## **Definitions Guide for Tool Kit Recommended Best Practices**

Out-stationed Specialists/Co-located Staff: Child protection (CP) workers specialize in working with cases where alcohol or other drug (AOD) addictions are present OR all child protection workers are skilled in working with families where AOD addictions are present. Specialized skill-based training has taught CP workers how to work with families dealing with AOD addictions.

Intensive Case Management/Service Coordinator: A service coordinator establishes linkages to medical, social, mental health and crisis services, as well as coordinates court services. They are a liaison to resources and providers working with a family and woks in partnership with a parent mentor, to organize services and related issues regarding transportation, employment, education, housing, medical concerns and legal problems. A service coordinator and a parent mentor are assigned to each family, coordinating efforts to get parents in treatment and provide the needed linkages among providers. The case management position facilitates the often complicated and confusing court process involved with child protection, and the parent mentor can provide a friendly non-judgmental support system for the parent(s).

Parent Partners/Mentors: Parent partners are parents helping other parents successfully navigate the child protection system. They have previous child protection (CP) experience as consumers, are firmly established in their own recovery, and are willing to offer their experience and lessons learned to improve outcomes for other families. They provide outreach and support to parents involved with CP by offering help in understanding the process, encouraging parents to deal with their situation honestly, and facilitating parent success by building a safe, trusting relationship. They serve as guides

for parents working to enter and/or maintain recovery. Parent partners help to educate the family on child welfare system concerns, documents, requirements and procedures. They also provide consultation and feedback to CP staff to improve services, develop parent-friendly materials, and share their experiences with community members and other organizations.

Recovery Specialists: A Recovery Specialist (RS) facilitates immediate access to assessment, treatment and services by assisting the parent/family in navigating the resources available and removing barriers. The RS serves the parent in a combined role of mentoring and monitoring using engagement, motivational, and relationship building skills to provide the necessary support the parent needs to enter and sustain recovery. Services include assistance in scheduling and maintaining appointments related to sobriety and recovery supports; three times weekly in person visits; random observed drug screening twice weekly minimum; on-call telephone availability to parent; immediate relapse intervention; accompaniment to court hearings; transportation; housing linkage; development and management of road map activities and meetings; and provision of monthly reports to the court team members related to parental progress.

Shared Family Care: Shared family care (SFC) or whole family foster care is designed to prevent out-of-home placement. SFC allows the entire family to be placed together in a supervised setting while the parent(s) work on AOD issues, receive support in parenting, and children learn how to interact with sober and safe parent(s).

Family Recovery Programs: Residential treatment that accommodates the entire family providing women AOD treatment in a family-centered setting with their children to improve retention in treatment, psychosocial functioning, parenting attitudes and self-esteem. Family counseling, structured joint parent-child activities, therapeutic services for children, life skills training, parent training, education on child development, and parenting which is culturally appropriate are key components.

Wellbriety (Culture is Healing): Wellbriety teaches that honoring culture prevents chemical dependency and other dysfunctional behaviors. Elements of sobriety, recovery and community healing, which are often treated separately, are welcomed into the great Circle of Wellbriety. Recovery, treatment, intervention and prevention are not separate and unrelated parts of healing but rather are doors that a person can walk through to enter their own healing process

<u>Family Group Decision Making</u>: Family Group Decision Making (FGDM) gathers family members, professionals, and others closely involved in children's lives to discuss a family's strengths, concerns and resources to develop a safety plan. FGDM should include AOD professionals when the family has AOD issues.

Motivational Interviewing: Motivational interviewing is a client-centered, directive method for enhancing intrinsic motivation to change by exploring and resolving ambivalence. Utilizing motivational interviewing develops skills and awareness to better engage parents in the treatment and recovery process and facilitates a client's self motivation leading to compliance with CPS.

Comprehensive Family Assessment: Comprehensive Family Assessment (CPA) leading to an integrated case plan is a strategy designed to reduce barriers and maximize resources to effectively deliver services to children, parents, and foster parents based on identified needs. CFA recognizes patterns of parental behavior over time; examines the family strengths and protective factors to identify

resources that can support the family's ability to meet its needs and better protect the children; addresses the overall needs of the child and family that affect the safety, permanency, and well-being of the child; considers contributing factors such as domestic violence, substance abuse, mental health, chronic health problems, and poverty; and incorporates information gathered through other assessments and focuses on the development of a service plan or plan for intervention with the family. The service plan addresses the major factors that affect safety, permanency, and child well-being over time.

Integrated Case Plan with Extended Case Monitoring: Integrated case management puts clients at the center and gives them an active voice in shaping services that will support them in directing their lives, using a team approach to implement service plans. In this approach, each person is a member of the team, and a case manager works with the team to develop, implement, review and evaluate an integrated service plan. Extended case monitoring means extending to parents the opportunity for continued support of the child protection and formal AOD service systems to enhance the chances of successful recovery through periodic voluntary access to systems support as the parent finds it necessary, or through "case monitoring" under Minn. Stat. § 260C.201, subd.1(e).

<u>Incentives and Rewards</u>: Use of behavioral and psychosocial techniques as important components of effective therapies. According to research, cocaine and methamphetamine users stayed in treatment, and off drugs longer, when they were given small rewards in exchange for compliance and sobriety.

<u>Intensive Family Preservation Services</u>: Intensive family preservation services are short-term, intensive, in-home crisis intervention services that teach skills and provide supports for families when children are in imminent risk of out-of-home placement.

Family Dependency Treatment Court: A Family Dependency Treatment Court (FDTC) is a court-based collaborative program that quickly identifies and assesses parental AOD issues. The FDTC develops comprehensive multi-disciplinary case plans for families, ensures intensive case monitoring, provides for frequent reviews of orders, and closely monitors case plan compliance and progress in treatment.

Individualized Services for Children/Early Intervention Programs: All children should receive developmentally appropriate interventions to address their individual needs based on a comprehensive assessment. Services should be designed to promote resiliency in the face of the child's vulnerability, e.g., Attention Deficit/Hyperactivity Disorder (ADHD), and ongoing risk factors in the family, school and community. Services should include assisting the child in adapting behavior and adjustment to a new setting.

<u>Focus Groups for Fathers</u>: CP and AOD service providers should have a strategy to improve their service delivery to fathers. This includes convening focus groups with fathers in recovery who have experience with the child protection system to identify barriers in the system, and to elicit recommendations for constructively engaging fathers in the process.

Father Specific Case Planning and Agency Cross Training: Case planning that addresses the father's needs in the same way that it addresses the mother's. Cross-system training on interacting with fathers who have chemical health issues includes: father education in early childhood development; creating father friendly services; engaging and retaining fathers in services; highlighting the differences in maternal and paternal parenting styles, helping mothers and fathers to understand them, and understanding the role of mothers as gatekeepers.

Brochures for Fathers: A comprehensive *Know Your Rights and Responsibilities* brochure for fathers involved with families with AOD issues should be developed and widely distributed.

<u>Support Groups</u>: An integral component of service delivery should be support groups for fathers with opportunities for child interaction.

Interagency Communication Protocols: Protocols that allow for sharing information among programs that are working together to serve clients. These include the need to assure a full assessment and understanding of client needs, monitoring progress on case goals among varied service providers, assuring that agencies are not working at cross purposes, such as making conflicting demands of clients or undermining each other's efforts, and making efficient use of resources to avoid duplication of efforts

"Father Friendly" Agency Checklist: Agencies and treatment providers use checklists when working with men who have chemical health issues. Checklists can help to identify a father's legal status, and assist them with establishing paternity; provide guidelines and support for staff; and help conduct a father-friendly environmental assessment.

