REPORT OF TELEPHONE FOLLOW UP WITH PROGRAMS IMPLEMENTING SPECIAL STRATEGIES TO COMPLY WITH ASFA REQUIREMENTS

Submitted to:

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American Bar Association

by:

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I. Introduction

A. Overview

The following is a summary of the telephone follow-up conducted by American University during the period April 1 – July 2, 2004 with: (1) 34 judges who responded to the ABA/ASFA survey indicating they had introduced special strategies to comply with ASFA requirements; (2) two additional judges to whom we were referred by survey respondents to talk over developments in the respondents’ jurisdiction; and (3) two additional judges who had been sent the survey, instituted relevant initiatives but whose survey response had not been received.

The report of each program contact is organized in the following categories: (1) survey response provided (excerpt) (2) summary of strategy: (3) problem(s) being addressed; (4) impact; (5) additional background information; (6) service provider/other local officials to contact; and (7) recommendations re follow-up.

In all, 36 judges were contacted by phone, in 19 states and the District of Columbia, and 34 different counties/judicial districts. A number of the individual judges contacted sat in multiple counties and/or districts, so that the actual number of counties reflected in their comments is considerably more than the number of judges contacted. Fourteen of the programs covered during these follow up contacts were suggested for further consideration regarding additional follow up, either with the judge or with local providers supporting the initiatives highlighted, and an additional eight were suggested for possible further follow up consideration. Four of these programs are pilot sites with potential statewide replication and, for this reason as well as the merits of the particular initiative, are suggested for potential follow up/site visit consideration.

In addition to the jurisdictions represented in the survey respondents, follow up may be considered with four jurisdictions which were not included among the courts surveyed but have instituted ASFA related initiatives that have received national attention. These programs, described in Part Three of the Report, are located in: Dade County (Miami), Florida; Jackson County (Kansas City), Missouri; San Diego, California, and Suffolk County, New York.

B. Observations

The courts reviewed reflect a number of innovative approaches being applied to the dependency caseload, including: adaptation of mediation techniques that were successful in other civil matters to a wide range of dependency legal and case plan issues (reportedly resolving a much higher percentage of cases as well as substantially reducing appeals); utilizing family conferencing approaches to promote kinship and other community placements and support services; and greatly improved legal services.

Among the strategies reported being used to improve the court’s capability to comply with ASFA requirements include:

1 Missouri, North Carolina, Texas (family conferencing), and Washington (defense services)
(1) early and frequent case reviews, particularly during the first six months -- which can not only stimulate early provision of services but can also keep the various agencies actively providing services and accountable;

(2) use of mediation (see above), frequently early on, to identify and develop agreement on issues in the case, including jurisdiction, placement for the child, conditions the parent must comply with, etc.; not only does the mediation process reduce the adversarial nature of the situation but it is reportedly also getting parents invested and constructively participating in the process and reducing appeals;

(3) the use of family conferencing (noted above) for identifying issues, family resources, potential actions to pursue, as well as the case plan; it can also provide "reality therapy", particularly in a situation where a mother may have her mother taking care of the child "temporarily" but not necessarily "permanently", so the judge's inquiry re a plan for "permanency" can make everyone immediately take a much harder look at the situation for the long term;

(4) continuous involvement of CASA volunteers who appear to contribute tremendous value to the court, including, as one judge phrased it, serving as the court's "eyes' and "ears";

(5) the use of TASC -- traditionally a criminal case management/referral service -- for providing case management capabilities for dependency cases;

(6) the introduction -- as early as possible – of some level of visitation with the parent in appropriate cases -- which can be gradually increased -- to counter substantial periods of out of home placement of the child which can also work against efforts for reunification; and

(7) frequent (sometimes weekly) meetings of representatives of the various agencies involved to discuss the case, exchange information on it, and work together to address the parent's needs.

Despite their diversity, most of these programs share important common characteristics, including:

- enhanced court oversight of both participants and services/agencies
- much more intensive case supervision
- much more intensive case management, including comprehensive assessment of family needs and the development situation of the child;
- much greater effort to establish working linkages and coordination among treatment providers, other service providers, and the court;
- much earlier case reviews; and development/implementation of service delivery plans; and
- increased mechanisms to assure accountability – of both service providers as well as litigants

Most of these programs also reflect the courts’ recognition that:

(1) a court hearing – whenever it is scheduled -- generally promotes action (by service providers as well as litigants); therefore, in dependency cases it is important to conduct court hearings early and frequently in the process and to ensure that these hearings promote meaningful action;
(2) extensive case management and ancillary services must be provided in these cases; the courts can’t simply issue an order and expect a parent to comply – particularly a parent who is already under the influence of alcohol or drugs and has depleted most, if not all, of their personal as well as other resources for dealing with their life situation;

(3) demonstration of “reasonable efforts” needs to require:

- putting in place the services needed to conduct meaningful assessments of the developmental and other needs of the child and the family situation very early in the process;
- putting in place the services, case management, and supervision necessary to try to address these needs, and maintaining a documented history of the efforts and progress subsequently made by service providers and litigants to reunify, if possible, in order to make determinations regarding permanency planning; and
- the capacity to document, very specifically the nature, range and extent of services provided to the parent AND the support exercised to promote service delivery and meaningful parent participation

Many of these courts have also pointed to the need to coordinate the dependency docket with the criminal docket – often involving the same parent(s) but handled by different judges, frequently in different courts. In some instances, the dependency case cannot be meaningfully dealt with until the criminal case is disposed.

A few courts are also introducing strategies for reducing the caseload of dependency cases subject to ASFA, either through assignment of retired senior judges to augment judicial resources and/or to institute screening procedures to screen out less serious cases so that the dependency court judge can focus on the more serious cases warranting the court’s attention.

Many judges also indicated that, with this intensive infusion of supervision and services, if meaningful progress isn’t made early on – particularly after a child has been removed from the home -- the court can, in most cases, make a tentative determination after a relatively brief period of time -- clearly at the sixth month -- what direction the case will be taking. In this regard, it was therefore interesting to note that, while the ASFA requirements collapse the timeline for permanency planning in one sense, they are, in reality, stimulating many jurisdictions to expedite the court’s intervention and service delivery so that the ultimate impact of ASFA may result in increased reunification in the long run – at least in jurisdictions which implement these strategies. In other words, many of the judges with whom we spoke do not indicate that they felt the ASFA timelines are necessarily unrealistic since, unless meaningful planning for reunification begins at time of petition filing and subsequent supervision, case management and service delivery is closely monitored to assure reasonable -- and even best – efforts have been made to achieve reunification, the court can generally determine whether permanency is the requisite route generally long before the 12 month period has elapsed.
II. Summary of Telephone Follow-up Re Special Strategies Being Used to Address ASFA Requirements:

A. SUMMARY RECOMMENDATIONS

Part One: Follow up With ASFA/ABA Survey Respondents (and Judges Referred by ASFA Respondents)

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<thead>
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<td>Judge Lonna Malone</td>
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<td><strong>Part TWO: Follow up With Non-ASFA/ABA Survey Respondents</strong></td>
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<td><strong>Part THREE:</strong> ADDITIONAL JURISDICTIONS WITH RELEVANT /PROGRAMS THAT HAVE RECEIVED NATIONAL ATTENTION THAT WERE NOT SURVEYED AND HAVE THEREFORE RECEIVED NO TELEPHONE CONTACT</td>
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<td><strong>New York</strong></td>
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<td><strong>Part FOUR:</strong> Information on Other Relevant programs (from the Drug Court Clearinghouse) which are being followed up by other project staff</td>
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Summary of Telephone Follow-up Re Special Strategies Being Used to Address ASFA Requirements

B. SUMMARY OF TELEPHONE DISCUSSIONS

Part One: Follow up With ASFA/ABA Survey Respondents (and Judges Referred by ASFA Respondents)

ARKANSAS

No. 1

Survey Response:

| AR | Benton | 4 | Jay T. Finch | Circuit Div. III, 19th Judicial District West | (479) 271-1020 | (479) 271-5752 | Combining adult drug court for parents with juvenile judges presiding over children in foster care because of parents drug use. |

5/12: 5/17: Judge Jay Finch:

Judge Finch is the adult drug court judge – also spearheading the planning for the juvenile drug court if they can get funding.

Summary of Strategy: trying to develop mechanisms to identify cases in other dockets that involve situations of parental substance abuse (e.g., on the criminal docket, for example) that may have not yet formally entered the dependency case process in order to provide services earlier and in a more coordinated manner:

Problem being addressed: Prime problem is that many criminal drug case defendants have children but they never come to anyone’s attention if case isn’t in the dependency case system, so he has been trying to alert other judges to refer criminal cases they receive that involve defendants with children to the adult drug court so that he can try to develop family-oriented services, even though only the parent is involved in the criminal case process.

Impact: Local officials feel his approach is sound but difficult to get the early screening that is appropriate. (I suggested contacting a local university to see of student could serve as interns with the DA to do this – I’m also sending him information from Judge Pamela Abernathy in Salem, Oregon, who has done something along these lines (Project “BOND”).

Additional Background:

5 judges on the court: 2 criminal; 2 domestic relations; 1 juvenile;
If mother has children and relapses, DHS will probably intervene and try to remove the children; but court can still provide services to her as an adult drug court defendant;
Sometimes difficult when dealing with parent as an adult criminal defendant and court knows there are dependency issues involving children but doesn’t have formal jurisdiction to address them.

Services providers are different: Dependency: DHS provides services: Drug Court, local treatment provider (Decision Points) provides services – primarily inpatient but have also developed very structured outpatient services

Drug court is primarily post adjudication

Needs to have someone screening criminal cases for children – public defender and/or publicly paid counsel might be able to but often gets into case late

Real problem is getting criminal justice officials to look at parents when they come into the system to determine whether they have children

Community agencies? Don’t seem to have any involved that could cast light on the changes he is trying to bring about

Case management: provided by drug counselor (paid by Department of Community Punishment) and probation

Service Provider/Other Local Officials to Contact: None (innovations are in the court itself)

RECOMMENDATION FOR FOLLOW UP: No point in formal follow-up but should recognize Judge Finch’s attempt at a holistic approach to dealing with families regardless of which member actually comes into the system or which “door” (e.g., criminal, dependency, etc.) the family member enters.

IDAHO

No. 2

Survey Response

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<th>ID</th>
<th>Bannock</th>
<th>Juvenile Court Assignment 10 yrs.</th>
<th>Bryan Murray</th>
<th>We are testing our parents in our juvenile drug court making it sort of a family drug court. A testing system for parents. Drug testing provides constant motivation to stay clean</th>
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5/3/04: Bannock, Id: 208/234-1087: Judge Bryan Murray

Summary of Strategy: drug tests parents of juveniles participating in juvenile drug court when suspects parents are using drugs and, when necessary, orders substance abuse treatment services for parents and family as well as juvenile;

Problem Being Addressed: situations in which parents are using drugs but, although situation hasn’t come formally into court as a dependency case, is impacting on the child who is already in the juvenile justice system and is participating in the juvenile drug court;

Impact: no statistical data, but clearly has impact in terms of reaching parents whose children are in the juvenile system and, for whatever reason, their substance abuse hasn’t come to the dependency court’s attention but it, nevertheless, is impacting on the children, if, through no other evidence, illustrated by their involvement in the juvenile justice system.
Additional Background:

Has a juvenile drug court – under juvenile corrections act – gives them jurisdiction over parents as well – so if find substance abuse problems with parents can order parents to participate in juvenile drug court along with children – an expansion is in child protection, local child protection agency wasn’t doing much to follow up with drug testing, etc. so, through court improvement project, does drug testing right in court – case worker can require parent to come to court to drug test or come to detention center, check in and drug test them

If parent needs service, can also refer them to services as well; if parent has substance abuse problems, brings them in to the juvenile drug court

Juvenile Act: Title 20, chapter 5, Juvenile gives them jurisdiction to do this

Also have drug court workers who go out and test them

But if in dependency court, set up system to have detention center test the parent; juv corrections dept good at testing but Health and Human Services workers not good at testing – felt it interfered with their relationships

Use two different types of test – instant test (usually with juveniles) – good way to confront kid and get response;

Adults: more skilled at deceit – have excuses; so if positive, then send to lab – get response in 3 days

Helps a great deal because shows parents right away that they are being monitored – so make up their minds to get serious

Real meth problem – very addictive – takes at least a year to get brain functioning – so much easier to make – and cheaper –

attorneys had a little difficulty accepting the testing of parents at first – but once they realized the Court is using the drug court testing procedure to help the family support the child, they have accepted it

Service Provider/Other Local Officials to Contact:

Child Protection Agency:

Diane Martin: local supervisors in Idaho Dept. of Health and Human Welfare
208/ 239-6200   Idaho State Dept of Health and Welfare:

RECOMMENDATION RE FOLLOWUP: Don’t recommend further follow up; idea of testing parents can be included in our report but we need to be sure we refer to the specific statutory authority in Idaho that permits this.

No. 3

Survey Response

<table>
<thead>
<tr>
<th>ID</th>
<th>Minidoka</th>
<th>5th Judicial Dist. Court</th>
<th>Larry R. Duff</th>
<th>No</th>
<th>I do require that substance abuse intervention be set out in details in case plan + do provide dual track approach to be used if patient does not comply</th>
</tr>
</thead>
</table>
Summary of Strategy: for the past two years, has developed a dual track system for handling dependency cases which entails:

- developing a detailed case plan early (within 60 days of the filing of the petition and within 30 days following adjudication which specifies the treatment and other services the parent requires and other conditions with which the parent must comply;

- assigning the parent initially to a “Unification Track”, clearly indicating to the parent what is expected if they hope to reunify, and then conducting a review hearing in 90 days; If the parent is doing well, he/she continues on the reunification track;

- If he/she is not doing well, the parent is assigned to the second track for alternate placements. The parent can continue on the reunification track with the services and conditions initially imposed but the case will also proceed simultaneously to explore alternate placements so that, at the second review hearing, or whenever appropriate, the court will be prepared to move to a full dual track approach.

Problem Being Addressed: The dual track system is designed to get services provided (including substance abuse and other needs assessments) as early as possible so that parent will have maximum opportunity to address needs and reunify. The judge feels that, if removing the child is not enough to get the parent’s attention, and an influx of services early on is not enough to try to make reunification possible, then “reasonable efforts” have been demonstrated to try for reunification and alternate placement is the appropriate strategy to pursue.

Impact: Still terminate over 50% of the cases but seemed that, before starting this, only occasional case would result in parental rights not being terminated. In past, seemed like when we had a successful case it was an exception – now 25-35% are successful though no stats to prove this.

Additional Background:

Has been doing dual track approach and required intervention approach in the case plan for about two years, particularly for last 1.5 years since drug court program; dual tracks consist of:

- reunification track;
- other track is for cases for which the department will explore alternate placements

He starts with unification track – sets up timeframe; if parent not in compliance, will order department to explore alternative placement as well as reunification – e.g., the dual track process.

Then have review hearing in 90 days – then move into full dual track approach

Case plan comes about 60 days following filing of petition and 30 days after adjudication.

Many cases come to court on basis of substance abuse of the parent – so he wants to know how that will be addressed.

Often they are talking about getting an evaluation but he wants to know how they are going to address their substance abuse problems right from the start; he tells participants that if they don’t comply he will look at termination.

His experience is that if removal of the child from the home isn’t enough to get them working on substance abuse treatment, they aren’t going to get drug free so generally end up with termination.
So he tends to fast track them more

Seems that getting case plan to address parents’ treatment needs up front is critical;

He also has jurisdiction over the termination as well

Also has juvenile cases – major meth problem – juvenile drug court has been very important – provides multiple drug tests and drug court hearings; counseling

Most of the CPS cases are meth – 90% meth

Handles all dependency cases – in Minidoka Co.; and most in Cassia Co.

Also handles juvenile cases that convert to dependency cases – where caseworker does home visit and does search in parents’ area so convert case to cps and the criminal case

Then try to get parents into drug court; keep juvenile in drug court; and the treating overall problem through a family oriented approach

Drug court: have about 60 adults –among all counties

Sits in both counties for juvenile

Service Provider/Other Local Officials to Contact:
Keith Fenton: Dept of Child and Family Services/ Burleigh Office: 208/678-0974

RECOMMENDATIONRE FOLLOW-UP: I think the dual track approach is a practical strategy for dealing with both the parent’s needs and the ASFA timelines. I don’t see the value of a site visit but, perhaps, it might be worthwhile to contact the Child and Family Services official to determine how the dual track is working from a service providers’ perspective.

IOWA:

No. 4

Survey Response

<table>
<thead>
<tr>
<th>IA</th>
<th>Scott</th>
<th>District Court</th>
<th>Judge John G. Mullen</th>
<th>Canter for Alcohol and Drug Services (CADS) offers a women's issues group to help women cope with parenting, domestic violence; a wide variety of personal issues to help them cope and be successful. A very nurturing, supportive, outreach program</th>
<th>CADS 1523 S. Fairmont St. Davenport IOWA, 52802. (563) 322-2667. Director Carolyn Ross</th>
</tr>
</thead>
</table>

5/6: 563/326-8778: Judge John G. Mullen:

Summary of Strategy: Local treatment center offers special services to women to help them cope/address their special needs – dealing with domestic violence, personal needs for self esteem, skills; parenting skills, etc. These services are essential to their ability to maintain their sobriety:
Problem Being Addressed: Parent’s capability to maintain sobriety is conditioned on dealing with a wide range of personal/psychological needs. Substance abuse treatment alone is not enough.

Impact: No specific data available on impact but these holistic services are clearly critical to a parent’s ability to become/maintain sobriety. Difficult to specifically measure impact because there have been many cutbacks in services due to fiscal problems. Child protection petitions are therefore down – most likely because they are being investigated and services are being arranged without the filing of a petition in certain cases.

Additional Background:

Center for Alcohol and Drug Services – is center for providing drug treatment; started a women’s issues; very helpful because these women usually have many, many problems in their lives and their ability to maintain sobriety is dependent upon dealing with many other issues – male may be using drugs; finances; abuse, etc.

Many of them are in various courts at the same time so helping them be better parents and stay out of harm’s way and be successful is critical to being straight and sober.

Also have housing needs; need stable housing and employment

Good support and group/individual counseling as well as aftercare, etc.

Representatives sometimes come to the court; also have minority counselors involved—diversity of people Handles everyone with substance abuse problems – can handle dual diagnosis as well as long as substance problems

Not just domestic violence or poverty but have other agencies as well – Mental Health Center (Program called “Frontier”) which is outreach, skill building, can serve men and women—provide food, group and individual counseling, social skill building, case management, etc.; coordinate with juvenile court, DHS, etc. and will work with Center for Alcohol and Drug Services

280 new petitions a year average but Department of Human Services, because of budget cutbacks, has reduced filings – seem to resolve or handle some cases without filing a petition

CADD communicates primarily to DHS for which they

Send reports – also use agency for evaluations for parental and juvenile services

Review hearings every six months unless needed more frequently

Service Provider/Other Local Officials to Contact:

Contact: Center for Alcohol and Drug Services (CADS)
1523 S. Fairmount Street
Davenport, Iowa 58902
Tel: 563-322-2267
Director: Carolyn Ross

Domestic Violence Coordinator for State of Iowa: Jennifer Jeweler: (form orders, etc.): 515/281-5241

RECOMMENDATION RE FOLLOW-UP: May want to contact CADS to further explore the nature of services they provide; but don’t see any point in conducting a site visit unless this Center stands out as very unusual and worth potential replication.
No. 5
Survey Response

| IA | Polk | 3 | Karla J. Fultz | 5th Judicial District | (515) 286-3756 | (515) 286-3858 | (1) Family Drug Court. (2) House of Mercy inpatient residential program for women and children. | The program receives no specific funding but is asking for a DOJ implementation grant |

April 21, 2004: Judge Karla Fultz: Polk Co. (Des Moines), Iowa

Summary of Strategy: Recognizing the impact of the frequent review hearings conducted for the juvenile drug court over which she presides, she instituted a similar process of frequent (weekly) review hearings for dependence cases involving women in the local inpatient residential program. These frequent hearings provide an opportunity to see both how the parent is doing as well as to assure that necessary services are provided to address initial needs and those which have arisen.

Problem Being Addressed: The Juvenile drug court experience demonstrated the important role the court can play through frequent hearings to motivate the parent, recognize their accomplishments in the short term, as well as ensure that needed services are, in fact, provided.

Impact: no hard statistics but currently 25 women in the program (started with 11); other attorneys have asked her to provide these review hearings for their clients as well; many women are developing themselves (jobs, education, etc.)

Additional Background:

Started juvenile drug court in November 2002 with no funding; had been doing the teen drug court which has been very successful – 80% of the youth who leave have no further problems. She does the juvenile drug court as well. They have one family/one judge approach in Iowa

So spoke with residential treatment provider (House of Mercy) to ask if they could bring the 11-12 ladies in the dependency court to the court each day so she could apply the drug court approach for them; they agreed and 1 DHS worker also came – would send email report on special issues that had developed.

Then other attorneys with dependency cases on other dockets began to ask if she’d take their cases for the review hearings as well – ended up having their entire cases transferred to her.

Now has half of participants in inpatient and half in outpatient services. Currently 25 women in the program, 14 inpatient (I have listed 11-12 on docket, but I’m not sure if that makes sense), 11 outpatient. Outpatients are in continuing care, waiting to get into House of Mercy, or have already stayed there. Meth is the primary drug of choice.

House of Mercy provides the inpatient services – also provides child care; for any age, though more difficult if teenagers involved; also have a clinic; operate in an old, Catholic retirement home. Families can stay there for up to 2 years and all ages of children are welcome, but its really hard for the teens to be a successful part of it because the family live in one room together. HOM originally HUD funded.

Process is: Petition is filed; child may be placed in foster care; if that’s the case, the parent has the opportunity to participate in substance abuse treatment (3 month waiting period for House of Mercy but may be able to expedite waiting period if enroll in outpatient services or if pregnant IV-using woman)
There are two other programs that provide residential services but they require the child to be reunited with the mother within 30 days to receive ADC payments – which may not work out with the mother’s treatment needs.

No. of dependency cases: 4 full-time judges; each has around 1000 (I have 800-900 in my notes) cases (she has about 100 more because of the case referrals from other dockets); 65% dependency; 35% delinquency

She’s been doing this since 1970, she works on the bench 2 hours a week on Wednesdays from 9-11 am; she has approximately 1000 open cases a year. She has seen grandchildren and great grandchildren go through court of woman she previously dealt with.

ASFA Process:
- Petition is filed: must make reasonable efforts within 60 days
- Pretry the case: 10-14 days
- Set for trial: within 60 days
- Services start right away if parents agreeable
- Adjudication: can’t order the parent to treatment (can’t require a private agency) but can strongly recommend
- Currently: 8-9 women have completed their GED in the program and are beginning college

Real need for these women is to build their self confidence; housing; education; avoid replacement pregnancies.

She hears TPR as well as the review process – impractical to have another judge hear the TPR considering the voluminous files that develop

She did 100 terminations last year –important for judge to know what has occurred – hard to get it from just testimony which isn’t always truthful; need to know what has actually happened; She would recuse herself if situation every came up where she thought she couldn’t be impartial

Service Provider/Other Local Officials to Contact:

House of Mercy: Todd Beverage
Department of Human Services: Dale Schmitz (male)
County Attorney: Ray Blasé

Also GALS but not formally involved because of funds

We will send her the Primer and the Memo re family drug courts

She will send us info on the juvenile drug court (never received)

We will also send a description of her program to BJA (they are applying for DOJ grant)

RECOMMENDATION RE FOLLOW UP: The resources that have been developed appear to be outstanding, as is the knowledge of Judge Fultz in terms of how to access them, particularly in light of Medicaid restrictions, and to use the court’s authority to enhance the likelihood of promoting a parent’s recovery, including the use of frequent court hearings to promote accountability on the part of both the providers and the parent. I do not, however, see the benefit of a site visit. A follow up call to the House of Mercy to obtain a further description of their services and the funding that supports them may be useful.

ILLINOIS
No. 6

Survey Response

| IL  | Cook | 1 | Sandra Otaka | Circuit Court of Cook County | (312) 433-6942 | (312) 433-6942 | TASC coaches: Early evaluation of dry: Alcohol problems tribal programs help sustain recovery | Need more coordinated service to address education, vocational-job skills, especially mental health |

Staff Attorney: Antonio Rodriguez: 312/433-4707 312/433-6942; May 14, 2004: Judge Sandra Otaka:

**Summary of Strategy:** The entire juvenile court system uses TASC- refer cases for JCAP evaluation by TASC if drug involvement – based on self reports; TASC provides assessment of drug involvement and treatment needs (inpatient/outpatient and how much treatment the individual needs; TASK also than assigns a “TASC Coach” –who encourages the parent to do their treatment, makes their appointments; TASC person comes to court regularly to report as well.

**Problems Being Addressed:** need for more coordinated services to address education, vocational, mental health and other needs parents have and which they can’t address themselves;

**Impact:** no statistical data but it is clear that the TASC services are filling a very obvious gap

**Additional Background**

Between 900-1000 families – not sure whether families or children

14 judges handling dependency cases, divided up geographically

her area has some Native American population – also high mental health issues

some calendars are predominantly drug calendar

all the dependency cases involve some form of child abuse

ICWA Cases: handles many of the court’s Native American cases because of the geographic area she covers; BIA guidelines – ICWA: need to prove serious mental/physical abuse to the child – alcohol isn’t alone – not binding

Tribe may say they want jurisdiction – but tribe then sends it back because can’t provide services

**Service Provider/Other Local Officials to Contact:** TASC: 312/738-8933 (no special individual involved so may try Melodie Heaps, Executive Director to see who she suggests)

**RECOMMENDATION RE FOLLOW UP** Chicago, and several other jurisdictions, are utilizing TASC, which has previously focused on criminal cases but has valuable expertise in the field of case management that can be adapted to the civil/abuse and neglect caseload as well. Perhaps a follow up phone call to TASC to get a better sense of what TASC in Chicago (one of the lead TASC agencies in the country) is doing, as well as in other jurisdictions, particularly North Carolina.
KANSAS:

No. 7

Survey Response

<table>
<thead>
<tr>
<th>KS</th>
<th>Leavenworth District</th>
<th>Robert J. Bednar</th>
<th>Yes</th>
<th>Multi-disciplinary team to deal with individual cases. Attempts are being made to use community resources.</th>
</tr>
</thead>
</table>

5/3: 913/684-0715: Judge Robert Bednar:

Summary of Strategy: Kansas statute permits appointment of multi disciplinary teams to be appointed by court to investigate, address and plan for services in cases of youth/families in need of services in a wide range of neglect/abuse situations. These multidisciplinary teams, authorized statute, include: several representatives from school district including school psychologists, CASA representatives, several lay people who aren’t involved in court or school (e.g., post master, United Way, etc.), co attorney’s office, court services, community corrections representative. State dept of rehabilitative services also represented on team; also medical personnel; guidance team. The team’s work is coordinated by team leader. Court appoints members of team and then team determines who coordinates the team’s activities

Problems Being Addressed: The purpose of the teams is to obtain and provide referrals of juveniles in need of services before their situation reaches the point of having a case filed in court, so that, by the time the case is filed in court, if that is necessary, community resources have been exhausted and the court system can then be in position to focus on what needs to be done in terms of potential reunification vs. permanent placement.

Impact: Has been using this team approach for several years – this is the third year; multidisciplinary teams divert some of the cases so that, generally only the hardest cases come through the system

Additional background:

The court has authority to appoint representatives to these teams as well. They try to have 2 representatives from each organization on the team to split up the work.

Many of the cases are referred by schools or community service workers; however a judge could also refer a case to the multidisciplinary team committee if he/she feels the team’s services can be valuable. Schools can refer some of the hardest cases that have underlying causes affecting the hygiene and truancy problems observed.

The teams are permitted by statute but not every jurisdiction uses these teams (teams are used in Topeka (Johnson Co.), Douglas Co., probably larger jurisdictions; one of the underlying issues the teams address is the complex, multidisciplinary nature of abuse and neglect situations -- is it a medical? Behavioral? Etc.

Leavenworth has approximately 60,000 population

Judge Bednar has about 100 dependency cases a year – he is the primary judge handling these cases; also handles dependency, delinquency, habeas corpus matters

doc. attorney handles Children in need of care cases; as well as criminal cases
statewide effort to use this team approach; he will contact a colleague in Shawnee Co. who has been handing these cases for 16-17 years to see if any written reports re multidisciplinary assessments and services for Child Protection cases.

Call Friday – (he called later to say that his colleague in Shawnee County had no written materials or sample reports)

Kansas Statutes: KAS 38-1523.a: permits Multi disciplinary team appointment and assignment as well as disclosure of information/confidentiality

Service Provider/Other Local Officials to Contact:
James Easter 913/684-0757
Jennifer Schwartz 913/651-6440

RECOMMENDATION: FOLLOW UP: In light of the anecdotal impact Judge Bednar has observed on the dockets, and the potential statewide impact which this approach can have, I think it is worthwhile to follow up to determine how the team committee process actually works, the volume of cases that have been handled, any documented results available from state officials, and the perspectives of other judges in the state that may have used this approach.

LOUISIANA

No. 8

Survey Response

Terrebonne, Louisiana:

<table>
<thead>
<tr>
<th>LA</th>
<th>Terrebonne</th>
<th>32nd Judicial District</th>
<th>Timothy Ellender</th>
<th>Yes</th>
<th>In court drug screens</th>
</tr>
</thead>
</table>

May 3, 10, 2004: Judge Timothy Ellender: 2 p.m.: 985/873-6560; 5/3/04

Summary of Strategy:

Judge Ellender is able to obtain drug tests for parents appearing on the dependency docket and immediately results. This capability, originating from the drug court program that is in place, permits an immediate validity check on the services/progress the parent has been receiving to combat their drug abuse.

Problems Being Addressed: Need to validate information being provided re parent’s progress in drug treatment

Impact: N/a

Additional Background Information

Judge Ellender didn’t have time to speak at length because he handles a full criminal and civil docket and, although he tried to schedule several different appointments to talk, he was always called away for special arraignments, or other hearings

Service Provider/Other Local Officials to Contact: NA
RECOMMENDATION RE FOLLOW UP  No need to further follow up. Other judges have also started using immediate drug testing as well

MISSOURI

No. 9

Survey Response

| MO  | Adair | 7 | Russell E. Steele | Adair County Circuit Court | (660) 665-3145 | (660) 785-3213 | We use a family centered approach with the family support team, consisting of parents, foster parents, juvenile officer, children's division counselor, and counselors who meet monthly and negotiate written service agreements with the parents. Also, we hold expedited protective custody, adjudicate and disposition, and dispositional review hearings (p.c.-3 days adjudication/dispo-30 days, disp review - 90 days) which promotes more activity by the agencies and allows closer court supervision to monitor progress. |

Judge Steele: He is the only judge handling domestic cases

Summary of Strategy: This family centered approach is a pilot project instituted under the auspices of the State AOC and entails having a multidisciplinary team of services providers sitting down with the family early in the process to review the situation, determine what needs to be done and develop a plan to achieve these goals in a nonadversarial setting. The team includes: GAL, counselors, (judge doesn’t participate) and other service providers, as necessary, to perform case management, review problems, discuss goals, etc. try to be nonadversarial, although everyone attending may have a different approach

They try to hold these meetings every 30 days and have review hearings in court every 90 days (statutorily only required to review once a year);

Family centered approach therefore entails an in-group setting review every 30 days and then at court every 90 days. The approach --entails case management and periodic staffings involving family and other support who can be their advocates

Problem Being Addressed: Traditionally, activity occurs because there is a court hearing; so this approach moves activity up front and tries to get services and other necessary action beginning much earlier in the process and being sustained because of earlier and continuous court review

Impact: result is that children being returned to home more quickly as well as permanency plans being implemented more quickly because it is easier for the court to determine whether unification is viable; Traditionally, most activity occurs right before hearing so now, with more frequent hearings, more things are happening, implementing service plans or unification plans more quickly.

Additional Background:

Have juvenile officers – judicial arm of their welfare services – Children’s Division provides the case management functions to the family centered approach
Annual evaluations – one of two pilot projects in the state that implemented this project. AOC has evaluated the program (St. Louis group) – Norma Ronn was the administrator of the project – has the institutional history– Linda Hope has replaced her *

Predecessor judge volunteered to participate in the project – got fulltime GAL and juvenile office attorney and extra staff from the juvenile office to attend training

More frequent court hearings promote more accountability of all the agencies and participants

Implementation? Takes more time but try to squeeze it in but would depend on the caseload

AOC got approval from legislature for more money for additional courts to participate

Jefferson Co. is the other county that is participating – larger and more urban

Service Providers and Others to Contact
Contact locals: Juvenile Officer: Mike Waddell:660/665-4224
County Supervisor for Children’s Division: Deborah Ziebarth: 660/785-2440
AOC: Linda Hope state’s program evaluation

RECOMMENDATION RE FOLLOW UP: I recommend further follow up regarding this program since it is a pilot project initiated by the state AOC with potential statewide replication; entails early and ongoing multidisciplinary planning many jurisdictions have noted as essential; earlier and continuous court review; and has appeared to have already resulted in earlier reunification and/or permanency planning

Community Call Follow Up:

10/6: Mike Waddle, Juvenile Officer: 660/665-4224: Family centered Out-Of-Home Project

- What it took to implement?

He was previously on a statewide committee looking at the federal standards relating to dealing with permanency issues. They sent out surveys to everyone involved with juveniles, including juvenile officers, judges in juvenile courts, and juveniles themselves in order to review the process and improve service delivery.

The statute requires a hearing in all situations in which children are in out-of-home placement but scheduling the hearing sometime took months until a hearing time was available. During that period, parents generally had no opportunity to attempt to have their children returned. Although GALs had been used, they didn’t provide an effective options because many were paid very little, or served pro bono so had little time to focus on the case, the children either didn’t know the GAL or would meet the GAL 5 minutes before the court hearing would start. Frequently a home study was ordered but one year might elapse with nothing happening. The judge would be in a dilemma because he would discover that nothing had happened because the social workers didn’t manage their cases effectively and there was no accountability.

The state commission therefore reviewed existing processes and developed their own guidelines for best practices. They then issued a request for proposals to jurisdictions.
within the state inviting them to submit proposals. From the proposals, they selected several for pilot projects.

The Court Order removing the child from the home also immediately assigned a GAL, including all of the GAL’s contact information. The entire court process was then expedited: a protective custody hearing was scheduled within 3 days, an adjudication hearing scheduled within 30 days, a disposition hearing within the next 30 days, and in-court dispositional hearing within 90 days.

Three days after the children are in foster care, a family support meeting is held. At the meeting, the reasons for removal are explained, problems relating to the children’s safety are discussed and a plan is made to begin to resolve these issues. For example, if a parent says he/she doesn’t have a drug or alcohol problems, they need to agree to undergo a drug and alcohol evaluation as well as drug testing.

- **How is it working?**

This results of the expedited family care approach has been to substantially expedite the entire process. The meeting within 3 days empowers the parent to attempt to fix the problem and solve the issue of how they can best care for their child, it help them to focus on their strengths and is also a great engagement technique.

There is a second family support meeting 30 days after the Court order is signed and focuses primarily on the socio needs of the family, mechanisms to assure accountability, and skills and competencies which the parents seeks to develop.

These family support meetings and expedited process is helping to reduces the number of children in alternative care as well as the length of time they stay in alternative care. In addition, there appear to be more permanency plans being developed with the support the extended family can provide. For those children who will need permanent out of home placement, permanency planning and adoption is faster.

- **Perception of impact? Evaluation?**

Mr. Wadell and his staff and the social services staff are very satisfied with the outcome of the cases, and this result is boosting staff morale and reducing staff turnover. There are, however, no readily available evaluative data.

- **Replicability to other sites?**

The Family Centered Out of Home Project is coordinated by the juvenile courts and social services. It started as a pilot, but was so successful that it is now instituted statewide. Social services provided training for the courts, and every 3 months everyone would get together to share creative ideas that were “out of the box”; it was a good opportunity for networking as well. These meetings occurred for the first several of years.
the program was instituted. However, subsequently, a new director of social services was appointed who had a background in fiscal matter rather than social services; she cut funding and flexible spending, so that the opportunities and resources developed at these meetings have been considerably reduced.

This program is designed to be a statewide program in Missouri. In Missouri, the Children’s Division of the Department of Social Services does not have the authority to remove children from the home. Only juvenile courts have this authority. The juvenile courts deal with the orders for removal, the filing of motions, the review, and the custody hearings. The philosophy of the program is definitely one that could be replicated in other states.

[He would like to receive the final summary:]

Attn: Mike
1400 South Boundary
Kirksville, MO 63501

MICHIGAN

No. 10

Survey Response

<table>
<thead>
<tr>
<th>MI</th>
<th>Cass</th>
<th>5</th>
<th>Susan L. Dobrich</th>
<th>Cass County Probate-Family Court</th>
<th>(269) 445-4457</th>
<th>(269) 445-4453</th>
<th>We are in the process of developing a drug court.</th>
</tr>
</thead>
</table>

May 14, 2004: Judge Susan Dobrich:

**Summary of Strategy:** Judge Dobrich is trying to develop a more integrated approach to dealing with dependency cases, particularly when other dockets (criminal, juvenile), are involved and which may delay addressing the dependency issues.

**Problem Being Addressed:** Interface of dependency cases and litigants with those on other court dockets which may take precedence in disposition

**Impact:** NA

**Additional Background:**

- Applied for federal grant; now combining local resources: through child care fund;
- Program planned will have reviews every week and whole team will be there (rather than 91 days)

She won’t be involved in the weekly meeting because she is a one judge court

Barbara Johnson is coordinating the program: she will have her contact us (we didn’t hear from her)

Have tremendous metham problem – put 6 children in foster care for meth problems

Worked for 25 years – and had many mothers in criminal court but never had this before
May have millage imposed – which will increase the number of criminal drug cases coming in

Need to coordinate with criminal case –

Problem: criminal case delays processing of CPS cases (e.g., 17 yr old arrested for selling and she is also a mother – can’t deal with dependency case until criminal case is disposed of)

really need coordination of both the criminal and the CPS process – perhaps can use the resources available to the criminal side to provide services on the CPS side when the litigant is involved

Service Provider/Other Local Officials to Contact: NA

RECOMMENDATION RE FOLLOW UP: Although the problems reflected in Cass Co. are undoubtedly shared by many other counties, there is no program yet implemented to address them so I see no reason for any other follow up at this point)

**MONTANA**

No. 13

Survey Response

| MT | Custer | 7 | Gary L. Day | 16th Judicial District | (406) 874-3335 | Soon will have a family treatment court in operation. However, our funding is through grants and is limited in time. |

6/23/04: Judge Gary Day:

**Summary of Strategy:** developing family drug treatment court (Judge Hagel): families involved in dependent/neglect and co-occurring family matters (criminal, custody, juvenile matters); so will coordinate all of these efforts in one proceeding and one judge; the program will provide intensive supervision; report to court weekly; progress reports; monitor progress in treatment, and parenting

**Problem Being Address:** Need to Try to Keep Family Together and have adequate information for making reunification/permanency divisions: approach appears to provide a way to try to keep the family together and for the court to be in better position to make permanency decisions; have screening committee to determine which families can best participate in treatment court.

**Impact:** NA

Service Provider/Other Local Officials to Contact: NA: program not yet operational

RECOMMENDATION RE FOLLOW UP: Since the program isn’t operational at this point, I see no value in further follow up at this time.

**NEBRASKA**

No. 14
June 9: Judge Robert A. Ide:

**Summary of Strategy:** Hopes to develop/adapt drug court approach but hasn’t done anything yet; Nebraska is also considering developing juvenile judicial districts to assist in implementing ASFA requirements:

**Problems to Address:** Better framework for complying with ASFA requirements

**Impact:** N/a

**Additional Background Information:** N/A

(may call back to further discuss these issues but hasn’t up to this point)

**RECOMMENDATION RE FOLLOW UP** Since no specific changes have been adopted, there is no point in following up at this time unless there is interest in finding out about Nebraska’s plans to develop special districts to assist in implementing ASFA requirements

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**NORTH CAROLINA**

**NO. 15**

**Survey Response**

| Judge H. Paul McCoy. Halifax, NC. 252-583-2910 | day one / child planning conferences held shortly after child comes into custody of DSS-attended by parents and parents attorneys (who well appointed at filing of petition) GAC and attorney advocate, DSS attorney and social worker, mental health rep., school officials, and is facilitated by the family court administrator. Relative placement is discussed and considered along with issues regarding parental visitation-appointment for substance abuse or mental health evaluations are scheduled. | If paternity an issue it is addressed -a memo of agreement is signed as these issues are also continue in non secure custody central adjudication hearing. |


**Summary of Strategy:** Conducts child planning conferences shortly after child comes into custody of DSS. Summons and petition are served with priority by sheriff—same priority as DV protective order. Conference is attended by parents and parents’ attorneys (who are appointed at time of filing of petition); attendees include GAL and attorney advocate, DSS attorney and social worker, mental health rep., school officials, and is facilitated by the family court administrator. Relative placement is discussed and considered along with issues regarding parental visitation; appointments are also scheduled at this time for substance abuse or mental health evaluation and treatment. If paternity is an issue, it is addressed at this time. A memo of agreement is signed regarding
issues agreed to and plan for further treatment and other conditions; Signed agreements also include provisions re confidentiality; understanding that nothing said in conference can be used against them; result is that people start talking – promotes facilitated dispositions and avoids contested matter; promotes development of rapport with social services etc. Generally two weeks after planning conference, hearing held for adjudication stage (local rules require 40 days – ASFA requires 60 days); court keeps reviewing case progress to make sure things are moving along; if case comes back in two weeks, DSS will report what’s happening; informal pretrial conferences are also conducted during which a great deal of agreement can occur; the has review hearings every 90 days unless someone asks sooner. This is a pilot project implemented in 8 counties of different population sizes. Additional resources have also been provided: case manager employed by Court; access and visitation coordinator for fathers who are paying for support and don’t have funds to get access to child for visitation; custody mediator

Problem Being Addressed: Has been doing this process for five years, both as a response to ASFA but also to improve the way the court system handles these cases and his perceived need to front load the system to move the cases in a meaningful way. Children may be in foster care – but wants case heard early to try to move child into kinship care

Impact: The program is in its first year of this reform change so don’t have enough time to evaluate; The program is now used in 8 pilot family court sites of varying population sizes (Halifax co (rural-60k); Durham; Cumberland (Fayetteville/Ft. Bragg); New Hanover, Charlotte, Goldsborough, Union/ Anniston/ Stanley Cos. Catawba and Lenore Co.); exit surveys have been very positive; through court improvement project, have contracted with Dr. Ray Kirke at UNC-Chapel Hill, School of Social work – did evaluation of court improvement project several years ago – now doing two year evaluation to look at adaptation of best practices

Additional Background Information
Statute requires hearing within 7 days –long before ASFA; Child taken into custody and the hearing heard immediately

Dept. of Social Services: files the petition; at the time the summons is issued – clerk assigns attorney for hearing – parents’ attorneys are present;

Conference facilitated by family court administrator – can bring family members with them – potential resources; also rep from mental health, gal and GAL advocate; maybe school system representatives
Also address issue of paternity, visitation with parents, set up appointments for visitation and rest of scheduling; while permanency planning 11 months after case initiation – try to begin permanency planning from beginning;

Family court administrator: coordinates all domestic relations cases; Also juvenile court coordinator will be taking this over; now automating juvenile record keeping so will be easier to monitor

Attorneys: indigent services from state indigent services ($65/hr.) available for each parent

Judge for 25 years – half time in dependency; Caseload is solely family
(he is chairman of many committees relating to dependency matters and court improvement); only judge in District that handles these cases –generally run 100 children in placement – fourth largest in areas but third poorest – poverty and drugs; No other court/judge is involved – has full jurisdiction

Treatment services provided by Mental Health Department: local mental health agency refers – supposed to be exercising quality control now planning for family drug court;
TASC is not part of the program
transportation is a major issue – treatment providers provide satellite locations – also a transportation system that serves some people
had developed video “The Choice is Yours” – to inform litigants and what parent needs to know if unification is to be the primary goal – is an educational tool that is shown at beginning of the conference; from parents’ perspectives; also stresses time begins to run the day the sheriff left you the paper – also a Spanish version (he has sent a copy of the video which has been sent to the ABA)

Service Provider/Other Local Officials to Contact:
Family Court Coordinator: Susan Horrell: tel: 252-593-5036
DSS attorney: also very actively involved: Jeffrey Jenkins: 252/536-6501
GAL: Melinda Hardy: (District administrator): 252/534-3971

RECOMMENDATION RE FOLLOW UP: I would definitely recommend follow up with both Judge McCoy regarding Halifax Co. but, in addition, the experience with implementing the strategy in other jurisdictions within the state. The strategy combines techniques of early conferencing, meaningful and continuous court supervision, and a panoply of special services many other jurisdictions have noted needed, as well as other special features, including sheriff’s office support through personal service of summons; and AOC support through special resources and evaluation effort currently underway.

NO. 16

Survey Response

<table>
<thead>
<tr>
<th>No</th>
<th>Survey Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>NC</td>
<td>Rowan 4</td>
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<tr>
<td></td>
<td>Beth Dixon</td>
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<td></td>
<td></td>
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</tbody>
</table>

In my court - if I suspect SA in predominant problem, I have been ordering TASC (treatment alternatives for Safer Communities - statewide program) assessment and treatment. It gives me accountability, random screens, and access to local supervisor to testify in court. I find it more effective than just ordering "any state approved agency".

Judge Beth Dixon, District Court, 19 C, Rowan Co., N.Carolina (Salisbury)
Tel: 704/639-7509; 704/639-7510 – May 11, 2004

Summary of Strategy: Was able to secure services from TASC, which traditionally services criminal defendants, to conduct a substance abuse assessment/evaluation of any litigants in dependency cases for which it appears substance abuse may be the primary problem. TASC will also provide drug testing, case management and supervision so as to provide the Court with more accountability re both services being provided and participant’s progress.

Problem Being Addressed: need for regular, random drug screens to detect recurring use; Saw people under influence in court – used probation to do quick screens but couldn’t use these resources for dependency cases so called TASC area coordinator and said they would do any court ordered case. She previously would order service by “any state approved agency” but, since no specific agency was designated, accountability was difficult to ensure.

Impact: Been doing this for about a year – hasn’t had enough time to document impact but observes much greater accountability, both in terms of services provided, participant’s compliance, and court’s ability to exert “reasonable efforts” in achieving reunification.
**Additional Background Information:** Tries to have people get assessment and services on their own – and refers to TASC those people who have problems; Refers those parents to TASC whose primary problem is substance abuse

TASC: isn’t solely criminal cases – she thought they were at first, too; TASC will do the assessment, screens, and referral and case management

Always thought TASC focused on criminal matters but just called them one day and asked if they could help with random drug screens – they got approval

She also has jurisdiction over juvenile delinquency so combines cases involving the same family whenever she can

Of course, if parent doesn’t show interest, then they aren’t making reasonable efforts to give up their drugs, and won’t force them into a treatment program

Four district court judges – all split – around 10 families per week on her docket (no figures for total dependency caseload) but 145 children in foster care in the county

**Service Provider/Other Local Officials to Contact:**
Eric Tuttle: TASC coordinator 704/638-6318

**RECOMMENDATION RE FOLLOW UP:** While Judge Dixon’s initiative in contacting TASC to explore the availability of drug testing resources for dependency case litigants should be highlighted, as well as TASC’s willingness to extend its services beyond the criminal docket, I don’t think further follow up is warranted.

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**OHIO**

**No. 17**

**Survey Response**

|----|--------|---|------------------|------------------|----------------|----------------|------------------------------------------------------------------|

May 14: Judge Charles Henry:  Judgehenry@yahoo.com

**Summary of Strategy:** has developed special Order that details requirements and conditions of Court’s ruling so that all parties and service providers clearly understand what is required. While the case plan usually requires mental health exams, etc., the provisions of this order puts time frames in place as well. Order is issued when court hearing is held, which must be within 90 days of petition being filed. Job and Family Services monitors compliance; Order attempted to address what he saw as frequent problems occurring; can look at who is responsible for what and when it needs to be done by – address responsibilities

**Problem Being Addressed:** People weren’t complying with court orders

**Impact:** no statistics but definitely more accountability and more clear-cut delineation of everyone’s respective responsibilities
**Additional Background Information**

Order is being used – added to Local Rules; - attached Order --

Reason: people weren’t complying;
Review hearings are every 90 days – 1 hour for each hearing

Job and Family Services reaction? No real problems; Implemented: about 5 years

Also monitoring AA/NA attendance
Only judge handling dependency cases;

About 50 cases a year

Does estates, guardianships, adoptions, paternity, child support
Also one magistrate as well

**Service Provider/Other Local Officials to Contact:**

Barbara Rakes: Job and Family Services: ext. 5330

**RECOMMENDATION RE FOLLOW UP:** I don’t see any need for further follow up contact although the Court’s efforts to hold service providers and parties accountable and clarify expectations in writing – particularly for persons who may be under the influence of drugs at the time of the hearing – certainly should be noted.

**NO. 18**

**Survey Response**

<table>
<thead>
<tr>
<th>OH</th>
<th>Franklin</th>
<th>1</th>
<th>William Kirby (magistrate)</th>
<th>Franklin Co. Juvenile</th>
<th>(614) 462-4477</th>
<th>(614) 462-4499</th>
<th>Drug court Inititative Contact Judge Presser, or Magistrate Woodrow Hudson</th>
<th>Please note that my answers are from a magistrate’s perspective-most cases falling under AFSA are handled by magistrates in our county.</th>
</tr>
</thead>
</table>

May 14: Judge William Kirby

Judge Kirby: Magistrates: William_kirby@fccourts.org

**Summary of Strategy:** County has implemented family drug court for parents; One magistrate and one judge handle the family drug court – so if case comes to him and he identifies parents amenable for Family Drug Court Services. he’ll refer them to the Family Drug Court

**Problem Being Addressed:** trying to expedite process at front end and provide additional supervision of cases so as to better meet ASFA time standards

**Impact:** First graduation is today – people seem to think its effective – even if you save one mother, it’s important; They are getting cases resolved sooner but very difficult to implement mandates that expedite case process at the front end – also need to balance all of the timeframes that are applicable. (e.g., Ohio
law requires cases involving certain abuse cases resolved within 90 days so, when balanced against a TPR action where child is not in danger so delaying won’t have a significant impact; But practicality of meeting competing timeframes is difficult – visiting judges help but no space to add new judges to handle these cases.

Additional Background Information:
Handles all aspects of case, including TPR
Has been hearing these cases since 1986
Visiting judges have taken some of the cases – several days a month – primarily for the TPR aspect; Magistrates also do them; Ohio requires permanency plan after 12 out of 22 months in placement (compared with federal which is 12/24?); supposed to then file for termination of parental rights –

Service Provider/Other Local Officials to Contact: n/a

RECOMMENDATION RE FOLLOW UP: Since family drug courts are common in many jurisdictions, and this one doesn’t appear to have any special features, I don’t see the value of any further follow up.

No. 19

Survey Response

<table>
<thead>
<tr>
<th>OH</th>
<th>Lucas</th>
<th>3</th>
<th>James Ray</th>
<th>Juvenile</th>
<th>(419) 213-6717</th>
<th>(419) 213-6898</th>
<th>We are an NCJFCJ Model Court and are therefore constantly working on improving practices</th>
</tr>
</thead>
</table>

5/13: Judge James Ray: 419/213-6717

Summary of Strategy: This court is one of 25 NCJFCJ model juvenile/family courts in the country and has implemented a wide range of procedures and services, including: a family drug court which takes in deeper end people; will take people who have lost children to permanency (some family drug courts won’t do this); he also uses mediation and has a wide range of ancillary (e.g., housing, vocational, etc.) services in addition to treatment services;

Problems Being Addressed: Need for wide range of support services for substance addicted parents whose children are in out-of-home placement; need to begin meaningful service delivery to support reunification planning as soon as possible after petition is filed;

Impact: feels program has been very successful anecdotally but now working with evaluator from University of Toledo to look at it more stringently; difficult to measure improvements in quality of life, etc. but working on cost/benefit analysis – e.g., days in foster care, extent of case management, etc.; mediation has resulted in settling approximately 60% of the cases, as well as significantly reducing appeals

Additional Background Information:
been hearing these cases over 15 years; also hears juvenile delinquency and family related matters, including child protection;

Use family drug treatment docket for most parents who are addicted; Family Drug Court has SAMSHA grant funding

40-60 participants (120 children)—a fairly large caseload for a family drug court
parents come 2 x week during first 12 weeks; then move to every other week, ten to less frequently

His is a Model Court for NCJFCJ: 25 in country; no specific requirements except willingness to adopt best practices and latest developments; Must also have system to meet all local and federal requirements re handling of child protection cases

Review hearings: vary relating to the needs of the case but, by statute, as soon as case comes in; once during first 6 months and once again during 12 month period; after that, agency can decide whether to ask for permanency or to request extension of time;

Drafted MOU with TASC- found them able to shift from criminal supervision orientation to more nurturing, therapeutic approach of the family drug court

Also has caseworkers from Child Protection Agency
-2 providers for Substance Abuse Treatment: PURPOSE and SASSI
3 Housing (residential) programs – one allows people to stay with their parent
also has mental health services (dual diagnoses): UNISON;
also has parenting program (skills development in visitation setting)
University of Toledo providers career guidance/job skills
*Chief Magistrate has developed MOUs with many different providers
Use Matrix Model that permits participants to identify needs as long as they fit into program and focus on drug treatment – feels timing and identification of needs is critical

(his court is site for Drug Court training as well)

*also uses mediation as part of the court services; parents go to mediation in termination proceedings; able to settle 60% of these cases (Brenda Rutledge is Magistrate); provides permanency more quickly since cases aren’t appealed; also more respectful of parents

Judge Ray is President of the National Council of Juvenile and Family Court Judges

_Service Provider/Other Local Officials to Contact:

Case management is provided by Lucas Co. TASC;
Joan Parker is contact: 419/242-9955 or cell: 419/297-3324

Others involved in family drug court are Kendra Kech (coordinator; Donna Mitchell (Magistrate); and Mr. Salvage (funding)

**RECOMMENDATION RE FOLLOW UP:** This program should definitely have follow up in light of the wide range of wrap around services it is providing within its “matrix model”, its use of mediation, its status as one of the 25 NCJFCJ’s model programs, and the position of Judge Ray as President of the NCJFCJ.

**No. 20**

**Survey Response**

| OH | Fairfield | 4 | Steven O. Williams | Fairfield County Probate & Juvenile Court | (740) 687-7135 | (740) 681-7202 | We basically follow the drug court model with regular reviews with parents, treatment providers, children services, and I'm glad someone is still working on this matter. |
5/26/04-Fairfield OH Judge Williams

Summary of Strategy: Follows the drug court model, but only part he doesn’t follow is that no one can go to jail for noncompliance, he’s working on this aspect

Problems Being Addressed: Need for provision of case management services, follow through on case plans, etc. for dependency cases

Impact: Judge Williams feels quasi-drug court approach is very powerful but has no statistical data.

Additional Background Information

He is the drug court judge for the juvenile drug court (started in 1997), and seeing the success of the drug court in conducting frequent reviews and providing case management services and accountability (presence of drug testing and drug counselors), he decided to apply it to dependency cases.

Judge Williams got two main stakeholders involved in this approach: children’s services (he got them to drug screen weekly/biweekly, to use a breathalyzer, and to utilize 2 different types of drug screens) and the treatment people (they were resistant, but he got them to attend the frequent reviews, and they get to face the clients.) Review hearing frequency can vary, mostly monthly, sometimes weekly.

He currently hears about 25-50 dependency cases.

He called this a powerful process.

They are not using any type of special funding, they are just “doing it.”

Service Provider/Other Local Officials to Contact

Best people to talk to: Children’s Services
Jim Hodge, head of Fairfield Children’s Services
Jenny Salens
Carla Nelson: 740/653-4060

RECOMMENDATION RE FOLLOW UP: Although I think we should recognize this court’s implementation of a drug court model without any additional funding, and through better coordination with local service providers, I see no need for further follow up.

OKLAHOMA

No. 21

Survey Response

<table>
<thead>
<tr>
<th>OK</th>
<th>Payne</th>
<th>Robert M. Murphy, Jr.</th>
<th>District</th>
<th>(405) 372-3999</th>
<th>Payne, yes we are proactive. Our average time in and out of home placement is 13.6 months</th>
</tr>
</thead>
</table>

5/27: Judge Robert Murphy: 405/372-3999

Summary of Telephone Follow-up Re Special Strategies Being Used to Address ASFA Requirements: SUMMARY. American University. July 6, 2004
Summary of Strategy: Develop individualized case plans within first 30 days to address problems generating child’s removal; bring in a wide range of multidisciplinary services, including attorney representation and mediation; try for kinship placements if at all possible so that child remains in family situation and retains family relationships; schedules hearings weekly if necessary to review case progress and address issues that emerge; and has a very comprehensive family-based service delivery system that actually sends homemakers into the home to teach/work with the parent on basic home management functions.

Problems Being Addressed: need to provide intensive services, case management, support, and supervision for dependency cases during first six months; if parent isn’t well on their way to addressing the problems generating the child’s removal by that time, unlikely there will be any change in the next six months. Therefore need to provide all of the support and services possible as soon as possible after the child’s removal.

Impact: 13.6 months average for out of home placements: then child either goes home or is placed for adoption.

Additional Background Information

* also has review hearings every Wednesday; will set cases that are difficult in for a another review in a week or two;

*CASA group has lunch every Mondays with DA to review cases coming up for Wednesday hearing; try to work out issues then.

handles general criminal and civil docket; adjudication of “deprived” cases; usually by stipulation; attorneys work together; not many trials; then set case for disposition in 30 days; then come up with individual service plan which is supposed to correct conditions that led to situation;

* Oklahoma provides right to jury trial for TPR cases

state may file petition to terminate

90 day review hearings: focuses on how are things going?

also appoint attorneys early who can work with the parties and try to resolve issues

* six month hearing is critical point: looks to see if parties making progress or not doing anything? Then may start expanded visitation as a prelude to reunification; otherwise, may move toward termination

* very active CASA group; advice court of progress; possibility for kinship placements:

also use mediation; went to Landlord Tenant mediators, saw how successful they were, and asked if they could help; gave him the best mediators; use them for more difficult cases; Sue Tate (OK AOC): 405/521-2450 (heads early settlement program)

Treatment: Patty Ridge, Supervisor of Treatment: 405/372-1841 : “Chubs: program:” provides in home services; person comes in house a few times a week; provides life skills; spends time with parent trying to help them develop capability to address issues;

Service Provider/Other Local Officials to Contact

CASA: Mickey Couch, Executive Director, 405/624-2242
**Mediation:** Sue Tate (OK AOC): 405/521-2450 (heads early settlement program)

**Treatment:** Patty Ridge, Supervisor of Treatment: 405/372-1841 :“Chubs: program:” (provides in home services; person comes in house a few times a week; provides life skills; spends time with parent trying to help them develop capability to address issues);

**RECOMMENDATION RE FOLLOW UP:** This may be a very worthwhile jurisdiction for follow up contact in light of its (1) use of mediation; (2) very active, helpful CASA group; (3) homemaker services; and (4) early and ongoing court review hearings

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**OREGON**

**No. 22**

**Survey Response**

<table>
<thead>
<tr>
<th>OR</th>
<th>Marion</th>
<th>3</th>
<th>Pamela Abernethy</th>
<th>Juvenile</th>
<th>(503) 566-2974</th>
<th>Family court being developed</th>
</tr>
</thead>
</table>

6/10: 503/566-2974-left message; 6/17: 503/566-2974: Judge Pamela Abernethy:

**Summary of Strategy:** Development of a child-centered assessment plan for each child involved in the dependency process

**Problems Being Addressed:** *Judge Abernathy feels it is very important to conduct a developmental assessment of each child from the start of the case and to build the results of this assessment into the case plan. She is very concerned about the lack of adequate screening of children, both those in dependency cases and in the juvenile court, for developmental and cognitive problems, fetal alcohol issues, as well as the frequent lack of integrated substance abuse and mental health services. She now requires a child centered assessment plan for each child involved in the dependency caseload as a result of seeing social workers frequently focusing on the parent rather than the child. (She will send us a copy – not yet received).*

**Additional Background Information:**

Judge Abernethy currently serves as the juvenile drug court judge and is planning to develop a family drug court in July 2004 which will focus on parents with very young children. Got SAMSHA grant for juvenile program, big emphasis on co-occurring disorders.

Planning is underway for the family drug court with New Step, a Catholic Charities Community Service, which will provide co-certified counselors in both mental health and substance abuse. Contact Jim Seymour (503/390-2600 or 856-7047) for follow up. (original counsel involved in the family drug court planning and training has left but they have promised her a replacement that is also co-certified.

Her juvenile drug court coordinator is Mike Marianoff: tel: 503/584-4831. She thinks FAS (fetal alcohol syndrome) is underdiagnosed and results in ADD in children later in life due to cognitive dysfunction cause by FAS

*Judge Abernathy feels it is very important to conduct a developmental assessment of each child from the start of the case and to build the results of this assessment into the case plan. She now requires a child centered assessment plan for each child involved in the dependency caseload as a result of seeing social workers frequently focusing on the parent rather than the child. (She will send us a copy).*

She has also started a number of other programs for parents, including”
Project BOND (Building Our Capability for Nurturing and Development) which provides parenting classes and other services and skill development for parents arrested on misdemeanors if parent has a child under 24 months.

She also started a program, Ten on Tuesdays (TOT) for pregnant women who have a child in the dependency case system; they come to court weekly and when they give birth, if the baby is drug free, they get special recognition – she’s already had 4-5 babies born drug free, currently 5 or 6 Moms in program. Both juveniles and parents exhibit very high meth use, marijuana/alcohol second most used drugs.

Sent materials on: Project Bond and sample Judgment of Jurisdiction/Disposition, with form for additional findings re ICWA cases

**Service Provider/Other Local Officials to Contact:**

Catholic Charities Treatment Services: Jim Seymour (503/390-2600 or 856-7047) for follow up. (original counsel involved in the family drug court planning and training has left but they have promised her a replacement that is also co-certified.

Juvenile drug court coordinator is Mike Marianoff: tel: 503/584-4831.

**RECOMMENDATION RE FOLLOW UP:** Judge Abernethy appears to have introduced, with no additional resources, a number of very innovative programs in her community to deal with abuse/neglected children, and appears to be VERY knowledgeable about developmental, substance abuse, and mental health issues as they affect the handling of dependency cases. I’m not sure how to involve her further but she is an excellent resource to illustrate how a knowledgeable, creative judge can institute improvements for parents in the dependency case process with little if any additional resources.

**No. 23**

**Survey Response**

<table>
<thead>
<tr>
<th>OR</th>
<th>Umatilla</th>
<th>5</th>
<th>Rudy M. Murgo</th>
<th>Circuit</th>
<th>(541) 278-0541</th>
<th>(541) 278-0541</th>
<th>Mandatory mediation very early in the process</th>
<th>The quality of attorneys representing parents varies greatly. Those without primary resources receive meager but undetermined amounts.</th>
</tr>
</thead>
</table>

5/25: Judge Rudy Murgo, 541-278-0541

**Summary of Strategy:** uses mandatory mediation for all cases involving children – has been doing this for about four years. Schedules the mediation at the time of the shelter care; (modeled after the mediation for divorce cases he put in when presiding judge; mediation takes place 30 days out – gives agency time to develop a plan; may also have a follow up mediation if the mediators think it appropriate. All issues are mediated – jurisdiction; placement; treatment, conditions, services, anything parties want.

**Problems Being Addressed:** Many people coming into the dependency court process are distrustful of the court system so the mediation provides a nonthreatening and constructive opportunity for participants and others (relatives, etc.) to participate in a constructive way for addressing the issues;

**Impact:** has been getting very positive feedback from family members and from the community

**Additional Background Information:**
Mediators are very well trained in dependency issues – doesn’t just use a divorce mediator; they need to understand the dynamics and issues of these types of cases;

They all grew up in the system; he started the mediation in the domestic relations court for divorce cases – bar was very opposed but gradually came to appreciate its value and that it permitted lawyers to focus on legal issues rather than the emotional ones; Building on bar support for the domestic relations mediation, he then introduced mediation for the dependency cases.

Everyone gets the information regarding how the process will work and the mediation sessions at the start of the process. Judge writes in specific conditions, e.g., parenting, drug treatment, etc.)

Service Provider/Other Local Officials to Contact

Joan Howard (541/278-5486) and Gail Friedley are the prime mediators; they work for the county

Kent Fisher: Deputy DA (can get number from John Howard): can give us the sample orders with the mediation conditions

RECOMMENDATION RE FOLLOW UP: I think that this jurisdiction definitely warrants follow up in light of the apparently well thought out and effective mediation program developed. I have gotten the sense that the use of mediation for these types of cases is a fairly new and not too common practice so documentation of one or two approaches would seem to be useful.

SOUTH CAROLINA

No. 24

Survey Response

<table>
<thead>
<tr>
<th>SC</th>
<th>Beaufort</th>
<th>4</th>
<th>Robert S. Armstrong</th>
<th>Family Court</th>
<th>(843) 726-5571</th>
<th>(843) 726-8032</th>
<th>We have a drug court for adult and juvenile offenders</th>
<th>I do not participate in the drug court office than to require juveniles to enter the program as a condition of their probation.</th>
</tr>
</thead>
</table>

5/25/04: Judge Robert S. Armstrong, 843/726-5571; 843/470-5277

Summary of Strategy: County has juvenile drug court to which juveniles can be referred as a condition of their probation and families may also need to participate

Problems Being Addressed: Need for more intensive treatment and other services for youth as well as their families

Impact: NA

Additional Background Information:

Has jurisdiction over adult and juveniles under 17 – and can put them on probation

child protection cases – would order services – could only refer to drug court if they have a criminal charge

drug court judge is a specially appointed judge

5 counties in circuit – sits in any one of the five counties – travel throughout the state
NO. 25

SURVEY RESPONSE

<table>
<thead>
<tr>
<th>SD</th>
<th>Meade</th>
<th>6</th>
<th>Jerome A. Eckrich</th>
<th>4th Circuit</th>
<th>(605) 347-4413</th>
<th>(605) 347-3526</th>
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<td></td>
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<td>Stepping Stone Program in Rapid City, S.D. for mothers/in house fairly intensive structured program help with housing, jobs, Medicare, treatment</td>
<td>Lack of adequate foster care is a constraint placement options for the adoptable/adaptable. For every year that child will spend the rest of his/her minor years increases. Termination of parents’ parental rights happen no later than 12-15 months after child is reliably sober in that time.</td>
</tr>
</tbody>
</table>

5/25: Judge J. Eckrich 605/347-4413; email: merton.tice@ujs.state.sd.us

Summary of Strategy: This Court has instituted a procedure for developing a comprehensive plan for each parent very shortly after petition is filed; it is able to utilize the resources of a local residential treatment program, Stepping Stones, which provides residential and other services for young mothers with substance abuse problems and also takes substance using youth in delinquency cases; the Stepping Stone program provides treatment services as well as various life skill services, including budgeting, etc. Allegations in petition are usually cut and dried – so the focus is upon getting to an adjudication right away; Judge Eckrich feels there is really no reason why one can’t get an adjudication within a month or six weeks after service of petition. So he tries to get to adjudication at the front end: six weeks after child has been taken from home so that there are 10.5 months left before ASFA timeframe to work things out; tries to have review hearings every 60 days; after several review hearings he can usually tell where they need to go; sometimes surprised; real problems with ASFA is where there is some improvement and then things collapse; then state has to make a decision as to whether to go for reunification or permanent placement; this is a real problem when child is 3-5 years.

Problems Being Addressed:

One year placement requirement is artificial: if parent doesn’t have their act together within a year, the reasons in most instances are apparent well before the year is up. Have therefore instituted mechanisms to identify needs and develop/implement case plan early in process so that court can monitor progress and be in a much better position at end of 12 months to assess realistic likelihood for reunification or permanent planning.

Impact: really doesn’t handle many of these cases; cal Judge Kern (see below)

Additional Background Information:

This is a very rural jurisdiction – 25 miles north of the second largest city in S. Dak (Rapid City which is 60k in population)- generally pretty limited resources for addiction, particularly meth

Also have a facility run by the sheriff and some private places that can be accessed by various agencies

Pennington County Judge who has good perspective; Judge Jeanine Kern: (Seventh Circuit –Rapid City): 605/394-2571 – she also has information on Stepping Stones
Real meth problem – takes time to get sober not always consistent with ASFA timelines—even with kids

RECOMMENDATION RE FOLLOW UP: N/A (See below)

No. 26

Judge Jeanne Kern: Meade Co., South Dakota

Judge Kern: dependency cases rotate each year; she isn’t handling dependency cases now; Judge Merton Tice is handling dependency cases now; he also is a proponent of mediation; he’s handling about 100 abuse and neglect cases—over half involve ICWA – they have three reservations in the court’s jurisdiction

South Dakota Supreme Court has case pending involving ICWA and ASFA; the litigants think ICWA should apply to ASFA; the case is: JSB, JR.; expect ruling in 2-3 months; she thinks the ruling may end up splitting states and circuits

Alaska ruled the opposite in a similar case

Other studies:

***GAO is studying four states re compliance with ASFA: Colorado, California, South Dakota, and Oregon (?)

**NCSC is also studying ICWA in North Dakota? Arizona?

No. 27

June 23: Judge Merton Tice (suggested by Judge Kern and Judge Eckridge)

Summary of Strategy: Trying to develop mediation but hard to get Department to be more receptive to mediation; has identified a few cases that were resolved before the mediation – so, perhaps, holding out the possibility of mediation was important

Problems Being Addressed: Feels mediation is important – to take adversarial nature out of proceedings and focus on what’s best for kids and for parents – approach situation in a problem solving manner

Impact: N/A. Trying to use before adjudication but could probably be good anytime – doesn’t have enough experience to know when it is best

Other Background Information:

**Stepping Stones: great foresight in developing programs to adapt to individual participants; Brokering and other resources to develop full range of services; expensive so can’t use too often but gives great program to help prepare participants to real world needs

**Tribal Cases: instituted a meeting of state and tribal judges at Pine Ridge, where the bulk of the tribal cases come from (50% of cases have tribal connections)? Worked to get CASA, attorneys, workers, judges, etc., together to talk about how to coordinate handling and service delivery.

Service Provider/Other Local Officials to Contact
(1) **Mediation Services:**

**Mediation services would be provided by Judge Marshall Young, former president of the National Council of Juvenile and Family Court Judges and very successful in using mediation in civil cases and for custody cases; has offered to do it for Abuse and neglect cases – though they would try it with a psychologist working with him (to also have different genders);**

**Home number for Judge Young: 605?342-2947 –can say Judge Tice referred him**

(2) **Treatment Services:**

Contact: Eileen Laneer: 605/721-1811; she may not currently be with Stepping Stones but can give background on the program – was also a Casey Family Program but Casey has cut back on a lot of their funding)

**RECOMMENDATION RE FOLLOW UP** This may be a worthwhile program to follow up with re the Stepping Stones Treatment program and range of services it provides; and with Judge Young, former NCJFCJ president and his application of mediation services to dependency cases.

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**TENAS**

**No. 28**

Survey Response

<table>
<thead>
<tr>
<th>TX</th>
<th>Bowie</th>
<th>5</th>
<th>William C. Martin III</th>
<th>(903) 576-0112</th>
<th>(903) 753-9490</th>
<th>At the Kirkpatrick Center in Longview, patients are allowed to have their children with them at certain points.</th>
<th>I regret that I did not receive notice of the survey until late. I hope my input can be used.</th>
</tr>
</thead>
</table>

5/24: Judge William C. Martin III 903/576-0112

**Summary of Strategy:** This is a rural area in which the senior judge travels a circuit, sitting in 8 different counties over a 10 day period; Texas Department of Court Administration provided him with an “order maker” who makes sure the orders he issues are signed and distributed to all parties at the end of each hearing so that everyone is clear on what is expected and the timeframes for performance and supervision and compliance can begin immediately; also Kirkpatrick Treatment Center permits children to be with mother after she is detoxed;

**Problems being addressed:** (1) He has had situation where orders pile up and aren’t signed and issued for weeks or months – orders need to be specific as to what everyone’s responsibility is; (2) *program introduced by Texas Office of Court Administration to relieve general jurisdiction court judges of having to oversee these cases, particularly with ASFA time lines and volume being filed; state AOC is also developing new court administration software (Note: he is one of few judges able to tell us how many cases and children he had); and (3) need for service providers to promote parental relationship during period of out of home placement

**Impact:** No data available but can observe that orders and requisiste case plans/timeframes are clarified and communicated to parties and others immediately following hearing; and that dependency cases are coming to the court’s attention much earlier in the process

**Additional Background Information:**
Judge Martin is Senior judge – comes back to sit 10 days a month in 8 different counties hearing family dependency cases only. (Cass, Red River, Kipsher, Titus, Marion, Camps, Morris)

Hearing schedules is mandatory:
  First hearing: 14 days, then 60 days, then 120 days and every 120 days until 12 months and then subject to 6 months extension

He can only be in each county once a month so sometimes will hear cases that have just been filed even before service has been had on all parties and then schedule them again the next month after service is obtained

Kirkpatrick Center: serves all counties in northeast Texas; provides residential treatment; permits mothers to have children with them after they are detoxed; (part of Sabine Valley Substance Abuse an Mental Health Service Center: Executive Director: 903/237-2376 – (doesn’t know name but they can refer us to the Kirkpatrick Center

Center doesn’t appear to have long waiting lists though screening is required

He has 117 cases (165 children) which he is overseeing

Having child with mother doesn’t’ totally disrupt mother/child relationship; and also helps maintain parental/child relationship; judges will try to place child with relative while mother is in treatment

If parent won’t participate in Kirkpatrick Center, then he tells them the court will be moving to terminate parental rights

Service Provider/Other Local Officials to Contact

Texas Court Administration: Angela Miranda Clark, Specialty Courts Program Attorney: tel: 512/936-6390; fax: 512/936-1648 email: angellamirand aclark@courts.state.tx.us

RECOMMENDATION RE FOLLOW UP: This court deserves follow up for its (1) senior visiting judge/order maker system; and (2) residential facility permitting children

No. 29

Survey Response

<table>
<thead>
<tr>
<th>TX</th>
<th>Gregg</th>
<th>4</th>
<th>Robin D. Sage</th>
<th>(903) 237-2534</th>
<th>(903) 234-3150</th>
</tr>
</thead>
</table>

5/28: Judge Robin Sage, 903/237-2534

Summary of Strategy: Treatment teams created, comprised of attorneys (provided by County CPS), caseworkers, CASA volunteers, and psychologists, meet regularly during the pendency of the case, with the first meeting within the first 2 weeks after the child is removed. She started this when she visited the El Paso Family Drug Court.

Problems Being Addressed: Long delays in obtaining assessments, services, etc., which are detrimental to these types of cases in which thing need to happen immediately.
Impact: No statistics but clearly having immediate assessment and more frequent review hearings help court get a handle on situation in each case early and be able to take appropriate action.

Additional Background Information:

Hearing scheduled within first 14 days; then another hearing at 60 days and another hearing at 120 days

Finds more frequent review hearings help, particularly initially; important to get handle on situation early; that’s when things need to happen; can then schedule them for longer intervals if things going well

Before: CPS took 2 months to begin assessment, services, etc;

CASA: very helpful; provide another set of eyes and ears for the court; meet regularly with case workers, will investigate with counselors and schools and make recommendations to the court – sometimes gets more valuable information from CASA worker than from case worker;

Has a CASA volunteer for 2/3 of cases; would love to have more

Service Provider/Other Local Officials to Contact

CASA: Jerry Ann: 903/753-8093
CPS attorneys: Virginia Hunt: 903/233-5202

RECOMMENDATION RE FOLLOW UP: While this early court intervention and assessment is clearly noteworthy, it follows the strategy a number of other programs are introducing: e.g., very early assessment/evaluation and case planning, with much more frequent court review hearings, at least early on. A decision therefore needs to be made as to which jurisdiction(s) initiating this type of approach, merits further follow up.

No. 30

Survey Response

<table>
<thead>
<tr>
<th>TX</th>
<th>Tarrant</th>
<th>1</th>
<th>J. Boyd</th>
<th>323-9</th>
<th>(817) 838-4620</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Family Group Conferencing. Teams require resolution of CPS cases within 12 months with our extension of 6 months. Parents’ response to treatment normally have an opportunity to participate in patient treatment. Some of our treatment facilities allow children to stay on campus.</td>
</tr>
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</table>

June 25, 2004 TX Tarrant, Judge Jean Boyd,

Summary of Strategy: Started Family Group Conferencing Project; Began in Tarrant Co. with a group of people from different perspectives who got together, had heard of family group conferencing, and developed a grant – asked Child Advocates (CASA) to administer the program – has been so successful, State Child Welfare Department is taking it over, going to continue the program in Tarrant County and pilot test it in several other counties and then implement it statewide if success continues.

Originally applied for grant and supervised by child Advocates (CASA); taken over several months ago by Child Welfare Agency

Family Group Conferencing provides opportunity to get all family members and others from community who have any contact with the family to meeting together and determine what help they may provide; Facilitator (independent person) brings in child welfare worker (but child welfare worker shouldn’t be the facilitator) and others identified as family members and others (church, education, neighbors, etc.) who can help; Provides opportunity to explain situation and process and why child has come in the child protection
system; benefit is this may give an objective view to what’s happened as opposed to what the family member may have said;

Try to set up inviting atmosphere – serve food – try to make everyone feel at ease and process is informal.

**Problem Being Addressed:** lack of meaningful resources to address parent’s problems; also failure to tap into strengths of family and nontraditional resources

**Impact:** no statistical data but everyone gets together to try to develop a plan for the child/children; often can find one person who can do one thing (have child live with them) but can’t do everything – may not be able to take the child to the doctor, or may need help with cooking or laundry. So can engage whole family in working out what needs to be done, empowers family;

**Additional Background Information:**

Looking into developing a family drug court

cild welfare system is overwhelmed and underfunded;

people that were really into program when she was an assistant district attorney in 1982 are retiring and no one seems to want to take their place.

Dealing with a population of 1.6 million; she hears 85-90% of dependency cases where there is no divorce involved (in which case the matter would be handled by the court handling the divorce)

Family Group Conference: sometimes used prior to removal –and get situation resolved without having to develop a petition

May use it at any time --best up front but may take time in order to identify family/other members to involve

Attorneys not involved; increased referrals due to word of mouth so attorney will know of resource and ask for it, now trying to educate everyone esp. attorneys about program

Texas also has law mandating case resolution by 12 months, with one request for six month extension possible to extend it to 18 months – if not resolved then, case is dismissed

**Impact:** Very successful results; state taking over program for potential statewide replication; When program started, had a little resistance from Child Welfare so didn’t really refer many to the program; now, with state taking it over, anticipates use fill grow

Family dynamics make plan work so the family group conference and plans developed can result in families putting pressure on parent that court couldn’t do

**Service Provider/Other Local Officials to Contact**

Contacts: Angela Kelly with Child Protection Services (Judge Boyd is emailing her address): just taking program over (see her communication to me below):

Nancy Fisher: Child Advocates: administered the program until this year; 817/877-5891: Executive Director of CASA – can give history and early experience

Will attend national meeting of Juvenile and Family Court Judges Conference in Portland in July and thinks something on Family Group Conferencing will be on program (believes idea began in New Zealand)
Also have program “Neglect Hurts” focuses on children neglected in homes but don’t qualify for state intervention; got $2 million grant from a local foundation to hire social workers to visit families identified as having neglect situations; tell them about services and connect them with services; sometimes also found situations that really did need state intervention; but most families are very grateful for the assistance – which is nonadversarial; simply designed to connect people with services.

Follow up communication from local officials:

Hi Carolyn,
Judge Jean Boyd sent me an email indicating your interest in Family Group Conference. Susan Waggoner is the Family Group Decision Making Specialist for our area and she is the person that you can speak with about the program. You can reach her at 817-792-5229 or her email address is susan.waggoner@dfps.state.tx.us.
If I can answer any other questions feel free to give me a call at 817-792-5224. Thanks.

Angela Kelley
Family Group Conference Specialist
Mail Code 013-8
1200 E. Copeland Rd., Ste. 400
Arlington, TX 76011
817-792-5224 office
817-792-5296 fax

Dear Angela:

Thank you very much for following up. We will be coordinating with ABA (American Bar Association) staff shortly on the follow up communication.

The Family Group Conferencing approach being used in Tarrant County and which we discussed with Judge Boyd seems to have been developed as such a constructive and useful tool for handling abuse and neglect cases. While I have been familiar with the use of family group conferences in other jurisdictions, I haven't yet come across any that have had the comprehensive focus of Tarrant County’s. While I imagine there is a considerable amount of individualized planning and effort that is necessary to make it work, I think many other jurisdictions would be very interested in learning about the approach -- so look forward to being in further contact.

Caroline Cooper

RECOMMENDATION RE FOLLOW UP: I think this is a valuable program for follow up contact – both in terms of its scope and impact as well as its current statewide replication

VIRGINIA

No. 31
June 16: Judge Hendrick: 804/748-1878:

**Summary of Strategy:** Trying to informally utilize resources available to the criminal docket, particularly an excellent day reporting center and the adult drug court. Family Assessments have been started by local social services agencies to deal with less serious cases, for example

**Problem being addressed:** Need for early assessment of family needs; need for services; and need to be able to address less serious cases without resort to the court’s limited resources

**Impact:** Family Assessment process has reduced dependency caseload by working out a contract outside of the court process – has worked well

**Additional information:**

adult drug court (circuit court level) can provide support to people in the dependency cases; will follow up with judge in adult drug court

Day reporting center: refer adult clients, primarily for domestic violence cases; very successful program; attends graduations; very impressive; generally people who have been spending short terms in jail their entire life due to their jail and alcoholism; a lot of group interaction; cognitive interaction

Can’t be referred from the dependency court directly because they must be referred from criminal but handle overlap

Big push now to incorporate divorce into court’s jurisdiction so they will be true family

Terminations: done but appealable de novo to circuit court – about half cases are appealed so greatly extends timeline for ASFA purposes

Use mediation for civil family cases but not yet for dependency/abuse and neglect

**Service Provider/Other Local Officials to Contact**

Chesterfield Community Corrections: 804/717-2250: Program Director: Glenn Peterson

**RECOMMENDATION RE FOLLOW UP:** Again, this court is struggling with similar issues as other courts – integrating the services available for criminal matters into the abuse and neglect docket, a civil process. The family assessment that has been introduced might be something to further discuss but I don’t see the value of any extensive further follow up.
Survey Response

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5/25: Judge Philip Trompeter 540/387-6126

Summary of Strategy: has developed special assessment component of the Court’s comprehensive domestic violence program to assess potential impact of domestic abuse on child living in the situation, even if not actually physically abused; They now have a comprehensive program for reaching the children exposed to DV violence – now in the second year; has referred over 2000 children

Problem being addressed: has noted that many of the DV cases involve couples not married, with woman living with boyfriend who then brings child into the home who is exposed to abusive situation; in addition to worrying about the woman being the victim of violence, also worries about the child who may not be a victim of the violence but has been exposed to it.

Got together with the chief of police, DA, shelter people, probation, and Department of Social Services and other public agencies to design comprehensive program for everyone involved, including children who were exposed.

Impact: Having the Child Risk assessment rather than immediate issuance of a child protection order, gives the agency and court more flexibility to provide services and determine what’s needed; Under Va. Law, judge can issue a child protection order; criminal prosecution is irrelevant; even if case is dismissed, the court can still refer the child for the risk assessment.

Additional Background:

Department of Social Services has two fulltime workers who do risk assessments for these children; Susan Hundley: 540/387-6087 is the lead; if parent is not cooperative, the Department can petition the court for a Child Protective Orders –he may even remove the child

He has an automated order that indicates if there has been abuse in the home and a child in the home, referral for assessment and services; if the parties are not cooperative, he will issue court orders and can even remove the child

DV offenders are put on probation for 2 years; go to batterers program, etc., violation of DV order is misdemeanor;

DA interviews all of the women who come into court; may result in removal temporarily or permanently of child, or placement with a relative

Service Provider/Other Local Officials to Contact: na

RECOMMENDATION RE FOLLOW UP: The child-focused component to the Domestic Violence Court which has been implemented addresses a critical issue that relates to child abuse; however, since it appears
more focused on identifying situations of abuse, rather than complying with ASFA timelines which is the focus of our project, I don’t see the role of any further follow up contact.

**WASHINGTON**

**No. 33**

Survey Response

<table>
<thead>
<tr>
<th>WA</th>
<th>Benton</th>
<th>4</th>
<th>Lonna K. Malone</th>
<th>Superior Court - Juvenile Division</th>
<th>(509) 736-2725</th>
<th>Pilot Parent’s Representation program funded through the State Office of Public Defense has provided addl. Resources to assist parents in correcting parental deficiencies.</th>
</tr>
</thead>
</table>

6/25: Judge Lonna Malone:

**Summary of Strategy:** pilot project designed to put on equal par the parent’s representation with the state’s representation - more panel attorneys, more caseworkers, more people in general on the side of the parent have been hired to assist parents, so that they can have the same resources as the state.

**Problem Being Addressed:** Program ensures that parents meet regularly with their attorney and caseworker; makes them aware of services and make sure they are receiving adequate services, additional contact prevents delays, cases are better prepared, and resolution is reached sooner. Would be happy to speak further with us more regarding the subject.

**Impact:** Program has been reviewed by NCJFCJ “Improving Parent’s Representation in Dependency Cases: A Washington State …” , August 2003, TA Brief, has a hard copy, would be happy to send it to us – on website of Public Defender Office: Successful, has sped up timeframe of cases, better compliance with ASFA results, state uses federal ASFA guidelines.;2 courts in WA currently have this pilot program, Benton County, and Pierce County, Tacoma

**Service Provider/Other Local Officials to Contact**

Joanne Moore, 360/956-2107, Washington Public Defender

**RECOMMENDATION RE FOLLOW UP:** I think we should definitely do follow up on this program Having adequate legal representation has been a major problem re dependency cases; This pilot project is noteworthy as is Washington’s requirement that parents’ legal services be provided by the public defender.

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**No. 34**

Survey Response

<table>
<thead>
<tr>
<th>WA</th>
<th>Lewis</th>
<th>5</th>
<th>Tracey Mitchell</th>
<th>Superior (trial/record) (360) 740-2733</th>
<th>(360)</th>
<th>We have a social worker designated to</th>
</tr>
</thead>
</table>

Summary of Telephone Follow-up Re Special Strategies Being Used to Address ASFA Requirements: SUMMARY. American University. July 6, 2004
6/21/04: Judge Tracy Mitchell:

**Summary of Strategy:** Social worker designated to meet with parents immediately after a hearing to review services; makes the appointments directly; gives written directions; inquires into transportation issues to services and provides bus passes or gas vouchers. Started this approach 9/03 (participated in state AOC grant that permitted local courts to submit requests for innovative ideas; they asked for $10,000 to provide a one-stop shopping service for parents in the dependency process to promptly link them with services and make arrangements for their delivery.)- Division of Child and Family Services conducts regional "reasonable efforts" symposium each year with GALs, children and Family Service staff, defense, etc.

**Problem Being Addressed:** People don’t have phones and/or don’t have persistence to arrange for services; she heard frequently from litigants at review hearings about problems in trying to arrange services; Thought it would be good idea to designate office in courthouse that litigants could immediately go to arrange for services and provide other assistance (transportation – gas, etc.) to promote their attendance; right now use conference rooms in courthouse but hopes to have a special office.

**Impact** Big improvement in getting into tx sooner. Also, on the spot random u/a's w/our alternative sanctions of county jail.; also complaints from litigants re services have ceased to exist

This approach also removes a big issue at the TPR hearing – did court actually make services available? May TPR dismissals because no documentation re services provided so this process documents the services provided for everyone; copies of services sent to defense, court, GAL, service providers, etc.)

Project has been so successful, Children and family Services are taking over the program

**Additional Background Information:**

Use part-time social worker but didn’t necessarily intend that it be a social worker – could be anyone that knows the dependency court system, is good with people, knows the service providers in the community and able to arrange for them.

Social worker ha a cell phone, lap top, forms, etc.

Project is also a way of documenting efforts made to provide services; client signs acknowledgement of services when he/she meets with social worker

Social worker sets up meetings, transportation, gas vouchers; then, if court finds at review hearing in three months that the person is not doing the services, then needs to know why; Also can get u/a's done immediately across street at community corrections center

Also:
Filings have gone down: (always go down in summer when schools aren’t open so not reporting abuse; also hot line was centralized so calls put on hold 20 minutes or more and responder had no idea where caller was calling from, so reports decreased; now putting hot lines back in local community; also trying to front load services before filing abuse and neglect petition;
State law requires public defense services be provided

Service Provider/Other Local Officials to Contact
Leah Staejuhar: 360/807-7108

RECOMMENDATION RE FOLLOW UP: I think this program merits follow up – it is a well developed approach to the issues many judges are identifying in terms of getting coordinated services identified and provided early on in the process.

Part TWO: Follow up With Non-ASFA/ABA Survey Respondents

District of Columbia

No. 35

Judge Lee Satterfield: 202/879-1918; June 24, 2004

Summary of Strategy: did many things before the reorganization to lay foundation for ASFA compliance: Integrated court system in family court to store data electronically and be able to provide performance outcomes, including ASFA timeline compliance; have also designated two attorney advisors in Family court to help maintain compliance with ASFA and provide training, keep everyone abreast of new developments; review cases; and identifies needs in terms of compliance; Family Drug Court: also big help but just beginning (only one year old); also uses mediation for every case, beginning early in the process; environment of family court is also very family oriented, not like a traditional court (opening new floor in August)

Problems Being Addressed: Had numerous problems prior to reorganization re dedicated services and supervision for family cases;

Impact: Family drug court has already served 36 mothers (over 100 children) in first year; take parents with up to 4 children; Have already achieved permanency for 2-3 parents; all in program are monitored weekly; 50% of the cases are settling at mediation in terms of the legal issues; very few appeals; NCJFCJ is currently evaluating the mediation program (to be published in the Fall of 2004)

Additional Background Information:

Family Drug Court is very effective: Have served 36 mothers (over 100 children) in first year; take parents with up to 4 children; Have already achieved permanency for 2-3 parents; all in program are monitored weekly

Mediation: Before Family Drug Court Act, had child Protection Mediation Unit just did a small percentage of cases; Now ever case goes to mediation – even though probably not appropriate for mediation (e.g., parent abandoned child): National Council of Juvenile and Family Court Judges is doing an evaluation of the program – will determine what type of cases are appropriate for mediation; eval will come out in Fall 2004
DC: has stricter requirements than ASFA: permanency plan required within 105 days after child removed; Tries to do mediation 30-45 days after removal but sometimes cases don’t settle at that point but settle later – the mediation, however, has set the process in motion and gotten people to begin to think about resolving the case

**Mediation makes it impossible to move to permanency quicker since the legal issues are resolved. They have 3 full-time mediators that have been provided from the MultiDoor Project (which provides ADR services throughout the court). These mediators have undergone extensive training: Mediation goes on every day: Contact: Janice Bouie: 202/8799-1962 and tell her Judge Satterfield referred us.

They have very few appeals; if parent admits to neglect, there is little basis for appeal

The court is very family oriented – building a special floor that is very oriented to families and children – will open in August.

Service Provider/Other Local Officials to Contact

Mediation: Contact: Janice Bouie: 202/8799-1962 and tell her Judge Satterfield referred us.

RECOMMENDATION RE FOLLOW UP: The D.C. Court, with all of the congressional and national attention it has received, as well as the many innovations it has introduced, may warrant follow up, either by phone or in a site visit, particularly regarding the mediation services and the environmental changes that have been made to make family support services more “friendly”.

FLORIDA

No. 36: ESCAMBIA County (Pensacola), Florida

June 7, 2004: Judge John Parnham (tel: 850/575-3715)

Escambia Co., Florida

Summary of Strategy: Developing process to obtain more meaningful assessments and individualized case plans to really address parent’s – and family’s -- needs – entails changing the whole system; getting staff to change their orientation and approach and then have them train the rest of the field. Beginning with interdisciplinary training on process, cultural orientations, etc., in an effort to try to change attitudes of everyone involved in the process;

Problems Being Addressed: Need for more meaningful assessments to provide the foundation for the case plan to be meaningful (now: go to parenting: but what did you learn? And did it make you a better parent? and did you need this in the first place? Maybe you are a drug addict but a perfectly good parent when not addicted – so what services do you need?); Also: so many things can come up that cause delays in complying with case plans, which are often boiler plate documents and are often not related to the real needs of the parent/child/family, so evaluating compliance with the case plan (completed, attended etc.) can be more of a quantitative than a qualitative analysis of whether the person benefited from the classes and/or services; Also often as a result of delays, etc, caseworker and client become adversaries; Because of review process, not uncommon to go 3-6 months without a review hearing and issues may surface during that time period that may be positive or negative but, unless they are true emergencies don’t get the court’s attention until the next review hearing. Case plan and compliances drives the case and is what is measured when making decisions.

If case plan is not developed, based on the needs of the parent, the needs of the child and the needs of the family, runs the risk of not having much meaning; if the problems that arise with compliance – often referrals, resource problems, or just mechanics – causes delays and aren’t brought to Court’s attention to
the next review time, may lose several months under ASFA and Department makes decision to go to permanency when delays are not fault of client; When relationship between client and case worker becomes adversarial and antagonistic, result is not much compliance because not a lot of support being provided;

So approach is to renovate process from ground up to give more opportunities to client and families and more effective evaluation of the outcomes everyone is trying to achieve.

Impact: Anticipated: Hope to achieve earlier reunifications or identify earlier that reunify isn’t viable option. Hopefully will eliminate negative aspects of the process that result in negative outcomes. Will also have benefits for system, workers, etc.; Will have comparison group which will be tracked for several years.

Additional Background Information

Also trying to get Phd to help assess mental health needs of parents and guide court

50 people in the program

got Medicaid to agree to do more extensive assessments and they agreed

also going to escalate time for doing Medicaid eligibility screening;

also going to do whole family assessments – parents and children

independent assessments: Dr. Scott Benson, Creekside

having full day training July 27th: will do 1-2 hours on process; then Dick Grimm (local consultant) will do training on logic model for evaluation; remaining time will be for cultural issues: getting everyone on the same page;

people invited from every level to attend the training (attorneys, case workers, assessors)

If they want to enhance visitation, for example, may not occur until the next review.

Target date for implementation: August 15th

Changes in attitude as well as procedures – particularly assessment

- I went to parenting class; I’m still not getting my kids

Assessments: will contract with independent assessor, rather than having provider do assessment

Now: do comprehensive assessment for children removed from home – but no comprehensive assessment of parents and/or family;

Talked with Medicaid which agreed to expand the coverage of assessment to include family and parent

Delays for ASFA: many causes including just applying for Medicaid – so will have Medicaid application official on site where children are removed.- comprehensive assessment will identify family needs including housing, vocational, etc. so court can determine the services family needs to get family back together

Will give appointments for assessment to parties at the case planning conference; will have assessor at case planning conference (not presently)

*Will require “0-5” assessment with specified 0-5 therapy – which involves a lot of contact between parent and child to help develop bonds
Program limited to 55 cases and Judge P’s division

Cases will be randomly assigned – Judge P will also be available in the afternoon of shelter hearing docket so that if questions arise he will be available.

Service Provider/Other Local Officials to Contact : N/A

RECOMMENDATION RE FOLLOW UP: Since this program is the first (and only) one to address comprehensive training of all involved in order to change attitudes, not simply the process or services, follow up re training curriculum and/or experience may be useful

Part THREE: ADDITIONAL JURISDICTIONS WITH RELEVANT /PROGRAMS THAT HAVE RECEIVED NATIONAL ATTENTION THAT WERE NOT SURVEYED AND HAVE THEREFORE RECEIVED NO TELEPHONE CONTACT

No. 37: San Diego, California

Summary of Initiatives

San Diego has developed a system for countywide assessment and recovery case management (SARMS) system for dependency cases that entails: (1) triaging the dependency cases and service delivery to reflect the nature and extent of services deemed appropriate for each case, using a graduated, prioritized structure for service delivery; and (2) reserving the most intensive court and support services (e.g., the family drug court) for those noncompliant with dependency court orders issued.

Special task committees have been established to address specific topics relating to the dependency case process and service delivery process. A SARMS Implementation committee also meets monthly to address issues relating to the program’s implementation.

All parents in San Diego’s dependency court system who abuse substances are part of the SARMS program. In keeping with the graduated structure for service delivery, parents can enter the SARMS program voluntarily, prior to a court finding of abuse and neglect; or be court ordered into the SARMS program following a court finding of abuse and neglect. Individuals cannot be using methadone to participate; if they are at time of court intervention, they must eliminate its use before being eligible to participate. Assessment of the child’s and family’s needs is conducted by SARMS recovery specialists assigned to the program. Case management if provided by the social workers assigned to handle the SARMS cases. Services to children include: conducting developmental assessments and follow up for children under 6 years; and specially trained foster parents for AOD exposed children 6 and under.

The program was initiated by Judge James Millikan, Presiding Judge of the San Diego Juvenile Court. Judge Millikan has recently retired. Perhaps the best person to contact, at least initially, is Janice Dame, Coordinator for Drug Courts in San Diego County, who has worked closely with the development of the San Diego family dependency court programs.

RECOMMENDATION RE FOLLOW UP: In view of the systemwide scope of San Diego’s dependency court initiative, and the structured system for case management, supervision and service delivery it would be useful to follow up with this jurisdiction re its impact on ASFA compliance. An added issue to address would be the impact of a change in judicial leadership on the program.
No. 38:  Dade County (Miami), Florida Circuit Court:

Summary of Relevant Initiatives:
This Court has undertaken major initiatives relating to the handling of dependency cases, including (1) the establishment of a family drug court with extensive substance abuse, medical, psychological, and other support services and has received substantial funding from both the Florida legislature and SAMHSA; and (2) other initiatives to address neglect and abuse, including: PREVENT (Prevention and Evaluation of Early Neglect and Trauma) initiative of the Dependency Court Intervention Program for Family Violence in the Miami-Dade Juvenile Court, funded by USDOJ, Violence Against Women Act Grants; and development of a protocol and procedure to evaluate infants, toddlers and preschoolers adjudicated dependent. Judge Jerri Cohen had overseen the development of the family drug court and Judge Cindy Lederman has overseen the Dependency Court Intervention Program for Family Violence project. This latter project, designated by the Florida Legislature designated Miami-Dade Juvenile court as an “infant and Young Children’s Mental Health Pilot Site, provides various therapeutic services for parents (primarily mothers) in the dependency system, and has a reputed reunification rate of 86%.

RECOMMENDATION RE FOLLOW UP: In light of the comprehensive focus of the Dade County program, its reported impact, and the national acclaim it has received, it would be very worthwhile to follow up.

No. 39: Jackson Co (Kansas City), Missouri:

Summary of Initiatives:
The Family Drug Court in Jackson County focuses on prenatally exposed infants – a focus which appears to be unusual for most dependency programs, and is designed to address potential neglect and abuse issues as soon as the infant is born. A “crisis assessment” of the newborn is done by the Department of Social Services at birth, with further assessment of the infant’s and family situation conducted subsequently by the treatment provider. Cases eligible for the program must be court ordered as a result of a finding of abuse/neglect and criminal endangerment and excludes individuals for whom more than 3 substantiated hotline reports have been made for neglect. Case management is provided by dedicated DFS case managers housed at the court who make referrals for a wide range of services, including developmental assessments and day care services. A Child Development Coordinator at the treatment provider conducts developmental screens. Additional services to children can include: public health nursing, which can also conduct developmental assessments for children, relevant countywide programs; and other services and support with the goal of providing wraparound services to address the child and the family’s situation. The FDCT team meets two times a week to discuss cases heard that week.

RECOMMENDATION RE FOLLOW UP: Because of the focus on prenatally exposed infants of this program, it is a worthwhile candidate for follow up.

No. 40: Suffolk Co. (Central Islip), New York

Summary of Initiatives:
Suffolk County instituted a Family Drug Court in December 1997 under the leadership of Judge Nicolette Pach, who has since retired. FDTC team meeting three days per week prior to each court calendar. The program focuses on cases involving neglect only, and excludes situations entailing severe mental illness of a parent and / or high a probability of violence. Initial assessment of the child and parent is conducted by a psychiatric social worker who is part of FDCT team and funded by Suffolk County Health Department. Case management is provided by DSS senior level caseworkers, assigned to work with the FDTC. County
AOD case managers are also assigned to the court. Services to children include: a CASA worker assigned to each child; development assessments conducted by public health nurses for children 3 and under.

**RECOMMENDATION RE FOLLOW UP:** While this program appears to be soundly developed, in light of its focus on neglect-only situation and the change in judicial leadership that has occurred, and the fact that there are other, more comprehensive family drug courts operating, there may not be any point in further follow up.

**Part FOUR: Information on Other Relevant programs (from the Drug Court Clearinghouse) which are being followed up by other project staff**

**Santa Clara (San Jose), California:**

**Summary of Initiative:**

Santa Clara County developed a family drug court in October 1998, under the leadership of Judge Leonard Edwards. The program is a voluntary program for parents with abuse/neglect cases and who have no concurrent criminal cases. Situations of severe mental illness are excluded from eligibility. Assessment of children and parents is conducted by specially assigned assessors on site at the courthouse. Case management services are provided by dedicated masters level social workers who work as part of the FDTC team. Services to children include: development assessment of children performed by public health nurses; and special programs for children in abuse/neglect situations (e.g., “Kid’s Magic”, “Kids are Special”). A Mentor MOMS program provides support to parents. The FDTC team meets weekly prior to the court calendar and a consolidated service plan meeting is also held weekly. A video (already sent) has been developed describing the program.

**RECOMMENDATION RE FOLLOW UP:** Defer to staff who contacted this program.

**Washoe Co. (Reno), Nevada:**

A Family Drug Court has been established since 1994 – one of the earliest family drug courts -- under the leadership of Judge Charles McGee. The FDTC team meets weekly prior to the court hearing. Program participation is voluntary and excludes situation involving severe mental illness, a high probability of violence, and/or clients using methadone. Assessments are conducted by an assessor working under contract with the Washoe County CPS. Case management services include a wide range of services, including assistance with employment issues. A dedicated social workers is assigned to the program.

Services to children include: CPS Children’s Resource Bureau staffed with Mental Health specialists; child development and sexual abuse and violence specialists; Charter School services for at-risk children including those of FDTC participants. A Foster Grandparent program has also been established to provide mentoring and other support for parents re parenting functions.

**RECOMMENDATION RE FOLLOW UP:** Defer to staff who contacted this program.