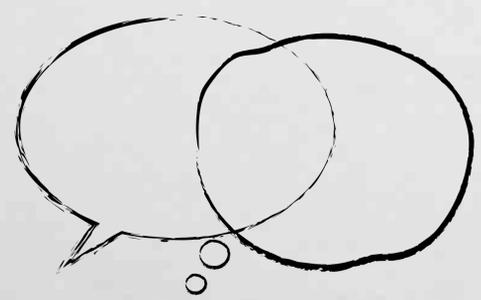
Part of the Problem or Solution? Addressing Racial Disproportionality and Disparities in FDC

### SEPTEMBER 2018

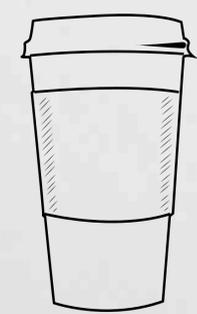
Change vs. Checklist - Rethinking Phases, Recovery, and Readiness in Your FDC



Watch Video Presentation



Team Discussion Guide



Attend Live Café Conversation



Take an Action Step

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

# Family Drug Court *Peer* *Learning Court* Program

New sites recently awarded!

The eight mentor courts, selected through a rigorous application process, have each demonstrated commitment to evidence-supported practices, innovative strategies to improve outcomes for children and families, and a strong foundation of collaboration among the court, child welfare, and substance use treatment agencies. The 2018 Peer Learning Courts will help to advance the family drug court movement by furthering the exchange of learning through peer-to-peer technical assistance. Family drug court professionals and those interested in learning more about the model are encouraged to visit these mentor courts and witness their teams in action.

- Dunklin County Family Treatment Court, Missouri
- Jefferson County Family Integrated Treatment Court, Colorado
- King County Family Treatment Court, Washington
- Miami-Dade County Dependency Drug Court, Florida
- Sacramento County Early Identification Family Drug Court, California
- Tompkins County Family Treatment Court, New York
- Tulsa County Family Drug Court, Oklahoma
- Wapello County Family Treatment Court, Iowa

*"Now  
more  
than  
ever..*

*..with 450 family drug courts across the nation, more jurisdictions moving to a continuum of care for all families affected by substance use disorders, and the upcoming release of the National Family Drug Court Standards means we look to our Peer Learning Courts to share their invaluable experiences overcoming barriers and implementing collaborative solutions. We recognize the importance of peer-to-peer learning and look forward to partnering with these mentor courts to deliver timely and responsive training and technical assistance to the field."*

*Dr. Nancy Young, Executive Director of  
the Center for Children and Family Futures.*

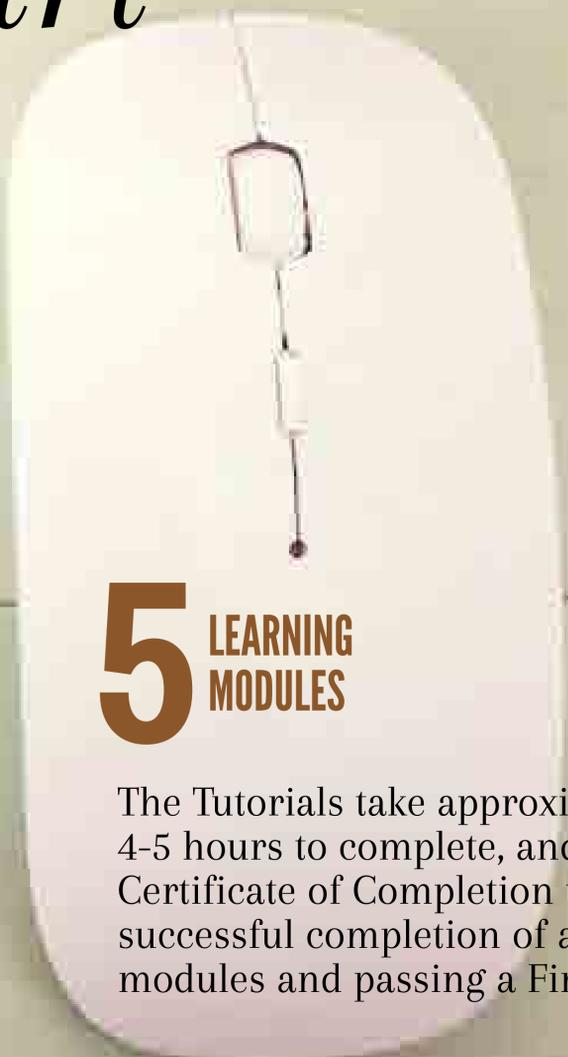
*Visit the  
PLCs @  
Exhibit  
Hall*





# *Family Drug Court Online Tutorials*

In July 2017, the Center for Children and Family Futures launched the *Family Drug Court Tutorial* which provides self-paced learning opportunities for anyone wanting to gain a basic and introductory knowledge of the FDC model and operations. Designed using a web-based platform and using the *FDC Guidelines* as a framework for instruction, the tutorial is divided into five learning modules consisting of updated content, video clips, links to additional training and technical assistance resources, and quiz questions to enhance the learning experience.



## **5** LEARNING MODULES

The Tutorials take approximately 4-5 hours to complete, and offer a Certificate of Completion upon successful completion of all five modules and passing a Final Quiz.

## Learning Modules



Overview of the  
FDC Movement and  
Model



Foundation of  
Shared Mission and  
Values



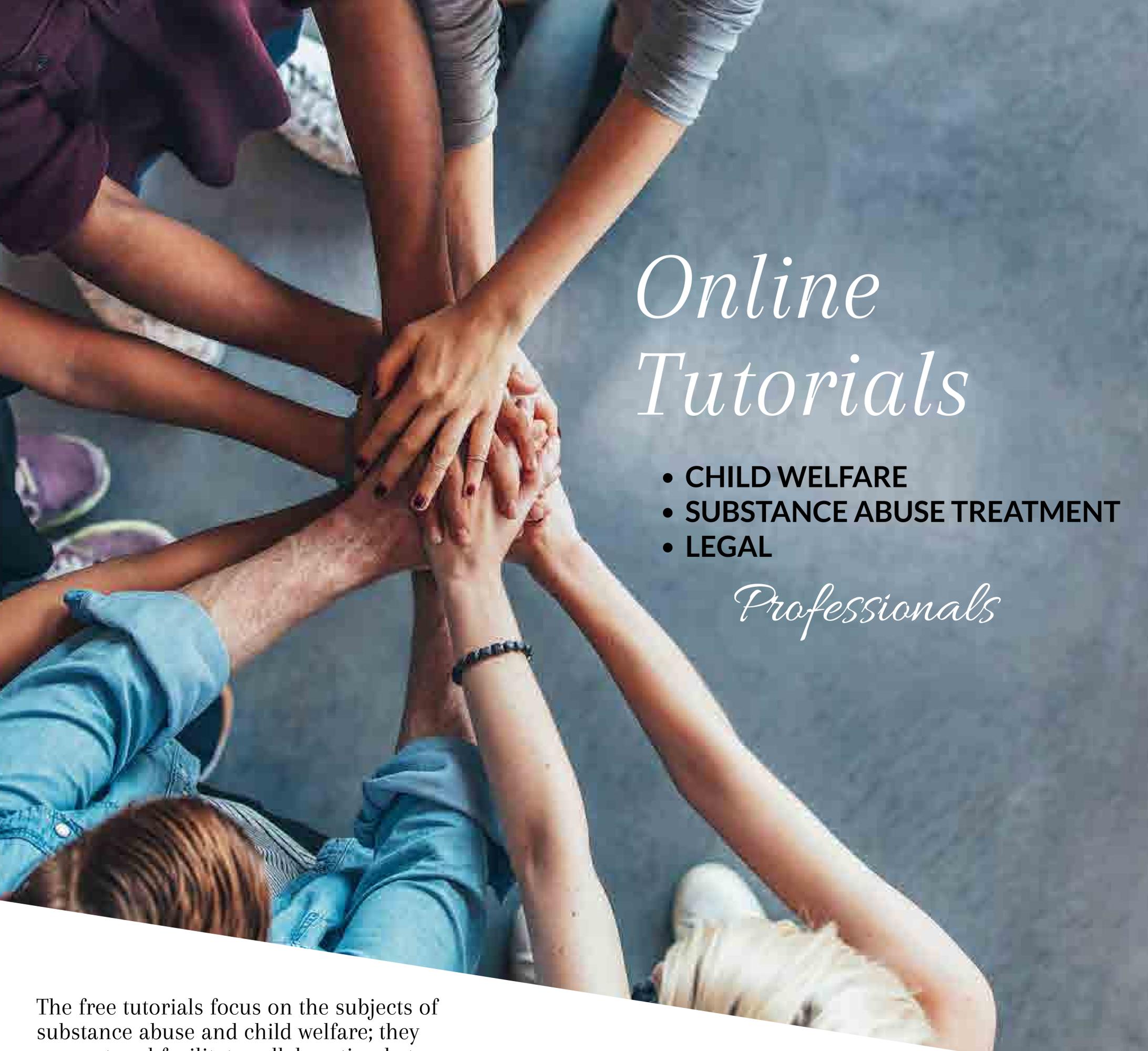
Services to Children  
and Parents



Agency Collaboration  
and Information  
Sharing



Achieve Shared  
Outcomes



# Online Tutorials

- **CHILD WELFARE**
- **SUBSTANCE ABUSE TREATMENT**
- **LEGAL**

*Professionals*

The free tutorials focus on the subjects of substance abuse and child welfare; they support and facilitate collaboration between the child welfare system, the substance abuse treatment system and the courts. Continuing Education Units (CEUs) are available upon successful completion of a tutorial.

Tutorial 1: Understanding Child Welfare and the Dependency Court: A Guide for Substance Abuse Treatment Professionals

Tutorial 2: Understanding Substance Use Disorders, Treatment and Family Recovery: A Guide for Child Welfare Professionals

Tutorial 3: Understanding Substance Use Disorders, Treatment, and Family Recovery: A Guide for Legal Professionals

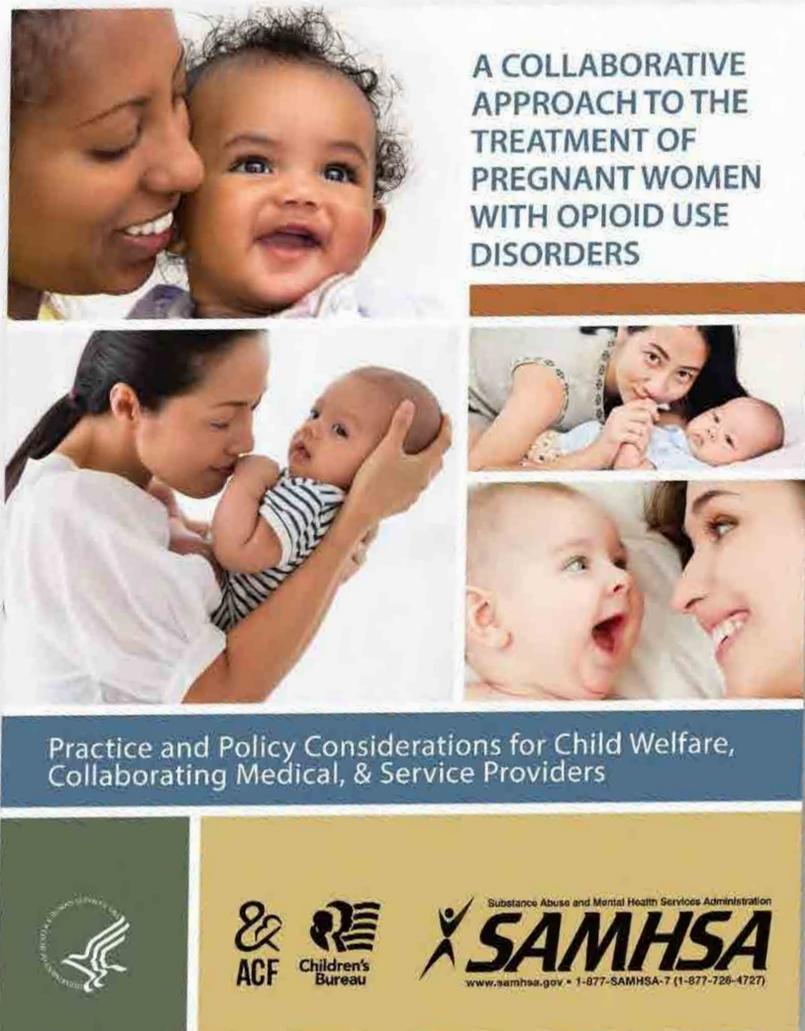


**National Center on  
Substance Abuse  
and Child Welfare**

*NCSACW is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Administration on Children, Youth and Families (ACYF), Children's Bureau.*

| [www.ncsacw.samhsa.gov](http://www.ncsacw.samhsa.gov)

# *A Collaborative Approach to the Treatment of Pregnant Women With Opioid Use Disorders*



This publication provides an overview of the extent of the opioid use by pregnant women and the effects on the infant and highlights recommendations for treatment approaches from leading professional organizations based on evidence-based practices. An in-depth case study is also included so collaborative teams can adopt and adapt key components and lessons in their jurisdiction. The publication also includes a Guide for Collaborative Planning to support teams in their planning and implementation efforts.

Please contact [ncsacw@cffutures.org](mailto:ncsacw@cffutures.org) or visit [www.ncsacw.samhsa.gov](http://www.ncsacw.samhsa.gov) if you have any questions regarding this publication or need additional resources to help you address the opioid crisis in your community.



[www.ncsacw.samhsa.gov](http://www.ncsacw.samhsa.gov)

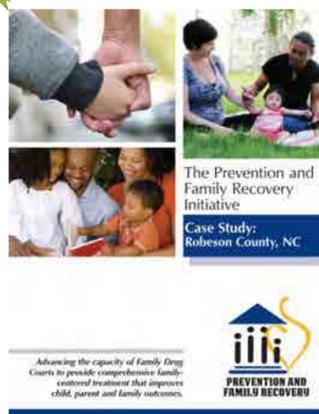
*NCSACW is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Administration on Children, Youth and Families (ACYF), Children's Bureau.*



# Prevention & Family Recovery

The Prevention and Family Recovery (PFR) initiative seeks to advance the capacity of Family Drug Courts (FDCs) and their partner agencies to provide and sustain a comprehensive family-centered approach to improve child, parent and family outcomes.

The Prevention and Family Recovery initiative is generously supported by the Doris Duke Charitable Foundation and The Duke Endowment.



## PFR Grantee Case Studies

- Provides context rich stories and lessons on how each Grantee implemented a family-centered approach in their FDC program
- PFR Grantees Round 1 included: Pima County, AZ; San Francisco, CA; Robeson County, NC; and Tompkins County, NY

## PFR Briefs

- Highlights cross-cutting lessons and experiences of PFR Grantees (Round 1)
- Best practices to help FDCs move from an independent program within the court to an integrated cross-systems collaborative centered on the whole family unit
- Brief 1: Overview of the PFR Initiative
- Brief 2: Key Lessons for Implementing a Family-Centered Approach
- Brief 3: Cross-Systems Collaboration, Governance and Leadership The FDC Trifecta for Systems Change
- Brief 4: Evidence-Based Program Implementation within the FDC Context: Finding the Right Fit
- Brief 5: Building the Performance Monitoring and Evaluation Capacity of Family Drug Court



# Transitioning to a Family-Centered Approach

*Best Practices and Lessons Learned from Three Adult Drug Courts*



**Attend the Session!**

Check-out the  
Concurrent General  
Session (CG-17) on  
Friday June 1st  
1:45 - 3 pm  
at Grand Ballroom A

**TRANSITIONING TO  
A FAMILY CENTERED  
APPROACH:**

Best Practices and Lessons Learned  
from Three Adult Drug Courts



This publication released by Children and Family Futures and the National Drug Court Institute, offers professionals working in adult drug courts key strategies for implementing a family-focused approach, with particular focus on enhanced collaboration, communication, shared knowledge, addressing the needs of families and children, funding, sustainability, and outcomes. This publication highlights three adult drug courts from Florida, Michigan, and Montana and their process of transitioning from a traditional adult drug court to one that has expanded services to families and children.

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# *National Quality Improvement Center for Collaborative Community Court Teams*



*The National Quality Improvement Center for Collaborative Community Court Teams* is funded by the Children's Bureau, Administration on Children, Youth and Families, Administration for Children and Families, U.S. Department of Health and Human Services. The goal of this grant initiative is to improve outcomes for infants and families affected by substance use disorders and prenatal substance exposure.

A total of 15 demonstration sites were selected through a competitive and rigorous application process. With the assistance of dedicated Training and Technical Assistance Change Teams, each of the demonstration sites will design, implement and test new and innovative approaches that meet the requirements of the Comprehensive Addiction and Recovery Act (CARA) amendments to the Child Abuse Prevention and Treatment Act (CAPTA) and that better meet the needs of infants and families. Evaluation findings and lessons from demonstration sites will provide the field and local courts across the country with valuable information on the most effective multi-system strategies and approaches to improve the way in which parents and caregivers and their children are served.

The QIC-CCCT demonstration sites are:

- Oklahoma Department of Mental Health and Substance Abuse Services - Oklahoma County Family Drug Court; Okmulgee County Family Drug Court; Tulsa County Family Drug Court
- Yurok Tribe for Northern California Tribal Court Coalition - Humboldt County - Yurok, Hoopa Valley and Karuk Tribe; Del Norte County - Yurok Tribe
- Alabama Administrative Office of Courts - Jefferson County; Jackson County
- Supreme Court of Ohio - Coshocton County Probate and Juvenile Court; Fairfield County Juvenile and Probate Court; Trumbull County Family Court
- Supreme Court of Georgia, Committee on Justice for Children - Douglas County Juvenile Court
- Family Support Services of North Florida, Inc.
- Arizona Superior Court in Maricopa County, Juvenile Department
- Alaska Court System - Palmer Therapeutic Courts
- Harris County, Texas

Visit | [www.cffutures.org/qic-ccct](http://www.cffutures.org/qic-ccct)



# Center for Children and Family Futures

Strengthening Partnerships, Improving Family Outcomes

*Our Mission - To improve safety, permanency, well-being, and recovery outcomes for children, parents, and families affected by trauma, substance use, and mental health disorders*

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