



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
June 2018

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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 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)/Division of Behavioral Health Services (DBHS) 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 SFY 2017, 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 three 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, support services (such as transportation and child care) when

needed to promote recovery, and inpatient treatment when assessed as the least restrictive treatment needed for the client's recovery.

Funding Sources

Services provided to AFF clients were funded jointly by DCS and AHCCCS/DBHS. In SFY 2017, DCS funding for AFF was \$7,785,420 while AHCCCS/DBHS federal funds covered the majority of costs for clients who were Title XIX and XXI eligible. DCS and AHCCCS/DBHS funding allowed AFF to administer a full array of services across the state with no waiting list to access these services. At the time of the initial substance abuse assessment, 58.2% of clients were Title XIX eligible, 34.4% of services were funded by DCS, and 7.4% were either eligible for private insurance, tribal funds, or Medicare or their funding source was not known. At the time of closure (for referrals closed in SFY 2017), 47.8% were funded through DBHS, 47.4% of services were funded through DCS, and the remaining 4.8% were funded through private insurance, tribal funds or Medicare, or were unknown. AFF providers report the reasons include situations where clients' AHCCCS enrollment lapsed, clients were in recovery maintenance (which DBHS 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 8,869 new AFF referrals were received in SFY 2017. Outreach was completed for 97.9% of the individuals referred, with 93.8% of outreach activities occurring within one day or less. A substance abuse intake and assessment was completed with 8,663 of the individuals referred. A total of 7,297 unique individuals (both new referrals and continuing clients) received treatment and support services. Of those, 79.6% of clients engaged in outpatient treatment, 28.2% received intensive outpatient treatment, and .8% received residential treatment.

Services that fall outside substance abuse treatment include service coordination (case management) and auxiliary and concrete supportive services. These services include, but are not limited to, parenting skills, job readiness and employment assistance, non-substance-abuse-treatment mental health services, medical services, domestic violence education, crisis intervention, and basic life needs. Parenting skills was the most-requested auxiliary service for 58.6% of AFF clients and non-treatment mental health services were provided to 21.3% of clients.

Family Well-Being & Permanency Outcomes

Among the individuals referred who closed during SFY 2017, approximately 82% of clients had one or more allegations of child maltreatment at the time of their referrals to the AFF program. Of these referrals, 66% had at least one substantiated finding at the time of the referral, and an additional 51% had at least one unsubstantiated allegation at the time of referral. At the conclusion of SFY 2017, 66.8% had no new reports to DCS after being referred to AFF, approximately 15.1% had an unsubstantiated maltreatment allegation after being referred to the program, and 16.9% 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 84.6% of the children associated with a closed AFF referral during SFY 2017 had achieved permanency. Of the children who had achieved permanency, 46.2% were reunified with their family, 46.7% were adopted and 7.1% involved guardianship.

During SFY 2017, 22% of individuals successfully completed treatment, 41.4% are still in treatment, and 36.6% unsuccessfully closed out of the program. Additionally, the percentage of clients reporting they were employed full time and who completed treatment increased from 24.7% at intake to 43.5% at closure.

These results are encouraging and 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 child in foster or other out-of-home placement, and help families achieve self-sufficiency through employment.