

MEMORANDUM

TO: Jennifer Acton, LSA
Beth Lenstra, LSA

FROM: David K. Boyd
State Court Administrator

DATE: February 5, 2014

RE: Responses to questions at budget presentation

Below are responses to questions that came up during my budget presentation on January 24, 2014. If I misunderstood or have omitted any of the questions, please advise and I will respond as soon as possible.

1. Please provide a breakdown on the \$420,000 requested for family treatment courts.

\$154,206 for the 6 currently funded under the federal grant
\$128,505 for the 5 emerging courts
\$ 77,103 for the 3 expansion courts
\$359,814
\$ 60,000 for the statewide coordinator position
\$419,814

2. Does the Judicial Branch have statistics on juvenile delinquency cases on filings, findings, and adjudications broken out by boys and girls?

Yes. See answer to question #3.

3. Total petitions in juvenile courts by boys and girls and those adjudicated by boys and girls?

In 2012, there were 4,882 delinquency petitions filed—964 (20%) were girls and 3,918 (80%) were boys.

Of those 4,882 delinquency petitions, there were 1,796 adjudications— 324 (18%) were girls and 1,472 (82%) were boys.

Note, not all delinquent girls were eligible for Girls State Training School (STS) placement in Toledo. Approximately 10-12 delinquent girls are placed at the STS each year.

4. Do you have a cost savings if money is provided for the specialty courts?

There is no cost savings to the judicial branch. However, there is significant savings to the State through cost avoidance. The most recent report from CJPJ on the 6 family treatment courts shows \$4.6 million in cost avoidance through September 30, 2013. See attached.

Family Treatment Court Cost Analysis – September, 2013

Prepared by the Iowa Department of Human Rights, Division of Criminal and Juvenile Justice Planning

The Parents and Children Together (PACT) grant is a collaborative, family treatment court approach to serving families where substance abuse is a primary reason for the family's involvement in the child welfare system. Partners in this federal grant initiative with the Judicial Branch of Iowa are the Department of Human Services, the Department of Public Health, and the Governor's Office on Drug Control Policy. Key elements of the grant include:

- Early substance abuse assessments and treatment for parents
- Regular, frequent, judge led court hearings
- Support for families beyond their court involvement for 6-12 months
- Coordinated treatment team delivery of services to families

Iowa family treatment courts served 496 families (31 were readmissions) comprised of 587 parents or caregivers and 954 children. Preliminary results indicate that the Family Treatment Courts (FTC) show effectiveness in reunification rates and placement into substance abuse treatment as well as reducing subsequent treatment episodes. The initial pilot counties, Cherokee/Ida, Linn, Polk, Scott, Wapello, and Woodbury experienced positive results and a significantly greater reduction in these areas than the matched and referred comparison groups. Estimates show that the FTCs have generated over \$4.5 million dollars in cost avoidance for the state by the end of its sixth year of operation.

This analysis is somewhat limited to what can be captured using administrative data (e.g. out of home placement and substance abuse treatment). For example, it would be difficult to quantify the future savings for a child able to get his or her parent(s) back. Also, rather than stating these benefits as "savings," they are referred to here as "cost avoidance" because they may not necessarily result in net savings to the departments serving these families; rather, they create opportunities for those funds or services to be provided to others. Further information on additional performance measures is available through other reports.

As currently designed, this family treatment court cost analysis methodology likely understates the cost avoidance because it focuses solely on substance abuse treatment and child welfare cost data. As an example, a study of treatment cost savings in California¹ included data from substance abuse treatment, medical hospitalizations, emergency room visits, earnings, and transfer payments and documented a benefit-cost ratio of 7:1.

All data used in this cost analysis are through the end of September 30, 2013. The study includes three cohorts: participant, matched, and referred. Additional information on the cohorts and data sources is included in the Appendix.

This cost analysis includes the following domains: placement at time of enrollment, children remaining in the custody of parent or caregiver, median foster care episode length of stay, reunification rate, and substance abuse treatment.

¹ Ettner, S. L., Huang, D., Evans, E., Ash, D. R., Hardy, M., Jourabchi, M., Hser, Y. (2006). Benefit-cost in the California treatment outcome project: Does substance abuse treatment "pay for itself"? *Health Research and Educational Trust*, 41(1), 192-213.

Cost Avoidance Summary

There appears to be a relationship between greater resources spent on parent or caregiver substance abuse treatment and both current and future child welfare cost avoidance.

Compared to non-program participants, family treatment court participants have

- higher costs due to
 - a greater percentage of parents and caregivers receiving substance abuse treatment and staying in treatment longer and
 - more children in out of home care at the start of the program (placement decisions were made prior to enrollment)
- cost avoidance due to
 - a higher reunification rate,
 - more children being able to remain in custody of parent or caregiver, and
 - shorter foster care episode lengths of stay.

Category	Estimated Cost/Cost Avoidance
Substance Abuse Treatment Costs	-\$2,349,665.00
Placement at Time of Enrollment	-\$604,215.21
Reunification Rate	\$6,154,991.44
Children Able to Remain in Custody of Parent or Caregiver	\$729,225.26
Median Foster Care Episode Length of Stay	\$670,399.02
Estimated Cost Avoidance	\$4,600,735.51

More information on the cost indicators and calculations can be found in the remainder of the report.

Any errors in the calculations for this analysis are the fault of the authors of this report rather than those providing the cost information.

Placement at Time of Enrollment

Table 1 summarizes the cost of placement at time of enrollment. Of the family treatment court children, 59.4% were out of home at time of enrollment versus 50.3% of the referred comparison children. The difference in out-of-home placements is not a direct result of FTC participation. Most children were out of home prior to enrollment in the program. Compared to the referred group, an additional 87 family treatment court children were in out-of-home placement. The median length of stay in foster care for all discharges was 404 days. Calculation of the estimated additional children out of home: (59.4%-50.3%=9.1%; 9.1%*954 participants=87).

Table 1: Cost of Placement at Time of Enrollment

Age Category	Additional FTC children in out of home care (n=87)	Median Foster Care Days	Foster Care Days	Daily Rate	Foster Care Costs
0-5 Years	61.0%	404	21,440	\$16.78	\$359,767.90
6-11 Years	28.0%	404	9,841	\$17.45	\$171,733.13
12-15 Years	8.4%	404	2,952	\$19.10	\$56,391.45
16-18 Years	2.4%	404	844	\$19.35	\$16,322.73
Estimated Additional Costs					\$604,215.21

Because of how the file open and close dates are defined for each of the groups, valid comparisons may not be made between the participant and matched comparison groups on this indicator. As such, only the referred group is included. Age is calculated at time of FTC entry. Foster Care Costs are the Daily Rate multiplied by the Foster Care Days (for each age category).

Remained in Home Through Case Closure among Those in Home at Time of RPG Entry

Table 2 provides the cost avoidance of more children being able to stay with parent or caregiver. Of the family treatment court children with closed cases who were at home at RPG entry, 76.3% remained in custody of a parent or caregiver through case closure versus 43.2% of the referred comparison children with closed cases. As a result of the family treatment court intervention, an estimated additional 105 children were able to remain in custody of a parent or caregiver through case closure. The median length of stay in foster care for all discharges was 404 days. Calculation of the estimated children that would be able to remain in home: (76.3%-43.2%=33.1%; 33.1%*317 participants=105).

Table 2: Cost Avoidance of More Children Being Able to Remain in Custody of Parent or Caregiver

Age Category	Proportion of FTC Children Able to Remain in Custody of Parent or Caregiver (n=105)	Median Foster Care Days	Foster Care Days	Daily Rate	Foster Care Costs
0-5 Years	61.0%	404	25,876	\$16.78	\$434,202.64
6-11 Years	28.0%	404	11,878	\$17.45	\$207,264.12
12-15 Years	8.4%	404	3,563	\$19.10	\$68,058.65
16-18 Years	2.4%	404	1,018	\$19.35	\$19,699.85
Estimated Cost Avoidance					\$729,225.26

Because of how the file open and close dates are defined for each of the groups, valid comparisons may not be made between the participant and matched comparison groups on this indicator. As such, only the referred group is included. Age is calculated at time of FTC entry. Foster Care Costs are the Daily Rate multiplied by the Foster Care Days (for each age category).

Median Foster Care Episode Length of Stay

The median foster care episode length of stay for family treatment court children was 404 days versus 478 days for the matched and referred comparison groups combined. The difference in the median length of stay between the two groups was 74 days. Table 3 shows the estimated cost avoidance of foster care for those who participated in family treatment court.

Table 3: Cost Avoidance of Foster Care

Age Category	Proportion of FTC Children Discharged from Foster Care (n=527)	Foster Care Days (Median Difference)	Foster Care Days	Daily Rate	Foster Care Costs
0-5 Years	61.0%	74	23,789	\$16.78	\$399,175.73
6-11 Years	28.0%	74	10,919	\$17.45	\$190,544.23
12-15 Years	8.4%	74	3,276	\$19.10	\$62,568.39
16-18 Years	2.4%	74	936	\$19.35	\$18,110.67
Estimated Cost Avoidance					\$670,399.02

Age is calculated at time of FTC entry. Foster Care Costs are the Daily Rate multiplied by the Foster Care Days (for each age category).

Reunification Rate

Utilizing the first foster care disposition associated with involvement in the program or study, the reunification rate for family treatment court children was 73.6% versus 49.1% for the matched and referred comparison groups combined. As a result of the family treatment court intervention, an estimated additional 129 children were able to be reunified ($73.6\% - 49.1\% = 24.5\%$; $24.5\% * 527 \text{ participants} = 129$). Utilizing the rates for the non-reunification family treatment court foster care discharges, it is estimated that 85 of these additional 129 reunified children would have been adopted ($66.2\% * 129 = 85$). According to the U.S. Department of Health and Human Services Administration, an adoption subsidy was provided for 71.9% of Iowa children discharged from foster care to adoption during FFY10. As such, it is estimated that an adoption subsidy would have been paid for 61 family treatment court children ($71.9\% * 85 = 61$). In SFY14, the Iowa Department of Human Services estimated the average daily cost of an adoption subsidy per case was \$21.25. Table 4 calculations assume the adoption subsidy began with the child in the middle of each age category.

Table 4: Cost of Reunification

Age Category	Proportion of FTC Children Discharged to Adoption (n=85)	Proportion Receiving Adoption Subsidy	Estimated Annual Adoption Subsidy Cost per Case [^]	Estimated Total Years Receiving Subsidy through Age 18	Total Adoption Subsidy Cost per Case	Adoption Subsidy Costs ^{^^}
0-5 Years	65.2%	71.9%	\$7,756.25	15.0	\$116,343.75	\$4,635,937.77
6-11 Years	29.4%	71.9%	\$7,756.25	10.0	\$77,562.50	\$1,393,627.49
12-15 Years	5.4%	71.9%	\$7,756.25	4.9	\$38,005.63	\$125,426.18
Estimated Cost Avoidance						\$6,154,991.44

[^] (average daily subsidy cost per case* 365 days) ^{^^} ($85 * 65.2\% * 71.9\% * \text{total adoption subsidy cost per case}$). Age is calculated at the time of discharge from foster care to adoption.

Iowa discontinued the guardianship subsidy waiver program. As a result, the focus of this calculation is adoption.

Substance Abuse Treatment

Substance abuse treatment costs were calculated using the level of care and unit of service: number of individual, group, or family sessions for outpatient treatment or number of days in inpatient and residential treatment. Unit rates by level of care are listed in the Appendix. The calculations include levels of care associated with all the substance abuse treatment episodes starting prior to family treatment court/study entry and continuing and/or after family treatment court/study entry through September 30, 2013. A total treatment cost for each adult was calculated by summing the costs of all treatment episodes during the study timeframe.

Family treatment court parents and caregivers:

- were admitted to substance abuse treatment at a greater rate (97.3% versus 78.4%),
- stayed in treatment longer (first substance abuse treatment episode median = 232 days versus 80 days), and
- were more likely to complete the first substance abuse treatment episode (65.2% versus 49.4%) than the comparison parents and caregivers.

The median estimated cost for all substance abuse treatment episodes combined was \$8,331.00 for the participating parents and caregivers (n=571) versus \$4,216.00 for the comparison parents and caregivers (n=269). Table 5 shows estimated additional treatment costs for family treatment court participants.

Table 5: Cost of Substance Abuse Treatment

FTC Parent or Caregiver Median Substance Abuse Treatment Cost	Comparison Parent or Caregiver Median Substance Abuse Treatment Cost	Difference	Number of FTC Parents or Caregivers Admitted to One or More Substance Abuse Treatment Episode(s)	Estimated Additional Substance Abuse Treatment Costs
\$8,331.00	\$ 4,216.00	\$4,115.00	571	\$2,349,665.00

Note:

In the previous reports, we were using the discharges from substance abuse treatment. Beginning in September 2012, we started using the admissions data, and the changes are minimal. This modification provides a more accurate calculation of the substance abuse treatment costs and is more in-line with our data collection efforts. Despite this change, FTC still shows a solid cost avoidance figure.

Substance abuse treatment accuracy: 80/86 [CMD1] substance abuse treatment agencies had reported data at the time data were requested from the Iowa Department of Public Health. As such, some cohort members who recently entered treatment during the current period may not be reported here.

APPENDIX

Cohorts

The participant cohort includes all families that entered family treatment court from March, 2008 through September, 2013. The matched sample was drawn by the Department of Human Services information technology staff and is comprised of similarly-situated families with a positive response on the safety assessment item assessing parent alleged or observed substance use that affects the caretaker's ability to supervise, protect, or care for the child. The referred cohort includes court involved families referred to family drug court but did not participate.

Data Sources

Family foster care administrative data and SFY14 daily rates were provided by the Division of Child and Family Services in the Department of Human Services. Only the basic rate and age of child were used for these calculations. Other costs associated with out of home care, such as higher level of care, CPS worker and support staff salaries, travel, foster parent recruitment, and training are not included. Administrative substance abuse treatment data and SFY14 treatment environment service unit costs were provided by the Division of Behavioral Health in the Department of Public Health.

SFY 2014 Cost of Substance Abuse Treatment by Level of Care

Level of Care	Unit Rate
Medically Managed Inpatient Detoxification	\$850
Medically Managed Intensive Inpatient	\$850
Medically Monitored Inpatient Detoxification	\$160
Medically Monitored Intensive Inpatient	\$160
Clinically Managed High Intensity Residential	\$140
Clinically Managed Medium Intensity Residential	\$140
Clinically Managed Low Intensity Residential	\$52
Day Treatment/Partial Hospitalization	\$81
Intensive Outpatient	\$81
Extended Outpatient	\$68
Continuing Care	\$68
Outpatient Detoxification	\$68