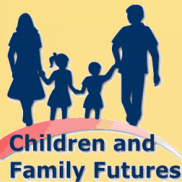




Inspiring Outcomes: Lessons Learned from Family Drug Courts

Phil Breitenbucher, MSW
Director, Family Drug Court Programs

Alexis Balkey, MPA, RAS
Program Manager, National Family Drug
Court Training & Technical Assistance
Program



CWLA 2016 National Conference
**Advancing Excellence in Practice & Policy:
What Works For Families Affected by
Substance Use**

August 2, 2016 | Orange County, California

Acknowledgement

This presentation is supported by:

The Office of Juvenile Justice and
Delinquency Prevention Office of Justice
Programs
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Points of view or opinions expressed in this presentation are those of the presenter(s) and do not necessarily represent the official position or policies of OJJDP or the U.S. Department of Justice.



*Improving
Family
Outcomes*

*Strengthening
Partnerships*



8,300,000 children

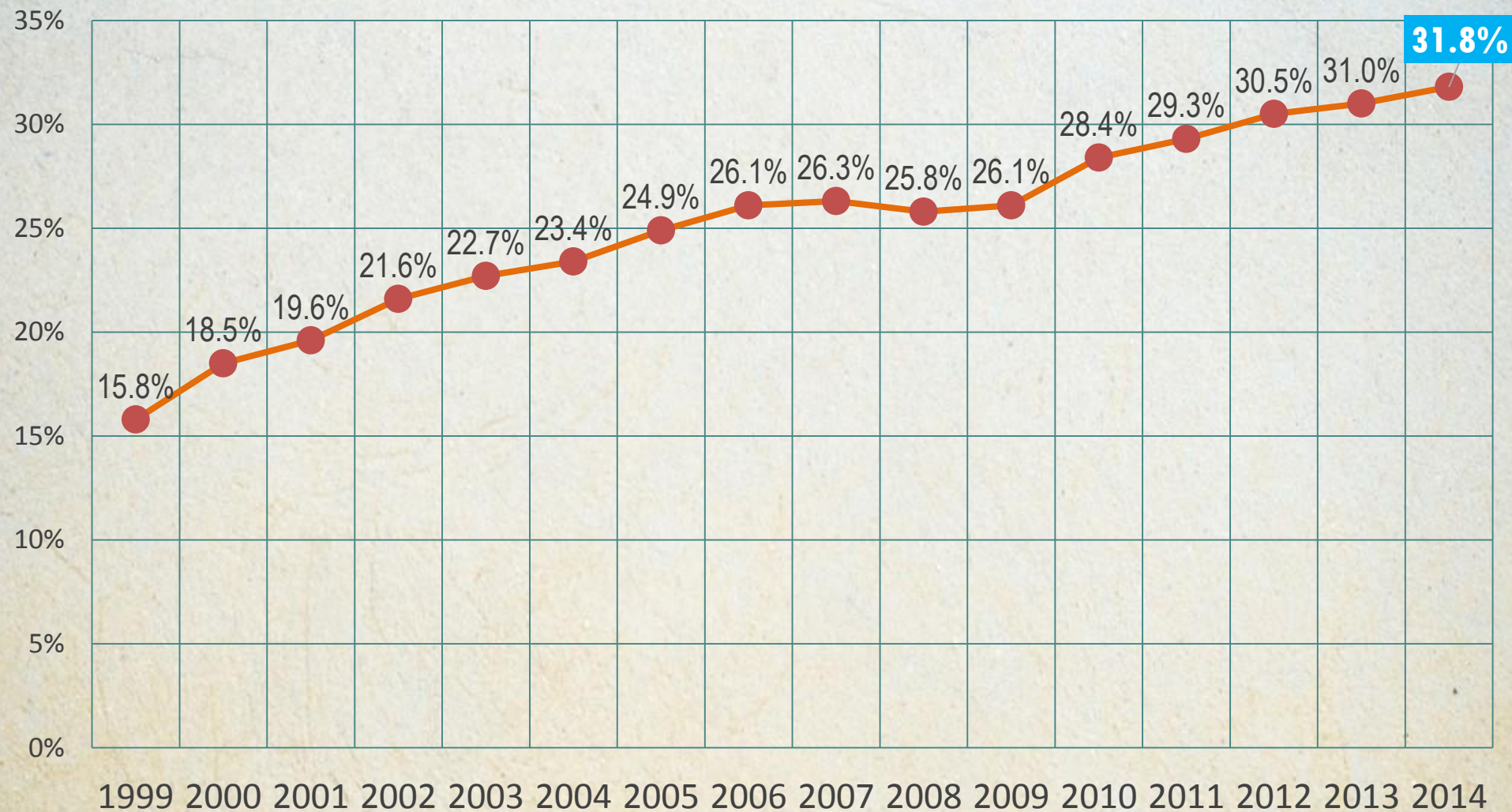
** 2002 – 2007 SAMHSA National Survey on Drug Use and Health (NSDUH)*

Statement of the Problem

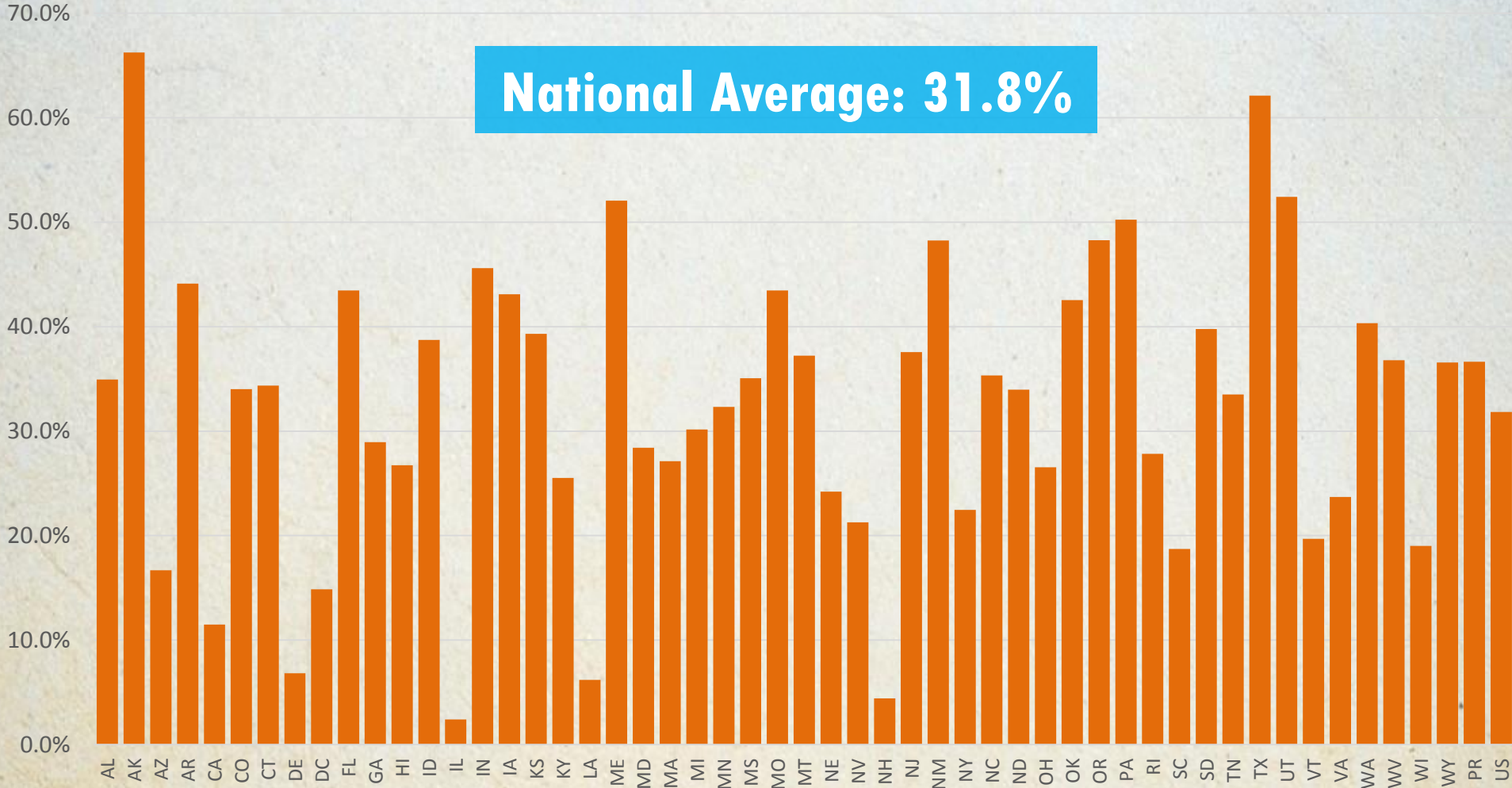
How many children in the child welfare system have a parent in need of treatment?

- Between **60-80%** of substantiated child abuse and neglect cases involve substance use by a custodial parent or guardian (Young, et al, 2007)
- **61%** of infants, **41%** of older children who are in out-of-home care (Wulczyn, Ernst and Fisher, 2011)
- **87%** of families in foster care with one parent in need; **67%** with two (Smith, Johnson, Pears, Fisher, DeGarmo, 2007)

Parental AOD as a Reason for Removal in the United States, 1999-2014



Parental AOD as a Reason for Removal 2014



Source: AFCARS Data, 2014

Number of Children in Out-of-Home Care 2010-2014





The Adoption and Safe Families Act

ASFA

(PL 105-89)

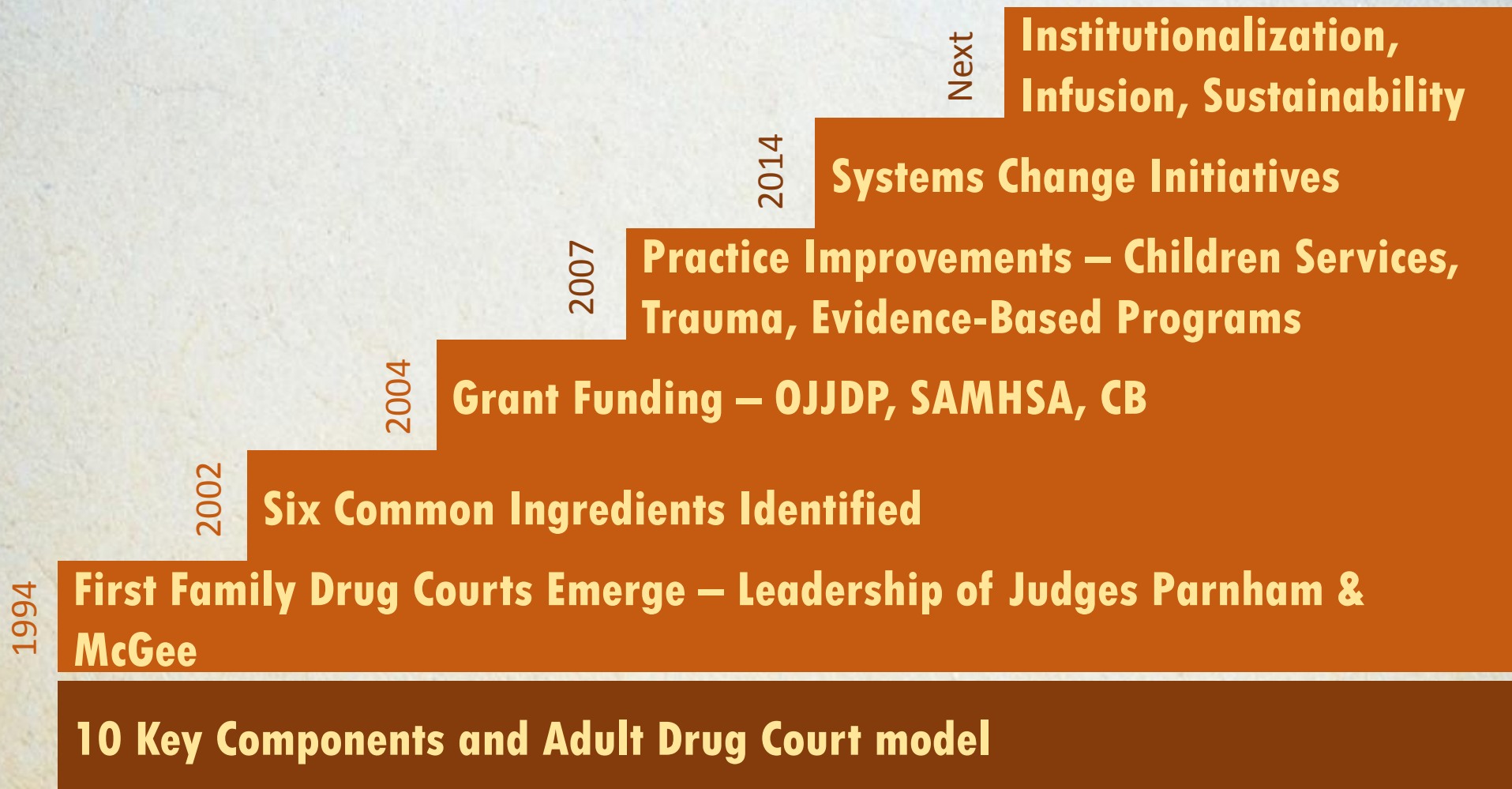
Time Clock



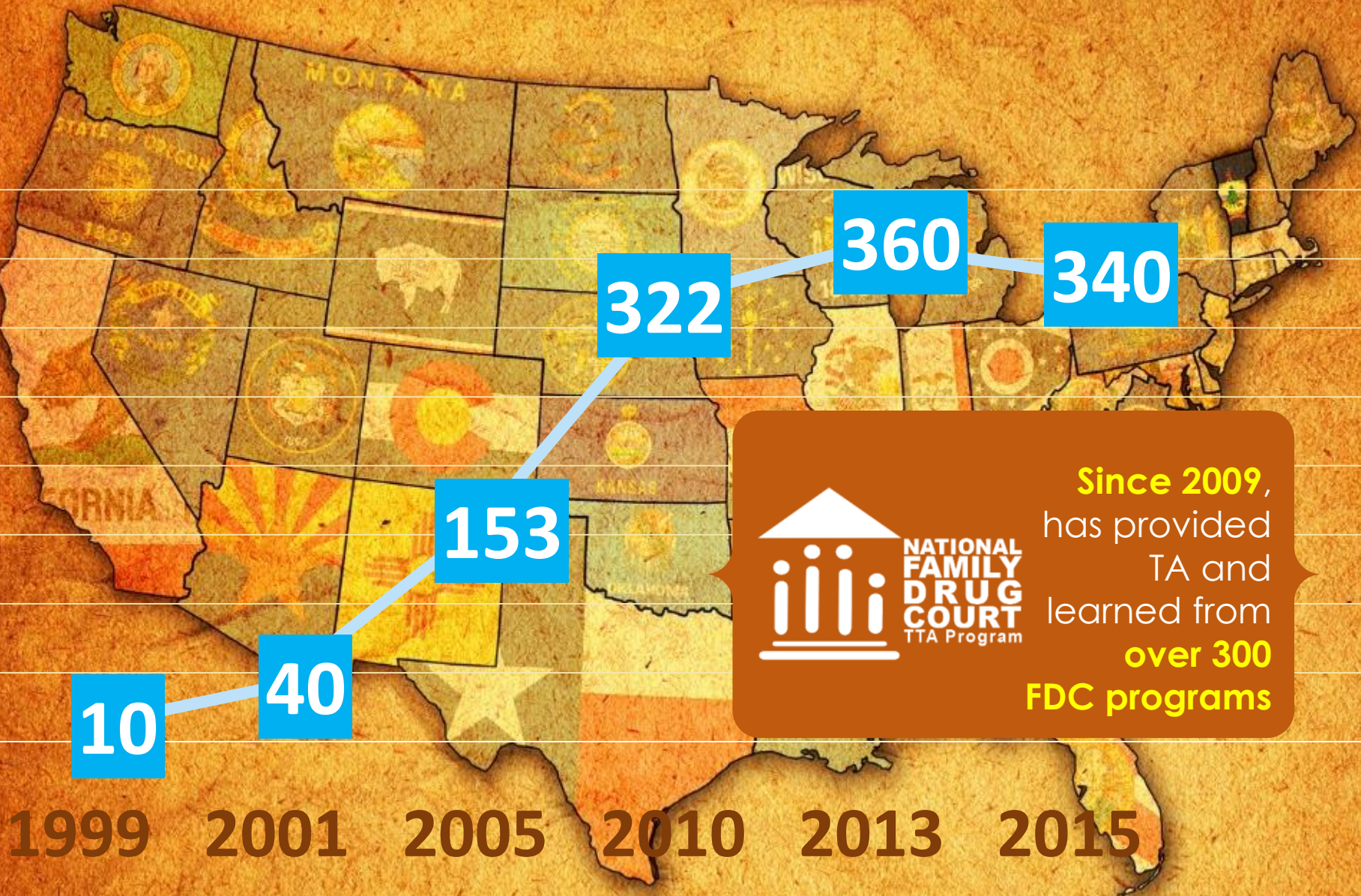
Family Drug Courts

Responding to the need for practice and policy solutions addressing the Adoption and Safe Families Act (ASFA) timelines using collaborative courts to strengthen families

FDC Movement



FDC Movement



Since 2009,
has provided
TA and
learned from
over 300
FDC programs

Important Practices of FDCs

7

- System of identifying families

- Timely access to assessment and treatment services

- Increased management of recovery services and compliance with treatment

- Improved family-centered services and parent-child relationships

- Increased judicial oversight

- Systematic response for participants – contingency management

- Collaborative non-adversarial approach grounded in efficient communication across service systems and court

Important Practices of FDCs

**How are they
identified and
assessed?**

**How are they
supported and
served?**

**How are cases
and outcomes
monitored?**

FDC Model

Judicial Oversight



Drug Court
Hearings



Therapeutic
Jurisprudence



Intensive Case
Management &
Recovery Support



Enhanced
Family-Based
Services

*2nd Edition - Research
Update - Just Released*

FDC Guidelines



To download a copy today visit our website:

<http://www.cffutures.org/files/publications/FDC-Guidelines.pdf>

FDC Recommendations

Shared Outcomes

Agency Collaboration

- Interagency Partnerships
- Information Sharing
- Cross System Knowledge
- Funding & Sustainability

Client Supports

- Early Identification & Assessment
- Needs of Adults
- Needs of Children
- Community Support

Shared Mission & Vision

FDC Movement



Body of Knowledge

We know a lot more now

**Cross-system collaboration
How to serve children and families
= improving outcomes**

Adult Drug
Courts
Research

Regional
Partnership
Grants

Children Affected by
Methamphetamines

Prevention and Family
Recovery Program

Statewide Systems
Reform Program

How Collaborative Policy and Practice Improves

We know more....

Recovery

Remain at home

Reunification

Re-occurrence

Re-entry

5Rs



National FDC Outcomes

Regional Partnership Grant Program (2007 – 2012)

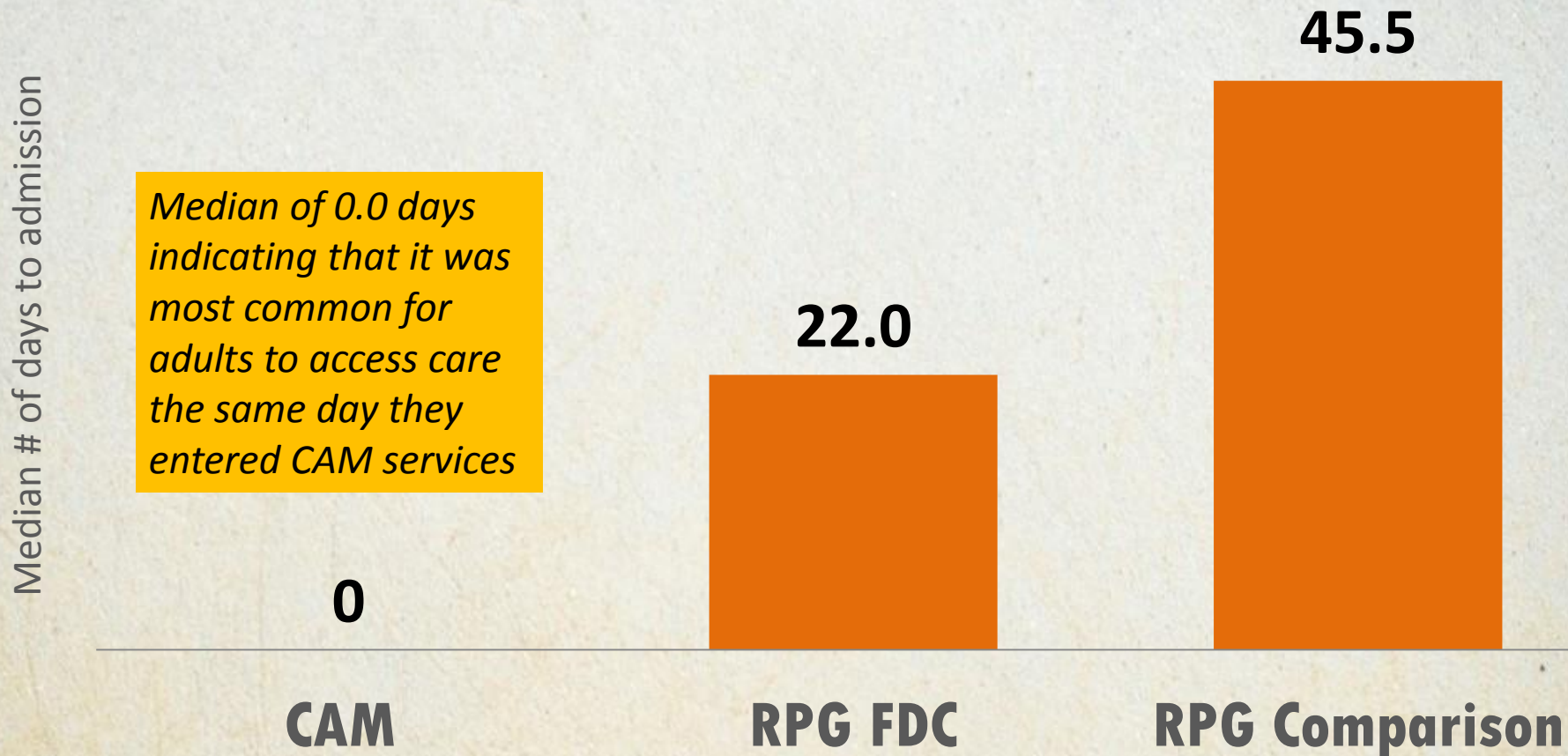
- 53 Grantee Awardees funded by Children's Bureau
- Focused on implementation of wide array of integrated programs and services, including 12 FDCs
- 23 Performance Measures
- Comparison groups associated with grantees that *did implement* FDCs

Children Affected by Methamphetamine Grant (2010 – 2014)

- 11 FDC Awardees funded by SAMHSA
- Focused on expanded/enhanced services to children and improve parent-child relationships
- 18 Performance Indicators
- Contextual Performance Information included for indicators where state or county-level measures are similar in definition and publicly available

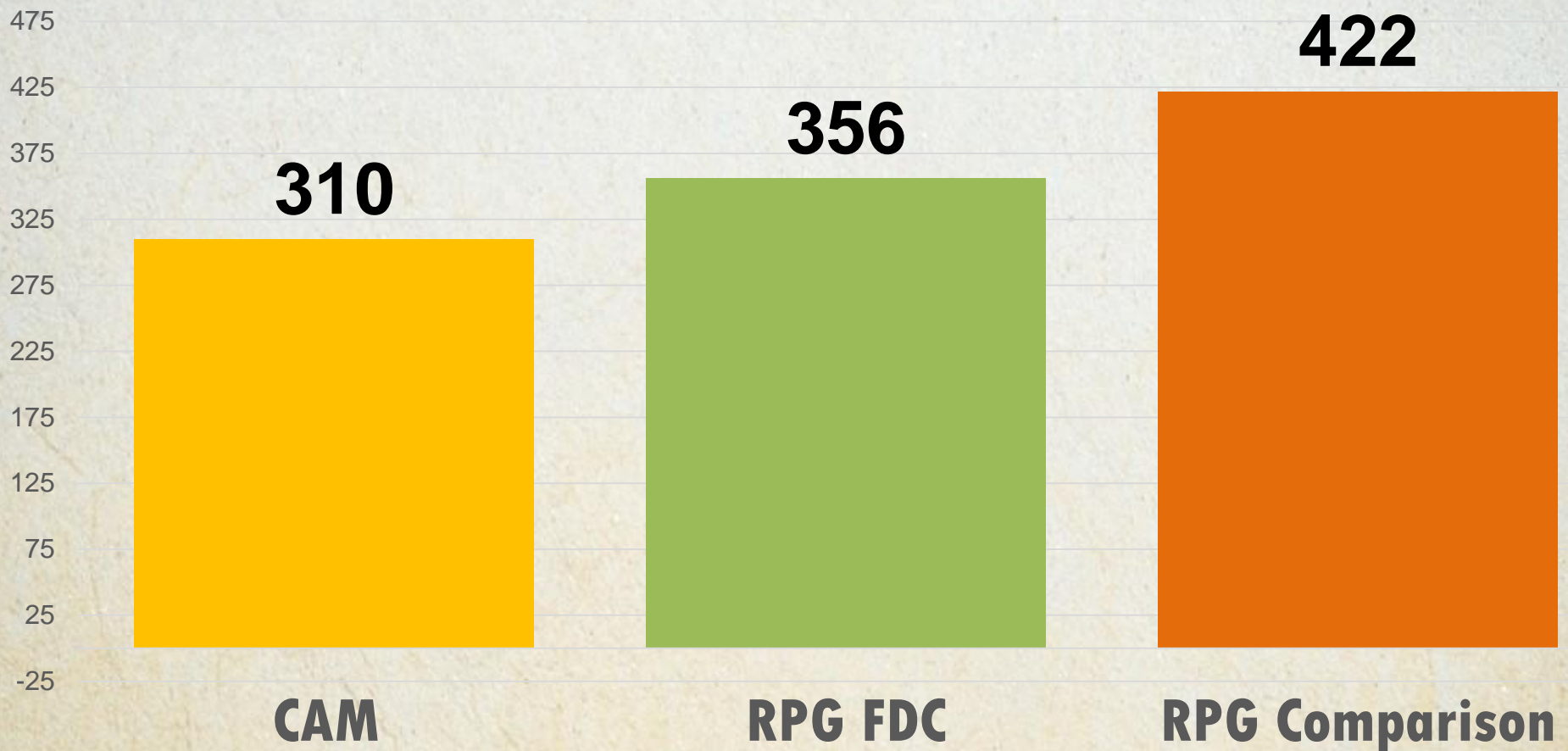


Recovery— Access to Treatment



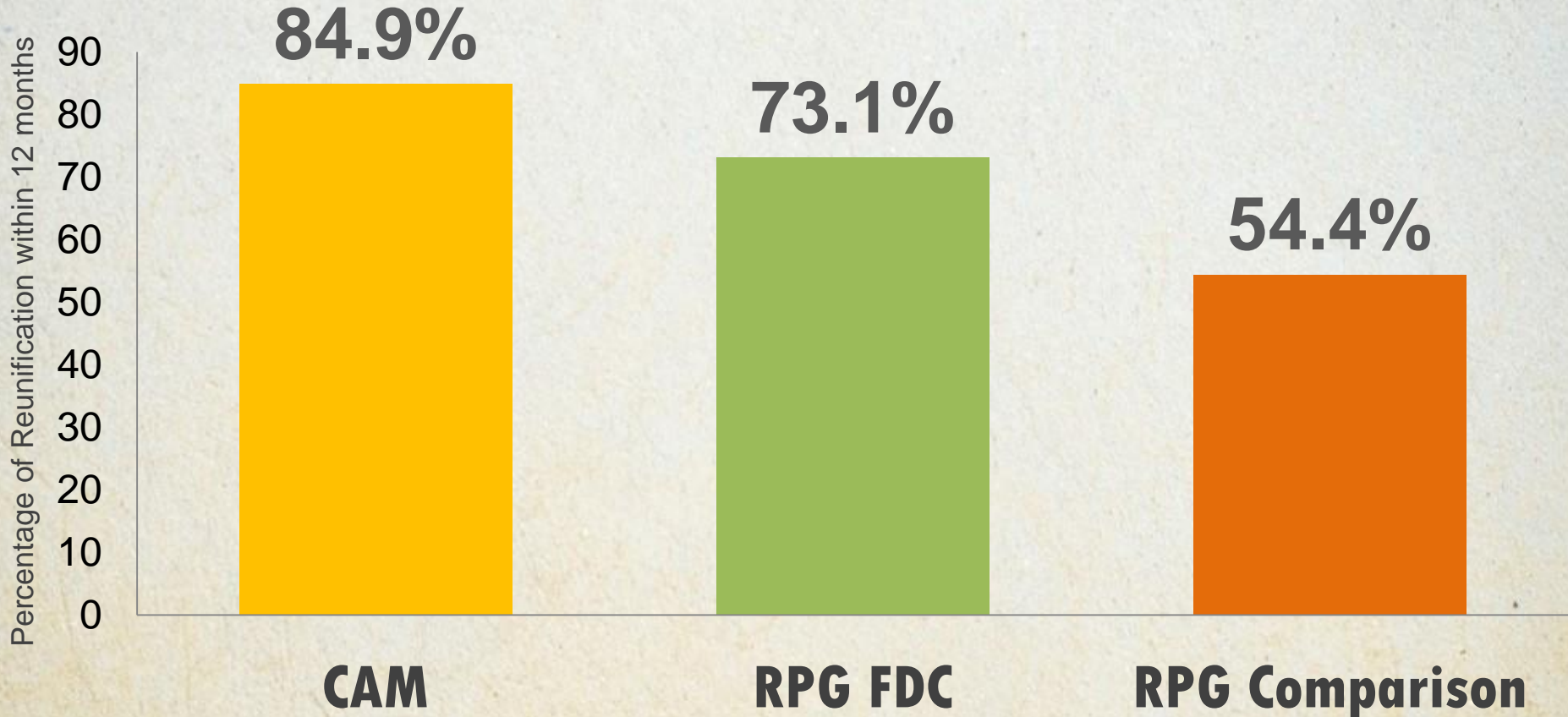
Remain at Home

Median Length of Stay (days) in Out-of-Home Care



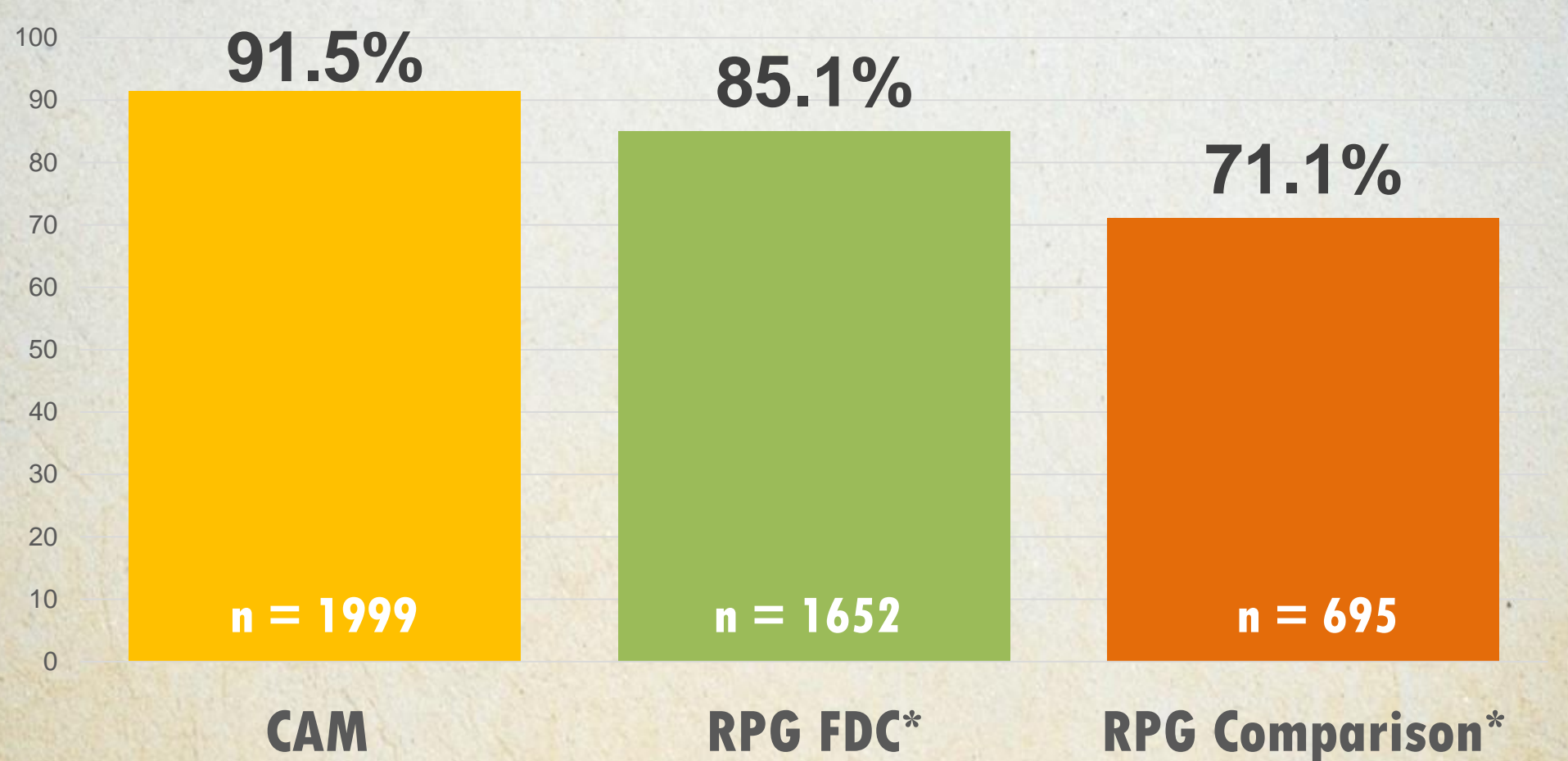
Reunification Rates

Percentage of Reunification within 12 months



Remain at Home

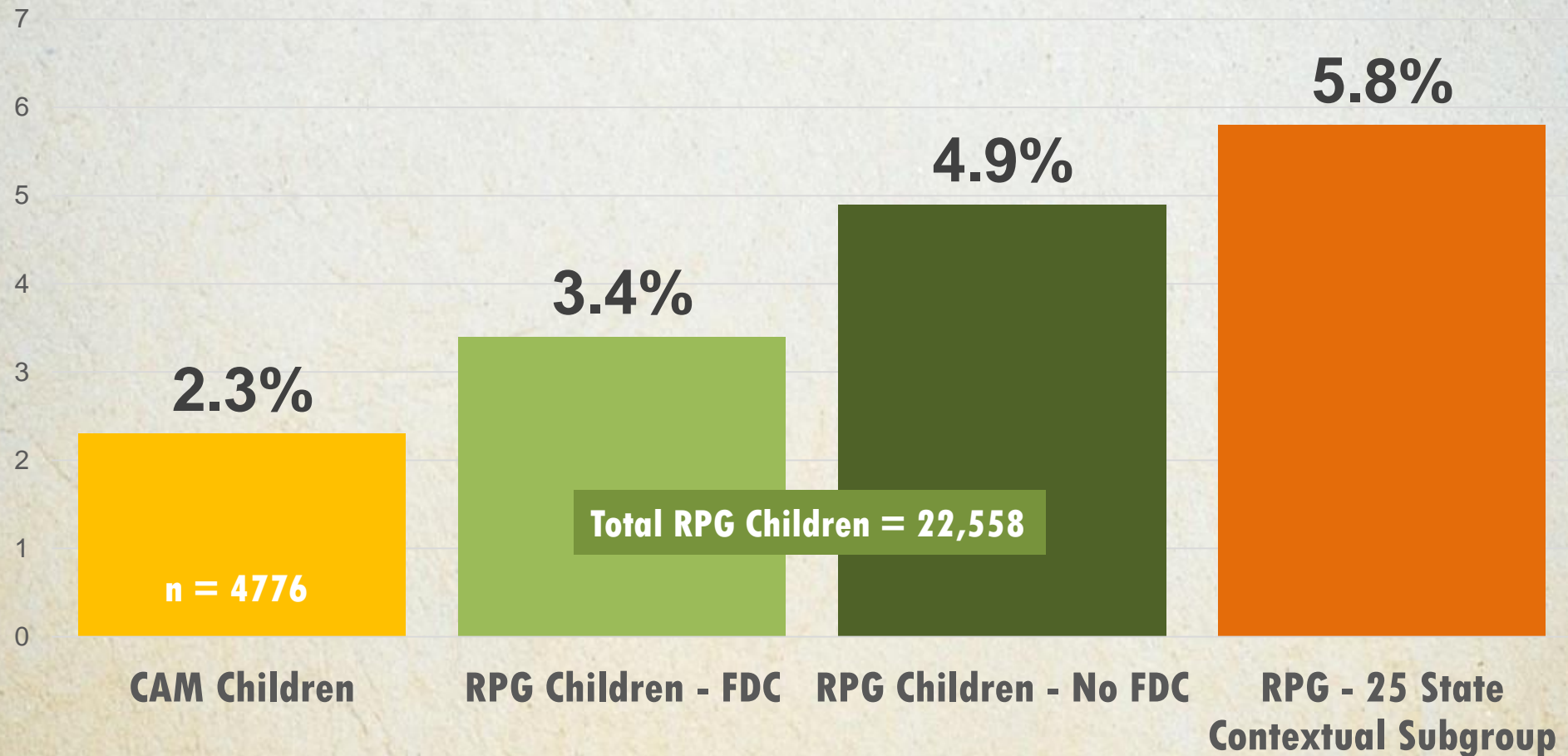
Percentage of children who remained at home throughout program participation



** This analysis is based on 8 RPG Grantees who implemented an FDC and submitted comparison group data*

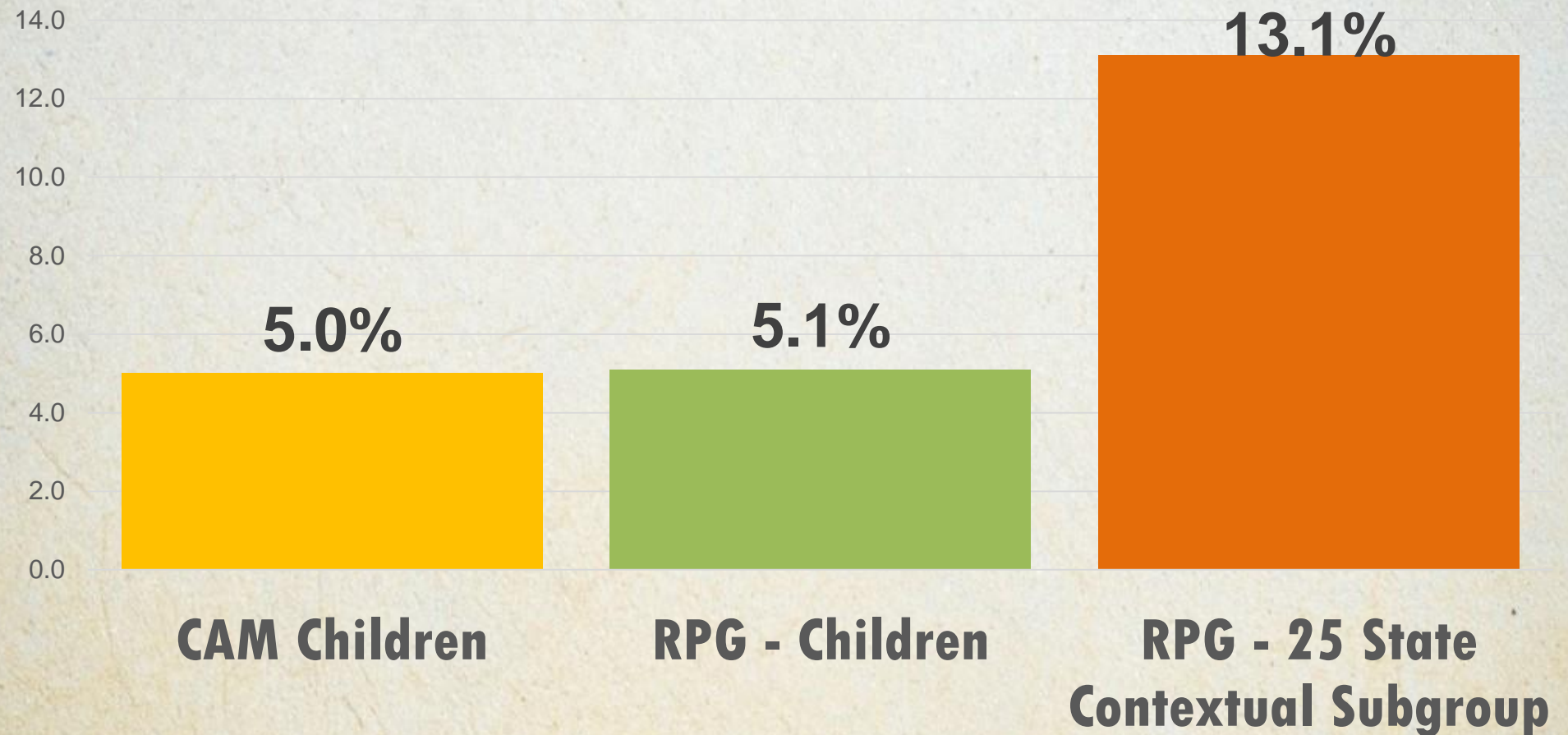
Re-occurrence of Child Maltreatment

Percentage of children who had substantiated/indicated maltreatment within 6 months of program entry



Re-entries into Foster Care

Percentage of children re-unified who re-entered foster care within 12 months





Cost Savings

Per Family

- \$ 5,022 Baltimore, MD
- \$ 5,593 Jackson County, OR
- \$ 13,104 Marion County, OR

Per Child

- \$ 16,340 Kansas
- \$ 26,833 Sacramento, CA
- \$ 9,003 Clark County, WA

FDC Movement



Body of Knowledge

We know a lot more now

Cross-system collaboration
How to serve children and families
= improving outcomes

Early
Screening and
Assessment

Recovery Support
and Family-Based
Services

Monitoring Cases
and Outcomes

Governance &
Leadership for
Systems Change

FDC Movement



Body of Knowledge

We know a lot more now

**How should families be
identified and assessed for
FDC?**

1999

2016

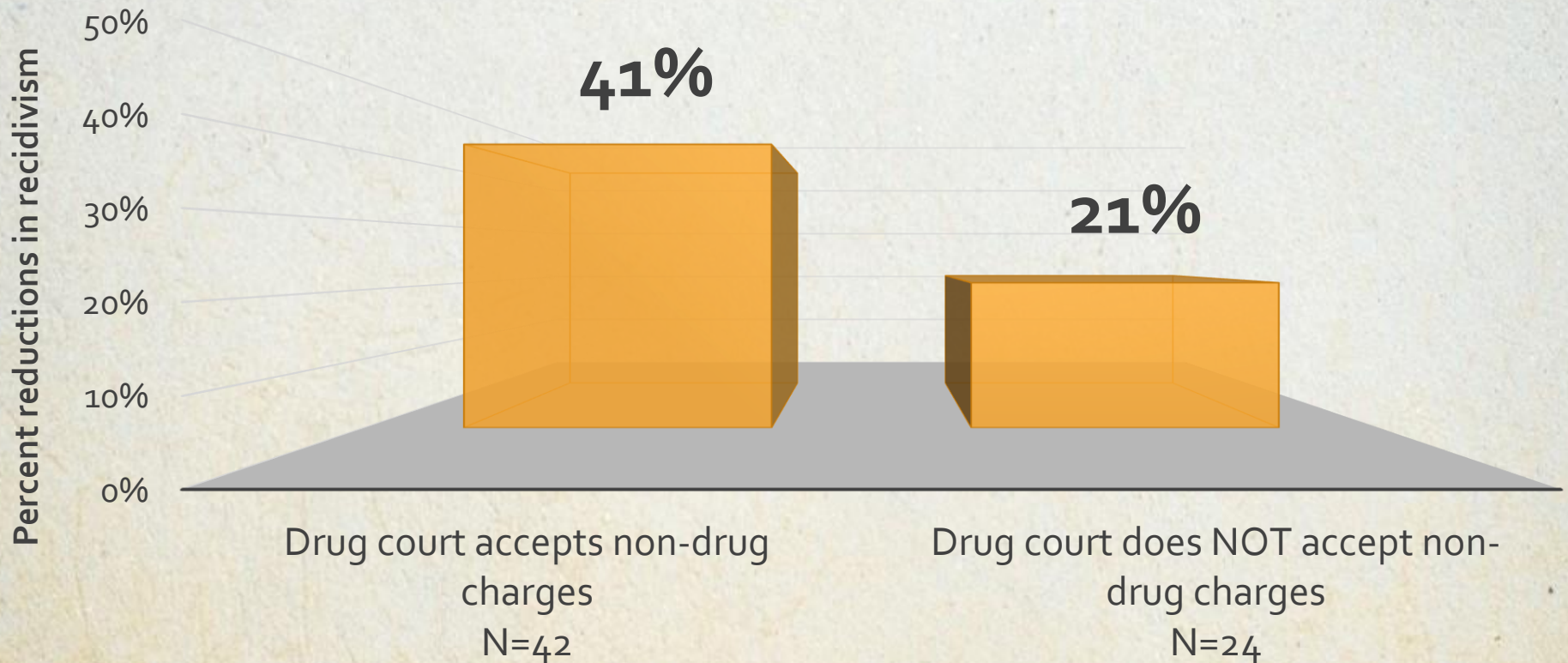
Who do FDC's Work For?

Studies Show Equivalent or Better Outcomes:

- Co-occurring mental health problems
- Unemployed
- Less than a high school education
- Criminal history
- Inadequate housing
- Risk for domestic violence
- Methamphetamine, crack cocaine, or alcohol
- Previous child welfare involvement



Drug Courts That Accepted Participants With Charges in Addition to Drug Charges Had Nearly Twice the Reductions in Recidivism and 30% higher cost savings

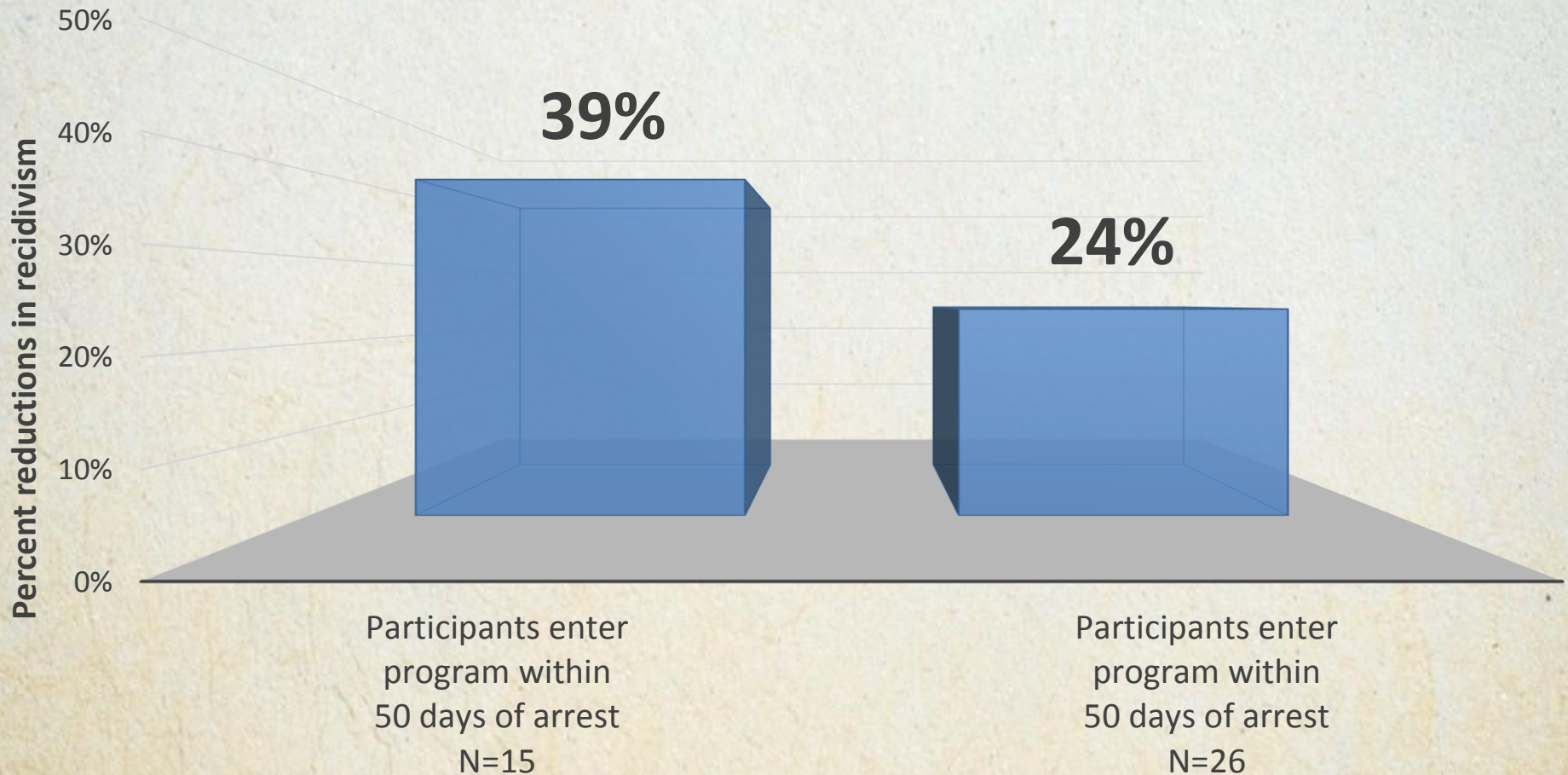


Note 1: Difference is significant at $p < .05$

Note 2: Non-drug charges include property, prostitution, violence, etc.



Drug Courts in Which Participants Entered the Program within 50 Days of Triggering Event Had **63% Greater Reductions in Recidivism**



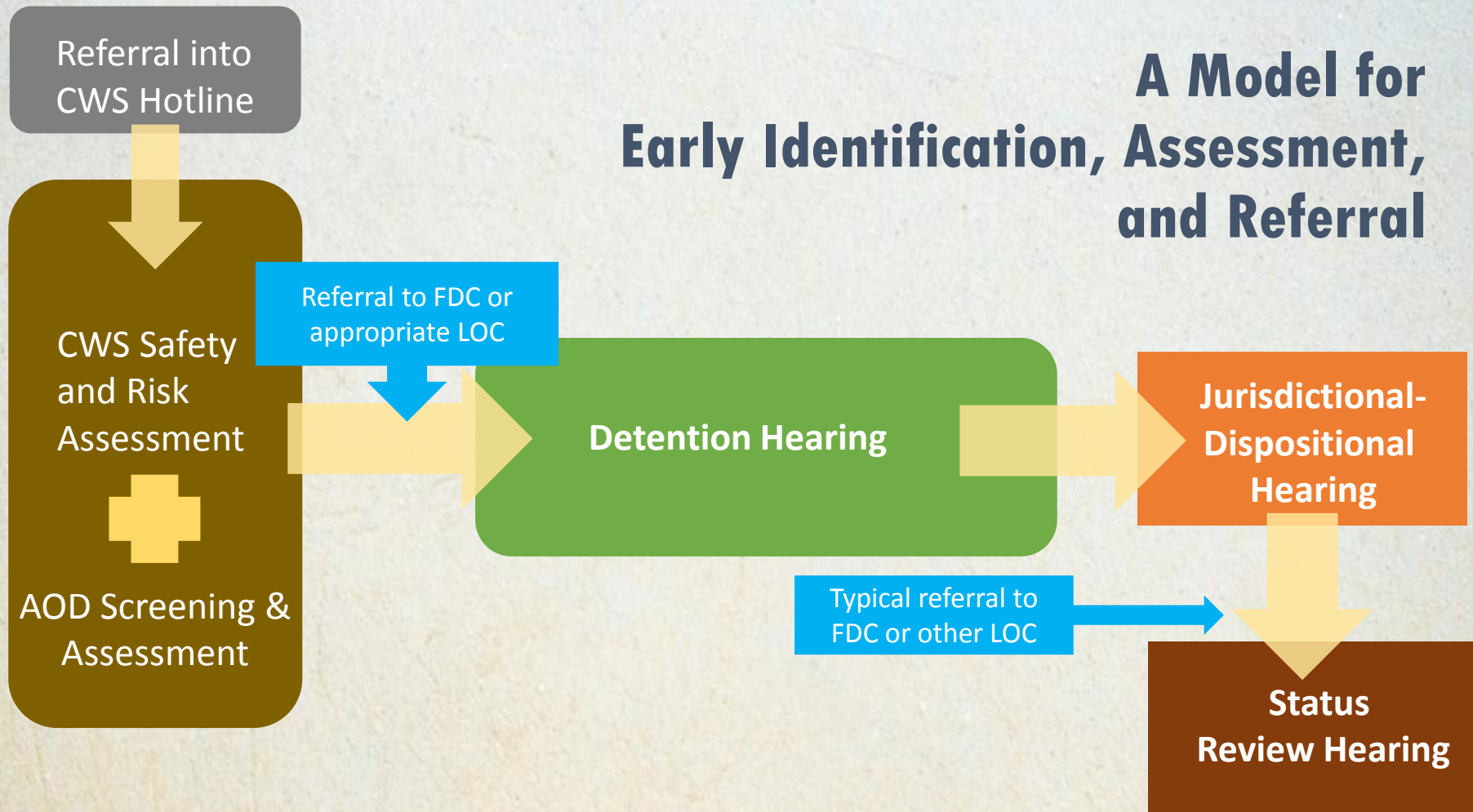
Note: Difference is significant at $p < .05$



**Since *timely*
engagement and
access to
assessment and
treatment
matters...**

**How can
identification
and screening be
moved up as
*early as possible?***

A Model for Early Identification, Assessment, and Referral



What is Screening?

- ▶ Determines the presence of an issue – is substance use a factor?
- ▶ Generally results in a “yes” or “no”
- ▶ Determines whether a more in-depth assessment is needed
- ▶ Standardized set of questions to determine the risk or probability of an issue
- ▶ Brief and easy to administer, orally or written
- ▶ Can be administered by a broad range of people, including those with little clinical expertise

4 Prong – Screening

- Tool
- Signs & symptoms
- Corroborating reports
- Drug screen

Yes

**Proceed to
assessment**





Signs & Symptoms

- Physical
- Behavioral
- Psychological

Corroborating Reports

- Police
- CWS
- Hospital



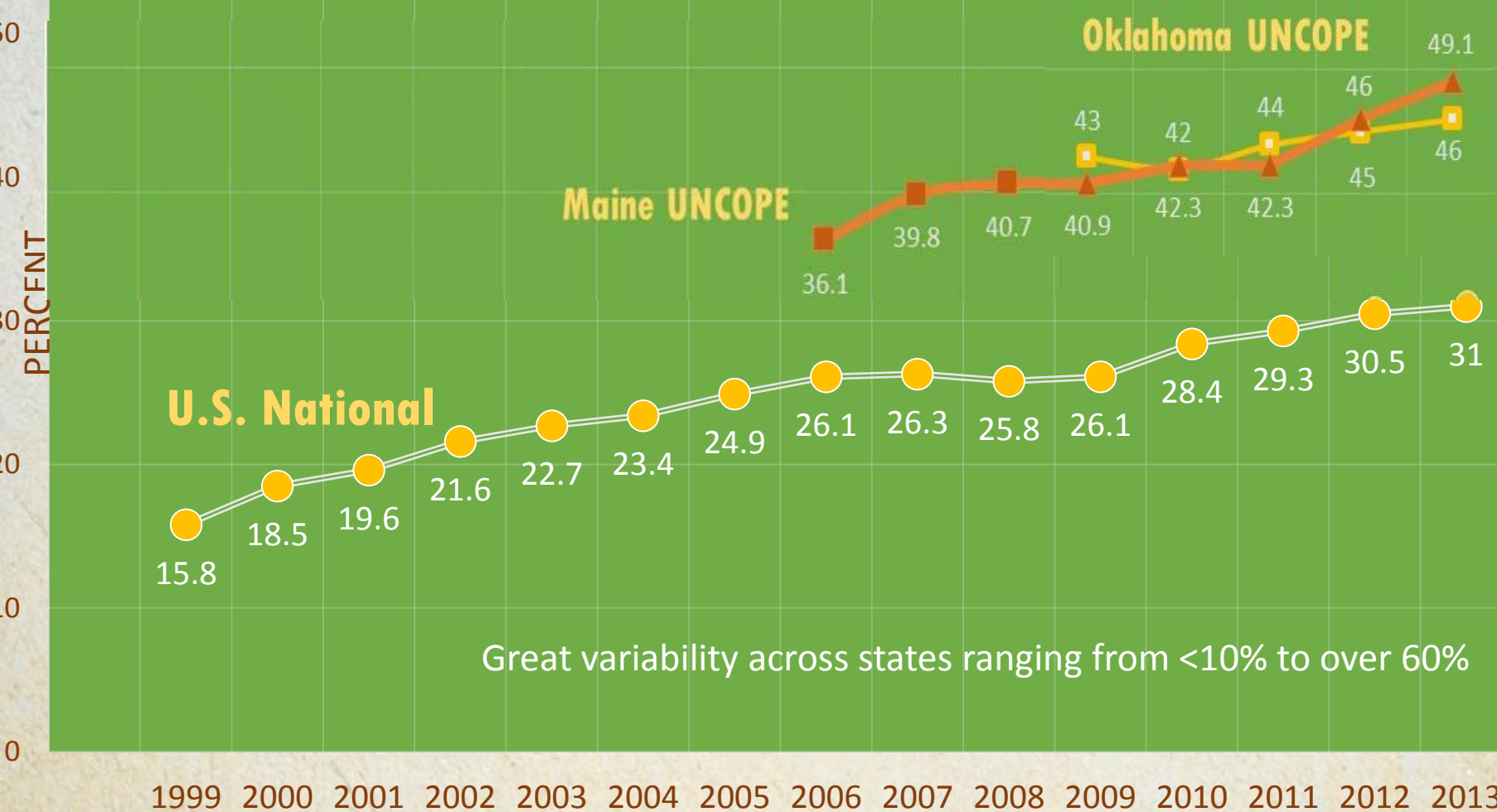
TOOL EXAMPLES

- **GAIN-SS (Global Appraisal of Individual Needs Short Screener):**
Composed of 23 items to be completed by the client or staff and designed to be completed in 5 minutes
- **UNCOPE:** 6-item screen designed to identify alcohol and/or drug substance use and designed to be completed in 2 minutes
- **CAGE:** 4-item screen designed to identify alcohol and/or drug substance use and designed to be completed in 2 minutes

It's Not the Tool, It's the Team!

<https://www.ncsacw.samhsa.gov/resources/SAFERR.aspx>

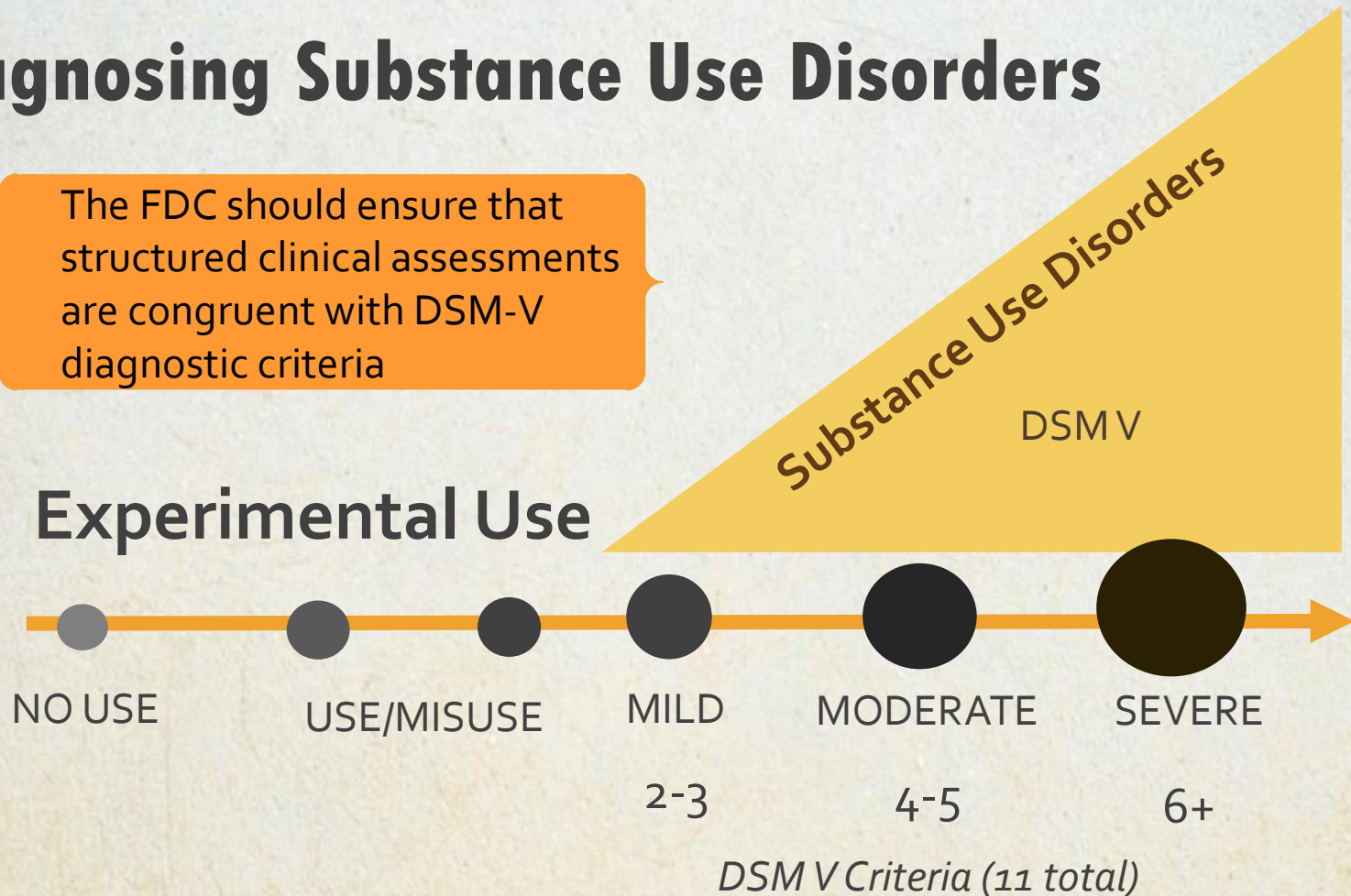
PARENTAL AOD AS REASON FOR REMOVAL IN THE US 1998 - 2013



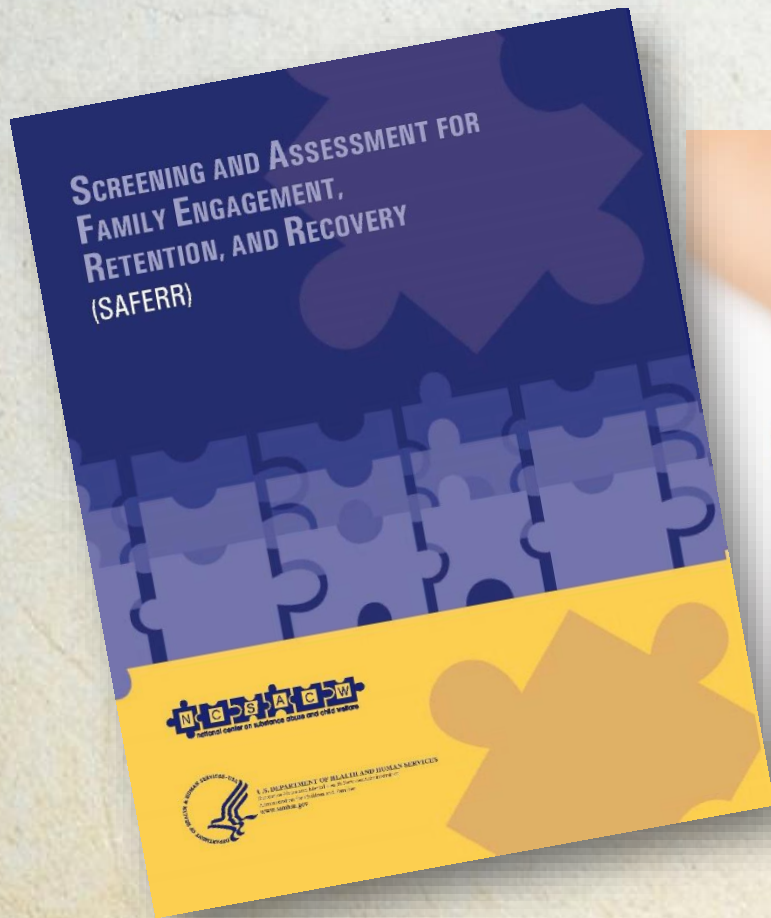
Great variability across states ranging from <10% to over 60%

Diagnosing Substance Use Disorders

The FDC should ensure that structured clinical assessments are congruent with DSM-V diagnostic criteria



Resource: Screening and Assessment for Family Engagement, Retention, and Recovery (SAFERR)



To download a copy, please visit:

<http://www.ncsacw.samhsa.gov/files/SAFERR.pdf>

FDC Movement



Body of Knowledge

We know a lot more now

**Once identified, how families
should be served and
supported**

1999

2016

Rethinking Engagement



*If you build it,
will they come?*

**Effective FDCs focus on
effective engagement**

Rethinking Treatment Readiness



Re-thinking “rock bottom”

Addiction as an elevator



“Raising the bottom”

Titles and Models

- Peer Mentor
- Peer Specialist
- Peer Providers
- Parent Partner

- Recovery Support Specialist
- Substance Abuse Specialist
- Recovery Coach
- Recovery Specialist
- Parent Recovery Specialist

**Experiential Knowledge,
Expertise**

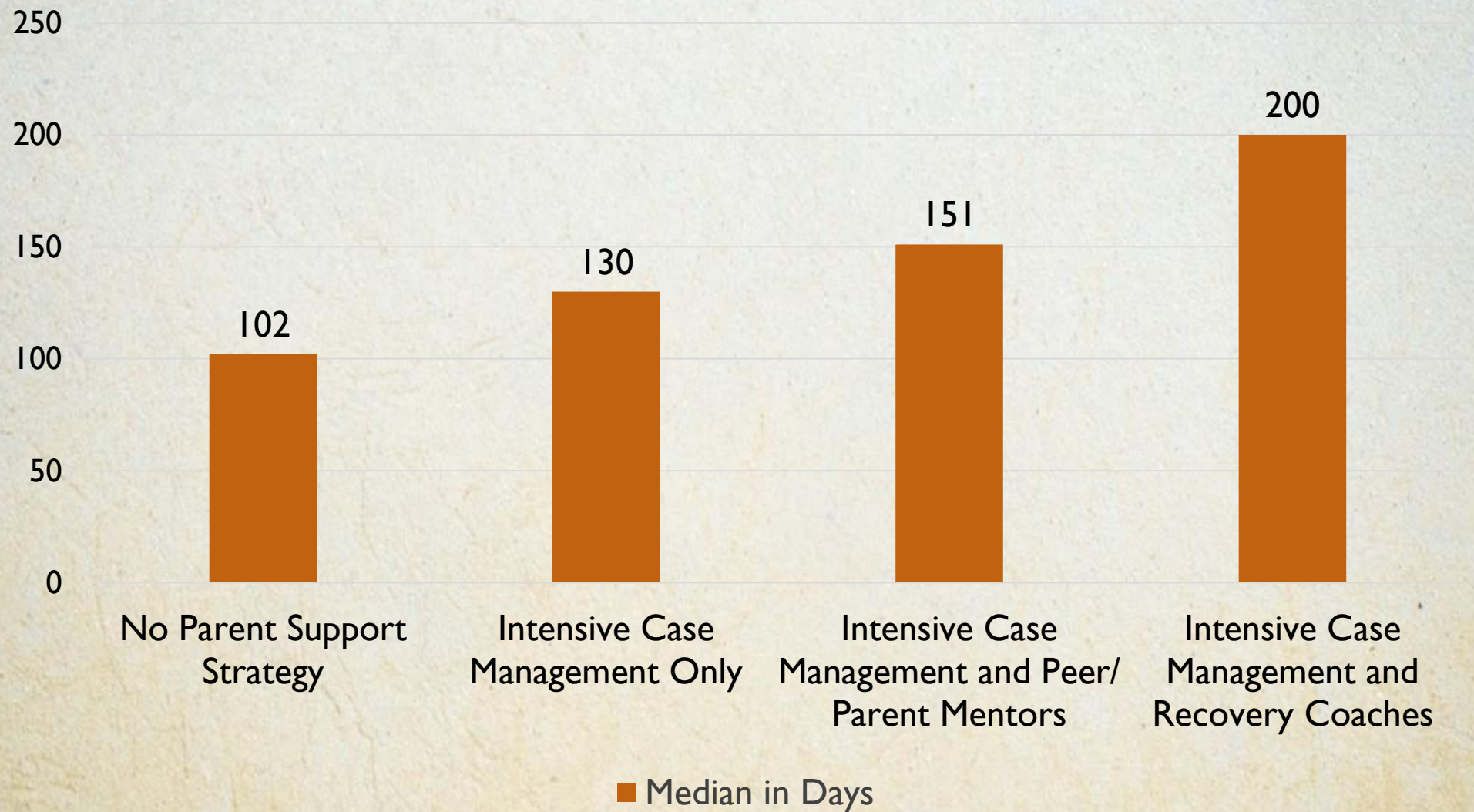
**Experiential Knowledge, Expertise
+ Specialized Trainings**

YOU NEED TO ASK:

What does our program and community need?

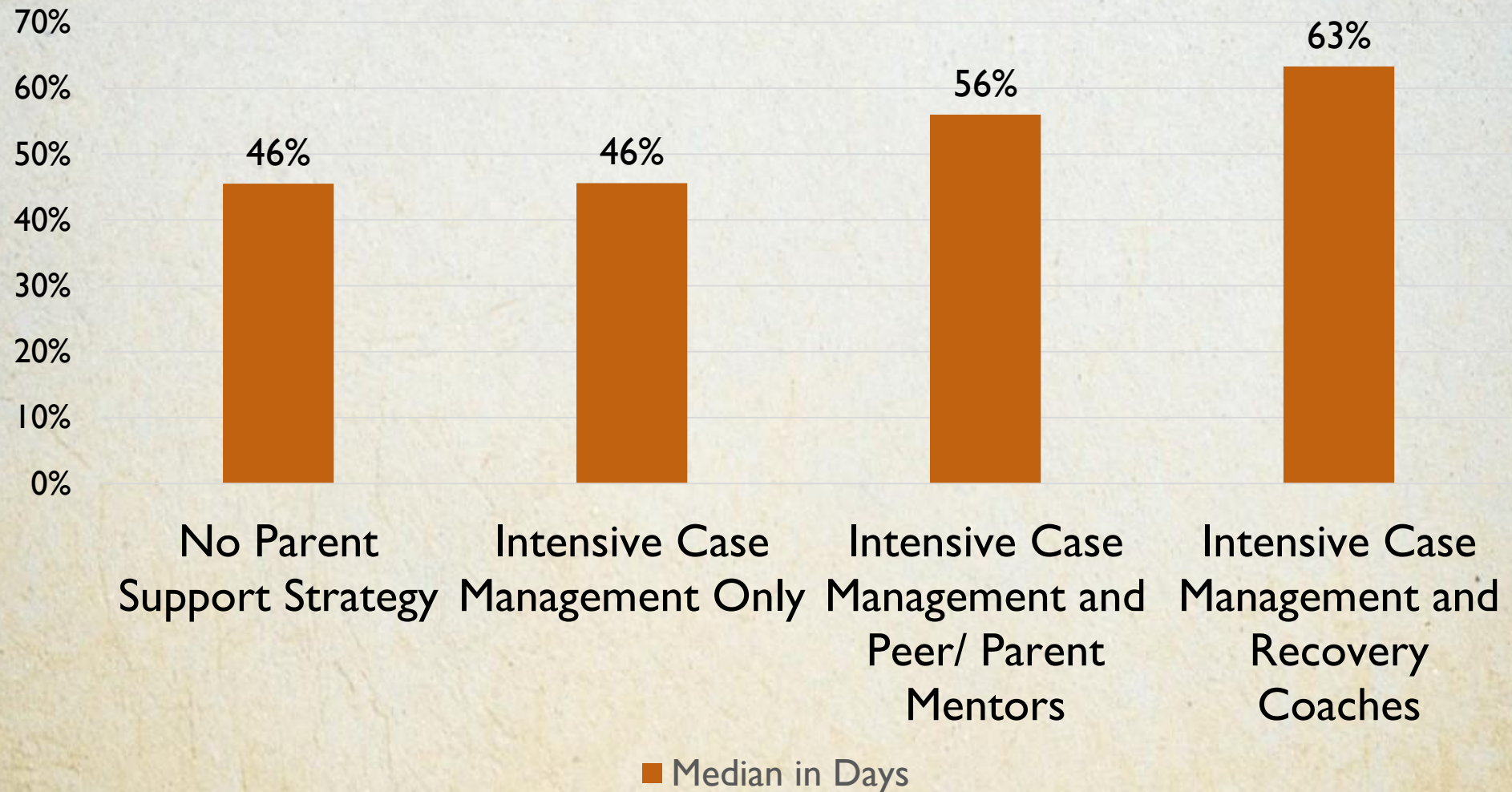


Median Length of Stay in Most Recent Episode of Substance Abuse Treatment after RPG Entry by Grantee Parent Support Strategy Combinations





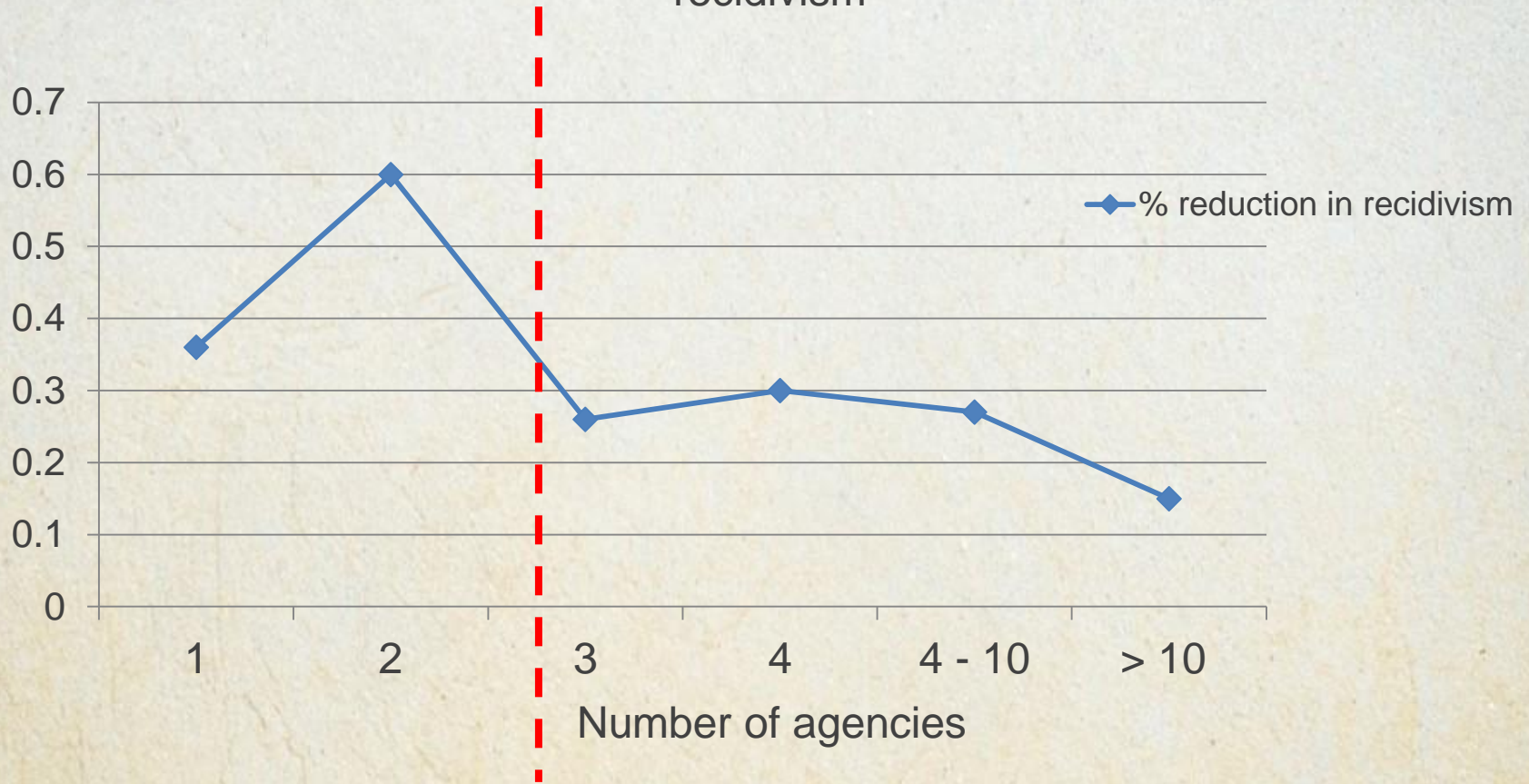
Substance Abuse Treatment Completion Rate by Parent Support Strategies





Drug Courts That Used One or Two Primary Treatment Agencies Had 76% Greater Reductions in Recidivism

Fewer treatment providers is related to greater reductions in recidivism



Note: Difference is significant at $p < .05$



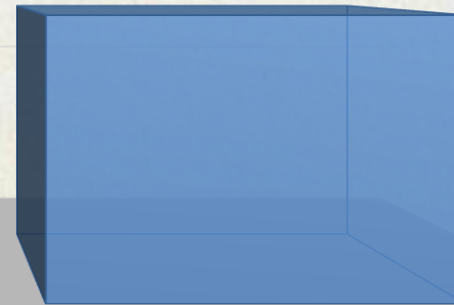
Drug Courts That Require a Minimum of 12 Months Length of Stay Had Double the Cost Savings

% Increase in Cost Savings

29%



13%



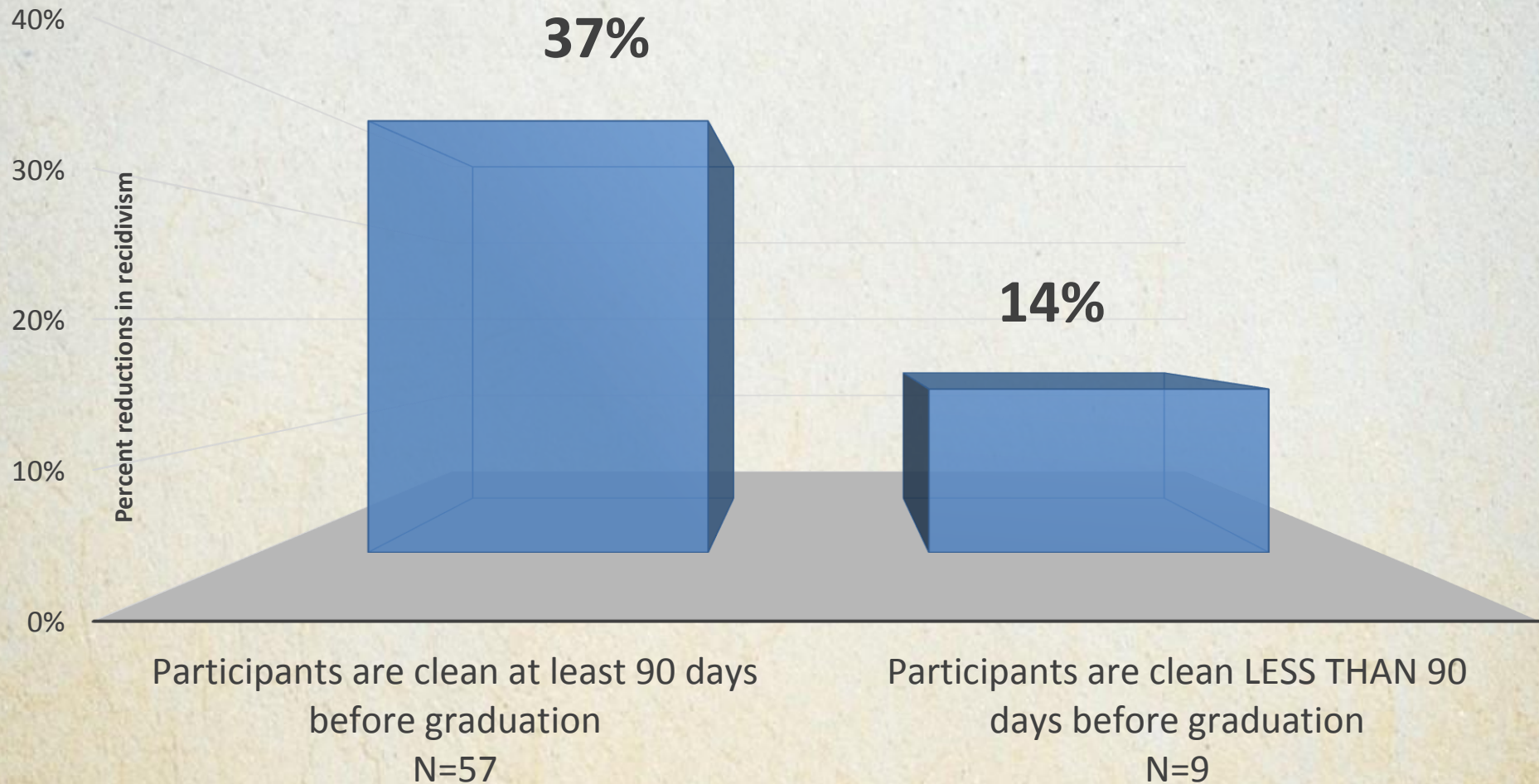
LOS 12 Months or Greater
N = 43

LOS Less Than 12 Months
N=10

Note: Difference is significant at $p < .1$



Drug Courts That Required Greater Than 90 Days of Abstinence Had 3 Times Greater Reduction in Recidivism and Substantial Cost Savings

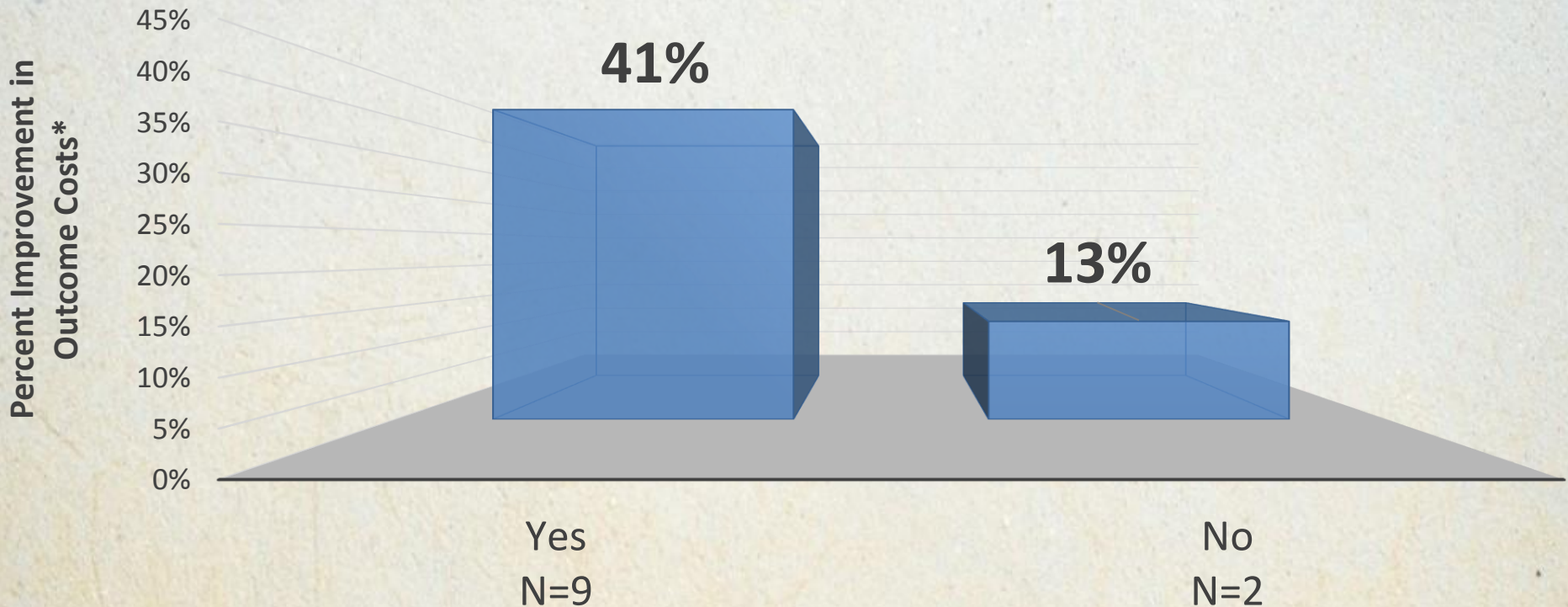


Note: Difference is significant at $p < .05$



Drug Courts That Included a Focus on Relapse Prevention Had Over 3 Times Greater Savings

Drug Court Has a Phase that Focuses on Relapse Prevention



*"Percent improvement in outcome costs" refers to the percent savings for drug court compared to business-as-usual

Note: Difference is significant at $p < .05$




#1

DISCUSSION

**RECOMMENDATION 5:
DEVELOP PROCESS FOR EARLY IDENTIFICATION
AND ASSESSMENT**

5-10 MINUTES



Inspiring Outcomes: Lessons Learned from Family Drug Courts Part II

Phil Breitenbacher, MSW
Director, Family Drug Court Programs

Alexis Balkey, MPA, RAS
Program Manager, National Family Drug
Court Training & Technical Assistance
Program



CWLA 2016 National Conference
**Advancing Excellence in Practice & Policy:
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Substance Use**

August 2, 2016 | Orange County, California



Developmental impact

Generational impact

Addiction affects the whole family

Psycho-social impact

Impact on parenting

FDC Practice Improvements

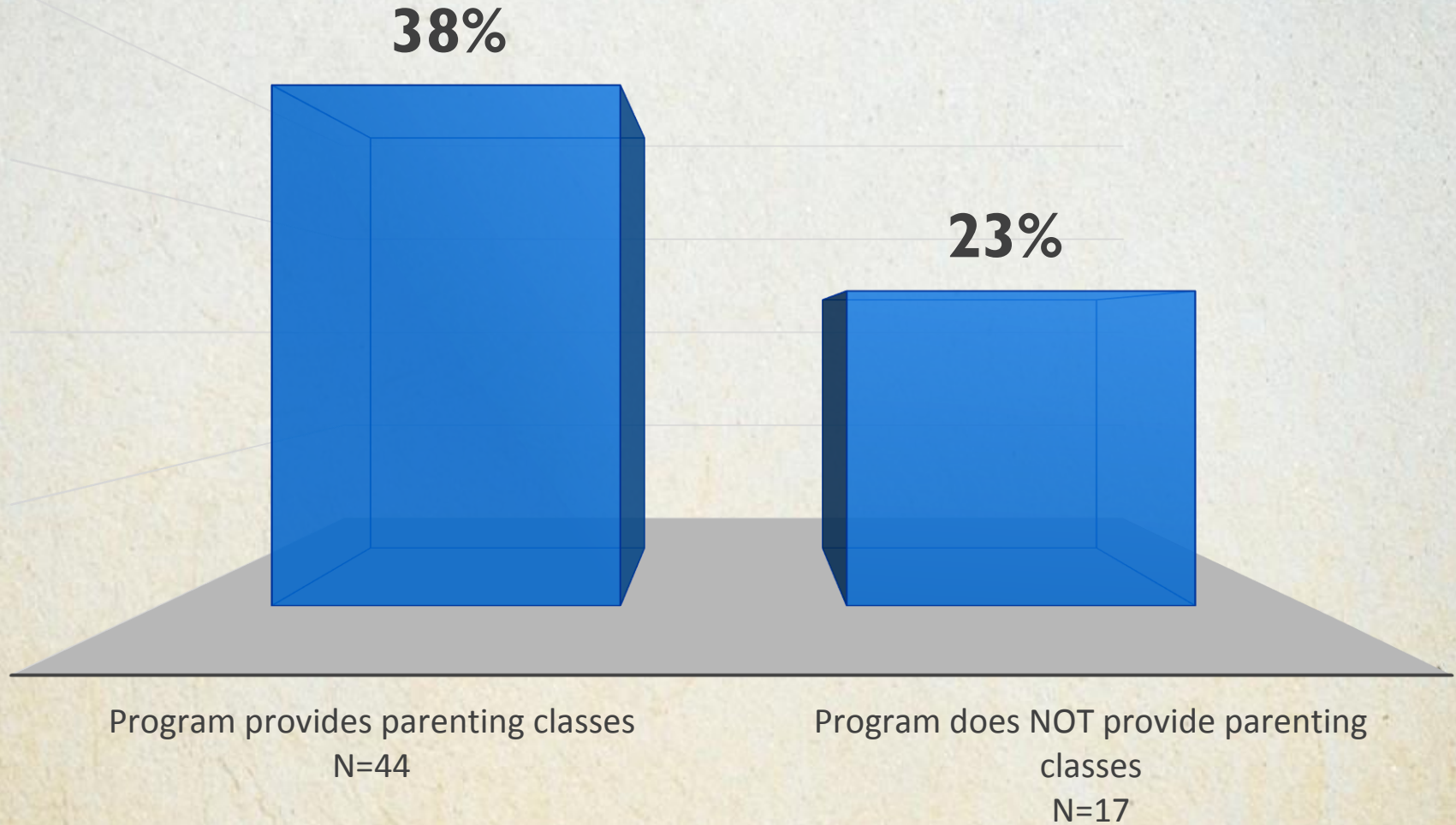
Approaches to child well-being in FDCs need to change





Drug Courts That Offer Parenting Classes Had 68% Greater Reductions in Recidivism and 52% Greater Cost Savings

% Reduction in Recidivism

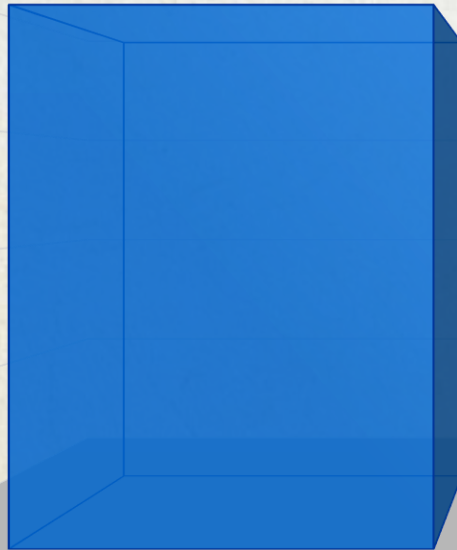




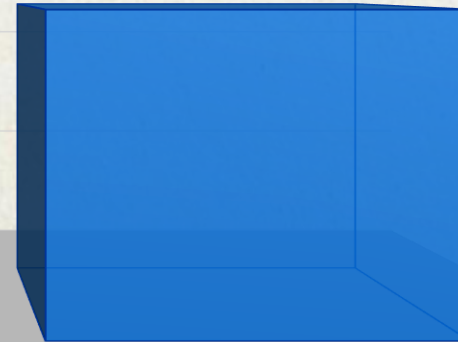
Drug Courts That Offer Family Counseling Had 65% Greater Reductions in Recidivism

% Reduction in Recidivism

38%



23%



Offered Family Counseling
N = 35

No Family Counseling
N = 15

Sacramento County Family Drug Court Programming



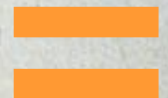
- **Dependency Drug Court (DDC)**
 - Post-File
- **Early Intervention Family Drug Court (EIFDC)**
 - Pre-File



**Parent-child
parenting
intervention**



**Connections
to community
supports**



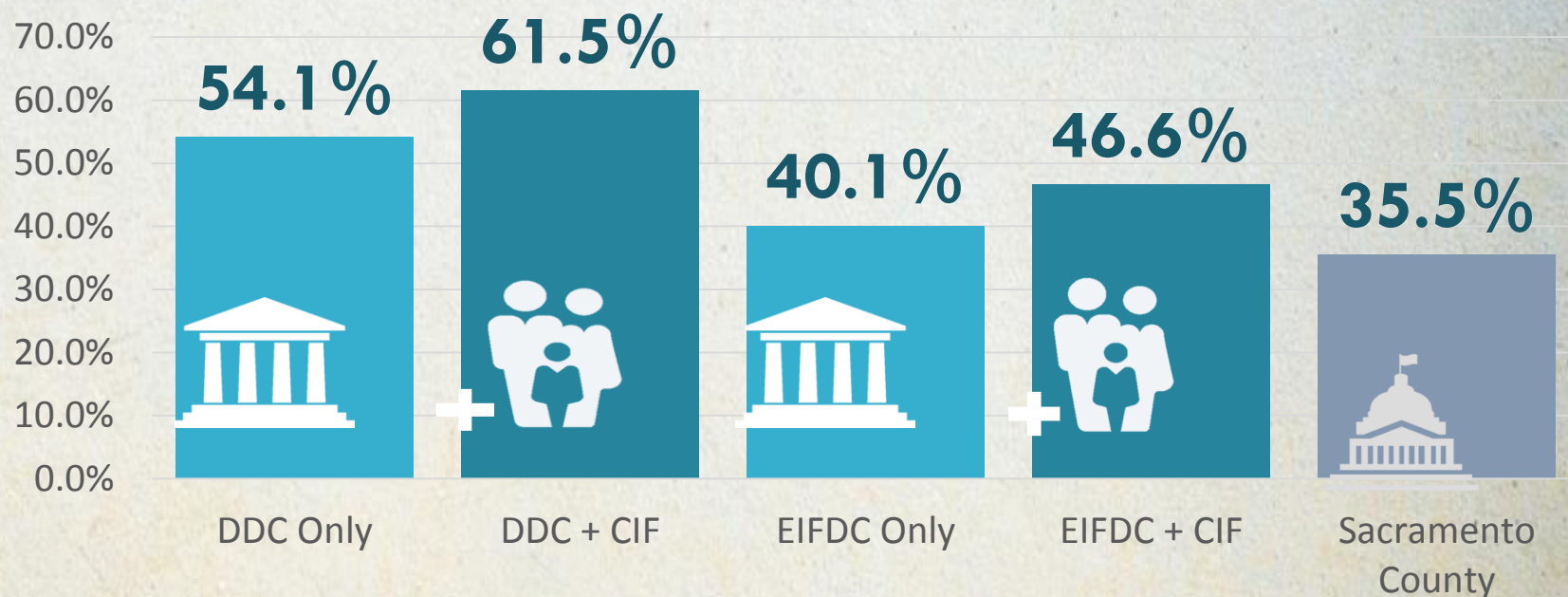
**Improved
outcomes**

**DDC has served over 4,200 parents & 6,300 children
EIFDC has served over 1,140 parents & 2,042 children
CIF has served over 540 parents and 860 children**

Recovery

Treatment Completion Rates

Note: All treatment episodes represented here

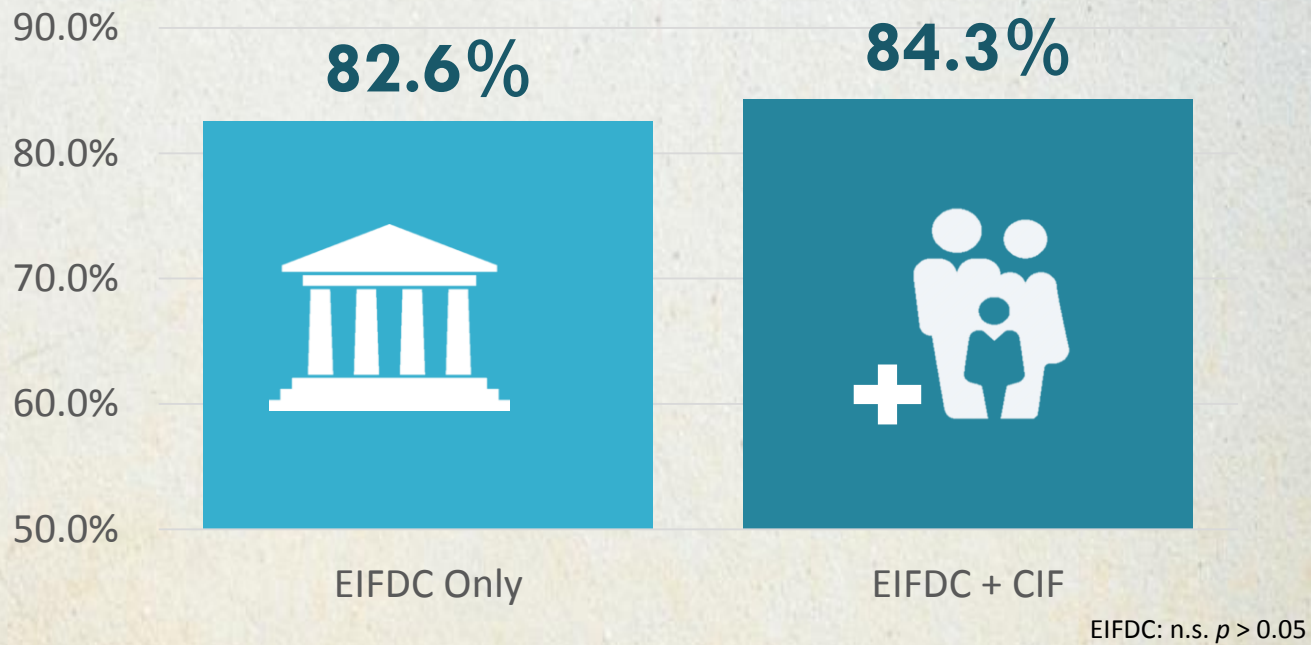


DDC and EIFDC: $p < 0.05$

Treatment completion rates were higher for parents in DDC and EIFDC than the overall County rate. Parents provided CIF Enhancement were significantly more likely to successfully completed treatment.

Remain at Home

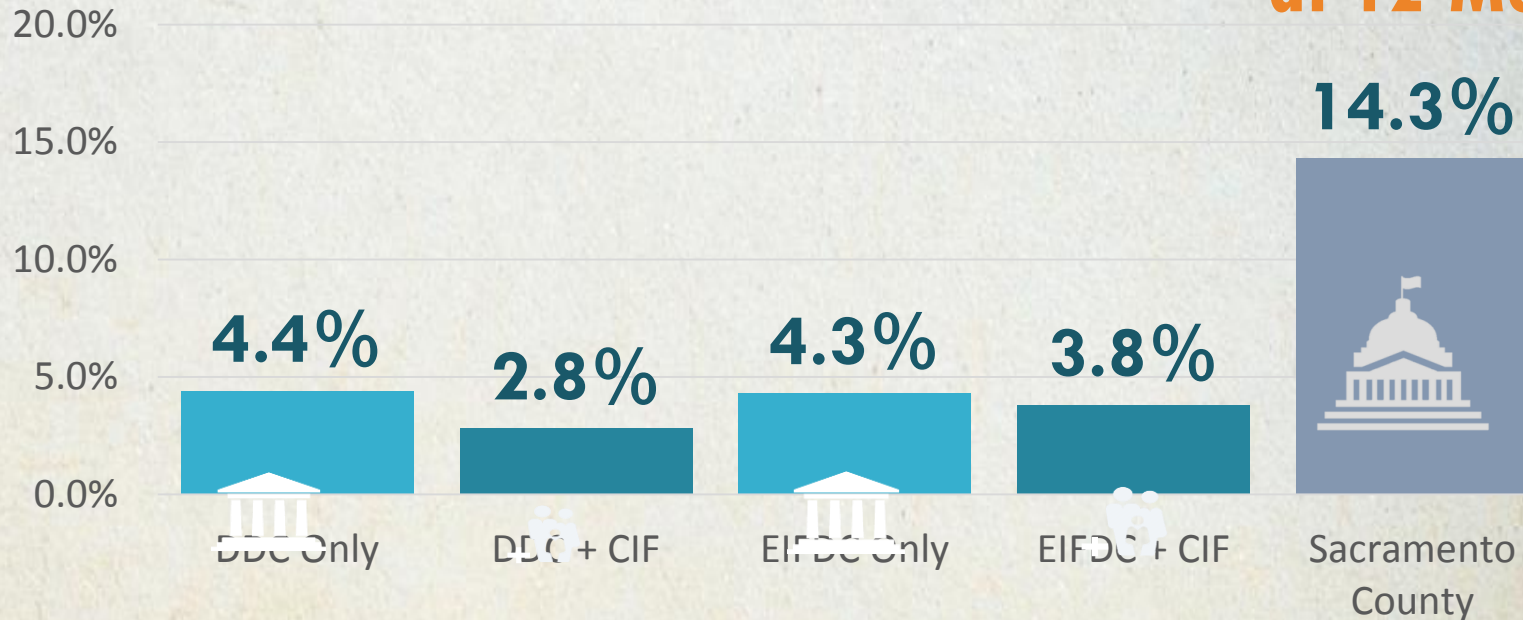
Percent of Children Remaining at Home



Almost all children in EIFDC were able to stay in their parents care. Families provided the CIF Enhancement were on average more likely to have children stay home.

Re-occurrence

Re-occurrence of Maltreatment at 12 Months

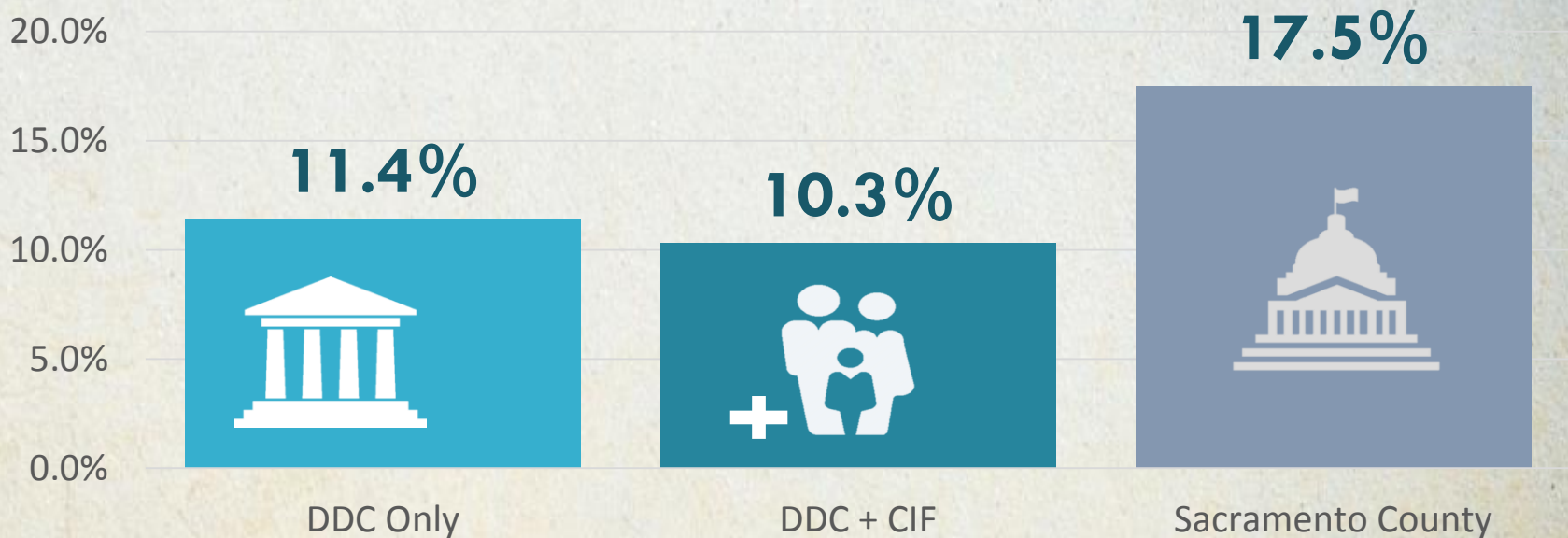


DDC and EIFDC: n.s. $p > 0.05$

Families in DDC or EIFDC were less likely than the larger Sacramento County population to experience reoccurrence of child abuse and/or neglect.

Re-Entry

Re-Entry into Foster Care 12 Months after Reunification



Families in DDC were less likely than the larger Sacramento County population to experience removals of children following reunification.

DDC : n.s. $p > 0.05$

Other Service Enhancements



- Therapeutic-based parent-child interventions
- Trauma-focused interventions
- Developmental and behavioral interventions
- Quality visitation and family time
- Family functioning assessment tools – N. Carolina Family Assessment Scale (NCFAS)

Check it out!

Session F-1 | Tuesday, August 2
2:30 - 4:00 pm

**So How Do You Know They Are Ready?
Key Considerations for Assessing Families in Recovery
for Reunification**





#2

DISCUSSION

**RECOMMENDATION 6-7:
ADDRESS THE NEEDS OF PARENTS
ADDRESS THE NEEDS OF CHILDREN**

5-10 MINUTES

FDC Movement



Body of Knowledge

We know a lot more now

**Once served, how do we know
we are making an impact?**

**The importance of monitoring
cases and outcomes**

1999

2016

Front-line Level (micro)

- Case management
- Reporting
- Tracking

Client

Program

Administrative Level (macro)

- Baselines and Dashboards
- Outcomes
- Sustainability

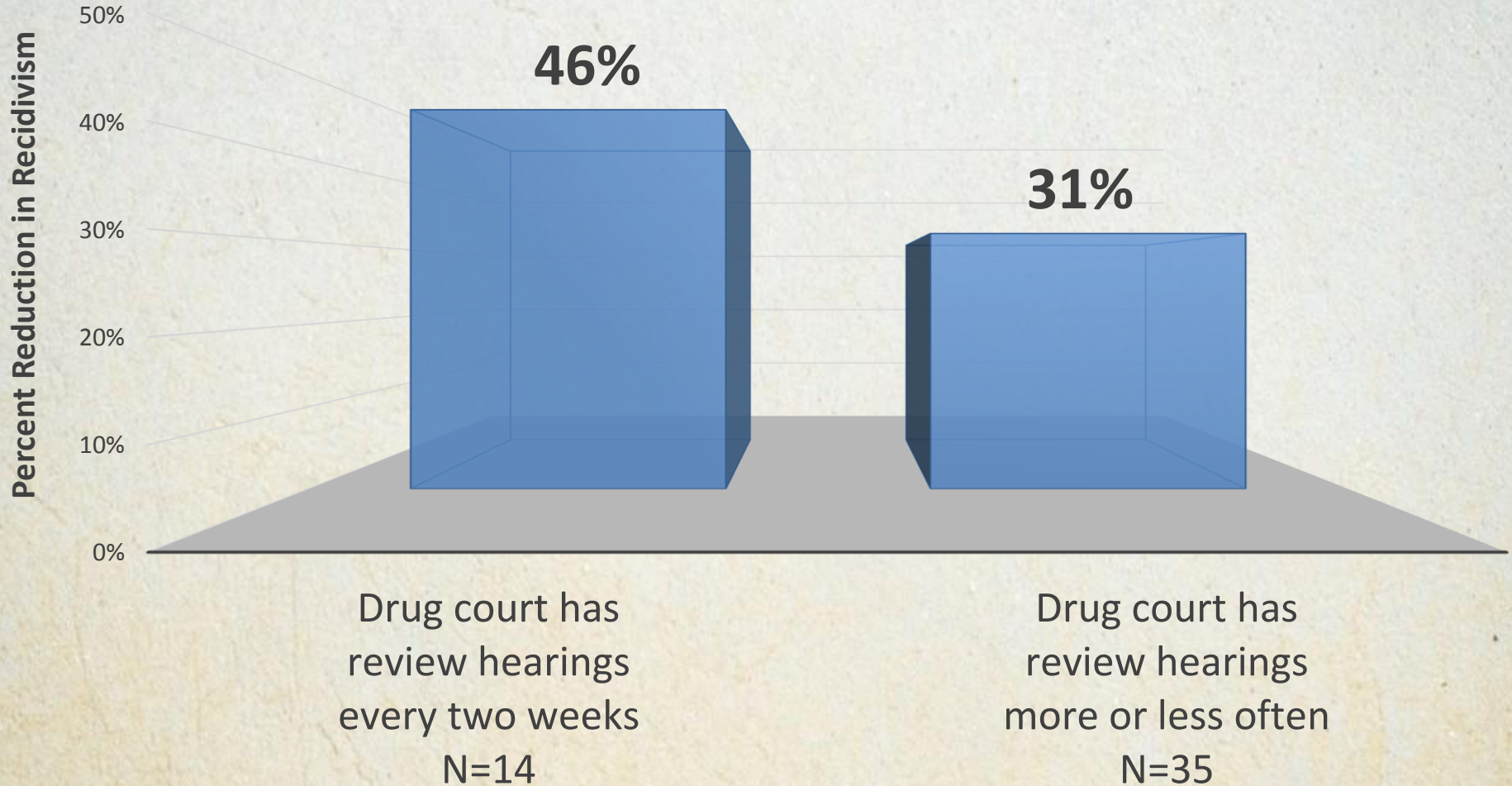
Two Levels of Information Sharing

Monitoring Cases

- *More frequent review hearings*
- *Judicial Oversight*
- *Responses to behavior*
- *Case Staffings*
- *Drug testing*



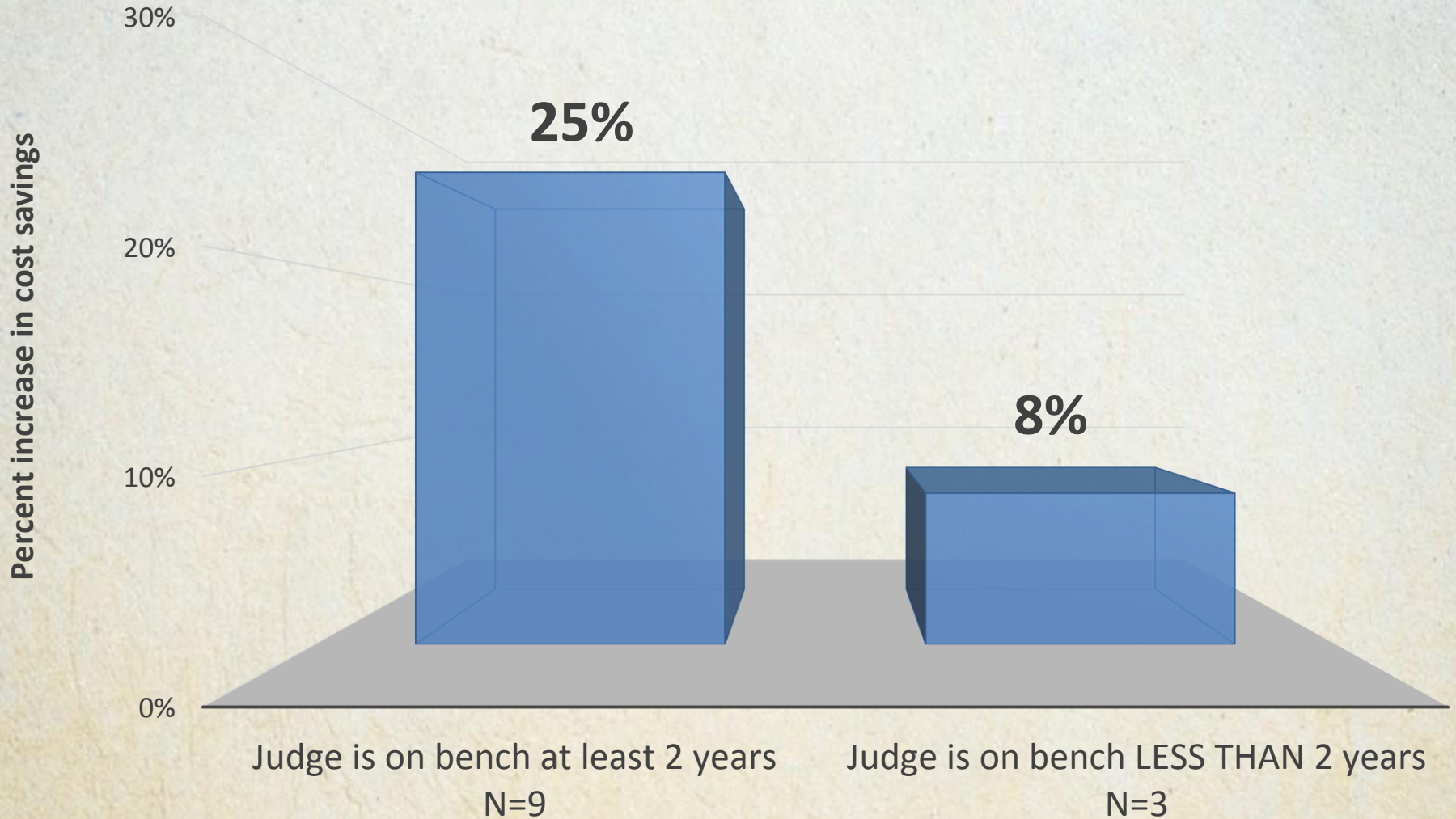
Drug Courts That Held Status Hearings Every 2 Weeks During Phase 1 Had 50% Greater Reductions in Recidivism



Note: Difference is significant at $p < .1$



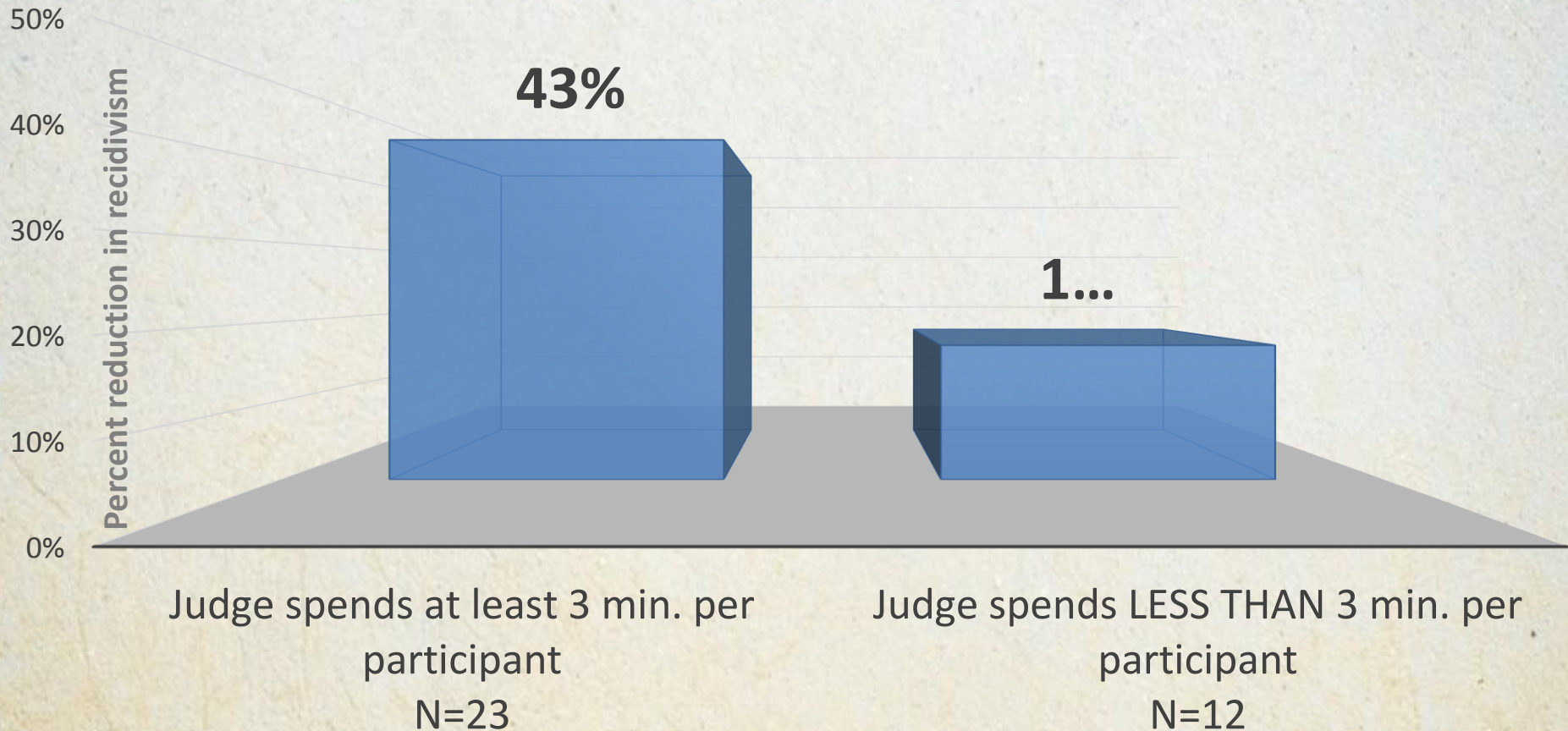
Drug Courts That Have Judges Stay Longer Than 2 Years Had 3 Times Greater Cost Savings



Note: Difference is significant at $p < .05$



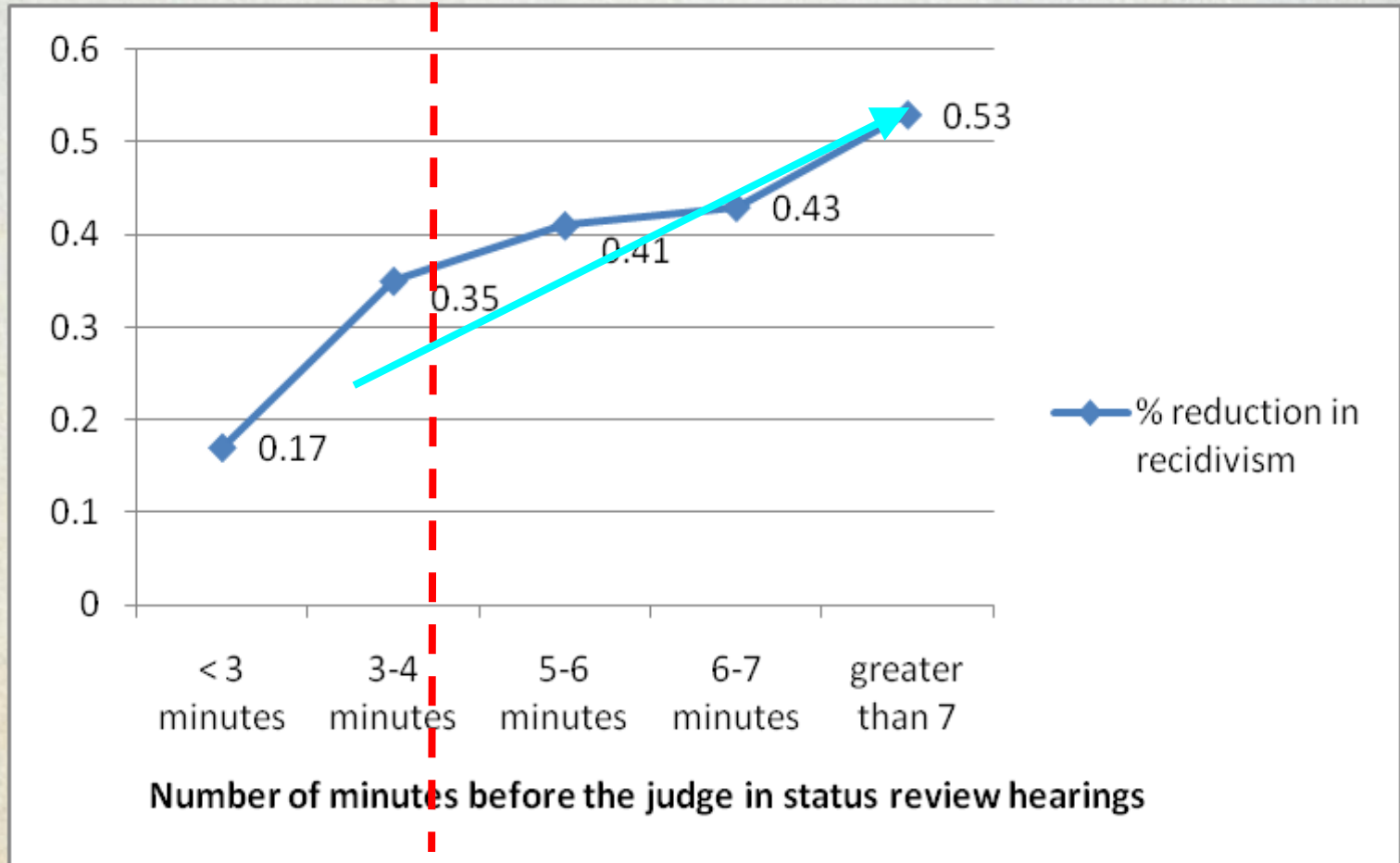
Judges Who Spent at Least 3 Minutes Talking to Each Participant in Court Had More Than Twice the Savings



Note: Difference is significant at $p < .05$



Drug Courts Where the Judge Spends an Average of 3 Minutes or Greater per Participant During Court Hearings had 153% greater reductions in recidivism



Note 1: Difference is significant at $p < .05$

Therapeutic Jurisprudence

- Engage directly with parents vs. through attorneys
- Create collaborative and respectful environments
- Convene team members and parents together vs. reinforcing adversarial nature of relationship
- Rely on empathy and support (vs. sanctions and threats) to motivate



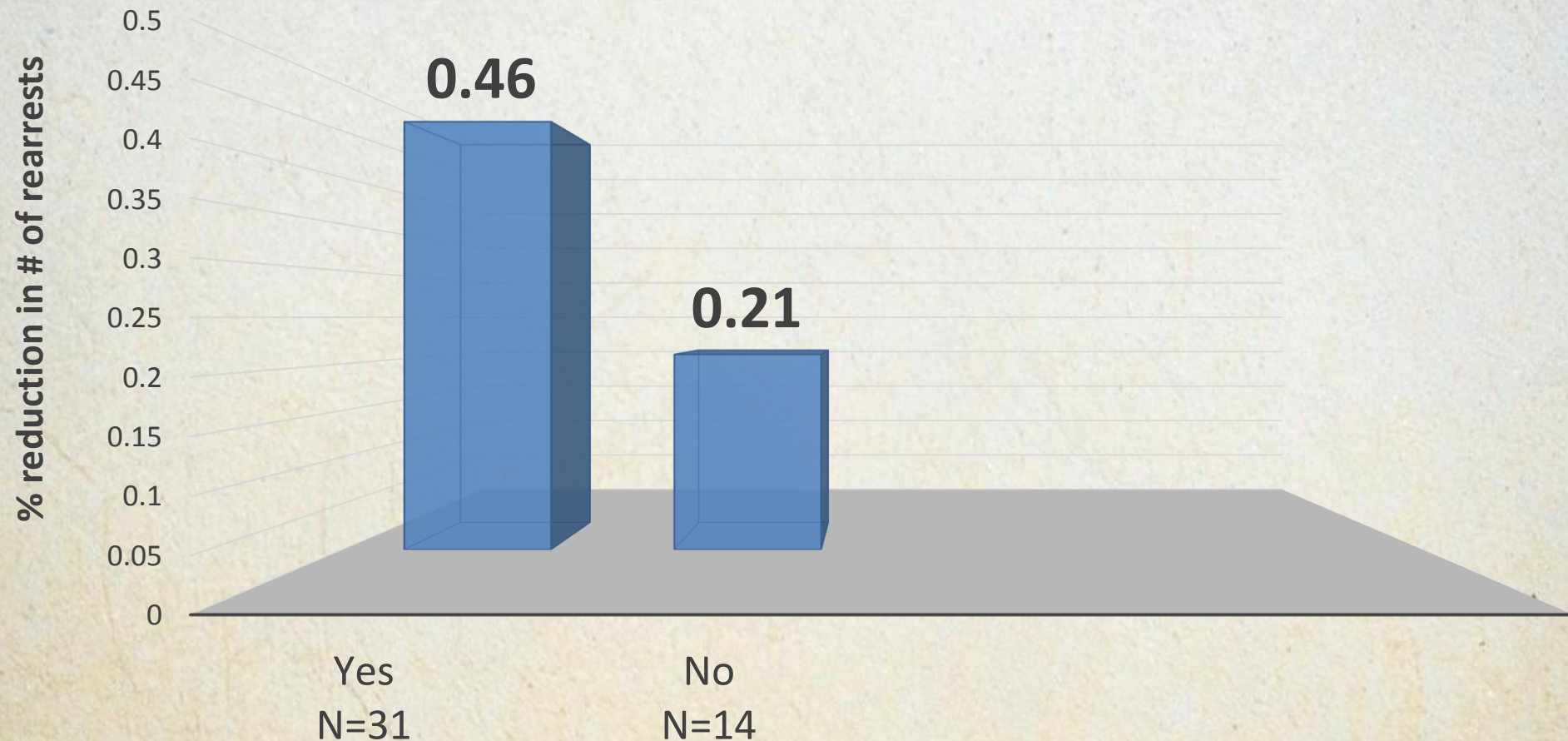
The Judge Effect

- The judge was the single biggest influence on the outcome, with judicial praise, support and other positive attributes translating into fewer crimes and less use of drugs by participants (Rossman et al, 2011)
- Positive supportive comments by judge were correlated with few failed drug tests, while negative comments led to the opposite (Senjo and Leip, 2001)
- The ritual of appearing before a judge and receiving support and accolades, and “tough love” when warranted and reasonable, helped them stick with court-ordered treatment (Farole and Cissner, 2005, see also Satel 1998)



Drug Courts Where Treatment Communicates with the Court via Email had 119% greater reductions in recidivism

Treatment communicates with court via email

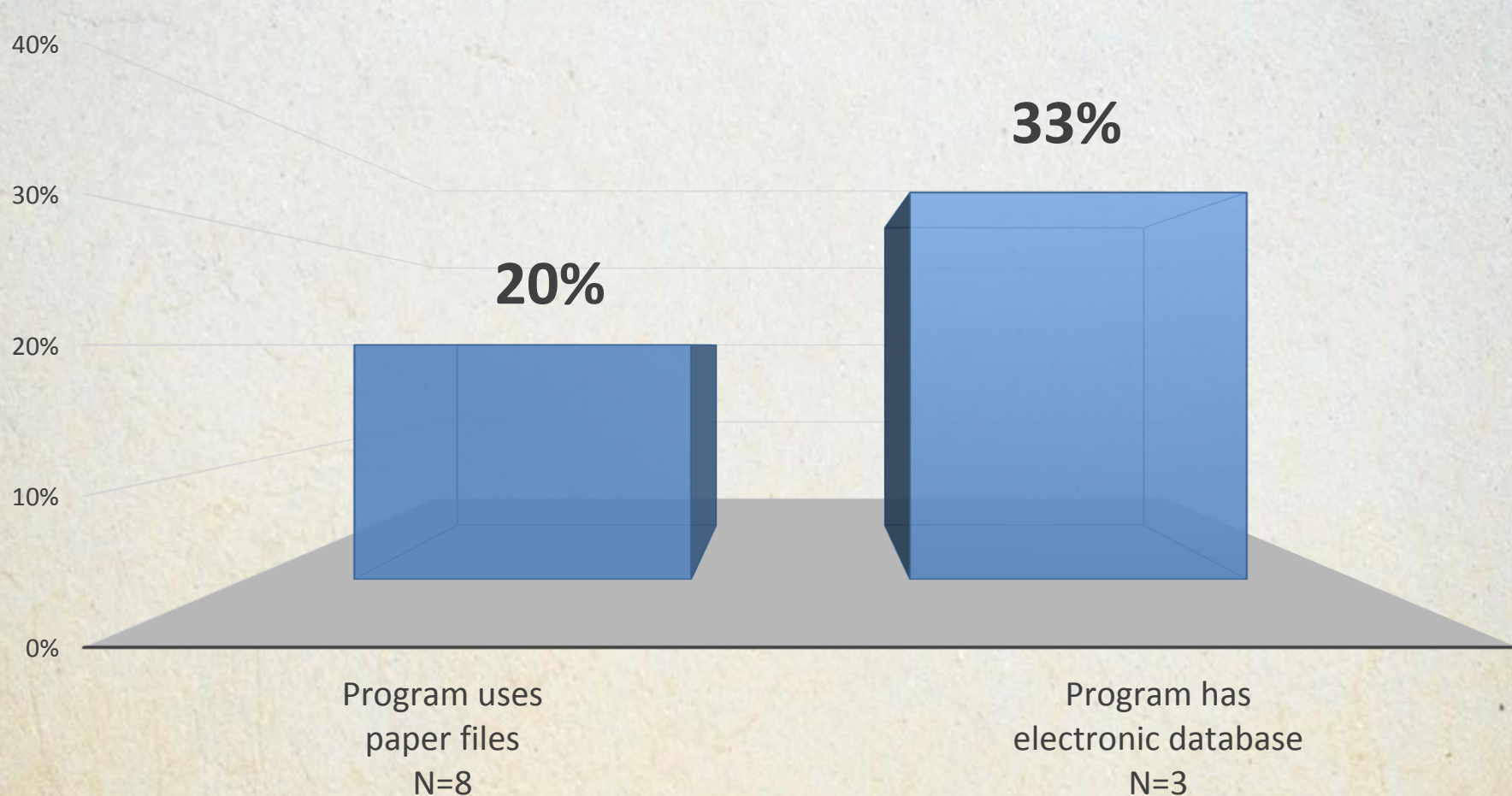


Note: Difference is significant at $p < .10$



Drug Courts That Used Paper Files Rather Than Electronic Databases Had 65% LESS Savings

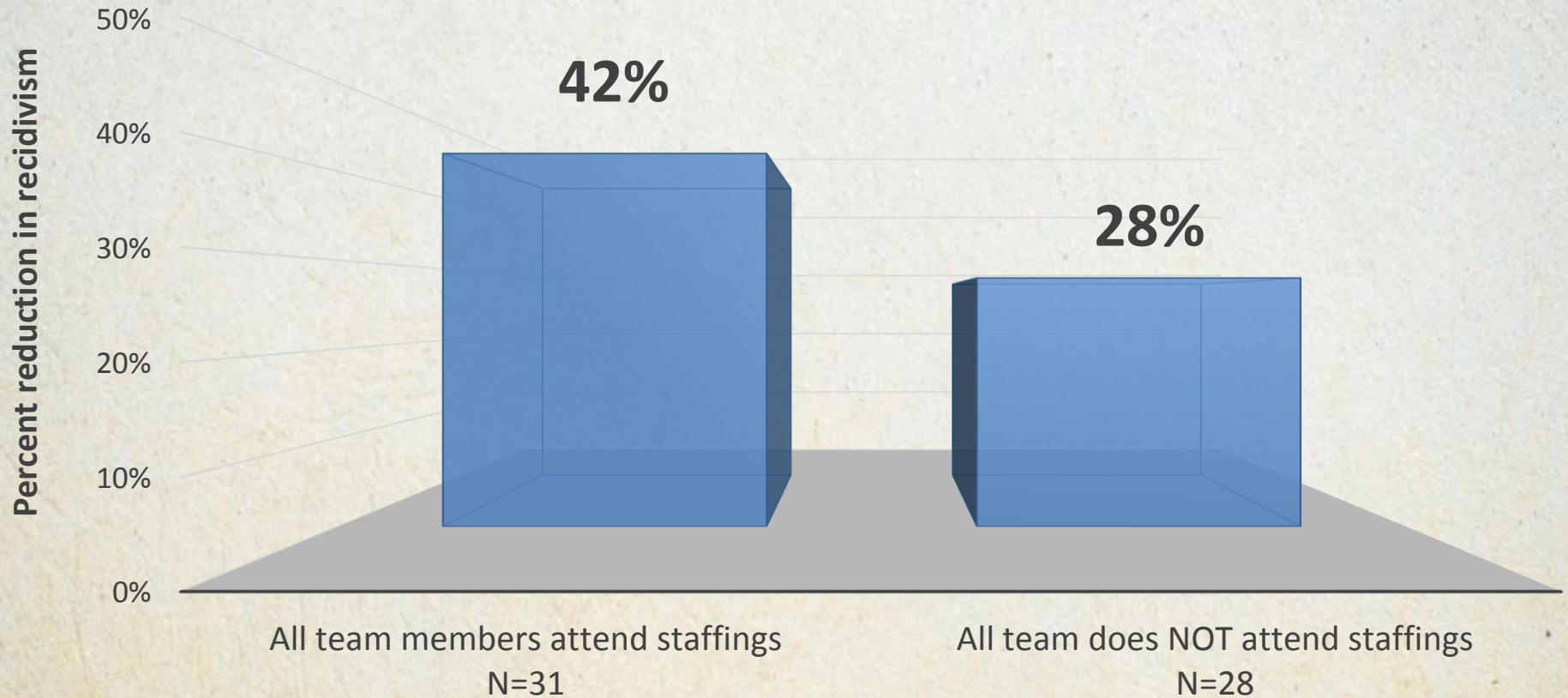
Percent increase in cost savings



Note: Difference is significant at $p < .05$



Drug Courts That Required All Team Members to Attend Staffings Had 50% Greater Reductions in Recidivism and 20% Greater Savings

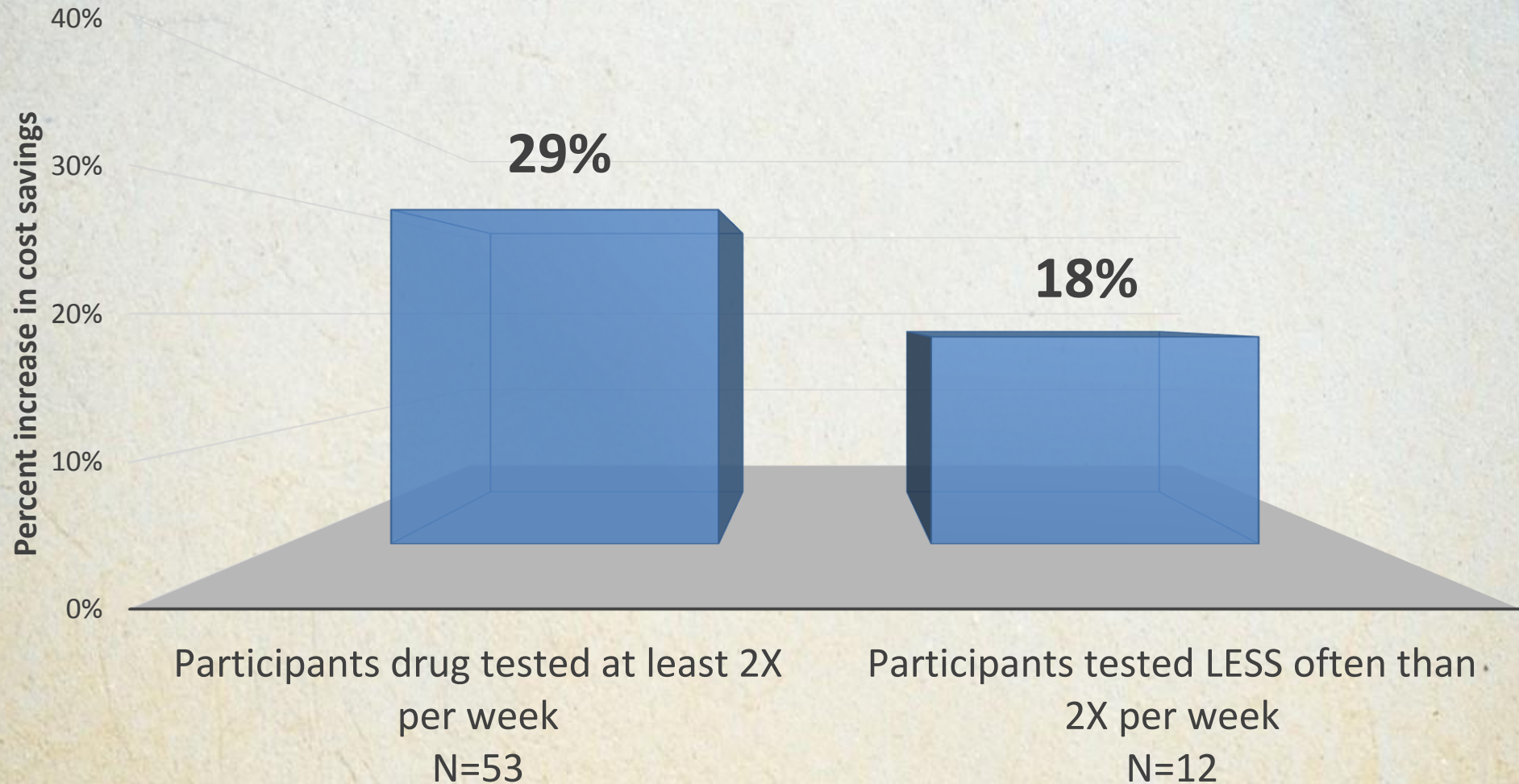


Note 1: Difference is significant at $p < .05$

Note 2: "Team Members" = Judge, Both Attorneys, Treatment Provider, Coordinator



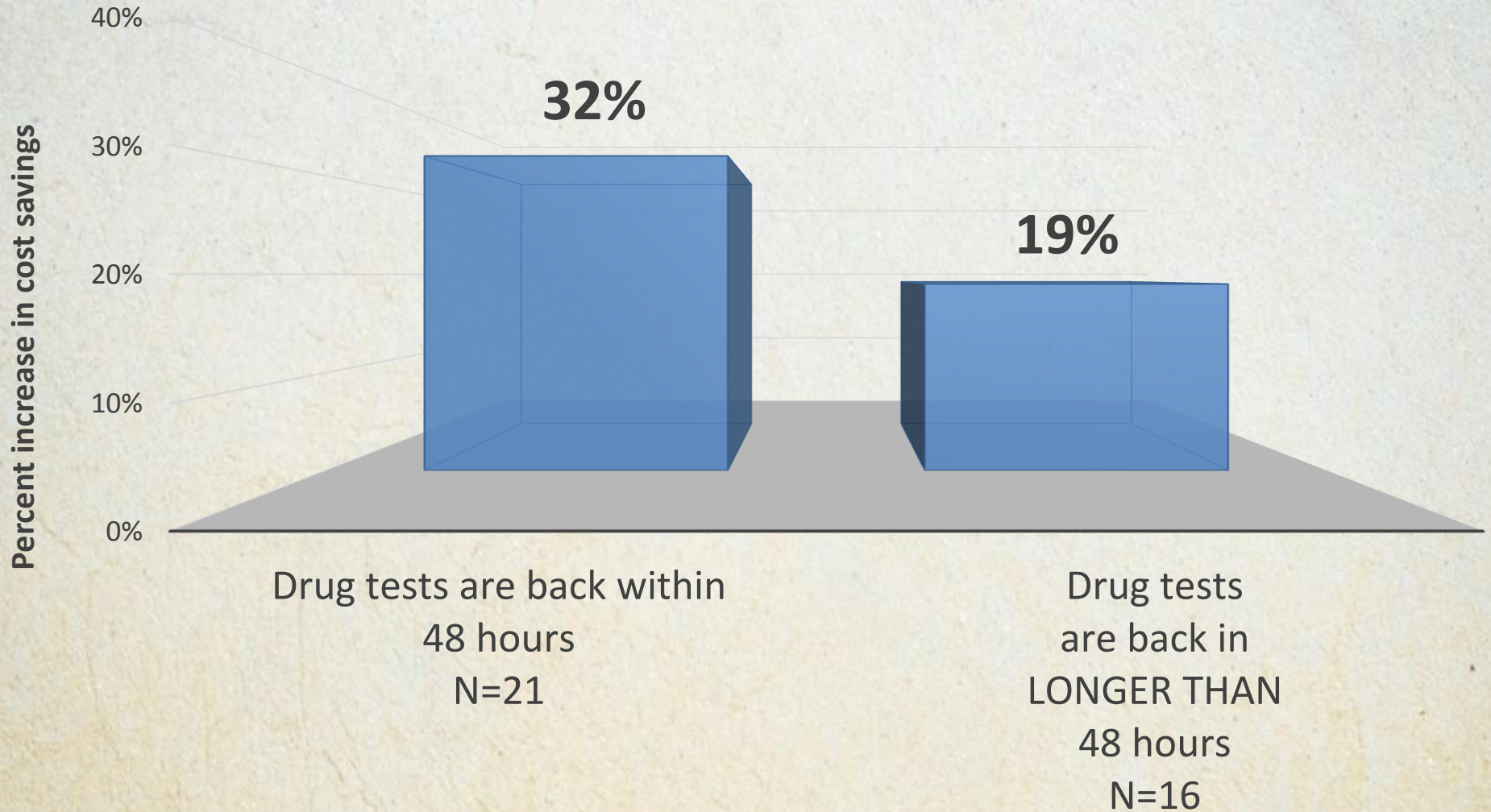
Drug Courts Where Drug Tests are Collected at Least Two Times per Week in the First Phase Had a 61% Higher Cost Savings



Note: Difference is significant at $p < .15$ (Trend)



Drug Courts Where Drug Test Results are Back in 48 Hours or Less had 68% Higher Cost Savings



Note: Difference is significant at $p < .05$

Monitoring Outcomes

Assess effectiveness of system in achieving its desired results or outcomes

Who collects data, where is it stored, who uses it, who “owns” the data, levels of access



Family Drug Courts as a
“Feel Good” Program

The Collaborative Structure for Leading Change



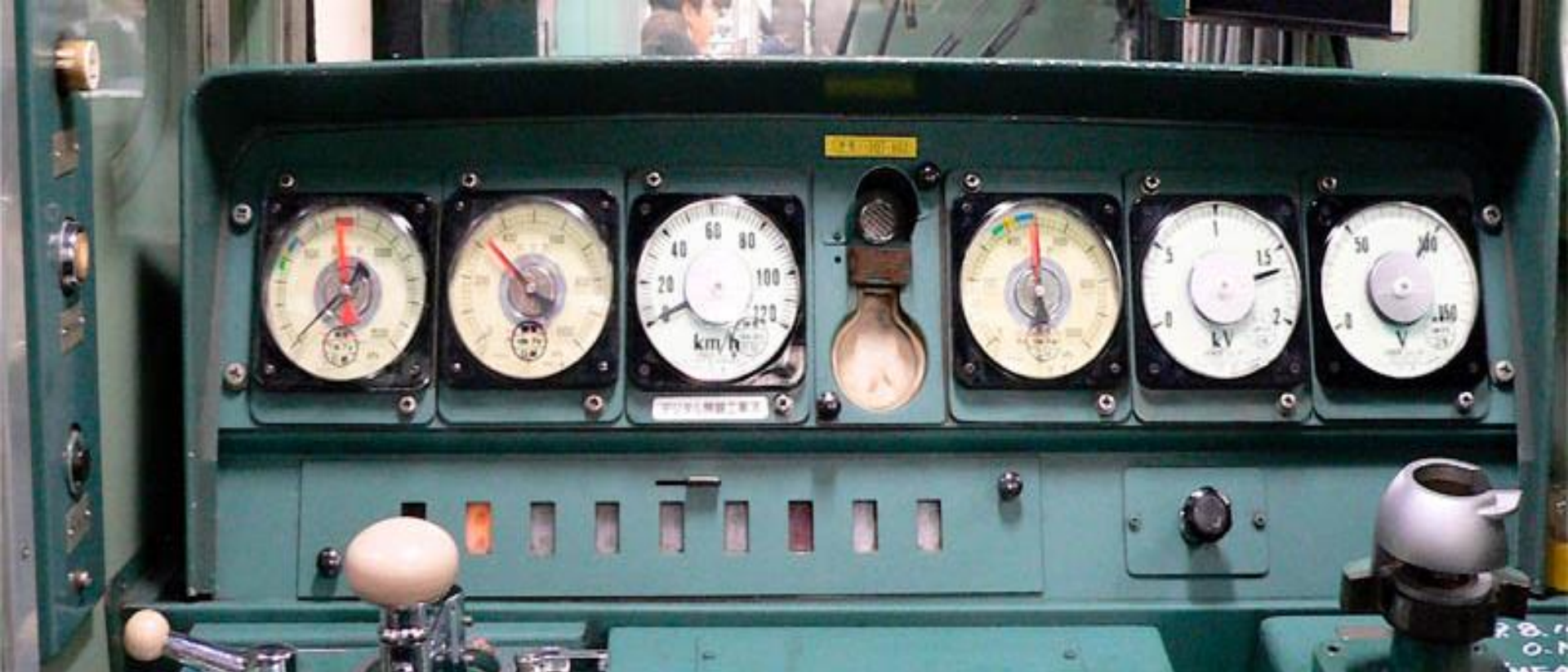
How do you know.....

How will you.....

The importance of

Data

- How are families doing?
- Doing good vs. harm?
- What's needed for families?
- Monitor and improve performance?
- Demonstrate effectiveness?
- Secure needed resources?



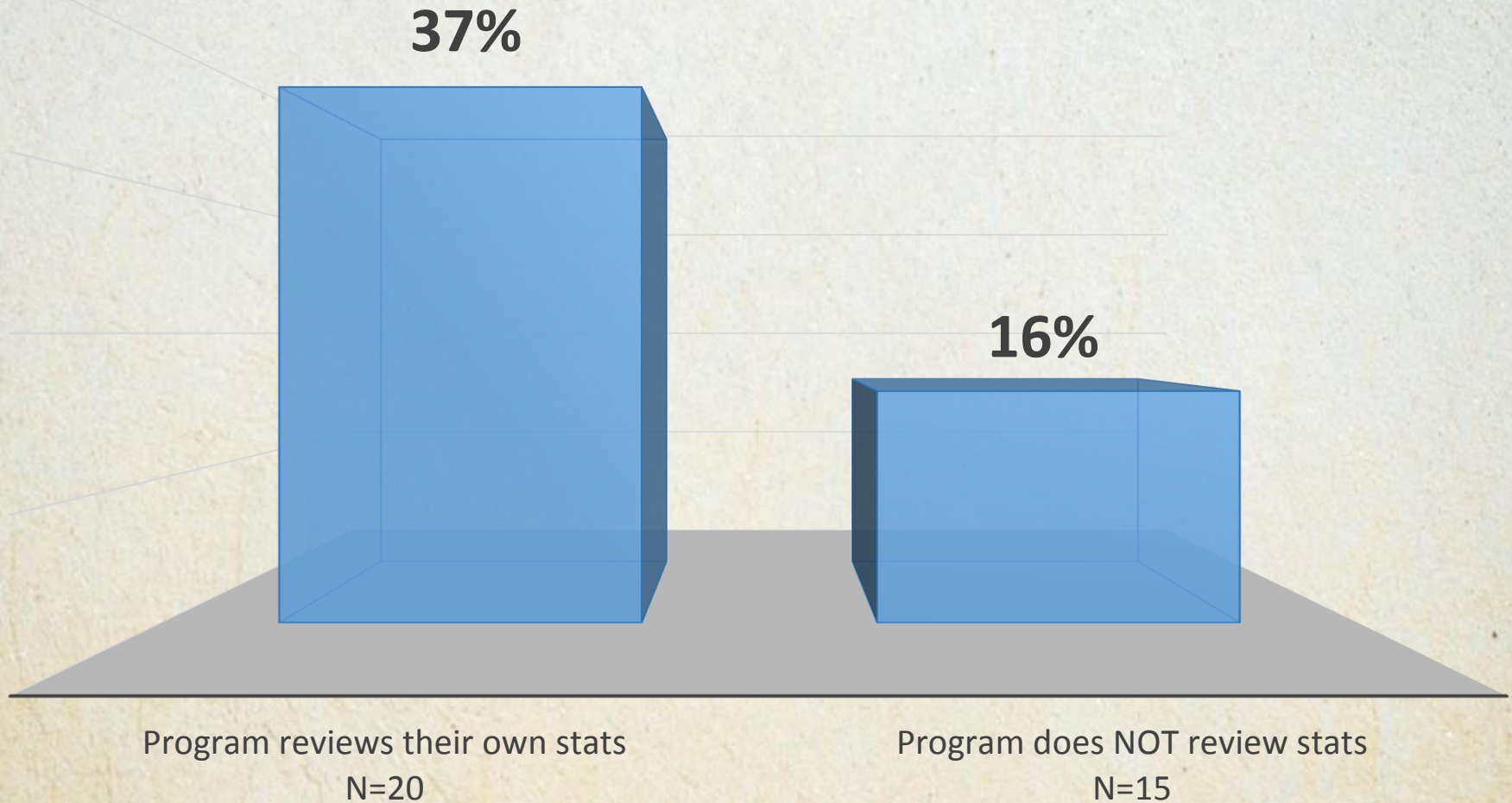
Data Dashboard

- What needles are you trying move?
- What outcomes are the most important?
- Is there shared accountability for “moving the needle” in a measurable way, in FDC and larger systems?
- Who are we comparing to?



Drug Courts Where Review of The Data and Stats Has Led to Modifications in Drug Court Operations had a 131% Increase in Cost Savings

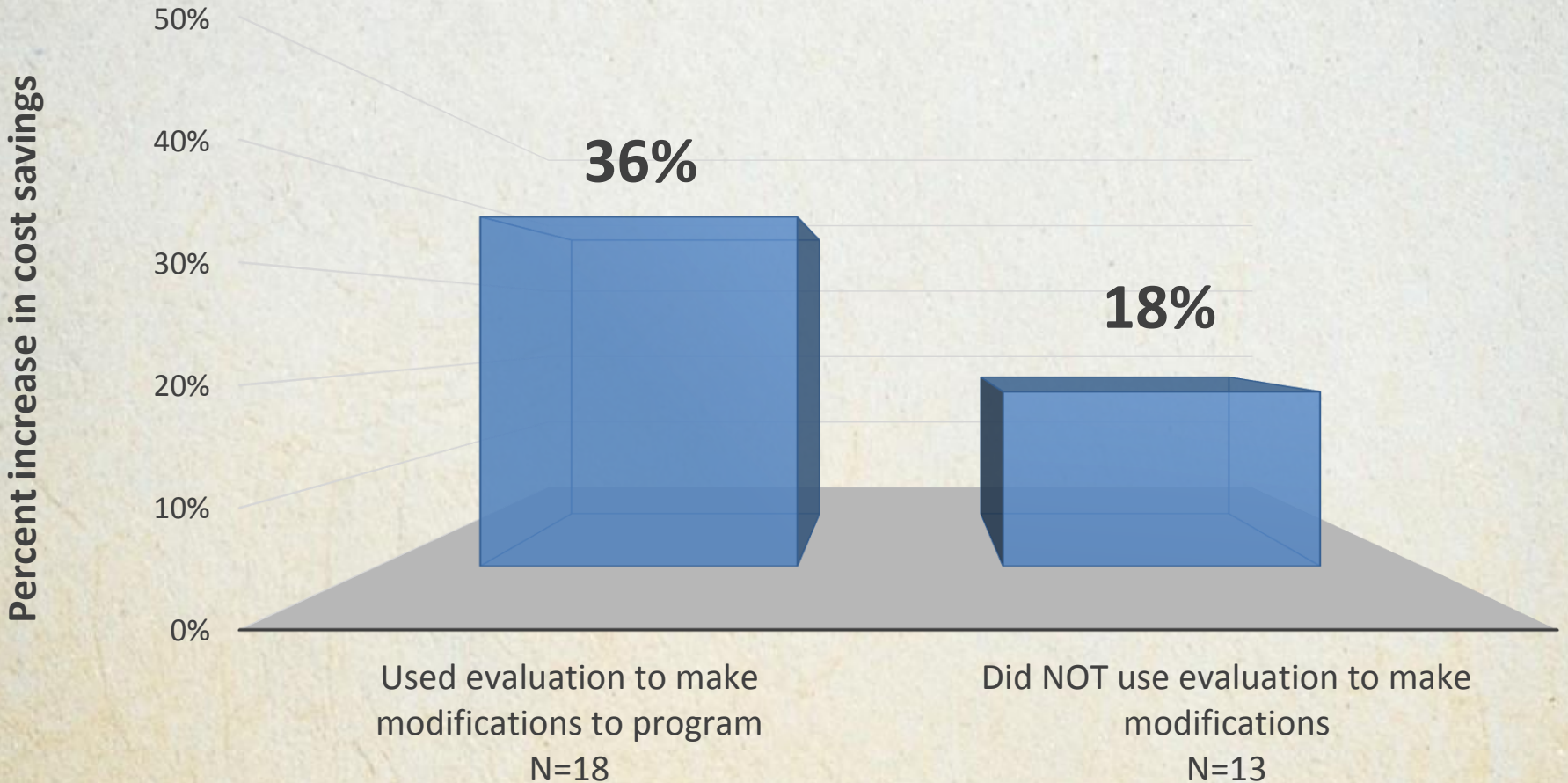
Percent increase in cost savings



Note: Difference is significant at $p < .05$



Drug Courts Where the Results of Program Evaluations Have Led to Modifications in Drug Court Operations Had a 100% Increase in Cost Savings



Note: Difference is significant at $p < .05$

Tools for Monitoring Outcomes

System Walk-Through

Assess effectiveness of system in achieving its desired results or outcomes

Data and Info Walk-Through

Who collects data, where is it stored, who uses it, who “owns” the data, levels of access

Total number of cases that resulted in investigation and those with a screening

Number and percentage of parents referred for assessment

Number and percentage who received an assessment

Number and percentage referred to treatment and FDC

Number and percentage admitted (attended at least one session) to treatment and to FDC

Number and percentage in treatment for at least 90 days

Number and percentage completing treatment

Payoff – Number and percentage Reunified / Remained at home

Drop-Off Points

Systems Walk-Through

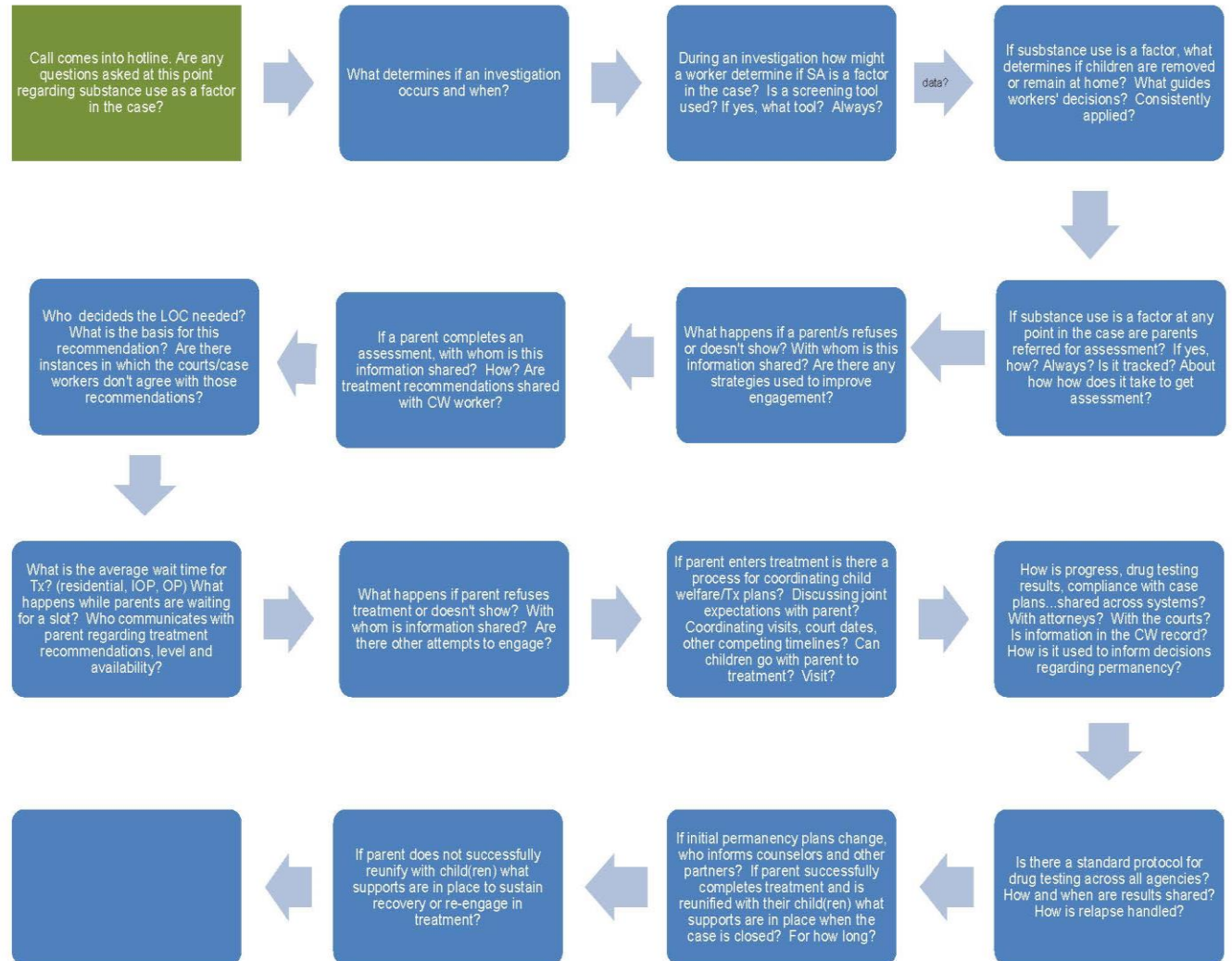
Screening

Assessment

Referral

Monitoring

Flow Chart: Child Welfare Involved Families With Substance Use Disorders



Continues on page 2



#3

DISCUSSION

**RECOMMENDATION 3:
CREATE EFFECTIVE COMMUNICATION
PROTOCOLS FOR SHARING INFORMATION**

5-10 MINUTES

FDC Movement



Body of Knowledge

We know a lot more now

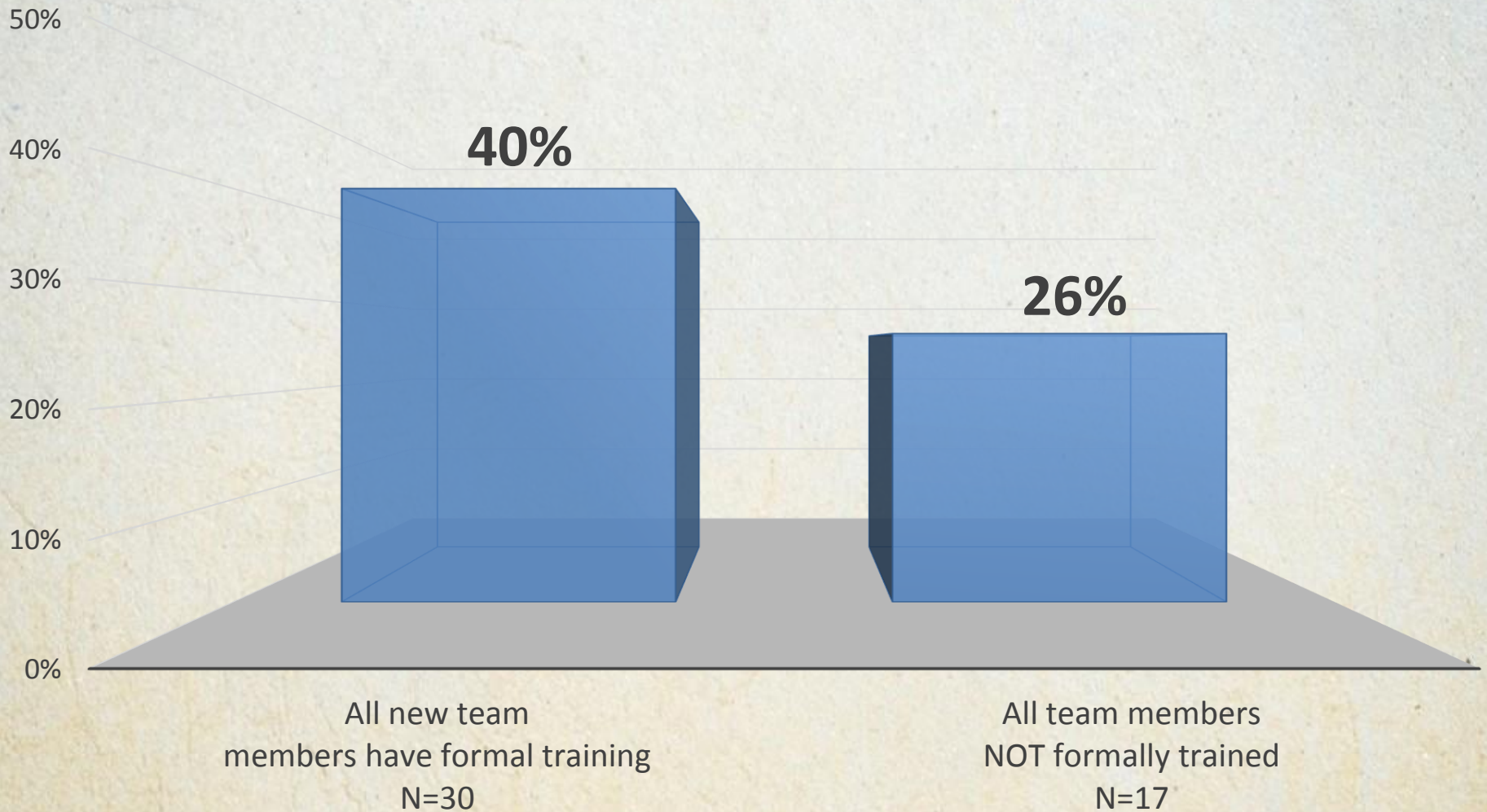
**Training and Technical
Assistance Needs of FDCs**

1999

2016



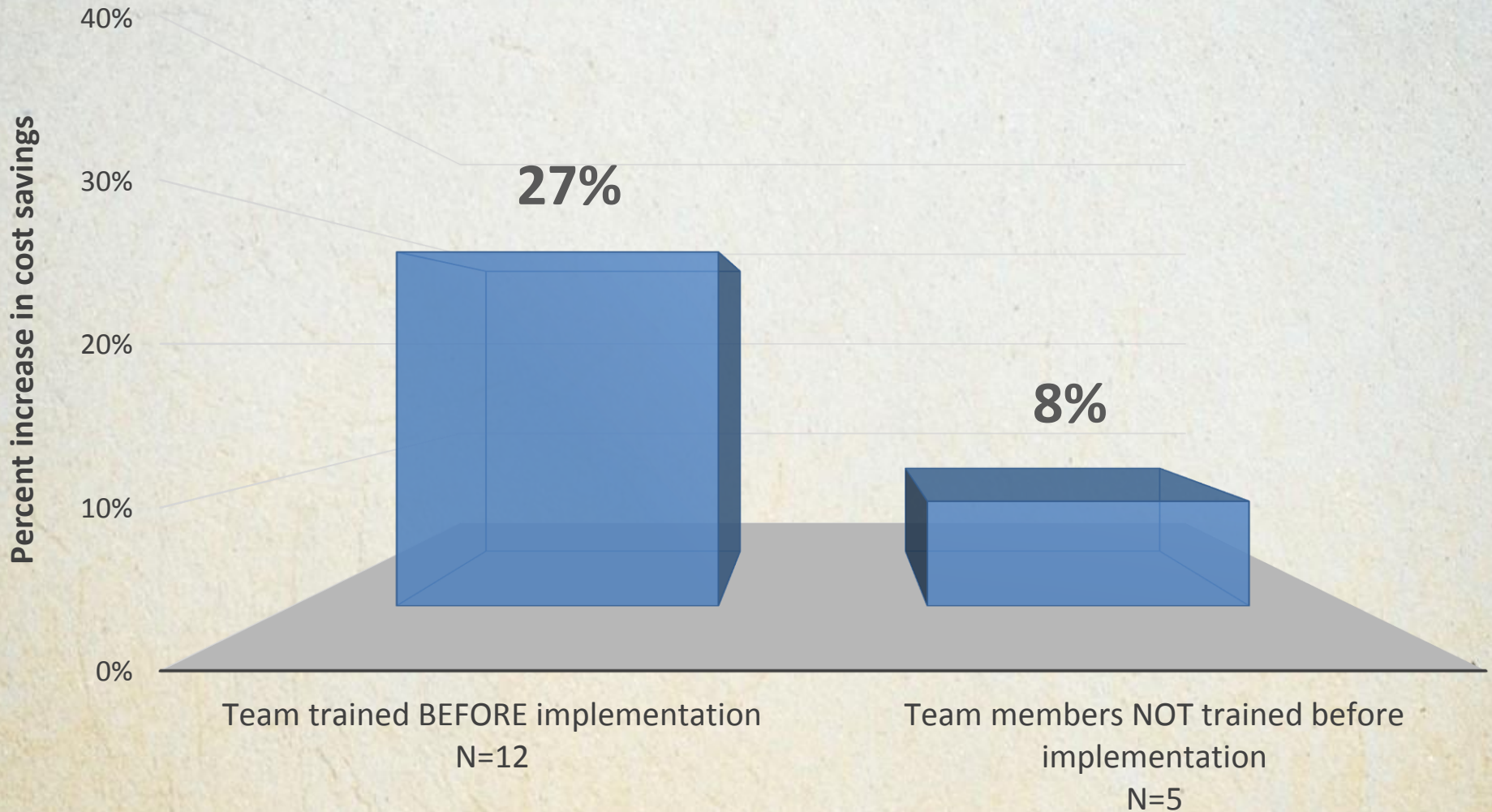
Drug Courts That Provided Formal Training for ALL New Team Members Had 54% Greater Reductions in Recidivism



Note: Difference is significant at $p < .05$



Drug Courts That Received Training Prior to Implementation Had Almost 3.5 Times Higher Cost Savings



Note: Difference is significant at $p < .05$

**2nd Edition - Research
Update – Just Released**

FDC Guidelines



To download a copy today visit our website:

<http://www.cffutures.org/files/publications/FDC-Guidelines.pdf>

FDC Learning Academy



FAMILY DRUG COURT LEARNING ACADEMY WEBINAR SERIES

The Family Drug Court (FDC) Learning Academy offers web-based training events to assess the needs, implement program improvements, evaluate performance and sustain FDC programs.

Launched in June 2010 by Children and Family Futures (CFF), the Learning Academy consists of six learning "Learning Communities" to address the developmental needs of FDC programs. Webinars are offered to FDC teams and professionals at no cost. Many FDCs have viewed these web-based trainings as a team and then discussed implications for their respective programs.

For a complete listing of the FDC Webinars, please see the back of this flyer.

To view the webinar recordings and download webinar materials, please visit: www.cffutures.org

Visit the FDC Blog: www.familydrugcourts.blogspot.com

If you have any questions, including how you can use these webinars to train your FDC team, please contact us: fdc@cffutures.org



*This Project is supported by Award 2013-DCBX-K-002 awarded by the Office of Juvenile Justice and Delinquency, Office of Justice Programs



FDC Learning Academy Webinars

Planning Community

| | |
|----------------|--------------------------------------|
| June 2010 | Mission and Values |
| July 2010 | Principles of Collaboration |
| August 2010 | Screening and Assessment |
| September 2010 | Engagement and Retention |
| October 2010 | Information Sharing and Data Systems |
| November 2010 | Engaging Defense Attorneys |

Early Implementation & Enhanced Community

| | |
|---------------|---|
| February 2011 | Engaging Fathers in Family Drug Courts |
| March 2011 | Services to Children |
| April 2011 | Trauma-Informed Services |
| May 2011 | Engaging the Community & Marketing to Stakeholders |
| June 2011 | Responding to Participant Behavior |
| July 2011 | Critical Issues in Running a FDC |
| August 2011 | Joint Accountability and Shared Outcomes |
| October 2011 | Budget & Sustainability: Conducting a Cost Analysis |
| November 2011 | Moving Toward System-Wide Change |

Advanced Practice Community

| | |
|---------------|---|
| February 2012 | Use of Jail as a Sanction in FDCs |
| March 2012 | Family Drug Court Models - Parallel vs. Integrated |
| April 2012 | What You Need to Know in Becoming a Trauma-Informed Family Drug Court |
| May 2012 | Role of Judicial Leadership and Ethical Considerations in FDCs |
| July 2012 | What You Need to Know About Child Well-Being and Serving Children in FDCs |
| August 2012 | Ensuring Effective and Quality Substance Abuse Treatment in FDCs |
| October 2012 | Implementing Evidence-Based Parenting in FDCs |

Knowledge Sharing

| | |
|----------------|--|
| March 2013 | Responding to Domestic Violence in FDCs |
| April 2013 | Passing the Baton - Why Judicial Succession Matters in FDCs |
| May 2013 | Reaching the Tipping Point - FDCs as a National Child Welfare Reform Strategy |
| June 2013 | FDC Peer Learning Courts - Highlighting Effective FDC Practices |
| August 2013 | So Who Are You Really Serving? Challenges of Serving Special Populations in FDCs |
| September 2013 | Raising the Bar in FDCs - A Look at FDC Guidelines |

Leading Change - This Changes Everything

| | |
|--------------|--|
| March 2014 | Utilizing Recovery Support Specialists as a Key Engagement and Retention Strategy |
| April 2014 | Our Grant is Over - How What? Re-Financing and Re-Directing as Real Sustainability Planning |
| June 2014 | Closed Doors or Welcome Mat? Opening the Way for Medication-Assisted Treatment |
| July 2014 | How Do You Know They Are Ready? Key Considerations for Assessing Reunification |
| August 2014 | Exploring Solutions Together - The Issue of Racial and Ethnic Disproportionality and Disparity |
| October 2014 | Matching Services to Need - Exploring What "High-Risk," "High-Need" Means for FDCs |

Leading Change 2015

| | |
|---------------|--|
| March 2015 | Are You Building Your FDC by Default or Design? |
| April 2015 | So Who Wants to Be an FDC Coordinator? |
| May 2015 | Leading from the Front-Line: Case Managers in Your FDC and Why You Need Them |
| June 2015 | Leading Change in Serving Families in FDCs - Prevention & Family Recovery Project |
| August 2015 | Leading the Way to Best Practices - Ideas Worth Sharing from FDC Peer Learning Courts |
| October 2015 | Leading Change - State Systems Reform Program |
| November 2015 | Identifying Substance Use as a Risk Factor in CWS Cases and Understanding How to Respond |

For more information please visit: <http://www.cffutures.org/projects/family-drug-court-learning-academy>

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Webinar**



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**Convenient & Effective
Learning**





Virtual Classroom

Webinar Available

Classroom Schedule

Screening & Assessment

April 1

April 14,
May 12, May 26

Governance & Leadership

April 5

April 19,
May 3, May 17

Parent-Child Relationships

July 1

July 14, July 28,
August 18

Data & Info Systems

July 5

July 21,
August 11, August 25

- Real-time networking and knowledge sharing
- Coaching & mentoring
- Applied learning through homework or project assignments
- 24/7 access to classroom
- Technical assistance and resources

Register Now!
Space Limited



FDC Learning Academy Blog

- Webinar Recordings
- FDC Podcasts
- FDC Resources
- FDC Video features
- Webinar registration information

www.familydrugcourts.blogspot.com

Coming in 2016!

Family Drug Court Online Tutorial



FDC 101 - will cover basic knowledge of the FDC model and operations



★ FAMILY DRUG COURT
PEER LEARNING COURT PROGRAM

CONTACT US FOR MORE INFORMATION: fdc@cffutures.org



Resources

FDC Discipline Specific Orientation Materials

Child Welfare | AOD Treatment | Judges | Attorneys

Please visit: www.cffutures.org/fdc/

FREE CEUs!

Resources

NCSACW Online Tutorials

1. Understanding Substance Abuse and Facilitating Recovery: A Guide for Child Welfare Workers
2. Understanding Child Welfare and the Dependency Court: A Guide for Substance Abuse Treatment Professionals
3. Understanding Substance Use Disorders, Treatment and Family Recovery: A Guide for Legal Professionals

Please visit: <http://www.ncsacw.samhsa.gov/>

2015 Special Issue

Includes four Family Drug Court specific articles presenting findings on:

- Findings from the Children Affected by Methamphetamine (CAM) FDC grant program
- FDC program compliance and child welfare outcomes
- Changes in adult, child and family functioning amongst FDC participants
- Issues pertaining to rural FDCs



CWLA

www.cwla.org



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Q&A and Discussion



2016 National Conference



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Advancing Excellence in Practice & Policy: What Works For Families Affected by Substance Use

Thank You



Contact Information

Phil Breitenbucher, MSW

Director, Family Drug Court Programs

Children and Family Futures

(714) 505-3525

pbreitenbucher@cffutures.org

Alexis Balkey, MPA, RAS

Program Manager, National FDC TTA Program

Children and Family Futures

(714) 505-3524

abalkey@cffutures.org



*Improving
Family
Outcomes*

*Strengthening
Partnerships*