

Sheila E. McCarthy, LMSW

Sheila E. McCarthy, LMSW is a Licensed Master Social Worker and received her bachelor's degree in Sociology from Boston College and her Master's Degree in Social Work at Columbia University. Sheila has been working for the New York State Unified Court System since 2007, originally hired as a Coordinator for the Domestic Violence Compliance Parts in Queens Family Court. Since 2010, Sheila has been working for the Child Welfare Court Improvement Project (CWCIP), originally as the Liaison assigned to Queens Family Court, where she participated in citywide collaboration between the Court and child welfare agencies to identify gaps in services and barriers effecting permanency cases while strengthening communication and integration between the systems through continuous quality improvement. In early 2015, Sheila transitioned into her current role with CWCIP, as the NYC Liaison for the Statewide System Improvement Program. She has facilitated the planning and implementation during the pilot phase at the local level for both New York and Chautauqua counties.

BETTER FOR FAMILIES STATEWIDE SYSTEM REFORM PROGRAM

Judicial Approach to Child Welfare Cases Containing Substance Use Disorder

PURPOSE

To offer strategies for addressing families who appear in court as a result of child abuse and or neglect related to substance use.

DESIGN

The bench card provides specific inquires that may be made at each of the various court appearances as well as practice tips to make the most effective use of the process.

These inquiries are meant to be layered upon the best practices and legal requirements already in place.

▶ **Indicates a Practice tip**

❓ Indicates a Question to Ask

INITIAL APPEARANCE

Are these protocols triggered

- ❓ Based on the entire investigation, is there any reason to suspect the family may be impacted by substance use?
- ❓ Was an SUD assessment done of the respondent(s)? What were the results?

Engaging Parents

- ▶ **Speak directly to respondents and address them using their last names.**
- ❓ Mr. or Ms. _____, do you understand that the petition contains allegations of substance use?
- ▶ **If petition doesn't allege substance use and there is objection to the services based upon the petition consider directing an amended petition be filed.**
- ❓ Do you understand that you are being asked to undergo a substance abuse assessment?

OR

- ❓ Do you understand that you are being asked to go to treatment?
- ❓ Are you in agreement with that request?

Identification of Services

- ▶ **The following inquires relate to the substance abuse services that might be needed to keep the child at home or to achieve the permanency goal. The substance abuse service should be in addition to other relevant services the family may need.**
- ▶ **Services should be tailored to the needs of the family, not guided by a standard checklist**
- ❓ What if any services have been referred at this time?
- ▶ **If the parties consent, issue an order directing the respondent(s) to complete a SUD assessment and sign releases authorizing the results and recommendations be sent directly to the court.**

OR

- ▶ **If the parties consent, issue an order directing the respondent to follow the recommendations from the SUD assessment, begin treatment, and sign all necessary releases.**

Where Removal is Requested, Efforts to Prevent Removal

- ❓ Were substance use related services offered which would allow the child/ren to remain at home?
- ❓ How are these services related to the safety factors which place the children in immediate danger of serious harm?
- ❓ Was a safety plan developed that satisfied the substance use related safety threat and allowed the child to remain at home prior to court involvement?
- ❓ If services and or a safety plan were in place previously, what has since occurred that requires court involvement?

Return of a Child Previously Removed

- ❓ What is preventing the child from returning safely home today? Is the current and immediate safety threat related to the substance use allegations? If so, how?
- ❓ Can a safety plan be developed, including an order of protection, which would allow the child to return home today?
 - Do the substance abuse issues specifically prevent the respondents from being able to provide the minimally adequate standard of care to protect the child?
 - Will the removal from or addition of any person to the home allow the child to be safe and be placed back in the home?
- ❓ If the child cannot be returned to the home, have the conditions for return been conveyed to the parents, family and child, and do they understand the conditions?

Set fact finding date within 90 days

TWO-WEEK AND MONTHLY APPEARANCES

Process Questions (All appearances, as appropriate)

- ▶ **When speaking to respondents, address them by their last names. If the respondent has not consented to a SUD assessment or any other service, use the two week appearances to engage the respondent.**
 - ▶ **If the child is placed, remind respondents that the county must file a TPR when a child is in care for 15 of the most recent 22 months, they can file at 12 months, and if there is no contact at all with the child for 6 months, TPR can be filed on the basis of abandonment.**
 - ▶ **If the respondent has made efforts to or has completed the SUD evaluation, be sure to recognize their positive efforts**
- ❓ Has the respondent(s) completed their substance use treatment assessment?
 - ❓ Have the parties and/or attorneys reviewed all reports and assessments?
 - ❓ Has a resolution or any settlement offer been discussed? Does the court need to schedule a settlement conference?
- ▶ **If applicable, consider FTC for cases that present as high risk/high need**

Status of Substance Abuse Services

- ▶ **During the 2 week appearances, focus should be on the treatment plan/recommendations. Discuss any barriers and potential solutions to overcome those barriers.**
 - ▶ **Monthly appearances center on ongoing progress in treatment. Progress in services should relate to demonstrated behavioral changes and how they impact the permanency goal.**
 - ▶ **Special attention should be given to their sober time, step-downs in level of care, etc. If there has been a setback, speak directly to the respondent about what happened to establish accountability.**
- ❓ What steps can be taken to avoid similar behavior in the future?
- ▶ **Keep encouraging them to work towards their goals.**
- ❓ Has the respondent(s) been drug tested? If so, when, how often and what were the results? If not, why not, and what is being done to ensure appropriate drug testing regimen?
 - ❓ Is the respondent(s) involved in self-help/sober support groups?

Family Time (All appearances, as appropriate)

- ❓ What is the frequency, duration and level of supervision of the visits?
 - ❓ What is the overall quality of the visitation? What are the strengths of the parent during the visit? What parenting issues need to be worked on and or developed during the visit?
- ▶ **As the case progresses, discussions around visitation should focus on behavioral changes and growth. Extra care should be given to the level of engagement between parent and child. Continue to highlight strengths and offer encouragement around areas that could improve.**
- ❓ If applicable, is the current level of supervision still necessary?
 - ❓ If applicable, are Orders of Protection still necessary?
 - ❓ If visitation is not occurring, what are the barriers? Is there a plan in place to overcome those barriers?

Review of Placement (If applicable)

- ▶ **It is important to keep the safety issues that brought the child into care front and center at each court appearance. When thinking about the following questions, behavioral changes, improvements in parenting and successes in treatment and other related services should be emphasized.**
- ❓ What is preventing the child from returning home today?
 - ❓ Have the factors which placed the children in immediate danger of serious harm been ameliorated? If so, how? If not, what needs to change?
 - Does SUD continue to prevent the respondent from being able to provide the minimally adequate standard of care to protect the child?
 - ❓ Can a safety plan be developed that would allow the child to return home?

If appropriate, orders should be modified to reflect changes in services, placement and or visitation

BETTER FOR FAMILIES

STATEWIDE SYSTEM
REFORM PROGRAM



Office of Children
and Family Services



NEW YORK STATE UNIFIED COURT SYSTEM
CHILD WELFARE COURT IMPROVEMENT PROJECT



Office of Alcoholism and
Substance Abuse Services

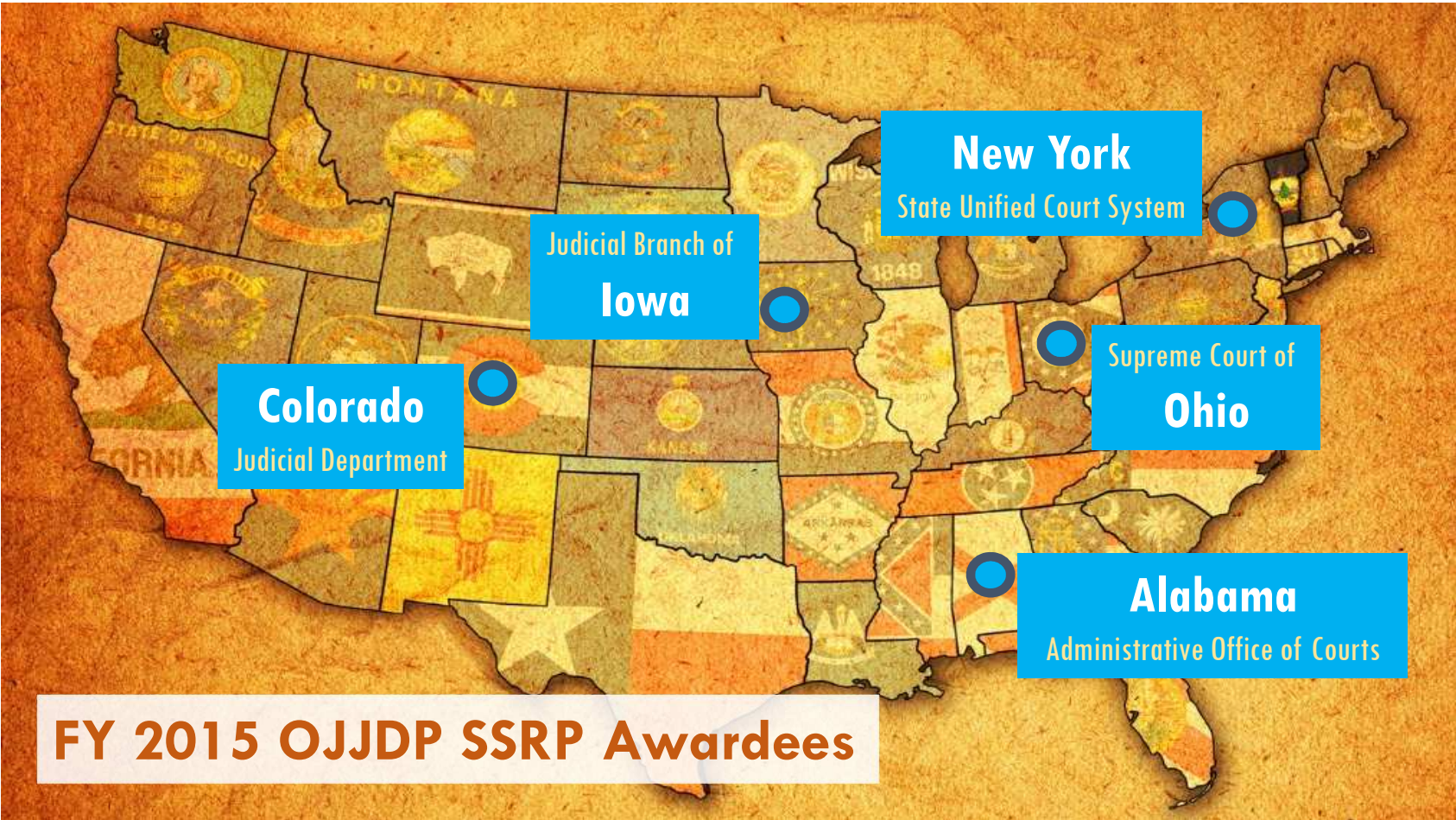


Better For Families

STATEWIDE SYSTEM IMPROVEMENT PROGRAM

Statewide System Improvement: The New York Experience

Sheila McCarthy, LMSW
SSIP-BFF Liaison
Child Welfare Court Improvement Project
semccart@nycourts.gov



FY 2015 OJJDP SSRP Awardees

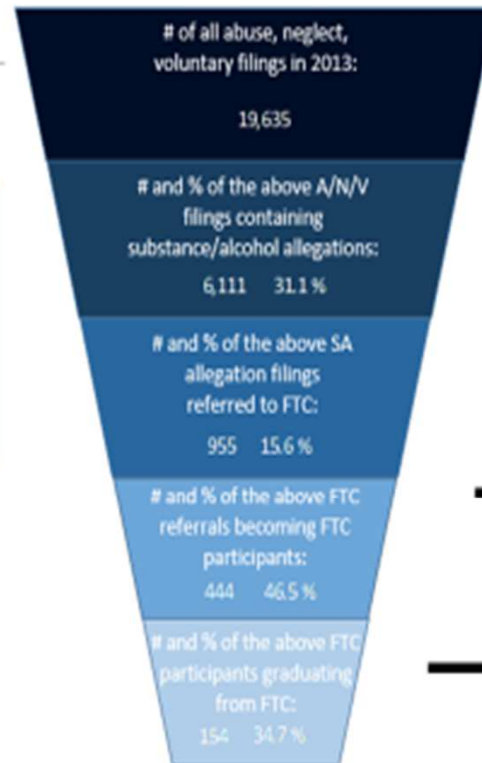
Why was there a
need for
statewide system
reform in New
York?



The Need for Statewide System Reform

Substance Abuse Filings and Family Treatment Court

Aggregate national data from case file reviews indicate that a **minimum** of 60% of child welfare cases involve substance use disorders



→ Are we identifying our families?

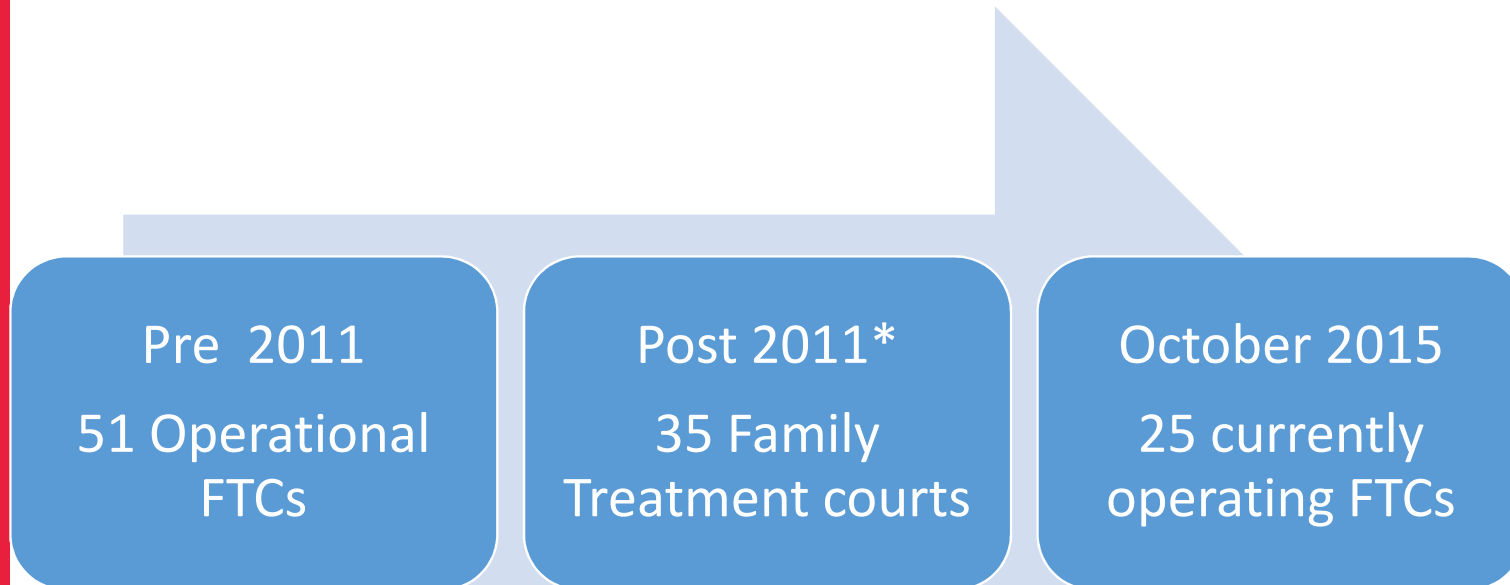
→ Are we using our current resources to capacity?

→ Are we unnecessarily excluding people from the process?
Are we engaging the population?

→ ARE WE DOING THE BEST FOR OUR FAMILIES?

Source: CWCIIP Data Metrics & UTA Data (Office of Policy & Planning)

New York State's FTC Landscape



*As reported by The Office of Court Administration's
Office of Policy & Planning in 2014



**KEEP
CALM
AND
LEARN YOUR
LESSONS WELL**

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Child Welfare Court Improvement Project

Lessons Learned From FTCs

- ❖ Families have better long-term permanency outcomes when they engage with FTC
- ❖ Families that do not complete FTC successfully still have better long-term permanency outcomes as compared to families that do not have any contact with FTCs
- ❖ These lessons support the idea of infusing some of the FTC court practices into the general child welfare court practice



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Child Welfare Court Improvement Project

SSIP – BFF Goals

❖ **Strengthen and Support Existing FTCs**

- Increase Participation Rates
- Improve Permanency Outcomes (timeliness)
- Increase the number of children who remain at home while in FTC

❖ **New Approach for All Child Welfare Cases – drawing on FTC Best Practices**

- Required all systems to examine current practices
- Subcommittee recommendations assisted with planning strategies at the local level



FDCs serve only 5-10% of the total
CWS population

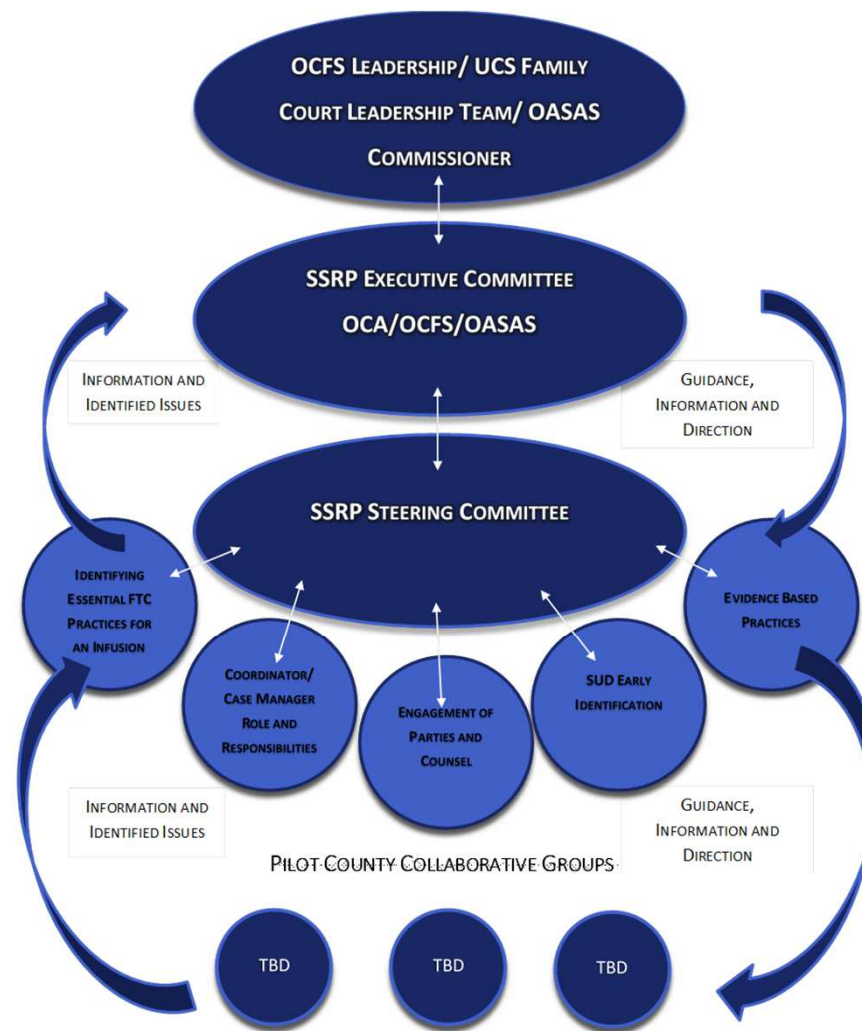
*What about the
other 90 – 95%
of children?*

*Given the magnitude of the
problem, can we be satisfied
with our response?*

Justice?

Reasonable
efforts?

Reasonable
effectiveness?



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**Subcommittee
Recommendations**

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**7 pilot sites have
been testing some
of these ideas...**



What's in it for me?



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- 
- Improved outcomes
 - Training and technical assistance
 - Data analysis
 - Access to a peer network
 - Possibility of becoming a peer learning site

What have the pilot sites been doing?

- Multidisciplinary collaboration
- Universal screening tool (UNCOPE Plus)
- Maintain fidelity to the models
 - Evidence based practices
 - New Approach protocols & Benchcard
- Periodic data reporting
- SUD and safety and risk trainings

UNCOPE Plus: Substance Use Disorder Screen

1. Have you spent more time drinking or using drugs than you intended to?
(0) No
(1) Yes
2. Have you ever neglected some of your usual responsibilities because of drinking or using drugs?
(0) No
(1) Yes
3. Have you felt you wanted or needed to cut down on your drinking or drug use in the last year?
(0) No
(1) Yes
4. Has anyone objected to your drinking or drug use?
(0) No
(1) Yes
5. Have you found yourself thinking a lot about drinking or using drugs?
(0) No
(1) Yes
6. Have you ever used alcohol or drugs to relieve emotional discomfort, such as sadness, anger, or boredom?
(0) No
(1) Yes
7. How often do you have a drink containing alcohol?
(0) Never
(1) Monthly or less (3) 2 to 3 times a week
(2) 2 to 4 times a month (4) 4 or more times a week
8. How many drinks containing alcohol do you have on a typical day when you are drinking?
(0) 1 or 2
(1) 3 or 4 (3) 7, 8, or 9
(2) 5 or 6 (4) 10 or more
9. How often do you have five or more drinks on one occasion?
(0) Never
(1) Less than monthly (3) Weekly
(2) Monthly (4) Daily or almost daily
10. How often do you use marijuana, any other drug, or prescription medication to get high?
(0) Never
(1) Monthly or less (3) 2 to 3 times a week
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BETTER FOR FAMILIES STATEWIDE SYSTEM REFORM PROGRAM

Partnership of Helping Providers (PHP)

- Created a multidisciplinary Team with committed members with shared outcomes
- Utilizing the wrap around process to promote family voice
- Utilizing peer recovery coaches
- Promote better communication and decrease duplication
- Promote Recovery and Family Sustainability with child safety

Chautauqua NA/NN filings

<u>Entry Year</u>	<u>All Filings</u>	<u># With SA Allegations</u>	<u>%</u>
2013	196	66	34%
2014	201	72	36%
2015	239	94	39%
2016	204	96	47%
2017	192	120	63%

Next Steps

- ❖ Motivational Interviewing Training for all caseworkers and supervisors
- ❖ Full scale SSIP evaluation by Dr. Alicia Summers
- ❖ Data outcomes with CIP Metrics



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