

Florida's Early Childhood Court

How It All Began

Florida has a long and impressive history of progressive model court initiatives, pioneering the nation's first drug courts and unified family courts. Likewise, Florida was the birthplace of the nation's first Early Childhood Court, the Miami Child Well-Being Court, which inspired national expansion of Zero to Three's Safe Babies Court Teams.

Building upon these model programs, best practices research, and the compelling science of adversity, Florida has embarked on a collaborative statewide Early Childhood Court initiative.

Florida's Early Childhood Court Initiative began in 2013 when Florida State University's Center for Prevention & Early Intervention Policy was awarded a federal grant on Trauma & Toxic Stress in HRSA's Early Childhood Comprehensive Systems grants. At the state level, a Trauma Informed Care Workgroup was designated under the Florida's Children & Youth Cabinet to heighten awareness about trauma issues across agencies and systems. A website was created by FSU to showcase trauma informed systems: www.floridatrauma.org including "baby court" which is featured within child welfare.

Two "baby court team pilots" were designated and supported to showcase trauma informed care at the local level. The purpose of the pilots was to establish an integrated system of care addressing trauma and child well-being and to improve outcomes for very young maltreated children involved with the judicial system.

The Circuit 1 Pensacola site has an impressive history of model court initiatives with committed judicial leadership. Their Early Childhood Court docket started in October 2013 in partnership with Lakeview Center, the Community Based Care program, providing both the clinical expertise and funding for the community coordinator. (See detailed description under Florida sites).

Circuit 6 (Pasco County) began in 2014 with strong judicial leadership, widespread community support and a dedicated child parent therapist who has served in the community coordinator role without funding. Lives have been transformed through these pilot initiatives, which have also served as models for other circuits to see in action. (See detailed description under Florida sites).

FSU's role is to spearhead the overall initiative, expand awareness of trauma and toxic stress, create an implementation manual, host monthly calls among key players, facilitate linkages between the early childhood systems and the judiciary, and expand capacity for evidence based interventions to improve outcomes for infants, toddlers, and their families. The success of the pilots along with increased awareness of the science and recognition of the need for improved outcomes has resulted in widespread enthusiasm and statewide expansion of Florida's Early Childhood Initiative.

Florida's Early Childhood Court Initiative Kick-Off Meeting

Officially, "baby court" became Florida's Early Childhood Court Initiative in April 2015 with a statewide kick off summit to support implementation for 22 judges from across the state and 200+ community partners. The summit was a collaborative effort between the Department of

Florida's Early Childhood Court

Children and Families Office of Child Welfare, Zero to Three, the Office of Court Improvement, FSU, and a multitude of judges, attorneys, community coordinators, infant mental health specialist, case managers and many more. The agenda included dynamic sessions on trauma and attachment, changing the intergenerational cycle of trauma, family time/visitation, financing options for sustainability, in addition to a gap analysis and implementation plan that each site developed.

Collaborative Partners

Office of Court Improvement Florida's Office of Court Improvement has a long and impressive history of progressive model court initiatives, pioneering the nation's first drug courts and unified family courts. A convergence of factors compelled the Office of Court Improvement to adopt "baby court" as a model court initiative - the robust science of early brain development and understanding of the impact of early adversity; the increasing number of young children entering child welfare; the tragedies and need for better outcomes; the impressive outcomes shown by Safe Baby Courts; and input from the judiciary to provide therapeutic jurisprudence and change the trajectory for families in dependency. Florida's Court Improvement team is staffed by attorneys, court analysts, and systems programmers aimed at improving the safety, permanency, and well-being of children and improving outcomes for families involved in the dependency court process. In addition to providing training and technical assistance to dependency judges, magistrates, and court staff, the Court Improvement team has compiled the circuit data and created the Data Tracking System to designed to evaluate the efficacy of the Early Childhood Court Initiative.

Quality Improvement Center for Research-Based Infant-Toddler Court Teams Eleven judiciaries joined together under the leadership of FSU and the Office of Court Improvement to successfully receive a grant in March 2015 from Zero to Three's Quality Improvement Center for Research-Based Infant-Toddler Court Teams (QIC-CT), the Center for the Study of Social Policy, the National Council of Juvenile and Family Court Judges, and RTI International. In addition to training and technical assistance for all participating Early Childhood Court sites, the grant includes an evaluation component, as well as the provision of a Zero to Three statewide, state-level coordinator position to be housed with the Court Improvement Program. Carrie Toy is the statewide coordinator. For more information, see: Children's Bureau and Zero to Three.

Florida Association of Infant Mental Health (FAIMH) FAIMH has been involved with Florida's pioneering efforts since the original baby court initiative began in 2000 - building linkages between infant mental health and the judiciary. For over a decade, FAIMH has been building the infant mental health expertise which today is at the core of baby court. Child Parent Psychotherapy is the core evidence based intervention in baby court, for which FAIMH has worked to expand capacity and professional development, galvanize funding and to share clinical best practices. FAIMH's 2014 Annual Conference brought in national trauma experts and featured a track of national experts on "baby court" and a 2015 "mega-conference" is planned to also showcase best practices in infant mental health. In 2013, FAIMH created a statewide workgroup on "baby court" and are key players in the local community court teams. Monthly calls continue to be held to identify gaps in services, brainstorm strategies, and share best practices. Helping to build Florida's Early Childhood Court Initiative is in alignment with Florida's

Florida's Early Childhood Court

Strategic Plan for Infant Mental Health which specifies creating a system of care, building a workforce of infant mental health professionals, and expanding the evidence base for interventions for vulnerable young children; and linking infant mental health with systems with vulnerable children and families.

Florida's Early Childhood Court

What is Early Childhood Court?

Early Childhood Court addresses child welfare cases involving children under the age of three. It is a problem-solving court - where legal, societal, and individual problems intersect. Problem-solving courts seek to address not only the legal issues but also the underlying non-legal issues that will benefit the parties and society as well. The goal of Florida's Early Childhood Court is to improve child safety and well-being, change the experience and outcomes of children in the child welfare system, heal trauma and repair the parent/child relationship, expedite permanency, and stop the intergenerational cycle of abuse/neglect/violence.

Florida's Early Childhood Court

11,342 Active Florida Cases

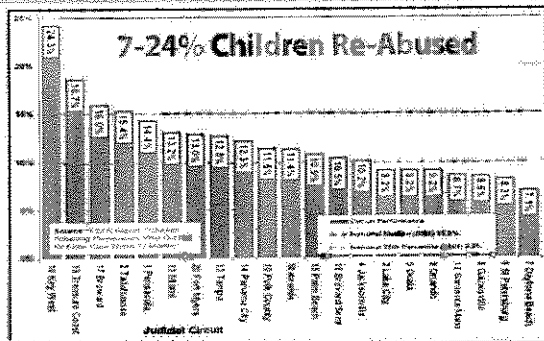
For Children Ages 0-3, as of January 2015

County	# Cases Ages 0-3	County	# Cases Ages 0-3	County	# Cases Ages 0-3	County	# Cases Ages 0-3
Escambia	306	Clay	110	Galveston	10	Okaloosa	29
Escrowna	215	David	141	Lepi	11	Washington	100
Franklin	86	DeSoto	23	Lee	11	Walton	406
Hamilton	42	Duval	101	Orange	531	Wakulla	45
Hernando	4	Hernando	124	Ozarks	164	Wilder	1,190
Jefferson	16	Lake	137	Franklin	24	Bayard	352
Leon	104	Madison	254	Highland	60	Seminole	155
Liberty	2	Sumter	23	Putt	391	St. Johns River	55
Manatee	4	Volusia	290	Manatee	1,226	Manatee	48
Maricopa	5	Wakulla	411	Duval	20	Chloroquin	29
Polk	58	Flagler	33	Manatee	207	St. Johns	235
Polk	1	Putnam	14	Sarasota	185	Charlotte	93
Manatee	10	St. Johns	57	Hillsborough	1,218	Collier	156
Lafayette	1	Volusia	362	Bay	162	Alachua	2
Madison	1	Alachua	178	Calhoun	14	Florida	28
St. Johns	15	Baker	14	Gulf	10	Bay	403
Taylor	12	Bradford	12	Holmes	14	Total	11,342

Why Florida Needs Early Childhood Court

The legacy of unhealed adverse childhood experiences is seen every day in dependency court, as formerly abused or neglected children are now the abusing or neglecting parent. Fortunately, this multigenerational cycle of trauma and maltreatment can be interrupted with a systemic shift toward "therapeutic jurisprudence," a reframing of the judicial system to promote a more effective approach to altering the trajectory for maltreated children and their families.

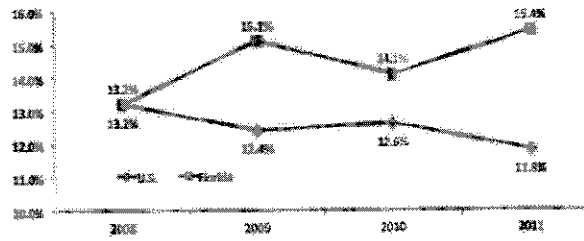
Florida Re-entry Rates by Circuit



Florida Department of Children and Families (2014). 2014 Child Protection Summit. Community Panelist.

Florida's Rates of Re-Entry into Child Welfare Have Increased While National Rates Have Steadily Decreased

Percent of children reunified who re-enter within 12 months

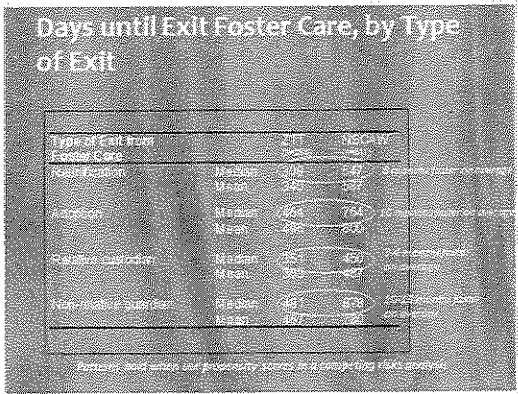


U.S. Department of Health and Human Services, Administration for Children and Families, Child Welfare System. (2011). Child Welfare System.

Florida's Early Childhood Court

Teams Project is making significantly positive differences in the lives of infants, toddlers, and their families. Key findings from the evaluations include:

- 99.05% of the 186 infant and toddler cases examined were protected from further maltreatment while under court supervision (JBA, 2009).
- 97% of the 186 children received needed services (JBA, 2009).
- Children monitored by the Safe Babies Court Teams Project reached permanency 2.67 times faster than the national comparison group (McCombs-Thornton, 2011).



Source: *Fostering a Permanent Home: A Mixed Methods Evaluation of the ZERO TO THREE Court Teams for Maltreated Infants and Toddlers Initiative* (2011).

In addition, *Economics for the Public Good* evaluated the cost effectiveness of the Safe Babies Court Teams on the basis of one positive outcome: expedited permanency. *Economics for the Public Good* found that:

- The average direct cost is \$10,000 per child, which is similar to or lower than those found in other early childhood interventions.
- Short-term savings generated by the earlier exits from foster care are estimated at an average of \$7,300 per child. In other words, the Court Teams' reduced costs of foster care placements alone cover two-thirds of the average costs per child.
- Children involved with ZTT Court Teams access more services than the comparison group. In particular, Court Teams' children were significantly more likely to receive a developmental screening (92% v. 25%), health care visit (94% v. 76%), and dental visit (29% v. 18%).

Florida's Early Childhood Court

Early Childhood Core Components

Judicial Leadership

Florida is nationally respected for its progressive and innovative courts, pioneering the nation's first drug courts and unified family courts. Likewise, Florida was the birthplace of the nation's first Early Childhood Court, and Judge Lederman has provided judicial leadership over the past decade in promoting systems collaboration between early childhood and the judiciary.

Judicial leadership is pivotal in facilitating changes in court procedures and improving collaboration with child welfare, community mental health, and other service providers on behalf of better outcomes for young children. Judges are the catalysts for change because of their unique position of authority in the disposition of child welfare cases. The trauma-informed judge asks "Have I considered whether or not trauma has played a role in the parents' actions or the child's behavior?" The judge understands that healing underlying trauma is essential for helping parents realize optimal capacity for parenting. (See Florida's Family Court Tool Kit below)

The judge recognizes a broader version of "best interest of the child" which includes consideration of the child's attachment relationships. The judge also orders child-parent psychotherapy and frequent visitation to enrich the child-parent relationship and to expedite permanency, strives to stabilize the foster care placement, and encourages case managers to avoid moves that may be detrimental to the child.

The judge is not a "social worker" and therefore, relies on the community coordinator and court team to determine appropriate services and create a case plan with key essential elements. Furthermore, the judge understands the importance of ordering evidence-based services to enhance child well-being such as high quality childcare, developmental screening and appropriate early intervention, home visiting, parenting classes, dyadic therapies, and early childhood mental health consultation to childcare. The court sets aside a special docket for young children and schedules monthly reviews to assess progress and to identify modifications needed.

Trauma Lens

A core foundation of this initiative is the understanding of the impact of trauma on children and their families. Approximately 90% of children known to the foster care system have been exposed to trauma. A child's experience of trauma, whether it is psychological maltreatment, neglect, exposure to violence, or physical or sexual abuse, can have broad and long-lasting adverse effects on developmental functioning, and physical, social, or emotional well-being including a child's physiological and emotional responses; ability to think, learn, and concentrate; their impulse control, self-image, and relationships with others. Across the life span, complex trauma or exposure to multiple traumatic events can be linked to a wide range of problems, including addiction, chronic physical conditions, depression and anxiety, self-harming behaviors and other psychiatric disorders. The ACE study demonstrated a correlation between long-term negative outcomes in adulthood with multiple adverse experiences that occurred in childhood.

Florida's Early Childhood Court

A trauma lens shifts the focus from "what's wrong with this child or adult" to "what has happened to this child or adult." Challenging behaviors may be misinterpreted as simply "bad" instead of understanding these behaviors in the context of trauma and unmet emotional needs. It is critical to recognize the signs of trauma and get appropriate treatment so that healing can begin and re-traumatization can be prevented. In many families known to child welfare, the parents have had early adverse experiences and unhealed trauma and thus, the cycle continues, negatively impacting the physical and mental health of their own children. Compelling evidence shows that healing early trauma can change one's life trajectory and that while early intervention is best, it is never too late for healing to occur. Thus, trauma screening and services should be available to both parents and children and provided by mental health specialists with trauma expertise. A website has been created to build awareness of trauma informed systems across Florida's agencies.

Central Role of Infant Mental Health Specialist & Child-Parent Psychotherapy

One of the major differences in a traditional dependency court and the Early Childhood Court Team is the predominant role of the infant mental health (IMH) specialist in the court. The IMH specialist can assess the child-parent interactions and the parents' capacity to provide nurturing and safety; work with both parent and child for repairing the relationship; provide coaching to improve visitation; make recommendations about the feasibility of reunification; assist in the transition to permanent placement if reunification is not feasible; and help the parent adjust to the loss. The clinician provides the judge with a professional assessment of the family's ability to protect and care for the child and to ensure the child's overall well-being.

Child-Parent Psychotherapy (CPP): The predominant evidence-based intervention in both the Miami Child Well-Being Court Team and Zero to Three's Safe Babies Court Teams is Child-Parent Psychotherapy. CPP is central to the goal of repairing the child-parent relationship and healing the child's traumatic stress with a careful eye on attachment. CPP is considered a powerful therapeutic vehicle for catalyzing the parent's insight and motivation to address the problems that resulted in the child's removal from the home.

The IMH clinician seeks to heal the relationship between the child and the parent by helping the parent develop a realistic assessment of the child's needs and abilities. Through the course of treatment, the therapist helps the parent address past trauma that is impairing the parent's view of the child. CPP has demonstrated effectiveness for parents who have maltreated their young children achieve a healthy relationship, while addressing the underlying reasons for their incapacity to parent. CPP can be provided in a clinical setting or in a home-based model.

Continuum of Behavioral Health Services

In addition to the essential Child-Parent Psychotherapy, families involved in child welfare often need additional therapeutic interventions. Each Early Childhood Court team should work with their community to ensure a continuum of evidence based behavioral health services to address the array of trauma, mental health, substance abuse, and domestic violence issues facing families in child welfare.

The intensity of the intervention should mirror the specific characteristics of the parent and child. The continuum of mental health services could include:

Florida's Early Childhood Court

- Parent-Child Relationship Assessment
- Trauma Interventions
- Individual Parent Treatment for Mental Health/Substance Abuse/Domestic Violence
- Therapeutic Visitation/Visit Coaching
- Child-Parent Psychotherapy
- Family Therapy where identified child may/may not be present based on appropriateness. This work often includes significant others (parent partners, extended family members)

Developing the continuum of services: Community mental health agencies often provide an array of mental health services to their clients, but child-parent psychotherapy or other mental health services designed specifically for children 0-5, are rarely offered. Many therapeutic services are not yet "trauma-informed" nor do they have the capacity to meet community needs. Most communities need to develop this continuum of services. The first step is to initiate a series of meetings with service providers to learn more about what is currently available in the community and conduct a formal or informal "gap analysis." Providers should be encouraged to present information about their services at Court Team meetings and continue to participate as active members. Once these partnerships are established, the Court Team can devise a plan to develop a full continuum of infant mental health services in the community.

Collaborative Court Team

The Court Team represents the concerned agencies that commit to make system changes on behalf of young children in the court and work with the judge to put the Early Childhood Court Team model in place. When beginning a Court Team, a local judge and his or her counterpart at the child welfare agency convene an initial informational meeting with representatives of community stakeholders. The purpose of the meeting is to explain the need to focus on infants and toddlers, to begin to outline how the many organizations that touch the lives of these children can work together on their behalf, and the urgency of achieving permanency. The Court Team is made up of key community stakeholders involved with the court who commit to restructuring the way the community responds to the needs of maltreated infants and toddlers.

The Court Team meets monthly to learn about the services available in the community, to identify gaps in services, and to discuss issues raised by members of the Court Team related to cases they are monitoring. The Court Team should determine the community need and capacity; assess the number of children in dependency ages birth to three or birth to five; determine exclusion criteria for participation (e.g., parent in residential care, rehabilitation or jail; parent actively using substances); identify early childhood mental health providers in area (in collaboration with FAIMH); work with the CBC and community mental health agencies to understand Medicaid reimbursement and Purchase of Services needed to engage therapists; and formalize decisions and protocols.

Membership in the Court Team should be by open invitation. It is anticipated that the diversity of agencies represented will expand over time. Members can include:

Florida's Early Childhood Court

- Local leaders at government agencies serving children and adults
- Primary health care providers; Healthy Start
- Attorneys representing children, parents, and the child welfare system
- Community based care system and partners
- Court Appointed Special Advocates (CASAs) and Guardians Ad Litem (GALs)
- Mental health and infant mental health professionals
- Early intervention specialists; Early Steps
- Substance abuse treatment providers
- Dentists
- Domestic violence service providers
- Representatives from colleges and universities
- Members of foster parent organizations
- Children's advocates
- Early Head Start, early learning coalitions and child care providers
- Court Improvement Project staff
- Volunteer community leaders
- Potential funders (Community Foundations, United Way)

Community Coordinator

A local Community Coordinator provides child development expertise to the judge and the Court Team and takes the lead in finding needed services, qualified providers, and commensurate funding. This professional ensures court reviews are held as needed and schedules case/family review meetings on a regular basis.

Cross Agency Training

Systems change is possible when all the agencies and players involved in the court team are trained in the Baby/Early Childhood Court Team model, trauma-informed care, the social-emotional needs of young children, the science of adversity, and the impact of trauma upon development and mental health. Training resources include local Florida Association of Infant Mental Health chapters, university experts, the Office of Court Improvement, local CBCs, national Zero To Three, etc. Florida State University created an Early Childhood Court Resource List, which is a web-based resource clearinghouse to assist in the implementation Early Childhood Courts.

Developmental Support for the Child/Parent (Developmental Screening, Early Intervention, and Quality Child Care)



Florida's Early Childhood Court

Development proceeds at a faster rate during the first five years of a child's life than at any subsequent developmental stage. This period offers great potential to establish a positive developmental trajectory, but also creates vulnerabilities for the child if their physical status, relationships, and environments do not support appropriate learning, development, and growth. These developmental years provide the foundation for later abilities and accomplishments.

Value of High Quality Learning Environments: Florida's Rilya Wilson Act states that "children who are in the care of the state due to abuse, neglect, or abandonment are at increased risk of poor school performance and other behavioral and social problems. It is the intent that children who are currently in the care of the state be provided with an age-appropriate education program to help ameliorate the negative consequences of abuse, neglect, or abandonment."

High quality childcare can significantly help address the needs of children in child welfare by enhancing development and providing nurturing and emotional support. It can also serve as a protective factor for further abuse.

Children in child welfare are eligible for subsidized childcare. The Florida Office of Early Learning (OEL) administers federal and state child care funds and partners with 30 local early learning coalitions to deliver comprehensive early learning services statewide. The office oversees three programs—the School Readiness Program, the Voluntary Prekindergarten Education Program, and Child Care Resource and Referral Network. There is also a statewide Resource and Referral call number: 866-357-3239. Each area has a local Early Learning coalition charged with coordinating childcare options and hosting an office for registering children for subsidized childcare.

CAPTA Law Requiring Developmental Linkages for Child Welfare. The high incidence of unmet needs and the potential benefits of early intervention for children encountering the child welfare system was so compelling that the federal government enacted the Child Abuse Prevention and Treatment Act (CAPTA) to ensure better access to Part C early intervention services. Since 2003, all verified abuse cases of children under age three are required to be referred to Part C (Early Steps) for developmental screening. If the child is found to be eligible, services must be provided.

Parent Education and Support

Many parents in the child welfare system were never adequately parented themselves and lack appropriate role models. Parent training programs provide education and practice to enhance parenting capacity and skills. These programs have been researched and ranked in the California Evidence Based Clearinghouse for Child Welfare. Programs are rated as: Level 1: Well supported by research evidence; Level 2: Supported by research evidence; Level 3: Promising practice; or NR, which is not able to be rated due to lack of evidence. Choosing parenting education programs should consider the research evidence; appropriateness of the parent education for the age of the child (i.e., ages 0-5, adolescence, all ages); and appropriateness for the target population (i.e., child welfare, children with disabilities, child with behavior challenges; etc.).

Florida's Early Childhood Court

Parent "education" programs are not to be confused with parent "therapy" programs. Parenting education provides instruction about child development and positive approaches to nurturing and caring for children. Parent therapy is "therapeutic" and focused on healing trauma, addressing substance abuse and other issues that interfere with parenting capacity.

Home visiting is another valuable support for families with young children. This in-home model provides a home visitor, clinician, nurse, social worker or paraprofessional who regularly comes to the home to support parenting efforts from pregnancy to kindergarten. A variety of evidence based home visiting models exist but all basically support parents in strengthening their relationship with their child, optimizing their child's development, sharing positive parenting techniques, and developing positive social supports. Home visiting programs have been shown to reduce risky behaviors (smoking, lack of prenatal care), improve birth outcomes, prevent child maltreatment, and enhancing positive parenting (i.e., reading baby's cues, reading books, alternatives to spanking) and improving school readiness. The Maternal Infant and Early Childhood Home Visiting (MIECHV) program has expanded and provides a list of evidence-based home visiting programs.

Placement Stability and Concurrent Planning

Any and every change in placement is a difficult adjustment for the child. Ideally, the first placement is the last placement. Changes in placement can be minimized by reaching out to extended family members prior to removal from the parents' care and by quickly identifying caregivers (kin and non-related foster parents) who would be willing to become the child's permanent family if reunification becomes impossible.

Florida law requires that every case involving a child in an out-of-home placement must be evaluated to determine if concurrent case planning is appropriate. Strategies for determining appropriateness are also outlined in rule. Since 2009, Florida's Dependency Bench Book has provided guidance in the chapter, Concurrent Case Planning Best Practice Model, as well chapters on related areas of placement stability and co-parenting.

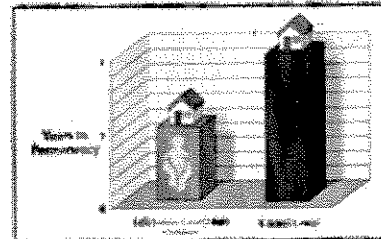
It is important for all members of the court team to understand concurrent planning and to make sure that (a) case managers follow concurrent planning best practices, and (b) parents and foster parents understand it is the legal way to ensure that their child reaches a permanent home as quickly as possible.

Monthly Family Team Meetings

An essential component of the baby court approach is a monthly team meeting to review progress of the open cases. The team consists of the community coordinator, the biological and foster parents, and the team of service providers, guardians ad litem, child welfare staff and attorneys, and extended family members. Monthly case meetings build communication among

Safe Baby Court Expedited Time to Permanency

Children exited foster care approximately
one year earlier than matched sample.



Source: NCJ 2009 - National Survey of Children and Child Abuse, 2008

Florida's Early Childhood Court

those invested in the child's case, speed access to services, and track the family's progress (referrals made, services received, and barriers encountered). Some meetings occur during the court hearing where the judge presides; others take place outside of the courtroom, and the judge learns about the team's recommendations during the court hearing.

Parent-Child Contact (Family Time / Visitation)

Frequent and consistent contact is essential if young children are to develop and maintain strong secure relationships with their parents. Research has shown that frequent visitation (i.e. multiple times each week) increases the likelihood of reunification, reduces the time in out-of-home care, and promotes healthy attachment. Knowing this, the Babies Court Team approach strives for daily contact between parent and child, which can include face-to-face contact, telephone, or Skype interactions. The Court Team focuses attention on increasing the time children and parents spend together by expanding the opportunities for visits (e.g., doctor's appointments, screenings, and other health services) and their locations (e.g., the foster home, the birth parents' home). Because parents who abuse or neglect their children may lack positive parenting models, the Court Team has identified strategies, such as therapeutic visitation, to improve parents' ability to appropriately respond to their children's needs.

Trainings have been provided across the state to educate judges on the science of attachment and best practices regarding family time and a multidisciplinary task force was created to revise protocols for the dependency bench book called Family-Centered Practice, Family Time/Visitation Protocols, finalized 8/21/2012.

Understanding the compelling research regarding the linkage between frequent visitation and the likelihood of reunification, Florida's judges have made significant strides in increasing family time/visitation from the monthly minimum required in statute. Community partners have worked to overcome transportation barriers by providing gas cards and bus passes for parents, and worked with Florida's guardian ad litem program to change policies to permit volunteers to transport children to family time. Weekly CPP sessions also provide an opportunity for therapeutic visitation. These efforts have significantly increased the amount of family time and while daily contact is optimal, a minimum of three times a week is commonly achieved.

Co-parenting

Most young children are co-parented by multiple significant adults—mothers, fathers, step-parents, relatives, neighbors, godparents, childcare providers, and teachers. For children in foster care, foster parents fill the key role as parent to the child. The Court Team works with all of the co-parents involved in the child's life, especially in efforts to find and engage fathers in the parenting process. The Court Team helps facilitate open and strong lines of communication between all important adults in the life of the child and helps them develop a connected, coordinated and attuned view of the child. This: 1) creates an environment that increases predictability, routine, and ultimately family-level security for the child; 2) decreases the child's stress when transitioning between residences and caregivers; and 3) increases the likelihood of the family's reunification.

Evaluation

Florida's Early Childhood Court

Evaluation is essential for determining program effectiveness. In order to standardize data collection and build a database for tracking outcomes, Florida's Early Childhood Court Teams will use the Early Childhood Court Tracking System, a specialized module housed within the Florida Dependency Court Information System. CIP designed the tracking system in cooperation with the statewide Early Childhood Court leadership team and the data sub-workgroup. Version 1.0 was released in November 2014. The data elements relate directly to the core components and include data on family time, parent-child relationship assessments, developmental screenings, and CPP sessions.

Through CIP's data sharing agreement with the state child welfare agency, the tracking system also retrieves basic case information from the agency's Florida Safe Families Network. The system will monitor the following permanency and safety measures: 1) time to permanency (from removal to reunification and from removal to legal permanency — court case closure); and 2) recurrence of maltreatment. In addition, CIP is currently attempting to define well-being measures. Some of the basic data that will be captured include:

- Number of children enrolled
- Demographics of children enrolled
- Type(s) of maltreatment/reason(s) for removal
- Parent/caregiver risk factors
- Length of time in Early Childhood Court Program
- Intervention services provided (team meetings, court hearing, developmental screening, CPP, visitation, referrals)
- Number of placements and reasons for disruption
- Length of time from removal to reunification
- Length of time from removal to permanency
- Reunification/permanency type (e.g., parents, permanent guardianship, adoption)
- Number of children with another confirmed allegation within 6 months of reunification
- Other community data

Florida will participate in the national evaluation of the QIC-CT, which includes a process evaluation and short-term outcomes, with plans for study of long-term outcomes pending funding.

Funding and Sustainability

One of the first questions asked when communities consider creating a Baby/Early Childhood Court Team is "How do we pay for the core components?" Every community has unique resources such as "community foundations" or Children's Services Councils (CSCs) which have designated tax dollars devoted to children—many targeted specifically for young children. There are also consistent local and statewide funding sources for supporting Early Childhood

Florida's Early Childhood Court

Court. A matrix of potential funding sources that align with the core components has been created (see link below).

Two primary funding sources are Florida's Title IV-E waiver dollars and Medicaid. Each Early Childhood Court team can partner with its child welfare community-based care agency (CBC) to utilize Title IV-E waiver dollars for supporting Early Childhood Court. Across the state, CBCs have seen the value and potential cost savings of expedited permanency and reduced reoccurrence of maltreatment and have invested. CBCs are currently underwriting the cost of the community coordinator position; expanding expertise in CPP evidence based intervention by funding training for mental health clinicians; funding infant mental health specialists' work with the court that is not billable to Medicaid; and providing other essential supports to the Early Childhood Court team.

Medicaid is also a key source of funding. Child-Parent Psychotherapy (CPP) is a Medicaid billable service in Florida under Individual/Family Therapy. EPSDT (Early Periodic Screening Diagnostic Treatment) is the federal mandate that requires states to provide mental health screening for all children and youth up to age 18 enrolled in Medicaid. For those children found to have a mental illness, states must provide all medically necessary services to address the child's condition. Allowable services under Florida's Medicaid Community Behavioral Health Services include assessment, treatment planning, individual or family therapy, and other more intensive treatment. Children may also qualify for:

1. Medicaid Therapeutic Behavioral On-Site (TBOS) services and Behavioral Health services.
2. Substance Abuse and Mental Health (SAMH) 100-800 funds allocated to provide non-Medicaid reimbursable wraparound services to children with mental health or behavioral health needs who are victims of abuse or neglect and in the physical custody of the DCF, or at high risk for out-of-home placement.
3. Title IV-E Waiver and other funding sources for child welfare, which could be used flexibly to provide any of the Early Childhood Court services.
4. Early Steps (Part C of IDEA), which addresses developmental delays and provides early intervention therapies (physical, speech, occupational, infant mental health, etc.) to children birth to 36 months of age with an eligible condition.

Potential funders—such as United Way, Community Foundations, family foundations, etc.—are a critical part of the Community Court Team. Publix Supermarkets is an ardent supporter of early childhood issues. Every Community Court Team will need to explore, brainstorm, and seek funding in ways that sustain the important work of the Early Childhood Court Model.

The key to sustainability and ensuring continued functioning over the next decade is community support and "institutionalizing" Early Childhood Court into court administration so that as judges rotate, dockets remain stable. Support for Florida's Early Childhood Courts ranges from the Florida Supreme Court, the Governor's Children and Youth Cabinet, members of the Florida legislature, child welfare leadership, and local grassroots supports. Evaluation results that document improved outcomes will further solidify the sustainability of Florida's Early Childhood Court teams statewide.

Florida's Early Childhood Court

Steps to Starting an Early Childhood Court

Phase I: Commitment and Readiness

Commit

Identify a judge who is committed to improving outcomes for young children, anchored in the knowledge and science that young children exposed to trauma need evidence-based clinical intervention, and is willing to promote the importance of infant mental health in the court.

Initiate a meeting of key stakeholders to create a common vision and partnership with the Baby/Early Childhood Court Team. Key stakeholders at the initial meeting should include the judge, CPI (child protective investigator), OPA (operational program administrator), CBC administrator, case management provider, DCF attorney, Infant Mental Health provider, Director of CBC Alliance, providers who will serve the parents, and others the judge deems important in the initial meeting. Once commitment is obtained at this level, determine what other persons/organizations need to be included in the Court Team.

Organize

- Determine who will take the leadership role (schedule meetings, chair meetings, etc.) and who will manage fiscal accountability and data collection.
- Develop the Court Team (attorneys, Guardian ad Litem, case managers, DCF, CBC, foster parent organization, school district, Early Head Start, Early Learning Coalition, Early Steps, Healthy Start, health care providers, community mental health agencies, churches, volunteer organizations, community centers, etc.) to work with the judge to put the Baby/Early Childhood Court model in place. The Court Team provides the leadership structure and serves as the steering committee of stakeholders with a shared vision and commitment to the long-term work of systems.
- Identify and hire a Community Coordinator who is knowledgeable in early childhood issues to facilitate needed changes, coordinate case/court reviews and services, and find effective and appropriate community resources for young children and their families.

Things to Consider

Every community will be at a different level of "readiness" and may determine different processes, priorities, and outcomes based on their community's specific needs. It is essential to take the time to carefully consider the following issues before setting actions into motion:

Population of Focus — Will the ages be birth to three or birth to five? Training needs, competencies, expertise, community resources, etc. are different for infants and toddlers vs. four- and five-year-olds.

System Capacity — It is recommended that Community Coordinators have no more than 20 children on their caseload. How many children under age five are placed in foster care annually? How many will initially be enrolled? Should your community begin with a "pilot project" then assess and increase capacity and enrollment in phases based on increased resources?

Florida's Early Childhood Court

Eligibility Criteria — How will you select the children to enroll? Things to consider include: the number of times the child has been placed in care; the likelihood of reunification; the level of parent engagement, ability, and willingness; parental history and severity of substance abuse, mental health issues, and/or domestic violence; and termination of parental rights with siblings.

Evaluation — How will you determine if the new processes are working better? How will you know if the children and the families are better off with your new system? What constitutes success? Establish timelines for assessing effectiveness of the process (6 months or 12 months, post-permanency). Establish procedures for collecting data on children and their families after they are no longer in foster care? Include obtaining their permission to do so.

Every Court Team will want to be successful. It is important to determine what "success" will look like for your community, the child, the parent(s), foster parents, and the system as a whole. Even cases that result in termination of parental rights can be successful for all parties—including the parent—if done in a compassionate, supportive manner that allows them to move forward with the skills, knowledge, and self-respect they gained through the process.

For Immediate Release
March 9, 2015

Contact: Kathleen McEnerny
202-641-7217
Kmcenerny@zerotothree.org

Florida Court Improvement Program Chosen as Demonstration Site for the Quality Improvement Center for Research-Based Infant-Toddler Court Teams

Joins five other jurisdictions in strengthening and enhancing practices to promote the healthy development of young children and their families in the child welfare system

Washington, DC – In 2014, The United States Administration on Children, Youth and Families, Children’s Bureau, selected ZERO TO THREE as the national Quality Improvement Center for Research-Based Infant-Toddler Court Teams (QIC-CT) project. To operate the QIC-CT, ZERO TO THREE and its partners, the Center for the Study of Social Policy, the National Council of Juvenile and Family Court Judges, and RTI, International, will provide intensive training and technical assistance to fully develop and expand research-based infant-toddler court teams based on the Safe Babies Court Team approach in demonstration sites.

The goals of the QIC-CT are to: strengthen and enhance the capacity of the courts, child welfare agencies and related child serving organizations in the demonstration sites to achieve safety, permanency, and well-being for infants and toddlers in the child welfare system; and create momentum for collaborative approaches meeting the developmental needs of infants and toddlers in the child welfare system. The QIC-CT will disseminate best practices and findings from the experiences with each site, including identification of practices that are transferable to state and local child welfare systems across the United States.

The demonstration sites, which were selected through a rigorous review process, include:

- **The Florida Court Improvement Program, State of Florida**
- **New Haven/Milford Safe Babies Court Teams, Connecticut**
- **The Judiciary, State of Hawaii, Honolulu, Hawaii**
- **Polk County Safe Babies Court Team, Des Moines, Iowa**
- **Forrest County Safe Babies Court Team, Hattiesburg, Mississippi**
- **Eastern Band of Cherokee Indians, Cherokee, North Carolina**

“We know that collaboration across all the agencies working with infants and toddlers in the child welfare system benefits children and their families, and ultimately the communities where they live,” said Janie Huddleston, QIC-CT Director. “We were excited by the applicants’ enthusiasm for this approach. The QIC-CT demonstration sites are national learning laboratories for promoting evidence-based practices, increasing capacity for change, and supporting the healthy development of infants and toddlers.”

###

Funded through the Department of Health and Human Services, Administration for Children and Families, Children's Bureau, Grant #HHS-2014-ACF-ACYF-CA-0832. The contents of this publication do not necessarily reflect the views or policies of the funders, nor does mention of trade names, commercial products or organizations imply endorsement by the U.S. Department of Health and Human Services. This information is in the public domain. Readers are encouraged to copy and share it, but please credit ZERO TO THREE.

ZERO TO THREE is a national nonprofit committed to promoting the health and development of infants and toddlers. More information can be found at www.zerotothree.org.