

July 29, 2019

Delia York, Chair  
Reinvestment Subcommittee, Juvenile Justice Oversight Committee  
Department of Correction Juvenile Services

Dear Chair York:

The Department for Children and Families appreciated the opportunity in June to present information on uses for reinvestment funds to initiate or amplify evidence-based program administration and training. These funds would serve youth who come to the attention of DCF demonstrating behaviors at risk, alleged or adjudicated as juvenile offenses. This letter is written as follow up to the initial presentation to answer questions from the subcommittee.

The complete list of DCF's initial requests is an attachment to this letter. The following information is provided to answer specific questions asked by the committee.


1. Regarding Family Preservation Services, who would be the referring agency?  
DCF contracts statewide for Family Preservation Services and is the referring agency. Families with older youth in their family who come to DCF attention through JIAC would have dual involvement with child welfare and juvenile justice systems, thus JIAC assessment information is used to help determine appropriateness of Family Preservation Services referral.
2. Regarding Family Functional Therapy (FFT)
  - a. Who would be the referring agency?
    - i. DCF is the referring agency for FFT as a prevention effort for foster care or youth at risk of juvenile offenses. A foster care grantee might be a referring agency if the family has a child age 15 or older in foster care who is dually involved.
  - b. What would the process entail?
    - i. Family Functional Therapy is rated as Well Supported in the Title IV-E Prevention Clearinghouse for Family First Prevention Services Act (FFPSA) implementation.
      1. DCF currently has an RFP out for proposals for Evidenced Based programs including FFT that will commence October 1, 2019.
      2. State funds expended by DCF on approved EB programs such as FFT will be matched 100% by federal funds.
    - ii. Option 6 to augment state DCF budget funds for FFT would yield additional families served through DCF grantees for FFT. DCF regional office practitioners make referrals to the FFT grantee for appropriate families with youth who are at risk of entering foster care.
    - iii. Option 4 in the table that details funds for training to build capacity for clinical teams would entail a process of each of the 4 foster care grantees with DCF becoming certified as FFT program providers. As the evidence-based training and certification process

begins, the clinical team commences modules of the FFT intervention with families who have youth dually involved and these teams would build capacity across counties.

- c. What are the criteria?
  - i. FFT is recommended as an EB program for families with children age 11 and older. If reinvestment funds are provided to augment the number of families served in a jurisdiction, a certain number of families can be reserved or dedicated as referrals that meet criteria of dually involved youth (based on the cost of service per family or youth given the amount of reinvestment funds contributed.)
- d. How would this work for children who do not have stable placements?
  - i. Work alongside the family for youth in foster care can continue and hopefully supports placement stability. DCF will keep the youth close to community for the intervention services to support family-based placement settings.
  - ii. As a prevention model, the approach alongside family's work is similar to FFT contracts that DOC has with their three vendors.
- e. Is there capacity in our counties to serve newly referred children?
  - i. Regarding Option 4, using reinvestment funds to cover training costs of FFT for additional clinical teams with DCF foster care grantees builds capacity for new referrals.
  - ii. Regarding Option 6, DCF has an RFP to awards grants for FFT beginning 10/1/19.

Thank you for the consideration and thoughtful inquiry. We look forward to further discussion or decision.

Sincerely,

A handwritten signature in black ink that reads "Tanya Keys". The signature is written in a cursive, flowing style.

Tanya Keys  
Deputy Secretary  
Department for Children and Families

Cc:  
Shanelle Dupree, DCF JJOC Committee Member  
Megan Milner, DOC

## Attachment A

Service	Proposed # Served	Cost per unit	Total cost
1 Intensive In-Home Family Preservation Services for families with youth age 15+ (Home Builders evidence base rated as effective in OJJDP Model Program Guide [MPG])	100 families with youth age 15 and older facing crisis or juvenile offender allegations and risk of entry into foster care	Avg. \$4,667 per family	\$466,700
2 Purchase Kansas Big Brother Big Sisters Community Based Mentoring in their 11 hub communities. Program rated as Effective for health, positive parent relationship, delinquency prevention and positive peer supports,	200 youth/ new mentees	\$1,500 per new mentoring match	\$300,000
3 Purchase crisis intervention beds for youth age 14 or older facing behavioral health crisis or allegations of juvenile offender behavior and at risk of entry into foster care.	To be determined after further analysis and discussion.		
4 Training costs to build capacity for Family Functional Therapy (FFT) teams in 8 DCF grant regions in the child welfare grantees for a team of 3-8 clinicians.	Phase 1 costs: \$47,782 Phase 2 costs: \$38,161 Phase 3 costs: \$13,216	\$99,159 per clinical area/site team  (x 8 areas)	\$793,272
5 Purchase Behavioral Intervention Services from FosterAdoptConnect  (emerging, but not yet evidenced based. Bruce Perry intervention base and working with KU for analysis and evidence information)	40 youth. Wyandotte and Johnson County families with youth age 15 and older facing crisis or juvenile offender allegations and risk of entry into foster care or in care.	\$49/ hour for minimum of 15 hours/ week. Typical length of service is 30 weeks or a total service cost \$22,050/ child.	\$882,000
6 Augment funds to family first prevention grant to overlapping (shared) evidenced based programs rated as effective in the OJJDP MPG and approved by the Administration of Children and Families Prevention clearinghouse such as Family Functional Therapy and Multisystemic Therapy.	youth age 15 and older facing crisis or juvenile offender allegations and risk of entry into foster care	Dependent on program or bidder proposal.	\$500,000
7 Implement Family Finding Practice Approach with 4 foster care grantees to identify and locate family willing to support youth age 15+ in care.	Training or collaboration costs not known yet		
8 Curriculum for specialized foster home or relative homes.	To be determined after further analysis and discussion.		