



DEPARTMENT OF ECONOMIC SECURITY

Your Partner For A Stronger Arizona

ANNUAL REPORT FOR STATE FISCAL YEAR 2013

CHILD PROTECTIVE SERVICE EXPEDITED SUBSTANCE ABUSE TREATMENT FUND

OVERVIEW:

Laws 1998, Chapter 10, Section 21 (HB 2645) established through Arizona Revised Statute Section § 8-812 the "Child Protective Services Expedited Substance Abuse Treatment Fund."

The Child Protective Services (CPS) Expedited Substance Abuse Treatment Fund enables the Arizona Department of Economic Security (DES) to provide substance abuse treatment services so that permanency for dependent children can be expedited when parental substance abuse is a significant obstacle to family reunification. The fund can also be used for substance abuse treatment for parents or guardians with a primary goal of facilitating family preservation, including services that maintain the family unit in a substance abuse treatment setting.

A.R.S. § 8-812(F) requires the Department to make the following information available to the public upon request and on the DES website:

- The number and percentage of parents and guardians who are offered treatment paid for with fund monies and who complete treatment.
- The number of cases and children who are able to remain with or are returned to the custody of their parents or guardians as a result, in whole or in part, of treatment paid for with fund monies.
- The number of children who receive expedited permanent placement as a result of the availability of services paid for with fund monies.
- Data for cases that are part of expedited dependency proceedings.

PROGRAM IMPLEMENTATION

DES maintains contracts with community agencies across the state for the provision of substance abuse treatment and recovery support services. Expedited substance abuse treatment funds are integrated to ensure availability of a comprehensive continuum of services which dovetail with Title XIX, Temporary Assistance for Needy Families (TANF) and General Fund dollars. This integration has resulted in a blending of fund sources that emphasize coordination and maximization of treatment resources for the most comprehensive and seamless service delivery possible.

PROGRAM ELIGIBILITY

A.R.S. § 8-812(C) specifies that the state appropriation cannot be used on behalf of a parent unless the following are true:

- The parent or guardian is a part to a dependency action concerning a child of the parent or a child under the care of the guardian.
- The parent or guardian is not eligible for benefits under Title XIX of the Social Security Act or private insurance, or the necessary substance abuse treatment service is not available under Title XIX or private insurance.
- The case plan provides for the child to either remain with or return to the parent or guardian.
- The substance abuse treatment is necessary for the case plan to be accomplished.
- A recipient of services that are paid for with fund monies shall sign a written statement as outlined in the statute.

Screening was done prior to fund distribution to ensure that individuals met the above criteria.

STATE FISCAL YEAR 2013 APPROPRIATION

The sum of \$247,000 was appropriated to DES for state fiscal year 2013 for the CPS Expedited Substance Abuse Treatment Fund and \$247,000 was expended.

REPORTING REQUIREMENTS

A.R.S. § 8-812(F)(1):

The number and percentage of parents and guardians who are offered treatment paid for with fund monies and who complete treatment.

In fiscal year 2013, the services for parents/guardians that were paid for with Expedited Substance Abuse Treatment Fund were not captured at the initial referral stage. All parents/guardians involved in 2013 expenditures had been screened as appropriate for substance abuse services, all had initially successfully engaged with the Arizona Families F.I.R.S.T. provider(s), and all had engaged in some type of substance abuse services.

This change was deemed as more suitable to the intent of the Expedited funding in that only those parents that were determined to be eligible for substance abuse services were funded by the Expedited Substance Abuse Treatment fund.

FINDINGS:

The total number of parents/guardians who received this year's Expedited Substance Abuse Treatment funding was 186. Of the 186 parents/guardians, 31.7 percent completed services successfully, 36.6 percent were still receiving services and the remaining 31.7 percent were closed for the following reasons:

Client Closure status

Death	2 (1.1 %)
Discontinued services	53 (28.5%)
Incarcerated	2 (1.1%)
Relocated	2 (1.1%)

Consequently, the response to the legislature's question of, "*The number and percentage of parents and guardians who are offered treatment paid for with fund monies and who complete treatment.*" with the above parent/guardians who were determined to be in need of substance abuse services, was 31.7 percent. When those clients that are still receiving services are added to those who successfully completed services, participating parent/guardians represented are 68.3 percent of total.

A.R.S. § 8-812(F)(2): the number of cases and children who are able to remain with, or be returned to the custody of their parents or guardians as a result, in whole or in part, of treatment paid for with Fund Monies.

In the parent/guardian population associated with this year's Expedited Substance Abuse Treatment Fund expenditures, the total number of parent/guardians' services paid was 186 individuals. Those 186 individuals represented a total of 174 CPS cases and 355 children were involved.

Of those 355 children involved, 7.9 percent of the children were able to remain with their family. Another 41.4 percent of these children were reunified with the parent/guardian with the smallest percentage (16 percent finding resolution via adoption, guardianship or Long Term Foster Care. There were 61 (35.1 percent cases/ 118 children (33.2 percent where the case plan remained reunification with the parent/guardian but the case plan was still in process and parent/guardians were continuing participation in services.

This information is broken out in the following chart.

<u>Permanency Plan:</u>	<u>by case</u>	<u>by child</u>
Adoption	25 – 14.4%	57 – 17%
Guardianship	2 – 1.1%	3 – 0.8%
Long Term Foster Care	1 – 0.5%	1 – 0.2%

Remained w/ family (in home)	13 – 7.5%	28 – 7.9%
Reunified	73 – 42%	147 – 41.4%
Reunification Plan still in effect	61 – 35.1%	118 – 33.2%

A.R.S. § 8-812(F) (3): The number of children who receive expedited permanent placement as a result of the availability of services paid for with fund monies.

As noted in the previous chart a total of 175 children were able to remain with the family or were reunified with their parent/guardian. There were an additional 188 children who were in continued reunification case plan goals (with parent/guardian still participating in services) as of gathering this information.

A total of 61 children reached other resolutions via adoption, guardianship or long term foster care.

These percentages, while not perfect, suggest that swift intervention and the removal of barriers may have a significant impact on the outcomes for children when the goal is reunification. The Arizona Families F.I.R.S.T. program supported by the Expedited Substance Abuse Treatment Fund is clearly an important element of improving child safety and family well-being.

A.R.S. § 8-812 (F)(4):

All of the cases were involved in expedited service delivery in conjunction with the family's court proceedings.

CONCLUSION:

In SFY 2012 (July through June) in Arizona, DCYF removed 10,141 children. Of those, 5,957 (59 percent) were removed because drugs and/or alcohol were a contributing factor to the maltreatment identified in the report. It is important to recognize that substance abuse may not always be evident during the initial CPS report but discovered subsequent to the investigation. Substance abuse treatment needs in parents/guardians involved with CPS reports is likely to be even greater than the data reflects.

This significant need was the primary driving force of how the AZ Families F.I.R.S.T. expedited fund and other initiatives came to existence. Substance abuse issues rarely are the only barrier to family well-being that exists. Many situations include intertwined issues that result in substance abuse and frequently reflect generational challenges, as well. The immediacy and range of services needed to remove barriers to productive parenting can be overwhelming.

The Expedited Fund has been one of the avenues that has eliminated the funding barriers that prevented access to needed services. The funds are used for service delivery and only begin to dent the full needs line workers see daily. So, it is with that appreciation that the following overview of what is done with the funds is provided:

From a DES perspective, providing Substance Abuse treatment services is viewed as necessary in establishing that the federal, state and CPS mandates of "making reasonable efforts" in offering the services required to meet the court approved permanency plan are achieved.

Reasonable efforts to reunify families impacted by substance use involves heavy and consistent utilization of programs that bridge between a report by CPS until entry into substance abuse treatment and other needed services. These programs have the essential element of engagement specialists who facilitate (remove barriers) for entry into the wide array of services needed as well as the mechanisms (such as transportation) to make the service plan elements possible. The bringing together of multiple workers on a single case to create the impetus for entry into substance abuse treatment and other needed services is the opportunity for parents/guardians to improve their parenting skills and open opportunities for the children involved.

The intervention bridge between CPS report and engaging into various services is compounded when the identified substance abuse concerns are married with mental and physical health issues, as well as possible domestic violence issues. There becomes no "first" concern to address but several major concerns to be addressed simultaneously. This, in conjunction with the base needs such as food, shelter and personal safety, typically results in multiple service need areas needing to be addressed quickly and all at once in order to create the bridge to more advanced services.

When the majority of the families come in with immediate and multiple concerns, it requires multiple services with multiple funding sources to begin to dent what the actual full range of needs might be. The goal is always to shorten the exposure that a child has to neglect and harm. The Expedited Substance Abuse funds are one avenue to meeting that goal.