After participants completed a survey regarding the 2015 Cross Sites Meeting in Iowa, many teams prioritized having time to meet and discuss various topics with other teams. The Working session was conceived of as a way to permit this exchange. During this session, teams engaged in conversations facilitated by members of the QIC-CT leadership team on the following topics:

1. The Leadership Role of the Judge in the Safe Babies Court Team™ approach
2. From Silos to Co-ops: How to Access Community Resources
3. Adapting Policies to Support Timely Referral and Initiation of Services
4. Entitlements and Other Funding Opportunities
5. Politically Incorrect Statements or Phrases That I’ve made to Families
6. Recognizing Abuse of Alcohol and Other Substances and Engaging Parents in Treatment
7. Helping Parents Understand the System in Simple, Concrete Ways
8. The Role of Regular Court Team Meetings in Keeping Team Members Engaged
9. The Role of the Father in Family Success

Thanks to the assigned note takers, we are pleased to offer you a summary of comments made on each of these topics.
1. The Leadership Role of the Judge in the Safe Babies Court Team™ approach

Comments centered on two topics:
1. Engaging judges: find out what motivates them and show them how their interest is furthered by the SBCT approach. Data is an important tool to use in engaging them.
2. The job description for a judge using the Safe Babies Court Team approach:
   o Convene.
   o Engage other stakeholders.
   o Delegate.
   o Observe.
   o Engage parents: draw them out directly, not through their attorneys.
   o Make connections with other parts of the judiciary (e.g. Court Improvement Program)
   o Ask questions to get as much information on the table as possible.
   o Hold all parties accountable for using evidence-based practices.
   o Contribute to a sustainability plan.
   o Identify people who can engage stakeholders who do not understand the value of the SBCT approach (e.g. attorneys approaching other attorneys).
2. From Silos to Co-ops: How to Access Community Resources

**Early intervention referrals:** Engaging early interventionists in the process is important to ensure that infants and toddlers get the developmental screening to which their founded child maltreatment complaint entitles them. Building bridges with early interventionists can occur through:

- Reciprocal training that involves all the professionals collaborating with families who have infants and toddlers in foster care.
- Shared awareness of the barriers each agency/program faces in getting an effective referral system in place.

**Confidentiality:** It can be difficult to get all the information necessary to have a clear picture of what is going on in each family’s case. Solutions include:

- A memorandum of understanding (MOU) for parties to sign
- Having the judge sign a court order that stated they can work with each other.
- A universal referral form
- Working through the child welfare agency as they have access to most of the information people need to work together.

**Foster and birth parents co-parenting:** Suggestions were offered for how to assist foster and birth parents successfully co-parent:

- Journals between birth and foster parents.
- Shared diaper bags with notes of encouragement.
- Joint participation in family team meetings and appointments for the child.
- Hosting “hair clinics” for birth and foster parents that focus on hair care for children of color.
- Supporting activities for siblings placed in separate foster homes.
- Foster parent support groups; specialized kinship/relative caregiver support groups.
- Training for foster parents about the impact of childhood trauma on the child’s development and the birth parents’ struggles in the present day.

**Transportation:** There are multiple ways in which transportation is an issue in foster care cases, whether it be getting parent and child to the site of their visits or helping a parent negotiate the public bus system so they can get to the courthouse. Here are the group’s suggestions for attacking this universal problem:

- Asking faith-based members of your team if they have vans that are not used during the week that could be used for possible transportation.

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1 The Child Abuse Prevention and Treatment Act of 2010 entitles infants and toddlers who are victims of maltreatment to services under Part C of the Individuals with Disabilities Education Act. Part C is the federal legislation that covers early intervention screening, assessment and services in the states (e.g. Sooner Start in Oklahoma, Birth to Three in Connecticut).
Creating brainstorming work groups:
- With child welfare, transportation agencies, and organizations that might have transportation worked into their services to consider innovative ways to provide transportation to parents.
- To figure out how to bring services to the families instead of expecting families with limited resources to get to the many destinations they must travel to meet court expectations.
- Requesting small local grants for bus passes/gas cards.
- Offering classes or enlisting one-to-one volunteers to help parents get their driver’s licenses.
- For parents who’ve had their license suspended, creating license reinstatement programs that allow the parents to pay down their fines by doing community service.
- Using staffing’s and FTMs to process different ideas on how to support parents and each other (meeting half way with parents making efforts, through offering one-way transportation and helping them understand how to get back home on their own.
- Making learning the public transportation system part of professional development and training for new agency personnel.
3. Adapting Policies to Support Timely Referral and Initiation of Services

Policies and Procedures working well in sites:

- Good regular communication between local child welfare, court, and community services.
- Having a judge who champions and leads the work (e.g. ordering services to begin 10 calendar days from disposition hearing).
- Having 3-4 agencies that provide Child-Parent Psychotherapy prioritize Safe Babies cases.
- Having predetermined section of attorneys who are contacted when a potential Safe Babies referral comes through.
- Obtaining and assigning service referrals at family team meetings/case staffings.
- Getting all service providers to family team meetings/case staffings.
- Having 2-3 dedicated caseworkers that work on 0-3 cases.
- Providing tax millages\(^2\) for early childhood services.
- Getting Medicaid to pay for “Family Teaming.”
- Having access to Targeted Case Managers (Medicaid will pay for this).
- Coordinating local agency training so that personnel are all on the same page in terms of services.
- Determining early if a parent qualifies for disability services.
- Having a designated mental health team for every case. (This does not happen with the general population.)
- Having mental health, domestic violence, and substance abuse treatment providers co-located to facilitate timely referrals.
- Collaboration between and among agencies in terms of funding streams.
- Establishing Children’s Services Councils in local communities (currently 8 in Florida and 32 throughout the US).
- Coordinating family visits to minimize issues related to family participation (e.g. transportation).
- Ensuring that Early Periodic Screening Diagnosis and Treatment (EPSDT) is being enforced for all Safe Babies cases (e.g. must be screened within 72 hours of coming into custody).
- Roving Services Provider who goes to the home for parents receiving outpatient services (e.g. home visiting in rural communities, mental health and substance abuse-involved families).

\(^2\) The millage rate is the amount per $1,000 used to calculate taxes on property. Millage rates are most often found in personal property taxes, where the expressed millage rate is multiplied by the total taxable value of the property to arrive at the property taxes due. (http://www.investopedia.com/terms/m/millagerate.asp)
• Having a central location for all services for a family/case/child, and which agencies are providing the services.

**Barriers to timely referral and service initiation:**
• Not having a Community Coordinator to coordinate services.
• Privatization of Medicaid.
• Medicaid failing to cover all therapeutic services (e.g. Case Management).
• Not having a trauma-informed primary care physician in every jurisdiction.
• Unable to bill for service providers to attend family team meetings/case staffings.
• Agency waitlists (e.g. up to 30 days or more after removal and/or referral).
• Lack of service providers trained to work with infants, toddlers and their families.
• Parents/families without Medicaid coverage or TANF funding.
• In rural communities, lack of services and supports vs urban centers.
• Some states not recognizing mental health needs and services if child is removed from the biological home.
• Lack of transportation (e.g. for family contact, getting to other services).
• Placing children 15 miles or more from biological parents.
• When initial investigator does not refer a child for services within 10 or more days and the child has to be placed in a shelter before moving into the child welfare system.
• When case conferences and/or family team meetings happen before a case is transferred out of the investigative unit.
4. **Entitlements and Other Funding Opportunities**

The sites represented in this discussion are at different points of implementing and sustaining their court teams. They have very different strategies for drawing down funds:

- Funding from DHS for the community coordinator (Little Rock Arkansas).
- Consortium of private foundations (Tulsa). Using data to sustain the funding stream after the first 3-year period of funding ends. At least 3 of 5 foundations have committed to continued funding.
- Court Improvement Program providing training and technical assistance for community coordinators and child welfare agency staff (Florida).
- Title IV-E\(^3\) training fund for state-wide training (Florida).
- Community-based agencies funding community coordinators (Florida).
- Community partnerships and stakeholders drawing down funding – including Medicaid state grants (Iowa).
- Systems of Care funding and resources being used to support the work (Arkansas).
- MEICH-V funding for home visiting services being used to support the work (Arkansas).
- Faith-based community – “Adopt a worker” for retention strategy (Arkansas).

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\(^3\) Title IV-E of the Social Security Act is entitled “Part E-Federal Payments for Foster Care and Adoption Assistance.” IV-E covers foster care and transitional independent living programs, guardianship and adoption assistance for children with special needs (https://www.ssa.gov/OP_Home/ssact/title04/0400.htm).
5. Politically Incorrect Statements or Phrases That I’ve made to Families

Our speech is a result of who taught us to talk and who raised us. Sayings can have a purely benign meaning in one family but could be offensive in another. Sometimes our mouths get going and we say things that can be hurtful to a parent we’re working with. If we grew up hearing a phrase as innocuous, we may not have analyzed its potential impact on people outside our own family circles.

What are the statements that can offend parents?
- “This gal” or “mom” or “the parents” rather than calling people by their names.
- “Calling a spade a spade” is an example of racism: spade is a pejorative term for a black person.
- “Rule of thumb,” originally the maximum width of a stick with which a man could beat his wife (http://www.phrases.org.uk/meanings/rule-of-thumb.html).
- “Retarded” is used to denote someone who doesn’t get what you’re trying to tell them but it is also insulting to anyone, especially people with intellectual disabilities.
- “Crackhead” is one of many pejorative terms used to disparage someone’s addiction.
- “Don’t let that ruffle your feathers” can be seen as belittling someone’s worries.
- Latino or Hispanic, depending on the generation.
- He’s queer.
- That’s so gay.
- “Victims” suggests powerlessness whereas “targets” or “survivors” put the emphasis on the person who targeted someone for violence. Survivors suggests the strength of the target to continue to put one foot in front of the other.
- “Make that appointment! It’s just a phone call.” Our expectations of the parents we are working with sometimes fail to recognize their anxiety in unfamiliar situations or circumstances that require them to advocate for themselves.
- “Brown people are very angry.” Any statement that tries to describe an entire race of people is on its face objectionable. In this instance, it is a form of reverse racism.

How do you rebound from thoughtless statements?
- Apologize.
- Acknowledge mistakes.
6. Recognizing Abuse of Alcohol and Other Substances and Engaging Parents in Treatment

Participants in this session raised issues for communities trying to address substance abuse/addiction:

- How to manage the numbers of people with drug use disorders whose children are entering the foster care system.
- No capacity to screen in our community.
- Addressing issues of treatment availability and quality.
- Community partners who understand the issues.
- Treatment quality: while we understand impaired parents we haven’t changed our approach enough. Meetings are too long, too many forms, too many demands.

One participant shared an important lesson: “One of the things I have learned is that for many parents they are not making bad choices. They are making life choices living with an addiction.”
7. Helping Parents Understand the System in Simple, Concrete Ways

This topic elicited several good ways to help parents understand the child welfare system. Some states are doing similar things when it comes to this topic. The conversations also demonstrated that this issue is definitely on the radar screen of child welfare systems and is becoming more of a priority in helping families find success in their child welfare cases. These are a few of the ideas that were discussed during this session:

- Videos that explain the court process, much like the “Clock is Ticking.”
  - Sometimes in court the Judge can tell you about the process, but in that moment, as a parent who has just lost custody of their child (ren), the information may not sink in. It is nice to have a video that the parent can take home to review later at a time when they may be more calm and open to receiving the information.
  - Parents can also watch the video multiple times if there is a need.
  - These videos can also help those who are visual learners.

- For drug courts, empowering families by waiting to drug test them: ask them “when do you think you will be clean?” and then start drug testing them on that date.
  - For long time drug users, drugs can take up to 30 days to leave the body. Using this method saves money by cutting down on the use of drug test kits that you know will be positive.
  - This process also allows parents to be partners in their own journeys. As we have learned throughout this Cross Sites meeting, it is all about relationships and those relationships start with partnering and respect for one another.

- For parents with intellectual disabilities, use pictures to describe the court process in lieu of a pamphlet.
  - In child welfare, we often encounter parents with intellectual disabilities and it is a must, for their success, that we change the way that we interact with them and model behavior. One way to do that is to have pictures to “show” the court process.
  - The pictures do not have to be limited to the court process. You can also use pictures for modeling parenting skills (e.g. Step by Step Parenting [http://www.cebc4cw.org/program/step-by-step-parenting-program/] -Maurice Feldman).

  - Parent orientation is a group led by parents who have been through the child welfare process. They teach other parents about the child welfare process and what to expect. Other states had similar ideas to this one (Parents for Parents and Dependency 101).
- **Parent Partners** are parents who have been through the child welfare process and are now mentoring other parents. A Parent Partner is assigned to a family when their child is removed from their care and put in foster care. The Parent Partner empowers family members to advocate for themselves and supports them in navigating the system. The Parent Partner stays with the family for the duration of the case.

- **Parent Cafés** engage parents in meaningful conversations about what matters most – their families and how to strengthen them by building five research-based protective factors that mitigate the negative impacts of trauma ([http://www.cssp.org/reform/strengthening-families/basic-one-pagers/Strengthening-Families-Protective-Factors.pdf](http://www.cssp.org/reform/strengthening-families/basic-one-pagers/Strengthening-Families-Protective-Factors.pdf)). This Café is facilitated by trained parents. Three topics are discussed in each café.

- **Recovery Cafés** are similar to Parent Cafés. This model is designed to help people maintain recovery and reduce relapse. Recover Cafes teach people ways to manage their mental health and maintain sobriety.
8. The Role of Regular Court Team Meetings in Keeping Team Members Engaged

This topic was framed around four themes that delineate how a Community Coordinator can keep the court team engaged:

1. Communication
2. Cooperation
3. Collaboration
4. Coordination

**Communication:** Recognize that this is a new learning curve for everyone involved.
- Monthly court team meetings are essential.
- When a member of your court team moves to a new job, keep them engaged and use the opportunity to learn about their new agency. Meet with their replacement at the agency they left and welcome them to participate in your court team.

**Cooperation:**
- Use the court team meetings to figure out what resources you have in your community to meet the needs of children and families.
- Break down the barriers that prevent the various sub-systems from working together.

**Collaboration:** Developing a systemic approach to improving the child welfare system.
- Importance of each court team member buying into the objectives of the Safe Babies Court Team approach.
- Be creative about who might have skills or resources to the table.
- When invited to other meetings and training being held in the community, attend as the court team’s representative.

**Coordination:**
- Coordination begins with the judge talking up the idea and then convening the first court team meeting.
- The Community Coordinator picks it up from there. This position is the key to building a coordinated response to the needs of infants and toddlers in foster care.
- Keeping the needs of families upper most in mind, have at-least monthly meetings about how each case is going; family team meetings every month so parents are able to be part of the team working on their case.
9. The Role of the Father in Family Success

**Reasons that fathers’ involvement is so important:**

- Paternal relative involvement
- Male role model
- Increases permanency options
- Increased family time for a child
- Children’s relationships with their fathers increase developmental and social skills
- Fathers contribute to forming a child’s identity
- More relative placement options
- Co-parenting is possible
- Larger support system for the child

**Barriers that restrict fathers’ involvement:**

- Work schedules that interfere with possible family time
- Fathers’ new families prevent or discourage them from being involved
- Incarceration
- Deportation
- Length of time establishing paternity
- No engagement prior to the establishment of paternity
- Minimizing the importance of legal/psychological fathers
- Possible effects on a military career
- Differing expectations for moms and dads
- Not having previous experience as a child’s primary caregiver
- Moms failing to provide paternity information because they fear the involvement of the biological fathers
- Delays in placement with paternal relatives until paternity is established

**Ways to improve paternal involvement:**

- Building community buy-in to encourage paternal involvement in cases
- Arranging family time around parents’ work schedules
- Fatherhood groups and support systems
- Nurturing parenting programs
- Father and child play groups
- Kinship programs
- Case management-style focused on kinship care
Significant family time which encourages a father’s engagement in his child’s life
Two-for-Two Book Program to encourage bonding/attachment
Early engagement of fathers
Giving children the choice to know their fathers and other paternal relatives regardless of their biological relationship
Paternal relative placement
Fictive kin placement with possible paternal relatives until paternity is established
Paternity testing at the courthouse to expedite paternity results
Transportation of parents from prison to court hearings
Expecting the same level of engagement from both parents
Addressing the mothers’ fears about paternal involvement
Intensive family services
Substance abuse treatment in the family home
Engage everyone who wants to be involved with the child
Child-Parent Psychotherapy

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4 The Two-for-Two Book Program is a family engagement strategy in which the judge gives the birth parent and the foster parent copies of the same children's book. At a pre-arranged time, the birth parent calls the foster home and reads the story aloud to his child while the foster parent turns the pages.