

A photograph of a field of wildflowers, possibly black-eyed Susans, at sunset. The sun is low on the horizon, creating a warm, golden glow that illuminates the field. The flowers are in various stages of bloom, with some showing dark centers and others being more open. The background is a soft, hazy landscape with trees and a clear sky.

# Practice Applications of the Family Treatment Court Best Practice Standards Through the Eyes of Family Healing to Wellness Courts

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# Acknowledgment

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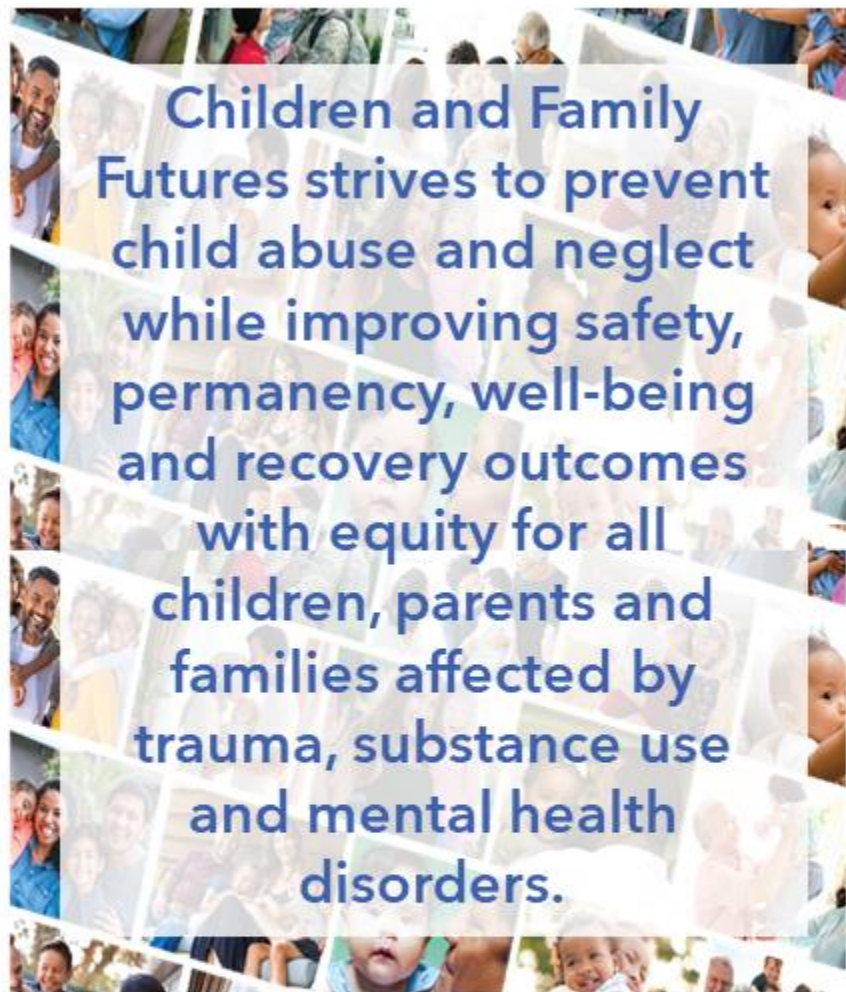
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Center For Children and Family Futures (CCFF) strives to prevent child abuse and neglect while improving safety, permanency, well-being and recovery outcomes with equity for all children, parents and families affected by trauma, substance use and mental health disorders.

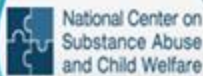




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- Office of Juvenile Justice and Delinquency Prevention FDC Grantee TTA
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- Recovery Opportunities Open for Men (ROOM) for Dads
- Sacramento County Dependency Family Treatment Court
- Sacramento County Early Intervention Family Treatment Court
- Strong Families, Strong Children
  - Behavioral Health Services of Veteran Families
  - Continuum of Care for Veteran Families
  - Orange County Veterans Initiative









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**When:** Every third Friday of each month from 10-11 AM PST; 1-2 PM EST

**Where:** [Register Here](#)



**Questions?** Contact Will Blakeley at [wblakeley@cffutures.org](mailto:wblakeley@cffutures.org) or Ashay Shah at [Ashah@cffutures.org](mailto:Ashah@cffutures.org)

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# Panelists

**Tania Vega** – Lummi Nation Family Wellness Court  
Coordinator

**Melissa Johnson** – Tulalip Wellness Program  
Manager

**Odessa Flores** - Tulalip Family Wellness Program  
Recovery Support Specialist



# FTC Best Practice Standards



*“While the FTC Standards provide clear directives to communicate about the critical elements of a high-functioning FTC, they are not a detailed, step-by-step manual for implementation.”*

# Structure of the FTC Best Practice Standards

**Description** – Each standard begins with a descriptive summary paragraph.

**Provisions** – These expand on the description and are mandates stating what FTCs should do; they are designed to be as directive and measurable as possible.

**Rationale** – Describes the reasoning and applicable research base for each provision, drawing upon both practice-based evidence and empirical studies from a wide range of related fields of study.

**Key Considerations** – These provide additional explanation of the provision and practical implementation advice.

**References** – These are included at the end of each section.



# Family Treatment Court Best Practice Standards



Equity and Inclusion

Monitoring and Evaluation 



Role of the Judge



Early Screening  
and Assessment



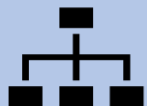
Timely, Quality  
Treatment



Case  
Management



Therapeutic  
Responses



Organization and Structure

# Long Term Outcomes - What is Success?

## 5 Rs and E

Equitable Outcomes in:	All outcomes should be disaggregated by race, ethnicity, gender, and other key demographic information
Recovery	<ul style="list-style-type: none"><li>•Parents access treatment more quickly</li><li>•stay in treatment longer</li><li>•decrease substance use</li></ul>
Remain at Home	More children remain at home throughout program participation
Reunification	Children stay fewer days in foster care and reunify within 12 months at a higher rate
Repeat Maltreatment	Fewer children experience subsequent maltreatment
Re-entry	Fewer children re-enter foster case after reunification



# Best Practices Outcomes



A meta-analysis of 16 evaluations examining FTC outcomes found that families that participated in an FTC were two times more likely to reunify than families receiving conventional services.

(Zhang, Huang, Wu, Li, & Liu, 2019)

# Standard One: Organization & Structure

- A. Multidisciplinary and Multisystemic Collaborative Approach
- B. Partnerships, Community Resources, and Support
- C. Multidisciplinary Team
- D. Governance Structure
- E. Shared Mission and Vision
- F. Communication and Information sharing
- G. Cross-Training and Interdisciplinary Education
- H. Family-Centered, Culturally Relevant, and Trauma-Informed Approach
- I. FTC Policy and Procedure Manual
- J. FTC Pre-Court Staffing and Court Review Hearing



# Conduct a Needs Assessment

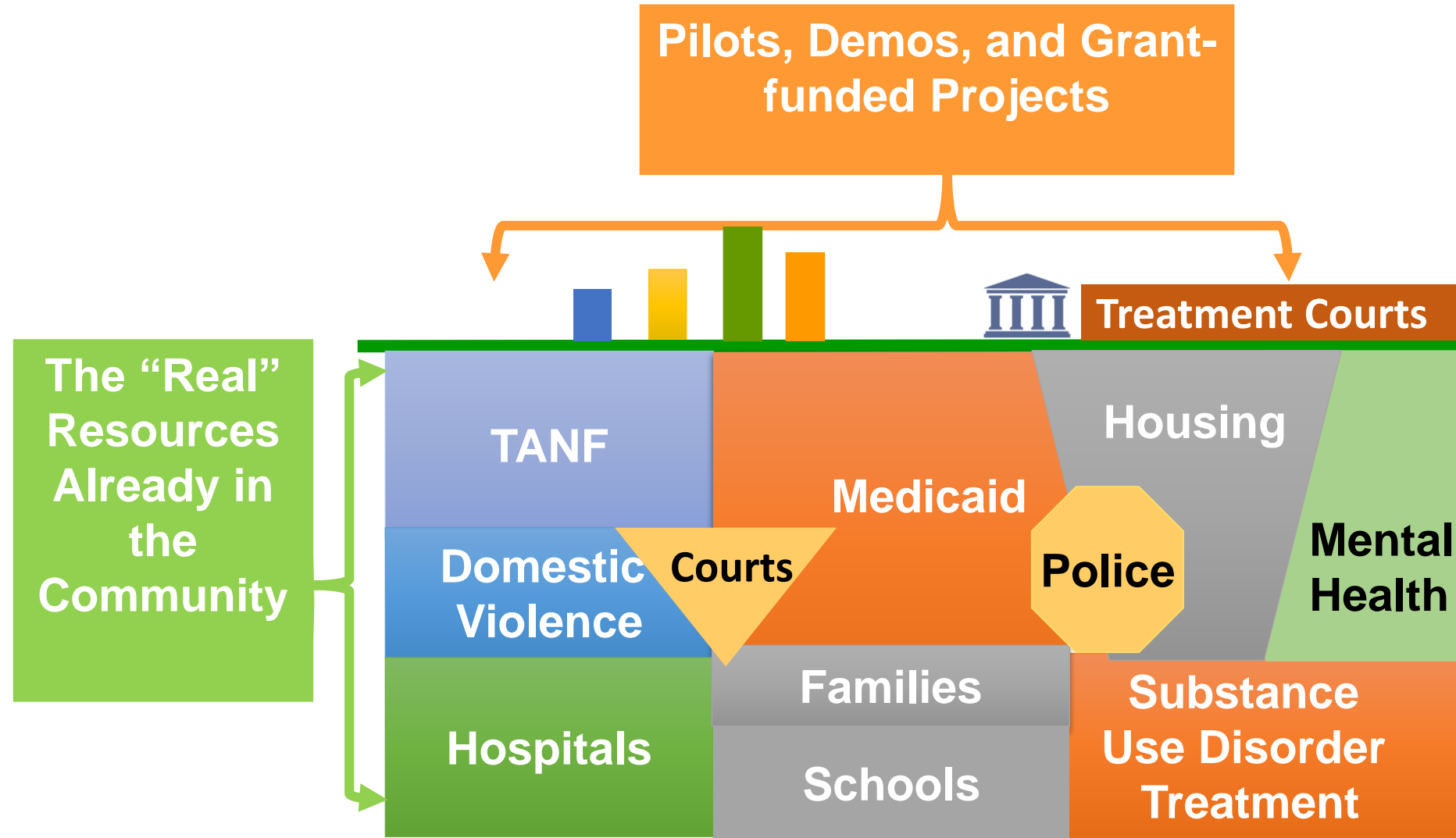
What do the children, parents and family members in your FTC need?

- It is available but you are not currently accessing
- Outreach to partners to find out how your participants can begin accessing
- Figure out what is “in it for them” to provide the service
- It is not available and needs to be developed
- Is there another agency or group which has already conducted/is conducting a needs assessment and identified the same gap?
- Is there an existing agency that would be interested in developing?
- Co-develop the request for funds
- You are supplying the consumers and supervision, they are providing the specialized service

# Community Mapping



# Using the Resources Already in Your Community







# **Memorandum of Agreement/ Understanding**

- Identifies partners
- Identifies shared mission and values
- Clarifies each party's responsibilities
- Formalizes data sharing
- Supports sustainability



An aerial photograph showing a vibrant blue river with white rapids flowing through a dense green forest. A black asphalt road with white lane markings runs parallel to the river, curving along its path. The text 'Align with Parallel Initiatives' is overlaid in a white, italicized serif font on a dark green rectangular background in the upper right portion of the image.

# *Align with Parallel Initiatives*



# Critical Components for Effective Governance Leadership

- Three-tiered structure that includes oversight committee, steering committee, and core treatment team
- Cross-systems agency representation with members who have the authority to make needed practice and policy changes
- Collaborative decision making that involves all partners and is not driven primarily by FTC staff
- Defined mission statements
- Regular, ongoing meetings to identify and address emerging issues
- Formal information and data sharing protocols



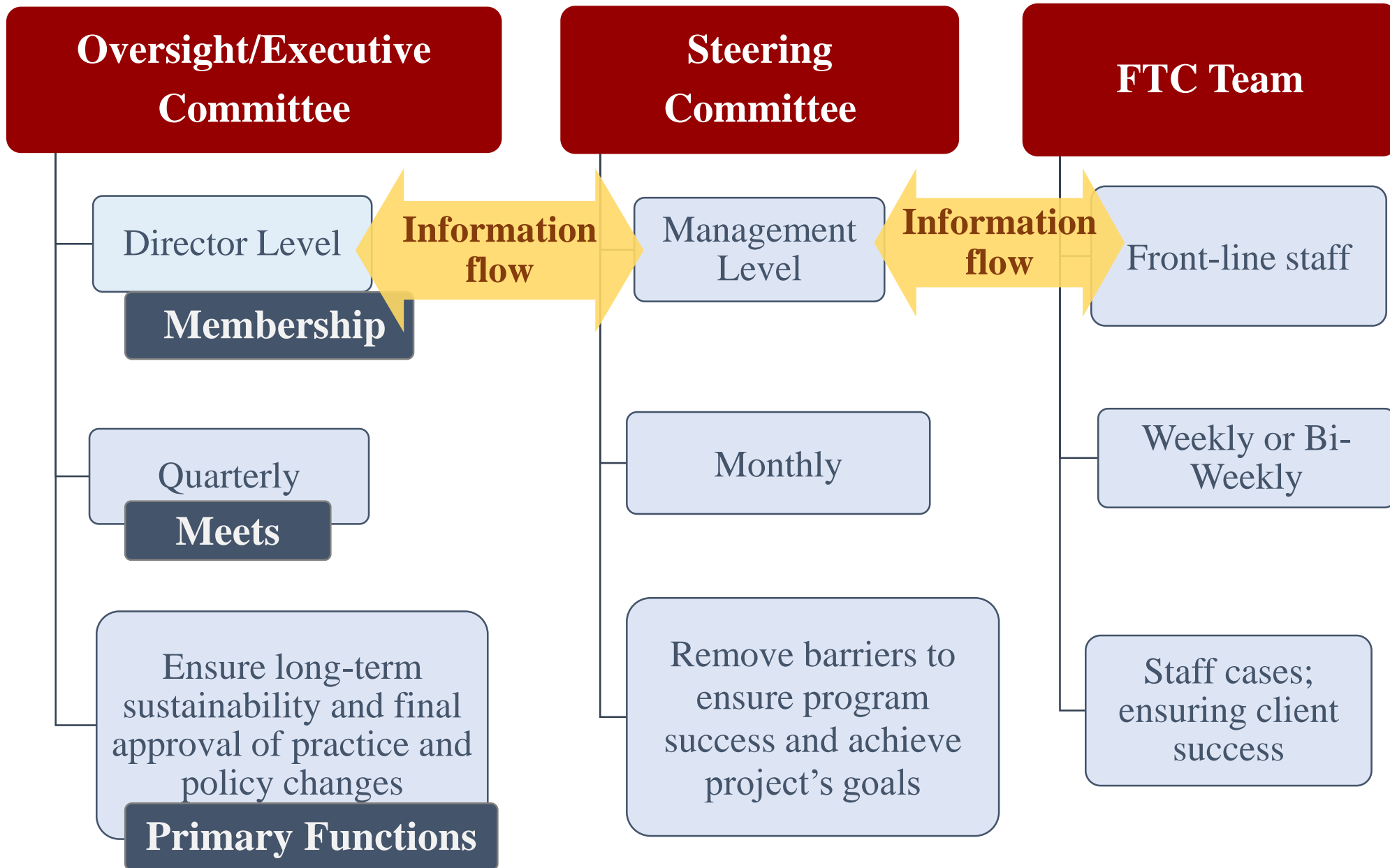
# Organization and Structure

## Governance Structure

*Notably, drug courts with an oversight committee that includes members of the community save nearly twice as much money as drug courts that do not have such a committee.*

*(Carey, et al., 2012; Carey, et al, 2005)*

# Effective Collaborative Structure



# Five Standing Agenda Items for Steering Committee Meetings



1. Data dashboard
2. Systems barriers
3. Funding and sustainability
4. Staff training and knowledge development
5. Outreach efforts



# Why is Governance Structure Important?

*Why your FTC needs a governance structure:*

- Cross-systems to ensure broad buy-in, representation, and investment
- Leadership at all levels to ensure decision-making powers and adequate information flow
- Cover critical functions – ensure quality and effective service delivery, barrier-busting, garner resources
- Increases likelihood of sustaining lasting change

# FTCs Without a Governance Structure

- Artificial “ownership” of the FTC
- Isolated from the larger community
- Person dependent



- Operate under capacity
- Tunnel Vision — FTC-Centric
- High Burnout

## Are Not Sustainable

# Research

## Family-Centered, Culturally Relevant, and Trauma-Informed Approach

### *Examples of trauma-responsive practices for FTCs*

- *Use of sanctions that take into consideration behaviors precipitated by trauma*
- *Adjustments in treatment, levels of care, and services for participants who do not engage in or respond to present treatment but otherwise comply with FTC requirements;*
- *Implementation of security procedures (as appropriate) that minimize participant exposure to potential triggers*
- *Implementation of practices and requirements in ways that do not overwhelm participants;*
- *Provision of clear information about what participants can expect and opportunities for participant choice when possible; and*
- *Delivery of services in physical and social environments that reduce stress.*

Source: US Department of Justice, 2014; National Child Traumatic Stress Network, 2007;  
National Center for Child Traumatic Stress, 2008



# Family-Centered, Culturally Relevant, and Trauma-Informed Approach

## Child and Family Focused

*FTCs that provide parenting and children's services have better child welfare and treatment outcomes than those providing services targeted only to parental substance use disorder (SUD) recovery.*

(Sources: Bruns et al., 2012, Rodi et al., 2015)



# FTC Staffing

## Family-Centered, Culturally Relevant, and Trauma-Informed Approach

### Staffing time should be spent problem-solving, not problem-reporting



Start each case review by discussing what is happening with the children



Focus discussions on desired behavior changes of participants versus only program or treatment attendance



Identify and meet the needs and progress of children, parents, other members of the family, and the family unit



Use court reports or staffing templates that incorporate parent and child information, don't spend time covering information that everyone already knows



Discuss progress of all cases, not just those in non-compliance, and celebrate successes



Be inclusive of more partners and service providers and provide a venue for meaningful partner input where all voices are heard



Allow the judge and team more time to reflect on and process information







# Standard Three: Ensuring Equity and Inclusion

- A. Equitable FTC Admission Practices
- B. Equitable FTC Retention Rates and Child Welfare Outcomes
- C. Equitable Treatment
- D. Equitable Responses to Participant Behavior
- E. Team Training

A close-up, side-profile photograph of a Black woman with her hair in a high bun kissing her young daughter on the cheek. The daughter has curly hair and is wearing a white top. They are outdoors in a city street with blurred figures and lights in the background. The woman is wearing a black top and a choker. The daughter is wearing a white top with a pink bow in her hair.

***Proportional  
Access***

***Equitable  
Treatment***

***Equal  
Outcomes***

# Ensuring Equity and Inclusion

A descriptive analysis of a cohort of 11 FTCs serving more than 3,500 children showed:

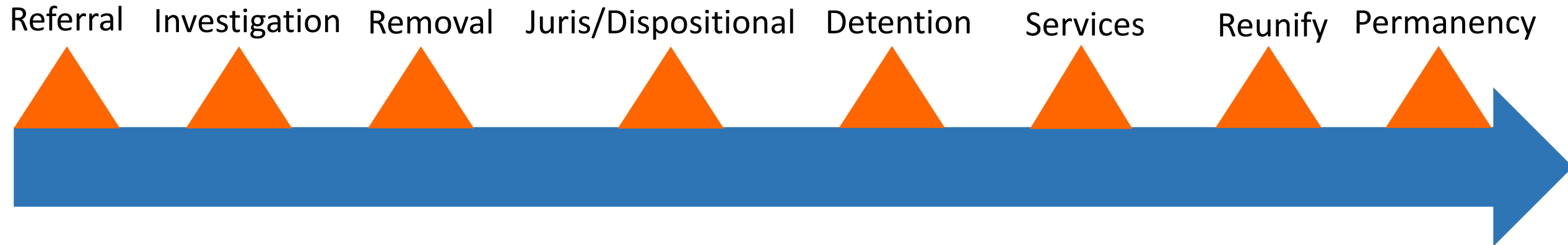
- Black children were overrepresented in child welfare population but underrepresented in FTC cohort
- Black, AI/AN and Latinx children experienced similar length of stay in foster care and reunification with a parent within 12 months to White children

*Source: Breitenbucher P, Bermejo R, Killian C, Young NK, Duong L, DeCerchio K. Exploring racial and ethnic disproportionalities and disparities in family drug courts: findings from the Regional Partnership Grant Program. Journal of Advancing Justice. 2018;1:35–61.*



# Ensuring Equity and Inclusion

There are opportunities to identify disproportionality and improve practices at every stage of the child welfare case.





# Meeting Culturally—and Trauma-Responsive Needs

- Engage respectfully with families and follow the practices of cultural humility
- Recognize that child welfare workers, clinicians, attorneys, and judges are in positions of power; these power differentials may be amplified among people of color and other marginalized populations
- Ask family members to identify needs, strengths, and resource "family members" (may not be related by blood or marriage)
- Employ facilitators, clinicians, and recovery support specialists of the same gender, racial and ethnic background, or other important characteristics as participants
- Provide services that are EBP for and in languages spoken by the target population, accessible (location), and available (time)

# Approaches to Support Equity and Engagement

## Practice

- Respect
- Cultural humility
- Curiosity

## Bias

- Examine it
- Recognize it
- Challenge it

## Implement

- Family-led case plans
- Case plans that address all four domains of SAMHSA recovery (health, home, community, and purpose)
- Program and agency walk-throughs
- Training

(Center for Children and Family Futures and National Association of Drug Court Professionals, 2019; Children's Bureau, Administration for Children and Families, 2021)



# Engaging Fathers

Fathers' involvement in parenting is associated with:

- more reunifications and fewer adoptions
- substantially lower likelihood of later maltreatment allegations
- more rapid exits from foster care for children.

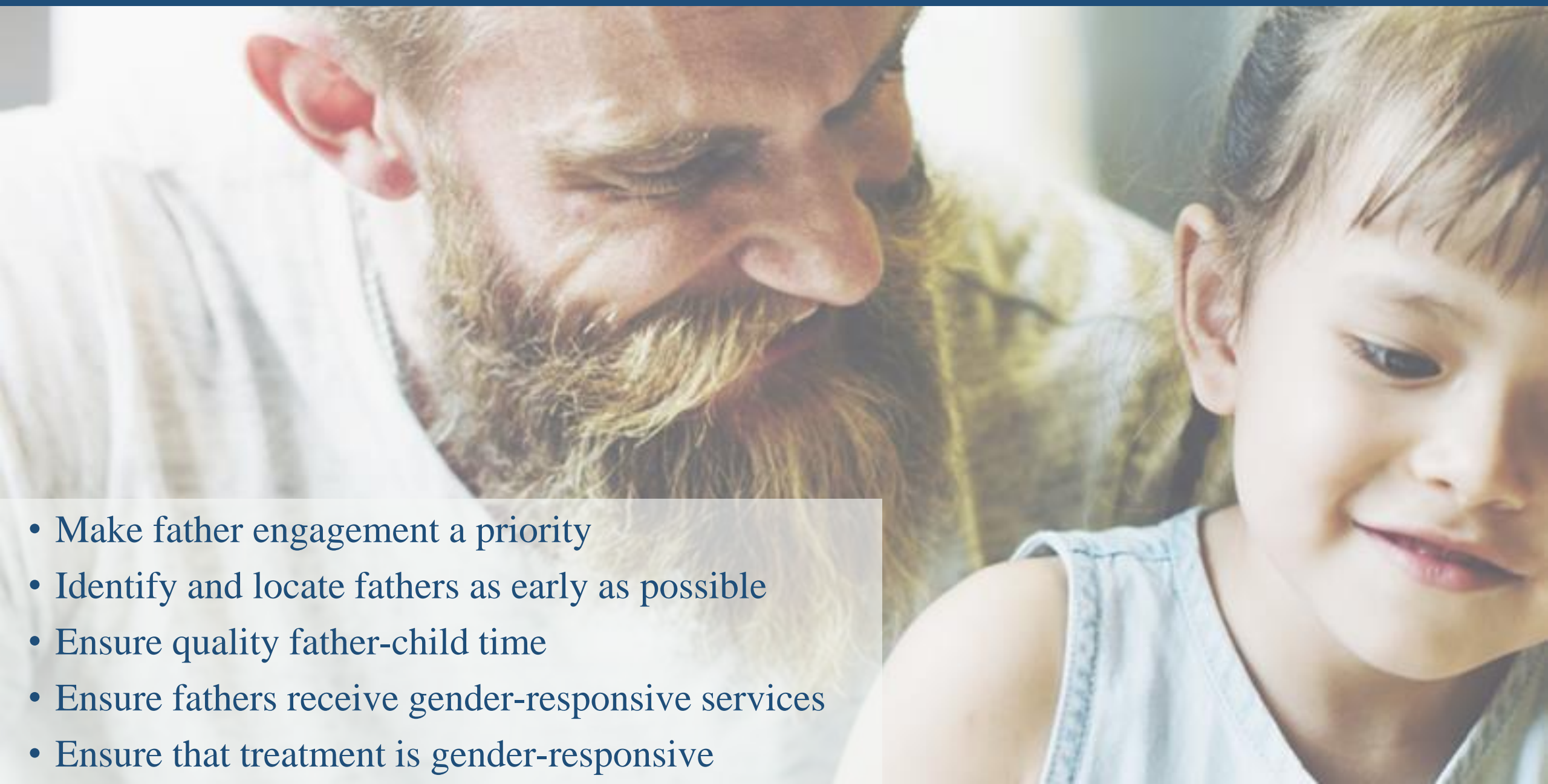
*(Source: US DHHS. More About Dads, 2008)*



- half to two-thirds of men seeking SUD treatment are the biological fathers of at least one child
- 20-30% live with or have custody of their child

*(Source: McMahon, TJ, et al., 2005; Stover, CS, et al. 2011)*

# Engagement of Fathers in Family-Based Services

- 
- Make father engagement a priority
  - Identify and locate fathers as early as possible
  - Ensure quality father-child time
  - Ensure fathers receive gender-responsive services
  - Ensure that treatment is gender-responsive

Demographics of FTC Population						
	Child Welfare	FTC Eligible	FTC Admitted	Successful	Unsuccessful	Neutral
American Indian or Alaska Native						
Asian						
Black or African American						
Hispanic or Latino						
Native Hawaiian or Other Pacific Islander						
White						

This chart is just showing a breakdown of race. Your site should consider other sub-groups such as gender, age, and sexual orientation.





# Standard Six: Comprehensive Case Management Services, and Supports for Families

- A. Intensive case management and coordinated case planning
- B. Family involvement in case planning
- C. Recovery supports
- D. High-quality parenting time (visitation)
- E. Parenting and family-strengthening programs
- F. Reunification and related supports
- G. Trauma-specific services for children and parents
- H. Services to meet children's individual needs
- I. Complementary services to support parents and families
- J. Early intervention services for infants and children affected by prenatal substance exposure
- K. Substance use prevention and intervention for children and adolescents



# What Is Recovery?

## **SAMHSA's Working Definition**

*Recovery is a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential.*



**Recovery is not treatment!**

*Access to evidence-based substance use disorder treatment and recovery support services are important building blocks to recovery.*



# Four Major Dimensions

## Health

Overcoming or managing one's disease(s) or symptoms and making informed, healthy choices that support physical and emotional well-being

## Home

Maintaining a stable and safe place to live

## Purpose

Conducting meaningful daily activities, such as a job, school, or volunteerism, and having the independence of income and resources to participate in society

## Community

Having relationships and social networks that provide support, friendship, love, and hope

# Recovery Occurs in the Context of the Family

- Substance use and mental health diseases affect the family
- Adults with children primarily identify themselves as parents
- The parenting role and parent-child relationship cannot be separated from treatment
- Adult recovery should have a parent-child component including prevention for the child



Source: ASPE Research Brief (2018). Substance use, the opioid epidemic, and the child welfare system: Key Findings from a mixed methods study. Retrieved from <https://aspe.hhs.gov/system/files/pdf/258836/SubstanceUseChildWelfareOverview.pdf>

ASPE Research Brief. (2018). The relationship between substance use indicators and child welfare caseloads. Retrieved from <https://aspe.hhs.gov/system/files/pdf/258831/SubstanceUseCWCaseloads.pdf>



# Case Plans are Developed With the Family

- Include a broad definition of family to include all individuals whom the child and parent consider “family”
- Prioritize a family’s cultural beliefs, values, and traditions
- Increase parent and child engagement in case plans
- Support the parent’s commitment to achieving case objectives as well as relationships between the parent, child, and service providers
- Enhance the fit between the family member’s needs and services

Include the parent’s attorney or legal team’s social worker and/or peer support in case planning and team/family meetings to provide additional support



# Build Protective Factors to Strengthen Families



**Social  
Connections**

**Parental  
Resilience**

**Nurturing and  
Attachment**

**Concrete  
Support for  
Families**

**Knowledge of  
Parenting and  
Child  
Development**

**Social and  
Emotional  
Competence of  
Children**

# Needs

## Culturally—and Trauma Responsive

### CHILD

- Well-being
- Developmental screenings & services
- Health & dental services
- School readiness
- Learning disabilities services
- Mental health & trauma services
- Adolescent substance use treatment
- At-risk youth prevention

### PARENTS

- Parenting competencies
- Family connections and resources
- Substance use, mental health, & co-occurring disorders treatment
- Medication management
- Domestic violence interventions
- Vocational rehabilitation services
- Health & dental services

### FAMILY

- Basic necessities
- Employment
- Housing
- Childcare
- Transportation
- Family counseling
- Budgeting
- Housekeeping and nutrition

# Child and Family Services Reviews

## Round 3 Findings 2015-2016

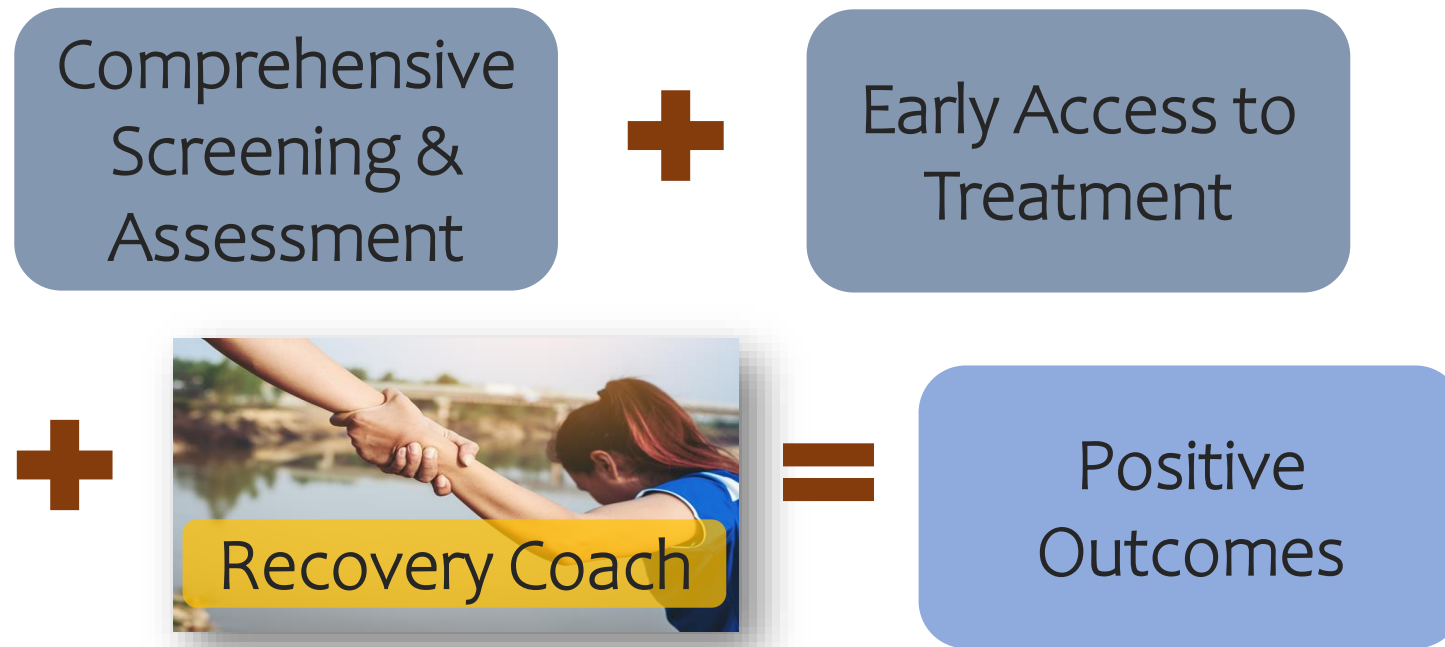
- Cases did better when **parents and children were involved in case planning**
- Cases did better when there was **frequent quality parenting time**





# Recovery Support Matters

A Randomized Control Trial – Cook County, IL (n=3440)



*Ryan, Perron, Moore, Victor & Park (2017) "Timing matters: A randomized control trial of recovery coaches in foster care, Journal of Substance Abuse Treatment (77): 178-184.*



# Do Parents Know What They Need to Do to Reunify?







*Vulnerable children, parents, and family members require the intensive, collaborative efforts of child welfare, the dependency court, treatment providers, and other community members to meet their complex treatment and service needs.*

***No single agency has the skill or capacity to meet all of their needs.***



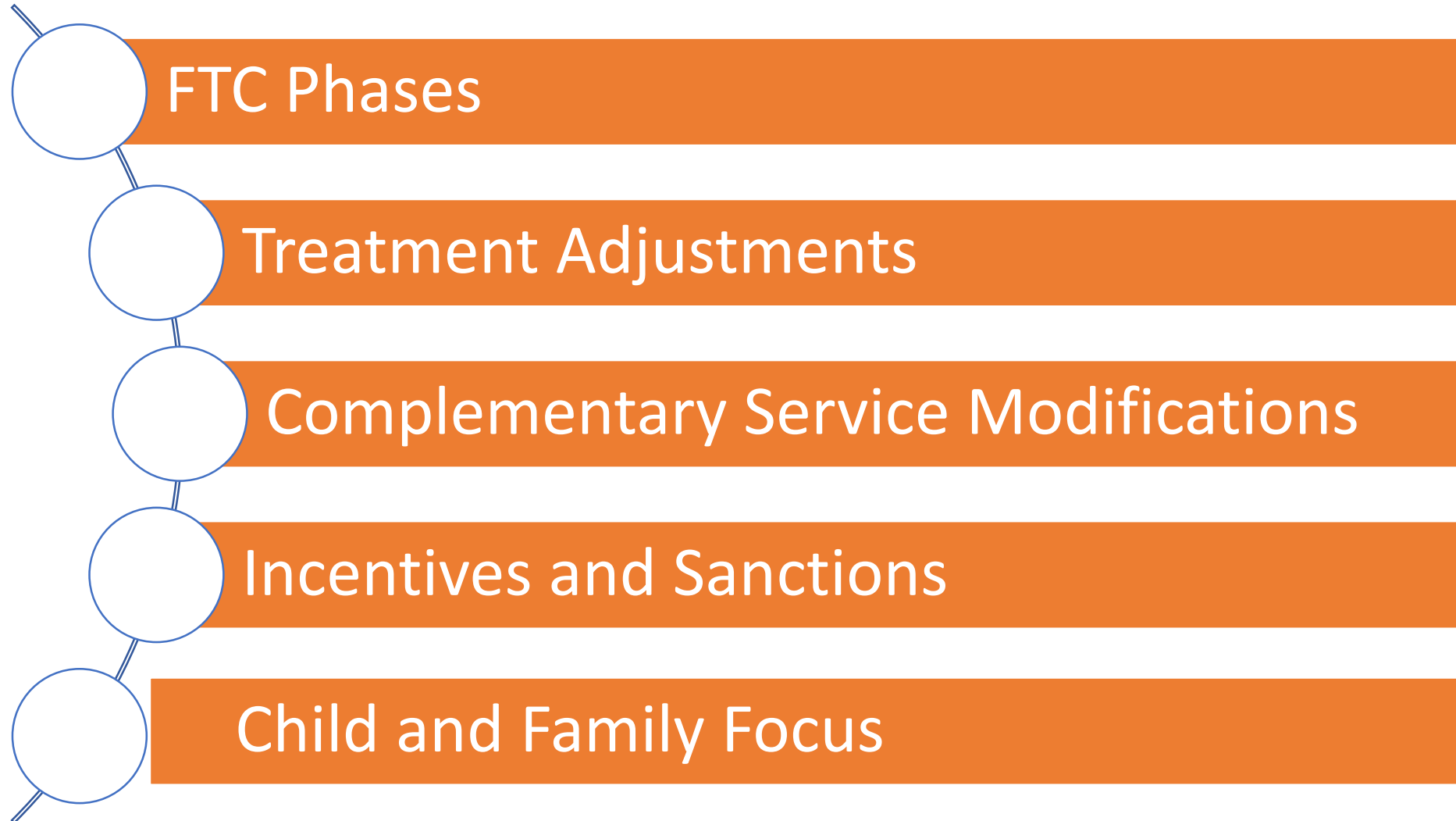


# Standard Seven: Therapeutic Responses to Behavior

- A. Child and family focus
- B. Treatment adjustments
- C. Complementary service modifications
- D. FTC phases
- E. Incentives and sanctions to promote engagement
- F. Equitable responses
- G. Certainty
- H. Advance notice
- I. Timely response delivery
- J. Opportunity for participants to be heard
- K. Professional demeanor
- L. Child safety interventions
- M. Use of addictive or intoxicating substances
- N. FTC discharge decisions



# Key Strategies to Respond to Participant Behavior





## Phase 1



•**Goal:** Acute Stabilization, Orientation, and Engagement

Participant is oriented to FTC, experiences positive support and successful orientation - believes it will be possible to be healthy, whole family again

## Phase 2

**Goal:** Clinical Stabilization of parent's SUD, MH, and physical health and address the acute and chronic needs of children

Participant acknowledges harm associated with SUDs considers need for change, move toward internal motivation for recovery

## Phase 3

**Goal:** Demonstration of recovery skills and insight and development of skills to meet the safety and well-being needs of children and family members

Participant continues to work toward recovery and reunification/successful case closure; FTC team works to meet needs of family for successful case closure

## Phase 4

**Goal:** Demonstration of life skills (e.g., employment, financial, housing) and parenting skills

Participant demonstrating recovery and parenting skills; FTC team continues to work to meet needs of family for successful case closure

## Phase 5

**Goal:** Maintenance of recovery, parenting and life skills

Family unit (parents, children, support system) is demonstrating healthy skills and behavior and use community-based resources to meet their continuing needs

# Phases as an Engagement Strategy

- Leverage the phase structure to create a behavior-based, family-centered program
- Allow parents to see how their progress through the phases moves them to THEIR goal
- Creates shared goals and coordinated case plans for all partners including the family
- Focus on vital services
- Lay out steps towards reunification

# Why?

When behavior does not support long-term recovery and successful closure of the child welfare case... Ask WHY.

**Treatment adjustments and complementary service adjustments are often the two most effective ways the FTC team can respond.**



# Behavior Responses to Promote Engagement

- Imposing sanctions as opposed to incentives too often can generate behaviors consistent with learned helplessness and undermine the FTC's ability to support positive behavior change. (Hiroto, 1974)
- Incentives help FTC and participants focus on desired behaviors as opposed to undesired ones. (Burdon, 2001; Kratcoski, 2017)
- When a drug court team responded to participant behavior with positive comments and treatment adjustments, participants were less likely to use drugs. In contrast, negative comments by the team are associated with increased numbers of positive drug test results. (Senjo & Leip, 2001)

# Range of Incentives

**Remember to ask what would be meaningful to the participant!**

## Low

- Verbal Praise
- Small Tangible Rewards
- Recognition in Court
- Symbolic Rewards
- Posted Accomplishments
- Written Commendations

## Medium

- Reduced Monitoring Requirements
- Moderate Tangible Rewards
- Fishbowl Drawings
- Self-Improvement Services

## High

- Large Tangible Rewards
- Point Systems
- Ambassadorships
- Commencement Ceremony

# Zero or Minimal Cost Rewards

- Judicial acknowledgement
- Tokens
- Inspirational stones and notes
- Ceremonies
- Reflection
- Candy with affirmation
- Letter from the team
- Family activities
- Key chains
- Mugs
- Special privileges
- Journals
- Coupons for services
- Children's books
- Fishbowl
- Community donations



# Range of Sanctions

## Low

- Verbal Admonishments
- Letters of Apology
- Essay Assignments
- Daily Activity Logs
- Journaling
- Life Skills Assignments

## Medium

- Increased Monitoring Requirements
- Increased structured activities

## High

- Move to concurrent plan
- Highly structured activity
- Termination from program

# Jail as a Sanction



- FTC involves a non-criminal case in dependency or family court
- The ultimate “sanction” in a dependency case is Termination of Parental Rights (TPR)
- Jail should not be used in a non-criminal case – it can interfere with family time and dependency court requirements

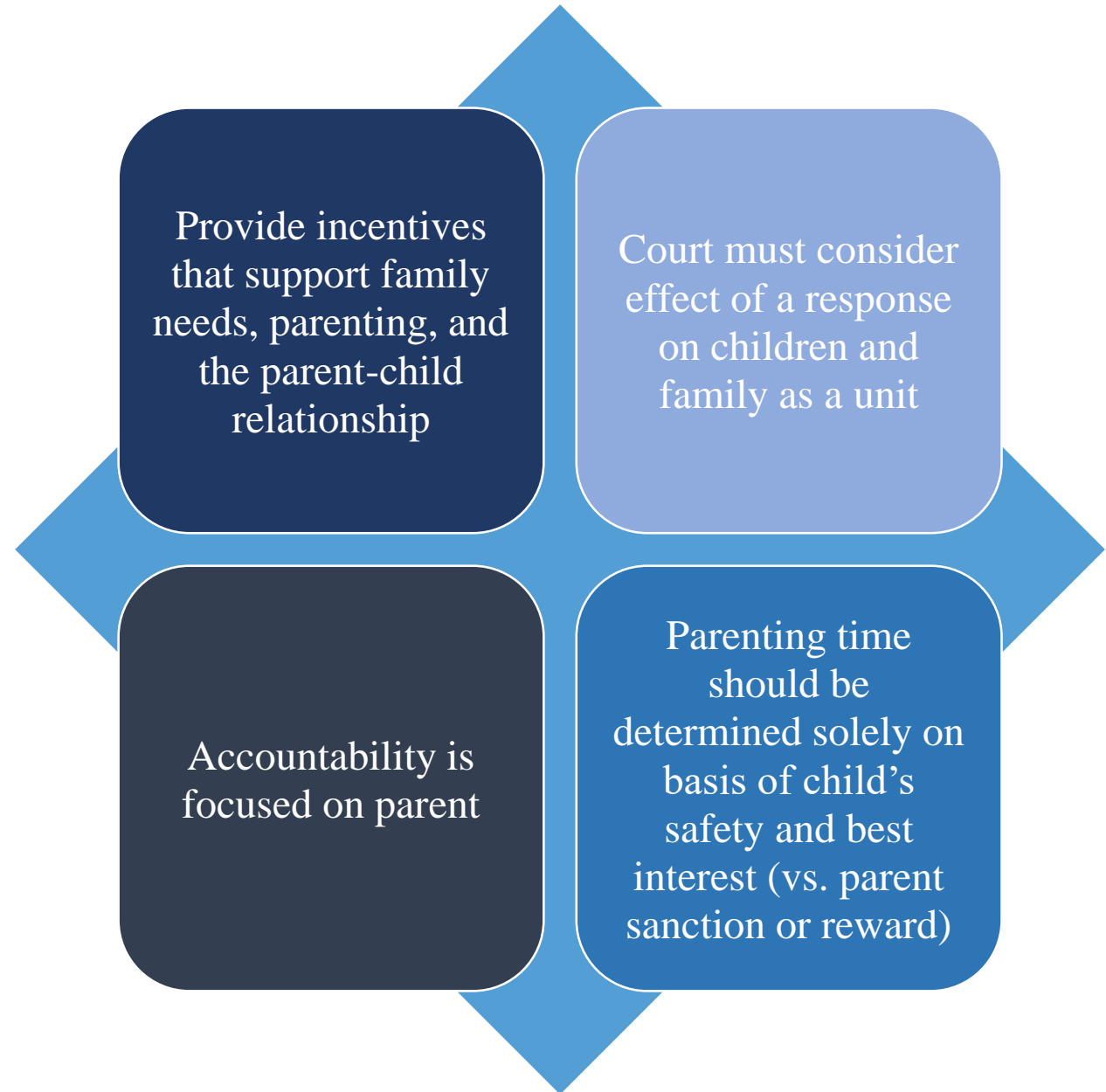
**Focus on Engagement  
and Treatment**

**The goal of incentives and sanctions is *always* to increase participant engagement.**

**IT IS NOT TO PUNISH**



# Child and Family Focus





# Standard Eight: Monitoring and Evaluation

- A. Maintain data electronically
- B. Engage in a process of continuous quality improvement
- C. Evaluate adherence to best practices
- D. Use of rigorous evaluation methods



# WHY?

**Improve Practice**

**Demonstrate  
Effectiveness**

**Secure Resources**

Are you making a difference?

Is your program worth sustaining  
given increased resources?

# Data Matters

*Like many complex service organizations, drug courts are highly susceptible to “drift,” meaning that the program drifts away from fidelity to the model and outcomes for children, parents, and family members deteriorate over time.*



*Continuous quality improvement (CQI), sometimes called performance and quality improvement (PQI), refers to an intentional process of using data to improve outcomes.*

(Source: Barbee et al., 2011)

(Sources: Van Wormer, 2010, Fay-Ramirez, 2015)



# Data-Driven Management

## Performance Monitoring

Determines if you are meeting performance standards or benchmarks

## CQI

A cyclical process of identifying strengths, needs, or concerns, making program adjustments, and testing changes over time

# Short Term/Process Outputs – What is Success?

## Scale

Of all families in child welfare with parental substance use, the percentage that entered the FTC

## Engagement in FTC

Of eligible families, the percentage who enter the FTC

## Timely Access to FTC

- Average number of days from child welfare case open to FTC entry
- Average number of days from FTC referral to FTC entry

## Retention and Discharge

- Average number of days in FTC for participants
- Percentage of participants discharged successfully

# Long Term Outcomes - What is Success?

## 5 Rs and E

### Equitable Outcomes in:

Recovery

All outcomes should be disaggregated by race, ethnicity, gender, and other key demographic information

- Parents access treatment more quickly
- stay in treatment longer
- decrease substance use

Remain at Home

More children remain at home throughout program participation

Reunification

Children stay fewer days in foster care and reunify within 12 months at a higher rate

Repeat Maltreatment

Fewer children experience subsequent maltreatment

Re-entry

Fewer children re-enter foster case after reunification





# Data Dashboard

The FTC selects a set of critical data indicators that help the operational team and steering committee members monitor critical FTC operations such as referrals, admissions, completions, and terminations.\*

- **Determine your audience**
- **Select Measures** - What outcomes are the most important? What needles are you trying move?
- **Tell a Story** – Make sure visualizations are clear and intuitive
- **Baselines and Targets** – What are we trying to achieve and compared to what?

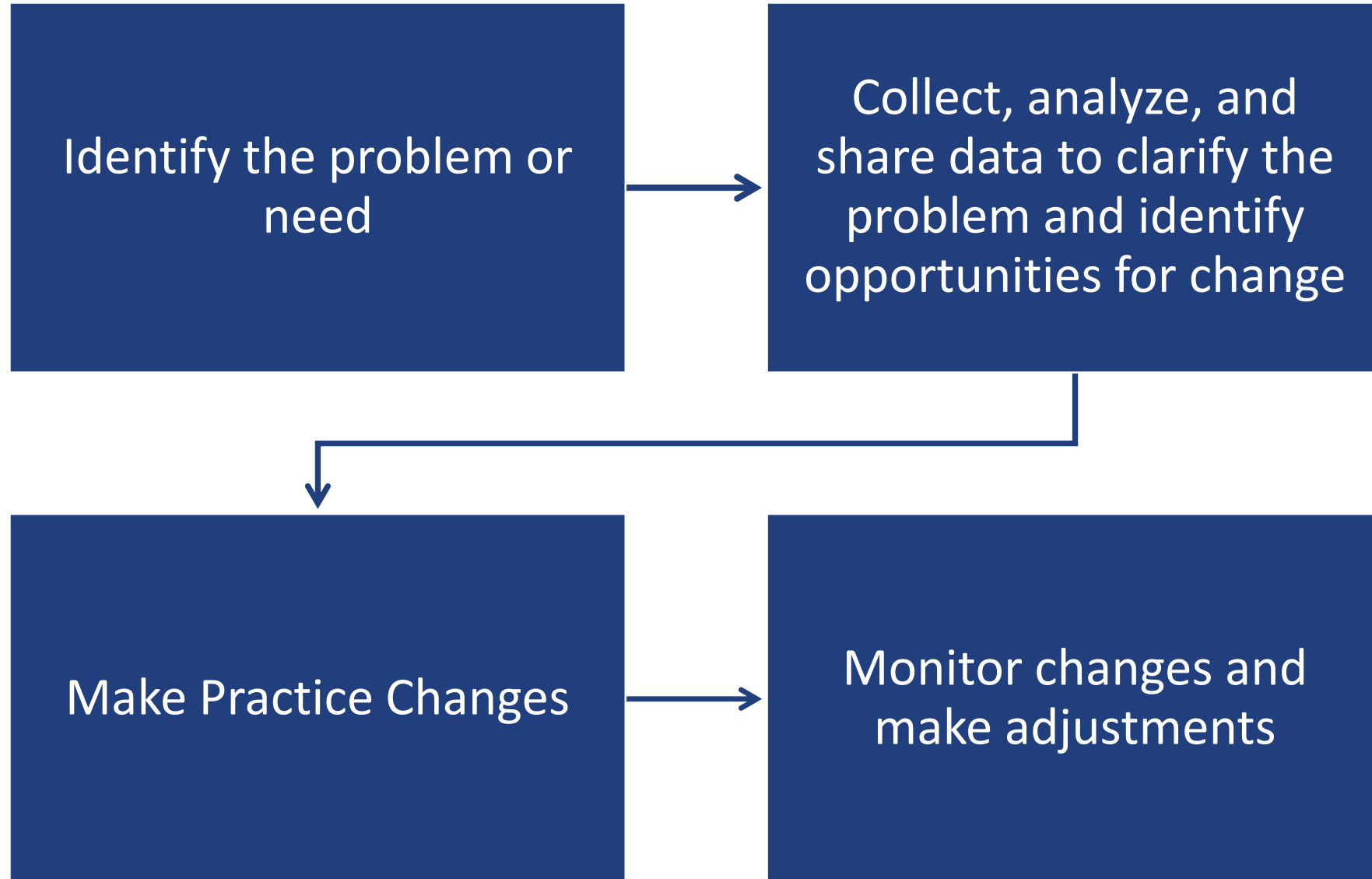
\*Children and Family Futures, 2015; National Drug Court Institute and Center for Children and Family Futures, 2018

# Simple Example

GREEN	Exceeding Target
YELLOW	Meeting Target
RED	Below Target

Performance Measure	Baseline Performance	Target	Performance
Time from case open to FTC entry (average)	3 months	2 months or less	3 months
Time from FTC entry to SUD treatment entry (average)	1 month	20 days or less	15 days
Graduation Rate	40%	45% or more	50%

# Data-Driven Management and Continuous Quality Improvement





# Example – Success Rate

Identify the problem or need

- Low successful completion rate

Collect, analyze, and share data to clarify the problem and identify opportunities for change

- 0% of participants who were given jail as a sanction completed successfully

Make Practice Changes

- Eliminated jail as a sanction

Monitor changes and make adjustments

- Improved successful completion rates

# Drop-off Analysis

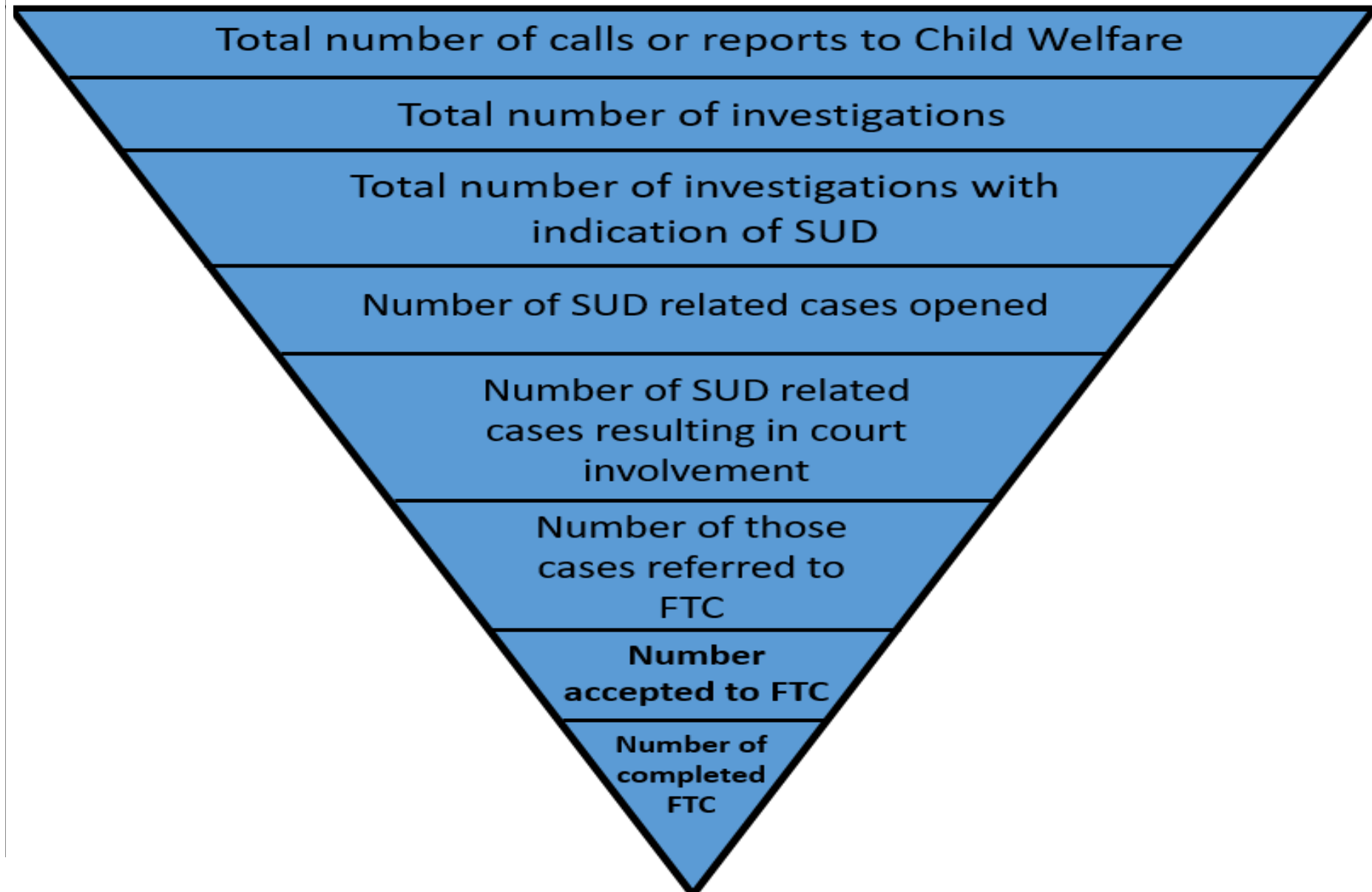
A drop-off analysis examines if or when FTC participants drop out of the admissions process and active participation in the FTC and can be used to identify opportunities to create new or modify existing processes to better engage parents and family members.

*(Children and Family Futures, 2015)*

*It's critical to know key characteristics of participants at each level of the drop-off.*

# FTC Scale Pyramid – Understanding Drop-Offs

*How stakeholders can improve engagement and retention of families in FTC*





# Understanding Drop-Offs

*How stakeholders can improve engagement and retention of families in FTC*

- Include all reports made to child welfare per month
- What happens to those not investigated?
- Is there documentation of substance use in the report?
- What happens to those that do not result in an open case?
- Break out numbers by type of out of home placement (e.g., foster care, relative care)
- Track who refers cases to the FTC, try to understand and track why some cases are referred and others are not
- Of those referred and not accepted or do not enroll, track the reasons why







# Resources



# Family Treatment Court Best Practice Standards

## 8 *Standards* and Key Provisions

<https://www.cffutures.org/home-page/ftc-best-practice-standards-2019/>



# FAMILY TREATMENT COURT

## *Peer Learning Court Program*



Center for Children and Family Futures  
Strengthening Partnerships, Improving Family Outcomes

King County FTC, WA

Tompkins County FTC, NY

Wapello County FTC, IA

Grant County FRC, IN

Jefferson County FIT Court, CO

Baltimore City Circuit FRP, MD

Pima County FDC, AZ

Travis County PIR/FDTC, TX

### PEER-TO-PEER SUPPORT INCLUDES:

- Virtual learning opportunities (e.g., video conference calls, topic-specific consultation).
- Access to FTC policies, handbooks, practices, and lessons.
- A virtual and/or in-person team site visit, providing an opportunity to observe their FTC court proceedings and staffing sessions.

To learn more about the FTC Peer Learning Court Program or to participate in a peer-to-peer connection, contact us [peerlearningcourts@cffutures.org](mailto:peerlearningcourts@cffutures.org)



### Course #1:

Applying a Family-Centered,  
Problem-Solving Approach to  
Family Treatment Court Staffing  
and Court Hearings

### Course #2:

Disrupting Stigma to Support  
Meaningful Change for  
Families in Family Treatment  
Court



### Course #3:



Harnessing the Power of Parenting  
Time to Strengthen the Parent-  
Child Relationship and Support  
Reunification Efforts in Your Family  
Treatment Court

Recordings Available Here:

[cffutures.org/ftc-practice-academy](https://cffutures.org/ftc-practice-academy)



Questions? Email us at [fdc@cffutures.org](mailto:fdc@cffutures.org)

*Previously named the Family Drug Court Learning Academy*



JOIN US!

## Family Healing to Wellness Court Community of Practice

**What:** [The National Family Drug Court Training and Technical Assistance Program](#) in partnership with the [Tribal Law and Policy Institute](#) invites you and your team to participate in a Family Healing to Wellness Court Community of Practice. This will be an opportunity for Family Healing to Wellness Court teams to network, share lessons and innovative strategies with peers, and create new knowledge for the field. Each meeting will feature a topic area that the group decides on during the previous meeting.

**When:** Every third Friday of each month from 10-11 AM PST; 1-2 PM EST

**Where:** [Register Here](#)



**Questions?** Contact Will Blakeley at [wblakeley@cffutures.org](mailto:wblakeley@cffutures.org) or Ashay Shah at [Ashah@cffutures.org](mailto:Ashah@cffutures.org)

Visit our [website](#) for more information about the FDC TTA Program



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**CENTER FOR CHILDREN AND FAMILY FUTURES**  
Strengthening Partnerships, Improving Family Outcomes