Chapter 11

SUBSTANCE ABUSE CONSULTATIONS

11-1. **Purpose.** For purposes of child protection assessment and interventions, it is important to accurately identify substance abuse disorders in order to determine child safety and inform parents of the comprehensive array of services available to achieve or maintain recovery.

   a. Out-of-control conditions in substance abusing families can be particularly challenging for investigators to assess because family and individual dynamics, such as denial and co-dependency issues, minimize if not outright deny that alcohol or substance misuse are problematic or are active in the family.

   b. These aspects associated with the dynamics of addiction emphasize the need for the investigator to consult with substance abuse professionals in order to assist in an accurate assessment and identification of any substance misuse or dependency problem.

11-2. **Procedures.**

   a. When information available at pre-commencement or obtained during the Family Functioning Assessment indicates that substance misuse is believed to be occurring in the home, the child protective investigator must consult with a substance abuse expert in order to:

      (1) Assess whether the substance misuse is out-of-control to the point of having a direct and imminent effect on child safety.

         (a) Identify specific harm(s) to the child caused by or highly correlated with the substance abuse.

         (b) Provide input on what safety actions need to be incorporated into a safety plan for children of substance abusing parents to control the direct and imminent effects of the parent or caregiver’s substance misuse or relapse event.

      (2) Review the user’s current use pattern (to the degree known or reported), prior treatment history and outcomes from prior intervention efforts to explore the most likely and appropriate treatment options (e.g., need for medical detox, intensive outpatient, etc.). Explore the potential use of the Marchman Act with the family in order to assess the harmful effects of the substance misuse to the user and to control for the imminent and direct effects of the parent/caregiver’s active substance abuse for child safety. This includes educating and informing family members on the process of petitioning the court for an involuntary assessment (and possibly treatment and stabilization order) of the substance abusing family member.

      (3) For individuals in recovery who deny active use, explore the patterns of behaviors typically indicative of a pending relapse including, but not limited to:

         (a) Dishonesty;

         (b) Irresponsibility;

         (c) Depression, anxiety and sleeplessness;

         (d) Unreasonable resentments;

         (e) Isolation from others; and,
(f) A pattern of non-compliance (if a safety or case plan is in place).

(4) Explore the feasibility of the substance abuse expert accompanying the investigator to the interview site when available, based upon local protocols and working agreements.

b. The investigator will thoroughly assess family dynamics looking for behaviors and patterns of interaction indicative of co-dependency.

(1) “Parentified child.”

(2) Over/Under functioning between user and co-dependent partner.

c. The investigator will also seek mental health expertise when there are concerns that a co-occurring mental health condition is present in order to ensure that services for both conditions are provided at the same time, in order to avoid triggering the symptoms of the co-occurring condition that is not being addressed.

11-3. Supervisor. When initiated, supervisor consultations are provided to affirm:

a. The investigator is successfully achieving collaboration and teamwork with professionals during the safety assessment to assess for substance abuse.

b. The investigator’s understanding and adherence to local protocols.

11-4. Documentation.

a. The investigator will document the information provided to substance abuse professionals to assist in the assessment process and the recommendations resulting from the consultation activities in a case note within two business days.

b. The supervisor will document the supervisor consultation, if conducted, in FSFN using the supervisor consultation page hyperlink in the investigation module within two business days.