

# Advancing a Family-Centered Approach:

Lessons from the Prevention and Family Recovery (PFR) Initiative

PUTTING IDEAS INTO ACTION - KNOWLEDGE APPLICATION SERIES | AUGUST 2021



## LESSON 6: Family Treatment Court Teams Need to Build Bridges to Connect Families to Services and Service Providers to Each Other

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 [here](#).



Advancing the capacity of family treatment court teams to provide a comprehensive family-centered approach that improves child, parent, and family outcomes

## LESSON 6:

### Family Treatment Court Teams Need to Build Bridges to Connect Families to Services and Service Providers to Each Other

To create and sustain a comprehensive family-centered system of care, family treatment courts (FTCs) must effectively screen, assess, and link families to the needed array of clinical treatment and related community support services.

Moreover, FTCs must also connect various service systems and community providers to each other to ensure coordinated, integrated care for the families they jointly serve. Building an adequate support system for families that features expanded services and interconnected community partnerships is crucial to families' long-term success, functioning, and well-being.

To build these essential bridges, the first round of Prevention and Family Recovery (PFR) grantees increased cross-systems collaboration, co-located services and staff, and added a parent-child services coordinator to the FTC team.<sup>1</sup> The second round of grantees employed similar effective strategies. (See sidebar, *The Public Health Nurse: A Vital Asset in Connecting Families to Community-Based Services*.) They expanded upon the first grantees' efforts and bolstered their bridge-building capacity by improving family-centered screening and assessment processes. Increasingly, the FTC teams could better identify and manage families' other complex needs that co-occurred with substance use disorders. Grantees noted participant barriers to completing the FTC program or reunifying with their children typically included homelessness or lack

of stable housing (elaborated on in the next section), domestic violence, unmet health and medical needs, and limitations related to parental cognitive functioning.

////////////////////////////////////

In Mecklenburg County, the contracted substance use disorder treatment provider now completes an initial family-centered assessment that includes the FTC's intake questions to help streamline the FTC and substance use disorder treatment entry process for parents. This central family-centered assessment addresses substance use, mental health, domestic violence, parenting, and other family and children's issues to give the team a comprehensive picture of families and connect families to other needed service providers.

////////////////////////////////////



<sup>1</sup> Refer to the 2017 PFR [Brief 2](#) as well as the 2017 [PFR case studies](#) for more information.

### THE PUBLIC HEALTH NURSE: A VITAL ASSET IN CONNECTING FAMILIES TO COMMUNITY-BASED SERVICES

The Jefferson County FTC team saw the need to quickly assess and refer parents and children to services and build stronger relationships with children's developmental services providers. One team member reflected: "You hear these families in [court] and they start talking about medical issues they're having, their dental issues, medications they're being put on, and none of us are experts on that. We were missing the mark there a lot. We just saw this need there with our families that we were not addressing as well as we could."

To help meet families' needs and build linkages with these other providers, Jefferson County established a full-time, dedicated public health nurse (PHN) family care coordinator who was integrated into the FTC team. At the onset of the family's FTC involvement, the PHN care coordinator conducts developmental screenings and an evaluation for every child. The PHN coordinator also completes an intake for all parents to assess their medical, dental, psychological, and other basic needs. These early assessments provide the larger FTC team with valuable information on the entire family's needs and facilitates prompt service referrals. The PHN ensures parents are involved in the children's medical, dental, educational, and therapeutic appointments throughout each phase of the FTC. The grantee noted that parental involvement helps ensure a smooth reunification: parents

"know what their child needs and they're a part of it."

In addition, the PHN coordinator has built relationships with and greatly improved communication among medication-assisted treatment providers, medical providers, and the treatment team to streamline services for parents who have multiple providers. As one team member noted: "We've got a medical professional who can talk to other medical professionals and speak their language, and they speak it back. It is a dramatic difference."

By the end of the grant period, the FTC team determined that bringing the PHN coordinator on board was one of their most significant and positive enhancements for families. One FTC team member elaborated: "Our families really see her as an ally, someone that they are really willing to talk to. [The families] give such rich information and are so open to her helping connect them to the community. It's a different response than they have to a caseworker or guardian ad litem." Another team member added: "[The PHN] is a dramatic change from the very beginning of the case. She gives medical reports on the children and the parents right upfront. We've never, ever had that before. A focus on their physical health, dental health...these are concrete things that produce real results."



The PHN's initial success in linking families with services and enhancing family trust and communication resulted in Jefferson County expanding the model to two more child welfare teams in the dependency system. Before the FTC team established the PHN role, baseline data showed 89 percent of children referred "fell through the cracks" and did not get screened. In contrast, pilot data for the FTC showed that after the PHN came on board, 88 percent of children referred were screened—an outcome the team asserts is "a significant change in practice." The site is striving to sustain the PHN position with institutionalized (rather than grant) funding and to expand the model throughout the dependency system.



### Building Bridges to Housing: Construction in Progress

Access to stable, long-term housing is a major problem in most jurisdictions across the country, including the geographical areas of PFR grantees. Housing remains a central unmet need and significant barrier for families, adversely affecting FTC engagement and retention, reunification, and sustained well-being and recovery. As one grantee team member noted: "Figuring that [housing] piece out is huge, because it's hard to work on recovery when you don't know where you're going to lay your head."

Although housing was not an explicit focus area of the PFR initiative, selected PFR grantees still achieved some progress building connections with housing authorities and existing housing

initiatives in their communities. However, the majority of FTC teams continue to reach out to other community-based organizations to shore up housing supports and identify opportunities to streamline, improve, and prioritize access to housing for the families they serve. In Milwaukee County, for example, one of the FTC's primary substance use disorder treatment providers received a round 4 federal Regional Partnership Grant (RPG) to provide sober recovery housing, outpatient substance use disorder treatment, child and family services, and recovery support services to families involved with or at risk of involvement with child welfare. The Milwaukee Partnership on Well-Being and Recovery (M-POWER) RPG initiative also will dedicate two family housing units to FTC participants.

## LESSON 6

FAMILY TREATMENT COURT TEAMS NEED TO BUILD BRIDGES TO CONNECT FAMILIES TO SERVICES AND SERVICE PROVIDERS TO EACH OTHER

The FTC teams' efforts to close the housing service gap are made even more challenging given that families involved in FTCs and the child welfare system face housing barriers that are associated with systemic issues of restrictive eligibility and administrative policies and regulations.<sup>2</sup> PFR grantees noted these barriers included denial of housing due to past criminal or eviction records; loss of housing that occurs when individuals or families participate in residential treatment; limited timeframes for using vouchers; and restrictive federal definitions of homeless. As one grantee team member said: "When you start peeling back the onion on housing, you realize that, as a community, it's a problem." The housing barrier is widespread. Strong

community- and state-level partnerships are required to gain traction and advance effective practice and policy solutions.

Reflecting on what their FTC would have done differently, one PFR grantee team member said, "We would probably find someone from housing—a navigator, an advocate, or a higher-up administrator—who could be part of our governance structure and guide us. If we can't get families in stable housing, we can't find success with them."



<sup>2</sup> See, for example, Child Welfare Information Gateway. (2018). *Building partnerships to support stable housing for child welfare-involved families and youth*. Washington, DC: Children's Bureau. Available at <https://www.childwelfare.gov/pubs/bulletins-housing/>.



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 [here](#).

#### LESSON 1:

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

#### LESSON 2:

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

#### LESSON 3:

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

#### LESSON 4:

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

#### LESSON 5:

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

#### LESSON 6:

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

#### LESSON 7:

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

#### LESSON 8:

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

#### 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 [PFR home page](#) or email Children and Family Futures at [contact@cffutures.org](mailto:contact@cffutures.org)





## Children and Family Futures

Strengthening Partnerships, Improving Family Outcomes

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

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



The mission of the Doris Duke Charitable Foundation 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 [www.ddcf.org](http://www.ddcf.org).

THE DUKE ENDOWMENT

Based in Charlotte and established in 1924 by industrialist and philanthropist James B. Duke, The Duke Endowment is a private foundation that strengthens communities in North Carolina and South Carolina by nurturing children, promoting health, educating minds, and enriching spirits. Since its founding, The Duke Endowment has distributed more than \$4 billion in grants. The Endowment shares a name with Duke University and Duke Energy, but all are separate organizations. To learn more about the Endowment, visit [www.dukeendowment.org](http://www.dukeendowment.org).