

FIRST Clinic Logic Model

10/19/21

Problem Statement: Parents in need of support and services become involved in CPS investigations related to the recent birth of their substance exposed newborn, alone and under-informed. Consequently, these parents are unprepared and unable to outline a plan to keep their child safe, resulting in separation of babies from parents, dependency court involvement, and trauma for families.

Program Goals:

Process Goals

- Parents (frequently mothers) facing (possible) CPS investigation and intervention are supported with legal representation, advice and advocacy, connected to a person with lived-experience, and offered resources that support their safety and the safety of their newborn.
- Parents facing CPS investigation and court intervention become knowledgeable about the process, and are joined in that process by supportive people (friends, family, service providers, legal advocates, and a peer parent ally).

Outcome Goals

- Parents facing CPS investigation and intervention are able to develop and articulate Plans of Safe Care for their babies.
- Parents and their babies remain free from involuntary placement of their infants and children in out of home care (i.e., government separation).
- Only the most necessary Dependency Petitions are filed.
- Where dependency petitions are filed, and families are separated, parents understand the process better, have a plan to address child safety issues quickly, and children spend less time in foster care.

Logic Model

1. Relationships are built between FIRST Clinic and local hospitals and CPS personnel. Hospitals and CPS personnel understand that parents of substance exposed newborns can receive advice and support from FIRST clinic that is unique and can be helpful to resolve safety concerns to prevent the need for involuntary separation of babies from their parent(s). So...
2. Pregnant parents giving birth to substance exposed newborns and facing (potential) CPS investigation are referred to FIRST Clinic. So...
3. FIRST clinic lawyers and peer parent social worker respond to parents, often within 15 minutes, to begin a helping relationship. So...
4. Parents receive information and advice from lawyers experienced in CPS and dependency cases regarding process, standards and guidelines governing CPS

investigation, how to navigate that process, and the support the FIRST Clinic team can provide. And, parents are engaged early in the relationship by a peer parent social worker who connects through shared-experience, offers emotional and practical support, and offers connection to supportive people, services, and concrete materials that they can use to build a Plan of Safe Care for themselves and their baby. So...

5. FIRST clinic attorneys, at the direction of the parent, inform CPS that they represent the parent and will join her at FTDMs and other meetings with CPS during the investigation.
 - a. Seek to work with CPS to resolve any reasons why the child may be assessed as “unsafe” in the parent’s care.
 - b. Advocate for respectful and helpful treatment of the parent by all investigators and service providers during the investigation.
 - c. Ensure CPS follows policy and procedure during their assessment and investigation.
 - d. So...
6. Parents engage with CPS accompanied by supportive friends, family, legal services, and other service providers, giving them the best possible opportunity to demonstrate a plan for the safety of their baby in their care.

Therefore...

7. CPS resolves their investigations with a finding that the child is safe, or...
8. CPS works with parents to establish an agreement regarding a Plan of Safe Care keeping the baby and parent together, and CPS monitors the plan without other intervention, or...
9. If CPS is unsatisfied with the safety plan and files a dependency petition, the court agrees to keep the baby and parent(s) together under a court-ordered safety plan, or...
10. Where the court at the shelter care hearing finds that an adequate safety plan cannot be accomplished, and the baby and parent are separated, the parent is better informed and prepared to address safety concerns and the baby is returned earlier than if the parent(s) faced the process alone.

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