

Family Healing to Wellness Courts – Tools to Strengthen and Reunify Families



Hon. Carrie Garrow, Chief Judge, Saint Regis Mohawk
Tribal Court

Family Drug Court Guidelines





Healing to Wellness
Court
Quick Key Component
Review

1. Team, Community, & Nation Building

2. Eligibility

3. Entry

4. Healing and Treatment

5. Support & Supervision

6. Discipline & Encouragement

7. Respectful Communication

8. Keeping & Telling Stories

9. Enduring Knowledge & Experience

10. Sustained Team, Community, & Nation Building

1. Created Shared Mission and Vision

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

- Integrated or parallel model and target population– Involve all team members

Team and
Community
Nation Building

1. Created Shared Mission and Vision


- Communicating clearly and frequently with parents and within team– parents make better progress
- Teams with a shared vision generate better outcomes when have agreed upon set of practices
 - Written guidelines for sanctions and incentives
 - Drug test results - 48 hours and drug testing at least twice a week
 - Status reviews at least every other week
 - Use of immediate sanctions



**The
Research**

2. Develop Interagency Partnerships

- Structured within frameworks of the court, child welfare systems, and treatment. But also require additional partnerships to support family stability, parents' recovery, and the permanency, safety and well-being of children and their families. FDCs must form relationships with
 - Mental health
 - Domestic violence
 - Primary health
 - Child development
 - Other agencies that result in collaborative practice



Team and
Community
Nation Building

2. Develop Interagency Partnerships

- Engage in coordinated case planning
- Comprehensively addressing families' needs is associated with better outcomes
- In one study – children in FDC had longer stays in child welfare but were substantially less likely to experience future incidents of maltreatment
- Better outcomes for women when substance use disorder and child welfare systems are integrated – stay in treatment longer and more likely to reduce substance use and be reunified
- Progress in resolving co-occurring issues increases likelihood of achieving family reunification.

3. Create Effective Communication Protocols for Sharing Information

- Effective, timely, efficient
- Case level – share information critical for informed decision-making and treatment planning, while protecting privacy and due process rights
- System level – sharing and coordination across databases for reliable program monitoring

Sharing specifically results in improving

- Quality of case monitoring
- Relapse support
- Team members' ability to provide resources to parents

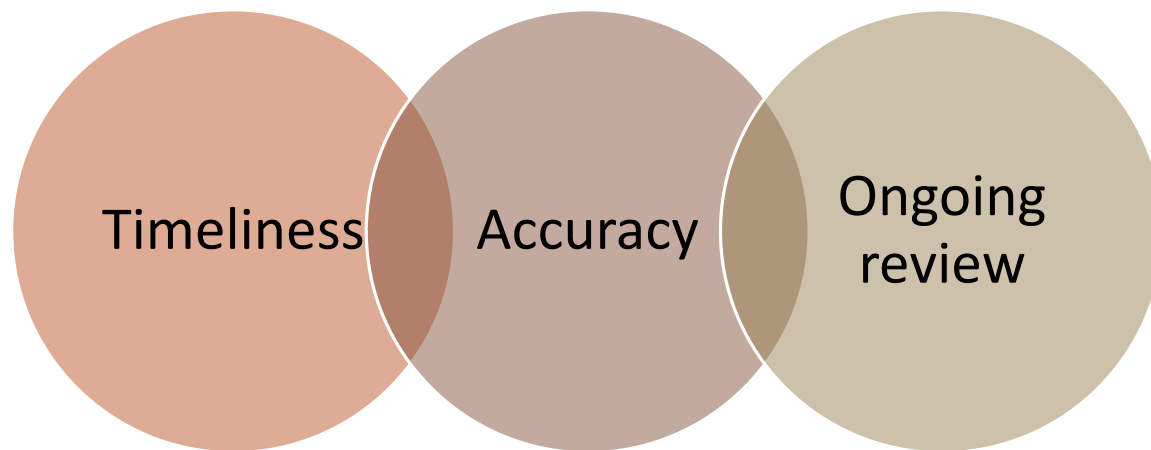
4. Ensure Interdisciplinary Knowledge

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



5. Develop a Process for Early Identification and Assessment – Eligibility and Entry

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



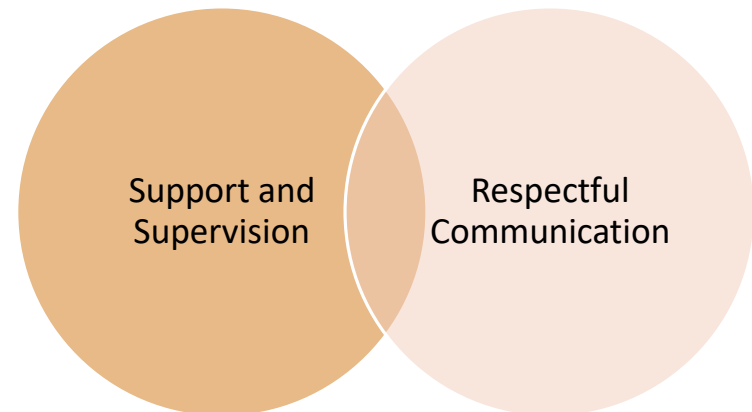
6. Address the Needs of Parents – Healing and Support

Encourage parents and assist them in meeting treatment goals and requirements of child welfare and the court.

Judges respond in a way that supports continued engagement.

Working toward permanency and using active client engagement, accountability and behavior change strategies, the team makes sure the parent has access to broad scope of services.

Infused in your Phases/Milestones.



Research

- **Residential treatment**

Postpartum women who had infants living with them had the highest treatment completion rates and overall longer stays

- **Range of services**

Increase in both number of months stay in treatment and number of counseling sessions received

- **Depression**

Symptoms of depression related to poorer outcomes

Research

- **Court practices**

One judge – more likely to feel court cared about child and outcome, increases perception of fairness

- **Timely access**

Entering FDC quickly can lead to faster treatment entry, achieving permanency faster, shorter time to case closure

7. Address the Needs of Children – Healing and Support

Must address the physical, development, social, emotional, and cognitive needs of children through prevention, intervention, and treatment programs.

Use a holistic and trauma-informed perspective.

Infused in your phases/milestones and staffings.

Must Address

- Developmental screening, assessment, and services for pre- and post-natal effects of exposure
- Consequences of child living in house affected by substance use disorder, including trauma associated with removal from home
- Effects of child maltreatment from abuse or neglect
- Full spectrum of children's developmental stages
- Child's increased risk of developing substance use disorders, especially focusing on school age, pre-teen and adolescent prevent and treatment.

Research

Cost

- Devoting more funding to direct services for children in FDC setting is actually more cost effective.

Complex needs of children

- Requires a team of professionals
- Parents who received high level of family/children's services were twice as likely to reunify
- Addressing needs of children and family in addition to parent's recovery results in improved child, parent, and family well-being.

8. Garner Community Support

FDCs connect with community-based organizations to support the multiple needs of parents, children, and families and to provide ongoing support after formal FDC services have ended.

Stakeholders must be engaged early, which should include advocacy for sustaining FDC.



Sustained
Team,
Community,
& Nation
Building

9. Implement Funding and Sustaining Strategies

Access the full range of funding, staffing, and community resources to develop long-term stability for its innovative approaches.

Continually evaluate outcomes and effectiveness, modifying the program accordingly.

Governance structure that assures ongoing commitment by policy makers, management, community partners, and operational staff.



Research

One FDC Cost Evaluation

- Increased use of substance use disorder treatment and decreased use of other publicly funded services (child welfare, community corrections, courts)

10. Evaluate for Shared Outcomes and Accountability

Must demonstrate that the FDC has achieved desired results across partner agencies.

To do so, FDC partners must agree upon goals and establish performance measures for joint accountability.

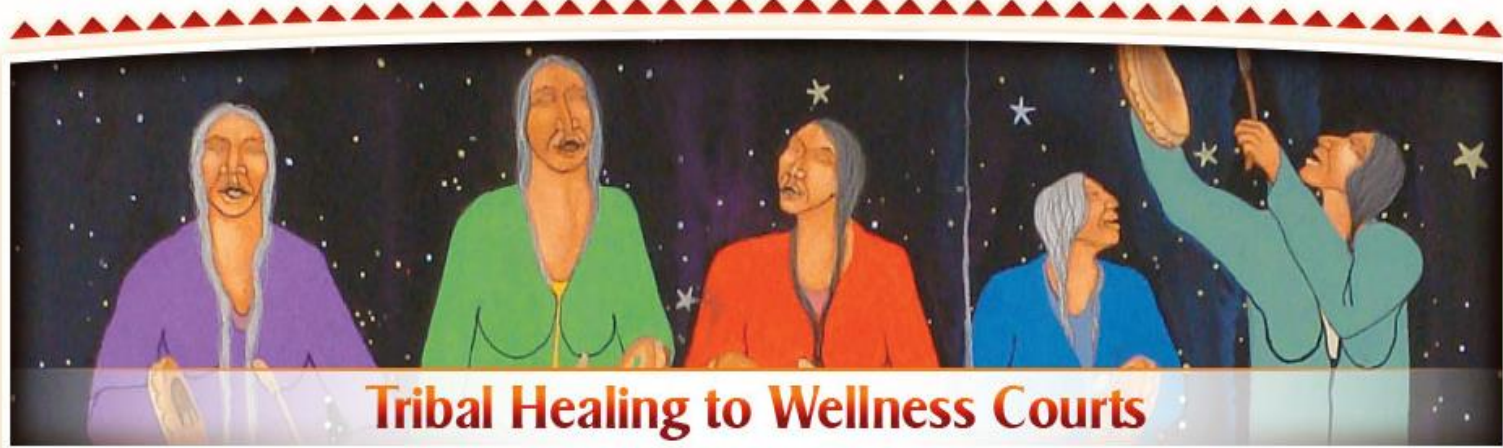
FDCs must develop and measure outcomes and use evaluation results to guide the work of the collaborative.



Online Training Resource

- **Children and Family Futures**
<https://www.cffutures.org/>
- **National Drug Court Institute**
www.ndci.org/training/online-trainings-webinars
- **National Drug Court Resource Center**
www.ndcrc.org
- **Center for Court Innovation**
www.drugcourtonline.org
- **NCSC and AU – Translating Drug Court Research into Practice**
www.research2practice.org

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Questions?

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