

# Summary

The Quality Improvement Center for Research-Based Infant-Toddler Court Teams (QIC-ITCT) began in 2014, funded by the United States Department of Health and Human Services; Administration for Children, Youth and Families; Children's Bureau. The QIC-ITCT is operated by ZERO TO THREE and its partners, the Center for the Study of Social Policy (CSSP), the National Council of Juvenile and Family Court Judges (NCJFCJ), and RTI International.



Quality Improvement Center  
*for* Research-Based  
Infant-Toddler Court Teams

The QIC-ITCT project provides training and technical assistance to fully develop and expand infant-toddler court teams based on the Safe Babies Court Team™ (SBCT) approach. SBCT is “a community engagement and systems-change approach focused on improving how the courts, child welfare agencies, and related child-serving organizations work together, share information, and expedite services for young children in the child welfare system” and has been recognized by the California Evidence-Based Clearinghouse for Child Welfare as demonstrating promising research evidence.

The approach is based on the following 12 core components that provide a foundation for how the work is carried out:

- Judicial Leadership
- Local Community Coordinator
- Active Court Team Focused on the Big Picture
- Targeting Infants and Toddlers Under the Court's Jurisdiction
- Valuing Birth Parents
- Concurrent Planning and Limiting Placements
- The Foster Parent Intervention: Mentors and Extended Family
- Pre-Removal Conferences and Monthly Family Team Meetings
- Frequent Family Time (Visitation)
- Continuum of Mental Health Services
- Training and Technical Assistance
- Understanding the Impact of Our Work

The first SBCTs were initiated in 2005 and the approach has since been implemented at more than 70 sites across the country, including in Arkansas, California, Connecticut, Florida, Georgia, Hawaii, Illinois, Iowa, Louisiana, Maryland, Mississippi, Nebraska, Oklahoma, Pennsylvania, and Texas. Some sites operated under the guidance of ZERO TO THREE (a national nonprofit with the mission to ensure that all babies and toddlers have a strong start in life), and others on their independent accord. Each SBCT is a public-private collaboration of ZERO TO THREE, local courts, community leaders, child and family advocates, child welfare agencies, early care and education providers, government agencies, private philanthropies, nonprofit and private service providers, and attorneys committed to improving the community's response to child abuse and neglect.

The QIC-ITCT targets information sharing and knowledge building to help ensure that local jurisdictions and states have the tools they need to identify and address the underlying challenges faced by families in the child welfare system and ensure that infants, toddlers, and families have access to high-quality, evidence-based services. Its goals are twofold:

- **Site Implementation:** Strengthen and enhance the capacity of demonstration sites to achieve safety, permanency, and well-being for infants and toddlers in foster care
- **Dissemination and Building the Body of Knowledge:** Create momentum for collaborative approaches to meeting the developmental needs of infants and toddlers in foster care.

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## QIC-ITCT Evaluation 2015–2018

The QIC-ITCT underwent a process and outcomes evaluation. The process evaluation included site visits with in-person interviews of stakeholders; observations of hearings, family team meetings, and court team meetings; and a Web survey at baseline and follow up. The outcome evaluation was a non-experimental design using secondary data analysis across sites. The SBCT dataset was provided to an independent evaluation team at RTI—after all personal identifiers were deleted—for analysis of 10 sites from initiation through May 1, 2017 (sites were only included if 10 or more cases were available for analysis). For permanency and safety outcomes, data analyses were extended up to June 2018. The first QIC-ITCT site was initiated on April 1, 2015, and the last site on August 11, 2016. The information presented here is on 251 infants and toddlers up to 36 months of age at the time of entry and their families:

- **Safety:** Maltreatment recurrence was 0.7% over 12 months among 251 children across sites followed up to June 2018. The national standard set by the Children’s Bureau is 9.1% over 12 months. The focus on addressing the root causes of safety concerns as well as the close monitoring of cases were critical elements supporting positive safety outcomes.
- **Placements:** 94.2% of cases in care for fewer than 12 months had no more than two placements, and 79.4% among those in care from 12 to 23 months had no more than two placements. This is better than any state based on the last report to Congress on child welfare outcomes.
- **Placements and children’s race/ethnicity:** Most children had two or fewer placements regardless of their race/ethnicity. There were no statistically significant differences by race/ethnicity for number of placements overall or by time in foster care.
- **Permanency:** Among 137 children with closed cases followed up to June 2018, 78.1% reached permanency in 12 months. The national standard for children entering foster care set by the Children’s Bureau is 40.5% in 12 months. Close to half of children were reunified with parents (48.9%), more than a quarter were adopted (28.2%), 17.8% were placed with a fit and willing relative, and 5.2% reached other type of permanency (e.g., legal guardianship). There were no significant differences for permanency within 12 months, type of permanency, and parental rights by child’s race/ethnicity.
- **Changes in practices:** QIC-ITCT (or SBCT/Early Childhood Court) sites hold family team meetings and court hearings frequently, from biweekly to every two months or less, allowing rapid responses to family’s needs and challenges. Over two thirds of families had regular parent-child contact either daily or several times a week.
- **Service receipt:** Among children identified by court teams as in need of developmental screening, early intervention, and Child-Parent Psychotherapy, over 90% received services. Most sites provided services like Child-Parent Psychotherapy in less than a week (31.7%) or within the first month (71.9%) of the family’s contact with the court team.
- **Services and children’s race/ethnicity:** There were no statistically significant differences by race/ethnicity across sites comparing time from court order to service receipt for developmental screening, early intervention, and Child-Parent Psychotherapy. Overall, more than 80% of children received services within the first 60 days from court order or referral to service.

### Quality Improvement Center for Research-Based Infant-Toddler Court Teams: Summary.

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