



Family Drug Court Guidelines Self-Assessment 2017



FDC Name:

City/State:

This FDC Self-Assessment for Practice Improvement was developed from the publication, "*Guidance to States: Recommendations for Developing Family Drug Court Guidelines*"¹, which provides research- and practice-based recommendations to assist jurisdictions in developing or refining their FDC practices.

This self-assessment enables FDC Practitioners to gauge and monitor their own FDC policies, procedures, and operations against these recommendations and strategies. Your site can use the results for action planning and to identify program strengths and opportunities for improvement.

The questions ask about effective strategies in 10 key areas of FDC operations. For each strategy, indicate the degree to which your FDC has implemented the strategy, based on the following scale:

1= Not yet considered

2= Exploration (The FDC has identified the need to implement this guideline and has begun to assess its organizational capacity to do so.)

3= Installation (An individual or team has been assigned to begin the process of implementing this guideline, ensuring that resources for implementation exist, engaging the stakeholders it affects, aligning systems, and identifying and addressing barriers to implementation.)

4= Initial Implementation (The FDC team's behavior and processes have begun to change, new skills may be developing, and new practices are being incorporated into the program's operations.)

5= Full Implementation (The guideline is integrated into the service, organization and system settings. The processes and procedures to meet the guideline recommendations are now in place.)

6= Sustained Practice (This guideline has been institutionalized and is adapted as needed in response to changes among stakeholders, funding streams, and organizational priorities.)

The assessment will take approximately 25-35 minutes to complete. Please answer each question to the best of your ability. We recognize this is a substantial time commitment, but hope that you will consider it an investment to further advance your FDC program.

For technical assistance on the administration of the tool or to download the FDC Guidelines please contact the National Family Drug Court Training and Technical Assistance Program² at fdc@cffutures.org.

¹ Children and Family Futures (2015). *Guidance to States: Recommendations for Developing Family Drug Court Guidelines*. Retrieved from <http://www.cffutures.org/files/publications/FDC-Guidelines.pdf>. This OJJDP sponsored FDC publication is used to create systems change through the policies of the court, child welfare and treatment service systems, as well as the community-based organizations serving parents, children, and families.

² The FDC TTA Program works to increase the effectiveness of FDCs by improving their program protocols and standards, cross-system collaborative relationships, cost-effectiveness, and staff knowledge and training.

RECOMMENDATION 1: CREATE SHARED MISSION AND VISION

FDC partners must have a shared mission and vision that defines how they work together. The discussion of values and agreement on common principles is an essential foundation for FDC collaborative relationships.

RATING

1 = Not Yet Considered | **2 = Exploration** | **3 = Installation**
4 = Initial Implementation | **5 = Full Implementation** | **6 = Sustained Practice**

Criteria	Rating	Notes
1. Judicial leadership effectively drives the collaborative planning, implementation, and operations of the FDC.		
2. The FDC has included the judicial officers, attorneys, child welfare, substance use disorder treatment providers, and other service providers as partners in understanding and establishing core principles, and developing a shared mission and vision.		
3. The FDC revisits its mission, vision and values, as well as policies and procedures, on at least an annual basis.		
4. The FDC team has implemented agreed-upon evidence-informed policies and procedures for its core program operations (e.g., guidelines for responses to client behavior, length of progress review hearing time, discharge requirements).		
5. The FDC has established priority access to substance use disorder treatment for child welfare clients.		
Create Shared Mission and Vision Total:	0	

RECOMMENDATION 2: DEVELOP INTERAGENCY PARTNERSHIPS

Family Drug Courts are structured within the legal framework of the court and child welfare systems and the restorative nature of treatment services. However, they require partnerships with additional agencies to provide a range of services and support for family stability, parents' recovery, and the permanency, safety, and well-being of children and their families. To fully provide these services and supports, FDCs must form relationships with mental health, domestic violence, primary health, child development, and other agencies that result in collaborative practice.

RATING

1 = Not Yet Considered | **2 = Exploration** | **3 = Installation**
4 = Initial Implementation | **5 = Full Implementation** | **6 = Sustained Practice**

Criteria	Rating	Notes
1. The FDC has established a formal collaborative governance structure that includes an Oversight/Executive Committee, a Steering Committee, and a Core Operational Team.		

RECOMMENDATION 2: DEVELOP INTERAGENCY PARTNERSHIPS (Cont'd)

Criteria	Rating	Notes
2. The FDC's governance structure includes representation from all key partners.		
3. The FDC has established collaborative partnerships to ensure that families have access to:		
3a. Clinical services to address mental health and trauma issues		
3b. Domestic violence prevention and intervention services		
3c. Primary healthcare		
3d. Dental care		
3e. Child care		
3f. Transportation		
3g. Specialized health services regarding HIV/AIDS, Hepatitis C, and other diseases frequently transmitted among intravenous drug users		
4. The FDC has a multidisciplinary team that tracks and monitors the number of families that are referred to, initiate, and complete clinical treatment and all support services.		
5. The FDC monitors and responds to identified barriers that hinder families from accessing needed services		
6. The FDC has a service linkage process that includes a "warm hand-off" in which the referring staff member makes an in-person connection with the service provider.		
7. The FDC has substance use disorder support/recovery groups that include a special focus on child welfare and child safety issues		
Develop Interagency Partnerships Total:	0	

RECOMMENDATION 3: CREATE EFFECTIVE COMMUNICATION PROTOCOLS FOR SHARING INFORMATION

Effective, timely, and efficient communication and information sharing dramatically improves individual case monitoring and provides the guideposts that gauge the effectiveness of the FDCs. Shared information is the prerequisite to joint accountability that promotes child safety, parent engagement, and retention in treatment and recovery.

RATING

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Criteria	Rating	Notes
<i>The following questions address protocols for sharing information:</i>		
1. The FDC has an automated data system to effectively track and monitor the progress of parents, children, and families.		

RECOMMENDATION 3: CREATE EFFECTIVE COMMUNICATION PROTOCOLS FOR SHARING INFORMATION (Cont'd)

2. The FDC team has established protocols with collaborative partners for sharing clinical and case information about parents, children, and families in treatment.		
3. The FDC team's information-sharing protocols follow the confidentiality provisions of child welfare, substance use disorder treatment, and the dependency court.		
4. Child welfare, dependency court, and substance use disorder treatment partners have formal working agreements/memorandas of understanding that outline the type and level of participant information they can ethically and legally communicate.		
5. The FDC shares participant information with its partners in a timely manner to effectively monitor progress and respond to behavior.		
6. The FDC team has established pre-court staffing meetings to discuss current information critical to the family's progress and case		
7. FDC team members include the:		
7a. Judge		
7b. FDC Coordinator		
7c. Case manager(s)		
7d. Parent's counsel		
7e. Guardian ad Litem or children's counsel		
7f. Prosecuting/agency attorney		
7g. Substance Use Disorder Treatment Staff		
7h. Child welfare case worker(s)		
7i. Other key service providers		
8. Between scheduled staffing meetings, the FDC team uses email to communicate case information to each other, as appropriate.		
Create Effective Communication Protocols for Information Sharing Total:	0	

RECOMMENDATION 4: ENSURE INTERDISCIPLINARY KNOWLEDGE

Ongoing cross-training of FDC team members and stakeholders at all levels is essential to ensuring collaboration and consistent, effective practice.

RATING

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Criteria	Rating	Notes
1. The FDC has established meaningful orientation and assimilation of new team members.		

RECOMMENDATION 4: ENSURE INTERDISCIPLINARY KNOWLEDGE (Cont'd)

Criteria	Rating	Notes
All FDC team members receive training and education about working with 2. families in the child welfare system that are affected by substance use disorders.		
3. The training provided for FDC team members addresses:		
3a. Gender-specific, culturally-appropriate, and trauma-informed treatment		
3b. The dynamics of addiction and recovery		
3c. Evidence-based treatment approaches, including medication assisted treatment		
4. The FDC has a staff development plan that includes ongoing, joint training programs for substance use disorder treatment, child welfare, court staff, and other service providers to learn about each other's responsibilities, legal mandates, constraints, and goals.		
5. The judge pursues training opportunities (for himself/herself as well as the FDC team) on evidence-based practices in substance use disorder and mental health treatment.		
Ensure Interdisciplinary Knowledge Total:	0	

RECOMMENDATION 5: DEVELOP A PROCESS FOR EARLY IDENTIFICATION AND ASSESSMENT

FDCs identify participants early in the child welfare case. FDCs use screening and assessment to determine the needs and strengths of the parent, the child, and the family, and to determine the most appropriate treatment and services.

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Criteria	Rating	Notes
1. The FDC has implemented a joint policy between substance use disorder treatment, child welfare, and the dependency court on timely, standardized screening and assessment of substance use disorders for families in child welfare.		
2. The FDC team has implemented standardized legal and clinical eligibility criteria and reviews it at least annually.		
3. The FDC team ensures that their eligibility criteria considers all potential families that could benefit from the program.		
4. The FDC uses assessment results to create coordinated substance use disorder treatment and child welfare case plans that are reinforced through court order.		

RECOMMENDATION 5: DEVELOP A PROCESS FOR EARLY IDENTIFICATION AND ASSESSMENT (Cont'd)

Criteria	Rating	Notes
5. The FDC team uses screening and assessment information to ensure parents have timely access to appropriate treatment and other services.		
6. The FDC screens and assesses participants when indicated for trauma, mental health issues, and family history (e.g., parents, siblings, grandparents) of substance use and mental health disorders.		
Develop a Process for Early Identification and Assessment Total:	0	

RECOMMENDATION 6: ADDRESS THE NEEDS OF PARENTS

FDC partner agencies encourage parents in the recovery process and assist them in meeting treatment goals and requirements of child welfare and the court. Judges respond in a way that supports continued engagement in recovery. Working toward permanency and using active client engagement, accountability and behavior change strategies, the entire team makes sure the parent has access to a broad scope of services.

RATING

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Criteria	Rating	Notes
1. The FDC provides an array of substance use disorder treatment and other services that match families' identified needs.		
2. Service providers use practices and curricula that are gender-specific and culturally-relevant, and have been developed and tested with the specific population(s) being served.		
3. The FDC case plans integrate the substance use recovery plan, child welfare case plan, and other family services plans.		
4. Substance use disorder treatment clinicians carry caseloads of no more than 50:1 if providing clinical case management, 40:1 if providing individual therapy or counseling, and 30:1 if providing both services.		
5. The FDC provides trauma-informed care and uses trauma-responsive practices.		
6. The FDC provides participants with an evidenced-based parenting program that is specifically designed for families affected by substance use disorders.		
7. The FDC participants have access to medication assisted treatment for substance use and mental health disorders.		
8. The FDC uses a phase system with behavioral benchmarks and targeted behaviors that define progress.		
9. The FDC has a participant handbook that outlines expectations for program participation.		

RECOMMENDATION 6: ADDRESS THE NEEDS OF PARENTS (Cont'd)

Criteria	Rating	Notes
10. The FDC applies motivational strategies to promote behavior change, early engagement and retention in the FDC, substance use disorder treatment, and other services.		
11. The FDC systematically responds to participant behavior using contingency management principles.		
12. The FDC uses drug testing effectively (twice weekly, randomized, and observed) to monitor participants' compliance with their treatment plan.		
13. The judge determines responses to participant behavior after input from the team.		
14. The judge spends a minimum of three minutes with each participant.		
15. The judge clearly explains to parents the reasoning behind all responses to behavior that conveys a principle of fairness.		
16. The FDC conducts outreach to participants who do not keep their initial substance use disorder treatment appointment or who drop out of treatment.		
17. The FDC uses recovery coaches or substance use disorder specialists.		
18. The FDC responds to client relapse and other risk indicators by reassessing clinical needs and child safety, and by re-engaging the participant in treatment.		
19. The FDC has established priority access to substance use disorder treatment for child welfare clients.		
Address the Needs of Parents Total:	0	

RECOMMENDATION 7: ADDRESS THE NEEDS OF CHILDREN

The physical, developmental, social, emotional, and cognitive needs of children in the FDC setting must be addressed through prevention, intervention, and treatment programs. A holistic and trauma-informed perspective must be in place to ensure children receive effective, coordinated, and appropriate services.

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Criteria	Rating	Notes
1. Children of parents in the FDC receive a comprehensive health and psychosocial assessment to identify the effects of prenatal substance exposure, child maltreatment, trauma, and other issues related to their parent's substance use disorder.		

RECOMMENDATION 7: ADDRESS THE NEEDS OF CHILDREN (Cont'd)

Criteria	Rating	Notes
2. The FDC has developed linkages to quality early childhood development programs that can meet the special developmental and educational needs of children of parents in the FDC.		
3. The FDC follows the rules of the Indian Child Welfare Act (ICWA) to protect the rights of Indian children.		
4. The FDC has an established protocol with healthcare professionals that prioritizes and addresses the needs of participants who are pregnant and using substances.		
5. The FDC has implemented evidence-informed or evidence-based substance use disorder prevention and early intervention services for the children of parents in the FDC.		
6. The FDC ensures the necessary frequency and quality of visits to establish and maintain parent-child relationships, while assuring the child's safety.		
7. The FDC has established linkages to residential substance use disorder treatment that allows children to be placed with parents.		
8. FDCs have access to a continuum of services (within or outside the FDC) designed to meet the specialized needs of most children of participants.		
Address the Needs of Children Total :	0	

RECOMMENDATION 8: GARNER COMMUNITY SUPPORT

FDCs connect with community-based organizations to support the multiple needs of parents, children, and families during program participation and to provide ongoing support for continued success after formal FDC services have ended. One of the most important components of an effective FDC is early engagement of stakeholders, which should include advocacy for sustaining the FDC.

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Criteria	Rating	Notes
1. The FDC has completed an assessment of participants' needs.		
2. The FDC has completed an inventory of existing community services to identify available resources as well as service gaps for FDC participants.		
3. The FDC has established formal partnerships with community partners such as:		
3a. Employment and/or educational services		
3b. Housing		
3c. Financial coaching services		
3d. Faith-based recovery support		

RECOMMENDATION 8: GARNER COMMUNITY SUPPORT (Cont'd)

Criteria	Rating	Notes
Individuals with lived experience, (e.g., parents in recovery, program graduates, former foster children/youth, etc.) play an active advisory role to the FDC.		
The FDC links parents to a full array of available family income support programs (e.g., Earned Income Tax Credit, State Children’s Health Insurance Program, Supplemental Nutrition Assistance Program, child support, housing subsidies).		
All FDC team members participate in planning and implementing outreach and education throughout the year to community groups and other stakeholders to engage, inform, and support sustainability.		
Garner Community Support Total:	0	

RECOMMENDATION 9: IMPLEMENT FUNDING AND SUSTAINING STRATEGIES

The FDC must access the full range of funding, staffing, and community resources to develop long-term stability for its innovative approaches. The FDC must continually evaluate its outcomes and effectiveness and modify the program accordingly to assure its continued success. The FDC needs a governance structure that assures ongoing commitment by policy makers, management, community partners, and operational staff.

RATING

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Criteria	Rating	Notes
The FDC has a sustainability plan for funding substance use disorder treatment for parents in the FDC that leverages sources such as Medicaid, Substance Abuse Prevention and Treatment Block Grant, child welfare funding streams, or other community resources.		
The FDC has a sustainability plan for funding its core operations and infrastructure (e.g., coordinator, dedicated case managers) that includes support from child welfare, the court, and other community partners.		
The FDC core partners (child welfare system, substance use disorder treatment agencies, and dependency courts) share information about each other’s budgets and staffing to support the partnership and services to families.		
The FDC and its partners jointly apply for and manage external funding (e.g., grant funding, local levies).		
Implement Funding and Sustaining Strategies Total:	0	

RECOMMENDATION 10: EVALUATE FOR SHARED OUTCOMES

The FDC team must demonstrate that the FDC has achieved desired results across partner agencies. To do so, FDC partners must agree upon goals and establish performance measures for joint accountability. FDCs must develop and measure outcomes and use evaluation results to guide the work of the collaborative.

RATING

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Criteria	Rating	Notes
1. The FDC's child welfare partner can document the percentage of cases in which parental substance use is an identified problem.		
2. The FDC collects and uses referral and admission data to monitor if families who are referred participate in the program.		
3. The FDC works with child welfare partners to assure all eligible families are referred.		
4. The FDC has a system to monitor client engagement and retention and uses these benchmarks to modify program processes, requirements, and services.		
5. The FDC has identified and monitors shared outcomes (e.g., family well-being, sustained parent recovery, timely reunification) with the court, child welfare, and substance use disorder treatment partners.		
6. The FDC uses outcome data that monitors provider effectiveness to assure that providers are effective in engaging and retaining FDC participants.		
7. The FDC uses process and outcomes data to regularly review progress and make program, practice, and policy modifications as needed.		
8. The FDC uses comparison group data to enhance the credibility of its evaluation results.		
9. The FDC communicates outcomes to policy makers and community leaders as part of the FDC's sustainability plan.		
Evaluate for Shared Outcomes Total:	0	

ADDITIONAL COMMENTS

Please include any general comments or context, as needed, about your responses:

If desired, please provide any feedback on the use of this online self-assessment tool so that we may improve our efforts:

Thank you for investing your time to further the important and valuable work of your FDC! We look forward to sharing the results with your team.