STATE OF NEW JERSEY
DEPARTMENT OF
HUMAN SERVICES
and
DEPARTMENT OF CHILDREN
& FAMILIES
SUBSTANCE ABUSE CONSORTIUMS
August 2009

CHILD WELFARE REFORM

- Federal lawsuit brought against NJ and the Department on behalf of the children in foster care in NJ;
- A court appointed panel of national experts along with key representatives from the Department of Human Services developed a comprehensive plan that reinvented the child welfare system in New Jersey;
- On June 9, 2004, the Child Welfare Reform Plan was adopted.

Child Welfare Reform Plan

Key Areas of Reform

- Caseload reduction
- Reformation of the case practice model
- Training
- Continuous Quality Improvement
- A new structure for the delivery of Child Welfare Services
- Development of Community Resources

What are Child Welfare Substance Abuse Consortiums?

- Child Welfare focused
- DYFS/ WFNJ involved families
- Substance Abuse concerns
- Cross systems collaboration
- Coordination of services

The Overlap

- New Jersey's data indicates the co-occurrence of child abuse and neglect and substance abuse is prevalent, and that families experiencing substance abuse and child abuse also have additional complex and interconnected concerns such as poverty, risk of homelessness, domestic violence, poor physical and mental health, low literacy levels, etc.

The Facts

- In New Jersey, at least one caregiver was known to have a substance abuse problem in all substantiated abuse and neglect cases
- 31% of families involved with DYFS are also receiving TANF.
- 25% of New Jersey's families receiving TANF currently have an open child welfare case.
- Approximately 20% of adults receiving TANF are in need of substance abuse treatment services.
- Current research indicates that many child welfare cases that pass through the family court system are in some way affected by substance abuse.

The Goals

- Improve coordination and collaboration on behalf of families with complex multi-service needs at the local level
- Provide increased access to substance abuse treatment resources for families
- Provides a forum for community stakeholder (i.e., DYFS Local Offices Board of Social Services, Substance Abuse Treatment Providers, DFD, DAS, DHS and DCF Central Office Staff to address local administrative issues)

Division of Addiction Services

Treatment for Women

History

- Since SFY"80 DAS has provided funding from the Federal Substance Abuse Block Grant Women's Set-Aside for gender specific substance abuse treatment to pregnant women and women with dependent children;

- SFY'96 DAS and Department of Human Services (DHS)/Promoting Safe and Stable Families (PSSFP) jointly funded Seabrook House under the Camden Initiative for residential substance abuse treatment to women and their children under DYFS supervision;

- SFY'98 DAS, Department of Human Services (DHS)/Promoting Safe and Stable Families (PSSFP) provided funding for women and their children under the supervision of DYFS who were eligible for Work First. Agencies;

  - Straight and Narrow
  - Project Free Asbury Park
  - Project Free Newark
  - Project Second Chance Jersey City

What already existed?

- 1997 - The Division of Youth and Family Services (DYFS) implemented a Child Protective Substance Abuse Initiative (CPSAI). Vendors include Catholic Charities, Center for Family Services, and Preferred Children's Services. Funding- State and Federal resources through contracts with DYFS.

- 1998 - Work First New Jersey implemented the Substance Abuse Initiative (SAI). Statewide vendor is NCADD. Funding- State and MOE resources through DFD contract.

What is the Child Protection Substance Abuse Initiative (CPSAI)

- CPSAI has a strong working relationship with many professionals and organizations involving substance abuse, schools, probation, parole, insurance companies and other referral sources.
- They work closely with child study teams, Division of Youth and Family Services and vocational services. They're involved with the county's Case Assessment Resource Team (CART) and Multi-Disciplinary Team (MDT), as well as the Care Management Organization (CMO) in counties where they exist.
- CPSAI is an active participant in the planning process in the county and member of many committees, including the Professional Advisory Committee on Alcohol and Drug Abuse, the Governors Council on Alcoholism and Drug Abuse and the Association of Treatment Providers and CWRP Substance Abuse Consortium.

Goals and Purpose

- The goal of the Child Protection Substance Abuse Initiative (CPSAI) is to help assist DYFS with the identification of a child who may be at risk due to their parents/caretaker's involvement with substance use.
- Referrals are provided to CPSAI from the DYFS Local Office.
- CPSAI is based in every Local Office to help assist the DYFS workers identify clients with substance abuse issues.
- A substance abuse assessment is completed through the New Jersey Substance Abuse Monitoring System (NJSAMS), clients are referred to a substance abuse treatment program when appropriate and support and encouragement is provided to the recovery of clients.

What is the WFNJ SAI?

- The statewide Work First New Jersey Substance Abuse Initiative (WFNJ-SAI) transitions TANF and GA clients with substance abuse barriers to work activities. WFNJ clients can attend substance abuse treatment in lieu of a work activity.

- The WFNJ-SAI welfare reform program has two components:
  - Employment Directed Case Management (EDCM): Provides substance abuse assessments, augments treatment, coordinates services and transitions clients from pre-employment treatment to standard work activities at the One Stop Career Centers. The National Council on Alcoholism Drug Dependence-New Jersey (NCADD-NJ) is the DFD service provider.

  - Treatment: A statewide WFNJ Provider Network of treatment agencies licensed and approved by the DAS to offer a continuum of substance abuse services to TANF and General Assistance (GA) clients.

Linking DYFS families to SAI

- Expanded eligibility to include GA parents with a family reunification plan in place;
- “No wrong door” referral system;
- For TANF/DYFS families both the TANF and DYFS incentive/ disincentive options will be fully implemented to engage clients and externally motivate their compliance with substance abuse treatment;
- All families are assessed for child well-being and child safety issues by the SAI case manager on an ongoing basis using a tool developed with DYFS based on the child safety assessment;

- Urine Drug Screening has been added as a component for the assessment for all open DYFS clients;
- Joint treatment planning for DYFS families will take place with SAI case manager, DYFS case worker, and CWA case manager. A uniform set of treatment goals will be agreed to by all parties;
- Multiple agency authorization of release of information forms signed at assessment. Clients participate in a rigorous informed consent process guided by the SAI case manager. SAI case managers are upfront and clear about sharing information with DYFS;
- Any negative reportable event (failed attendance in treatment, a positive urine test) is reported by the SAI case manager to DYFS immediately;
- Monthly case conferencing will take place with SAI case managers, DYFS case workers, CWA case managers, other concerned agencies, and the client, when appropriate.

Substance Abuse Consortias

- As of today, the consortiums are available for DYFS and WFNJ eligible families in 13 counties:

  Atlantic
  Camden
  Cape May
  Cumberland
  Essex
  Gloucester
  Hudson
  Mercer
  Monmouth
  Ocean
  Passaic
  Sussex
  Union

DIVISION OF ADDICTION SERVICES

CHILD WELFARE REFORM

TREATMENT EXPANSION

4 Residential Programs for pregnant women or women with dependent children under DYFS supervision

- *Newark Renaissance (Families United Program)*
- *Seabrook House (MatriArk Program)*
- *Sunrise House (Mother and Me Program)*
- *Straight and Narrow (Alpha III Program)*

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- **1 Halfway House**
- **Center for Great Expectations**

- **2 Intensive Outpatient Programs with Housing/Case Mgmt.**
- **CURA (New Beginnings/Women's Services)**
- **Eva's Village (Hope Residence for Women & Children)**

13 Intensive Outpatient Programs for pregnant women and women with dependent children under DYFS supervision

- Cape Counseling (Choices Program)
- Catholic Charities-Mercer (Project Free Program)
- Catholic Charities-Asbury Park (Project Free Program)
- Cathedral Health Services – Newark (Project Free) St. Michael's Hospital
- Christ Hospital-(Project Second Chance Program)
- Center for Family Services (Families First Program)
- Family Connections (Reunity House Program)
- Institute for Human Development (Women's Day Program)
- Integrity House (WISE Program)
- Center for Behavioral Health-Plainfield (Steps Recovery Program)
- Preferred Behavioral Health (WARN Program)
- SODAT (Women First Program)
- The Bridge (Stepping Stone Program)

7 Methadone Intensive Outpatient Programs women and women with dependent children under DYFS supervision

- *East Orange Substance Abuse (Project Hope Program)*
- *Jersey Shore Addiction Services (Choices for Change Program)*
- *New Brunswick Counseling (The Children's Attic Program)*
- *Parkside Recovery (Project Hope Program)*
- *Paterson Counseling (Family Freedom Program)*
- *Somerset Treatment Services (Mom's Program)*
- *Spectrum (SISTA Program)*

4 Intensive Outpatient Programs for Fathers with Dependent Children

- SODAT (Father's Legacy)
- Parkside Recovery
- Preferred Behavioral Health (MISTR Men in Search Toward Recovery)
- Family Connections (Strong Fathers)

Women and Children Enhanced Treatment Services Include

- Gender specific treatment
- Assessment and treatment for co-occurring disorders;
- Family centered treatment
- Individual counseling sessions;
- Family counseling sessions;
- Trauma Informed/Trauma Specific Treatment using "Seeking Safety Program"
- Group and Educational counseling sessions;
- Case management services including referrals and follow-up throughout continuum of care and recovery support

- Childcare – to focus on developmental needs and age appropriate activities;
- Children referred for medical (including immunization and/or psychological care as needed);
- Evidence based Parenting Skills Curriculum
- Strengthening Families Program;
- Life Skills Training (budgeting, nutrition, household, child safety);
- Linkages and Recovery Support
- Transportation as needed.

Consortia: Cross Systems Case Conferences

- Regular monthly meetings in 13 counties;
- Child Welfare centered;
- Case specific;
- Participants include: WFNJ case work supervisors, Board of Social Services, substance abuse treatment providers, DYFS case workers and supervisors, substance abuse counselors from CPSAI and SAI and State representation (DAS, DYFS and DFD);
- Complex cases where case planning requires collaboration and coordination across agencies;
- All agency resources and leverage with clients are maximized;
- Information sharing/ systems education for participants.

New Jersey Links with Maternal Child Health

- Many pregnant clients need immediate access to prenatal care to meet admissions criteria for substance abuse treatment.
- Healthy Families is underway in some of the same counties and in many cases working with the same families.
- Programs can be a referral source for women screening positive in the 4 P's Plus.

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