



State Scan of Initiatives Aligned with Infant-Toddler Court Teams



ZERO TO THREE
Early connections last a lifetime

TABLE OF CONTENTS

INTRODUCTION	3
PREVENTION	4
Family First Prevention Services Act	5
Community-Based Child Abuse Prevention (CBCAP) Grant	6
Additional Programs	7
SUBSTANCE USE PREVENTION AND TREATMENT	8
State Opioid Response Grant	9
Rural Communities Opioid Response Program	10
FY20 RCORP Neonatal Abstinence Syndrome Grant	11
Plans of Safe Care (CAPTA)	12
Family Drug Courts	13
Additional Programs	15
MENTAL HEALTH AND PHYSICAL HEALTH	16
Healthy Start	18
State Maternal Health Innovation Program (State MHI)	18
Help Me Grow	19
Additional Programs	20
TWO-GENERATION APPROACHES	21
Home Visiting/MIECHV	22
Early Head Start	23
Additional Programs	24
COURT AND CHILD WELFARE INITIATIVES	25
Child Welfare Initiatives in the State	25
Court Improvement Program (CIP)	26
Additional Programs	27

TABLE OF CONTENTS *(continued)*

STATE SYSTEMS-BUILDING	28
Early Childhood Comprehensive Systems Health Integration Prenatal-to-Three (ECCS)	29
Preschool Development Birth through Five (PDG B-5)	30
Additional Programs	31
EVIDENCE-BASED PRACTICES IMPLEMENTED IN THE STATE	32
Sobriety Treatment and Recovery Teams	33
Child-Parent Psychotherapy (CPP)	33
The Iowa Parent Partner Approach	34
Additional Programs	35
AMERICAN RESCUE PLAN ACT (ARPA)	36
Funding for programs under the ARPA	36

INFANT-TODDLER COURT TEAM STATE SCAN

The following tool developed by the National Infant-Toddler Court Program is designed to support a collaborative, state-level scan of initiatives that promote connectivity to key partnerships in the state to support implementation and sustainability of Infant-Toddler Court Teams. This document serves as a starting point, providing a list of examples of several key programs and initiatives aligned with the work of an Infant-Toddler Court Team, categorized into high-level categories including: prevention, substance use prevention and treatment, mental health, physical health, two-generation approaches, evidence-based practices implemented in the state, and other key initiatives. The state scan contains fillable prompts under the different categories, for which we encourage a state team to collaborate when answering questions and researching a program's alignment with the Infant-Toddler Court Team. Ultimately, this state scan will support states in assessing programs and initiatives and identifying where connections are in place as you reach out to form collaborations. For each section, we encourage you to identify and add additional initiatives, programs, and funding opportunities in your state.



ABOUT THE NATIONAL INFANT-TODDLER COURT PROGRAM

The National Infant-Toddler Court Program, directed by ZERO TO THREE, has worked throughout the country in local communities and states over the past 16 years to implement the [Safe Babies Court Team™ \(SBCT\) approach](#). This evidence-based approach — targeted to families with children birth to 3 years of age who are in foster care or at risk of removal — applies the science of early childhood development in meeting the urgent needs of infants and toddlers and strengthening their families so they can flourish. There are currently over 100 sites implementing the SBCT approach across the country. Our reach covers 31 states, including 8 that are implementing a statewide approach in multiple sites.

This framework was made possible through the support of the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$19,581,161 with 0 percent financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government.

PREVENTION

KEY CONSIDERATIONS AROUND PREVENTION:

What is the vision of the state around prevention of entry into child welfare (primary, secondary, and tertiary) for infants, toddlers, and families? How does the ITCP align with the vision and how can the ITCP support this? [Click or tap below to enter text:](#)

Who are the major organizations that operate in this area that you would want to connect with? [Click or tap below to enter text:](#)

Who are the key champions in the prevention area (including advocacy groups, legislators, foundations, business leaders)? [Click or tap below to enter text:](#)

What opportunities exist to build partnerships with other organizations doing this work, or key champions, that could help strengthen the ITCP and families either at the state or local level? [Click or tap below to enter text:](#)

How would you prioritize the opportunities in this category? What level of engagement would you want to have (e.g. high: formal partnership; medium: ongoing information sharing; lower: providing information on the ITCP)? [Click or tap below to enter text:](#)

Family First Prevention Services Act

SUMMARY: Funding under Title IV-E for time-limited prevention services for mental health, substance abuse, and in-home parent skill-based programs for children or youth who are candidates for foster care, pregnant or parenting youth in foster care, and the parents or kin caregivers of those children and youth. **The Title IV-E Prevention Services [Clearinghouse](#) rates programs and services as promising, supported, and well-supported practices.**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: Family First brings potential sustainable funding for expanding the reach of the SBCT approach by applying the approach to working with families whose babies and toddlers are at risk for out-of-home care but can remain at home or with relatives. The allowable evidence-based Family First enhanced supports and services — including mental health and substance use disorder prevention and treatment, infant and early childhood mental health and in-home skill-based parenting services — can be integrated into an Infant-Toddler Court Team’s structure using the comprehensive SBCT approach. Additionally, if included in a state’s Title IV-E Prevention Program Five-Year Plan, funding for administrative activities necessary for the administration of the prevention program could potentially be used to support aspects of the SBCT approach. Family First requires states to undertake activities in administering the program under an organizational structure and framework that is similar to the structure embedded in the SBCT approach, including implementing and monitoring services, using data to refine and improve practices, performing assessments of parents’ and children’s needs, consulting and coordinating with other agencies and steps to support a child welfare workforce with the competencies to deliver trauma-informed and evidence-based services.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Community-Based Child Abuse Prevention (CBCAP) Grant

SUMMARY: Under CAPTA legislation, CBCAP funds are used to support community-based efforts to develop, operate, expand, enhance, and coordinate initiatives, programs, and activities to prevent child abuse and neglect and to support the coordination of resources and activities to better strengthen and support families to reduce the likelihood of child abuse and neglect.

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: CBCAP's focus on improving family access to formal and informal resources and opportunities in communities, and in providing referrals to early health and developmental services is also well aligned with the role of the community coordinator. Activities including parent education and mutual support; respite care; and outreach and follow-up, including home visiting. Optional services include adoption services; child care; programs supporting job readiness, education and self-sufficiency; and referrals to community and domestic violence services. CBCAP lead agencies are authorized to foster the development of a continuum of comprehensive child and family support and preventive services, including developing partnerships with other community-based organizations that provide services such as Early Head Start, home visiting, mental health, and substance use treatment. Supplemental funds can be used to enhance community-based and prevention-focused programs and activities designed to strengthen and support families to prevent child abuse and neglect in a manner consistent with any of the program purposes of CBCAP.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

SUBSTANCE USE PREVENTION AND TREATMENT

KEY CONSIDERATIONS AROUND SUBSTANCE USE PREVENTION AND TREATMENT:

What is the vision/key values of the state around substance use prevention and treatment for families with infants and toddlers? How does the ITCP align with the vision and how can the ITCP support this? [Click or tap below to enter text:](#)

Who are the major organizations that operate in this area that you would want to connect with? [Click or tap below to enter text:](#)

Who are the key champions in the substance use prevention and treatment area (including advocacy groups, legislators, foundations, business leaders)? [Click or tap below to enter text:](#)

What opportunities exist to build partnerships with other organizations doing this work, or key champions, that could help strengthen the ITCP and families either at the state or local level? [Click or tap below to enter text:](#)

How would you prioritize the opportunities in this category? What level of engagement would you want to have (e.g. high: formal partnership; medium: ongoing information sharing; lower: providing information on the ITCP)? [Click or tap below to enter text:](#)

State Opioid Response Grant

SUMMARY: The SOR aims to address the opioid crisis by increasing access to medication-assisted treatment using the three FDA-approved medications for the treatment of opioid use disorder, reducing unmet treatment need and reducing opioid overdose-related deaths through the provision of prevention, treatment and recovery activities for opioid use disorder (OUD). The SOR supports evidence-based prevention, treatment and recovery support services to address stimulant misuse and use disorders. **For more information, please see page 80 of the National ITCP [Federal Funding Guide](#).**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: SOR grants provide an avenue for addressing gaps in ensuring parents access necessary treatment for OUD. Aligned with SBCT Core Component Continuum of Services for Children and Families, funding also includes community recovery support services, such as peer supports and housing, and vocational/educational resources, which can be used to address services gaps for parents in Infant-Toddler Court Teams.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Rural Communities Opioid Response Program

SUMMARY: The Rural Communities Opioid Response Program (RCORP) is a multi-year initiative that addresses barriers to treatment for substance use disorder (SUD), including opioid use disorder (OUD). **For more information, visit the HRSA webpage [here](#).**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: Under the SBCT Core Component 5: Continuum of Services for Children and Families, the Infant-Toddler Court Team’s Family Team focuses on ensuring timely referral to high-quality, trauma-informed mental health and substance use disorder prevention and treatment services for parents. While the SBCT approach can enhance the referral process, ensuring timely screening and linkages to services can be difficult in more rural or remote communities, instances where transportation is a barrier, and in cases when a child has transitioned from their home to foster care or kinship care. Services under this grant can be used to address this.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

FY20 RCORP Neonatal Abstinence Syndrome Grant

SUMMARY: The focus of [RCORP-NAS](#) is to reduce the incidence and impact of Neonatal Abstinence Syndrome (NAS) in rural communities by improving systems of care, family supports, and social determinants of health. The award purpose is to conduct a combination of prevention, treatment, and recovery activities designed to improve systems of care, family supports, and social determinants of health. While the focus of RCORP-NAS is primarily opioid use disorder (OUD), applicants may also choose to address additional substances of concern or substance use disorders (SUDs) among the target population. The target population is pregnant women, mothers, and women of childbearing age who have a history of, or who are at risk for, SUD/OUD and their children, families, and caregivers who reside in rural areas. **For more information, visit HRSA webpage [here](#).**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: Similar to the RCORP planning and implementation grants, the RCORP Neonatal Abstinence Syndrome Grant, the Infant-Toddler Court Team’s Family Team focuses on ensuring timely referral to high-quality, trauma-informed mental health and substance use disorder prevention and treatment services for parents. While the SBCT approach can enhance the referral process, ensuring timely screening and linkages to services can be difficult in more rural or remote communities, instances where transportation is a barrier, and in cases when a child has transitioned from their home to kinship care. Services under this grant can be used to address this.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Plans of Safe Care under the Child Abuse Prevention and Treatment Act

SUMMARY: The Comprehensive Addiction and Recovery Act of 2016, which amended CAPTA, added requirements to address the effects of substance use disorder on infants, toddlers, and families in the United States, requires that Plans of Safe Care address the health and substance use disorder treatment needs of both the infant and *affected family or caregiver*.

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: These plans offer an opportunity to identify and address parental substance use disorders, both before and after coming to the attention of the child welfare system. These plans allow for formalizing of the responsibilities for healthcare providers and child welfare to develop and execute plans that will ideally allow for healthy and safe transitions home from the hospital for newborns and their family. Diverse stakeholders play critical roles in detecting and responding to the needs of infants with prenatal substance exposure and their families. While CAPTA does not specify the agency that should implement and oversee the individual Plans of Safe Care, the 2016 amendment emphasized the benefits of an interagency approach. In addition to child welfare, this can include such partners as birthing hospitals, substance use disorder treatment providers, primary care providers, home visiting, and public health agencies.¹ Plans of Safe Care may include the treatment and broad services of the whole family including the infant and parent-child dyad.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Family Drug Courts

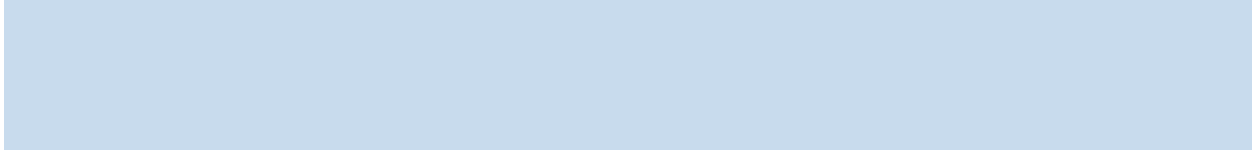
SUMMARY 1: OJJDP Family Drug Court Program is a competitive grant awarded to states and territories, state and local courts, units of local government and tribal governments, as well as state administrative office of the court. OJJDP's Family Drug Court Program seeks to build the capacity of state and local courts, local government and tribal governments to enhance existing family drug courts or implement statewide or countywide family drug court practices to more effectively intervene with parents, children and families affected by a substance use and/or co-occurring mental health disorder who are involved in the child welfare system as a result of child abuse and neglect or other parenting issues. Three grant categories include: Enhancing Family Drug Courts; Serving Veterans Through Family Drug Courts; and State and County Family Drug Courts Expansion. **For more information, please see page 42 of the National ITCP [Federal Funding Guide](#).**

SUMMARY 2: The SAMHSA Family Treatment Drug Courts is one of SAMHSA's services grant programs. The purpose of this program is to expand substance use disorder (SUD) treatment services in existing family treatment drug courts, which use the family treatment drug court model in order to provide alcohol and drug treatment (including recovery support services, screening, assessment, case management, and program coordination) to parents with a SUD and/or co-occurring SUD and mental disorders. The expectations of the grant are to provide funding for FTDCs to assist participants in reducing the rates of substance misuse, the severity of SUDs and co-occurring disorders, and decreasing out of home placements for children through family reunification and preservation. This, in turn, should also decrease the number of parents or guardians whose parental rights have been or will be terminated. **For more information, please see page 45 of the National ITCP [Federal Funding Guide](#).**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: Well aligned with the SBCT approach, The SAMHSA Family Treatment Drug Courts focus on services promoting successful family preservation and reunification, and the grant adheres to the Family Drug Court guidelines, including enhancing interagency partnerships, addressing the needs of parents through health, mental health, behavioral health services; and addressing the needs of children through health and mental health services (including infant and early childhood mental health). Specifically, the grant calls for a "coordinated, multi-system approach designed to combine the sanctioning power of treatment drug courts with effective treatment services promoting successful family preservation and reunification."² The grant's two-generational, multisystem approach aligns with a range of activities under the SBCT approach.

The OJJDP Family Drug Court Program includes a focus on reuniting families and improving child and parent outcomes. For the State and County Family Drug Courts Expansion category of the grant, grantees include the State Administrative Office of the Court, working in conjunction with and coordinating closely with the state's Court Improvement Program. Grantees are required to partner with the state child welfare agency and state substance use treatment agency. States and counties are expected to develop and implement practices and policies that strengthen existing family drug courts, child welfare, substance use disorder treatment service systems and community-based organizations that serve and support children and families.³

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*



OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:



Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

MENTAL HEALTH AND PHYSICAL HEALTH

KEY CONSIDERATIONS AROUND MENTAL HEALTH AND PHYSICAL HEALTH:

What is the vision/key values of the state around mental health and physical health for families with infants and toddlers? How does the ITCP align with the vision and how can the ITCP support this? [Click or tap below to enter text:](#)

Who are the major organizations that operate in this area that you would want to connect with? [Click or tap below to enter text:](#)

Who are the key champions in the area of mental health and physical health for families with infants and toddlers (including advocacy groups, legislators, foundations, business leaders)? [Click or tap below to enter text:](#)

What opportunities exist to build partnerships with other organizations doing this work, or key champions, that could help strengthen the ITCP and families either at the state or local level? [Click or tap below to enter text:](#)

How would you prioritize the opportunities in this category? What level of engagement would you want to have (e.g. high: formal partnership; medium: ongoing information sharing; lower: providing information on the ITCP)? [Click or tap below to enter text:](#)

RELEVANT POLICIES FROM THE STATE OF BABIES YEARBOOK:

[\(visit the site to view your state\)](#)

Medicaid expansion state: *Choose one:*

Yes No Recommended in the state

State Medicaid policy for maternal depression screening in well-child visits: *Choose one:*

Yes No Recommended in the state

Medicaid plan covers social-emotional screening for young children: *Choose one:*

Yes No Recommended in the state

Medicaid plan covers IECMH services at home: *Choose one:*

Yes No Recommended in the state

Medicaid plan covers IECMH services at pediatric practices: *Choose one:*

Yes No Recommended in the state

Medicaid plan covers IECMH services in early childhood settings: *Choose one:*

Yes No Recommended in the state

State includes "at-risk" children as eligible for IDEA Part C: *Choose one:*

Yes No Recommended in the state

Healthy Start

SUMMARY: Healthy Start aims to reduce infant mortality and other negative birth outcomes such as maternal mortality, poverty, education, access to care and other socioeconomic factors; aims to reduce racial/ ethnic difference in rates of infant death and adverse perinatal outcomes. Healthy Start emphasizes the need for multisectoral community engagement and collaboration. Since its transformation in 2014, the goal of Healthy Start is to improve maternal and infant health and to reduce disparities in adverse perinatal outcomes in the U.S. Healthy Start serves women of reproductive age, pregnant women, mothers who have just given birth and infants and families from birth to 18 months of age. The program targets communities with infant mortality rates that are at least one and a half times the U.S. national average. **For more information, please see page 48 of the National ITCP [Federal Funding Guide](#).**

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

State Maternal Health Innovation Program (State MHI)

SUMMARY: Assist states in addressing disparities in maternal health outcomes and improving maternal health outcomes, with a particular emphasis on preventing and reducing maternal mortality and severe maternal morbidity.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Help Me Grow

SUMMARY: Help Me Grow state organizations maintains a current directory of available services and connecting service providers to each other to create an interconnected system. Families benefit as Help Me Grow listens to them, links them to services, and provides ongoing support. Help Me Grow is available to all children, including those whose families may have concerns or simply want to learn more about their child’s development. **View the Help Me Grow National Center affiliates [here](#).**

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

TWO-GENERATION APPROACHES

KEY CONSIDERATIONS AROUND TWO-GENERATION APPROACHES:

What is the vision/key values of the state around two-generation programs/initiatives for families with infants and toddlers? How does the ITCP align with the vision and how can the ITCP support this? [Click or tap below to enter text:](#)

Who are the major organizations that operate in this area that you would want to connect with? [Click or tap below to enter text:](#)

Who are the key champions in the area of two-generation programs for families with infants and toddlers (including advocacy groups, legislators, foundations, business leaders)? [Click or tap below to enter text:](#)

What opportunities exist to build partnerships with other organizations doing this work, or key champions, that could help strengthen the ITCP and families either at the state or local level? [Click or tap below to enter text:](#)

How would you prioritize the opportunities in this category? What level of engagement would you want to have (e.g. high: formal partnership; medium: ongoing information sharing; lower: providing information on the ITCP)? [Click or tap below to enter text:](#)

Home Visiting/MIECHV

SUMMARY: MIECHV is the primary federal program that focuses on home visiting. MIECHV supports home visiting for pregnant women and parents with children up to kindergarten entry living in at-risk communities, providing federal funds to states and tribal entities to support voluntary, evidence-based, home visiting services. States are supported in intensifying state efforts to create strong systems of services that use public resources efficiently and meet families' needs more effectively. The Tribal MIECHV program provides grants to tribal organizations to develop, implement, and evaluate home visiting programs in American Indian and Alaska Native (AIAN) communities. Up to 25% of a state's funding is available to implement promising approaches that will undergo rigorous evaluation.

For more information, please see page 51 of the National ITCP [Federal Funding Guide](#).

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: With a strong role in enhancing and helping intensify state efforts to create strong systems of services that use public resources efficiently and meet families' needs more effectively, home visiting and specifically MIECHV has a high alignment with the SBCT approach. The required goals for MIECHV grantees also align closely with the SBCT approach: improve maternal and child health; prevent child abuse and neglect; encourage positive parenting; and promote child development and school readiness. Importantly, woven throughout home visiting models is a tenet aligned with engaging and valuing parents, responding to their history of trauma, increasing awareness of structural racism and discrimination and empowering parents and building parental resilience and improved functioning.

STATE-SPECIFIC INFORMATION:

Home Visiting models implemented in the state with MIECHV funds.

Click or tap below to enter text:

Other Home Visiting models implemented in the state. *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Early Head Start

SUMMARY: Early Head Start is an evidence-based, community-based program with a two-generation approach to child development, designed to improve early education experiences of low-income babies and toddlers. The mission of EHS is to support healthy prenatal outcomes and enhance intellectual, social and emotional development of infants and toddlers to promote later success in school and life. **For more information, please see page 39 of the National ITCP [Federal Funding Guide](#).**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: Like the SBCT approach, EHS uses a two-generation strategy, offering comprehensive services to children and families with the goal of supporting the child within the family and the community. EHS is well-aligned with the SBCT approach. Similar to how the Active Community Team (Core Component 3) brings stakeholders together to address the needs of children and families and identify and respond to gaps in services and policies procedures, Early Head Start takes an active role in community leadership in early childhood education and family support through convening stakeholders to assess community needs and plan and innovate response. Research shows that participation in Early Head Start led to a long-term reduction in children's involvement with the child welfare system. Children and families in Infant-Toddler Court Teams who are enrolled in EHS can benefit from access to additional support services to promote children's development, such as job training, transportation and housing assistance. New Quality Improvement funding for a trauma-informed approach to EHS can potentially include services for infants, toddlers and families in court teams, including potentially hiring and training infant mental health specialists and clinicians licensed in Child-Parent Psychotherapy.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

COURT AND CHILD WELFARE INITIATIVES

Child Welfare Initiatives in the State

POTENTIAL RESOURCES TO REVIEW IN THE STATE (THESE WILL VARY):

- [State Title IV-E Prevention Program Five-Year Plan](#)
- Initiatives/Partnerships from the [lead state agency administering the Community-Based Child Abuse Prevention Grants \(CBCAP\)](#)
- Initiatives from State Children’s Trust Funds
- Initiatives from Child Welfare Parent Advisory Councils
- State Child Abuse and Neglect Prevention Plan
- Annual Child Welfare Progress and Services Reports
- Governor’s Initiatives
- Early Childhood Race Equity Task Force or other initiatives to address disparities and disproportionality
- State Leadership Teams in the [Strengthening Families National Network](#)

Court Improvement Program (CIP)

SUMMARY: The highest court of each state and territory participating in programs funded by Title IV-E receives a CIP grant to conduct assessments of their foster care and adoption laws and judicial processes and to develop and implement a plan for system improvement. Grantees implement improvements that the highest courts deem necessary to provide for the safety, well-being and permanence of children in foster care, as set forth in the Adoption and Safe Families Act (ASFA); and implement a corrective action plan in response to findings from a child and family services review of the state's child welfare system. **For more information, please see page 33 of the National ITCP Federal Funding Guide. Children's Bureau Child Welfare Capacity Building Center for Courts supports CIPs [here](#).**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: The Court Improvement Program is well aligned with the SBCT approach. Under the CIP, the critical role of the courts is recognized in ensuring permanency, safety, well-being and the need for training court personnel — including judges and attorneys — on child development is emphasized. At the heart of the SBCT approach are the judges and attorneys who are knowledgeable about early childhood development and can apply this knowledge in decision-making, as is collaboration among courts, child welfare agencies, and other community agencies.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

STATE SYSTEMS-BUILDING

KEY CONSIDERATIONS AROUND TWO-GENERATION APPROACHES:

What is the vision/key values of the state around building capacity and infrastructure to integrate programs for families with infants and toddlers? How does the ITCP align with the vision and how can the ITCP support this? *Click or tap below to enter text:*

Who are the major organizations that operate in this area that you would want to connect with? *Click or tap below to enter text:*

Who are the key champions in the area of systems-building for families with infants and toddlers? (including advocacy groups, legislators, foundations, business leaders)?? *Click or tap below to enter text:*

What opportunities exist to build partnerships with other organizations doing this work, or key champions, that could help strengthen the ITCP and families either at the state or local level? *Click or tap below to enter text:*

How would you prioritize the opportunities in this category? What level of engagement would you want to have (e.g. high: formal partnership; medium: ongoing information sharing; lower: providing information on the ITCP)? *Click or tap below to enter text:*

Early Childhood Comprehensive Systems Health Integration Prenatal-to-Three (ECCS)

SUMMARY: HRSA’s ECCS portfolio aims to strengthen, align, and sustain multigenerational systems at the state and community level, with a focus on engaging and connecting the health system, focusing prenatal-to-age-3 period. The purpose of this program is to build integrated maternal and early childhood systems of care that are equitable, sustainable, comprehensive, and inclusive of the health system, and that promote early developmental health and family well-being and increase family-centered access to care and engagement of the P–3 population. A maternal and early childhood system of care brings together health, early care and education, child welfare, and other human services and family support program partners — as well as community leaders, families, and other stakeholders — to achieve agreed-upon goals for thriving children and families. **For more information, including resources and grant recipients, see page 36 of the National ITCP [Federal Funding Guide](#).**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: Grant recipients of the ECCS Prenatal-to-Three are encouraged to engage a cross-sector advisory council to support advancements of the early childhood strategic plan and ECCS goals, including representation from sectors such as health, early childhood, early care and education, child welfare and human services and family support, including active family and community participation.

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Preschool Development Birth through Five (PDG B-5)

SUMMARY: PDG B–5 is designed to improve states’ early childhood systems by building upon existing federal, state, and local investments, assisting states in the coordination of existing early childhood funding streams, resulting in services provided to more infants and toddlers in a mixed delivery system. The 2018 planning grants were designed for states to conduct comprehensive statewide birth–5 needs assessment followed by in-depth strategic planning, while enhancing parent choice, including child care centers and home-based providers, Head Start/Early Head Start, state prekindergarten and home visiting. States and territories receive funding to facilitate collaboration among early childhood care and education (ECE) programs to prepare disadvantaged children to transition into the local educational agency or elementary school. **For more information, including resources and grant recipients, see page 68 of the National ITCP [Federal Funding Guide](#). ACF synthesis report of states’ PDG B-5 grants can be found [here](#).**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: PDG B–5 is well aligned to the SBCT approach, as Infant-Toddler Court Teams implement a systems-change innovation designed to improve the health and well-being of babies and their families, both to prevent families from entering the child welfare system and to support in-tact families or safe reunification for those already involved. The broad PDG B–5 grant prioritizes serving children with the greatest need. A 2019 report of the Preschool Development Grants Program (of which the promising practices can inform the PDG B–5 grantees) reveals that the children who benefited from PDG-supported preschool included children involved in the welfare system and children whose families were homeless; overall, children with these needs were prioritized and served.⁴

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

EVIDENCE-BASED PRACTICES IMPLEMENTED IN THE STATE

The evidence-based practices provided in this section are a selection of examples that have a target population of infants and toddlers and their families

KEY CONSIDERATIONS AROUND EVIDENCE-BASED AND EVIDENCE-INFORMED PRACTICES IMPLEMENTED IN THE STATE:

Will the population being served statewide by infant-toddler court teams be comparable to the sample population on which the intervention was normed?

Click or tap below to enter text:

Is the intervention compatible with the values and practices of communities and families of the infant-toddler court teams? *Click or tap below to enter text:*

Who are the key champions in the area of sustainability of evidence-based interventions for families with infants and toddlers (including advocacy groups, legislators, foundations, business leaders)?? *Click or tap below to enter text:*

What opportunities exist to build partnerships with other organizations doing this work, or key champions, that could help strengthen the ITCP and families either at the state or local level? *Click or tap below to enter text:*

How would you prioritize the opportunities in this category? What level of engagement would you want to have (e.g. high: formal partnership; medium: ongoing information sharing; lower: providing information on the ITCP)? *Click or tap below to enter text:*

Sobriety Treatment and Recovery Teams

SUMMARY: See more information on the program within the U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF) Title IV- E Prevention Services Clearinghouse [here](#).

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Child-Parent Psychotherapy (CPP)

SUMMARY: See more information on the program within the U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF) Title IV- E Prevention Services Clearinghouse [here](#).

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

The Iowa Parent Partner Approach

SUMMARY: See more information on the program within the U.S. Department of Health and Human Services (HHS), Administration for Children and Families (ACF) Title IV- E Prevention Services Clearinghouse [here](#).

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

Additional Program:

(Enter title here)

SUMMARY: *Click or tap below to enter text:*

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: *Click or tap below to enter text:*

STATE-SPECIFIC INFORMATION: *Click or tap below to enter text:*

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

AMERICAN RESCUE PLAN ACT (ARPA)

Funding for Programs Under the ARPA

SUMMARY: Supplemental CAPTA State Grants and CBCAP funds provided through the American Rescue Plan Act (passed in March 2021 by Congress) are awarded by formula to state lead agencies for the CBCAP program based on the number of children under age 18 residing in each state. Grants will be awarded to existing CBCAP grantees and states do not need to apply for the funds, but submit a brief narrative describing the state lead agency's planned use of the supplemental CBCAP funds provided through the ARPA as part of the state's regular application for 2021 CBCAP. States have until September 2025 to spend the supplemental CAPTA funds, and the legislation waives the requirement that each state must provide a cash match of 20% in non-Federal funding of the total allotment. Other important federal programs receiving additional funding under the ARPA include MIECHV, CCDBG, and The Community Mental Health Services Block Grant, which can potentially be used to access services for SBCT families. **Learn more [here](#). Guidance from the Children's Bureau can be found [here](#).**

ALIGNMENT WITH INFANT-TODDLER COURT TEAMS: Funding under CAPTA could potentially cover a range of activities aligned with the SBCT approach, including the community coordinator position, data tracking and analysis, and multidisciplinary training.

- **Community Coordinator:** CAPTA State Grants focus on enhancing the capacity of community-based programs to integrate shared leadership strategies between parents and professionals. The community coordinator serves as facilitator of real-time information sharing and collaboration among the cross-sector professionals working to support the child and family, including the Family Team and the Active Community Team. CBCAP's focus on improving family access to formal and informal resources and opportunities in communities, and in providing referrals to early health and developmental services is also well aligned with the role of the community coordinator.
- **Multidisciplinary Trainings:** CAPTA's focus on training in early childhood development; training on research-based strategies to promote collaboration with families; and training and workforce development to improve the skills, qualifications and availability of individuals providing services to children and families through the child protection system is also aligned with the SBCT approach, whereby the community coordinator identifies training needs and facilitates the provision of training for community stakeholders on best practices, effective services, and ensuring a trauma-responsive approach to child welfare.
- **Judicial and Child Welfare Leadership:** CAPTA State Grants can be used to support interagency collaboration among public health agencies, agencies in the child protective service system, and agencies carrying out private community-based programs to provide child abuse prevention and treatment services. This is aligned with the SBCT approach, where the judge and child welfare decisionmakers develop partnerships and modeling cross-collaboration to support improved practice across systems and promote sustainability

STATE-SPECIFIC INFORMATION:

Allotment for CBCAP is \$ [redacted] ; Allotment for CAPTA state grant is \$ [redacted] .

Click or tap below to enter text:

OPPORTUNITIES FOR INFANT-TODDLER COURT TEAMS TO MAKE CONNECTIONS:

Click or tap below to enter text:

¹ https://www.cffutures.org/files/fdc/A-Planning-Guide_-_Steps-to-Support-a-Comprehensive-Approach-to-Plans-of-Safe-Care-3.21.18-final.pdf

² U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. (2019b). Grants to Expand Substance Abuse Treatment Capacity in Family Treatment Drug Courts. (Funding Opportunity Announcement (FOA) TI-19-001). <https://www.samhsa.gov/grants/grant-announcements/ti-19-001>.

³ U.S. Department of Justice, Office of Justice Programs, Office of Juvenile Justice and Delinquency Prevention. (2020, January). OJJDP-2020-17090: OJJDP FY 2020 Family Drug Court Program. <https://ojjdp.ojp.gov/funding/opportunities/ojjdp-2020-17090>.

⁴ The Preschool Development Grants Program Summary Report. (2019). Starting Strong: Increasing Preschool Quality and Access. <https://www2.ed.gov/programs/preschooldevelopmentgrants/pdg-summary-rpt-final-12202019.pdf>.