## Advancing a Family-Centered Approach:

Lessons from the Prevention and Family Recovery (PFR) Initiative

PUTTING IDEAS INTO ACTION - KNOWLEDGE APPLICATION SERIES | AUGUST 2021



## LESSON 4: Family Treatment Court Teams Need to Maintain a Consistent and Strong Focus on FTC Participant Recruitment, Timely Engagement, and Retention

This lesson is one of a set of nine lessons from the Prevention and Family Recovery (PFR) initiative. The other PFR lessons and an overview of the complete Knowledge Application Series can be accessed <u>here</u>.



### **LESSON 4**:

Family Treatment Court Teams Need to Maintain a Consistent and Strong Focus on FTC Participant Recruitment, Timely Engagement, and Retention

While pursuing a comprehensive familycentered approach and large-scale systems improvements, both groups of Prevention and Family Recovery (PFR) grantees had to stay committed to the core practice of participant engagement and retention in the family treatment court (FTC). All grantees invested significant financial, human, and other resources to expand and enhance their program's family-centered service array. Low FTC enrollment translated to a low number of referrals to evidence-based parenting and children's services. In the short term, not operating at full FTC capacity (i.e., not maximizing the number of families the FTC can serve at any given time) meant families who needed these critical services were not

served. Over the long term, not operating at full capacity may prevent the FTC program from continuing to grow and sustain itself.

To broaden the continuum of intervention opportunities for families, grantees expanded (or were seeking to expand) their eligible target population to include in-home or pre-file/pre-petition populations. Expanding the eligibility criteria to serve families identified as at risk (i.e., families with children who have not been removed from the home) aligns with the goals of the Family First Prevention Services Act.¹



"We can have the best blueprints in the world and build the best structure in the world, but until it's being fully utilized, it's going to take a little time to see the success."

- Grantee team member

<sup>1</sup> Please refer to Children and Family Futures and the National Center on Substance Abuse and Child Welfare for more information and resources on the Family First Prevention Services Act, which was signed into law in 2018 and went into effect in late 2019.

At the onset of the second round of the PFR initiative, all grantees prioritized the need to improve their processes for identifying, referring, and engaging eligible participants in the FTC. Strengthening these fundamental operations remained a major focus area throughout the three-year grant period. The FTC teams strategized how to reach more families—and engage them earlier in their child welfare system involvement. Grantees assessed their current collaborative practices at each potential drop-off point in the overall engagement continuum to identify service gaps. Then, they implemented needed program, policy, and practice improvements.

Grantees' efforts paid off. Their PFR data showed they increased timely access to FTC entry for participants from both the child welfare case open and FTC referral dates. One grantee team member observed that parents enrolling in the FTC earlier in their child welfare case, rather than as a last-ditch effort to permanency, changed the overall tone of the courtroom. "Having people come in earlier gave us an opportunity to see the way it's supposed to work, which is when [parents are] most motivated and better able to connect the dots between them doing this work and an ability to get more time with their children and things of that nature. It shifted the morale in the actual court."

### Myriad Factors May Impede Engagement and Retention

Numerous issues can drive a team's inability to engage parents and maximize FTC capacity. Significant barriers may reside at the larger state or county systems level (e.g., policies within the child welfare system, dependency court). They

may reside at the FTC program operations level, in the form of competing case plan requirements, multiple FTC pre-enrollment requirements, and lack of trust among partners, for example. Moreover, they may also include external contextual events beyond the FTC's control, such as a decrease in dependency case filings or a global public health pandemic.

## Barriers to Engagement for Prospective Participants

Parents also may face deeply rooted barriers that inhibit their interest or ability to participate in the FTC. For example, families often lack adequate transportation and childcare. experience stigma related to substance use disorders, or perceive the FTC to be a more arduous path than traditional dependency court. One FTC team member elaborated: "We're telling them, 'This is great for you. This is what you need to do. This can help you. You have a team that can support you.' Sometimes the only thing that they're hearing is 'court.' They don't want to come to court. We had to show them the difference between treatment court and [dependency court]." Once parents can observe and understand the level of available support, they are more motivated to enroll in the FTC early in their child welfare case.

One FTC team member noted that increasing engagement is more an issue of "what are we going to do to recalibrate our expectations and understand where folks are coming from and then react accordingly. We service providers think of ourselves as the healers, the helpers, but [that is not] the perspective of the parent."

# How to Strengthen Engagement and Retention

The first round of grantees identified critical components for effective participant engagement and retention (see 2017 PFR <u>Brief</u> 2). The second group of grantees added nuance to and expanded the round 1 knowledge base on this topic. Collectively, the grantees' experiences demonstrate the need for strong collaborative practice, effective core program operations, and enhanced understanding of families. Many of these elements mirror the guiding principles of a family-centered approach (see <u>Lesson 7</u>).



## Components Grounded in Strong Collaboration

- Secured engagement and buy-in of all major referral sources—especially child welfare caseworkers and attorneys—to ensure the FTC reaches all families in need.
- Regular outreach, training, and education to partners and community stakeholders—to

provide them with accurate and complete information for dissemination to prospective families. Given that many core partner agencies and other community-based organizations that serve families with substance use disorders experience constant and high staff turnover, regular training and education sessions are critical.

This type of capacity-building ensures parents have answers to fundamental questions, such as:

- Who does the FTC program serve?
- How does the program benefit families and improve outcomes?
- What services and resources do the FTC offer?
- How does the referral and enrollment process work?
- ▶ Effective **cross-systems communication and information sharing** among FTC team members—to ensure timely identification, outreach, and follow-up with prospective participants as well as ongoing progress and case monitoring of enrolled participants.



"I think there's a way to get more people involved, but how do you sell [the FTC program] to the client? We have to make the reward seem greater. That's going to [involve] asking and figuring out what does it mean to the client?"

- Grantee team member

During the PFR grant period, all four grantees improved communication among partners, resulting in more timely and pertinent information sharing. Grantees took explicit steps, for example, to immediately notify core team members (e.g., parent attorneys, child welfare social workers) when participant referrals were made and received as well as when participants missed intake and other critical early engagement appointments. FTC staff and partners established more frequent meetings to discuss new referrals, provide updates on prospective participants' status, and identify strategies to reduce missed appointments and increase early engagement.



- ▶ Effective and streamlined **processes and protocols** that ensure all eligible parents are identified, screened, referred, and engaged in the FTC early in their dependency case and that gaps in needed supports are filled.
- Intensive, coordinated case management to reduce the burden on families of managing multiple requirements and services across systems, particularly early on in their case and in recovery.

- Regular data and case reviews to identify and respond to drop-off points, barriers, and service gaps along the FTC engagement continuum.
- An FTC phasing structure that recognizes progress, emphasizes desired behavioral changes, and aligns with progress towards reunification.
- ▶ Appropriate responses to behavior based on a comprehensive assessment of the parent's behavior, situation, and other contributing factors. Responses are designed to support behavioral changes that improve parent, child, and family functioning and increase participant accountability.

The Jefferson County FTC changed its admission policy and now allows parents to enter the FTC within 90 days from the time their case is filed, instead of 30 days. Expanding the timeline gives parents adequate time to observe the FTC, discuss the program with FTC team members, and make an informed decision about their participation.

"When one of our [FTC] professionals is able to talk to a parent about what it really looks like and why we have a family treatment court, 9 times out of 10, they're going to enter. Our attorneys and our case workers are really good about talking about why we have our family treatment court and how parents can benefit."

- Grantee team member



- ► Use of **motivational interviewing** techniques by all FTC team members, including the judge.
- ➤ Trauma-informed and trauma-responsive court practices and proceedings that recognize and deal with a parent, child, and family's traumatic experiences.
- ► An established plan for **continuing care** and recovery supports for the family.
- Use of peer support specialists with lived experience of substance use disorders, recovery, and child welfare involvement as well as related issues that affect the FTC's target population. Peers serve as an

- indispensable bridge between parents and other FTC team professionals, as they build trust with families and among the team. (See sidebar, *Harnessing the Power of Peer Supports.*)<sup>2</sup>
- ➤ Targeted and in-person outreach to parents to establish a personal connection and provide a supportive, individualized approach to engagement. For example, FTC staff (e.g., the FTC coordinator, caseworkers, or case coordinators) now attend initial dependency court hearings to meet with parents, introduce them to the FTC, and provide a personal referral.

"I'm going to tap into this program because it's going to help sustain me. It builds extra stability along the way, and that's big for me. Even after I get [reunification] with my daughter, I still want that stability. So, I'm still going to be in some groups. I'm still going to be going to some meetings. I'm going to merge my daughter's needs with my needs together and find out the help that I can get to help us maintain together as a family once again."

- FTC participant

<sup>2</sup> For more information on peer support models for families in child welfare, please see the National Center on Substance Abuse and Child Welfare's publication, *The Use of Peers and Recovery Specialists in Child Welfare Settings.* 



### Harnessing the Power of Peer Supports

During the PFR grant period, the sites paid closer attention to the "face" of the FTC program and prospective participants' first impressions. Grantees recognized that sometimes court, child welfare, or substance use disorder treatment staff are not the best recruiters, especially for families of color and fathers. Thus, grantees strengthened their peer support networks and focused on accelerating early engagement.

All PFR grantees increased the presence of peers during early contacts with parents (e.g., orientation team meetings, initial screenings, court observation, and the first dependency court hearing). Early connection allows peers to swiftly respond to two prominent participant barriers: parents' concern about the length, intensity, and accountability of the FTC program and possible stigma regarding their substance use disorder. Grantees reported that strengthening the FTC's presence at key engagement points helps reduce drop-off from referral to assessment to enrollment.

In Milwaukee County, the FTC expanded its trained and certified peer mentor network during the grant period by another 12 graduates, 7 of whom worked with the FTC's treatment provider partners. The FTC also assigns a dedicated certified peer specialist (an FTC graduate) to prospective participants to support them through the application process and their subsequent participation. One team member reflected on how this is working: "The biggest change since we started the grant is that we have a handful of peer mentors that are planning the service, explaining the program and the process, and saying, 'I've been where you've been, I'm now here explaining this to you, and I'm employed by providers that can support you.' Explaining it and relating to the parent in a different way from somebody who hasn't experienced the process has really been crucial in engaging families, making them feel safe and making them feel like, nobody's tricking you and lying to you about the success of this program."



"When we talk to parents about what [the FTC program] really looks like and the engagement with the judge, that makes a significant difference," said one grantee team member. "I think parents really want the opportunity to come to court weekly and talk directly to the judge about how their week has been, what they are doing well, what they are struggling with. They don't want just a 90-day report going to the court about everything they've done."

## The Power of Seeing the FTC in Action

Grantees found that requiring prospective parents to observe the FTC prior to formally enrolling in the program helps parents get a concrete picture of how the FTC works and how it differs from traditional dependency or adult criminal court. To prevent parents from becoming overwhelmed while they observe, FTC staff are present to explain the process, follow up immediately after court, answer parents' questions, and provide guidance on next steps. One team member remarked: "We know that if we can get them in the door to observe, they're usually sold on it. They're like, 'Okay, I want to do this. I want to be a part of this. This is what I need."



# Advancing Efforts to Meet the Needs of All Families

FTCs must scale their programs to meet the needs of all families affected by substance use disorders who are eligible for and could benefit from the FTC's intensive, comprehensive program. As FTCs strive to increase their reach, they must work closely with system partners to better screen, identify, engage, and retain families that have been under-represented among those served.

Toward the end of year three, the PFR grantees began taking steps to increase awareness of and start tackling the difficult issues of equity, inclusion, and disproportionality in their jurisdictions and populations served. Grantees' initial actions toward achieving the goal of equal access included:

- ▶ Establishing a cross-discipline equity and inclusion workgroup to identify effective outreach and engagement strategies as well as needed policy and practice improvements.
- ▶ Identifying and soliciting the help of community leaders to help build connection and trust in the community with historically marginalized groups. These leaders may, for example, serve as partners or members of a community advisory board.
- ► Analyzing FTC referral, engagement, retention, and completion data by race, ethnicity, and gender to identify prevalence of disproportionality and trends.
- ▶ Hiring dedicated FTC peer mentors who are persons of color and reflect the community in which the FTC operates and the families it seeks to better serve.
- Providing specialized training to staff on best practices and considerations for serving historically marginalized families in the child welfare and court systems who are affected by substance use disorders.



#### LESSON 1:

Increased, renewed, and continued focus on **Cross-Systems Collaboration** is needed to achieve and sustain systems change

#### LESSON 4:

FTC teams need to maintain a consistent and strong focus on FTC Participant Recruitment, Timely Engagement, and Retention

#### **LESSON 7:**

Integrating a **Truly Family- Centered Approach** requires several paradigm shifts

#### LESSON 2:

The effectiveness of parenting and children's services is integrally linked to **Timely** and **Effective Substance Use**Disorder Treatment

#### LESSON 5:

Developing the **Evidence-Based Program Capacity** of sites is a complex undertaking

#### **LESSON 8:**

**Building Data Capacity** to advance a family-centered approach involves moving beyond just numbers

#### LESSON 3:

A Formal Governance Structure is necessary to prioritize, oversee, and sustain the FTC

#### **LESSON 6:**

FTC teams need to **Build Bridges to Connect Families**to services and service
providers to each other

#### LESSON 9:

Achieving larger systems change requires understanding and adapting to the changing **Contextual Environment** 



The Prevention and Family Recovery (PFR) initiative was generously supported by the Doris Duke Charitable Foundation and The Duke Endowment.

For more information about the PFR initiative, visit the <u>PFR home page</u> or email Children and Family Futures at <u>contact@cffutures.org</u>



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. We believe parents with mental health and 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, we recognize 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 <a href="https://www.cffutures.org">www.cffutures.org</a>.

The mission of
Children and
Family Futures is to
prevent child abuse
and neglect while
improving safety,
permanency, wellbeing, and recovery
outcomes with equity
for all children,
parents, and families
affected by trauma,
substance use, and
mental disorders.



The mission of the <u>Doris</u>
<u>Duke Charitable Foundation</u>
is to improve the quality of
people's lives through grants
supporting the performing arts,
environmental conservation,

child well-being, and medical research, and through preservation of the cultural and environmental legacy of Doris Duke's properties. The mission of the foundation's Child Well-being Program is to promote children's healthy development and protect them from abuse and neglect. To that end, DDCF takes a funding approach that centers on intergenerational work that bolsters culturally, geographically, and locally relevant programs with and for communities to foster the long-term well-being of families. To learn more, visit <a href="https://www.ddcf.org">www.ddcf.org</a>.

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