

**American Recovery and Reinvestment Act (ARRA)
Summary of Project/Program Grant Submission**

Department Name: Mental Health/Mental Retardation/Substance Abuse

Point of Contact: Mike Gilmore, Ph.D.

Name of ARRA Grant Program Submitting To: Byrne Justice Assistance Competitive Grant

Deadline for ARRA Grant Application Submission: April 27, 2009

Title of City Program/Project: Alexandria Family Drug Treatment Court

Description of Program/Project and Current Need – *Provide a description of the program or project that you are submitting a grant application for. Indicate if this is a new program or project. What is the current need (i.e. why are you applying for stimulus funds)?*

The Alexandria Model Court (Juvenile & Domestic Relations District Court, City Attorney's Office, Community Services Board, Department of Human Services, Court Appointed Special Advocate Program of Alexandria {CASA}, Office on Women, Alexandria Public Schools), proposes to expand the Alexandria Family Drug Treatment Court Program (AFDTC). Family Drug Treatment Courts are problem-solving courts designed to ensure the safety and permanency of abused and neglected children by providing parents intensive treatment and other services to address substance abuse and comorbid issues. The goal is to fill service gaps and to ensure timely service delivery to families referred to the AFDTC program. It provides thorough inter-agency collaboration and integration of programs and services designed to increase the well-being of, improve permanency outcomes for, and enhance the safety of children who are in an out-of-home placement or are at risk of being placed out of the home as a result of a parent's substance abuse. The use of a comprehensive inter-agency integrated service and family plan will ensure that the family's identified needs are addressed and reviewed quarterly to decrease gaps in service or other inefficiencies in service delivery. For the past four years, AFDTC has operated at maximum capacity with only one staff person dedicated to the program. Growth is not possible given existing resources, but the need for these families to be served is very clear. In order to reduce the number of children who are victims of parental abuse and neglect, we need to provide parents and families with intensive services. We are asking for a total of \$166,937 in grant funding over a two-year period.

Implementation – *When can this program be up and running?*

With a strong infrastructure already in place, if grant funding is awarded implementation will occur as quickly as new staff are identified and hired. The grant guidelines require projects to be started on or after July 31, 2009.

What principals and goals of the ARRA does this program/project fulfill? *(Will it result in the creation of jobs or can it be shown in some other way to stimulate the economy)*

Creation of jobs, promoting economic recovery through strong inter-agency collaborative partnerships, and enhancing and implementing services in order to reduce child abuse/neglect and parental substance abuse.

Short-term/Long-term Fiscal Impact - *Does the grant program require any funding (i.e. match) from the City in order to implement? Will this program create a long-term fiscal commitment for the City? What will happen after funding runs out?*

The grant does not require any matching City funding. The grant will be awarded for a two-year period. The grant award will be used to fund a full-time Therapist III, a part-time Therapist I, and increased contracted Psychiatrist hours (one hour per week) in the Alexandria Department of Mental Health, Mental Retardation and Substance Abuse. The award will also be used to fund a CASA Supervisor for the SCAN of Northern Virginia and contracted mentors. The grant shall cover all expenses during the initial two-year period.

After the initial two-year period, SCAN has agreed to fully fund the CASA Supervisor. Services provided by the Therapist III and Therapist I will be billed to Medicaid, generating an estimated \$40,000 per year. For services not covered by Medicaid, Drug Court would become a CSA vendor and bill for services on an individual basis. We estimate an eventual long term cost savings to the City. Research indicates that parents who participate in family treatment drug court experience higher rates of treatment completion and higher rates of reunification (Worcel, S., Green, B.L., Furrer, C., Burrus, S.W. & Finigan, M., 2007). Our own data indicate that over a six-year period (2001-2007), 58% of AFDTC children were in foster care at the beginning of AFDTC. Only 27% remained in foster care at program end. A dedicated team of a therapist, case manager, CSAS volunteer and parent mentor is expected to result in shorter length of stay in foster care and increased reunification rates over and above our current reunification rate. When children are in foster care the City match for CSA is 52%. This match decreases to 26% when children are no longer in care. Thus, we expect to have more children move to the 26% match quicker than we have in the past.