Module 5: Developing a Comprehensive Response for Families Affected by Substance Use Disorders, Mental Disorders, and Co-Occurring Disorders

Training Plan

Goal—The goal of Module 5 is to provide child welfare professionals with an in-depth understanding and recommended techniques for incorporating information about an individual or families’ substance use, mental disorder, or co-occurring disorders and treatment into the child welfare case plan, and to assure the delivery of culturally competent services, as well as how to monitor progress. In addition, this module will provide child welfare professionals with an understanding of the importance of collaborating with other service providers in developing and monitoring a family’s case plan.

Methods: PowerPoint presentations (or overhead/transparencies); large group and small group discussions.
Training Aids: Projector and computer, disk with PowerPoint file (or overhead and transparencies); flip chart with markers; participant notebook.
Time: 2 hours, 50 minutes

Learning Objectives—After completing Module 5, child welfare professionals will have an understanding of the following topics:

- Child and family service delivery system and competencies.
- Integrated systems work (systems of care)
- Developing culturally relevant comprehensive case plans and how to monitor progress
  - Incorporating substance abuse treatment components
  - Incorporating mental disorder treatment components
  - Incorporating co-occurring issue treatment components
  - Critical role of collaboration with other service providers
- Monitoring comprehensive case plans
  - Importance of on-going assessment and reevaluation
  - Critical role of collaboration with other service providers
- Transition and permanency planning
  - Importance of early planning for transition and permanency
  - Relapse and relapse prevention
  - Establishing/ensuring community support systems
  - Critical role of collaboration with other service providers
- Ways to encourage/support collaboration with other service providers
Prior to start  

Meet and greet, registration

Purpose is to give participants access to the space. Each will prepare differently, arrive at different times. Conduct registration and distribute materials. Trainers get ready.

0 – 15 minutes  

Introductions; Purpose; Ground Rules  

15 min.

Trainer introduces him- or herself. Invite participants to briefly introduce themselves (e.g., name, unit, office location, years in the system, etc.). If this same group has been together for other modules in this series, you might substitute by asking them how they used information learned in previous sessions in place of introductions. If group is smaller than 12-15 people, trainer can invite them also to briefly describe their interest in this training. If group is larger than 40-50 people, individual introductions are likely to take too much time.

Describe the purpose of Module 5. Language for this overview is provided below, at the beginning of the presentation scripts, right before Presentation 15. Emphasize that child welfare professionals often work with families where one or more adults are experiencing substance use and/or mental disorders and this training is intended to prepare them to better help such adults recover from the effects of their disorder and function appropriately as parent or caregiver. The bottom line goal is safe care of children. The following paragraphs also describe four simple ground rules for the training session. After presenting them, the trainer may ask the group if there are any other ground rules important to them.

15 – 35 minutes  

Presentation 15: Community service systems; collaborative work with integrated systems  

20 min.

Deliver scripted presentation about community services and integrated care systems. Slides V-2 through V-10. At the conclusion of the presentation, ask first if there are any brief questions that can be answered before moving on to the following discussion. Keep answers brief. Only answer questions to which you know the answer.

35 – 55 minutes  

Facilitated Group Discussion  

20 min.

Once questions have been addressed, move the whole group into a discussion about the differences between ideal service systems, where everyone works together, and the realities of the systems in which these workers work. Begin the discussion by asking:

You have heard about a lot of principles and practices in communities that collaborate actively in their services for families, but—in your experience—how real do these practices seem? What kinds of collaborative practices take place in the real world where you work?

To stimulate discussion, you might ask any of the following questions:

- What collaborative practices do you personally participate in?
- What collaborative practices do you wish would happen in your community, but in reality don’t?
The GOAL of this discussion is to help participants recognize that there are collaborative practices operating in their system and that there are better ways to help families than are employed in many communities. Try not to let one participant dominate the discussion; draw in others to the discussion.

To bring closure to this discussion, emphasize that no community service system is perfect and that the strategies and characteristics that have been presented represent ideal practices we all want the system to move toward. Furthermore, we each have to be a good partner in order to have good partners.

55 – 80 minutes  
**Presentation 16: Culturally relevant case plans; measuring progress**  
25 min.

Deliver scripted presentation on helping parents through appropriate case planning strategies and measuring their progress towards case plan goals. Slides V-11 through V-31. At the conclusion of the presentation, ask first if there are any brief questions that can be answered before moving on. Keep answers brief. Trainer should only answer questions to which you know the answer.

80 – 95 minutes  
**Break**  
15 min.

95 – 115 minutes  
**Facilitated Discussion of Case Vignette**  
20 min.

On their return from the break, ask participants to organize themselves into smaller discussion groups with 5-7 people in each group. Ask them to each quietly read Module 5 Vignette, at the end of this guide, which describes a real family involved with the child welfare system.

Then ask the small groups to discuss the Vignette for a few minutes, specifically:

1. What progress has been made?
2. What progress needs to made to support family reunification?
3. How might the case plan goals and objectives be changed to better reflect the needs of the family and to be more likely to lead to success, including any adjustments for cultural reasons?

After just 9-10 minutes, ask them to bring their attention back to the larger group (no need to move seats again) and ask them to share a bit from their small discussion groups. In particular, ask,

“What kind of changes did you talk about making in the case plan?”

The GOAL of this discussion is to help participants apply the content of the session to a real family situation. Try not to let one participant dominate the discussion; draw in others whenever possible.

To bring closure to this discussion, emphasize that progress on personal life needs is not always clear-cut, nor does it always follow a straight line forward. Encourage them to talk
with supervisors and co-workers to find out what they think about how to measure progress and what is adequate progress.

115 – 140 minutes  
Presentation 17: Coordination of treatment and services; permanency planning; collaboration  
25 min.

Deliver scripted presentation describing ongoing issues that arise during recovery from substance use and/or mental disorders. Slides V-32 through V-54. At the conclusion of the presentation, ask first if there are any brief questions that can be answered before moving on to the following discussion. Keep answers brief. Trainer should only answer questions to which you know the answer.

140 – 160 minutes  
Facilitated Group Discussion 20 min.

Once questions have been answered, begin a whole group discussion by asking,

- What kinds of family situations lend themselves to collaborative planning or service teams?
- When does it make sense to form such a team, and when does it not make sense?

To stimulate group discussion, you might also ask the following:

- How would you decide whom to include or invite to a collaborative planning or service team?
- How would such a meeting look for Daniel and Irene?
- Are there circumstances in which you would choose not to participate in such a team proposed by another professional working with a family with whom you are involved?
- What are those circumstances?

The GOAL of this discussion is to help participants think through all that is involved in collaboration with other helpers and decide where some limits are for them around collaboration with other helpers. Try not to let one person dominate the discussion.

To bring closure to this discussion, emphasize that when service teams work to consolidate or align goals, strategies and expectations they improve the chances of success for individuals and families.

160 – 170 minutes  
Closing Discussion 10 min.

Briefly review the areas that have been covered in this training session, focused on case planning and service strategies, including collaboration with others. Ask the group:

- What new things have you learned in this session that you can take with you and apply to your work with families?
- Have you changed any personal attitudes as a result of this session?
The GOAL of this brief discussion is to help participants think about what they will take away from the session. At the end, thank them all for participating. If they will be receiving more modules in this series, you might remind them of what comes next, and when.