

Front-Loading Reasonable Efforts Services

The Honorable Douglas F. Johnson
Carrie Strovers, JD

Objectives

- Gain a nuts and bolts understanding of the elements of an effective prehearing conference.
- Gain an understanding of how early childhood best practices can be utilized at the beginning of the case to ensure that all child welfare decisions are made through the lens of attachment.
- Learn how "frontloading" reasonable efforts services for little ones and their parents affects permanency.



Babies and toddlers, even before they can speak, can show us, through their interactions with others and their emotions that they are struggling and need help. We have to learn to be better observers and more knowledgeable about ways to identify them and provide them with the services they need.

Child Welfare Institute for the Children and Community, A Guide to Working Effectively with Young Children and Their Families in the Child Welfare System (2011, September 24/2012)

Douglas County

- Each week the CPS hotline accepts **40** cases of abuse/neglect for assessment in which at least one child is age zero to five.
- Of the cases accepted weekly for investigation, approximately:
 - **19** close after the investigation
 - **17** are offered ongoing services on a voluntary basis (non-court)
 - **4** result in court filings by the juvenile county attorney

In Douglas County, **550** children birth to five are in out of home care with court oversight.

Why does it matter?

Maltreatment interferes with the healthy development of the synaptic connections in the brain that are critical to intellectual functioning and to social and emotional wellbeing.



Jack Shonkoff, Helping Babies from the Bottom: Using Science of Early Childhood Development in Court. Washington, DC: ZERO TO THREE, 2007.

Once they have been removed from their home and placed in foster care, infants and toddlers are more likely than older children to be abused and neglected and to stay in foster care longer.

Fred Whulczyn and Kristian Hildop, "Babies in Foster Care: The Numbers Call for Attention," ZERO TO THREE Journal 22, no. 4: 14-15.

Common misconceptions

Babies do not:

- Complain
- Notice changes
- Remember
- Perceive the feelings of others



The Hazards for Young Children

- Prenatal exposure to substances
- Exposure to domestic violence
- Parental abuse/neglect most often related to substance abuse
- Exposure to other forms of violence including conditions of war and community violence

Trauma before and after placement

- Trauma exposure leading to removal
- Inconsistent caregiving in placement
 - Disrupted foster care placements
 - Respite care
 - Child care changes
 - Child welfare worker turnover
- Cumulative negative developmental impact

FOUNDATIONS IN EARLY DEVELOPMENT

**Key developmental tasks:
attachment and bonding**



While bonding is about trust, attachment is about affection.

- Attachment to primary caregiver
- Formation of trust in persons and environment
- Establishment and regulation of a mutually satisfying relationship between infant and parent



Early attachment is the affective child-mother bond that promotes survival through the child's reliance on the adult for protection.

Alicia Lieberman, PhD

Attachment Informed Decisions

Babies can't wait!

Every decision made in the child welfare system should be made through the lens of attachment.

- Does this decision **SUPPORT** healthy attachment of this child?
- Does this decision **SUPPORT** timely permanency for this child?
- Timing and intensity of services is critical.

The Importance of Developing Trauma-Informed Systems

- A trauma-informed system of care **acknowledges** and **responds** to the role of trauma in the development of emotional, behavioral, educational, and physical difficulties in the lives of children and adults.
 - A trauma-informed system recognizes and avoids inflicting secondary trauma.
- NCTSN: Judge Michael Howard and Dr. Frank Putnam, Ohio, 2009.

Problem Solving Courts

- **The judge models civility, respect, dignity and requires others to do the same.**
- **Emergency Room Response:** Act with a sense of urgency for the child and parent - as if this family is your own!
- **Front-load services:** Pragmatic, timely, effective response to abuse and neglect.
- **Affirmation with accountability:** Motivates parental improvement/resolution of permanency.
- **Alternative Dispute Resolution:** Pre-Hearing Conference, Family Group Conference, mediation.
- **Full parental participation from day one.**

Every parent, every policy maker, every educator, and every community needs to understand the astounding curve of development that occurs during the first five years of life, and to apply what we know to strengthen vulnerable children, families, and communities.



*Dr. Jack Shonkoff
"From Neurons to Neighborhoods"*

The Young Child in the Courtroom

How enhancements in a courtroom lead to better outcomes.

- Every day, judges are faced with difficult decisions directly affecting the estimated 560,000 abused and neglected children in foster care in the U.S.



National Council of Juvenile and Family Court Judges. Training Guide - Resource Guidelines, Adoption and Permanency Guidelines and ASFA.

FOUNDATIONAL PRINCIPLES

- Avoid unnecessary separation of children and families if the child can remain *safely* in the home.
- A child's sense of time requires timely permanency decisions.
- Juvenile and family court judges have a responsibility to provide individual case oversight, as well as system oversight, to ensure that the vision is reached.

Vision: Every child deserves a safe and permanent home in the shortest time frame possible.

National Council of Juvenile and Family Court Judges. Training Guide - Resource Guidelines, Adoption and Permanency Guidelines and ASFA.

Front-Load the System

- Answer important questions
 - Prehearing Conference
 - Protective Custody Hearing
- Locate important family members
- Ensure proper service of process
- Appoint competent representation for all appropriate parties
- Develop comprehensive case plan that addresses all important needs of the child and family
- Engage parties in such a way as to encourage them to be part of the solution for the child
- Frequent court review

National Council of Juvenile and Family Court Judges. Training Guide - Resource Guidelines, Adoption and Permanency Guidelines and ASFA.

Result?

- Significant reduction in wasted time to permanency
- Fewer continuances
- Better and timely services to the child and family
- Eliminates multiple day termination of parental rights trials

Did you know?

The average movement of a child to a less restrictive placement occurs 9 days before the next court hearing...no matter if that hearing is 6 months, 90 days, or 30 days away!

Key principle of ASFA:

Permanency planning efforts for children must begin as soon as a child enters foster care and services to families should expedite the goal of permanency.

Pre-Hearing Conference

- Key questions:**
- ✓ Should the child return home immediately? What services would allow the child to remain at home?
 - ✓ Will the parties voluntarily agree to participate in such services?
 - ✓ Has DHHS made reasonable efforts to prevent removal or allow reunification?
 - ✓ Are relatives or other adults available for placement?
 - ✓ Is the placement the least-disruptive and most family-like setting?

- Key questions continued:**
- ✓ Is the child placed in a foster adoptive home?
 - ✓ Will delivery of services be monitored? By whom?
 - ✓ Are orders needed for screenings, evaluations or immediate services?
 - ✓ What are the terms for parenting time and sibling time?

How to conduct effective hearings:

- Know your system
- Read reports and files ahead of time
- Identify all persons in the room
- Ask who is not present but should be
- Where are the children?
- Follow a pattern of procedure
- Give everyone time to speak
- Create an atmosphere of respect to all - everyone is an important part of the solution to the problem.
- Be concise
- Ask questions about the case
- Make statements everyone understands
- Make clear findings that specify who is responsible to do what and when
- Set the next hearing date and give copies of order to everyone

National Council of Juvenile and Family Court Judges: Training Guide - Resource Guidelines, Adoption and Permanency Guidelines and ASFA

Key decisions at Protective Custody Hearing:

- Should the child be at home or in foster care?
- With what services can the child safely go home?
- Did department/agency make reasonable efforts to avoid removal?
- Are non-custodial parents or relatives available?
- Does ICWA apply in this case?
- Is the proposed placement the best and least restrictive?
- Arrangements for visitation
- Financial support by parents
- What services are required to meet the child's immediate needs?
- Will parents voluntarily participate in services?

Protective Custody Hearing issues to be addressed:

1. Removal vs. Non-Removal
 - a) Safety, risk, best interest of the child
 - b) Consider services available to permit reunification
 - c) Consider reasonable efforts made to prevent removal and achieve reunification
2. Placement
 - a) Consider relatives, siblings, adoptive placement
 - b) If in conflict, who has priority
 - c) What is the best permanent placement for the long haul?

**Protective Custody Hearing
issues to be addressed continued:**

- 3. Parenting Time
 - a) Meaningful
 - b) Frequency considering nursing, bonding and attachment? How can it be made as natural as possible? Consult Supreme Court Guidelines.
 - c) What sibling contact should occur outside of family time? (Fostering Connections Act 2008)
- 4. ICWA (Indian Child Welfare Act) Applicability
 - a) Is child an Indian Child?
 - b) If so, how do placement preferences change?

**Protective Custody Hearing
issues to be addressed continued:**

- 5. Foster Parent Abilities:
 - a) Is it the most-family like and least-disruptive?
 - b) Are foster parents open to frequent sibling and parenting time?
 - c) Are foster parents committed to adoption but also understand the child may be reunified?
 - d) Are foster parents able to handle any special needs or disregulation (excessive crying, difficulties feeding, holding of the child)?

**Protective Custody Hearing
issues to be addressed continued:**

- 6. Medical records/asking about EPSDT and EDN screenings
 - a) Does placement have medical records and understand current medical needs?
 - b) Has child had an EPSDT screening? If so, what was screened (development, dental . . .) and is any follow-up needed?
 - c) Has child been referred to EDN for a screening and evaluation?
 - d) Should the child be referred for any other assessments (does she seem withdrawn, agitated, inconsolable)?

**Protective Custody Hearing
issues to be addressed continued:**

7. Child Care and Educational Needs

- a) Was the child in childcare prior to removal?
- b) Is the child eligible for Early Head Start? Are there any other similar programs?
- c) Who is making the childcare decisions? Do they sufficiently understand the needs of the child?

8. Concurrent Planning

- a) Is current placement able to make long-term commitment yet mentor the birth family toward reunification?
- b) Grief therapy

Question



What is a snap shot hearing?

**Have reasonable efforts to prevent
removal been provided?**

What are reasonable efforts?

- Child Welfare Policy Manual: Judicial determinations of reasonable efforts are made on a case-by-case basis so that the individual circumstances of each child before the court are properly considered.
- States have enacted legislation defining reasonable efforts
- Definition depends on the local community and its resources
- Facts and circumstances of case inform definition
- Nebraska?

Reasonable Efforts: A Judicial Perspective Judge Leonard Edwards p. 22

Reasonable efforts and problems presented by parents at removal

- Housing/poverty
- Visitation
- Case plan and provision of appropriate services
- Substance abuse
- Domestic violence
- Mental health
- Culturally competent services
- Meaningful efforts/agency's good faith
- Strengthening parent-child relationship
- Timeliness of services
- Incarcerated parents
- Are the services necessary/available

Reasonable Efforts: A Judicial Perspective Judge Leonard Edwards p. 28-30

Only when TPR procedures roll around do the courts take the reasonable efforts requirement seriously...At this point, rehabilitation is usually hopeless and requiring the agency to make reasonable efforts at this late date merely punishes the child for the agency's failure.

Wong, B. "The Evolution of Reasonable Efforts: An Approach to the Interpretation of Reasonable Efforts Statutes Punishing the Child for the Failure of the Child Welfare System." 12 AM. J. FAM. PSYCH. 14 (2002) 139 and 140 (October).

Early attention to reasonable efforts means that critical issues will be addressed quickly and efficiently.

Require reasonable efforts

- Meaningful and ample family time in a home environment
- Family time learning to do normal parental tasks: feed, play, bathe, change diaper, hold/rock, read/sing to the infant or toddler
- Parent training by an expert if oversight or skills are needed
- NB: Each family time over 1x per week triples the chances of achieving permanency (Brenda Jones Harden, Ph.D.)

Address lack of services early in the case

- Are the correct services in place?
- Do the parents have access to those services?
- Early inquiry into these issues will result in earlier determination regarding reunification.
- We need to serve the best interests of children and their families!

Outcomes

- Good information leads to good judicial decisions
- Timely services achieved by front-loading services
- Best interests and safety: nurturing caregiver to meet this child's needs
- More early admissions/continued adjudications in anticipation of dismissal because parents are voluntarily correcting issues
- Disposition hearing at adjudication - rehabilitative case plan developed at Protective Custody Hearing
- Both child and parent needs met: reunification or adoption through fair process/meaningful hearings
- Timely permanency stops prolonged foster care

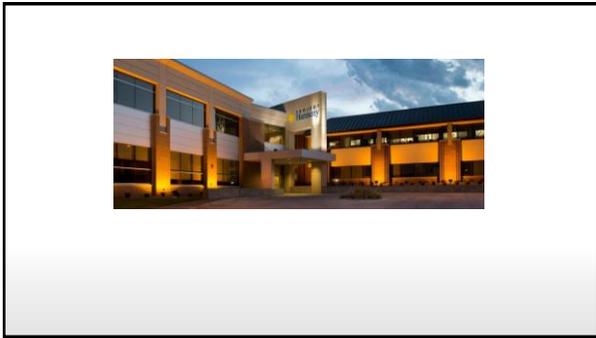
Impact from Infancy
Early intervention works!

- October 1, 2014
- Early childhood experts
- Support case professionals
- Best practices at the beginning of the case

IFI Eligibility:
Family with a child birth to five that has been removed from the parental home pursuant to an abuse/neglect filing in Douglas County Juvenile Court.

- 2005: Judge Douglas F. Johnson and Zero to Five Family Drug Treatment Court (FDTC)
- This FDTC model was the first of its kind in the state and country
- FDTC met the needs of babies and parents simultaneously through frequent court appearances
- Unfortunately, this model had a limited capacity to serve 15-20 families

Zero to Five Family Drug Treatment Court



- One of seven Child Advocacy Centers in Nebraska.
- Serve 16 counties in Southwest Iowa
- Co-location of 200+ professionals:
 - Department of Health and Human Services
 - Omaha Police Department CVSA Unit
 - Lutheran Family Services
 - Child Saving Institute

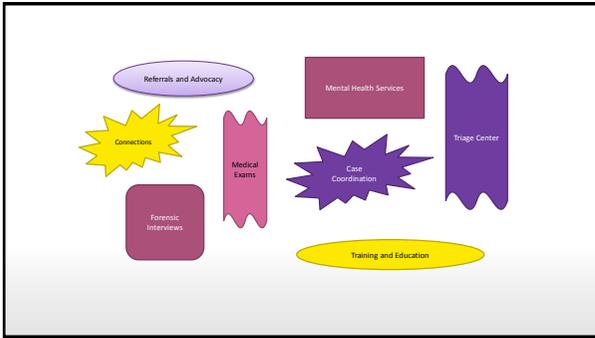
Mission:

To protect and support children, collaborate with professionals, and engage the community to end child abuse and neglect.

2015 Statistics

- Served 2300+ children
- 1014 Forensic Interviews Conducted
- 866 Child Abuse Medical Exams Conducted
- 3487 Advocacy Service Contacts
- 914 Triage Center Crisis Visits
- 3731 Case Reviews Conducted
- 871 Mental Health Services Visits
- 10,334 People Trained





Case Coordination

- 5 full-time Case Coordinators
- 11 Teams
- Team composition
- Legislative Bill 1184
- Investigation and treatment
- Case referral

The painting is abstract and colorful, featuring a central figure that appears to be a person or a stylized form, surrounded by various shapes and colors like blue, orange, and purple. It has a textured, almost collage-like appearance.

Program Summary

- Screen Petition for eligibility
- Coordinator assignment
- Review court filings, database documentation, talk with case professionals.
- Attend Protective Custody hearing.
- Staff case at multidisciplinary team.
- Attend additional court hearings or other meetings as necessary.
- Data entry
- Referred cases

Considerations

- **Placement:** Paternity, permanency, and supports.
- **Connections:**
 - Visitation agency, # of workers/visitation plan
 - Are we following the parenting time guidelines?
 - What does the current parenting time look like? Any concerns or strengths?
 - Formal/informal supports?
- **Physical Health:**
 - Was the child seen at Project Harmony?
 - Have you received/reviewed the triage and medical reports from PH?
 - Does the child have a Primary Care Physician (medical home)?
 - Have the medical records been requested? Received?
 - Was the child exposed to substances prenatally?

Considerations continued

- **Development/Mental Health:**
 - Has the EDN (CAPTA) referral been made? Was collateral sent or did you discuss the case? Was it a screening or a full evaluation?
 - Has the trauma screen/tool been completed? Concerns/behaviors? Other trauma?
 - Childcare
 - What other services are in place? Home visiting?
- **Parents:**
 - Needs?
 - Does the parent have a mental health diagnosis?
 - Does the parent have a history of trauma?
 - Does the allegation include substance abuse or DV?

Multidisciplinary Team

- Infant mental health therapists
- Schools
- CASA
- County Attorney
- Department of Health and Human Services
- Nebraska Families Collaborative
- Medical
- Adoption specialists
- Foster Care Review Office
- Home visitors/VNA
- Triage Center
- Domestic Violence advocates

Evidence-based practices utilized

- Child Parent Psychotherapy
- Circle of Security
- Substance abuse treatment integrated with parenting support

Child Parent Psychotherapy (CPP)

- Evidence-based dyadic therapy
- Caregivers and children birth to five
- Integrates focus on way trauma has affected the parent-child relationship
 - Child maltreatment, witness to DV, traumatic loss of a caregiver, disruptions of caregiving, serious accident/injury.
- Focuses on safety, affect regulation, and improving the child-caregiver relationship
- Average length of intervention: 6-12 months
 - Varies based on parent functioning

NCTSN April 2012

What does CPP look like?

- Sessions include child and caregiver(s)
- Therapist attention is focused on the parent-child relationship
- Therapist attuned to the context of the relationship
 - Cultural beliefs about parenting
 - Environmental factors such as poverty, immigration stressors

CPP Coordinated Referral

- All trained therapists in metro area invited to participate
- Track agency/provider availability to take new cases
- Family Permanency Specialist identifies family in need of CPP



Barriers/Solutions

- Created demand, supply needs to catch up
- Trained providers left agencies
- Existing providers did not have availability to take new clients
- Judges ordering CPP
- New training cohort in May 2016!



Systems Issues

- Identification of parents at the beginning of the case
 - File or placement
- Application of Indian Child Welfare Act
- Early Development Network/CAPTA
- Foster care medical exams
- Medical home

Other Data points

- Paternity
- Medical
- EDN
- Childcare
- Parenting time
- CPS History
- Court progress
- Services
- Placements
- Barriers



- Multidisciplinary team
- Court hearing attendance
- Zero to Three National Training Institute
- Project Harmony Training Institute
- Community Training
- Nebraska Young Child Institute
- National Council of Juvenile & Family Court Judges

Program Development

- Engaging partners
- Challenges
 - Caseload
 - Caseworker turnover
 - New program
 - Data collection
- Successes
 - Early childhood resources
 - Bringing awareness to the needs of young children
 - Professional relationships
 - Engaged Judges and Chief Justice



Questions?
