

# National Judicial Opioid Task Force

Family Treatment Courts:

First-Ever National Best Practice Standards Just Released

## Background

The first Family Treatment Court (FTC) was established in Reno, Nevada in 1994,1 and FTCs have expanded to over 500 programs nationally today. Family Treatment Courts combine the goals recognized within traditional child (timeliness, protection court processes permanency, and well-being of children) with the principles found in adult drug court, such as screening and early identification, incentives and sanctions, substance use disorder treatment, a non-adversarial team approach, mental health treatment, frequent drug and alcohol testing, and medication-assisted treatment (MAT). When implemented with fidelity and guided by best practices, FTCs have been proven to develop cross-system collaborative policies and practices that lead to improved outcomes for children and families.

# **Key Ingredients of Family Treatment Courts**

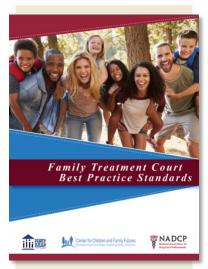
Seven recognized "key ingredients" of FTCs include:

- 1. A system of identifying families.
- Timely access to assessment and treatment services.
- Increased management of recovery services and compliance with treatment.
- **4.** Improved family-centered services and parent-child relationships.
- 5. Increased judicial oversight.
- **6.** Systematic response for participants contingency management.
- Collaborative non-adversarial approach grounded in efficient communication across service systems and court.<sup>2</sup>

## **National FTC Standards**

The first-ever national Family Treatment Court (FTC) Best Practice Standards was just released in October 2019 with the goal to provide FTC practitioners with a shared definition of the elements required in quality practice. The FTC Best Practice Standards was a

collaborative effort between national organizations, content experts, and federal agencies. The Center for Children and Family **Futures** (CCFF) partnered with the National Association of Drug Court Professionals (NADCP) under the leadership of the Office of Juvenile Justice and Delinquency Prevention (OJJDP) and with the assistance of representatives from the Children's Bureau and the Substance Abuse and Mental Health Services Administration (SAMHSA). The development of the



## The Standards are available at:

https://www.nadcp.org/ wp-content/uploads/2019/ 09/Family-Treatment-Court-Best-Practice-Standards\_ Final2.pdf

Standards was also informed by an Advisory Group comprised of 25 professionals representing the academic research community, FTC judges, attorneys, coordinators, treatment and child welfare practitioners, state coordinators, and federal partners. These FTC Standards represent the accumulated knowledge of over 20 years of practice experience and scholarly research.

<sup>&</sup>lt;sup>1</sup> Family Dependency Treatment Courts: Addressing Child Abuse and Neglect Cases Using the Drug Court Model. National Drug Court Institute and Center for Substance Abuse Treatment (2004). http://www.cffutures.org/files/C6\_Handouts.pdf

<sup>&</sup>lt;sup>2</sup> The Big 7 – Key Ingredients for an Effective Dependency Drug Court. Presented at the NADCP Annual Conference, July 9, 2017. http://nadcpconference.org/wp-content/uploads/2017/06/TS-5.pdf

There are eight best practice standards that are designed to be directive and measurable, and they are intended to guide practitioners, researchers, policy makers, and the community to effectively work with families struggling with substance use disorder. The following are the descriptions and the provisions of each of the eight FTC Standards.

# 1. Organization and Structure

The family treatment court (FTC) has agreed-upon structural and organizational principles that are supported by research and based on evidence-informed policies, programs, and practices. The core programmatic components, day-to-day operations, and oversight structures are defined and documented in the FTC policy and procedure manual, participant handbook, and memoranda of understanding (MOUs).

### **Provisions:**

- Multi-disciplinary and multisystemic collaborative approach
- Establish partnerships, community resources, and support
- Multi-disciplinary team
- Governance structure
- Shared mission and vision
- Communication and information sharing
- Cross-training and interdisciplinary education
- Family-centered, culturally relevant, and trauma informed approach
- FTC policy and procedure manual
- FTC pre-court staffing and FTC review hearing

# 2. Role of the Judge

Judicial leadership is critical to the effective planning and operation of the family treatment court (FTC). The FTC judge works collectively with leaders of partner agencies and other stakeholders to establish clear roles and a shared mission and vision. He or she has the unique ability to engage the leaders and stakeholders in the development, implementation, and ongoing operations of the FTC. The judge is a vital part of the operational team, convening meetings that encourage team members to identify shared values, voice concerns, and find common ground. Additionally, the judge's development of rapport with

participants is among the most important components of the FTC.

### **Provisions:**

- Convening partners
- Judicial decision-making
- Participation in FTC pre-court staffing
- Interaction with participants
- Professional training
- Length of judicial assignment to the FTC

## 3. Ensuring Equity and Inclusion

The FTC has an affirmative obligation to continually assess its operations and those of partner organizations for policies or procedures that could contribute to disproportionality and disparities. Disproportionality is the result of processes which produce over or under representation of a group compared to the percentage of that same group in the population of interest. Disparities are inequitable differences in the services received or outcomes by race, gender, or other characteristics. The FTC actively collects and analyzes program and partner organization data to determine if there are examples of disproportionality or disparities within the program; members of the FTC operational team and steering committee implement corrective measures to eliminate them.

#### **Provisions:**

- Equitable FTC program admission practices
- Equitable FTC retention rates and child welfare outcomes
- Equivalent/appropriate treatment
- Equivalent responses to participant behavior
- Team training

# 4. Early Screening, Identification, and Assessment

The early identification, screening, and assessment of families to enter into FTC provides the greatest opportunity to fully meet the comprehensive needs of children, parents, and families in the child welfare system. Families entering the child welfare system are promptly, systematically, and universally screened and referred to the FTC as early as possible in the child welfare case. FTC team members screen and assess all referred families using objective eligibility and exclusion criteria based on the best available

evidence indicating which families can be served safely and effectively in FTCs. FTC team members use validated assessment tools and procedures to promptly refer children, parents, and family members to the appropriate services and levels of care. FTC conduct team members ongoing, validated assessments of the needs of the child, parent, and family members, while also addressing barriers to recovery and reunification throughout the case. Service referrals match identified needs and connect children, parents, and families to evidence-based interventions, promising programs, and trauma informed, culturally-responsive, and family-centered practices. FTC team members have varying roles for this process to occur in a timely and efficient manner.

#### **Provisions:**

- Target population, objective eligibility, and exclusion criteria
- Standardized and systematic referral, screening, and assessment process
- Use of valid and reliable screening and assessment instruments for parents and families
- Valid, reliable, and developmentally appropriate screening and assessments for children
- Identification and resolution of barriers to recovery and reunification services

# 5. Timely, High-Quality, and Appropriate Substance Use Disorder Treatment

Substance use disorder (SUD) treatment is provided to meet the individual and unique substance-related clinical and supportive needs of persons with SUDs. For participants in FTC, it is important that the SUD treatment agency or clinician provide services in the context of the participants' family relationships, particularly the parent- child dyad, and understand the importance of and responsibility for ensuring child safety within the Adoption and Safe Families Act timeline for child permanency. SUD treatment providers' continuum of services includes early identification, screening, and brief intervention; comprehensive standardized assessment; stabilization; timely, appropriate, manualized, evidence-based treatment including medications if warranted; timely communication with the FTC team; and continuing care. The parent, child, and family treatment plan is based on individualized and assessed needs and strengths and is provided in a

timely manner including concurrent treatment of mental health and physical health disorders.

### **Provisions:**

- Timely access to appropriate treatment
- Treatment matches assessed needs
- Comprehensive continuum of care Integrated treatment of cooccurring substance use and mental health disorders
- Family-centered treatment
- Gender-responsive treatment
- Treatment for pregnant women
- Culturally-responsive treatment
- Evidence-based manualized treatment
- Medication-assisted treatment
- Drug testing protocols
- Treatment provider qualifications

# 6. Comprehensive Case Management Services and Supports for Families

FTC ensures that children, parents, and family members receive comprehensive services that meet their assessed needs and promotes sustained family safety,



permanency, recovery, and well-being. In addition to high-quality substance use and cooccurring mental health disorder treatment, the FTC's family-centered service array includes other clinical treatment and related clinical and community support services. These services are trauma responsive, include families as active participants, and are grounded in cross-systems collaboration and evidence-based or evidence-informed practices that are implemented with fidelity.

## **Provisions:**

- Intensive case management and coordinated case planning
- Family involvement in case planning
- Recovery supports
- High-quality parenting time (visitation)
- Parenting and family strengthening programs
- Reunification and related supports
- Trauma-specific services for children and parents

- Services to meet children's individual needs
- Complementary services to support parents and families
- Early intervention services for infants and children affected by prenatal substance exposure
- Substance use prevention for children and adolescents

## 7. Therapeutic Reponses to Behavior

The FTC's operational team applies therapeutic responses (e.g., child safety interventions, treatment adjustments, complementary service modifications, incentives, and sanctions) to improve child, parent, and family functioning, ensure children's safety and well-being, support participant behavior change, and promote participant accountability. The FTC recognizes the biopsychosocial and behavioral complexities of supporting participants through behavior change to achieve sustainable recovery, stable reunification, permanency, and resolution of the child welfare case. When responding to participant behavior, the FTC team considers the cause of the behavior, the effect of the therapeutic response on the participant's children and family, and the participant's engagement in treatment and supportive services.

## **Provisions:**

- Child and family focus
- Treatment adjustments
- Complementary service modifications
- FTC phases
- Incentives and sanctions to promote engagement
- Equivalent responses
- Certainty
- Advance notice
- Timely response delivery
- Opportunity for participants to be heard
- Professional demeanor

- Child safety interventions
- Use of addictive or intoxicating substances
- FTC discharge decisions

## 8. Monitoring and Evaluation

The FTC collects and reviews data to monitor participant progress, engage in a process of continuous quality improvement, monitor adherence to best practice standards, and evaluate outcomes using scientifically valid and reliable procedures. The FTC establishes performance measures for shared accountability across systems, encourages data quality, and fosters the exchange of data and evaluation results with multiple stakeholders. The FTC uses this information to improve policies and practices in addition to monitoring the strengths and limitations of various service components. Evaluation results and data are also a critical component of effective stakeholder outreach and sustainability helping the FTC to "tell its story" of success and needs.

## **Provisions:**

- Data is maintained electronically
- FTC engages in process of continuous quality improvement
- Evaluation of FTC's adherence to best practices
- Use of rigorous evaluation methods



