

THE COLORADO IN-DEPTH TECHNICAL ASSISTANCE PROJECT

Background

States were offered an opportunity to apply for a year of in-depth technical assistance (TA), and four were selected: Colorado, Florida, Michigan, and Virginia.

The CO In-Depth TA Steering Committee includes representatives from the state, four counties; three judicial districts; two Native American Organizations; a parent of a child with fetal alcohol syndrome; CASA, MSO, and others. The Committee agreed on the following problem statement and goal for the project:

The Problem: “Line professionals in the substance abuse, child welfare, and judicial systems have not been given adequate tools or well prepared to assess whether and the extent to which children are unsafe at home when their parents use substances, and the managers of those systems do not know how to guide and support staff.”

The Goal: “By July 2004, CO will have a protocol for screening, assessing, engaging, and retaining families who are involved with the child welfare, TANF and court systems.”

Activities carried-out as part of the TA

The Steering Committee determined that counties, tribes, and judicial districts should contribute extensively to the design of the protocol. To that end, with guidance from the TA Consultant, the Steering Committee:

- Designed and released a survey asking respondents to identify topics they would most want addressed in our protocol; (302 responses)
- Convened 10 regional meetings to foster discussion about challenges and successes; solicit topics for inclusion in the protocol; and secure interest in piloting the protocol (275 people attended the meetings, one of which on the Southern Ute Reservation and one of which was held in a courtroom)
- Held one focus group with substance abusing mothers in treatment
- Sent staff from social services; substance abuse services, MSO, court, and mental health to a 3 day all-site working session sponsored by NCSACW, during which elements of the protocol were developed;
- Reviewed research studies and best practices for inclusion in the protocol;
- Solicited applications from counties/judicial districts to pilot the protocol.

Core elements of the protocol

These activities resulted in consensus on some themes and high priority topics. Examples of some themes and action steps that will be part of the protocol include:

- Theme: People are interested in using short, effective screening tools that could be used widely among diverse providers. They view having standard tools as a method to simplify their own work and as a vehicle to structure conversation with other service providers. One action step:
 - We will develop and recommend two short screening tools: one for child welfare workers, legal/court staff and non-profit providers to screen for substance abuse among open child welfare cases; and one for substance abuse and non-profit providers to screen for child safety among clients coming for treatment

- Theme: When teams work effectively, decisions and staff morale are better. Staff do work in teams, but the extent to which teams are effective tends to depend upon the skill of a worker or the style of a manager, rather than on a systematized approach to work that facilitates teamwork. Four action steps:
 - Mechanisms will be established for child welfare practitioners to share copies of family service plans with the substance abuse treatment provider to whom the family is referred for services;
 - Mechanisms will be established for treatment providers to share copies of substance abuse treatment plans developed for families referred for treatment through the child welfare system.
 - Substance abuse treatment providers will be offered a new licensing category to build their capacity to provide services tailored to child welfare clients. CO has a category of licensing for treatment of offenders; we propose the addition of a licensing category for child welfare clients.
 - Mechanisms will be established to insure that families are active members of teams. These mechanisms will include procedures to assure that assessments explicitly reflect the family's perspective; that lawyers and judges ask where the family perspective is reflected in case plans; and that staff are adequately skilled to conduct effective case staffings and family group conferences.
- Theme: People want to know more about each other's work and systems, but they want learning to be integrated and practical. Three action steps:
 - Trainers from child welfare, substance abuse services, and the courts will collectively design professional development experiences for staff. These experiences that is, they will be designed and delivered by a cross-disciplinary training team and attended by staff from all three systems.
 - Judicial/legal staff will receive training in the processes of addiction, relapse and recovery and in child development; child welfare staff will receive training in the processes of addiction, relapse and recovery; and substance abuse staff will receive training in child development.
 - Priority will be given to designing professional development experiences that help staff honor, respect, value, and build on the rich cultural, ethnic, religious, gender, and class backgrounds of families and colleagues.

Current Status and Next Steps

- The protocol (now viewed as a "toolbox") will be complete by July 30, 2004.
- Counties and judicial districts were asked to submit Statements of Interest in serving as pilots. Applications required certification from child welfare, substance abuse services, and courts.
- As of May 21, 2004, applications have been received from:
 - 13th judicial district, which covers six counties
 - El Paso County
 - Adams County
 - La Plata County
 - Pueblo County
 - Montrose County
- Pilot sites will receive technical assistance through December 2004. This phase of technical assistance will be used to implement the protocol/toolbox.