

# **Final Report**

**Developed by the Institute for Human Services** 

November 2, 2015

# The Ohio Child Welfare Training Program (OCWTP) Substance Abuse Training Partnership

## **The Challenge**

Child welfare staff and caregivers do not have the knowledge and skills to support the complex needs of child welfare families impacted by substance abuse.

- Organizational reviews indicate that caseworkers are missing important indicators of substance abuse that could potentially put children at risk.
- In the past two years counties reported a substantial increase in the number of children who needed to be removed from their homes as a result of parents who are addicted to opiates or engaging in related illegal activities in their homes.
- Counties are requesting more training in substance abuse related content applied to child welfare needs.

#### **Our Goal**

To increase skills and evidence-based practices used by Public Children Service Agency staff, caregivers and adoptive parents that will enhance their ability to assist families impacted by substance abuse

# **The Objective**

To leverage strategic partnerships and current resources that result in a responsive array of cross system training and skill-building opportunities available to child welfare practice professionals, caregivers, and adoptive parents

## **Our Strategy**

- 1. Identify subject matter experts in the substance abuse field who can consult with the OCWTP to design a coordinated training approach.
- 2. Find local, state and national training information and resources that can be used in Ohio at nominal, if any, cost to the program.

- 3. Increase the capacity of the OCWTP trainer pool by adding trainers who can facilitate effective cross training experiences and other high priority learning needs.
- 4. Incorporate a continuum of different types of learning opportunities, utilizing a variety of training methodologies.
- 5. Initiate strategies for ongoing technical assistance on substance abuse needs for county Public Children Service Agencies and Regional Training Centers.

#### Introduction

On August 28, 2015, regional teams came together in Columbus to meet one other and explore how they could work together to enhance the success of families affected by substance abuse in Ohio. Key leaders at the state level provided information regarding their collaborative efforts and participants heard a leading expert present on the impact of opiate addiction. Regional Training Center directors and staff participated along with a select group of public child welfare supervisors and Institute for Human Services staff. Treatment and prevention professionals shared their expertise and willingness to support the OCWTP by recruiting trainers and sharing training resources. Teams identified challenges, training strategies, and next steps for building ongoing relationships that could enhance training efforts in each region. This report includes a summary of regional team discussions.

## **Summary**

The first OCWTP Substance Abuse Training Partnership Regional Event was held on August 28th, 2015 with over eighty individuals participating from around the state. Participants were welcomed by Sue Williams, from the Bureau of Systems and Practice Advancement at the Ohio Department of Job and Family Services, (ODJFS).

Bobbie Boyer from the Institute for Human Services opened the day by reviewing the goals of the partnership and the agenda. She stated that the goal of the partnership is to increase skills and evidence-based practices used by Public Children Service Agency staff, caregivers and adoptive parents that will enhance their ability to assist families impacted by substance abuse. Ms. Boyer explained progress toward leveraging strategic partnerships and current resources that will assist with developing an expanded array of cross system training and skill-building opportunities. A new website was unveiled as a gateway for substance abuse training resources that can be accessed at <a href="https://www.ocwtpsa.weebly.com">www.ocwtpsa.weebly.com</a>.

Initial statewide priority training needs were described including:

- Enhancing engagement through motivational interviewing skills
- Identifying signs and symptoms of substance and mental health disorders
- Providing effective case management for families with substance use disorders
- Building protective factors in children

The purpose of the event was introduced as an opportunity for building an ongoing infrastructure of relationships between substance abuse professionals and the Regional Training Centers. Invitees were identified by state partners as subject matter experts willing to serve as regional liaisons for the OCWTP. These individuals represent the ADAMH boards along with prevention, treatment, and opiate specific addiction resources. They were asked to help identify substance abuse training resources in content areas specific to child welfare system needs of caseworkers, supervisors and caregivers. These liaisons met in teams with the eight Regional Training Center Directors and staff along with a select group of public child protective services supervisors and Institute for Human Services facilitators.

State leaders gave presentations related to collaborative efforts. The Deputy Director of Children and Families at ODJFS, Jennifer Justice, laid the foundation for understanding how the partnership fits in with the department's five year strategic plan. This plan details the vision and goals targeted to strengthen the state's child welfare system. The plan contains planned interventions and measures of progress to improve safety, permanency and well-being outcomes for Ohio's children. The OCWTP Substance Abuse Training Partnership objectives are delineated in the plan.

Dr. Mark Hurst, Medical Director for the Ohio Department of Mental Health and Addiction Services provided data related to high increases in unintentional drug overdoses, diagnosis of drug abuse or dependency at delivery, and the number of Neonatal Abstinence Syndrome hospitalizations in recent years. He described the Maternal Medical Support (MOMS) project implementing the Maternal Care Home model coordinating care for expectant mothers with opiate use disorders including wrap-around services, Medication Assisted Treatment and recovery support. Dr. Hurst shared how important it is for MOMS pilot sites to work with child welfare agencies to improve successful outcomes for safety and permanency for children. He suggested that collaboration around training could help improve outcomes for the pilot sites. Several sites were represented in the room.

Orman Hall, the Specialized Docket Section Manager at the Ohio Supreme Court, reviewed the Family Drug Court Statewide Systems Reform Program and Technical Assistance Project. He revealed the results of a survey from their Judicial Symposium held in June on the topic of Addiction and Child Welfare with 56 counties represented.

These teams identified action plans with the following top priority topics:

- 1) Cross-system planning and collaboration
- 2) Family engagement
- 3) Training
- 4) Communication
- 5) Screening and assessment

Public Children Services Association of Ohio (PCSAO) Executive Director, Angela Sausser, shared statewide data compiled by the Opiate Engagement Project. She

highlighted the immensity of the problem and recommendations of the group as described in their white paper including:

- The nature of opiate addiction
- The scope of opiate addiction in the child welfare system
- The financial and clinical impact of opiate addiction on Ohio children and families
- Current and best practices for local coordination of child protective services,
   Treatment, Judicial and others related to these cases

Kari Akins, Community Response and Outreach Manager at Fairfield County Job and Family Services presented training needs from the caseworker and supervisor perspectives. In order to be successful when working with this target population there is a need for collaboration with service providers, including joint planning and case management, shared decision-making, and accountability.

Dr. Ted Parran, Medical Director at Case Western Medical School gave a presentation on the impact of opiate abuse and addiction on families, child welfare, and pregnancy. He outlined best practice approaches for working with these families including screening methods, motivational enhancement, Medication Assisted Treatment, negotiating treatment plans, and long term monitoring.

In the afternoon, regional teams convened for dialogue about how they could collaborate to enhance training resources for families. The following summary represents the content of those discussions and plans for working together.

# Central Regional Planning Team

- <u>Challenge:</u> What do new staff need to know to work with families who are opiate dependent
  - Training Strategies:
    - Indicators
    - Screening
    - Assessing readiness for change
    - Treatment options
    - How to sustain individuals/families while waiting to obtain services
    - Impact on the child
    - How to negotiate treatment plans
    - Strategies for long-term monitoring
    - What do caregivers need to know and what type of supports do they need from workers/agencies
    - How to work with existing barriers (confidentiality, different timeframes)
    - Confronting clients regarding substance abuse issues
- <u>Challenge:</u> What do veteran staff need to know to work with families who are opiate dependent
  - Training Strategies:
    - How to work with families who continually come back into the system
    - Change attitude towards working with families
- <u>Challenge:</u> What do supervisors need to know to work with families who are opiate dependent
  - Training Strategies (in addition to staff needs):
    - How to support staff working with families who chronically abuse drugs
    - How to encourage and model engagement
    - How to create opportunities for staff to learn about substance abuse (strategies)

- How to influence directors to make a commitment within their county
- <u>Challenge:</u> What do caregivers need to know to work with families who are opiate dependent
  - Training Strategies:
    - Indicators
    - How to sustain relationships between individuals/families while waiting to obtain services
    - Impact on the child and strategies for caring for the child
    - Type of support needed from workers/agencies
    - Best practice interventions for youth

- Share meeting discussion notes with regional partners
- Meet quarterly; at the first quarterly meeting identify tasks:
  - Who are the community advocates
  - o Who are the community strategists
  - Invite caseworkers to inform this group of what they're experiencing and their needs
- Present at PCSAO directors meeting to gain support
- Link county prevention professionals with county child welfare staff; cross systems collaboration
- Evaluate best methods of learning to meet needs
- Develop apps for staff
- Create networking opportunities
- Strategize, advocate and create uniformity in practice/protocol at the state and local levels
- Identify current trainings that can be taken to skill based learnings
- Leverage partners
- Identify just in time learnings, webinars, workshops, coaching, conferences, etc.
- Identify steps to sustain momentum of moving forward

# East Central Regional Planning Team

## **Challenges and Training Strategies**

- <u>Challenge:</u> Recovery timeframes
  - Training Strategy:
    - Expedited individual coordinated services for families and children
- Challenge: Stigma
  - Training Strategies:
    - Basic understanding of substance abuse and stigma
    - Mental Health First Aid training for staff and caregivers
- Challenge: Programs and resources
  - Training Strategies:
    - Coalitions
    - Peer and family supports

#### **Next Steps**

- Convene a quarterly roundtable meeting of regional partners
- Offer Mental Health First Aid training for staff and caregivers

# Northeast Regional Team Planning

- <u>Challenge:</u> Lack of capacity (wait lists workers don't know what to do with/for families during waiting period; high number of drop outs during waiting period)
  - Training Strategies:
    - Working with mental health boards
    - What to do while client is waiting to get into treatment
    - How to deal with a resistant client
- <u>Challenge:</u> Caseworker and caregiver staffing increased caseload and case complexity and lack of training leads to workers not feeling competent and quitting

- Training Strategies:
  - Substance abuse application as a part of Core and UPP program
  - Partner with agencies for training (like those who do drug screening)
  - Provide regional trainings for staff who train new hires
  - Train caregivers on how to care for Neonatal Abstinence
     Syndrome (NAS) babies and long term issues
- <u>Challenge:</u> Lack of collaboration (need to share resources, services, knowledge; "priority status" issues and "timeframe" issues)
  - Training Strategies:
    - Bring in coaches from AOD as coaches for workers who have
       Neonatal Abstinence Syndrome (NAS) and AOD cases
    - Cross system training (Summit ADAMH board used to sponsor a cross systems training for new workers in each system, used as networking opportunity too)
    - Make use of technology so training can happen without having to have everyone in the same room

- Recruit coaches from AOD field for difficult cases
- Explore possibility of bringing back collaborative training in Summit County and use the model in other counties
- Cross training on acronyms and each other's role
- More motivational interviewing training
- Work with local ADAMH boards to discuss prioritization of child welfare cases in community plans. Get buy in at local levels across state, then go with one voice to ODMHAS, OACBHA.
- Work locally to find solutions to timeframe problem. Should be discussed in local board meetings. These clients may need more than the two years ASFA gives them.
- Add AOD application training to Core and UPP program
- Training for caregivers on short and long term care issues for Neonatal Abstinence Syndrome (NAS) children

Use distance learning technology to bring people together without traveling

# Northwest Regional Team Planning

## **Challenges and Training Strategies**

- <u>Challenge:</u> Improve Multi-System Collaboration to Benefit Children and Families Served by Child Welfare, ADAMH, and Courts
  - Collaboration Items:
    - Address specific training and service issues (such as ADAMH working with incarcerated parents whose children are involved with child welfare, children placed with kin, PCSA knowledge of how ADAMH services can be paid for, etc.)
    - Include in OCWTP trainings the science behind the cumulative effects of relapse
    - Identify training that addresses the addiction process and relapse, through a "trauma lens"
    - Address how to help foster parents "shift their thinking" regarding addiction and the recovery process
    - Develop ways for these systems to learn more about each other and work better together at executive and staff levels
    - Develop and offer multi-system training to improve crosssystem understanding and collaboration (for ex, how to mesh treatment timeframes with child welfare timeframes)
    - Develop ways to consistently keep child welfare agencies and caseworkers current on all of the services and supports available to help child welfare families

## **Next Steps**

 NWORTC and Hancock County ADAMH will convene a joint PCSA-ADAMH leadership meeting to include counties from NW Ohio (schedule initial planning meeting for October); courts will be added later to the regional leadership meetings; consider meeting four times per year

- Subject matter experts from ADAMH Boards, and/or service providers, can train for NWORTC, or can help identify other trainers for NWORTC
- Share information across systems NWORTC training calendar, ADAMH training calendars, conference information, listservs, etc.
- ADAMH subject matter experts can review OCWTP training outlines regarding accuracy and currency of content; can also vet trainers for NWORTC
- Collaborate on training space if needed; if the OCWTP needs county-specific training space, consider contacting the county ADAMH board for space
- Subject Matter Experts will commit to reviewing identified training content and vet known trainers as it relates to current research

# North Central Regional Team Planning

- <u>Challenge:</u> Education of workers, substitute caregivers, and families on substance abuse (indicators, cycle, treatment, support, etc.). Everyone involved needs to understand what they're dealing with (including families and substitute caregivers).
  - Training Strategy:
    - Coach supervisors and licensing specialists to prioritize development of workers and caregivers skill level in substance abuse
    - Review existing substance abuse learnings and resources to determine whether these should be offered more frequently or whether new learnings need to be developed
- <u>Challenge:</u> Engagement—both initial engagement of families and maintaining engagement during wait for treatment/facilities
  - Training Strategy:
    - Regular provision of Motivational Interviewing training
    - Review other interviewing and engagement learnings and resources to determine whether these should be offered more frequently or whether new learnings need to be developed

- <u>Challenge:</u> Collaboration—sharing of information/resources and effective networking to best meet family needs
  - Training Strategies:
    - Use naturally occurring opportunities (monthly partner meetings) to spotlight individual partner agencies' purpose, role, and resources
    - Use intranet and targeted email blasts to connect CPS workers with ADAMH online service directory, highlighting its purpose/value

- NCORTC will be a part of monthly START Division provider meetings to highlight partner agencies, resources, and learning opportunities.
- Solicit input from partners as part of an environmental scan of existing quality resources and naturally occurring opportunities to highlight these resources
- Utilize naturally occurring opportunities to feature and connect workers, caregivers, and families to existing resources
- Utilize the ODJFS Speakers Bureau to explain the CPS purpose, role, and resources to schools and other partner organizations
- NCORTC (Gina Callender) will contact Recovery Resources about accessing its existing pool of vetted motivational interviewing trainers
- Work with ADAMH Board to link CPS staff to online service directory and periodically highlight agencies
- Review catalog of available OCWTP learning interventions (and interventions available through partner organizations) and schedule/market interventions

# Southeast Regional Planning Team

- <u>Challenge:</u> Insufficient cross system collaboration
  - Training Strategies:

- Involve representatives from various systems in meetings and trainings
- Identify needs and develop partnerships to address specific needs
- Share information and resources across systems
- Challenge: Effects of substance abuse on children
  - Training Strategies:
    - Share and discuss different views across systems
    - Provide specialized training and develop formal support system for caregivers
    - Develop mechanism to disseminate specific information (ex. recovery, trauma)
- Challenge: Lack of resources
  - Training Strategy:
    - TBD at future meetings

- Convene follow up meeting of partners and additional regional partners
  - Establish concrete strategies for addressing challenges
  - SEORTC (Tracie Stein) will facilitate scheduling of the follow up meeting with support from IHS (Stacey Saunders-Adams and Dilya Limes)
  - Subject Matter Expert (Ed Hughes) will contact and invite additional treatment providers
  - SEORTC (Tracie Stein) will contact and invite additional PCSA staff and directors and substance abuse treatment providers

# Southwest Regional Team Planning

- <u>Challenge:</u> Cross training and collaboration (better collaboration and understanding between child welfare and substance abuse/mental health)
  - Training Strategies:
    - Understand the roles and responsibilities of each profession

- Identification and assessment of safety and risk factors
- Development of workshops where caseworkers and substance abuse/mental health professionals are trained together
- Challenge: Understanding brain science and addiction
  - Training Strategies (workshops for caseworkers, supervisors, and caregivers):
    - Disease of addiction
    - Treatment modalities
    - Identification of regional resources
    - Identification and prevention of relapse
    - Substance abuse, mental health, and trauma
    - Assessment strategies (SBIRT)
- Challenge: Engagement
  - o Training Strategies (caseworkers and supervisors):
    - Motivational Interviewing
    - How to keep families engaged
    - Empowerment and strengths-based

- Subject matter experts will identify and recruit trainers and coaches for the topics identified and the Mental Health First Aid training.
- SWORTC (Ben Hannah and Denise Orchard) volunteered to begin thinking through a strategy for ongoing collaboration (e.g. schedule an ongoing meeting between PCSA directors/staff and substance abuse and mental health agencies with the goal of enhanced collaboration and relationship building)
  - The group would like to see the development of a CW/MH/SA collaborative meeting which all groups come together in an effort to build relationships and increase collaboration.
- IHS (Laura Hughes) will support SWORTC with trainer/coach approval, workshop development, and the development of an ongoing CW, SA, MH collaboration team, as needed

# Western Regional Team Planning

## **Challenges and Training Strategies**

- <u>Challenge:</u> Access to treatment (Residential, Medication Assisted Treatment, and Outpatient)
  - Training Strategies:
    - Understanding behavioral health systems (ADAMHS, Providers)
    - Role of detoxification and hospitalization
    - Treatment modalities (levels or types of detoxification)
- Challenge: Assessing safety and risks to children who remain in the home
  - Training Strategies:
    - Liability/decision making (how to minimize professional and personal risk)
    - How to recognize opiate use (signs and symptoms)
- <u>Challenge:</u> Caregivers being able to understand addiction, treatment levels
  of care, and recovery (frustration with the lack of resources for kinship
  caregivers)
  - Training Strategies:
    - Addiction and treatment myths 101
    - Understanding 42CFR
    - Mental Health Frist Aid for caregivers and staff
- Challenge: Youth focused
  - Training Strategies:
    - Youth involved and resiliency
    - Prevention/trauma
    - Increasing protective factors

- Schedule regional meeting with partners
- Create a resource listsery of upcoming training opportunities
- Identify local and county expert trainers and topics
- Identify trainings that should be cross marketed to case workers and local AOD/MH case managers