Prevention and Family Recovery

Advancing the Capacity of Family Drug Courts to Provide a Comprehensive Family-Centered Approach to Improve Child, Parent and Family Outcomes

PREVENTION AND FAMILY RECOVERY

Brief 3: Cross-Systems Collaboration, Governance and Leadership – The FDC Trifecta for Systems Change

July 2017

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

Introduction

The Prevention and Family Recovery (PFR) initiative strives to build the capacity of Family Drug Courts (FDCs) and their partner agencies to provide a comprehensive family-centered approach—grounded in cross-systems collaboration and evidence-based practices—to improve parent, child and family well-being.

The collective journeys of the first four PFR grantees (April 2014 – May 2017) provide valuable insights about the practice and policy changes needed for an FDC to shift from being an independent, adult-focused program within the court to an integrated cross-systems collaborative centered on the whole family.

First Round of PFR Grantees

- Pima County Family Drug Court, Tucson, AZ
- Robeson County Family Treatment Court, Lumberton, NC
- San Francisco Family Treatment Court, San Francisco, CA
- Tompkins County Family Treatment Court, Ithaca, NY

See PFR Brief 1 for an overview of PFR, the four grantees and the families that they served.

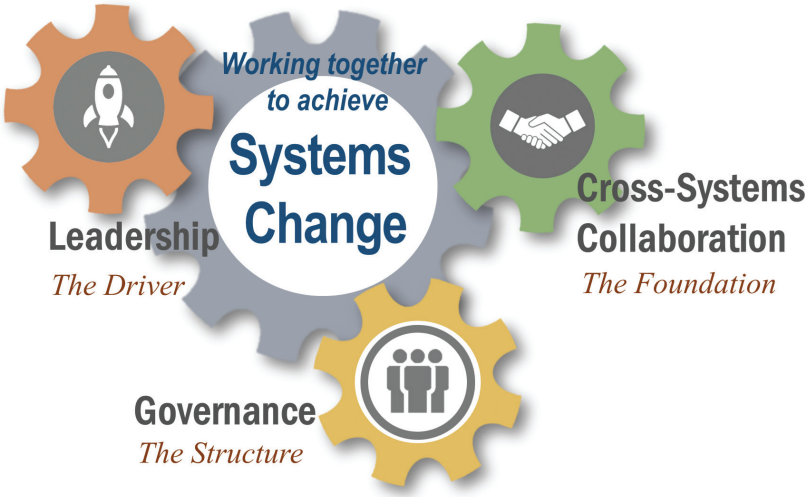
About This Brief

PFR Brief 2 highlighted nine key lessons for implementing a family-centered approach within the FDC context. This third brief in the PFR series expands on three closely linked features—cross-systems collaboration, governance and leadership—which make up the trifecta that embodies all the other PFR lessons. In short, collaboration, governance and leadership are the bedrock of effective:

- Basic FDC operations and core practices
- Evidence-based service implementation, integration and sustainability
- Performance monitoring and data-driven decision making for continuous program improvement
- Systems changes that improve outcomes for all families affected by parental substance use disorders and child maltreatment

Together, cross-systems collaboration, governance and leadership form a broader foundation for collaborative endeavors in child and family services. This foundation is not linear or static. It is continually evolving, changing and adapting. The three pieces are interdependent, with each playing a critical role in the foundation's overall balance.

The overarching message from the first round of PFR is that FDCs must develop and strengthen their capacity in all three of these areas to achieve sustained systems changes that improve outcomes for all children and families affected by parental substance use disorders.



The Trifecta Defined

- **Collaboration** at its most advanced levels moves beyond simple networking and information exchange to partners working together to ultimately change the systems that serve children and families. Effective cross-systems collaboration is built on a shared vision and mission that recognizes a single agency, on its own, cannot achieve improved outcomes of child, parent and family well-being. It also acknowledges that leveraging shared resources leads to better results for families. Successful, sustained collaboration is dependent on a formal governance structure and driven by strong leadership that influences positive collaborative processes and outcomes.
- **Governance** provides the established structure that keeps the collaborative operating efficiently and effectively, and enables leadership to achieve true systems change. A formal governance structure is based on agreed-upon processes, protocols, roles and responsibilities that ensure consensus-based decision making and effective information sharing across systems. It provides a venue for productive collaboration, shared leadership and relationships built on trust and commitment.
- **Leadership** is both the driver and the glue that builds the collaborative relationships which produce the resources needed to achieve desired outcomes for families. Effective leaders maintain collaborative governance structures, respond proactively to change and ensure continued buy-in from partners. They keep the initiative focused on its shared mission and vision by emphasizing its results for parents, children and families. Without leadership, collaboration may dwindle to an isolated project-based approach that ignores the potential for larger systems change.

Each piece of the trifecta is discussed below, recapping and building on selected highlights captured in PFR Brief 2.

Cross-Systems Collaboration

As highlighted in PFR Brief 2, ***an increased, renewed and continued focus on cross-systems collaborative partnerships is needed to expand and sustain the FDC***. This is the first key lesson to successfully implementing a comprehensive family-centered approach for families affected by parental substance use disorders. With the PFR grantees, existing collaborative relationships were strengthened and new partnerships were formed.

All four grantees had strong, established collaborative FDC teams in place when PFR began in 2014. In fact, many of the team members helped found or implement their FDCs, which had been in operation ranging from 6 to 13 years at the time of PFR. (See Brief 1 for an overview of the four grantees.) This consistency and cross-systems institutional knowledge provided a strong foundation for the grantee teams to undertake the PFR initiative.

Expanding Collaborative Relationships

Grantees quickly learned that to successfully integrate evidence-based parenting and children's services into the FDC and move to comprehensive family-centered care, they had to strengthen existing relationships between the core systems (e.g., child welfare, substance use disorder treatment and family courts) and cultivate new partnerships with other diverse community agencies and providers.

All of the grantees' collaborative teams grew and evolved during the three-year PFR grant period, as they formalized new partnerships, particularly with parenting and children's services providers and public health systems. Many of these new partners provided co-located or dedicated front-line staff that served families in the FDC or they assigned liaisons to the FDC team to help increase communication. These individuals, who are now core members of the team and regularly attend case staffings and court hearings, strengthened the overall collaborative capacity of the grantees.

> ***"It's not just saying, 'I'll provide this service.' It's bigger than that. It's recognizing goals, setting goals, and—as a group—deciding how we're going to meet those goals…. If we work together, we're in a much better position and can often save duplication and unnecessary expenses."***
>
> – PFR Family Drug Court Judge

Building Collaborative Capacity – Examples from the PFR Grantees

The grantees' PFR journeys made clear the vital and valuable role that new community partners can play in building the capacity of FDCs to address service gaps and provide comprehensive family-centered care. For example:

- The Robeson County FDC worked closely with the Health Department to build a sense of shared mission. The team emphasized why integrating the department's existing Parents as Teachers program would be important for families in the FDC and fill a critical service gap for children 0 to 5 years old. The Parent as Teachers clinician now attends FDC staffings and court sessions to provide progress updates on participating children and families.

- The Pima County FDC tapped the expertise of a well-established community children's mental health provider to implement and monitor Child-Parent Psychotherapy for all FDC families. The provider's Director of Clinical Services joined the Steering Committee and a clinical liaison attends FDC staffings to provide updates on the families they are serving. The liaison also consults on other dependency cases, as needed.

- In San Francisco, the FDC leveraged child welfare's existing relationship with the Public Health Nurses (PHN) to obtain a dedicated PHN to provide SafeCare parent training to FDC families with children ages 0 to 5. The FDC PHN attends pre-court case conferencing and status hearings to provide information about the children and the family's overall functioning.

- Tompkins County FDC leadership forged a relationship with the Mental Health Department to increase the team's understanding of parents with co-occurring mental health disorders. A mental health liaison joined the FDC team and attends pre-court staffings to help address the mental health needs of participants and increase access to services. The liaison is a certified trainer in Motivational Interviewing and also provides ongoing training, feedback and coaching to team members to strengthen the FDC's capacity in this evidence-based engagement approach.

Clarifying Roles and Responsibilities

With a growing broad-based collaborative and many key players, all staff and partners needed to clearly understand their respective roles and responsibilities—within and outside the FDC—to operate effectively as a team. Roles and responsibilities may change as the FDC expands its scope of services, increases its scale to serve more families and infuses effective practices into the larger system of care for all families affected by substance use disorders and child maltreatment.

For the PFR grantees, such clarity became even more important when new members, such as partner agency liaisons, joined the FDC core team. As discussed on page 7, a formal collaborative governance structure provides a forum for the FDC and its partners to discuss, delineate and revisit roles and responsibilities as needed.

The Critical Role of the FDC Coordinator

The FDC Coordinator plays an essential role in the court's functioning. As one of the PFR grantee Judges noted, "I've known a judge or two that tried to have a drug court without a Coordinator. It's never worked. It's a full time job. It's not something you do two or three hours a day."

Indeed, all the grantees stressed the importance of having a full-time, dedicated Coordinator position in place at the forefront of any large-scale initiative such as PFR. Yet the Coordinator cannot—and should not—do it alone. When it comes to this position, the PFR grantees also advised:

- Establish clear, feasible and agreed-upon roles, responsibilities and expectations for the Coordinator. Ensure the Coordinator is freed up from direct case management duties to focus primarily on major programmatic and systems issues, such as strategic planning, sustainability, community outreach, policy development and regular performance monitoring of priority indicators.

- Map out the demands and tasks associated with the collaborative's desired goals. Figure out the Coordinator's priorities and what can be distributed to other partners. Most importantly, engage team members and partners in the decision making process to clearly convey the valuable and unique role that they each contribute. As the Coordinator in San Francisco reflected, "I needed to give people space to be full partners."

Gaining Partner Buy-In for Systems Change

Just as the FDC Coordinator cannot do it all alone, the FDC cannot carry a large-scale systems change initiative such as PFR on its own. All core systems and community partners must be ready and willing to contribute time and resources to the effort and agree on its importance to improve outcomes for parents, children and families. The full commitment and buy-in of child welfare and the dependency court, including the parent attorneys, is particularly important (as discussed below). Widespread partner buy-in has to come from all levels—from agency directors who make collaboration a priority, to front-line staff, management and supervisors who promote interagency coordination in service delivery and interactions with families.

Collaboration with Child Welfare

Most of the grantees began PFR with the strong and long-standing support of child welfare. They stressed that without child welfare's active involvement, backing and advocacy, "it would be really difficult to make it work." Even with this existing foundation, the FDCs had to collaborate with child welfare to establish or refine communication protocols, reinforce their shared goals and review a common definition of success for families. Grantees' experiences indicate a close partnership with child welfare is important for numerous reasons, including:

- Timely identification and referral of families to the FDC so that families can begin services earlier in their child welfare case
- Development of a coordinated response by the FDC and dependency court to families regarding their permanency plan and progress towards reunification
- Streamlined and integrated service delivery to increase participant engagement, retention and achievement of case plan goals
- Clarity on the FDC's role within the dependency system (particularly important in jurisdictions with parallel courts)
- Promotion of the FDC as the best option for families in the child welfare system who are affected by parental substance use disorders
- Garnering the support of other community stakeholders
- Increasing the scale of the FDC, as it proves better results, to reach more families

> ***"I think there are a lot of consequences of substantial [FDC] growth sustained over time. We were lucky because the [county child welfare commissioner's] commitment to the program has meant that she has been able to allocate additional resources from the department…. We all see the urgency of the work and the importance of the work so, we've never talked about a cap [on FDC capacity]."***
>
> – PFR Family Drug Court Judge

Collaboration with Community Substance Use Treatment Providers

Depending on the size of the FDC's jurisdiction and the structure of their substance use and mental health treatment systems, an FDC may work with as few as one or two preferred providers or as many as a dozen different community substance use treatment agencies. When PFR began, most of the grantees' relationships with community treatment providers were "shallow." The providers were not routinely engaged or actively involved in the FDC.

During the course of PFR, the FDC teams, including child welfare, acknowledged the need to better understand what treatment services are provided and how effective that treatment is for families in the FDC. Through ongoing facilitated discussions with treatment providers, the FDC teams were able to create a shared vision for families, communicate the value of treatment information in FDC decision making and clarify treatment's critical role within the collaborative. As one PFR grantee team member stated, "We can't succeed without them. We've become much more aware that we need to be able to convey that and a corresponding sense of urgency to our providers, too."

Ongoing Nurturing of the Collaborative

Collaborative capacity may ebb and flow as partners strive to overcome barriers they have encountered. With both existing and new relationships, PFR grantees found they needed to continually nurture their partnerships to maintain and sustain them—particularly as they sought to increase FDC capacity to serve more families. Grantees found it was important to consistently engage partners and reconfirm commitments as partners faced competing priorities for their time and attention.

For example, even though the Tompkins County FDC had been in existence for nearly 15 years, the team hit a roadblock. A growing caseload and continued staff turnover placed increased demands on their time. Partners were no longer discussing practice improvements and reviewing FDC operations. Instead, they were managing crises related to child safety, housing and substance use treatment. With the help of an outside facilitator, the partnership was able to revisit roles, responsibilities, mission and vision so that partners once again felt they were working towards an explicit and common goal.

Looking Forward – Addressing the Issue of Cost

The complex and advanced collaboration needed to produce real systems changes for vulnerable children and families demands greater time, commitment, effort and resources. Inevitably, collaborative partners will have to grapple with the substantial costs associated with a full-scale comprehensive family-centered approach that includes more intensive interventions, fully integrated and coordinated service delivery and extensive cross-systems collaboration. The PFR grantees came to recognize that moving forward, they will need to address this issue and that cost needs to be factored into any sustainable systems reform effort. This new way of doing business requires collaborative leadership to accurately document the costs and broader system-level benefits associated with such an approach.

Opportunities for Assessing and Strengthening Collaborative Capacity

- Examine **mission and values** – *Where is there agreement and divergence?*
- Conduct **systems walk-throughs** – *How, and how efficiently, do families move through the different systems?*
- Conduct a **drop-off analysis and case review** – *Where do families disengage or encounter barriers to service linkages and how does the collaborative respond?*
- Develop a **data profile** with baselines and targets – *How is the collaborative doing in improving results for children and families, and compared to what?*
- Obtain feedback from **front-line staff and providers** – *What is really happening at the direct service level? What barriers do staff identify to service access and engagement?*
- Obtain feedback from **clients** – *What is their experience with effective and coordinated service delivery? What needs are not being met?*
- **Assess cross-training needs** – *Where are there knowledge gaps among team members in understanding the needs of families, best practices, each other's systems and FDC operations?*
- Engage in **resource mapping** – *What does the existing community service landscape look like and to what extent is the collaborative leveraging all available resources?*
- Undertake **relationship mapping** – *What collaborative relationships exist within and between partners and agencies and how can the team build on them?*

Governance

As lesson three in PFR Brief 2 underscored, a formal governance structure is necessary to prioritize, oversee and sustain the FDC. Such a structure promotes accountability, collaborative decision making about program and policy decisions, and increased information sharing and communication. It enables collaborative partners to identify and manage emerging issues, maintain focus on the mission and vision and sustain the FDC over time. Further, a formal governance structure elevates needed discussions about the FDC's outcomes and effectiveness.

Overall, a governance structure is essential as FDCs expand their services and partnerships and strive to create larger cross-systems change. It serves as an important mechanism to integrate proven FDC practices into the larger court and child welfare systems.

The Three-Tiered Governance Structure

An established, three-tiered governance structure (as shown below) is required for a collaborative program like an FDC to run smoothly. The mission, role and primary functions of each level and how they interact should be well-defined, as each level involves specific people for specific purposes. Yet, a common thread across levels is cross-systems representation from all key partners. At the oversight and steering committee levels, representation must include executive-level individuals with decision-making authority. At the FDC team level, it must include representation from substance use treatment and other community services providers to effectively integrate all services into FDC operations.

Establishing and maintaining a formal governance structure may take time and effort. However, the investment in effective collaboration can save considerable time and energy in downstream implementation.

Information Flow

Levels of Governance	Membership	Meeting Frequency	Primary Functions
Oversight/ Executive Committee	Director Level	Quarterly	Ensure long-term sustainability and final approval of practice and policy changes
Steering Committee	Management Level	Monthly/Bi-weekly	Remove barriers to ensure program success and achieve project's goals
FDC Team	Front-line Staff	Weekly/Bi-weekly	Staff cases and ensure families' success

Subcommittees/Working Groups – to address specific issues (e.g., data, recruitment)

Standing Agenda Items for Steering Committee Meetings

During their regular monthly (or biweekly) meetings, Steering Committee members should be sure to discuss five standing items:

- **Data dashboard** – Review of three to five critical data points that provide the leadership, team and key partners with current information to monitor progress on agreed-upon outcomes and identify needed program improvements. Ideally, performance is compared to the larger system or business as usual (e.g., reunification and foster care re-entry rates for all child welfare cases in the county compared to families in the FDC).

- **Systems barriers** – Discussion of pressing policy, resource and systems barriers (e.g., lack of housing, transportation or specialized treatment for parents with children) identified by the operational team and strategies to overcome them. Strategies should leverage the strengths and resources of all members.

- **Funding and sustainability** – Development of a long-term sustainability plan and review of up-to-date inventory of federal, tribal, state and local funding streams that currently fund the FDC or can be leveraged to support and sustain the collaborative's operations and goals. Members should regularly review and engage in shared decision making on resource allocations.

- **Staff training and knowledge development** – Discussion of strategies to establish an environment of continuous learning and development and ensure interdisciplinary knowledge. The staff development plan should specify protocols for new team member orientation; identify training opportunities, gaps and needs; outline expertise to be shared with the entire operational team; and cultivate leadership among the team.

- **Outreach efforts** – Strategic planning about opportunities to educate and engage others about the needs of families in the FDC and the larger dependency system, FDC best practices and FDC outcomes. Outreach should encompass diverse audiences, including key FDC stakeholder groups (child welfare, attorneys and treatment providers), policy makers and funders, community development and service organizations (e.g., Rotary Club) and faith-based organizations. Widespread outreach creates a receptive environment for parents going through the FDC and enhances the community's understanding of substance use disorders.

Lessons from the PFR Grantees

At the time of PFR, all four grantees had some but not all aspects of a governance structure in place, and to varying degrees of formalization. During PFR, all sites worked to strengthen this core collaborative practice area.

In some cases, grantees needed to restore or develop the governance structure. For example, San Francisco's Advisory Committee that developed the FDC in 2007 had disbanded. The team realized that to achieve their desired programmatic and systems improvements, they would need to address this governance gap—and they did. Both Pima County and Tompkins County established subcommittees to address specific challenges (e.g., data collection and tracking, FDC recruitment and need for increased visitation).

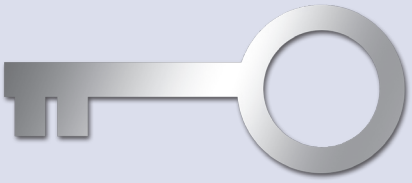
In other instances, grantees had to rethink the structures they had in place. Robeson County's existing Oversight Committee was driven primarily by state-level representation and served an advisory role, only as needed. The FDC team realized that to expand their scope of services, tackle systems change and ensure sustainability, they needed to assume greater local-level leadership and governance.

> ***"We're recommitting to the [governance] structure because we realized when we do utilize our structure, we do have better communication. We are clearer about what we're trying to achieve and we're also able to work together to break down the barriers that exist across systems."***
>
> – San Francisco County Child Welfare Director

Building Collaborative Governance Capacity through Enhanced FDC Case Staffings

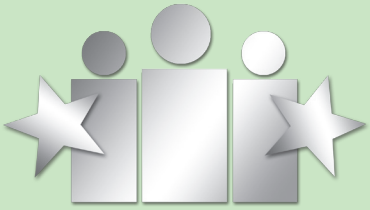
With the inclusion of more and new partners to the FDC core teams, the PFR grantees found they needed to restructure their FDC case staffings to more effectively collaborate and share information across systems. They expanded staffings to include more service providers, reframed discussions to focus on the family's behavioral changes (rather than only treatment attendance) and reviewed progress of all cases, not just those in non-compliance. Grantees noted that changing long-standing, ingrained staffing structures was difficult. Yet, the positive results were worth it.

Enhanced FDC Case Staffings



What Makes Them Work

- **Clearly structured staffings** that include standardized communication and information sharing protocols
- **Staff and partners** who are prepared to share the right kind of information and display mutual respect, interaction and communication
- **Case discussions and court reports** that begin with information about the children and incorporate adequate parent and child information to set a family-focused tone
- **Ample time** to staff cases, which likely entails holding staffings on a different day than court



What Resulted

- A more **family-centered** approach that addresses the needs and progress of children, parents and the whole family
- Improved **communication** and ability to review cases in a timely manner
- More **focused and productive** discussions in both process and content
- Establishment of a venue for **meaningful partner input** where all voices are heard
- Sense of **shared ownership** among partners
- Quicker **resolution of barriers** and ongoing program and service delivery improvement
- More appropriate **matching of services** to families' needs
- More **informed decision making** about a family's readiness for reunification

Summary Snapshot: Critical Components for Effective Collaboration and Governance

The first two components of the trifecta—collaboration and governance—clearly go hand-in-hand. Their effectiveness is characterized by a number of shared critical components.

Shared Mission, Vision and Priorities

- Shared mission, vision and goals and a common definition of participant success
- A primary focus on outcomes and results, rather than inputs such as numbers served
- Recognized value of a collaborative approach in achieving individual agency as well as shared cross-systems goals
- Prioritizing collaboration as a means to better serve families
- Prioritizing the needs of families over the interests of individual agencies, organizations or systems

Human Capital

- Trusting relationships
- Judicial and other agency leadership
- Buy-in at all staff levels and across all partner agencies
- Shared decision making that involves all partners and is not driven primarily by FDC staff
- Understanding of each partner's operations, needs, values and competing demands

Structure, Protocols and Processes

- Clear roles and responsibilities for all partners—individual team members as well as the agencies they represent
- Cross-systems training on best practices and proven interventions to improve parent, child and family outcomes
- Standardized screening, assessment, referral and follow-up processes to ensure timely identification of needs and initiation of essential services
- Consistent protocols and processes for interagency communication, adequate information sharing and coordinated case management
- Ability to track and monitor parents, children and families together in a single, relational database
- Regular, ongoing meetings to identify and manage emerging issues and review outcomes data

Leadership

In conjunction with cross-systems collaboration and governance, strong, consistent and broad-based leadership is needed to fully realize PFR's goal of large-scale systems change. For the PFR initiative, effective leadership within the FDC context was needed to:

- Forge new collaborative relationships
- Respond to the full array of families' service needs
- Implement and sustain evidence-based practices with fidelity
- Move partners and systems towards a true family-centered approach
- Promote data-driven decision making
- Achieve systems change and shared accountability for outcomes
- Increase scale and capacity to reach more families and infuse FDC best practices into other systems
- Negotiate new resources based on results to ensure sustainability

The Power and Influence of Judicial Leadership

Judges play a central and indispensable leadership role by sheer virtue of their position in an FDC. In two of the sites, the Judges had been involved in the original development and implementation of their FDCs and were leading advocates of FDCs at the state and local levels. The other two Judges, though newer to the FDC arena, exhibited strong local leadership and played a pivotal role in championing and advancing their PFR initiatives.

> ***"This whole work has changed my view of what a Judge can be, and the change you can effect on the system by behaving in different ways than Judges are accustomed to behave…. It really makes you rethink your role as a leader, not just in the court system, but in the community, about being actively engaged, and the possibility of change, making change. That's a pretty encouraging thing."***
>
> – PFR Family Drug Court Judge

Judicial leadership in the PFR sites resulted in, for example:

- **Funding to maintain a full-time FDC Coordinator.** In Tompkins County, the Judge was able to restore the Coordinator position to full time after it was cut to 20 percent in the first year of PFR and adversely affected FDC operations. In Robeson County, the Judge used FDC cost savings data to garner county funding and support for the Coordinator position.

- **The development of a trauma-informed framework in working with participants.** In Tompkins County, the Judge prompted extensive trauma training and coaching for the FDC team. He and the team now use solution-focused reflective questions in court sessions and have incorporated these practices into new FDC phasing structures. At the Judge's request, continued training is scheduled to include a specialized session for judges, including those from the Misdemeanor and Felony Drug Courts, to further expand trauma-informed care in the courts.

- **Greater input in the dependency case.** In Pima County, the dependency judges granted the FDC Judge discretion to close the child welfare case at the time of FDC graduation. In San Francisco, the FDC Judge received discretion to increase visitation.

Looking Beyond the Judge – The Need for Broad-Based Leadership

Judicial leadership is necessary, but it is not sufficient. Judges typically have very limited time to juggle operational oversight with external negotiations for resources, while monitoring results. Further, judges may rotate, transition or retire, which means that other leaders are needed to champion the court's model to ensure continued adequate personnel and funding.

These individuals may be other formal leaders at the operational or policy level, such as agency directors, unit supervisors or FDC coordinators. For example, the PFR Project Directors in Pima and Tompkins counties were both in high-level positions: one as Division Director of Children and Family Services for the Juvenile Court and the other as the Commissioner of the Department of Social Services. In their positions, they played a larger leadership role focused on policy and program improvements, stakeholder engagement and building cross-systems relationships.

Leadership may also extend to informal leaders such as case workers, peer mentors and community advocates. Informal leaders play a vital role in keeping the collaborative grounded and centered on meeting the needs of families. They are able to view services and systems from participants' perspectives and incorporate the experiences of families into collaborative discussions.

In the PFR sites, these informal leaders were diverse in their discipline and agency affiliation and included, for example, a parent attorney liaison and public health nurse. In Pima and Tompkins counties, the evaluators played a critical leadership role in building their team's capacity to monitor performance and become a data-driven collaborative (see PFR Brief 5: Building the Evaluation and Performance Monitoring Capacity of FDCs for more information).

Essential Leadership Qualities

Leadership is a complex concept. The PFR Project, overall, seeks to better understand how leadership in well-established FDCs contributes to successful program, practice and policy implementation and improved outcomes for parents, children and families. The discussion that follows highlights selected leadership traits that emerged in working with the four PFR grantee teams over the course of PFR and from a series of 18 interviews with formal and informal leaders in the four sites.

Building Leadership Capacity – Examples from the PFR Grantees

- In Robeson County, the Guardian ad Litem (GAL) District Administrator served as a consistent voice for the child in the context of the parent's recovery and provided the FDC team with knowledge on child development. She educated her GAL colleagues about the FDC's advancements to be more responsive to children's needs and increased the GAL program's understanding and buy-in of the FDC. As the FDC Program Director remarked, "The GAL had a voice on the team, not just a seat at the table."

- In San Francisco, the Children's Services Coordinator came to play an important leadership role within and outside the FDC team in advocating for increased focus on building families' parental capacities and protective factors. She strengthened the FDC team's ability to meet children's needs. She provided child-specific consultation and worked closely with the child welfare liaison to address barriers to families' engagement in services.

PFR Leadership Framework – Key Domains

During the first round of PFR, Children and Family Futures developed a framework that identified seven key domains of leadership. CFF based this framework on a literature review and its extensive site work with FDCs and leaders around the country. PFR explored these concepts with the first round of grantees and will further refine and operationalize them during the second round of PFR.

- ***Core Traits and Capabilities*** – includes the ability to build collaborative relationships based on mutual trust, a shared mission and joint accountability, and the capability to manage competing priorities within and across agencies
- ***Systems Focus*** – includes awareness and knowledge of the larger systems and contextual environment in which the FDC operates
- ***Innovative Action*** – includes the capacity to rethink processes and systems and overcome challenges with flexible, creative solutions
- ***Collaborative*** – includes the ability to engage needed partners, encourage information and resource sharing and promote collaborative action
- ***Distributive*** – includes distributing decision-making and leadership responsibilities among the team and the ability to leverage all available resources
- ***Inclusive*** – includes the ability to understand and incorporate client, staff and partner perspectives into the process, engage in meaningful, open communication and create a learning environment
- ***Outcome Focused*** – includes measuring the initiative's effectiveness and using data and shared accountability to drive decision making and improve performance

The Ability to Engage Partners and Build a Shared Mission

In the PFR sites, leaders recognized that they needed to engage new partners to better meet the complex needs of the parents, children and families involved in the FDC. Judicial and other high-level agency leaders from each of the grantee teams actively reached out to public health, health, mental health, housing and other community partners to discuss challenges with unmet client needs. As one FDC Judge summed up, "This is bigger than any one of us."

PFR leaders secured the buy-in of these partners by understanding their respective agency's needs and interests. They conveyed how each agency's distinctive strengths complemented the work of other partners and contributed to the collaborative's shared mission.

The Ability to Cultivate Leadership and Share Responsibilities

Leaders in the PFR sites worked to build and nurture leadership within their teams by recognizing and leveraging others' expertise and distributing decision-making responsibilities. They created collaborative structures and processes that promoted shared leadership and established environments that encouraged flexible, innovative solutions to identified challenges.

> ***"I don't think it could be overstated how huge a factor it is that we have the support of our highest court leadership…. It gives us the flexibility to try new things. We're confident when we engage, we can engage fearlessly with other agencies and systems and even effect change out there. They're our cheerleaders. It's really good when it goes from the top down as well as the bottom up."***
>
> – PFR Grantee

The Ability to Engage in Systems Thinking

Effective leaders in the PFR sites were able to move from "project thinking" (i.e., focusing on a single project or grant) to "systems thinking" in which they could see the PFR initiative as part of the larger systems of care for families. They understood the necessity of cross-systems collaboration to create sustainable change and had sound working knowledge of how their community's many organizational systems interrelate.

In staying focused on the "big picture," leaders asked the tough questions, were willing to take an honest look at what is not working and reached out to engage other community leaders in problem solving to address ineffective systems. They encouraged all team members to identify and raise major barriers affecting the initiative and then proactively worked to resolve those barriers through needed practice and policy changes.

For example, in Robeson County, the FDC team identified that requiring parents to pay child support while in the FDC program was a major barrier to their success and the result of a fragmented system. The FDC collaborated with the Division of Child Support Enforcement to institute a policy change that deferred child support for participants while in the FDC. This policy change allowed parents to focus on their treatment and case plan goals without fear of their child support obligations going into arrears.

The Ability to Use Data and Communicate Outcomes

To identify barriers, PFR leaders encouraged open communication and adequate information sharing. They pushed to move conversations with partners beyond simple agency activity reports to discussions about how, and to what extent, families are doing better. They embraced and used data to build relationships and frame decisions for the team to improve results for families and mobilize and redirect resources.

Moreover, they used data to raise questions about the quality and effectiveness of services. For example, Tompkins County FDC leadership shared substance use treatment enrollment and outcomes data with one of the community providers to make the case for changes to the intake process to improve timely access to treatment.

> ***"I show them the data that compares our outcomes to the general dependency population, so that they see how effective we are and see that there's room that we could do even better. Then, I talk about the implications for our partnership, what they could get out of it if we can demonstrate that this works, what we're going to try to do with them."***
>
> – PFR Grantee

Concluding Comments

As this brief makes clear, collaboration, governance and leadership are closely intertwined. Each is important in its own right, but when they come together to form the trifecta, the payoff is great. The FDC and its cross-systems partners can transform the way they make decisions about policies, programs and allocation of resources to better help children, parents and families who are affected by substance use disorders to achieve family recovery.

> ***"We didn't just improve Family Drug Court, we transformed our dependency system."***
>
> – Pima County PFR Grantee

About the Prevention and Family Recovery Briefs

Prevention and Family Recovery (PFR) strives to advance the capacity of Family Drug Courts (FDCs) and their partner agencies to provide a comprehensive family-centered approach for children, parents and families affected by parental substance use disorders and child abuse and neglect.

In April 2014, Children and Family Futures (CFF) awarded PFR grants to four FDCs to integrate evidence-based parenting and children's interventions into their larger FDC systems of care. CFF has produced a series of briefs that highlight cross-cutting PFR lessons and experiences that the field can use to replicate effective FDC practices. A companion set of case studies tells a more in-depth story of each grantee's PFR journey.

The series of PFR briefs includes:

- Brief 1: Overview of the Prevention and Family Recovery 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 Evaluation and Performance Monitoring Capacity of FDCs *(Coming soon)*

In January 2017, PFR expanded to four new FDCs, which will further expand the knowledge base about an effective family-centered approach. For more information about the PFR initiative and to download the case studies and other PFR briefs, visit the PFR webpage (http://www.cffutures.org/pfr) or email us at pfr@cffutures.org.

PREVENTION AND FAMILY RECOVERY

For more information about the PFR initiative,
contact Children and Family Futures at pfr@cffutures.org

July 2017

About Children and Family Futures

Children and Family Futures (CFF) is a national nonprofit organization based in Lake Forest, California that focuses on the intersections among child welfare, mental health, substance use disorder treatment and court systems. CFF has over two decades of experience in practice, policy and evaluation arenas to support tribes, states, regions and communities in their efforts to improve outcomes for children and families who are affected by substance use disorders. CFF believes parents with substance use disorders should maintain hope of achieving recovery and family stability so they can care for their children. While no single system or agency working by itself can help parents achieve that goal, CFF recognizes that recovery happens within the context of the family and that professionals from a variety of agencies and systems must work together to meet the needs of families.

Children and Family Futures provides a full range of consulting, technical assistance, strategic planning and evaluation services for substance use disorder treatment, child welfare, courts and the communities they serve. To learn more about CFF, visit www.cffutures.org.

The mission of Children and Family Futures is to improve safety, permanency, well-being and recovery outcomes for children, parents and families affected by trauma, substance use and mental disorders.

About the Doris Duke Charitable Foundation

The mission of the Doris Duke Charitable Foundation (DDCF) is to improve the quality of people's lives through grants supporting the performing arts, environmental conservation, medical research and child well-being, and through preservation of the cultural and environmental legacy of Doris Duke's properties. The foundation's Child Well-being Program aims to promote children's healthy development and protect them from abuse and neglect. To learn more about the program, visit www.ddcf.org.

About The Duke Endowment

Since 1924, The Duke Endowment has worked to help people and strengthen communities in North Carolina and South Carolina by nurturing children, promoting health, educating minds and enriching spirits. Located in Charlotte, North Carolina, the Endowment seeks to fulfill the visionary genius and innovative legacy of James Buchanan Duke, one of the great industrialists and philanthropists of the 20th century. Since its inception, the Endowment has distributed more than $3.6 billion in grants. Now one of the largest private foundations in the Southeast, the Endowment shares a name with Duke University and Duke Energy, but they are all separate organizations. To learn more about the Endowment, visit www.dukeendowment.org.