



July 9, 2021

Maria Fuentes Governor's Office, Division for Substance Abuse Policy 1700 West Washington, Suite 101 Phoenix, Arizona 85007

Re: Executive Order 2008-01

Dear Ms. Fuentes:

Pursuant to Executive Order 2008-01, the Arizona Department of Child Safety (ADCS) submits the enclosed report on the Enhanced Availability of Substance Abuse Treatment Services for Families Involved with the Department of Child Safety.

The enclosed report provides an update of the DCS Arizona Families F.I.R.S.T. (Families in Recovery Succeeding Together), also known as AFF, and the many changes and programming initiatives that have evolved since the last update was provided. This report has been prepared in response to paragraph one of the Executive Order 2008-01 which requires a report to be sent by June 30th each year to the Arizona Substance Abuse Partnership.

We continue to work diligently to improve the quality of services for children and their families. Compiling this report provides us another opportunity to review our work and consider new ways to improve.

If you have any questions, please contact me at (602) 255-2500.

Sincerely,

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Mike Faust Director

Enclosure



ARIZONA DEPARTMENT OF CHILD SAFETY Enhanced Availability of Substance Abuse Treatment Services for Families Involved with the Department of Child Safety Report to the Arizona Substance Abuse Partnership July 2021

This report has been prepared pursuant to Executive Order 2008-01: Enhanced Availability of Substance Abuse Treatment Services for Families Involved with Child Protective Services, which requires all Executive Branch agencies that administer substance abuse treatment and prevention services to submit a written report by June 30th of each year, to the Arizona Substance Abuse Partnership (ASAP). The Arizona Department of Child Safety (DCS) administers the Arizona Families F.I.R.S.T. (Families in Recovery Succeeding Together) program, also known as AFF. As required by Executive Order 2008-01, this report describes the actions taken to give priority to families referred to DCS, and to maximize federal funds to the greatest extent possible before expending state funding. In addition, this report provides a description of available services, data on the number of individuals served, and permanency outcome data.

Program Eligibility and Services

The Department of Child Safety administers AFF in collaboration with the Arizona Health Care Cost Containment System (AHCCCS) and the AFF provider agencies. The program provides family-centered substance abuse and recovery support services to parents/caregivers who are involved with the child welfare system via a child abuse and neglect report, and whose substance abuse is a barrier to maintaining children in the home or to reunification. These same services are available to clients of the Department of Economic Security (DES) Jobs program whose substance abuse is a barrier to obtaining or maintaining employment. During SFY2020, 99.9% of referrals were made by DCS while 0.1% were referred by the DES Jobs program.

A comprehensive array of treatment and other related services is available statewide through two contracted AFF providers who serve all five DCS regions. The AFF providers serve Title XIX-eligible clients through coordination with the statewide Regional Behavioral Health Authorities (RBHA). Basic and intensive outpatient treatment includes group therapy, family therapy, individual therapy, drug screening, inpatient treatment when assessed as the least restrictive treatment needed for the client's recovery, concrete supportive services (such as transportation and child care) when needed to promote recovery, and auxiliary services (parenting skills sessions, domestic violence classes, anger management, job search assistance, etc.). In addition, the program is now able to work with youth who are struggling with substance abuse and focuses on utilizing a client's family and support system to help encourage their treatment and maintain their sobriety.

Funding Sources

Services provided to AFF clients were funded jointly by DCS and AHCCCS. In SFY2020, the total amount of program funding was \$7, 329, 752, of which \$239, 448 was DCS funding (State matching funds) with the rest from federal TANF funding. In addition, AHCCCS federal funds covered the majority of costs for clients who were Title XIX and Title XXI-eligible. DCS and AHCCCS funding together allowed AFF to administer a full array of services across the state. At the time of the initial substance abuse assessment, 46.2% of clients were Title XIX eligible, 33.3% of services were funded by DCS, and 20.5% were either eligible for private insurance, tribal funds, or Medicare, or their funding source was not known. Reasons for the funding source change can include situations where clients' AHCCCS enrollment lapsed, clients were in recovery maintenance (which AHCCCS does not fund), or clients were no longer eligible because they obtained or increased employment (from part-time to full-time).

Total Individuals Served

Data from the most recent program evaluation indicates that 8,672 new AFF referrals were received in SFY2020. Outreach was completed for 97.8% of the individuals referred, with 91.3% of outreach activities occurring within one day or less. A substance abuse intake and assessment was completed with 6,998 of the individuals referred. A total of 3,435 unique individuals (both new referrals and continuing clients) received treatment services and 5,712 received support services. Of the 3,435 receiving treatment, 57.1% of clients engaged in outpatient treatment (at least three hours per week), 31.2% received intensive outpatient treatment (at least eight hours per week), and 1.1% received residential treatment (24/7 treatment).

The various support services, including service coordination (case management) and auxiliary and concrete supportive services were utilized 10,695 times in SFY2020. This number is higher than the amount of clients who received treatment and support services because some clients received multiple support services during the year. Besides case management, clients also received parenting skills training, job readiness and employment assistance, non-substance-abuse-treatment mental health services, domestic violence education, crisis intervention, and basic life skills training. The Other category (which includes case management and other services not listed above) was the most-requested auxiliary service at 47%, and mental health services was second at 25%.

Family Well-Being & Permanency Outcomes

Among the individuals analyzed for child maltreatment statistics through SFY2020, approximately 94% of clients had one or more allegations of child maltreatment at the time of their referrals to the AFF program. Of these referrals, 90% had at least one substantiated finding at the time of the referral, and an additional 20% had at least one unsubstantiated allegation at the time of referral. For those who completed AFF services in SFY2020, approximately 96.7% had a substantiated report before being referred to the program, and only 3.3% had a substantiated finding after referral to the AFF program. It should be noted that these numbers sometimes include more than one allegation per parent or caregiver, so these amounts do not total 100%.

Data related to permanency for children indicates 75.4% of the children associated with a closed AFF referral during SFY2020 had achieved permanency. Of the children who had achieved

permanency, 49.9% were reunified with their family, 41.5% were adopted, and 8.2% involved guardianship.

Of all clients who were closed out of the program during SFY2020, 23.7% of individuals successfully completed treatment, and 71.9% unsuccessfully closed out of the program. Additionally, the percentage of clients reporting they were unemployed decreased from 38.8% at intake to 27% at closure.

These results continue to further the legislative goals of increasing the availability, timeliness, and accessibility of substance abuse treatment. In turn, these services help to improve child safety, family stability, and permanency for children in foster or other out-of-home living arrangements, and help families achieve self-sufficiency through employment.