



National Judicial Opioid Task Force Children and Families Workgroup Plan

Purpose: To ensure that the complex needs of families with substance abuse problems and who are involved in or at risk of becoming involved in the child welfare system and/or juvenile justice system are met through interdisciplinary and collaborative service delivery to support both parents and children; and to advocate for resources to support these efforts.

1. Ensure a clear understanding of the basics of addiction and the effects of opioid addiction for the children and families served by the court.
2. Address the shortage of placement resources (foster, kinship, etc.) and the timeliness and stability in making out-of-home placements that is plaguing state child welfare systems as a result of the opioid epidemic.
3. Identify best practices for providing alternative treatment responses for children and families, especially in rural communities.
4. Identify existing screening and assessment tools for court use in child welfare and juvenile justice cases.
5. Document existing prenatal substance exposure provisions in state child welfare laws and related procedures regarding testing, reporting, investigations, initiating child welfare proceedings and criminal prosecution.
6. Explore the implications of opioid treatment on the Adoption and Safe Families Act (ASFA) and state law permanency and reunification timelines.
7. Explore the role of the juvenile and family courts in prevention.
8. Document best and innovative court programs, practices and innovations that specifically address parents and youth with opioid use disorders (e.g., family treatment courts, juvenile drug courts, baby courts/early childhood courts and START).
9. In conjunction with the Substance Abuse and Mental Health Services Administration (SAMHSA), the Bureau of Justice Assistance (BJA) and key organizations that address the opioid crisis related to justice-involved children and families, ensure a clear understanding of the basics of addiction; how to provide alternative delivery of treatment services; appropriate screening and assessment; how best to work with state prescription drug monitoring programs (PDMPs); the use of naloxone; the use of medication assisted treatment (MAT); early intervention and prevention efforts; the best tools, resources, and educational materials to use; and other key issues.