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## The FIT: Family Treatment Court Implementation Tool

## **Data Collection Instrument**

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## FIT: Family Treatment Court Implementation Tool Data Collection Instrument – Full

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		Standard 1: Organization & Structure		
1A	Multidisciplinary & Multisystemic Collaborative Approach	FTC Coordinator		FTC Staffing & FTC Hearing
		Who are the administrators, or		Multidisciplinary team
	Assessed with Interview and Observation <sup>1</sup> :	organizational executives, that oversee the		members collaborate,
	There is coordination and collaboration in setting	FTC?		particularly those who would
	policy and overseeing FTC operations between			typically have an adversarial
	the FTC and the child welfare system, substance	[If respondent provides individual		relationship in a traditional
	use treatment, mental health system, children's	executive's names] What systems do these		court setting.
	services system, related health systems, related	executives represent?		
	education systems, related social services			Each professional "stays in their
	systems.	How effectively do these interdisciplinary		lane" while also collaborating.
		partners collaborate in developing policy		
	Assessed with Interview:	and implementing the FTC operations?		
	The involved executives collaborate to ensure			
	that the FTC's structures and operations adhere			
	to the mandates of each system to improve			
	outcomes across systems.			
1B	Partnerships, Community Resources & Support	FTC Coordinator	Document #4	
			(MOU): Describes	
	Assessed with Interview <sup>1</sup> :	What partnerships make up the FTC?	community	
	There is coordination and collaboration in		partnerships'	
	supporting service access between the FTC and	In what ways do FTC partners contribute to	roles,	
	the child welfare system, substance use	serving FTC-involved families?	responsibilities,	
	treatment system, mental health system,		and functions.	

<sup>&</sup>lt;sup>1</sup> This is a "split provision." See section 8.2 of the Site Visit Guide.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	children's services system, related health systems, related education systems, and related social services systems.			
	Assessed with Document Review: Community partnerships formalized through MOUs that describe roles, responsibilities, and functions.			
1C	Multidisciplinary Team Ongoing FTC operations are administered by a team of professionals, including the judge, FTC coordinator, child welfare agency/state's attorney, caregiver's attorney, child's attorney, guardian ad litem and/or court-appointed special advocate, child welfare worker, and providers from SUD treatment, MH treatment, child & adolescent services, and related agencies.		Document #1 (P&P Manual): review list of operational team members for team composition as described in provision	FTC Staffing & FTC Hearing Team members engaged at staffing and hearing include FTC coordinator, the judge, child welfare/state's attorney, caregiver's attorney, children's attorney, guardian ad litem or court appointed special advocate, child welfare caseworker, substance use treatment provider, mental health treatment provider, children's services provider, and other social services agency representative. (See Observation Checklist on the FIT Scoring Instrument)

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
1D	Governance Structure	FTC Coordinator	Document #1 (P&P Manual):	FTC Staffing and FTC Hearing
	FTC governance structure includes oversight/executive body, steering committee, and operational team. The oversight/executive body includes executive-level representatives from the child welfare court system, all partner organizations, and other community leadership/elected officials. The steering committee includes supervisory-level staff of all partner organizations. Roles, responsibilities, and communication among each of the three governance committees are clearly defined.	Does the FTC have an oversight/executive committee, steering committee, and operational team? [If the respondent mentions an oversight/executive committee but doesn't say who it includes, ask] Who is a part of the community- level committee comprised of partner organizations (the "tier two" committee)? [If the respondent mentions a steering committee but doesn't say who it includes, ask] Who is a part of the community-level committee comprised of partner organizations (the "tier two" committee)? What are the roles and responsibilities of each committee?	Includes a clear definitions of governance structure roles, governance structure responsibilities, and communication protocols among governance structures. Notes three-tier governance structure that includes oversight/ executive body, steering committee, and operational team. States that oversight/executiv e body includes	Team members present at staffing and hearing include FTC coordinator, the judge, child welfare/state's attorney, caregiver's attorney, children's attorney, guardian ad litem or court appointed special advocate, child welfare caseworker, substance use treatment provider, mental health treatment provider, children's services provider, and other social services agency representatives.
			executive-level representatives from the child welfare court	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			system, all partner organizations, and other community leadership/electe d officials. States that steering committee includes supervisory-level staff of all partner organizations.	
			AND <sup>2</sup> Document #4 (MOU): Describes governance committees' roles, responsibilities, and communication protocols.	

 $<sup>^{2}</sup>$  See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
1E	Shared Mission & Vision	FTC Coordinator	Document #1 (P&P Manual): Vision and mission	
	Vision and mission statements exist and were collaboratively developed by partner organizations. Vision and mission statements	Does the FTC have vision and mission statements?	statements include	
	were developed to reflect each system's values and jointly identify measurable goals and objectives.	[If yes]: Who developed the vision and mission statements?	measurable goals and objectives.	
		[If yes]: How were the vision and mission statements developed?		
1F	Communication & Information Sharing	<b>FTC Coordinator</b> What is the FTC team's method of	Document #1 (P&P Manual):	
	Assessed with Interview <sup>3</sup> :	communication in between	Information-	
	Team shares case information in a timely manner using email.	staffings/hearings?	sharing protocols are explicit and	
		What type of information is being shared	compliant with all	
	Team shares information with each other on participant behavior, caregiver progress, child	among the FTC team?	confidentiality requirements,	
	progress, and family progress.	Why is information being shared among the FTC team?	ethics, and laws.	
	Purpose of information sharing is to support recovery, family reunification efforts, monitor	Treatment		
	progress, and review and respond to participant behavior.	How do your providers communicate information to the FTC team regarding participant behaviors?		
	Assessed with Document Review:			
	FTC has established information-sharing	What information is shared?		
	protocols compliant with all confidentiality requirements, ethics, and laws.			

<sup>&</sup>lt;sup>3</sup> This is a "split provision." See section 8.2 of the Site Visit Guide.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	Assessed with Interview: Team uses email.			
1G	Cross-Training & Interdisciplinary Education	FTC Coordinator	Document #1 (P&P Manual):	
	Team training/education plan offers FTC has a training and education plan. Training and education for FTC operational team includes	What kind of training did team members complete in the last 12 months?	review training/education plan for	
	onboarding/orientation training, annual cross- training, and ongoing interdisciplinary education.	[If not already answered]: Does your FTC have a training/education plan for team members?	components as described in provision	
	Training and education is offered to FTC oversight body, steering committee, operational team members and other community agencies.	[If yes]: What does the training/education plan involve?	OR	
	Training and education for steering committee and executive body includes onboarding/orientation training, annual cross training, ongoing interdisciplinary education.	[If not already answered]: What is your orientation process for new FTC team members?	Document #7 (FTC Team Continuing Education Documents): Indicates that	
	Training and education for other community agencies include onboarding/orientation training, annual cross training, and ongoing interdisciplinary education.	[If not already answered]: Does the FTC provide education or training to other committees or levels within the FTC governance structure? [If yes]: What does this involve?	training & education for FTC operational team includes annual cross-training and ongoing	
		[If not already answered]: What is your orientation process for new members to governance structure committees or levels?	interdisciplinary education. OR	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		[If not already answered]: Do the FTC team	Document #8	
		members provide education or training to	(Orientation	
		community partners?	Training	
			Curriculum for	
		[If yes]: What does this involve?	New Operational	
			Team Members):	
			Indicates that FTC	
			operational team	
			members receive	
			onboarding/orient	
			ation training.	
1H	Family-Centered, Culturally-Relevant, and	FTC Coordinator	Document #1	
	Trauma-Informed Approach <sup>4</sup>		(P&P Manual):	
		Do FTC team members focus on the whole	Uses language	
	Daily operations and interactions reflect family-	family?	that reflects a	
	centered, culturally relevant, and trauma-		family-centered	
	informed approaches and practices by staff who	Do FTC team members use culturally-	approach,	
	recognize and respond to signs and symptoms of	relevant approaches?	meaning it	
	trauma and are alert to culturally relevant		address the needs	
	factors.	Do FTC team members recognize and	of the entire	
		respond to trauma?	family; a culturally	
			relevant	
			approach,	
			meaning it is alert	
			to culturally	
			relevant factors;	
			and a trauma-	
			informed	
			approach,	

<sup>&</sup>lt;sup>4</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			meaning it recognizes and responds to signs & symptoms of trauma.	
11	Policy & Procedure ManualAssessed with Interview: All partner organization team members have an up-to-date copy of the manual and are familiar with the policies and procedures of the FTC.Assessed with Document Review: Describes policies, procedures, day-to-day responsibilities of team members, and team member roles.Contains the mission, vision, goals, eligibility criteria, referral and entry process, phase structure, monitoring, recovery and reunification support services, drug and alcohol testing procedures, coordinated responses to behavior, and protocols to determine necessary services for children, caregivers, and families.	FTC Coordinator Does the FTC have a policies & procedures manual? [If yes]: Do all team members have a current copy of the P&P manual? [If yes] Are all team members familiar with its contents?	Document #1 (P&P Manual): review for all items described in provision	
1J	Pre-Court Staffing & Review Hearing FTC team participates in pre-court staffing meetings. Staffing meeting occurs immediately before the FTC court review hearing. During staffing, team discusses progress and needs of	FTC Coordinator Does the FTC team engage in pre-hearing meetings to discuss cases that will be seen in Court that day?	Document #9 (Child welfare court reports/FTC progress reports/Plan of Safe Care):	FTC Staffing All FTC team members present at staffings.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	children, caregivers, and family and recommends	[If yes]: When do staffings occur	Includes	Team discusses progress and
	coordinated response to participant behavior to judge.	and what is discussed during them?	information on progress and	needs of children, progress and needs of
	A progress report is developed and read by all	[If yes] What is discussed during staffings?	needs of children, caregivers, and	caregivers/participants, and progress and needs of family.
	team members prior to each staffing.		family.	
		[If not noted already]: Are progress reports on participants/cases distributed prior to	OR⁵	Team makes recommendations to judge regarding participant
		staffings?		behaviors.
			Document #1	
			(P&P Manual):	
			States that FTC	FTC Hearing
			team participates	
			in pre-court staffing meetings.	The same cases discussed at staffing appear during the hearing.
			States that	
			staffing meeting occurs	The same information discussed at staffing is presented to
			immediately before the FTC	participants during hearing.
			court review	(See Observation
			hearing.	Checklist on the FIT
			States that during	Scoring Instrument)
			staffing, team	
			discusses progress	
			and needs of	
			children,	

<sup>&</sup>lt;sup>5</sup> See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

Provision & Key Concepts	Interview Q	Document Source	<b>Observation Item</b>
		caregivers, and family.	
		States that during staffing, team recommends coordinated response to participant behavior to judge.	
	Standard 2: Role of the Judge		
Convening Partners The judge convenes the operational team, steering committee, and executive committee. During these convenings, the judge guides the operational team in the development, implementation, and management of ongoing operations and actualization of the FTCs mission and vision.	FTC CoordinatorPlease describe the judge's role with regards to the operational team, steering committee, and oversight committees.Describe the judge's role in maintaining and developing relationships with community partners.	Document #1 (P&P Manual): Outlines judicial responsibilities to include convening the operational team, convening the steering committee, convening the executive committee, oversight of the development of ongoing operations and actualization of	
	Convening Partners The judge convenes the operational team, steering committee, and executive committee. During these convenings, the judge guides the operational team in the development, implementation, and management of ongoing operations and actualization of the FTCs mission	Standard 2: Role of the Judge         Convening Partners         The judge convenes the operational team, steering committee, and executive committee.         During these convenings, the judge guides the operational team in the development, implementation, and management of ongoing operations and actualization of the FTCs mission	Convening Partners       FTC Coordinator       Caregivers, and family.         Standard 2: Role of the Judge       States that during staffing, team recommends coordinated response to participant behavior to judge.         Standard 2: Role of the Judge       Document #1 (P&P Manual):         Outlines judicial regords to the operational team, steering committee, and executive committee.       Please describe the judge's role with regards to the operational team, steering committee, and oversight committees.         During these convenings, the judge guides the operational team in the development, implementation, and management of ongoing operations and actualization of the FTCs mission and vision.       Describe the judge's role in maintaining and developing relationships with community partners.       Document #1 (exercise convening the steering community partners.         Ownumber of ongoing operations and actualization of the FTCs mission and vision.       Describe the judge's role in maintaining and developing relationships with community partners.       Convening the steering committee, convening the steering convening the steering committee, convening the steering committee, convening the steering

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			oversight of ongoing operations and actualization of the FTC's mission and vision, and management of ongoing operations and actualization of the FTC's mission and vision.	
2B	Judicial Decision Making	FTC Coordinator		FTC Staffing
	Assessed with Observation <sup>6</sup> : In pre-court staffing, the judge and operational team discuss the recommended responses for each case based on information about participant attendance, progress, engagement in treatment, complementary services received, children's needs and services, and compliance with child welfare court system and child welfare agency requirements.	Who makes the final decisions about court- ordered responses to participants?		During staffings, judge guides the team, considers contributions from all team members when making decisions, and asks for professional input as necessary. Judge makes the final decision about court-ordered responses.
	<b>Assessed with both Interview &amp; Observation:</b> The judge makes the final decision about the court-ordered response.			

<sup>&</sup>lt;sup>6</sup> This is a "split provision." See section 8.2 of the Site Visit Guide.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
2C	Participation in Pre-Court Staffings	FTC Coordinator		FTC Staffing
	The FTC judge consistently attends pre-court staffing to discuss participant progress, updates, and behaviors. The FTC judge discusses participant progress, updates, and behaviors.	How often does the FTC judge participate in pre-court staffing? [If the respondent's answer is not clear] Always, most of the time, about half of the time, infrequently, or never?		Judge is present and engaged at staffing; Judge is involved in discussions regarding all participants. FTC Hearing
		[If the judge attends staffings] During pr- court staffings, what discussions is the judge involved in?		Judge is present and engaged at hearing.
2D	Interaction with Participants	FTC Coordinator		FTC Hearing
	At FTC hearings, judge spends a minimum of three minutes talking to each participant. Judge responds to the participant's behavior and provides a rationale for these responses. Judge reinforces the treatment adjustments and responses to behaviors.	Describe a typical exchange between a judge and a participant. [If not answered]: How long is a typical exchange? [If not clear]: What is discussed during typical exchange?		Judge spends at least 3 minutes talking to each participant about their engagement in required FTC services, child welfare case plan requirements, and services for the participant's children and family.
	Judge encourages the participant to discuss his/her progress, progress the children are making, activities to enhance parenting skills, parenting challenges, and unmet needs.	[If not addressed]: Describe the dynamic between the judge and the participant.		Judge explains to participants-in plain language- the reasoning behind incentives, sanctions, and treatment adjustments.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	Judge emphasizes participant strengths and the importance of the participant's continued engagement in treatment and services. Judge is engaging, supportive, and encouraging,			Judge provides consistent information to participants regarding treatment adjustments and safety interventions imposed in response to participant
	and works to build rapport with the participant.			behaviors. Judge demonstrates warmth and eye contact with participants. Judge uses participant's name. Judge engages in two-way conversation. Judge provides positive feedback to participants. Judge highlights participants' strengths/achievements. Judge asks participant to verbalize their own opinions on their progress, their children's progress, challenges, etc.
2E	<b>Professional Training</b> The FTC judge obtains training on mental health, substance use disorders, child welfare, and legal and constitutional issues related to FTCs.	FTC Coordinator Has the FTC judge had training on mental health? Substance use disorders? Child welfare? Legal and constitutional issues related to FTCs?	Document #6 (Judge's Legal Education/ Training Certificates): Indicates that FTC judge has	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	The FTC judge attends annual training conferences and workshops. The FTC judge attends training with other operational team members to assure cross- training.	Has the FTC judge attended a training conference or workshop on best practices or trends in FTCs in the last 12 months? Has the judge attended a training with other operational team members?	obtained training on mental health, substance use disorders, child welfare, and legal and constitutional issues related to FTCs.	
			Indicates that FTC judge attended annual training conferences and workshops.	
			Indicates that FTC judge attended training with other operational team members to assure cross- training.	
2F	Length of Judicial Assignment to FTC The FTC judge presides over the FTC for at least two consecutive years.	FTC Coordinator What month and year did the current judge begin his/her term presiding over the FTC? How long will the judge be on the bench?	Document #5 (Judge's Appointment Date): Indicates that FTC judge has presided over FTC for at least 2 consecutive years.	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		Standard 3: Equity and Inclusion		
3A <sup>7</sup>	Equitable FTC Program Admission Practices	FTC Coordinator	Document #10 (Minutes/Notes):	
	The FTC annually examines its eligibility criteria, screening processes, referral processes, entry	Have the screening, referral, entry, and assessment processes been reviewed by	Indicates that the FTC annually	
	processes, and assessment processes.	the team since the FTC's inception?	examines its eligibility criteria,	
	Review of criteria and processes aims to identify and correct any disproportionality in access.	[If yes]: How often did these reviews occur?	screening processes, referral processes, entry	
		[If yes]: What was the purpose of these reviews?	processes, and assessment processes.	
		[If answer is unclear]:: What data		
		was used during these reviews?	Indicates that any identified inequity is being corrected.	
3B <sup>8</sup>	Equitable FTC Retention Rates and Child Welfare Outcomes	FTC Coordinator	Document #10 (Minutes/Notes):	
	Outcomes	Has the FTC examined its program	Indicates that the	
	FTC acts strategically to achieve equivalent or	retention and child welfare outcomes	FTC is using	
	better outcomes for historically marginalized	across different groups? For example,	strategic methods	
	groups compared to the overall child welfare system population.	different races/ethnicities, languages, and family types?	for achieving equitable	
	FTC examines equity across the following	[If yes]: What did you find?	retention rates and child welfare	
	outcomes: participation, engagement, successful discharge, permanency, and well-being.		outcomes.	

<sup>&</sup>lt;sup>7</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		[If disparity found]: What was done to address this disparity?		
3C <sup>8</sup>	Equitable Treatment	FTC Coordinator	Document #10	
30			(Minutes/Notes):	
	Treatment for FTC participants is family centered,	How does the FTC match treatment with	Documents	
	gender-responsive, trauma-informed, and	the needs and preferences of a client and	discussion that	
	linguistically and culturally appropriate. <sup>8</sup>	their family?	treatment for FTC	
			participants is	
	Treatment for FTC participants matches the	Has the FTC examined its treatment	family-centered,	
	intensity, dosage, and quality consistent with the	experiences and outcomes across different	gender-	
	needs and preferences of the individual and	groups? For example, different	responsive,	
	family.	races/ethnicities, languages, and family types?	trauma-informed, and linguistically	
	FTC ensures equivalent outcomes across groups.	types:	and culturally	
		[If yes]: What did you find?	appropriate.	
		[If disparity found]: What	Documents	
		was done to address this	discussion that	
		disparity?	treatment for FTC	
			participants	
			matches the	
			intensity, dosage,	
			and quality	
			consistent with	

<sup>&</sup>lt;sup>8</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			the needs and preferences of the participant and family.	
3D <sup>9</sup>	Equitable Responses to Participant Behavior FTC administers equitable responses across groups. Responses to participant behavior are administered using principles of procedural fairness and are regularly monitored to ensure that they are equivalent in similar situations across groups	FTC CoordinatorAre responses to participant behavior the same across different groups? For example, different races/ethnicities, languages, and family types?[If no]: How are they different?What philosophy or principles guide responses to participant behavior?Has the FTC examined its responses to participant behavior across different groups? For example, different races/ethnicities, languages, and family types?[If yes]: What did you find? [If disparity found]: What was done to address this disparity?	Document #10 (Minutes/Notes): Documents discussion on equitable responses to participant behavior.	

<sup>&</sup>lt;sup>9</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
3E	Team Training	FTC Coordinator	Document #7 (FTC	
			Team Continuing	
	The FTC provides training on culturally relevant	Does the FTC provide training on culture	Education	
	services and supports to its operational team and	and culturally-relevant services and	Documents):	
	partners.	supports to its operational team and	Indicates that	
		partners?	team receives	
			training on	
		[If yes]: What does this training	culturally relevant	
		entail?	supports and	
			services.	
			OR <sup>10</sup>	
			Document #8	
			(Orientation	
			Training	
			Curriculum for	
			New Operational	
			Team Members):	
			Indicates that	
			team onboarding	
			training includes	
			information on	
			culturally relevant	
			supports and	
			services.	

<sup>&</sup>lt;sup>10</sup> See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item				
	Standard 4: Early Identification, Screening, and Assessment							
4A	Standard 4Target Population, Objective Eligibility andExclusion CriteriaFTC targets families that are high risk/high need, meaning they require intensive services, increased support and monitoring, and judicial oversight to comply with child welfare system 	<ul> <li>Early Identification, Screening, and Assessm</li> <li>FTC Coordinator</li> <li>Who does the FTC target for inclusion?</li> <li>What is the eligibility criteria for program participation? What is the exclusion criteria for program participation?</li> <li>Is FTC program eligibility/exclusion criteria communicated to referral sources?</li> <li>[If yes]: How is this information communicated?</li> <li>To what extent does the FTC consider subjective suitability when making eligibility/exclusion determinations?</li> </ul>	ent Document #1 (P&P Manual): Specifies that the FTC targets families that are high risk/high need, meaning they require intensive services, increased support and monitoring, judicial oversight to comply with child welfare system case plan,	FTC Staffing All eligibility/exclusion determinations are based on objective assessment and criteria.				
	all referral sources. FTCs do not make eligibility determinations based on subjective criteria.		complete SUD treatment, and safely reunify with children. Includes objective eligibility and exclusion criteria. Specifies that FTCs do not make eligibility determinations based on subjective criteria.					

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
4B <sup>11</sup>	Standardized and Systematic Referral,	FTC Coordinator	Document #1	
	Screening, and Assessment Process		(P&P Manual):	
	<u>,</u>	Describe the process by which potential	Specifies	
	The FTC uses processes for referring, screening	participants are identified and referred to	standardized	
	and assessing.	the FTC.	processes for	
	5		referring,	
	These processes for referring, screening and	[If response is unclear]: What	screening, and	
	assessing FTC participants are agreed upon, standardized, and systematic.	happens when the FTC receives a referral?	assessing.	
			States that the	
	These standardized referral, screening, and	[If response is unclear]: Do all	standardized	
	assessment processes apply to caregivers,	referral sources follow the same	referral,	
	children, and families.	process for making referrals?	screening, and	
			assessment	
	Referral sources are trained in when to	[If response is unclear]: Do all	processes apply to	
	appropriately refer their participants.	referrals follow the same screening	caregivers,	
		and assessment process?	children, and	
			families.	
		[If response is unclear]: Do all		
		partners agree upon and use the		
		same referral, screening, and		
		assessment processes?		

<sup>&</sup>lt;sup>11</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

Provision Number	Provision & Key Concepts	Interview Q [If response is unclear]: What do these referral, screening, and assessment processes apply to?	Document Source	Observation Item
4C	Use of Valid and Reliable Screening and Assessment for Caregivers and Families	FTC Coordinator How are decisions made about program	Document #1 (P&P Manual): Specifies that valid	
	Valid and reliable instruments <sup>12</sup> used to screen and assess caregivers/families referred to FTC for program eligibility, case planning for children, caregivers, and family members, appropriate treatment level-of-care, complementary services.	eligibility? [If response is unclear]: Is an assessment instrument used? If yes, what assessment instrument?	and reliable instruments are used to screen and assess caregivers/familie	
		How are case or service plans developed? [If response is unclear]: Are assessment instruments used? If yes, what assessment instruments?	s referred to FTC for program eligibility, case planning for children, caregivers, and	
		[If not answered with service plan question]: How are decisions made about substance use treatment level of care? What assessment instruments are used?	family members, appropriate treatment level- of-care, and complementary services.	
		[If not answered with service plan question]: How are decisions made about complementary services? What assessment instruments are used?	OR	

<sup>&</sup>lt;sup>12</sup> For information on determining whether a screening/assessment instrument is validated, see Appendix G of the Site Visit Guide.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	Provision & Key Concepts	Interview Q         Treatment         What assessment instruments are used to make SUD treatment decisions with FTC clients?	[If FTC does theirown screening/assessing]:Document #14,Document #15,Document #16,Document #17(AssessmentInstruments fromFTC): Includesvalid and reliableinstruments usedto screen andassesscaregivers/families referred to FTCfor programeligibility, caseplanning forchildren,caregivers, andfamily members,appropriatetreatment level-of-care, and	Observation Item
			complementary services. OR [If treatment does the assessments]:	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			Document #24,	
			Document #25,	
			Document #26,	
			Document #27	
			(Assessment	
			Instruments from	
			Treatment):	
			Includes valid and	
			reliable	
			instruments used	
			to screen and	
			assess	
			caregivers/familie	
			s referred to FTC	
			for program	
			eligibility, case	
			planning for	
			children,	
			caregivers, and	
			family members,	
			appropriate	
			treatment level-	
			of-care, and	
			complementary	
			services.	
4D	Use of Valid, Reliable, and Developmentally	FTC Coordinator	[If child welfare	
	Appropriate Screening and Assessment for		or FTC does	
	Children <sup>13</sup>		screening/	
			assessing]:	

<sup>&</sup>lt;sup>13</sup> For information on determining whether a screening/assessment instrument is validated, see Appendix G of the Site Visit Guide.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	Assessed with Interview and Document	Are children of FTC participants screened or	Document #16	
	Review <sup>14</sup> :	assessed at the beginning of their	(Assessment	
	Children of FTC participants are assessed within a	involvement in the FTC?	Instruments from	
	standardized time frame. Children of FTC		FTC): Includes	
	participants are assessed using validated and	[If yes]: Describe this process.	valid and reliable	
	developmentally appropriate instruments. Child		instruments used	
	assessments reoccur at developmentally	[If responses are unclear]: :	to screen and	
	appropriate intervals.	What are they assessed	assess case	
		for? What instruments are	planning for	
	Assessed with Interview:	used?	children.	
	Child assessments reoccur at developmentally			
	appropriate intervals.	During their case, are children re-assessed at any point?	OR	
			[If treatment does	
		[If yes]: Describe this process.	the assessments]:	
			Document #16	
		[If responses are unclear]:	(Assessment	
		What are they re-assessed	Instruments from	
		for? What instruments are	Treatment):	
		used?	Includes valid and	
			reliable	
			instruments used	
			to screen and	
			assess case	
			planning for	
			children.	
4E	Identification and Resolution of Barriers to	FTC Coordinator	Document #9	FTC Staffing and FTC Hearing
	Recovery and Reunification		(Child welfare	

 $<sup>^{\</sup>rm 14}$  This is a "split provision." See section 8.2 of the Site Visit Guide.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
Number	The FTC systematically monitors community- based barriers to obtaining services or progressing towards goals for participants, children and families.	Describe the process(es) used to identify and address community-based barriers (e.g., transportation, barriers to parenting time) to participant progress.	court reports/FTC progress reports/Plan of Safe Care): Documents that the FTC team systematically monitors community-based barriers to obtaining services for participants, children, and families. <b>OR</b> Document #10 (Minutes/Notes): Documents discussion monitoring and resolution to community-based barriers for participants and their families.	Team uses the same process of identifying problems for all participants (e.g., relies on case reports for all clients). Team engages in problem- solving to resolve any identified barriers to progress.
	Standard 5: Timely, Hi	gh-Quality, and Appropriate Substance Use Dis		

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
5A <sup>15</sup>	Timely Access to Appropriate Treatment	FTC Coordinator		
	Protocols and practices ensure timely access to an appropriate SUD treatment.	How does the FTC program ensure that participants access treatment as quickly as possible?		
	Time between case opening and treatment entry is tracked as a routine process measure.	[If response is unclear]: Does the FTC track time between case opening and substance use treatment entry to strategize improvements in timely treatment access?		
		Treatment How does your agency ensure that FTC participants access treatment as quickly as possible?		
5B*	Treatment Matches Assessed Need	FTC Coordinator		
	Level of care assessment is conducted by a qualified treatment provider. Treatment is adjusted based on ongoing formal reassessments to meet participants' clinical needs.	Describe the process of substance use disorder treatment level-of-care referral or placement. [If response is unclear]: How often are FTC-referred participants re- assessed for substance use disorder treatment need during their program participation?		

<sup>&</sup>lt;sup>15</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		[If reassessments occur]:What is the purpose of these re- assessments?		
		Treatment		
		Describe the process of SUD treatment level-of-care referral or placement.		
		How often are FTC-referred participants re- assessed for SUD treatment need during their program participation?		
		[If > never]: What is the purpose of these re-assessments?		
5C <sup>16</sup>	Comprehensive Continuum of Care	FTC Coordinator		
	Participants have access to a continuum of substance use disorder treatment that includes outpatient treatment, intensive outpatient	What levels of substance use treatment do FTC-referred participants have access to?		
	treatment, partial hospitalization, residential or inpatient treatment, and medical detox.	How long are participants in substance use disorder treatment?		
	Medication management is available at each level of care.	[If no mention of aftercare already]: Are aftercare services available to FTC-referred participants? If so, can you describe the		
	Each participant's substance use disorder	aftercare services?		
	treatment dosage and duration are sufficient to achieve and sustain recovery.	Treatment		

<sup>&</sup>lt;sup>16</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

Provision & Key Concepts	Interview Q	Document Source	Observation Item
After acute substance use disorder treatment is no longer required, participants engage in continuing care to maintain stable health and recovery.	<ul> <li>What levels of SUD treatment do FTC-referred participants have access to?</li> <li>How long are participants in SUD treatment?</li> <li>[If no mention of aftercare already]: Are aftercare services available to FTC-referred participants? If so, can you describe the aftercare services?</li> <li>[If specific agency does not offer X level of care]: Are FTC clients referred elsewhere for treatment that meets X level of care?</li> </ul>		
Integrated Treatment of Co-Occurring Substance Use and Mental Health Disorders Integrated treatment plans address the needs of participants who have co-occurring substance use and mental health disorders in a coordinated manner.	FTC Coordinator What services are provided to FTC-referred participants who have co-occurring substance use and mental health disorders? Treatment What services are provided to FTC-referred participants who have co-occurring substance use and mental health disorders? [If specific agency does not offer services		
	After acute substance use disorder treatment is no longer required, participants engage in continuing care to maintain stable health and recovery. Integrated Treatment of Co-Occurring Substance Use and Mental Health Disorders Integrated treatment plans address the needs of participants who have co-occurring substance use and mental health disorders in a coordinated	After acute substance use disorder treatment is no longer required, participants engage in continuing care to maintain stable health and recovery.What levels of SUD treatment do FTC- referred participants have access to?How long are participants in SUD treatment?How long are participants in SUD treatment?[If no mention of aftercare already]: Are aftercare services available to FTC-referred participants? If so, can you describe the aftercare services?Integrated Treatment of Co-Occurring Substance Use and Mental Health DisordersFTC CoordinatorIntegrated treatment plans address the needs of participants who have co-occurring substance use and mental health disorders in a coordinated manner.FTC CoordinatorWhat services are provided to FTC-referred participants who have co-occurring substance use and mental health disorders?Treatment What services are provided to FTC-referred participants who have co-occurring substance use and mental health disorders?What services are provided to FTC-referred participants who have co-occurring substance use and mental health disorders?	After acute substance use disorder treatment is       What levels of SUD treatment do FTC-referred participants have access to?         No longer required, participants engage in       What levels of SUD treatment do FTC-referred participants in SUD         recovery.       How long are participants in SUD         If no mention of aftercare already]: Are       aftercare services available to FTC-referred         participants? If so, can you describe the       aftercare services?         [If specific agency does not offer X level of       care]: Are FTC Clients referred elsewhere         for treatment of Co-Occurring Substance       FTC Coordinator         Use and Mental Health Disorders       What services are provided to FTC-referred         Integrated treatment plans address the needs of       participants who have co-occurring         substance use and mental health disorders in a coordinated       manner.         What services are provided to FTC-referred       participants who have co-occurring         substance use and mental health       disorders?         Treatment       What services are provided to FTC-referred         participants who have co-occurring       substance use and mental health         disorders?       Itelement         What services are provided to FTC-referred       participants who have co-occurring         substance use and mental health       disorders?         If specif

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		health disorders]: Are FTC clients referred elsewhere for treatment that addresses co- occurring substance use and mental health disorders?		
5E	Family-Centered Treatment <sup>17</sup>	FTC Coordinator		
	Substance use disorder treatment is comprehensive and family-centered because it meets caregivers' needs, meets children's and family members' needs, addresses effects of participant substance use disorder on family, and permits children to stay in residential with caregivers.	Describe how the needs of family members are addressed when crafting a treatment plan for an FTC-referred participant. [If not answered]: Are participants' children permitted to reside with them in residential treatment?		
		<b>Treatment</b> Does the treatment center you represent provide family-centered treatment to clients?		
		[If yes]: Describe the family- centered nature of SUD treatment offered to FTC-referred caregivers.		
		[If no]: Are FTC clients referred elsewhere for family-centered treatment?		

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<sup>&</sup>lt;sup>17</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
5F	Gender-Responsive Treatment <sup>18</sup>	Treatment	Document #28 (Treatment Group	
	Treatment providers are trained in gender- responsive treatment.	How often do your providers who work with FTC-referred participants receive training related to gender-responsive or	Schedule): Indicates availability of	
	Treatment meets the needs of all genders: • Gender-specific groups • Child care	gender-specific services (e.g., women- centered treatment)?	gender-responsive groups.	
	<ul> <li>Medical and nutritional interventions</li> </ul>	Does the treatment center you represent provide gender-responsive or gender- specific treatment to participants (e.g., women-centered treatment)?		
		[If yes]: Describe the gender- responsive nature of SUD treatment offered to FTC-referred caregivers.		
		[If no]: Are clients referred elsewhere for gender-responsive treatment?		
5G	Treatment for Pregnant Women	FTC Coordinator		
	FTC protocol and practices identify the unique needs of pregnant participants.	What services and supports are available to pregnant FTC participants?		
	FTC provides treatment and other services to meet these women's needs, including substance use treatment interventions that include	[If not already answered]: Does the FTC provide or coordinate medication assisted treatment for		

<sup>&</sup>lt;sup>18</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

Provision & Key Concepts	Interview Q	Document Source	Observation Item
medication assisted treatment when clinically integrated prenatal, perinatal, and postnatal medical care.	pregnant women who have an opioid use disorder?		
	[If not already answered]: Does the FTC coordinate with pre- and post- natal medical care?		
	Treatment		
	What services and supports are available to pregnant women who are FTC participants?		
	[If not already answered]: Does your agency coordinate or provide MAT treatment for pregnant women who have an opioid use disorder?		
	[If no]: Are clients referred elsewhere for MAT?		
Culturally Responsive Treatment <sup>19</sup>	FTC Coordinator		
The services and practices of the FTC substance use treatment providers are respectful of and responsive to the cultural and linguistic needs of FTC participants.	What does the FTC do in terms of treatment referrals for participants with different cultural and/or linguistic needs?		
	medication assisted treatment when clinically integrated prenatal, perinatal, and postnatal medical care. Culturally Responsive Treatment <sup>19</sup> The services and practices of the FTC substance use treatment providers are respectful of and responsive to the cultural and linguistic needs of	medication assisted treatment when clinically integrated prenatal, perinatal, and postnatal medical care.       pregnant women who have an opioid use disorder?         [If not already answered]: Does the FTC coordinate with pre- and post- natal medical care?       [If not already answered]: Does the FTC coordinate with pre- and post- natal medical care?         Treatment       What services and supports are available to pregnant women who are FTC participants?         [If not already answered]: Does your agency coordinate or provide MAT treatment for pregnant women who have an opioid use disorder?         [If no]: Are clients referred elsewhere for MAT?         The services and practices of the FTC substance use treatment providers are respectful of and responsive to the cultural and linguistic needs of	medication assisted treatment when clinically integrated prenatal, perinatal, and postnatal medical care.       pregnant women who have an opioid use disorder?         [If not already answered]: Does the FTC coordinate with pre- and post- natal medical care?       If not already answered]: Does the FTC coordinate with pre- and post- natal medical care?         Treatment       What services and supports are available to pregnant women who are FTC participants?         [If not already answered]: Does your agency coordinate or provide MAT treatment for pregnant women who have an opioid use disorder?         [If no]: Are clients referred elsewhere for MAT?         Culturally Responsive Treatment <sup>19</sup> The services and practices of the FTC substance use treatment providers are respectful of and responsive to the cultural and linguistic needs of FTC participants.

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<sup>&</sup>lt;sup>19</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		How does your agency respond to the cultural and/or linguistic needs of FTC participants?		
		[If agency does not respond]: Are clients referred elsewhere for culturally and linguistically responsive treatment?		
51	Evidence-Based Manualized Treatment <sup>20</sup>	FTC Coordinator	Document #20	
	Cubator of use treatment accurates that reatment	What avidence based menualized	(Treatment Model	
	Substance use treatment agencies that partner with the FTC provide evidence-based, manualized	What evidence-based, manualized treatments are used with FTC-referred	Fidelity Review): Indicates that	
	treatments.	caregivers, children, and families?	fidelity to the	
		caregivers, children, and families:	evidence-based,	
	For these agencies, fidelity to the evidence-	How frequently is model fidelity assessed	manualized	
	based, manualized treatments model is assessed	for these evidence-based treatments?	treatments model	
	on a regular basis.		is assessed on a	
		What training and/or certification do	regular basis.	
	To ensure continuing fidelity to the model,	clinicians delivering evidence-based	0	
	substance use treatment providers are trained,	interventions with FTC-referred	AND <sup>21</sup>	
	certified (when applicable), and clinically	participants undergo?		
	supervised.		Document #19	
		Treatment	(Initial Evidence-	
			Based Practice	
		What evidence-based, manualized	Training &	
		treatments are used with FTC-referred	Certification):	
		caregivers, children, and families?		

 <sup>&</sup>lt;sup>20</sup> For information on determining whether a treatment is evidence-based, see Appendix G of the Site Visit Guide.
 <sup>21</sup> See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		What ongoing fidelity training and/or clinical supervision is provided for clinicians delivering evidence-based interventions with FTC-referred participants?	Indicates that treatment provider is using evidence-based, manualized treatments.	
			Indicates that treatment providers are trained, certified (when applicable), and clinically supervised.	
5J	Medication Assisted Treatment	FTC Coordinator	Document #1 (P&P Manual):	
	FTC does not exclude individuals using or considering medication assisted treatment.	Are individuals using medication assisted treatment excluded from the FTC program?	Specifies that FTC does not exclude individuals using	
	FTC participants receive medication assisted treatment for substance use disorders based on an objective determination by a qualified medical provider that medication assisted treatment is	How is it determined that a participant is eligible/appropriate to receive medication assisted treatment?	or considering MAT from FTC program.	
	medically indicated.	How are cases handled in which medication assisted treatment is recommended to an	Specifies that FTC participants	
	FTC does not mandate medication assisted treatment.	FTC-referred participant but the participant does not want to use it?	receive MAT for substance use disorders based	
		Treatment	on an objective determination by a qualified	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		To your knowledge, are individuals using MAT excluded from the FTC program?	medical provider that MAT is medically	
		How is it determined that a participant is eligible/appropriate to receive MAT?	indicated.	
		How are cases handled in which MAT is recommended to an FTC-referred participant but the participant does not	Specifies that FTC does not mandate MAT.	
5K	Alcohol and Other Drug Testing Protocols	want to use it? FTC Coordinator	Document #1	
	Standardized drug testing protocol specifies the frequency (a minimum of two times per week), scheduling, randomization procedures, observation, duration, and breadth of testing. The purpose of drug testing protocol is to monitor participants use of illicit and licit substances, outline processes for confirmation of test results, outline processes for notification of test results, outline processes for dissemination of test results.	How does the FTC monitor participants' use of substances throughout their FTC participation? [If not already answered]: Describe drug testing procedures used with FTC participants. [If not already answered]: Is drug testing random? Is drug testing observed? Is drug tested	(P&P Manual): Specifies drug testing protocol including frequency (a minimum of two times per week), scheduling, randomization procedures, observation, duration, and	
		completed at least 2x weekly? [If not already answered]: Do participants have an equal chance of getting tested every day, even on weekends and holidays?	breadth of testing. States that purpose of drug testing protocol is to monitor participants use of illicit and licit	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		What are the purposes of drug testing	substances,	
		protocol?	outline processes	
			for confirmation	
		Treatment	of test results,	
			outline processes	
		Does your agency conduct drug testing with	for notification of	
		FTC-referred participants?	test results, and	
			outline processes	
		[If yes]: What are the testing	for dissemination	
		protocols used with these	of test results.	
		participants?		
5L	Treatment Provider Qualifications	FTC Coordinator	Document #23	
			(Certification):	
	The FTC's treatment providers are licensed,	Are all treatment providers that the FTC	Indicates that	
	certified, or accredited.	refers participants to licensed or otherwise	treatment	
		certified?	providers are	
	Treatment providers receive continuing		licensed, certified,	
	education and clinical supervision to ensure	Treatment	or accredited.	
	adoption of best practices in treatment of SUD,	What are the entities that license, certify,		
	mental health, and related disorders.	or accredit your agency?	AND <sup>22</sup>	
		[If entities specified]: How	Document #18	
		frequently is	(FTC Providers	
		licensure/certification/or	Continuing	
		accreditation renewed?	Education/Trainin	
			g Certificates):	
		What are the continuing education training	Provides evidence	
		requirements for providers at your agency?	of continuing	
			education and	

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 $<sup>^{\</sup>rm 22}$  See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			clinical supervision.	
	Standard 6: Comprehe	nsive Case Management, Services, and Suppo	rts for Families	
6A	Intensive Case Management and Coordinated	FTC Coordinator	Document #9	FTC Staffing
	<b>Case Planning</b> Participants are provided intensive supportive case management, including a coordinated case plan (or a set of case plans) based on reliable and valid needs assessments that is systematically monitored to ensure that all family members receive services to meet their needs.	Describe the FTC's approach to case management with program participants and their families. [If not already answered]: Does the FTC case plan (or set of case plans) include the child welfare dispositional order and treatment recommendations?	(Child welfare court reports/FTC progress reports/Plan of Safe Care): Documents that case management recommendations are based on the results of a valid/reliable needs assessment.	Team discusses connecting participants with services to address issues identified in assessments, how involved participants are with services and resources, and how participants are progressing with services and resources.
6B	Family Involvement in Case Planning FTC operational team's approach to case planning is family-centered, culturally responsive and strengths based.	FTC Coordinator For a typical case, to what extent are children, caregivers, and family members involved in case planning?		FTC Staffing Case planning discussions demonstrate focus on strengths of other family members.
	While case planning, FTC team actively involves children, caregivers, and family members (as appropriate) in identifying needs and strengths,	[If not already answered]: What does this involvement entail?		FTC Hearing Feedback regarding case planning is solicited from

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	making decisions about treatment, setting goals and achieving desired outcomes.			participant and other family members.
6C	Recovery Supports	FTC Coordinator		FTC Hearing
	The FTC links participants with professionally trained or certified recovery specialists (also known as recovery coaches), or with peer support specialists (also known as peer mentors). FTC team actively works with participants to build a community-based recovery support network. FTC does not require participants to attend any specific peer support group, but rather provides a range of options.	Does the program use recovery specialists/coaches or peer support specialists/mentors? [If yes]: How do participants gain access to these supports? To which community-based recovery programs does the FTC refer participants? Are participants required to attend? <b>Treatment</b> Does your agency connect FTC-referred participants with recovery specialists/coaches or peer support specialists/mentors? How do FTC-referred participants gain access to these supports?		Team encourages participant to engage with recovery coach/peer specialist and community-based recovery. Team problem-solves with client on the topic of peer and community/natural recovery supports when warranted.
6D	High-Quality Parenting Time (Visitation)	FTC Coordinator	Document #9 (Child welfare	
	FTC participants and their children receive high- quality, well-resourced, and face-to-face.	Describe visitations, or parenting time, in the FTC.	court reports/FTC progress reports/Plan of Safe Care):	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	Minimum caregiver visitations by child's age are as follows: < 1 (3-5x week; 60 min.) 1-2 (2-4x week; 60 min.) 2-5 (2-4x week; 60 min.) 6-12 (1-3x week; 60 min.) 13+ (1-2x week; 60 min.)	How frequently does visitation typically occur for children under the age of 1? For children aged 1-5? For children aged 6-12?	Discusses parenting/family time (visitation). Discusses strategies to ensure high-	
	Minimum sibling visitations: 1x per week; 60 min. When needed, trained individuals facilitate supervised visitation as caregivers work to achieve unsupervised time.	For children aged 13 or older? Who facilitates supervised visitations? [If someone facilitates supervised visits]: What, if any, training do individuals receive to facilitate supervised visitation?	quality parenting/family time (visitation) is occurring.	
6E	Parenting and Family-Strengthening Programs All evidenced-based interventions <sup>23</sup> include a caregiver-child interaction component (in which caregivers and children attend sessions together) and are culturally appropriate, designed to meet the needs of families affected by parental SUDs and co-occurring additional risk factors. FTC team matches interventions to the needs of each child, parent, and family.	FTC Coordinator What parenting or family-strengthening programs are offered to FTC/FTC-referred participants? [If one or more programs are identified]: What are the components of the parenting and family-strengthening interventions?		

<sup>&</sup>lt;sup>23</sup> For information on determining whether a treatment is evidence-based, see Appendix G of the Site Visit Guide.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		[If not already answered]: Do caregivers and children interact as a part of the intervention/program?		
		How does the team determine who is referred to the family interventions/programs?		
		Treatment		
		Does your agency provide parenting and family-strengthening interventions to FTC-involved participants?		
		[If yes]: Describe these services.		
		How do FTC-referred participants gain access to these supports?		
6F	Reunification and Related Supports	FTC Coordinator	Document #9 (Child welfare	FTC Hearing
	FTC participants and their families receive reunification and related supports.	What reunification supports are available to FTC participants and their families? For how long are reunification supports available to participants after reuniting?	court reports/FTC progress reports/Plan of Safe Care): Documents that participants and family are receiving reunification and related supports.	Participants who are nearing or have completed reunification are offered specific reunification supports.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
6G	Trauma-Specific Services for Children and Caregivers	FTC Coordinator	Document #21 (Trauma	
	Trauma-specific interventions are available to FTC participants and FTC children.	What trauma services are available to FTC participants and their child(ren)? [If not already answered]: Are these services evidence-based or	Intervention Fidelity Review): Provides evidence that FTC	
	These trauma-specific interventions are evidence-based or evidence-informed.	evidence-informed? Who provides these services?	participants and children have access to	
	Trained treatment professionals provide trauma- specific therapies with fidelity.	What trauma screens/assessments are used with participants and their child(ren)?	evidence-based trauma intervention	
	FTC participants are screened/assessed for trauma.	Treatment	delivered with fidelity	
	FTC children are screened/assessed for trauma.	What trauma services are available to FTC participants and their child(ren)?		
	FTC participants and their children receive evidence-based or evidence-informed, trauma- specific, clinical interventions to treat their trauma-related symptoms and disorders.	What trauma screens/assessments are used with participants and their child(ren)?		
6H	Services to Meet Children's Individual Needs	FTC Coordinator	Document #9 (Child welfare	FTC Hearing
	Children's needs are identified by a comprehensive assessment.	Describe the process of identifying and referring children and adolescents to services.	court reports/FTC progress reports/Plan of	Participants' children are referred for services.
	Operational team matches developmentally appropriate services to the child's identified needs.	[If not answered]: How do children's services change over time?	Safe Care): review for components related to meeting children's needs	Children's behaviors and progress in services are discussed.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	Children of participants are connected to a continuum of high-quality services that include prevention and intervention/treatment. Children's services are available to address needs	[If not answered]: What types of services are children of FTC participants referred for?	as described in provision.	Children's service plans change in response to newly identified needs.
	along the following dimensions: physical, cognitive, social, emotional, behavioral, developmental, and therapeutic.	Does the team monitor children's/adolescent providers to ensure services are delivered with fidelity?		
		[If yes]: Describe this process.		
61	Complementary Services to Support Caregivers and Family Members	FTC Coordinator	Document #9 (Child welfare	FTC Hearing
	FTC clients have access to a comprehensive range of complementary support services such as child	What support services are available to participants and their family members?	court reports/FTC progress reports/Plan of	Participants and their family members are offered support services to address identified
	care, employment, educational, domestic violence, legal, transportation, food, clothing, housing, medical and dental care.	How are decisions to refer participants and their family members to case management services made?	Safe Care): Documents that case management	unmet needs (e.g., child care, employment, educational, domestic violence, legal,
	Complementary services are chosen to meet the individual needs of participants and their families.	What is the purpose of providing these support services?	recommendations are based on the results of a valid/reliable	transportation, food, clothing, housing, medical and dental care).
	Complementary service needs are identified by formal assessment.		needs assessment.	
	Complementary service needs promote engagement/retention in substance use treatment, sustained recovery, and permanency.			

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
6J	Early Intervention Services for Infants and Children Affected by Prenatal Substance Exposure Infants and children under the age of 3 who are experiencing effects of prenatal substance exposure are connected to early intervention services that address the infant's developmental, physical health, social/emotional, and safety needs.	FTC Coordinator What is the process used when an FTC case has an infant affected by prenatal substance exposure? [If not already answered]: What types of services are available for infants of FTC participants who are affected by prenatal substance exposure?	Document #9 (Child welfare court reports/FTC progress reports/Plans of Safe Care): Indicates protocol for children affected by prenatal substance exposure that includes connection to early intervention.	
6К	Substance Use Prevention and Intervention for Children and Adolescents Children of participants have access to services for substance use disorder prevention and early intervention for substance use disorder. These services are culturally appropriate, developmentally appropriate, age appropriate, designed to enhance protective factors, designed to reduce risk factors and are evidence-based.	FTC Coordinator What substance use disorder prevention and early intervention services are available to the children of FTC participants? [If yes]: Are these services culturally appropriate? Developmentally appropriate? Age appropriate? Designed to enhance protective factors and reduce risk factors? Are these services evidence-based and monitored for fidelity?	Document #22 (SUD Prevention EBP Fidelity Review Documentation): Provides evidence that children of participants have access to services for substance use disorder prevention and early intervention for substance use disorder.	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			Provides evidence that these services are culturally appropriate, developmentally appropriate, age appropriate, age appropriate, designed to enhance protective factors, designed to reduce risk factors, and evidence-based.	
	Stan	dard 7: Therapeutic Responses to Behavior		
7A	Child and Family Focus	FTC Coordinator		FTC Staffing
	Responses to behavior are made in the child's best interest, do not negatively affect participants, do not negatively affect children, do not negatively affect families, do not interfere with court hearings, and do not interfere with court requirements. Parenting time is not used as an incentive or sanction.	How are decisions about parenting and family time communicated so that they are not perceived as an incentive or sanction? [If not already answered]: Is parenting time used as an incentive or sanction?		Decisions about parenting/family time are made with input from child welfare specialists and based on child's best interests. FTC Hearing Team models strengths
				orientation & consistency to caregivers.

Provision Number	Provision & Key Concepts	Interview Q D	Document Source	Observation Item
				Team applauds/incentivizes strengths-based, consistent parenting <del>.</del>
				Parenting time is not used as a reward or punishment.
				Team provides incentives that support positive family time and are child-focused (things for, or to do with, children).
7B	Treatment Adjustments	FTC Coordinator		FTC Staffing & FTC Hearing
	Team considers whether non-compliance is due to a therapeutic problem before issuing a sanction.	What are some key considerations when a participant is noncompliant? How are adjustments in treatment,		Treatment adjustments are implemented by treatment professionals, in consultation with members of the FTC team.
	If such a non-compliance issue exists, adjustments in the type of treatment, level of	including type, level of care, and dosage determined for FTC-referred participants?		Team members discuss whether
	care, and dosage are based on the clinical needs of the participant, including substance use and mental, physical, social or emotional health.	[If not already answered]: What factors and considerations influence these decisions?		non-compliance could be a result of needing a treatment adjustment.
	Adjustments made in consultation with clinical treatment professionals.	[If not answered]: Are treatment adjustments used as an incentive		Treatment adjustments are not a reward or punishment.
	Treatment adjustments are not used as incentive or sanction.	or sanction?		Judge discusses treatment adjustments in a health- and
		Treatment		wellbeing-centered way.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		How are adjustments in treatment, including type, level of care, and dosage determined for FTC-referred participants? [If not answered]: What factors and considerations influence these decisions?		
7C	Complementary Service Modifications	FTC Coordinator		FTC Staffing
	Team considers whether noncompliance is due to an unavoidable or structural barrier before issuing a sanction. If non-compliance is determined to be due to an unavoidable or structural barrier, the FTC team responds by providing additional complementary supports and services.	How does the FTC respond when participants face compliance barriers such as a lack of transportation, lack of safe housing, or cognitive impairment to compliance?		Team discusses whether non- compliance could be related to the need for a support service modification (e.g., transportation, change in housing). When service needs arise, the team responds by identifying additional supports and services. <b>FTC Hearing</b> Participants are not punished when structural or individual barriers result in non- compliance.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
7D	FTC Phases	FTC Coordinator	Document #1	
			(P&P Manual):	
	Advancement is based on achievement of	Please describe the phases or milestones	Outlines realistic,	
	realistic, clearly defined behavioral objectives or	for this FTC program.	clearly defined	
	milestones associated with sustained recovery,		behavioral	
	stable reunification, and safety, well-being, and	[If not already answered]: How do	objectives for	
	permanency for children.	participants advance through the	phase/milestone	
		phases or milestones?	advancement.	
	The policy and procedure manual and the			
	participant handbook provide the criteria	Are there any circumstances in which a	Provides the	
	necessary for advancement through the phases	participant would phase up or down in a	criteria necessary	
	and successful discharge.	manner not described in the participant	for successful	
		handbook?	discharge.	
	FTC does not demote participants.	[if]. Disease describe	Current fires the states	
		[If yes]: Please describe.	Specifies that the FTC does not	
		Does the FTC demote participants?	demote	
		Does the FTC demote participants!	participants.	
			participarits.	
			AND <sup>24</sup>	
			Document #3	
			(Participant	
			Handbook):	
			Outlines realistic,	
			clearly defined	
			behavioral	
			objectives for	
			phase/milestone	
			advancement.	

 $<sup>^{\</sup>rm 24}$  See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			Provides the criteria necessary for successful discharge.	
			Specifies that the FTC does not demote participants.	
7E	Incentives and Sanctions to Promote Engagement	FTC Coordinator		FTC Staffing
	The FTC develops a range of responses (incentives and sanctions) of varying magnitudes	Please describe the incentives and sanctions used in this FTC.		Team discusses incentives and sanctions.
	that it employs throughout each participant's time in the FTC.	Explain the decision-making process around determining sanctions and incentives.		FTC Hearing
	FTC uses more incentives than sanctions.	[If not already answered]: Does the FTC use more incentives than sanctions?		Judge delivers a variety of incentives and sanctions. Judge uses incentives more often than sanctions.
7F	Equitable Responses	FTC Coordinator		FTC Hearing
	All relevant factors for each participant are considered when recommending sanctions.	What factors influence recommended sanctions? How is this information communicated to the judge?		Responses to participants are of an equivalent magnitude for similar infractions.
	Consequences to any given participant are equivalent to those received by other participants who engage in comparable conduct	Does the FTC keep records of the incentives and sanctions imposed for each participant?		Responses to participants do not differ across race/ethnicity, and gender.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	<ul> <li>in similar circumstances and with similar expectations.</li> <li>Team members articulate their reasoning when recommending consequences for a participant before a judge.</li> <li>Consequences do not differ by gender, race, ethnicity, nationality, socioeconomic status, or sexual orientation.</li> </ul>	[If yes]: Is this data monitored to ensure that responses to behaviors are consistent and fair? Please describe.		FTC Hearing and FTC Staffing Team cites individual circumstances, child well-being, and the therapeutic needs of each participant and family member when assigning consequences and when making a recommendation to the FTC judge regarding an incentive or sanction.
7G	Certainty The operational team reliably detects and responds consistently to all participant behaviors listed in the FTC policies and procedures manual.	FTC Coordinator Describe the processes used by the FTC to determine whether a participant is compliant.	Document 1 (P&P Manual): Includes a list of behaviors that receive responses & list of corresponding responses.	
7H	Advance Notice The FTC notifies participants in advance of the behaviors required for successful participation.	FTC Coordinator Are there instances in which responses to participant behavior deviate from that described in the Participant Handbook? [If yes]: Please describe.	Document #3 (Participant Handbook): Includes list of behaviors required for successful participation.	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
71	Timely Response Delivery	FTC Coordinator		FTC Hearing
	The FTC team responds to compliant or noncompliant behavior as soon as possible in adherence to FTC policies and procedures to minimize the time from event to response.	How long after a participant's behavior occurs is the behavior therapeutically responded to (e.g., incentive or sanction)? How does the FTC communicate about		Participant behaviors are addressed at the first opportunity.
	The FTC adheres to legal and ethical communication protocols.	participant behavior?		
7J	Opportunity for Participants to be Heard	FTC Coordinator		FTC Hearing
	The FTC gives all participants an opportunity to express their perspectives on their behavior, disagreements about facts, and other relevant issues, and/or ask their attorney or defense representative to do so.	Describe if and how participants are given opportunities to share their side of the story when involved in a controversy or given a sanction.		When there is evidence of non- compliance, participants have an opportunity to confer with an attorney and share their explanation of the behavior with the judge.
7К	Professional Demeanor	FTC Coordinator		FTC Staffing & FTC Hearing
	Operational team's interactions are respectful and professional with the participant, participant's children, family, and other members of the participant's support system.	Give an example in which a participant was either angry or disengaged. How did the team respond? [If not already answered]: How		Team uses person-centered, respectful language when discussing participant needs and progress.
		does the team respond to the participant's children?		FTC Hearing
		[If not already answered]: How does the team respond to the participant's family and other		Team uses participants' and natural supports' names, eye contact with participants, respectful and professional

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		members of the participant's support system?		tone, and formal and professional language.
7L	Child Safety Interventions	FTC Coordinator		FTC Staffing
	Appropriate child safety interventions, placement, and parenting time changes are made based on safety, well-being, and permanency indicators. Child welfare workers are responsible for ensuring child safety and may not delegate that responsibility.	What factors influence child safety interventions, including placement and parenting time changes? Who makes decisions about changes in visitations, custody, and child placement?		Decisions about parenting/family time are made with input from child welfare specialists and based on child's best interests. Changes in placement are based on the best interest of the child(ren) and safety, well- being, and permanency indicators.
7M	Use of Addictive or Intoxicating Substances Medical experts determine whether a prescription for an addictive or intoxicating medication is medically indicated and whether safe alternatives are available. Use of nonmedically-indicated intoxicating or addictive substances (e.g., alcohol, cannabis, prescription medications) is addressed, regardless of the substance's licit/illicit status.		Document #2 (FTC Prescription Policy): States that medical experts determine whether a prescription for an addictive or intoxicating medication is medically indicated and whether safe alternatives are available.	<ul> <li>FTC Staffing</li> <li>Decisions regarding prescription medications are made only by doctors or medical experts.</li> <li>FTC Staffing &amp; FTC Hearing</li> <li>Regardless of whether the substance is legal or illegal, substance use behaviors are treated the same.</li> </ul>

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			Addresses use of nonmedically- indicated intoxicating or addictive substances (e.g., alcohol, cannabis, prescription medications), regardless of the substance's licit/illicit status.	
7N	<b>FTC Discharge Decisions</b> Agreed-upon criteria provide a framework to determine the appropriate discharge for each participant in its policies and procedures manual and participant handbook.	FTC Coordinator Are there ever instances where a participant's discharge decision differs from that described in the Participant Handbook?	Document #1 (P&P Manual): Provides the criteria necessary for successful discharge.	
		[If yes]: Please explain.	AND <sup>25</sup> Document #3 (Participant Handbook): Provides the criteria necessary for successful discharge.	

<sup>&</sup>lt;sup>25</sup> See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

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Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
		Standard 8: Monitoring and Evaluation		
8A <sup>26</sup>	Maintain Data Electronically An electronic database stores information about participant demographic characteristics, participant performance, participant needs, substance use treatments, mental health treatments, recovery supports, reunification supports, criminal justice involvement, child needs, services provided to children, other parent/caregiver needs, family needs, services provided to family members, child welfare court action (e.g., trial reunification), child welfare court processes (e.g., continuance), child welfare indicators (e.g., assessment findings), caregiver well-being indicators (e.g., assessment findings), family well-being indicators (assessment findings), and long-term outcomes (e.g., reentry).	FTC CoordinatorDoes the FTC maintain its own data system?[If yes]: When (how frequently) does data entry into the FTC system occur?[If yes]: What data does the FTC collect?[If not answered]: What specific variables do the FTC track throughout a participant's involvement in the FTC?	Document #12 (Data Report/ Summary): Provides information on participant demographic characteristics, participant performance, participant needs, substance use treatments, mental health treatments, recovery supports, reunification supports, criminal justice involvement, child needs, services provided to children, other parent/caregiver needs, family	

<sup>&</sup>lt;sup>26</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			needs, services	
			provided to family	
			members, child	
			welfare court	
			actions (e.g., trial	
			reunification),	
			child welfare	
			court processes	
			(e.g.,	
			continuance),	
			child welfare	
			indicators (e.g.,	
			reunification),	
			child well-being	
			indicators (e.g.,	
			assessment	
			findings),	
			caregiver well-	
			being (e.g.,	
			assessment	
			findings), family	
			well-being	
			indicators (e.g.,	
			assessment	
			findings), and	
			long-term	
			outcomes (e.g.,	
			reentry).	
8B	Engage in Process of Continuous Quality	FTC Coordinator	Document #12	
	Improvement		(Data Report/	
		When does data entry occur?	Summary):	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	Assessed with Interview <sup>27</sup> :		Provides	
	Data entry occurs within 48 hours of each	What happens with the data that are	information on	
	activity/event.	collected?	participant	
			demographic	
	Data are routinely monitored for quality	[If not answered]: Does the team	characteristics,	
	assurance.	view data summaries or reports?	participant	
			performance,	
	Data summaries provide real-time information on	[If yes]: What type of	participant needs,	
	participants, processes, and outcome measures.	information do these	substance use	
		summaries cover?	treatments,	
	Data summaries inform policy setting,		mental health	
	sustainability efforts, and quality improvement	Does the steering and/or oversight	treatments,	
	efforts.	committee view data summaries or	recovery supports,	
		reports?	reunification	
	Policies, procedures, and outcomes are evaluated		supports, criminal	
	annually.	[If yes]: What does the	justice	
		steering and/or oversight	involvement, child	
	After this review, action plan is developed to	committee do with this	needs, services	
	address challenges, incorporate best practices,	information?	provided to	
	and improve outcomes.		children, other	
		How often are policies, procedures, and	parent/caregiver	
	Assessed with Document Review:	outcomes evaluated?	needs, family	
	Data summaries provide real-time information on		needs, services	
	participant, process, and outcome measures that	[If not answered]: How is the data	provided to family	
	inform policy setting, sustainability and quality	used to improve policies and	members, child	
	improvement efforts.	practices?	welfare court	
			actions (e.g., trial	
			reunification),	
			child welfare	
			court processes	

 $<sup>^{\</sup>rm 27}$  This is a "split provision." See section 8.2 of the Site Visit Guide.

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
			(e.g.,	
			continuance),	
			child welfare	
			indicators (e.g.,	
			reunification),	
			child well-being	
			indicators (e.g.,	
			assessment	
			findings),	
			caregiver well-	
			being (e.g.,	
			assessment	
			findings), family	
			well-being	
			indicators (e.g.,	
			assessment	
			findings), and	
			long-term	
			outcomes (e.g.,	
			reentry).	
8C	Evaluate Adherence to Best Practices	FTC Coordinator	Document #11	
			(FTC Best	
	FTC adheres to best practice standards.	How does the FTC monitor its adherence to	Practices Review	
		best practice standards?	Report):	
			Documents	
			adherence to best	
			practice	
			standards.	
8D	Use of Rigorous Evaluation Methods	FTC Coordinator	Document #13	
			(Evaluation	

Provision Number	Provision & Key Concepts	Interview Q	Document Source	Observation Item
	Rigorous evaluation methods, including the use of comparison groups when feasible and appropriate, are used to address the pertinent evaluation questions.	How does the FTC conduct evaluations of its practices and outcomes?	Report): Documents rigorous evaluation methods, including the use of comparison groups when feasible and appropriate.	

## Appendix A: Interview – FTC Coordinator

Provision Number	Provision & Key Concepts	Interview Q	Notes	Rating
		Standard 1: Organization & Structure		
1A	Multidisciplinary & Multisystemic Collaborative Approach There is coordination and collaboration in setting policy between the FTC and the child welfare system, substance use treatment system, mental health system, , children's services system, and related health, education, and social service systems. The involved executives collaborate to ensure that the FTC's structures and operations adhere to the mandates of each system to improve outcomes across systems.	Standard 1: Organization & Structure         Who are the administrators, or organizational executives, that oversee the FTC?         [If respondent provides individual executives' names]: What systems do these executives represent?         How effectively do these interdisciplinary partners collaborate in developing policy and implementing the FTC operations?		

Provision Number	Provision & Key Concepts	Interview Q	Notes	Rating
1B	Partnerships, Community Resources & Support	What partnerships make up the FTC?		
18	Partnerships, Community Resources & Support There is coordination and collaboration in supporting service access between the FTC and the child welfare system, substance use treatment system, mental health system, children's services system, related health systems, related education systems, and related social services systems.	What partnerships make up the FTC? In what ways do FTC partners contribute to serving FTC-involved families?		

Provision Number	Provision & Key Concepts	Interview Q	Notes	Rating
Provision Number 1D	Provision & Key ConceptsGovernance StructureFTC governance structure includes oversight/executive body, steering committee, and operational team. The oversight/executive body includes executive-level representatives from the child welfare court system, all partner organizations, and other community leadership/elected officials. The steering committee includes supervisory-level staff of all partner organizations.Roles, responsibilities, and communication among each of the three governance committees 	Interview Q Does the FTC have an oversight/executive committee, steering committee, and operational team? [If the respondent mentions an oversight/executive committee but doesn't say who it includes, ask]: Who is a part of the executive/oversight committee comprised of partner organization leadership and other community leadership (the "top tier" committee)? [If the respondent mentions a	Notes	Rating
		steering committee but doesn't say who it includes, ask]: Who is a part of the community-level committee comprised of partner organizations (the "tier two" committee)? What are the roles and responsibilities of each committee?		

Provision Number	Provision & Key Concepts	Interview Q	Notes	Rating
1E	Shared Mission & Vision	Does the FTC have vision and mission		
		statements?		
	The vision and mission statements exist.			
		[If yes]: Who developed the vision		
	The vision and mission statements were	and mission statements?		
	collaboratively developed by partner	[If year, they were the vision and		
	organizations.	[If yes]: How were the vision and mission statements developed?		
	The vision and mission statements were	mission statements developed!		
	developed to reflect each system's values, jointly			
	identify measurable goals and objectives.			
	,			

Provision Number	Provision & Key Concepts	Interview Q	Notes	Rating
1F	<b>Communication &amp; Information Sharing</b>	What is the FTC team's method of		
		communication in between		
	Team shares case information in a timely manner using email.	staffings/hearings?		
		What type of information is being shared		
	Team shares information with each other on participant behavior, caregiver progress, child	among the FTC team?		
	progress, and family progress.	Why is information being shared among the FTC team?		
	Purpose of information sharing is to support			
	recovery and family reunification efforts, monitor			
	progress, and review and respond to participant behavior.			

Provision Number	Provision & Key Concepts	Interview Q	Notes	Rating
1G	Cross-Training & Interdisciplinary Education	What kind of training did team members complete in the last 12 months?		
	FTC has a training and education plan.			
		[If not already answered]: Does your FTC		
	Training and education for FTC operational team	have a training/education plan for team		
	includes onboarding/orientation training, annual	members?		
	cross-training, and ongoing interdisciplinary education.	[If yes]: What does the		
		training/education plan involve?		
		[If not already answered]: What is your		
		orientation process for new FTC team		
		members?		
		[If not already answered]: Does the FTC		
		provide education or training to other		
		committees or levels within the FTC		
		governance structure?		
		[If yes]: What does this involve?		
		[If not already answered]: What is your		
		orientation process for new members to		
		governance structure committees or levels?		
		[If not already answered]: Do the FTC team		
		members provide education or training to		
		community partners?		
		[If yes]: What does this involve?		

Provision Number	Provision & Key Concepts	Interview Q	Notes	Rating
1H	Family-Centered, Culturally-Relevant, and Trauma-Informed Approach <sup>28</sup>	Do FTC team members focus on the whole family?		
	Daily operations and interactions reflect a family centered approach, meaning the staff addresses the needs of the entire family, a culturally	Do FTC team members use culturally relevant approaches?		
	relevant approach, meaning the staff are alert to culturally relevant factors, and trauma informed approach, meaning staff recognize and respond to signs and symptoms of trauma.	Do FTC team members recognize and respond to trauma?		

 $<sup>^{\</sup>mbox{\tiny 28}}$  See section 2.2 of the Site Visit Guide for definitions of special terminology.

Provision         Provision & Key Concepts         Interview Q         Notes	Rating
Number       Number	

Provision Number	Provision & Key Concepts	Interview Q	Notes	Rating
1J	Pre-Court Staffing & Review Hearing	Does the FTC team engage in pre-hearing		
		meetings to discuss cases that will be seen		
	FTC team participates in pre-court staffing meetings.	in Court that day?		
	5	[If yes]: When do staffings occur?		
	Staffing meeting occurs immediately before FTC			
	court review hearing.	<pre>[If yes]: What is discussed during staffings?</pre>		
	During staffing, team discusses progress and			
	needs of children, caregivers, and family.	[If not noted already]: Are progress reports on participants/cases distributed prior to		
	During staffing, team recommends coordinated responses to participant behavior to judge.	staffings?		
	A progress report is developed and read by all team members prior to each staffing.			

	Standard 2: Role of the Judge			
2A	Convening Partners	Describe the judge's role with regards to the operational team, steering committee		
	The judge convenes the operational team, steering committee, and executive committee.	and oversight committees.		
		Describe the judge's role in maintaining and		
	During these convenings, the judge guides the operational team in the development of ongoing operations and actualization of the FTC's mission and vision, implementation of ongoing operations and actualization of the FTC's mission and vision, and management of ongoing operations and actualization of the FTC's mission and vision.	developing relationships with community partners.		

2B	Judicial Decision Making	Who makes the final decisions about court-	
		ordered responses to participants?	
	The judge makes the final decision about the		
	court-ordered response.		

2C	Participation in Pre-Court Staffings	How often does the FTC judge participate in	
	rai ucipation in rie-court Stattings		
		pre-court staffing?	
	The FTC judge consistently attends pre-court		
	staffing to discuss participant progress, updates,	[If the respondent's answer is not	
	and behaviors.	clear]: Always, most of the time,	
		about half of the time, infrequently,	
	The FTC judge discusses participant progress,	or never?	
	updates, and behaviors.		
		[If the judge attends staffings]:	
		During pre-court staffings, what	
		discussions is the judge involved in?	
L			

2D	Interaction with Participants	Describe a typical exchange between a	
		judge and a participant.	
	At FTC hearings, judge spends a minimum of		
	three minutes talking to each participant.	[If not answered]: How long is a typical exchange?	
	Judge responds to the participant's behavior and		
	provides a rationale for these responses.	[If not clear]: What is discussed during a typical exchange?	
	Judge reinforces the treatment adjustments and		
	responses to behaviors.	[If not answered]: Describe the dynamic between the judge and the participant.	
	Judge encourages the participant to discuss his or		
	her progress, progress the children are making,		
	activities to enhance parenting skills, and		
	parenting challenges or unmet needs.		
	Judge emphasizes participant strengths and the importance of the participant's continued		
	engagement in treatment and services.		
	Judge is engaging, supportive, and encouraging, and works to build rapport with the participant.		

2E	Professional Training	Has the FTC judge had training on mental health? Substance use disorders? Child	
	The FTC judge obtains training on mental health,	welfare? Legal and constitutional issues	
	substance use disorders, child welfare, and legal and constitutional issues related to FTCs.	related to FTCs?	
		Has the FTC judge attended a training	
	The FTC judge attends annual training conferences and workshops.	conference or workshop on best practices or trends in FTCs in the last 12 months?	
	The FTC judge attends training with other operational team members to assure cross-training.	Has the judge attended a training with other operational team members?	

2F	Length of Judicial Assignment to FTC The FTC judge presides over the FTC for at least two consecutive years.	What month and year did the current judge begin his/her term presiding over the FTC? How long will the judge be on the bench?	
	two consecutive years.		

	Standard 3: Equity and Inclusion			
3A <sup>29</sup>	Equitable FTC Program Admission Practices	Have the screening, referral, entry, and assessment processes been reviewed by the		
	The FTC annually examines its eligibility criteria, screening, referral, entry, and assessment	team since the FTC's inception?		
	processes.	[If yes]: How often did these reviews occur?		
	Review of eligibility criteria and processes aims to			
	identify and correct any disproportionality in access.	[If yes]: What was the purpose of these reviews?		
		[IF answer unclear]: What data was used during these reviews?		

<sup>&</sup>lt;sup>29</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

3B <sup>8</sup>	Equitable FTC Retention Rates and Child Welfare	Has the FTC examined its program retention	
	Outcomes	and child welfare outcomes across different	
		groups? For example, different	
	FTC acts strategically to achieve equivalent or	races/ethnicities, languages, and family	
	better outcomes for historically marginalized	types?	
	groups compared to the overall child welfare		
	system population.	[If yes]: What did you find?	
	FTC examines equity for the following outcomes:	[If disparity found]: What was done	
	participation, engagement, successful discharge, permanency and well-being.	to address this disparity?	

3C <sup>8</sup>	Equitable Treatment Treatment for FTC participants is Family- centered, gender-responsive, trauma-informed, and linguistically and culturally appropriate <sup>30</sup> Treatment for FTC participants matches the intensity, dosage, and quality consistent with the needs and preferences of the individual and family. FTC ensures equivalent outcomes across groups.	How does the FTC match treatment with the needs and preferences of a client and their family? Has the FTC examined its treatment experiences and outcomes across different groups? For example, different races/ethnicities, languages, and family types? [If yes]: What did you find? [If disparity found]: What was done to address this disparity?	

<sup>&</sup>lt;sup>30</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

3D <sup>31</sup>	Equitable Responses to Participant Behavior FTC administers equitable responses across groups.	Are responses to participant behavior the same across different groups? For example, different races/ethnicities, languages, and family types?	
	Responses to participant behavior are administered using principles of procedural fairness, being free from bias or apprehension of bias from the decision maker. Decision is rational or based on evidence that is logically capable of supporting the facts providing people likely to be adversely affected by decisions an opportunity to present their case and have their response taken into consideration before a decision is made. Responses are regularly monitored to ensure that they are equivalent in similar situations across groups	<ul> <li>[If no]: How are they different?</li> <li>What philosophy or principles guide responses to participant behavior?</li> <li>Has the FTC examined its responses to participant behavior across different groups? For example, different races/ethnicities, languages, and family types?</li> <li>[If yes]: What did you find?</li> </ul>	
		[If disparity found]: What was done to address this disparity?	

<sup>&</sup>lt;sup>31</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

3E	Team Training	Does the FTC provide training on culture	
		and culturally-relevant services and	
	The FTC provides training on culturally relevant	supports to its operational team and	
	services and supports to its operational team and	partners?	
	partners.		
		[If yes]: What does this training	
		entail?	

	Standard 4: Early Identification, Screening, and Assessment			
4A	Target Population, Objective Eligibility and Exclusion Criteria	Who does the FTC target for inclusion?		
		What is the eligibility criteria for program		
	FTC targets families that are high risk/high need, meaning they require intensive services,	participation?		
	increased support and monitoring, and judicial	What is the exclusion criteria for program		
	oversight to comply with child welfare system	participation?		
	case plan, complete substance use disorder			
	treatment, and safely reunify with children.	Is FTC program eligibility/exclusion criteria communicated to referral sources?		
	The high risk/high need target population is			
	defined in the FTC's objective eligibility and	[If yes]: How is this information		
	exclusion criteria.	communicated?		
	FTC communicates eligibility criteria in writing to			
	all referral sources.	To what extent does the FTC consider		
		subjective suitability when making		
	FTCs do not make eligibility determinations based on subjective criteria.	eligibility/exclusion determinations?		

4B <sup>32</sup>	Standardized and Systematic Referral,	Describe the process by which potential
	Screening, and Assessment Process	participants are identified and referred to
		the FTC.
	The FTC uses processes for referring, screening,	
	and assessing.	Describe the process by which potential
		participants are assessed for the FTC.
	These processes for referral, screening, and	
	assessing FTC participants are agreed upon,	[If response is unclear]: What
	standardized, and systematic.	happens when the FTC receives a
		referral?
	These standardized referral, screening, and	
	assessment processes apply to caregivers,	[If response is unclear]: Do all
	children, and families.	referral sources follow the same
		process for making referrals?
	Referral sources are trained in when to	
	appropriately refer their participants.	[If response is unclear]: Do all
		referrals follow the same screening
		and assessment process?
		[If response is unclear]: Do all
		partners agree upon and use the
		same referral, screening and
		assessment processes?
		[If response is unclear]: Who do
		these referral, screening, and
		assessment processes apply to?
		And all referred courses trained in the FTC
		Are all referral sources trained in the FTC
		referral processes?

<sup>&</sup>lt;sup>32</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

4C	Use of Valid and Reliable Screening and Assessment for Caregivers and Families	How are decisions made about program eligibility?	
4C	Use of Valid and Reliable Screening and Assessment for Caregivers and Families Valid and reliable instruments <sup>33</sup> used to screen and assess caregivers/families referred to FTC for program eligibility, case planning for children, caregivers, and family members, appropriate treatment level of care, and complementary services.	<ul> <li>How are decisions made about program eligibility?</li> <li>[If answer is unclear]: Is an assessment instrument used? If yes, what assessment instrument?</li> <li>How are case or service plans developed?</li> <li>[If response is unclear]: Are assessment instruments used? If yes, what assessment instruments used? If yes, what assessment instruments?</li> <li>[If not answered with service plan question]: How are decisions made about substance use treatment level of care? What assessment instruments are used?</li> <li>[If not answered with service plan question]: How are decisions made about complementary services? What assessment instruments are used?</li> </ul>	
		instruments are used?	

<sup>&</sup>lt;sup>33</sup> For information on determining whether a screening/assessment instrument is validated, see Appendix G of the Site Visit Guide.

4D	Use of Valid, Reliable, and Developmentally	Are children of FTC participants screened or	
	Appropriate Screening and Assessment for	assessed at the beginning of their	
	Children <sup>34</sup>	involvement in the FTC?	
	Children of FTC participants are assessed within a	[If yes]: Describe this process.	
	standardized time frame.		
		[If response is unclear]: What are	
	Children of FTC participants are assessed using	they assessed for? What	
	validated and developmentally appropriate instruments.	instruments are used?	
		During their case, are children re-assessed	
	Child assessments reoccur at developmentally	at any point?	
	appropriate intervals.		
		[If yes]: Describe this process.	
		[If response is unclear]: What are	
		they re-assessed for? What	
		instruments are used?	

<sup>&</sup>lt;sup>34</sup> For information on determining whether a screening/assessment instrument is validated, see Appendix G of the Site Visit Guide.

4E	Identification and Resolution of Barriers to Recovery and Reunification	Describe the process(es) used to identify and address community-based barriers (e.g., transportation, barriers to parenting	
	The FTC systematically monitors community- based barriers to obtaining services or progressing toward goals for participants, children, and families.	time) to participant progress.	

	Standard 5: Timely, Hig	gh-Quality, and Appropriate Substance Use Disorder Treatment	
5A <sup>35</sup>	Timely Access to Appropriate Treatment	How does the FTC program ensure that	
	Protocols and practices ensure timely access to an appropriate substance use treatment.	participants access treatment as quickly as possible?	
		[If response is unclear]: Does the	
	Time between case opening and treatment entry is tracked as a routine process measure.	FTC track time between case opening and SUD treatment entry? Does the FTC use that information	
		to strategize improvements in timely treatment access?	

<sup>&</sup>lt;sup>35</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

5B*	Treatment Matches Assessed Need	Describe the process of SUD treatment	
		level-of-care referral or placement.	
	Level of care assessment is conducted by a		
	qualified treatment provider.	[If response is unclear]: How often	
		are FTC-referred participants re-	
	Treatment is adjusted based on ongoing formal	assessed for SUD treatment need	
	reassessments to meet participants' clinical needs.	during their program participation?	
		[If reassessments occur]: What is	
		the purpose of these re-	
		assessments?	

Comprehensive Continuum of Care	What levels of substance use treatment do		
	FTC-referred participants have access to?		
Participants have access to a continuum of			
substance use treatment that includes the	How long are participants in SUD		
following levels of care: outpatient treatment,	treatment?		
intensive outpatient, partial hospitalization,			
residential/inpatient treatment, and/or medical	[If no mention of aftercare already]: Are		
detox.	aftercare services available to FTC-referred		
	participants? If so, can you describe the		
Medication management is available at each level	aftercare services?		
of care.			
Each participant's SUD treatment dosage and			
duration are sufficient to achieve and sustain			
recovery.			
After acute SUD treatment no longer required,			
participants engage in continuing care to			
maintain stable health and recovery.			
	<ul> <li>substance use treatment that includes the following levels of care: outpatient treatment, intensive outpatient, partial hospitalization, residential/inpatient treatment, and/or medical detox.</li> <li>Medication management is available at each level of care.</li> <li>Each participant's SUD treatment dosage and duration are sufficient to achieve and sustain recovery.</li> <li>After acute SUD treatment no longer required, participants engage in continuing care to</li> </ul>	Participants have access to a continuum of substance use treatment that includes the following levels of care: outpatient treatment, intensive outpatient, partial hospitalization, residential/inpatient treatment, and/or medical detox.How long are participants in SUD treatment?Medication management is available at each level of care. Each participant's SUD treatment dosage and duration are sufficient to achieve and sustain recovery.[If no mention of aftercare already]: Are aftercare services available to FTC-referred participants? If so, can you describe the aftercare services?After acute SUD treatment no longer required, participants engage in continuing care toAfter acute SUD treatment no longer required, participants engage in continuing care to	Participants have access to a continuum of substance use treatment that includes the following levels of care: outpatient treatment, intensive outpatient, partial hospitalization, residential/inpatient treatment, and/or medical detox.How long are participants in SUD treatment?Medication management is available at each level of care. Each participant's SUD treatment dosage and duration are sufficient to achieve and sustain recovery.[If no mention of aftercare already]: Are aftercare services available to FTC-referred participants? If so, can you describe the aftercare services?After acute SUD treatment no longer required, participants engage in continuing care toAfter acute SUD treatment no longer required, participants engage in continuing care to

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<sup>&</sup>lt;sup>36</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

5D	Integrated Treatment of Co-Occurring Substance Use and Mental Health Disorders	What services are provided to FTC-referred participants who have co-occurring substance use and mental health disorders?	
	Integrated treatment plans address the needs of participants who have co-occurring substance use and mental health disorders in a coordinated manner.		

5E	Family-Centered Treatment <sup>37</sup>	Describe how the needs of family members	
	SUD treatment is comprehensive and family	are addressed when crafting a treatment	
	SUD treatment is comprehensive and family- centered because it meets caregivers' needs,	plan for an FTC-referred participant.	
	meets children's and family members' needs, addresses effects of participant substance use	[If not answered]: Are participants' children permitted to reside with them in residential	
	disorder on family, permits children to stay in residential with caregivers.	treatment?	

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<sup>&</sup>lt;sup>37</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

5G	Treatment for Pregnant Women	What services and supports are available to pregnant FTC participants?	
	FTC protocol and practices identify the unique		
	needs of pregnant participants.	[If not already answered]: Does the FTC	
		provide or coordinate MAT treatment for	
	FTC provides treatment and other services to meet these women's needs including, substance use treatment interventions that include MAT	pregnant women who have an opioid use disorder?	
	when clinically indicated and integrated prenatal,	[If not already answered]: Does the FTC	
	perinatal, and postnatal medical care.	coordinate with pre- and post-natal medical care?	

5H	Culturally Responsive Treatment <sup>38</sup>	What does the FTC do in terms of treatment referrals for participants with different	
	The services and practices of the FTC SUD treatment providers are respectful of and responsive to the cultural and linguistic needs of FTC participants.	cultural and/or linguistic needs?	

<sup>&</sup>lt;sup>38</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

51	<b>Evidence-Based Manualized Treatment<sup>39</sup></b> Substance use treatment agencies that partner with the FTC provide evidence-based, manualized treatments. For these agencies, fidelity to the	What evidence-based, manualized treatments are used with FTC-referred caregivers, children, and families? How frequently is model fidelity assessed	
	evidence-based, manualized treatments model is assessed on a regular basis.	for these evidence-based treatments? What training and/or certification do clinicians delivering evidence-based	
	To ensure continuing fidelity to the model, substance use treatment providers are trained, certified (when applicable), and clinically supervised.	interventions with FTC-referred participants undergo?	

<sup>&</sup>lt;sup>39</sup> For information on determining whether a treatment is evidence-based, see Appendix G of the Site Visit Guide.

5J	Medication-Assisted Treatment (MAT)	Are individuals using MAT excluded from the FTC program?	
	FTC does not exclude individuals using or		
	considering MAT from FTC program.	How is it determined that a participant is	
		eligible/appropriate to receive MAT?	
	FTC participants receive MAT for substance use		
	disorders based on an objective determination by	How are cases handled in which MAT is	
	a qualified medical provider that MAT is	recommended to an FTC-referred	
	medically indicated.	participant but the participant does not	
		want to use it?	
	FTC does not mandate MAT.		

5K	Alcohol and Other Drug Testing Protocols	How does the FTC monitor participants' use	
	Standardized drug testing protocol specifies the	of substances throughout their FTC	
	Standardized drug testing protocol specifies the frequency (a minimum of two times per week),	participation?	
	scheduling, randomization procedures,	[If not already answered] Describe drug	
	observation, duration, and breadth of testing.	testing procedures used with FTC	
		participants.	
	The purpose of drug testing protocol is to		
	monitor participants' use of illicit and licit	[If not already answered] Is drug testing	
	substances; outline processes for confirmation,	random? Is drug testing observed? Is drug	
	notification, and dissemination of test results.	tested completed at least 2x weekly?	
		[If not already answered] Do participants	
		have an equal chance of getting tested every day, even on weekends and holidays?	
		every day, even on weekends and holidays:	
		What are the purposes of the drug testing	
		protocol?	

5L	Treatment Provider Qualifications	Are all treatment providers that the FTC refers participants to licensed or otherwise	
	The FTC's partner treatment providers are licensed, certified, or accredited.	certified?	

	Standard 6: Comprehe	ensive Case Management, Services, and Suppo	rts for Families	
6A	Intensive Case Management and Coordinated Case Planning	Describe the FTC's approach to case management with program participants and		
	Participants are provided intensive supportive	their families.		
	case management, including a coordinated case	[If not already answered]: Does the FTC		
	plan (or a set of case plans) that is based on reliable and valid needs assessments, is	case plan (or set of case plans) include the child welfare dispositional order and		
	systematically monitored to ensure that all family members receive services to meet their needs.	treatment recommendations?		
L				

FTC operational team's approach to case planning is family-centered, culturally responsive <sup>40</sup> , and strengths-based. While case planning, FTC team actively involves children, caregivers, and family members (as [If r	Vhat is the FTC team's approach to case lanning? or a typical case, to what extent are hildren, caregivers, and family members hvolved in case planning? f not already answered]: What does this hvolvement entail?		
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<sup>&</sup>lt;sup>40</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

6C	Recovery Supports	Does the program use recovery	
		specialists/coaches or peer support	
	The FTC links participants with professionally	specialists/mentors?	
	trained or certified recovery specialists (also		
	known as recovery coaches), or with peer	[If yes]: How do participants gain	
	support specialists (also known as peer mentors).	access to these supports?	
	FTC team actively works with participants to build	To which community-based recovery	
	a community-based recovery support network.	programs does the FTC refer participants? Are participants required to attend?	
	FTC does not require participants to attend any		
	specific peer support group, but rather provides a		
	range of options.		

6D	High-Quality Parenting Time (Also Called Visitation)	Describe visitations, or parenting time, in the FTC.	
	FTC participants and their children receive parenting time that is high quality, well-resourced, face-to-face.	How frequently does visitation typically occur for children under the age of 1?	
		For children aged 1-5?	
	Minimum caregiver visitations by child age are as follows:	For children aged 6-12?	
	Under age 1 (3-5x week for 60 min.) Age 1-2 (2-4x week for 60 min.)	For children aged 13 or older?	
	Age 2-5 (2-4x week for 60 min.) Age 6-12 (1-3x week for 60 min.)	For siblings?	
	Age 13+ (1-2x week for 60 min)	How frequently does visitation typically occur for siblings?	
	Minimum sibling visitations are 1x week for 60		
	min.	Who facilitates supervised visitations?	
	When needed, trained individuals facilitate supervised visitation as caregivers work to achieve unsupervised time.	[If someone facilitates supervised visitations]: What, if any, training do individuals receive to facilitate supervised visitation?	

6E	Parenting and Family-Strengthening Programs	What parenting or family-strengthening programs are offered to FTC/FTC-referred	
	All evidenced-based interventions <sup>41</sup> are	participants?	
	characterized by including caregiver-child		
	interaction component (in which caregivers and	[If one or more programs are	
	children attend sessions together), are culturally	identified]: What are the	
	appropriate, are designed to meet the needs of	components of the parenting and	
	families affected by parental substance use disorder and co-occurring additional risk factors.	family-strengthening interventions?	
		[If not already answered]: Do caregivers and	
	FTC team matches interventions to the needs of	children interact as a part of the	
	each child, parent, and family.	intervention/program?	
		How does the team determine who is	
		referred to the family interventions/programs?	

<sup>&</sup>lt;sup>41</sup> For information on determining whether a treatment is evidence-based, see Appendix G of the Site Visit Guide.

6F	Reunification and Related Supports	What reunification supports are available to FTC participants and their families?	
	FTC participants and their families receive reunification and related supports.	For how long are reunification supports	
		available to participants after reuniting?	

6G	Trauma-Specific Services for Children and Caregivers	What trauma services are available to FTC participants and their child(ren)?	
	Trauma-specific interventions are available to FTC participants and FTC children. These trauma-specific interventions are evidence-based or evidence-informed. Trained treatment professionals provide trauma-specific therapies	[If not already answered] Are these services evidence-based or evidence-informed? Who provides these services?	
	with fidelity. FTC participants are screened/assessed for trauma. Children of FTC participants are screened/assessed for trauma.	What trauma screens/assessments are used with participants and their child(ren)?	

6Н	Services to Meet Children's Individual Needs Children's needs are identified by a comprehensive assessment. Operational team matches developmentally appropriate services to the child's identified needs. Children of participants are connected to a continuum of high-quality services that include prevention and intervention/treatment. Children's services are available to address needs along the following dimensions: physical, cognitive, social, emotional, behavioral, developmental, and therapeutic Operational team monitors children's services providers so that services are delivered with fidelity.	Describe the process of identifying and referring children and adolescents to services. [If not answered]: How do children's service plans change over time? [If not answered]: What types of services are children of FTC participants referred for?	

	mentary Services to Support Caregivers nily Members	What support services are available to participants and their family members?	
FTC clier of compl care, em violence housing, Compler individua Compler formal a needs pr	nts have access to a comprehensive range elementary support services such as child apployment, educational, domestic e, legal, transportation, food, clothing, , medical and dental care. mentary services are chosen to meet the al needs of participants and their families. mentary service needs are identified by assessment. Complementary service romote engagement/retention in ce use treatment, sustained recovery,	How are decisions to refer participants and their family members to case management services made? What is the purpose of providing these support services?	

6J	Early Intervention Services for Infants and Children Affected by Prenatal Substance Exposure	What is the process used when an FTC case has an infant affected by prenatal substance exposure?	
	Infants and children under the age of 3 who are experiencing effects of prenatal substance exposure are connected to early intervention services that address the infant's development, physical health, social/emotional needs, and safety needs.	[If not already answered]: What types of services are available for infants and children under age 3 of FTC participants who are affected by prenatal substance exposure? What do these services address?	

6K	Substance Use Prevention and Intervention for	What substance use disorder prevention	
	Children and Adolescents	and early intervention services are available	
		to the children of FTC participants?	
	Children of participants have access to services		
	for substance use disorder prevention and early	[If yes]: Are these services culturally	
	intervention for substance use disorder. These	appropriate?	
	services are culturally appropriate,	Developmentally appropriate?	
	developmentally appropriate, age appropriate,	Age appropriate?	
	designed to enhance protective factors, designed	Designed to enhance protective	
	to reduce risk factors, evidence-based <sup>42</sup> .	factors and reduce risk factors?	
		Are these services evidence-based and	
		monitored for fidelity?	
		,	

<sup>&</sup>lt;sup>42</sup> For information on determining whether a treatment is evidence-based, see Appendix G of the Site Visit Guide.

	Standard 7: Therapeutic Responses to Behavior			
7A	Star         Child and Family Focus         Responses to behavior are made in child's best interest. Responses do not negatively affect participants, do not negatively affect children, do not negatively affect families, do not interfere with court hearings, do not interfere with court requirements.         Parenting time is not used as an incentive or sanction.	<ul> <li>hdard 7: Therapeutic Responses to Behavior</li> <li>How are decisions about parenting and family time communicated so that they are not perceived as an incentive or sanction?</li> <li>What factors and considerations influence decisions about parenting time?</li> <li>[If not already answered]: Is parenting time used as an incentive or sanction?</li> </ul>		

7B	Treatment Adjustments	What are some key considerations when a participant is noncompliant?	
	Team considers whether non-compliance is due		
	to a therapeutic problem before issuing a	How are adjustments in treatment,	
	sanction.	including type, level of care, and dosage determined for FTC-referred participants?	
	If such a non-compliance sue exists, adjustments		
	in the type of treatment, level of care, and	[If not already answered]: What	
	dosage are based on the clinical needs of the	factors and considerations	
	participant, including substance use and mental, physical, social, or emotional health.	influence treatment adjustment decisions?	
	Adjustments made in consultation with clinical treatment professionals.	[If not already answered]: Are treatment adjustments used as an incentive or sanction?	
	Treatment adjustments are not used as incentive or sanction.		

7C	Complementary Support Service Modifications	How does the FTC respond when participants face compliance barriers such	
	Team considers whether noncompliance is due to an unavoidable or structural barrier before issuing a sanction.	as a lack of transportation, lack of safe housing, or cognitive impairment to compliance?	
	If non-compliance is determined to be due to an unavoidable or structural barrier, the FTC team responds by providing additional complementary supports and services.		

7D	FTC Phases Advancement through FTC phases is based on achievement of realistic, clearly defined behavioral objectives or milestones associated with sustained recovery, stable reunification, and safety, well-being, and permanency for children. The policy and procedure manual and the participant handbook provide the criteria	Please describe the phases or milestones for this FTC program. [If not already answered]: How do participants advance through the phases or milestones? Are there any circumstances in which a participant would phase up or down in a manner not described in the participant	
	necessary for advancement through the phases and successful discharge. FTC does not demote participants.	handbook? [If yes]: Please describe. Does the FTC demote participants?	

7E	Incentives and Sanctions to Promote Engagement	Please describe the incentives and sanctions used in this FTC.	
	The FTC develops a range of responses (incentives and sanctions) of varying magnitudes that it employs throughout each participant's time in the FTC. FTC uses more incentives than sanctions.	Explain the decision-making process around determining sanctions and incentives. [If not already answered]: Does the FTC use more incentives than sanctions?	

7F	Equitable Responses	What factors influence recommended	
		sanctions?	
	All relevant factors for each participant are		
	considered when recommending sanctions.	How is this information communicated to	
		the judge?	
	Consequences to any given participant are		
	equivalent to those received by other	Does the FTC keep records of the incentives	
	participants who engage in comparable conduct in similar circumstances and with similar	and sanctions imposed for each participant?	
	expectations.	[If yes]: Is this data monitored to	
		ensure that responses to behaviors	
	Team members articulate their reasoning when	are consistent and fair? Please	
	recommending consequences for a participant	describe.	
	before the judge.		
	Consequences do not differ by gender, race,		
	ethnicity, nationality, socioeconomic status, or		
	sexual orientation.		

7G	Certainty	Describe the processes used by the FTC to	
7G	Certainty The operational team reliably detects and responds consistently to all participant behaviors listed in the FTC policies and procedures manual.	Describe the processes used by the FTC to determine whether a participant is compliant.	

7H	Advance Notice	Are there instances in which responses to	
7H	Advance Notice The FTC notifies participants in advance of the behaviors required for successful participation.	Are there instances in which responses to participant behavior deviate from that described in the Participant Handbook? [If yes]: Please describe.	

71	Timely Response Delivery	How long after a participant's behavior occurs is the behavior therapeutically	
	The FTC team responds to compliant or	responded to (e.g., incentive or sanction)?	
	noncompliant behavior as soon as possible in		
	adherence to FTC policies and procedures to	How does the FTC communicate about	
	minimize the time from event to response. The	participant behavior?	
	FTC adheres to legal and ethical communication		
	protocols.		

7J	Opportunities for Participants to be Heard	Describe if and how participants are given opportunities to share their side of the	
	The FTC gives all participants an opportunity to	story when involved in a controversy or	
	express their perspectives on their behavior, disagreements about facts, and other relevant	given a sanction.	
	issues, and/or ask their attorney or defense		
	representative to do so.		

7К	Professional Demeanor	Give an example in which a participant was either angry or disengaged. How did the	
	Operational team's interactions with the participant, participant's children, family, and	team respond?	
	other members of the participant's support system are respectful and professional.	[If not already answered]: How does the team respond to the participant's children?	
		[If not already answered]: How does the team respond to the participant's family and other members of the participant's support system?	

7L	Child Safety Interventions	What factors influence child safety interventions, including placement and	
	Appropriate child safety interventions,	parenting time changes?	
	placement, and parenting time changes are made	Who makes desisions about shanges in	
	based on safety, well-being, and permanency indicators.	Who makes decisions about changes in visitations, custody, and child placement?	
	Child welfare workers are responsible for ensuring child safety and may not delegate that responsibility.		

7N	FTC Discharge Decisions Agreed-upon criteria provide a framework to determine the appropriate discharge for each participant in its policies and procedures manual and participant handbook.	Are there ever instances where a participant's discharge decision differs from that described in the Participant Handbook? [If yes]: Please explain.	

	Standard 8: Monitoring and Evaluation			
8A <sup>43</sup>	Maintaining Data Electronically	Does the FTC maintain its own data system?		
	An electronic database stores information about participant demographic characteristics, participant performance, participant needs, substance use treatments, mental health	[If yes]: When (how frequently) does data entry into the FTC system occur?		
	treatments, recovery supports, reunification supports, criminal justice involvement, child needs, services provided to children, other parent/caregiver needs, family needs, services provided to family members, child welfare court actions (e.g., trial reunification), child welfare court processes (e.g., continuance), child welfare indicators (e.g., reunification), child well-being indicators (e.g., assessment findings), caregiver well-being indicators (e.g., assessment findings), and long-term outcomes (e.g., reentry).	[If yes]: What data does the FTC collect?[If not answered]: What specific variables do the FTC track throughout a participant's involvement in the FTC?		

<sup>&</sup>lt;sup>43</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

8B	Continuous Quality Improvement	When does data entry occur?	
	Data entry occurs within 48 hours of each activity/event and data are routinely monitored for quality assurance.	What happens with the data that are collected?	
	Data summaries provide real-time information on participants, processes, outcome measures. Data	[If not answered]: Does the team view data summaries or reports?	
	summaries inform policy setting, sustainability efforts, quality improvement efforts. Policies, procedures, and outcomes are evaluated	[If yes]: What type of information do these summaries cover?	
	annually. After this review, action plan is developed to address challenges, incorporate best practices, improve outcomes.	Does the steering and/or oversight committee view data summaries or reports?	
		[If yes]: What does the steering/oversight committee do with this information?	
		How often are policies, procedures, and outcomes evaluated?	
		[If not answered]: How is the data used to improve policies and practices?	

8C	Evaluating Adherence to Best Practices	How does the FTC monitor its adherence to	
		best practice standards?	
	FTC adheres to best practice standards.		

8D	Use of Rigorous Evaluation Methods	How does the FTC conduct evaluations of its practices and outcomes?	
	Rigorous evaluation methods, including the use of comparison groups when feasible and		
	appropriate, are used to address the pertinent evaluation questions.		

## **Appendix B: Interview – Treatment**

Provision Number	Provision & Key Concepts	Interview Q	Notes	Rating		
	Standard 1: Organization & Structure					
1F	<b>Communication &amp; Information Sharing</b> Team shares case information in a timely manner	How do your providers communicate information to the FTC team regarding participant behaviors?				
	using email.	What information is shared?				
	Team shares information with each other on participant behavior, caregiver progress, child progress, family progress.					

	Standard 4: Early Identification, Screening, and Assessment				
4C	Use of Valid and Reliable Screening and Assessments for Caregivers and Families	What assessment instruments are used to make substance use disorder (SUD) treatment decisions with FTC clients?			
	Valid and reliable instruments <sup>44</sup> are used to screen and assess appropriate treatment level-of-care.				

<sup>&</sup>lt;sup>44</sup> For information on determining whether a screening/assessment instrument is validated, see Appendix G of the Site Visit Guide.

	Standard 5: Timely, Hi	gh-Quality, and Appropriate Substance Use Dis	order Treatment	
5A <sup>45</sup>	Timely Access to Appropriate Substance Use Treatment	How does your agency ensure that FTC participants access treatment as quickly as possible?		
	Protocols and practices ensure timely access to an appropriate substance use treatment.			

<sup>&</sup>lt;sup>45</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

5B*	Matching Treatment to Assessed Need	Describe the process of SUD treatment	
_		level-of-care referral or placement.	
	Level of care assessment is conducted by a		
	qualified treatment provider.	[If response is unclear]: How often are FTC-	
		referred participants re-assessed for SUD	
	Treatment is adjusted based on ongoing formal	treatment need during their program	
	reassessments to meet participants' clinical	participation?	
	needs.		
		[If reassessments occur]: What is	
		the purpose of these re-	
		assessments?	

5C <sup>46</sup>	Comprehensive Continuum of Care	What levels of SUD treatment do FTC-	
		referred participants have access to?	
	Participants have access to a continuum of SUD		
	treatment that includes the following levels of	How long are participants in SUD	
	care: outpatient treatment, intensive outpatient	treatment?	
	treatment, partial hospitalization,		
	residential/inpatient treatment, medical detox.	[If no mention of aftercare already]: Are	
		aftercare services available to FTC-referred	
	Medication management is available at each level	participants? If so, can you describe the	
	of care.	aftercare services?	
	Each participant's SUD treatment dosage and		
	duration are sufficient to achieve and sustain		
	recovery.		
	After acute SUD treatment is no longer required,		
	participants engage in continuing care to		
	maintain stable health and recovery.		

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<sup>&</sup>lt;sup>46</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

5D	Integrated Treatment of Co-Occurring Substance Use and Mental Health Disorders Integrated treatment plans address the needs of participants who have co-occurring substance use and mental health disorders in a coordinated manner.	What services are provided to FTC-referred participants who have co-occurring substance use and mental health disorders? [If specific agency does not offer services for co-occurring substance use and mental health disorders]: Are FTC clients referred elsewhere for treatment that addresses co- occurring substance use and mental health disorders?	

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<sup>&</sup>lt;sup>47</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

5F	Gender-Responsive Treatment <sup>48</sup>	How often do your providers who work with FTC-referred participants receive	
	Treatment providers are trained in gender-	training related to gender-responsive or	
	responsive treatment.	gender-specific services (e.g., women- centered treatment)?	
	• Treatment meets the needs of all genders		
	because it includes gender-specific groups, child care, medical and nutritional interventions.	Does the treatment center you represent provide gender-responsive or gender- specific treatment to participants (e.g., women-centered treatment)?	
		[If yes]: Describe the gender- responsive nature of SUD treatment offered to FTC-referred caregivers.	
		[If no]: Are clients referred elsewhere for gender-responsive treatment?	

<sup>&</sup>lt;sup>48</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

5G	Treatment for Pregnant Women	What services and supports are available to pregnant ETC participants?	
	FTC protocol and practices identify the unique needs of pregnant participants. FTC provides treatment and other services to meet these women's needs, including substance use interventions that include MAT when clinically indicated.	pregnant FTC participants? [If not already answered]: Does your agency provide or coordinate MAT treatment for pregnant women who have an opioid use disorder?	
		[If no]: Are pregnant clients referred elsewhere for MAT?	

5H	Culturally Responsive Treatment <sup>49</sup>	How does your agency respond to the cultural and/or linguistic needs of FTC	
	The services and practices of the FTC substance use treatment providers are respectful of and responsive to the cultural and linguistic needs of	participants? [If not answered]: Are clients	
	FTC participants.	referred elsewhere for culturally and linguistically responsive treatment?	

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<sup>&</sup>lt;sup>49</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

51	Evidence-Based Manualized Treatment <sup>50</sup>	What evidence-based, manualized treatments are used with FTC-referred	
	Substance use treatment agencies that partner with the FTC provide evidence-based, manualized	caregivers, children, and families?	
	treatments.	How frequently is model fidelity assessed for these evidence-based treatments?	
	For these agencies, fidelity to the evidence-		
	based, manualized treatments model is assessed on a regular basis.	What training and/or certification do clinicians delivering evidence-based	
		interventions with FTC-referred participants	
	To ensure continuing fidelity to the model, substance use treatment providers are trained,	undergo?	
	certified (when applicable), and clinically supervised.		
	Supervised.		

<sup>&</sup>lt;sup>50</sup> For information on determining whether a treatment is evidence-based, see Appendix G of the Site Visit Guide.

5J	Medication-Assisted Treatment (MAT)	To your knowledge, are individuals using	
	FTC dess not evolude individuals vains or	MAT excluded from the FTC program?	
	FTC does not exclude individuals using or		
	considering MAT from FTC program.	How is it determined that a participant is	
		eligible/appropriate to receive MAT?	
	FTC participants receive MAT for substance use		
	disorders based on an objective determination by	How are cases handled in which MAT is	
	a qualified medical provider that MAT is	recommended to an FTC-referred	
	medically indicated.	participant but the participant does not	
		want to use it?	
	FTC does not mandate MAT.		

5К	Alcohol and Other Drug Testing Protocols Standardized drug testing protocol specifies the frequency (a minimum of two times per week), scheduling, randomization procedures, observation, duration, and breadth of testing. The purpose of drug testing protocol is to monitor participants' use of illicit and licit substances, outline processes for confirmation, notification, and dissemination of test results.	Does your agency conduct drug testing with FTC-referred participants? [If yes]: What are the testing protocols used with these participants? [If not already answered]: Is drug testing random? Is drug testing observed? Is drug tested completed at least 2x weekly? [If not already answered]: Do participants have an equal chance of getting tested every day, even on weekends and holidays? What are the purposes of the drug testing protocol?	

5L	Treatment Provider Qualifications	What are the entities that license, certify, or accredit your agency?	
	The FTC's partner treatment providers are		
	licensed, certified, or accredited.	[If entities specified]: How	
		frequently is	
	Treatment providers receive continuing	licensure/certification/or	
	education and clinical supervision to ensure	accreditation renewed?	
	adoption of best practices in treatment of SUD,		
	mental health, and related disorders.	What are the continuing education training	
		requirements for providers at your agency?	

	Standard 6: Comprehensive Case Management, Services, and Supports for Families			
6C	Recovery Supports	Does your agency connect FTC-referred participants with recovery		
	The FTC links participants with professionally	specialists/coaches or peer support		
	trained or certified recovery specialists (also	specialists/mentors?		
	known as recovery coaches), or with peer			
	support specialists (also known as peer mentors).	[If yes]: How do participants gain access to these supports?		
	FTC team actively works with participants to build			
	a community-based recovery support network.	To which community-based recovery programs does your		
	FTC does not require participants to attend any	agency refer FTC-involved		
	specific peer support group, but rather provides a range of options.	participants? Are participants required to attend?		

6E	Parenting and Family-Strengthening Programs	Does your agency provide parenting and	
		family-strengthening interventions to FTC-	
	All evidenced-based interventions <sup>51</sup> are	involved participants?	
	characterized by including a caregiver-child		
	interaction component (in which caregivers and	[If yes]: What are the components	
	children attend sessions together), are culturally	of the parenting and family-	
	appropriate, and designed to meet the needs of	strengthening interventions?	
	families affected by parental substance use		
	disorder and co-occurring additional risk factors.	[If not already answered]: Do caregivers and	
		children interact as a part of the	
	FTC team matches interventions to the needs of each child, parent, and family.	intervention/program?	
		How does the FTC team determine who is	
		referred to the family	
		interventions/programs?	

<sup>&</sup>lt;sup>51</sup> For information on determining whether a treatment is evidence-based, see Appendix G of the Site Visit Guide.

6G	Trauma-Specific Services for Children and Caregivers	What trauma services are available to FTC participants and their child(ren)?	
	Trauma-specific interventions are available to FTC participants and FTC children.	[If not already answered]: Are these services evidence-based or evidence-informed?	
	These trauma-specific interventions are evidence-based or evidence-informed. Trained	How is fidelity to the model monitored?	
	treatment professionals provide trauma-specific therapies with fidelity.	What trauma screens/assessments are used with participants and their child(ren)?	
	FTC participants are screened/assessed for trauma. Children of FTC participants are screened/assessed for trauma.		

	Standard 7: Therapeutic Responses to Behavior			
7B	Star Treatment Adjustments If such a non-compliance issue exists, adjustments in the type of treatment, level of care, and dosage are based on the clinical needs of the participant, including substance use and mental, physical, social, or emotional health. Adjustments made in consultation with clinical treatment professionals. Treatment adjustments are not used as incentive or sanction.	How are adjustments in treatment, including type, level of care, and dosage determined for FTC-referred participants? [If not already answered]: What factors and considerations influence treatment adjustment decisions? [If not already answered]: Are treatment adjustments used as an incentive or sanction?		

## Appendix C: Observation – FTC Staffing

Provision Number	Provision & Key Concepts	Observation Item	Notes	Rating		
	Standard 1: Organization & Structure					
1A	Multidisciplinary & Multisystemic Collaborative Approach         Coordination and collaboration between court system, child welfare system, SUD and mental health treatment, children's services, and related health, education, and social service systems.	Multidisciplinary team members collaborate, particularly those who would typically have an adversarial relationship in a traditional court setting. Each professional "stays in their lane" while also collaborating.				

Provision Number	Provision & Key Concepts	Observation Item	Notes	Rating
1C	Multidisciplinary Team Ongoing FTC operations are administered by a team of professionals, including the judge, FTC coordinator, child welfare agency/state's attorney, caregiver's attorney, child's attorney, guardian ad litem and/or court-appointed special advocate, child welfare worker, and providers from SUD treatment, MH treatment, child & adolescent services, and related agencies.	Team members engaged at staffing and hearing include FTC coordinator, the judge, child welfare/state's attorney, caregiver's attorney, children's attorney, guardian ad litem or court appointed special advocate, child welfare caseworker, substance use treatment provider, mental health treatment provider, children's services provider, and other social services agency representative. (See Observation Checklist on the FIT Scoring Instrument)		

Provision Number	Provision & Key Concepts	Observation Item	Notes	Rating
1J	Pre-Court Staffing & Review Hearing	All FTC team members present at		
		staffings.		
	A progress report is developed and read by all			
	team members prior to each staffing.	During staffing, team discusses progress		
	Operational team members attend staffings	and needs of children, caregivers, and		
	Operational team members attend staffings. Staffing prepares team for hearing.	family and recommends coordinated response to participant behavior to judge.		
	Starting prepares team for nearing.	response to participant behavior to judge.		
	During staffing, team discusses progress and			
	needs of children, caregivers, and family and			
	recommends coordinated response to participant			
	behavior to judge.			
	The FTC court review hearing occurs immediately			
	after staffing.			

	Standard 2: Role of the Judge			
28	Judicial Decision Making         In pre-court staffing, the judge and operational team discuss the recommended responses for each case based on information about participant attendance, progress, engagement in treatment, complementary services received, children's needs and services, and compliance with child welfare court and child welfare agency requirements.         The judge makes the final decision about the court-ordered response.	During staffings, judge guides the team, considers contributions from all team members when making decisions, and asks for professional input as necessary. Judge makes the final decision about court-ordered responses.		

2C	Participation in Pre-Court Staffings	Judge is present and engaged at staffing; Judge is involved in discussions regarding	
	The FTC judge consistently attends pre-court staffing to discuss participant progress, updates, and behaviors.	all participants.	

	Standard 4: Early Identification, Screening, and Assessment			
4A	Target Population, Objective Eligibility and Exclusion Criteria	All eligibility/exclusion determinations are based on objective assessment and		
	<ul> <li>FTC targets families that require intensive services, increased support and monitoring, and judicial oversight to comply with child welfare system case plan, complete SUD treatment, and safely reunify with children.</li> <li>FTC defines target population using objective eligibility and exclusion criteria.</li> <li>FTC communicates eligibility criteria in writing to all referral sources.</li> <li>FTCs do not make eligibility determinations based on subjective criteria.</li> </ul>	criteria.		

4E	Identification and Resolution of Barriers to	Team uses the same process of identifying	
	Recovery and Reunification	problems for all participants (e.g., relies	
		on case reports for all clients).	
	The FTC systematically monitors community-	<b>-</b>	
	based barriers that hinder participants, children,	Team engages in problem-solving to	
	and families from obtaining services or progressing toward goals.	resolve any identified barriers to progress.	

	Standard 6: Comprehensive Case Management, Services, and Supports for Families				
6A	Standard 6: Comprehen Intensive Case Management and Coordinated Case Planning Participants are provided intensive supportive case management, including a coordinated case plan (or a set of case plans) based on reliable and valid needs assessments that is systematically monitored to ensure that all family members receive services to meet their needs.	Team discusses connecting participants with services to address issues identified in assessments, how involved participants are with services and resources, and how participants are progressing with services and resources.	orts for Families		

6B	Family Involvement in Case Planning	Case planning discussions demonstrate	
		focus on strengths of other family	
	Operational team's uses a family-centered,	members.	
	culturally responsive <sup>52</sup> , and strengths-based		
	approach in which children, caregivers, and		
	family members (as appropriate) are active		
	partners in identifying their needs and strengths, making decisions about treatment, setting goals,		
	and achieving desired outcomes.		
	and achieving desired butcomes.		

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<sup>&</sup>lt;sup>52</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

Standard 7: Therapeutic Responses to Behavior				
A Child and Family Focus Responses to behavior are made in child's best interest and do not: • negatively affect participants, children, or families • interfere with child welfare court hearings or requirements Parenting time is not used as an incentive or sanction.	hdard 7: Therapeutic Responses to Behavior Decisions about parenting/family time are made with input from child welfare specialists and based on child's best interests.			

7B	Treatment Adjustments	Treatment adjustments are implemented	
	<b>-</b>	by treatment professionals, in	
	Team considers whether non-compliance is due	consultation with members of the FTC	
	to a therapeutic problem before issuing a	team	
	sanction.		
		Team members discuss whether non-	
	If such an issue exists, adjustments in the type of	compliance could be a result of needing a	
	treatment, level of care, and dosage are based on	treatment adjustment.	
	the clinical needs of the participant's substance		
	use and mental, physical, social, or emotional	Treatment adjustments are not a reward	
	health.	or punishment.	
	Adjustments made in consultation with clinical	Judge discusses treatment adjustments in	
	treatment professionals.	a health- and wellbeing-centered way.	
	Treatment adjustments are not used as incentive		
	or sanction.		

7C	Complementary Service Modifications	Team discusses whether non-compliance	
		could be related to the need for a support	
	Team considers whether noncompliance is due to	service modification (e.g., transportation,	
	an unavoidable or structural barrier before	change in housing).	
	issuing a sanction.		
		When service needs arise, the team	
	If such is determined, FTC team responds by	responds by identifying additional	
	providing additional complementary supports	supports and services.	
	and services.		

7E	Incentives and Sanctions to Promote	Team discusses incentives and sanctions	
	Engagement	during staffing.	
	The FTC develops a range of responses		
	(incentives and sanctions) of varying magnitudes		
	that it employs throughout each participant's		
	time in the FTC.		
	FTC uses more incentives than sanctions.		

7F	Equitable Responses	Team cites individual circumstances, child	
		well-being, and the therapeutic needs of	
	All relevant factors for each participant are	each participant and family member when	
	considered and team members must articulate	assigning consequences and when making	
	their reasoning when recommending	a recommendation to the FTC judge	
	consequences for a participant before the judge.	regarding an incentive or sanction.	
	Consequences do not differ by gender, race,		
	ethnicity, nationality, socioeconomic status, or		
	sexual orientation and are equivalent to those		
	received by other participants who engage in		
	comparable conduct in similar circumstances and		
	with similar expectations.		

7K	Professional Demeanor	Team uses person-centered, respectful	
		language when discussing participant	
	Operational team's interactions with the	needs and progress.	
	participant, children, family, and other members		
	of the participant's support system are respectful		
	and professional.		

7L	Child Safety Interventions	Decisions about parenting/family time are made with input from child welfare	
	Appropriate child safety interventions,	specialists and based on child's best	
	placement, and parenting time changes are made	interests.	
	based on safety, well-being, and permanency		
	indicators.	Changes in placement are based on the	
		best interest of the child(ren) and safety,	
	Child welfare workers are responsible for	well-being, and permanency indicators.	
	ensuring child safety and may not delegate that	the setting, and permanency maleators	
	responsibility.		

7M	Use of Addictive or Intoxicating Substances	Decisions regarding prescription	
		medications are made only by doctors or	
	Medical experts determine whether a	medical experts.	
	prescription for an addictive or intoxicating		
	medication is medically indicated and whether	Regardless of whether the substance is	
	safe alternatives are available.	legal or illegal, substance use behaviors are treated the same.	
	Use of nonmedically-indicated intoxicating or		
	addictive substances (e.g., alcohol, cannabis,		
	prescription medications) is addressed,		
	regardless of the substance's licit/illicit status.		

## Appendix D: Observation – FTC Hearing

Provision Number	Provision & Key Concepts	Observation Item	Notes	Rating		
	Standard 1: Organization & Structure					
1A	Multidisciplinary & Multisystemic Collaborative Approach Coordination and collaboration between court system, child welfare system, SUD and mental health treatment, children's services, and related health, education, and social service systems.	Multidisciplinary team members collaborate, particularly those who would typically have an adversarial relationship in a traditional court setting. Each professional "stays in their lane" while also collaborating.				

Provision Number	Provision & Key Concepts	Observation Item	Notes	Rating
1C	Multidisciplinary Team Ongoing FTC operations are administered by a team of professionals, including the judge, FTC coordinator, child welfare agency/state's attorney, caregiver's attorney, child's attorney, guardian ad litem and/or court-appointed special advocate, child welfare worker, and providers from SUD treatment, MH treatment, child & adolescent services, and related agencies.	Team members engaged at staffing and hearing include FTC coordinator, the judge, child welfare/state's attorney, caregiver's attorney, children's attorney, guardian ad litem or court appointed special advocate, child welfare caseworker, substance use treatment provider, mental health treatment provider, children's services provider, and other social services agency representative. (See Observation Checklist on the FIT Scoring Instrument)		

Provision Number	Provision & Key Concepts	Observation Item	Notes	Rating
1J	Pre-Court Staffing & Review Hearing	The same cases discussed at staffing appear		
	A progress report is developed and read by all	during the hearing.		
	team members prior to each staffing.	The same information discussed at staffing		
		is presented to participants during hearing.		
	Operational team members attend staffings.			
	Staffing prepares team for hearing.	(See Observation Checklist on the FIT Scoring Instrument)		
	During staffing, team discusses progress and needs of children, caregivers, and family and			
	recommends coordinated response to participant behavior to judge.			
	The FTC court review hearing occurs immediately after staffing.			

Standard 2: Role of the Judge			
2D	Interaction with Participants	FTC Hearing	
	At FTC hearings, judge spends a minimum of	Judge spends at least 3 minutes talking to	
	three minutes talking to each participant.	each participant about their engagement in required FTC services, child welfare case	
	Judge responds to the participant's behavior and	plan requirements, and services for the	
	provides a rationale for these responses.	participant's children and family.	
	Judge reinforces the treatment adjustments and	Judge explains to participants-in plain	
	responses to behaviors.	language-the reasoning behind incentives, sanctions, and treatment adjustments.	
	Judge is engaging, supportive, and encouraging,		
	and works to build rapport with the participant.	Judge provides consistent information to	
	Judge emphasizes participant strengths and the	participants regarding treatment adjustments and safety interventions	
	importance of the participant's continued	imposed in response to participant	
	engagement in treatment and services.	behaviors.	
	Judge encourages the participant to discuss his or	Judge demonstrates warmth and eye	
	her progress, progress the children are making,	contact with participants. Judge uses	
	activities to enhance parenting skills, and	participant's name. Judge engages in two-	
	parenting challenges or unmet needs.	way conversation. Judge provides positive	
		feedback to participants.	
		Judge highlights participants'	
		strengths/achievements.	
		Judge asks participant to verbalizes their	
		own opinions on their progress, their	
		child(ren)'s progress, challenges, etc.	

	Standard 4: Early Identification, Screening, and Assessment					
4E	Identification and Resolution of Barriers to Recovery and Reunification	Team uses the same process of identifying problems for all participants (e.g., relies on case reports for all clients).				
	The FTC systematically monitors community-					
	based barriers that hinder participants, children, and families from obtaining services or	Team engages in problem-solving to resolve any identified barriers to progress.				
	progressing toward goals.					

	Standard 6: Comprehensive Case Management, Services, and Supports for Families				
6B	Standard 6: Comprehe Family Involvement in Case Planning Operational team's uses a family-centered, culturally responsive <sup>53</sup> , and strengths-based approach in which children, caregivers, and family members (as appropriate) are active partners in identifying their needs and strengths, making decisions about treatment, setting goals, and achieving desired outcomes.	nsive Case Management, Services, and Suppo Feedback regarding case planning is solicited from participant and other family members.	orts for Families		

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<sup>&</sup>lt;sup>53</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

6C	Recovery Supports	Team encourages participant to engage	
	The FTC links participants with professionally	with recovery coach/peer specialist and community-based recovery.	
	trained or certified recovery specialists (also		
	known as recovery coaches), or with peer	Team problem-solves with client on the	
	support specialists (also known as peer mentors).	topic of peer and community/natural	
	FTC team actively works with participants to build	recovery supports when warranted.	
	a community-based recovery support network.		
	FTC does not require participants to attend any		
	specific peer support group, but rather provides a range of options.		

6F	Reunification and Related Supports	Participants who are nearing or have completed reunification are offered specific	
	FTC participants and their families receive reunification and related supports.	reunification supports.	

6H	Services to Meet Children's Individual Needs	Participants' children are referred for	
	Children of participants are connected to a	services.	
	Children of participants are connected to a continuum of high-quality prevention,	Children's behaviors and progress in	
	intervention, and treatment services to meet	services are discussed.	
	their physical, cognitive, social, emotional,		
	behavioral, developmental, therapeutic, and	Children's service plans change in response	
	educational needs identified by a comprehensive	to newly identified needs.	
	assessment, ideally through a medical home for the family.		
	the family.		
	Operational team matches developmentally		
	appropriate services to the child's identified		
	needs and monitors providers so that services are		
	delivered with fidelity.		

61	Complementary Services to Support Caregivers and Family Members	Participants and their family members are offered support services to address identified unmet needs (e.g., child care,	
	Comprehensive range of complementary support services (e.g., child care, employment, educational, domestic violence, legal, transportation, food, clothing, housing, medical and dental care) are chosen to meet the	employment, educational, domestic violence, legal, transportation, food, clothing, housing, medical and dental care).	
	individual needs of participants and their family members as identified by <i>formal assessment</i> to promote engagement and retention in SUD treatment and for sustained recovery and		
	permanency.		

	Standard 7: Therapeutic Responses to Behavior			
7A	Child and Family Focus	Team models strengths orientation & consistency to caregivers.		
	Responses to behavior are made in child's best			
	interest and do not:	Team applauds/incentivizes strengths-		
	<ul> <li>negatively affect participants, children, or families</li> </ul>	based, consistent parenting.		
	<ul> <li>interfere with child welfare court hearings or requirements</li> </ul>	Parenting time is not used as a reward or punishment.		
	Parenting time is not used as an incentive or sanction.	Team provides incentives that support positive family time and are child-focused		
		(things for, or to do with, children).		

7B	Treatment Adjustments	Treatment adjustments are implemented	
		by treatment professionals, in consultation	
	Team considers whether non-compliance is due	with members of the FTC team.	
	to a therapeutic problem before issuing a		
	sanction.	Team members discuss whether non-	
		compliance could be a result of needing a	
	If such an issue exists, adjustments in the type of treatment, level of care, and dosage are based on	treatment adjustment.	
	the clinical needs of the participant's substance use and mental, physical, social, or emotional health.	Treatment adjustments are not a reward or punishment.	
		Judge discusses treatment adjustments in a	
	Adjustments made in consultation with clinical treatment professionals.	health- and wellbeing-centered way.	
	Treatment adjustments are not used as incentive		
	or sanction.		

7C	Complementary Service Modifications	Participants are not punished when structural or individual barriers result in	
	Team considers whether noncompliance is due to an unavoidable or structural barrier before issuing a sanction.	non-compliance.	
	If such is determined, FTC team responds by providing additional complementary supports and services.		

7E	Incentives and Sanctions to Promote	Judge delivers a variety of incentives and	
	Engagement	sanctions. Judge uses incentives more often	
		than sanctions.	
	The FTC develops a range of responses		
	(incentives and sanctions) of varying magnitudes		
	that it employs throughout each participant's		
	time in the FTC.		
	FTC was many incentives then constinue		
	FTC uses more incentives than sanctions.		

7F	Equitable Responses	Responses to participants are of an equivalent magnitude for similar	
	All relevant factors for each participant are	infractions.	
	considered and team members must articulate		
	their reasoning when recommending	Responses to participants do not differ	
	consequences for a participant before the judge.	across race, ethnicity, and gender.	
	Consequences do not differ by gender, race,	Team cites individual circumstances, child	
	ethnicity, nationality, socioeconomic status, or	well-being, and the therapeutic needs of	
	sexual orientation and are equivalent to those	each participant and family member when	
	received by other participants who engage in	assigning consequences and when making a	
	comparable conduct in similar circumstances and	recommendation to the FTC judge	
	with similar expectations.	regarding an incentive or sanction.	

71	Timely Response Delivery	Participant behaviors are addressed at the	
		first opportunity.	
	The FTC adheres to legal and ethical		
	communication protocols and responds to		
	compliant or noncompliant behavior as soon as		
	possible in adherence to FTC policies and		
	procedures to minimize the time from event to		
	response.		

7J	Opportunity for Participants to be Heard	When there is evidence of non-compliance, participants have an opportunity to confer	
	The FTC gives all participants an opportunity to express their perspectives on their behavior,	with an attorney and share their explanation of the behavior with the judge.	
	disagreements about facts, and other relevant issues, and/or ask their attorney or defense		
	representative to do so.		

7K	Professional Demeanor	Team uses person-centered, respectful	
		language when discussing participant needs	
	Operational team's interactions with the	and progress.	
	participant, children, family, and other members	<b>-</b>	
	of the participant's support system are respectful	Team uses participants' and natural	
	and professional.	supports' names, eye contact with participants, respectful and professional	
		tone, and formal and professional	
		language.	

7M	Use of Addictive or Intoxicating Substances	Regardless of whether the substance is legal or illegal, substance use behaviors are	
	Medical experts determine whether a prescription for an addictive or intoxicating medication is medically indicated and whether safe alternatives are available.	treated the same.	
	Use of nonmedically-indicated intoxicating or addictive substances (e.g., alcohol, cannabis, prescription medications) is addressed, regardless of the substance's licit/illicit status.		

## Appendix E: Document Review

Provision         Provision & Key Concepts         Document Source	Notes	Rating
Standard 1: Organization & Structure		
1B       Partnerships, Community Resources & Support       Document #4 (MOU): Describes community partnerships' roles, responsibilities, and functions.         1B       MOUs that describe roles, responsibilities, and functions.       Document #4 (MOU): Describes community partnerships' roles, responsibilities, and functions.		

Provision Number	Provision & Key Concepts	Document Source	Notes	Rating
1C	Multidisciplinary Team Ongoing FTC operations are administered by a team of professionals, including the judge, FTC coordinator, child welfare agency/state's attorney, caregiver's attorney, child's attorney, guardian ad litem and/or court-appointed special advocate, child welfare worker, and providers from SUD treatment, MH treatment, child & adolescent services, and related agencies.	Document #1 (P&P Manual): review list of operational team members for team composition as described in provision		

Provision Number	Provision & Key Concepts	Document Source	Notes	Rating
1D	Governance Structure FTC governance structure includes oversight/executive body, steering committee, and operational team. The oversight/executive body includes executive-level representatives from the child welfare court system, all partner organizations, and other community leadership/elected officials. The steering committee includes supervisory-level staff of all partner organizations. Roles, responsibilities, and communication among each of the three governance committees are clearly defined.	Document #1 (P&P Manual): Includes clear definitions of governance structure roles, governance structure responsibilities, and communication protocols among governance structures. Notes three-tier governance structure that includes oversight/executive body, steering committee, and operational team. States that oversight/executive body includes executive-level representatives from the child welfare court system, all partner organizations, and other community leadership/elected officials. States that steering committee includes supervisory-level staff of all partner organizations. [If noted]: Who is a part of the community-level committee comprised of partner organizations AND <sup>54</sup> Document #4 (MOU): Describes governance committees' roles, responsibilities, and communication protocols.		

 $<sup>^{\</sup>rm 54}$  See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

Provision Number	Provision & Key Concepts	Document Source	Notes	Rating
1E	Shared Mission & Vision Vision and mission statements exist and were collaboratively developed by partner organizations. Vision and mission statements were developed to reflect each system's values and jointly identify measurable goals and objectives.	Document #1 (P&P Manual): Vision and mission statements include measurable goals and objectives.		

Provision Number	Provision & Key Concepts	Document Source	Notes	Rating
	Provision & Key Concepts Communication & Information Sharing FTC has established information-sharing protocols compliant with all confidentiality requirements, ethics, and laws.	Document Source           Document #1 (P&P Manual): Information-sharing protocols are explicit and compliant with all confidentiality requirements, ethics, and laws.	Notes	Rating

Provision Number	Provision & Key Concepts	Document Source	Notes	Rating
1G	Cross-Training & Interdisciplinary Education	Document #1 (P&P Manual): review		
		training/education plan for components as		
	FTC has a training and education plan. Training	described in provision		
	and education for FTC operational team includes			
	onboarding/orientation training, annual cross- training, and ongoing interdisciplinary education.	OR		
		Document #7 (FTC Team Continuing		
	Training and education is offered to FTC oversight	Education Documents): Indicates that		
	body, steering committee, operational team	training & education for FTC operational		
	members and other community agencies.	team includes annual cross-training and		
	The first state of the state of	ongoing interdisciplinary education.		
	Training and education for steering committee			
	and executive body includes onboarding/orientation training, annual cross	OR		
	training, ongoing interdisciplinary education.	Document #8 (Orientation Training		
		Curriculum for New Operational Team		
	Training and education for other community	Members): Indicates that FTC operational		
	agencies include onboarding/orientation training,	team members receive		
	annual cross training, and ongoing	onboarding/orientation training.		
	interdisciplinary education.			

Provision Number	Provision & Key Concepts	Document Source	Notes	Rating
1H	Family-Centered, Culturally-Relevant, and Trauma-Informed Approach <sup>55</sup> Daily operations and interactions reflect family- centered, culturally relevant, and trauma- informed approaches by staff who recognize and respond to signs and symptoms of trauma and are alert to culturally relevant factors.	Document #1 (P&P Manual): Uses language that reflects a family-centered approach, meaning it addresses the needs of the entire family; a culturally relevant approach, meaning it is alert to culturally relevant factors; and a trauma-informed approach, meaning it recognizes & responds to signs & symptoms of trauma.		

<sup>&</sup>lt;sup>55</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

Provision Number	Provision & Key Concepts	Document Source	Notes	Rating
	Provision & Key Concepts Policy & Procedure Manual Describes policies, procedures, day-to-day responsibilities of team members, and team member roles and responsibilities. Contains the mission, vision, goals, eligibility criteria, referral and entry process, phase structure, monitoring, recovery and reunification support services, drug and alcohol testing procedures, coordinated responses to behavior, and protocols to determine necessary treatment and complementary services for children, caregivers, and families.	Document Source Document #1 (P&P Manual): review for all items described in provision	Notes	Rating

Provision Number	Provision & Key Concepts	Document Source	Notes	Rating
1J	<ul> <li>Pre-Court Staffing &amp; Review Hearing</li> <li>FTC team participates in pre-court staffing meetings. Staffing meeting occurs immediately before the FTC court review hearing. During staffing, team discusses progress and needs of children, caregivers, and family and recommends coordinated response to participant behavior to judge.</li> <li>A progress report is developed and read by all team members prior to each staffing.</li> </ul>	Document #9 (Child welfare court reports/FTC progress reports/Plan of Safe Care): Includes information on progress and needs of children, caregivers, and family. <b>OR</b> <sup>56</sup> Document #1 (P&P Manual): States that FTC team participates in pre-court staffing meetings. States that staffing meeting occurs immediately before the FTC court review hearing. States that during staffing, team discusses progress and needs of children, caregivers, and family. States that during staffing, team recommends coordinated response to participant behavior to judge.		

<sup>&</sup>lt;sup>56</sup> See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

	Standard 2: Role of the Judge				
2A	Convening Partners	Document #1 (P&P Manual): Outlines judicial responsibilities to include convening			
	The judge convenes the operational team, steering committee, and executive committee.	the operational team, convening the steering committee, convening the executive committee, oversight of the			
	During these convenings, the judge guides the operational team in the development, implementation, and management of ongoing operations and actualization of the FTCs mission and vision.	development of ongoing operations and actualization of the FTC's mission and vision, oversight of ongoing operations and actualization of the FTC's mission and vision, and management of ongoing operations and actualization of the FTC's mission and vision.			

2E	Professional Training	Document #6 (Judge's Legal Education/	
		Training Certificates): Indicates that FTC	
	The FTC judge obtains training on mental health,	judge has obtained training on mental	
	substance use disorders, child welfare, and legal	health, substance use disorders, child	
	and constitutional issues related to FTCs.	welfare, and legal and constitutional issues related to FTCs.	
	The FTC judge attends annual training		
	conferences and workshops.	Indicates that FTC judge attended annual	
		training conferences and workshops.	
	The FTC judge attends training with other		
	operational team members to assure cross-	Indicates that FTC judge attended training	
	training.	with other operational team members to	
	5	assure cross-training.	
		0	

2F	Length of Judicial Assignment to FTC	Document #5 (Judge's Appointment Date): Indicates that judge has presided over FTC	
	The FTC judge presides over the FTC for at least two consecutive years.	for at least 2 consecutive years.	

	Standard 3: Equity and Inclusion				
3A <sup>57</sup>	Equitable FTC Program Admission Practices The FTC annually examines its eligibility criteria, screening processes, referral processes, entry processes, and assessment processes.	Document #10 (Minutes/Notes): Indicates that the FTC annually examines its eligibility criteria, screening processes, referral processes, entry processes, and assessment processes.			
	Review of criteria and processes aims to identify and correct any disproportionality in access.				

<sup>&</sup>lt;sup>57</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

3B <sup>8</sup>	Equitable FTC Retention Rates and Child Welfare	Document #10 (Minutes/Notes): Indicates	
	Outcomes	that the FTC is using strategic methods for	
		achieving equitable retention rates and	
	FTC acts strategically to achieve equivalent or	child welfare outcomes.	
	better outcomes for historically marginalized		
	groups compared to the overall child welfare system population.		
	FTC examines equity across the following		
	outcomes: participation, engagement, successful		
	discharge, permanency, and well-being.		

3C <sup>8</sup>	Equitable Treatment	Document #10 (Minutes/Notes):	
		Documents discussion that treatment for	
	Treatment for FTC participants is family centered,	FTC participants is family-centered, gender-	
	gender-responsive, trauma-informed, and	responsive, trauma-informed, and	
	linguistically and culturally appropriate.	linguistically and culturally appropriate.	
	Treatment for FTC participants matches the	Documents discussion that treatment for	
	intensity, dosage, and quality consistent with the	FTC participants matches the intensity,	
	needs and preferences of the individual and	dosage, and quality consistent with the	
	family.	needs and preferences of the participant	
		and family.	
	FTC ensures equivalent outcomes across groups.		

3D <sup>58</sup>	Equitable Responses to Participant Behavior	Document #10 (Minutes/Notes):	
		Documents discussion on equitable	
	FTC administers equitable responses across	responses to participant behavior.	
	groups. Responses to participant behavior are		
	administered using principles of procedural		
	fairness, and are regularly monitored to ensure		
	that they are equivalent in similar situations		
	across groups.		

<sup>&</sup>lt;sup>58</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

3E	Team Training	Document #7 (FTC Team Continuing	
		Education Documents): Indicates that team	
	The FTC provides training on culturally relevant	receives training on culturally relevant	
	services and supports to its operational team and	supports and services.	
	partners.		
		OR <sup>59</sup>	
		Document #8 (Orientation Training	
		Curriculum for New Operational Team Members): Indicates that team onboarding	
		training includes information on culturally	
		relevant supports and services.	

<sup>&</sup>lt;sup>59</sup> See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

	Standard 4	4: Early Identification, Screening, and Assessment	
4A	Target Population, Objective Eligibility and Exclusion CriteriaFTC targets families that are high risk/high need, meaning they require intensive services, increased support and monitoring, and judicial oversight to comply with child welfare system case plan, completed substance use disorder treatment and safely reunify with children.This high rick/high need target population is defined in the FTCs objective eligibility and exclusion criteria.FTC communicates eligibility criteria in writing to all referral sources.FTCs do not make eligibility determinations based on subjective criteria.	Document #1 (P&P Manual): Specifies that the FTC targets families that are high risk/high need, meaning they require intensive services, increased support and monitoring, judicial oversight to comply with child welfare system case plan, complete SUD treatment, and safely reunify with children.         Includes objective eligibility and exclusion criteria.         Specifies that FTCs do not make eligibility determinations based on subjective criteria.	

4B <sup>60</sup>	Standardized and Systematic Referral,	Document #1 (P&P Manual): Specifies	
	Screening, and Assessment Process	standardized processes for referring,	
		screening, and assessing.	
	The FTC uses processes for referring, screening		
	and assessing.	States that the standardized referral,	
		screening, and assessment processes apply	
	These processes for referring, screening and	to caregivers, children, and families.	
	assessing FTC participants are agreed upon,		
	standardized, and systematic.		
	These standardized referral, screening, and		
	assessment processes apply to caregivers,		
	children, and families.		
	Referral sources are trained in when to		
	appropriately refer their participants.		

<sup>&</sup>lt;sup>60</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

4C	Use of Valid and Reliable Screening and	Document #1 (P&P Manual): Specifies that	
	Assessment for Caregivers and Families	valid and reliable instruments are used to	
		screen and assess caregivers/families	
	Valid and reliable instruments <sup>61</sup> used to screen	referred to FTC for program eligibility, case	
	and assess caregivers/families referred to FTC for	planning for children, caregivers, and family	
	program eligibility, case planning for children,	members, appropriate treatment level-of-	
	caregivers, and family members, appropriate	care, and complementary services.	
	treatment level-of-care, complementary services.		
		OR	
		[If FTC does their own screening/	
		assessing]:	
		Document #14, Document #15, Document	
		#16, Document #17 (Assessment	
		instruments from FTC): Includes valid and	
		reliable instruments used to screen and	
		assess caregivers/families referred to FTC	
		for program eligibility, case planning for	
		children, caregivers, and family members,	
		appropriate treatment level-of-care, and	
		complementary services.	
		OR	
		[If treatment does the assessments]:	
		Document #24, Document #25, Document	
		#26, Document #27 (Assessment	
		Instruments from Treatment): Includes valid	
		and reliable instruments used to screen and	
		assess caregivers/families referred to FTC	
		for program eligibility, case planning for	
		children, caregivers, and family members,	

<sup>&</sup>lt;sup>61</sup> For information on determining whether a screening/assessment instrument is validated, see Appendix G of the Site Visit Guide.

	appropriate treatment level-of-care, and complementary services.	

4D	Use of Valid, Reliable, and Developmentally	[If child welfare or FTC does screening/	
	Appropriate Screening and Assessment for	assessing]:	
	Children <sup>62</sup>	Document #14 (Assessment Instruments	
		from FTC): Includes valid and reliable	
	Children of FTC participants are assessed within a	instruments used to screen and assess case	
	standardized time frame. Children of FTC	planning for children.	
	participants are assessed using validated and		
	developmentally appropriate instruments. Child assessments reoccur at developmentally	OR	
	appropriate intervals.	[If treatment does the assessments]:	
		Document #26 (Assessment Instruments	
		from Treatment): Includes valid and reliable	
		instruments used to screen and assess case	
		planning for children.	

<sup>&</sup>lt;sup>62</sup> For information on determining whether a screening/assessment instrument is validated, see Appendix G of the Site Visit Guide.

4E	Identification and Resolution of Barriers to Recovery and Reunification	Document #9 (Child welfare court reports/FTC progress reports/Plan of Safe Care): Documents that the FTC team	
	The FTC systematically monitors community- based barriers to obtaining services or progressing towards goals for participants, children and families.	systematically monitors community-based barriers to obtaining services for participants, children, and families.	
		OR Document #10 (Minutes/Notes): Documents discussion monitoring and resolution to community-based barriers for participants and their families.	

	Standard 5: Timely, High-Quality, and Appropriate Substance Use Disorder Treatment			
5F	Gender-Responsive Treatment <sup>63</sup>	Document #28 (Treatment Group Schedule): Indicates availability of gender-		
	Treatment providers are trained in gender- responsive treatment.	responsive groups.		
	Treatment meets the needs of all genders: • Gender-specific groups			
	• Child care			
	<ul> <li>Medical and nutritional interventions</li> </ul>			

<sup>&</sup>lt;sup>63</sup> See section 2.2 of the Site Visit Guide for definitions of special terminology.

51	Evidence-Based Manualized Treatment <sup>64</sup>	Document #20 (Treatment Model Fidelity Review): Indicates that fidelity to the	
	Substance use treatment agencies that partner	evidence-based, manualized treatments	
	with the FTC provide evidence-based, manualized	model is assessed on a regular basis.	
	treatments.	filodel is assessed off a regular basis.	
	treatments.	AND <sup>65</sup>	
	For these agencies, fidelity to the evidence-		
	based, manualized treatments model is assessed	Document #19 (Initial Evidence-Based	
	on a regular basis.	Practice Training and Certification):	
	ů –	Indicates that treatment provider is using	
	To ensure continuing fidelity to the model,	evidence-based, manualized treatments.	
	substance use treatment providers are trained,		
	certified (when applicable), and clinically	Indicates that treatment providers are	
	supervised.	trained, certified (when applicable), and	
		clinically supervised.	

 <sup>&</sup>lt;sup>64</sup> For information on determining whether a treatment is evidence-based, see Appendix G of the Site Visit Guide.
 <sup>65</sup> See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

5J	Medication-Assisted Treatment	Document #1 (P&P Manual): Specifies that FTC does not exclude individuals using or	
	FTC does not exclude individuals using or	considering MAT from FTC program.	
	considering medication assisted treatment.	Specifies that FTC participants receive MAT	
	FTC participants receive medication assisted treatment for substance use disorders based on	for substance use disorders based on an	
	an objective determination by a qualified medical provider that medication assisted treatment is	objective determination by a qualified medical provider that MAT is medically indicated.	
	medically indicated.	Specifies that FTC does not mandate MAT.	
	FTC does not mandate medication assisted treatment.		

5K	Alcohol and Other Drug Testing Protocols	Document #1 (P&P Manual): Specifies drug	
		testing protocol including frequency (a	
	Standardized drug testing protocol specifies the	minimum of two times per week),	
	frequency (a minimum of two times per week),	scheduling, randomization procedures,	
	scheduling, randomization procedures,	observation, duration, breadth of testing.	
	observation, duration, and breadth of testing.		
		States that purpose of drug testing protocol	
	The purpose of drug testing protocol is to	is to monitor participants use of illicit and	
	monitor participants use of illicit and licit	licit substances, outline processes for	
	substances, outline processes for confirmation of	confirmation of test results, outline	
	test results, outline processes for notification of	processes for notification of test results,	
	test results, outline processes for dissemination	and outline processes for dissemination of	
	of test results.	test results.	

5L	Treatment Provider QualificationsThe FTC's treatment providers are licensed, certified, or accredited.Treatment providers receive continuing education and clinical supervision to ensure adoption of best practices in treatment of SUD, mental health, and related disorders.	Document #23 (Certification): Indicates that treatment providers are licensed, certified, or accredited. AND <sup>66</sup> Document #18 (FTC Providers Continuing Education/Training Certificates): Provides evidence of continuing education and clinical supervision.	

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 $<sup>^{\</sup>rm 66}$  See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

6D	High-Quality Parenting Time (Visitation)	Document #9 (Child welfare court reports/FTC progress reports/Plan of Safe	
	FTC participants and their children receive high-	Care): Discusses parenting/family time	
	quality, well-resourced, and face-to-face.	(visitation).	
	Minimum caregiver visitations by child's age are as follows:	Discusses strategies to ensure high-quality parenting/family time (visitation) is	
	< 1 (3-5x week; 60 min.)	occurring.	
	1-2 (2-4x week; 60 min.)		
	2-5 (2-4x week; 60 min.)		
	6-12 (1-3x week; 60 min.)		
	13+ (1-2x week; 60 min)		
	Minimum sibling visitations:		
	1x per week; 60 min.		
	When needed, trained individuals facilitate		
	supervised visitation as caregivers work to		
	achieve unsupervised time.		

6F	Reunification and Related Supports	Document #9 (Child welfare court reports/FTC progress reports/Plan of Safe	
	FTC participants and their families receive reunification and related supports.	Care): Documents that participants and family are receiving reunification and related supports.	

6G	Trauma-Specific Services for Children and Caregivers	Document #21(Trauma Intervention Fidelity Review): Provides evidence that FTC participants and children have access to	
	Trauma-specific interventions are available to FTC participants and FTC children.	evidence-based trauma intervention(s) delivered with fidelity.	
	These trauma-specific interventions are evidence-based or evidence-informed.		
	Trained treatment professionals provide trauma- specific therapies with fidelity.		
	FTC participants are screened/assessed for trauma.		
	FTC children are screened/assessed for trauma.		
	FTC participants and their children receive evidence-based or evidence-informed, trauma- specific, clinical interventions to treat their trauma-related symptoms and disorders.		

6H	Services to Meet Children's Individual Needs	Document #9 (Child welfare court reports/FTC progress reports/Plan of Safe	
	Children's needs are identified by a	Care): review for components related to	
	comprehensive assessment.	meeting children's needs as described in provision	
	Operational team matches developmentally appropriate services to the child's identified needs.		
	Children of participants are connected to a continuum of high-quality services that include prevention and intervention/treatment.		
	Children's services are available to address needs along the following dimensions physical, cognitive, social, emotional, behavioral, developmental, and therapeutic.		

61	Complementary Services to Support Caregivers and Family Members	Document #9 (Child welfare court reports/FTC progress reports/Plan of Safe Care): Documents that case management	
	FTC clients have access to a comprehensive range of complementary support services such as child care, employment, educational, domestic violence, legal, transportation, food, clothing, housing, medical and dental care.	recommendations are based on the results of a valid/reliable needs assessment.	
	Complementary services are chosen to meet the individual needs of participants and their families.		
	Complementary service needs are identified by formal assessment.		
	Complementary service needs promote engagement/retention in substance use treatment, sustained recovery, and permanency.		

6J	Early Intervention Services for Infants and	Document #9 (Child welfare court	
	Children Affected by Prenatal Substance	reports/FTC progress reports/Plans of Safe	
	Exposure	Care): Indicates protocol for children	
		affected by prenatal substance exposure	
	Infants and children under the age of 3 who are	that includes connection to early	
	experiencing effects of prenatal substance	intervention.	
	exposure are connected to early intervention		
	services that address the infant's developmental,		
	physical, social and emotional, physical health,		
	and safety needs.		

6K	Substance Use Prevention and Intervention for	Document #22 (SUD Prevention EBP Fidelity	
	Children and Adolescents	Review Documentation): Provides evidence	
		that children of participants have access to	
	Children of participants have access to services	services for substance use disorder	
	for substance use disorder prevention and early	prevention and early intervention for	
	intervention for substance use disorder.	substance use disorder.	
	These services are culturally appropriate,	Provides evidence that these services are	
	developmentally appropriate, age appropriate,	culturally appropriate, developmentally	
	designed to enhance protective factors, designed	appropriate, age appropriate, designed to	
	to reduce risk factors and are evidence-based.	enhance protective factors, designed to	
		reduce risk factors, and evidence-based.	
		,	

	Sta	ndard 7: Therapeutic Responses to Behavior	
7D	FTC Phases Advancement is based on achievement of	Document #1 (P&P Manual): Outlines realistic, clearly defined behavioral objectives for phase/milestone	
	realistic, clearly defined behavioral objectives or milestones associated with sustained recovery,	advancement.	
	stable reunification, and safety, well-being, and permanency for children.	Provides the criteria necessary for successful discharge.	
	The policy and procedure manual and the participant handbook provide the criteria necessary for advancement through the phases	Specifies that the FTC does not demote participants.	
	and successful discharge.	AND <sup>67</sup>	
	FTC does not demote participants.	Document #3 (Participant Handbook): Outlines realistic, clearly defined behavioral objectives for phase/milestone advancement.	
		Provides the criteria necessary for successful discharge.	
		Specifies that the FTC does not demote participants.	

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<sup>&</sup>lt;sup>67</sup> See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

7G	Certainty	Document #1 (P&P Manual): Includes list of behaviors that receive responses & list of	
/G	Certainty The operational team reliably detects and responds consistently to all participant behaviors listed in the FTC policies and procedures manual.	Document #1 (P&P Manual): Includes list of behaviors that receive responses & list of corresponding responses.	

7H	Advance Notice	Document #3 (Participant Handbook):	
	The FTC notifies participants in advance of the behaviors required for successful participation.	Includes list of behaviors required for successful participation.	

7MUse of Addictive or Intoxicating SubstancesMedical experts determine whether a prescription for an addictive or intoxicating medication is medically indicated and whethe safe alternatives are available.	Document #2 (FTC Prescription Policy): States that medical experts determine whether a prescription for an addictive or intoxicating medication is medically indicated and whether safe alternatives are available.	
Use of nonmedically-indicated intoxicating or addictive substances (e.g., alcohol, cannabis, prescription medications) is addressed, regardless of the substance's licit/illicit status.	Addresses use of nonmedically-indicated intoxicating or addictive substances (e.g., alcohol, cannabis, prescription medications), regardless of the substance's licit/illicit status.	

7N	FTC Discharge Decisions	Document #1 (P&P Manual): Provides the	
		criteria necessary for successful discharge.	
	Agreed-upon criteria provide a framework to		
		AND <sup>68</sup>	
	determine the appropriate discharge for each		
	participant in its policies and procedures manual		
	and participant handbook.	Document #3 (Participant Handbook):	
		Provides the criteria necessary for	
		successful discharge.	

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<sup>&</sup>lt;sup>68</sup> See section 8.5.3 in the Site Visit Guide for further explanation and instructions.

Standard 8: Monitoring and Evaluation				
8A <sup>69</sup>	Maintain Data Electronically	Document #12 (Data Report/Summary): review for variables described in provision.		
	An electronic database stores information about			
	participant demographic characteristics,			
	participant performance, participant needs,			
	substance use treatments, mental health			
	treatments, recovery supports, reunification			
	supports, criminal justice involvement, child			
	needs, services provided to children, other			
	parent/caregiver needs, family needs, services			
	provided to family members, child welfare court			
	action (e.g., trial reunification), child welfare			
	court processes (e.g., continuance), child welfare			
	indicators (e.g., reunification), child well-being			
	indicators (e.g., assessment findings), caregiver			
	well-being indicators (e.g., assessment findings),			
	family well-being indicators (assessment findings), and long-term outcomes (e.g., reentry).			

<sup>&</sup>lt;sup>69</sup> See Appendix H of the Site Visit Guide for suggestions for ways to use administrative data as a validity check for these items.

8B	Engage in Process of Continuous Quality	Document #12 (Data Report/Summary):	
	Improvement	Provides information on participant	
		demographic characteristics, participant	
	Data summaries provide real-time information on	performance, participant needs, substance	
	participant, process, and outcome measures that	use treatments, mental health treatments,	
	inform policy setting, sustainability and quality	recovery supports, reunification supports,	
	improvement efforts. Policies, procedures, and	criminal justice involvement, child needs,	
	outcomes are evaluated annually and an action	services provided to children, other	
		-	
	plan is developed to address challenges,	parent/caregiver needs, family needs,	
	incorporate best practices, and improve	services provided to family members, child	
	outcomes.	welfare court actions (e.g., trial	
		reunification), child welfare court processes	
		(e.g., continuance), child welfare indicators	
		(e.g., reunification), child well-being	
		indicators (e.g., assessment findings),	
		caregiver well-being indicators (e.g.,	
		assessment findings), family well-being	
		indicators (e.g., assessment findings), and	
		long-term outcomes (e.g., reentry).	

8C	Evaluate Adherence to Best Practices	Document #11 (FTC Best Practices Review	
	FTC adheres to best practice standards.	Report): Documents adherence to best practice standards.	
	Fic adheres to best practice standards.		

8D	Use of Rigorous Evaluation Methods	Document #13 (Evaluation Report): Documents rigorous evaluation methods,	
	Rigorous evaluation methods, including the use of comparison groups when feasible and	including the use of comparison groups when feasible and appropriate.	
	appropriate, are used to address the pertinent evaluation questions.		