## Judicial Trauma Institute

## Post-Conference Follow up on Q&A

## Session 3: Starting the Case with Family Strengths in Mind

Note: All answers were provided directly from session speakers as noted.

My question relates to the last presentation regarding implicit bias and how the family plans of service are created. Typically, families in the child welfare system are from low-income areas or of a low socio-economic status. When creating family service plans, most require parenting classes that parents have to pay out of pocket for and they have to attend counseling sessions in which they may not have reliable transportation. These plans also request parents to have stable employment. Yet many plans don't list the resources to help the parents complete the services or even accommodations for parents to be successful. What can the DFPS agency or attorneys do to ensure that parents have every opportunity to be successful and reduce the trauma of the child being permanently separated from their family?

Elizabeth Watkins' Answer: In my area, and when I practiced in Anderson County East Texas, I never had a parent required to complete a service that "wasn't paid for." Contracts with the Department should include resources like counseling, drug treatment and other services. Even here in Wilco – we often send clients to Cenikor (public drug treatment facility) in other parts of the state so they can get what they need. It's not uncommon for us to try and find inpatient treatment statewide. I would add that I am constantly looking for those resources in my own community that might be provided at no cost – church groups, Child Advocacy Centers, Salvation Army, Cenikor, and specially trained community members. I have also given TBRI materials to my own caseworkers, put together in packets related to parenting and child development, and used that as a requirement for the parent education component. Finally – since becoming trauma-informed – I have ALWAYS had the worker leave the name, number, contact info, and ways in which to contact the provider in the plan, in an email, in a text and in person in court. This "resource" list with contacts is consistently provided to the parent. I've had workers step out in the hallway with the parent and call the intake lines for mental health and drug treatment services

to ensure the parent had an opportunity to make that call. For me – if all these efforts have not been made, I feel the parent has an affirmative argument that they were unable to receive the service. It may be over the top, but I WANT the parent to get the service, however we can accomplish that.

I have a question regarding the department's policy to not service a family if they have previously done services and no significant changes have been made. FBSS will not accept these cases. For example: All of us know that Substance use is/can be a recurring problem that can take a long time to overcome yet they will not be serviced again because they underwent services 5 years before. How does that coincide with reasonable efforts to prevent a removal? To prevent that trauma to these children?

Elizabeth Watkins' Answer: I take issue with this policy as well, and have met with the supervisors, Program Director and Program Administrator to discuss what this means. I found in meeting with them, they were able to explain that this is not a hard and fast policy - there can be exceptions to it. I also explained to them that the policy may indeed conflict with the law – which requires the last restrictive measures to ensure safety – that could very well mean a Court Ordered Services (COS) case or Family Based Safety Services (FBSS). I have cases submitted to me now – under the new policy – where I believe it would be more appropriate for FBSS, even though prior involvement and/or other complicating factors. My Judges, also trauma-informed and aware of this policy shift, actually denied two legal requests for removal because a less restrictive alternative was available. Once that happened, I had more luck in talking with the workers submitting cases about using FBSS even though it wouldn't fit the policy, and I will deny legal intervention (with a long email and explanation) and cite the law and recommend FBSS. In the end, my caseworkers are trauma-informed, and they will open an FBSS case if denied for legal intervention either by the Judge, or the intake attorney (me) with the specific reasoning attached.

Ms. Johnson and/or anyone else on the panel- as you know prosecutors do not speak directly to the parents in these cases. What can we do as prosecutors to demonstrate to the parents that we are empathetic, respectful, and want to help them?

**Verlyn Johnson's Answer:** What comes to my mind is a question: is there a law stating that the prosecutor can't speak to a parent? The way to show empathy and respect to parent is by just showing common courtesy and saying, "Hello I am Verlyn, and I am the prosecutor on your case." This shows me respect and that you are just doing your job, it's not a personal attack against me as the parent. A prosecutor is not a case nor is the parent, we are humans capable of showing common courtesy even while on opposite sides.

Elizabeth Watkins' Answer: I know this was for Ms. Johnson, but I'd like to say that when your whole court team in trauma-informed, including the parent's attorney, open communication is a lot easier. I will often ask a parent's attorney if I can speak with their client — without the need for the client to answer anything — and express to them early and often — my desire, and that of the Department — to return their child to them as a safe parent. I am sincere in my belief, and I believe that translates. I think it's important that the parent not see us as the enemy, and by simply talking to them and with them, and not at them, we can build a rapport of our own. Parents' attorneys in East Texas had no issue with it, because they had heard me speak before, and knew I would be sensitive to a parent's trauma. I had to work hard to gain that trust here in Wilco when I moved here by having the parent attorneys present, telling them ahead of time what I would like to say to their client, and letting them feel comfortable with my sincerity in wanting the client to get exactly what they needed to make them a safe and healthy parent.

I love the phased plan approach. Can you guys email/post some sample phased plans?

Elizabeth Watkins provided copies of phased plans which are available under Session 3 on Brightspace. These are samples and can be modified.

Regarding the phased plans Ms. Watkins discussed, is the entire plan ordered at the Status Hearing or is each phase ordered at subsequent hearings?

**Elizabeth Watkins' Answer:** The plans (available on under session resources) are meant to be given out in increments, and the court actually gives permission to move thru the phases at a hearing. This gives a public forum to congratulate a parent (and for other parents to see success when in person). Each plan lists "Phases 1 of 3" so parents know that this is the one they are on, how many they have left to go, and when they are coming to a conclusion.

Timing of the start of the plan depends on the willingness of the parent. We have a fantastic investigative unit, and if they can build a rapport and get a parent wanting to do services before we get to the adversary even – we don't wait. Our investigators can set up drug treatment, mental health appointments and such. We then usually have agreed temporary orders, and the parents already started on services. I think you'll find that if the team approaches the family in a traumainformed way, more will want to start services sooner. If, however, this doesn't happen, we "set the tone" at the temporary orders hearing. We start with being kind – not blaming – and if we get TMC, we ask the parent – "How can we get started right away?" The longer you wait, the less motivated some parents become – they get used to not seeing their child and can slip into a deeper decline. Sooner is better.

I find that many of my clients are also at a disadvantage in basic organizational skills, like filling out paperwork or maintaining paperwork, applying for housing, scheduling appointments for their services, etc. My staff spends a lot of time just assisting the parent with these skills, and this seems to be a big hole in service plans. Most operate from the assumption that these families already have these skills, when in fact, many do not.

Elizabeth Watkins' Answer: I am right there with you – we recently had this discussion in our CORE team meeting (our monthly meeting with the trauma-informed core team members) and found a resource – a charity – that is willing to provide physical, write in schedule/notebooks. This idea just came about when the CPS supervisor and parent attorney were talking about the overlapping OT/Speech therapy appointments and how this mom, with ADHD, was having trouble keeping them straight. This mom has a parent mentor (thru Fostering Hope here in Austin) and we are giving her the daily scheduler to write things down. It also gives the worker/CASA/child's attorney something to talk about on their home visits as well. They each ask to see the scheduler, and the CPS worker helped write in all the appointments. Smalls steps to build a habit of better management.

Without observing lifestyle changes, how can we be comfortable with sending a child back into a home that has proven pattern of address and regress, with earlier return and monitor, how without the additional professional feedback can we recommend that without having substantial reasons to believe it will be safe

Elizabeth Watkins' Answer: This is a question the judges here in Wilco had, and have implemented a few things to help ease their minds. First – the caseworkers are trauma-informed, make way more home visits than policy requires, and file "advisements" with the court with any updates. These advisements are available to all the parties and list the activities the parent and child are involved in at any given time. Yes, it is way more work, but so is a trauma-informed system. Second – and probably most impactful – has been the inclusion of a parent mentor in the last phase of service. Like a parent coach, they make a home visit and help with the interaction between the parent and child, now that both have been changed by the process. They come during a mealtime, during bath time – during tough transition times, and help at first, then become an observer, and eventually leave the parent on their own. I have always found this last phase in home help has

been essential in helping when reuniting children who are changed, and parents who are very different than when the kids left.

What if circumstances prevent a family team meeting before removal? Do you have experience with conducting the team meeting between removal and the initial adversary hearing, and what are the benefits? Specifically, does this assist in blunting what can be a very adversarial feel when we walk into the courtroom?

**Elizabeth Watkins' Answer:** Absolutely, and I have added this section to my emergency removal protection order to help facilitate making the Family Team Meeting (FTM) happen:

## 1. Notice of Family Group Conference:

1.1. Notice is given to Respondents **SJD and NSL** that this cause is set for a Family Group Conference on **September 23, 2019 at 1:00 p.m**. located at 1101 E. Old Settlers Boulevard, Suite 300, Round Rock, Texas 78664.

When the removal request is submitted, I ask the investigations worker for the date and time of the FTM to make sure one is set up. They don't always happen, but the above is a notice, not an order – so encouragement from the captain is helpful.

What does the impact of docket size and attorney caseload on both the parent's attorneys, children's attorneys and CPS attorneys have on the ability to implement Trauma-informed Practices in each case?

Elizabeth Watkins' Answer: It certainly makes it more difficult. Trauma-informed is patient, aware, and communicative. It requires a LOT more communication outside of the courtroom and court hearings. In talking with the parent attorneys here in Wilco, one of the first things I requested was for the appointment wheel to allow for a higher amount per hour for those attorneys that are trauma-informed (and provide the court with proof of attendance at trainings) and to add to the current payment schedule something for meetings/communications outside of court. This helps the parents' attorneys to be able to spend more quality time with their clients and resolve issues with the Department before we even get into court. It incentivizes the quality work. It's a delicate balance, and

my presiding Judge has gone to Commissioners Court for the funds and gotten some. Also, helpful – offering trauma training to our Commissioners Court so that they have some understanding about the complexity of child welfare cases. We have several commissioners who were very interested and now have spearheaded the push to make sure Wilco is a trauma-informed county.

I always felt that courts and their staff should have training in Trauma care. How should we attain or work in having court and staff trained not just in trauma care but in understanding CPS, their policies and what the families are facing and needing from the court?

Elizabeth Watkins' Answer: Resources are available across the state and nationally for these trainings. The Children's Commission and State Bar have webinars, so no need to leave home. Google searches and looking at the resources and links on sites like the Children's Commission, Texas Lawyers for Children, and the national child welfare organizations can provide invaluable info of what is available. There are those of us that "travel" for training. I also would tap into local providers – local therapists – not only does it build rapport, but it can help explain what the psychological evaluation is, why they say certain things. I definitely have CPS trainers come – they are specific department employees for this. I've attended their trainings, when allowed. I also attended other counties trainings – Justice Byrne had awesome lunch and learns. We had a brown bag lunch once a month where we invited a provider to talk while all of us – Judge included – ate our lunches. We even had a book club to discuss "The Body Keeps the Score." Judge Clark assigned each of us on the core team a chapter to report on at our lunch and learn. Stay connected with your team, share info. I have compiled over the years a resource spreadsheet and try to update it as often as possible, in this field, I find that it is absolutely necessary.