

PROGRAM TITLE: Functional Family Therapy

PROVIDER: Comprehensive Youth Services

PROGRAM DESCRIPTION: Functional Family Therapy (FFT) is an evidence-based family therapy program for youth ages 11-17 years old who are involved in the juvenile justice system or at-risk of involvement. Youth are generally referred for behavioral or emotional problems by the juvenile justice system, schools, mental health specialists or child welfare system. Services are provided throughout Fresno County in the homes, schools, community centers and at the main office of CYC to the identified clients and their families. Approximately 80% of the services are provided in the client/family home or a community location. Home and community based services decreases transportation barriers and allows for the client/family to feel more comfortable in the therapeutic process and provides the therapists and case managers a better sense of the client/family home and community environment. Participants include parents, siblings, grandparents, and/or other relatives living in the home. One parent/guardian must participate but all family members are strongly encouraged to participate. Family participation greatly impacts the positive outcomes for the client and family.

FFT is a strength-based model built on a foundation of acceptance and respect. At its core is a focus on assessment and intervention to address risk and protective factors within and outside of the family that impact the adolescent and his or her adaptive development. FFT is a short-term, high quality intervention program with an average of 12 to 14 sessions over three to five months. The model also encourages follow-ups with the family members 3 months, 6 months and 1 year after completion of the program.

FFT consists of five major components: engagement, motivation, relational assessment, behavior change and generalization. Each of these components has its own goals, focus and intervention strategies and techniques.

Advantages of Family Focus:

- Families support positive change in (or add to the problems of) youth – long after Juvenile Justice and/or treatment resources are gone,
- Family can support youth more effectively than the youth can on his/her own,
- Many younger siblings become involved in the intervention process which provides an added benefit to the entire family system.

Comprehensive Youth Services has served 509 identified clients, 441 parents/guardians and 332 siblings and other relatives for a total of 1,282 unduplicated people served in Fresno County from January 1, 2014 to June 30, 2015.

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH – OUTCOMES- Attachment A

AGES SERVED: 11-17 years old and their family members

Children
 Adult

TAY
 Older Adult

DATES OF OPERATION: April 2007 through Present

DATES OF DATA REPORTING PERIOD: January 1, 2014 to June 30, 2015

OUTCOME GOALS:

- More than 50% of the clients/families receiving FFT PEI program services shall have limited or no means of payment for mental health services as indicated by the payer sources identified for the clients on monthly rosters and program reports.
- More than 50% of the clients/families receiving FFT PEI program services shall reside in rural Fresno County areas as indicated by the zip codes identified for clients on monthly client rosters and program reports (client rosters should include client demographic data, e.g., age, gender residence, etc.; and client utilization data, e.g., quantity/quality of services delivered).
- Identify and build upon individual and family

OUTCOME DATA:

- Over 99% of the clients receiving services in the FFT program are Medi-Cal eligible. Less than 1% do not have Medi-Cal or private insurance and required to complete UMDAP procedures. All MHSA clients met criteria for limited on no means of payment for mental health services.
- Referrals are received throughout Fresno County, including rural communities of Coalinga, Del Rey, Dunlap, Firebaugh, Fowler, Huron, Kerman, Kingsburg, Mendota, Squaw Valley, Orange Cove, Raisin City, Parlier, Reedley, Riverdale, Sanger and Selma, as well as metro areas of Fresno and Clovis. Approximately 45% of the services are provided in rural communities. CYS FFT program staff drive to the rural communities to provide services in the client/family home, local school site or other community locations, such as the local library, church or community centers. – (See Chart 1 below for breakdown of age, ethnicity, primary language and gender of clients receiving services in the CYS FFT program).
- The Youth Outcome Questionnaire is a collection of questions

strengths and assets to help parents and children develop new skills to enhance family cohesion. 75% of clients/families completing the FFT program will report an increase in family cohesion as measured by the Client Outcome Measurement tools and Outcome questionnaires (Y-OQ and Y-OQ-SR).

- Clients will gain self-confidence, increased ability to handle anger and manage difficult situations, and experience improved individual functioning.

designed to collect data regarding the effectiveness of youth therapies. The Y-OQ is a parent report measure of treatment progress for children and adolescents receiving mental health interventions. The Y-OQ–SR is an adolescent self-report measure appropriate for ages 11 – 18.

The Y-OQ and Y-OQ-SR measure six subscales:

- Interpersonal Distress - Anxiety, depression, fearfulness, etc.
- Somatic - Headache, stomach, bowel, dizziness, etc.
- Interpersonal Relationships - Attitude, communication and interaction with parents, adults, and peers.
- Critical Items - Paranoid ideation, suicide, hallucinatory, delusions, etc.
- Social Problems - Delinquent or aggressive behaviors, breaking social mores.
- Behavioral Dysfunction - Organize and complete tasks, handle frustration, impulsivity, inattention.

The subscale scores can be used to identify and target particularly problematic areas as a focus of treatment and help with treatment planning.

The Y-OQ and Y-OQ-SR scores indicate clinically significant improvement in all above areas of client and family functioning (See Y-OQ Questionnaire Scores Chart 2).

NOTE: Some families chose not to complete surveys. Completion of surveys is strongly encouraged but not mandatory.

-
- 85% of the clients that participated in the FFT
 - Of the youth that participated in the CYS FFT program, 85.5%

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH – OUTCOMES- Attachment A

PEI program will report functional improvement measured by the CANS (Child/Adolescent Needs and Strength scores).

reported increased functioning on the CANS Life Domain Assessment report that focuses on assessing the youth's social, emotional, family, home, school, recreational, and physical life functioning.

- 50% of the clients that complete the FFT PEI program will report a decrease in school problems between the start and end of the program.
- Only one client that participated in the FFT program dropped out of school after starting the FFT program. 53.25% of the parents and youth reported an increase in school participation, increased grades and decreased school disciplinary problems, while 18% reported no change in school performance and 28.75% reported a decrease in school performance, ranging from a slight decrease to more moderate problems. Those reporting on-going school problems were either referred to school for possible IEP or 504 testing or to other service providers to assess for higher level mental health issues or other providers for further testing (e.g. referred to CVRC or Primary doctor to rule out neurological or developmental issues and learning disabilities).
- 50% of the clients that complete the FFT PEI program will report a decrease in inpatient mental health crisis visits between start program and end of program.
- 82% of the families reported a decrease in inpatient mental health crisis visits between the start of FFT and the completion of FFT. FFT staff work with the entire family, school and support system to increase awareness, knowledge and understanding of impact of family relationships on mental health issues. FFT also provides the client and family with safety resources including lock boxes for medications and sharp objects as well as linkage to school and community resources.
- Clients will develop increased involvement in
- The Family Self Report (FSR) Questionnaire was given to the

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH – OUTCOMES- Attachment A

the therapeutic process and increased alliance with service provider.

clients and family members at the onset of treatment (Engagement/Motivation Phase), during the middle of treatment (Behavior Change Phase) and at graduation/termination (Generalization Phase). The FSR measures the level of confidence or hope that the family members have in the therapeutic process and the amount of trust that they have in the FFT therapist. Both confidence and trust increased as the therapeutic process progressed. As evidenced by the charts below, the FFT therapists were able to engage and motivate the clients and family members, build rapport, trust and gain their confidence. All family members reported an increased belief that the FFT therapist could assist the family in improving their relationship and to assist the family in reaching their goals. (See Family Members' Confidence in Therapy (Hope), Chart 3 and Family Members Trust in Therapist, Chart 4 below).

- Clients that have been incarcerated in the past year or are currently on probation will have a 50% reduction in the average number of days incarcerated.

- A total of 8 clients receiving FFT services were incarcerated before treatment. While participating in FFT services a total of 1 client was incarcerated and post treatment 1 client was incarcerated. This is a 75% decrease in the number of clients incarcerated after completion of FFT services. Prior to treatment, the clients spent a total of 142 days incarcerated. While participating in FFT services, one client spent a total of 6 days incarcerated and 30 days incarcerated post treatment. This is a 75% decrease in the number of days youth spent in detention. Clients are followed up for up to one year after completion of the FFT Program (See Incarceration Days Chart 5 below).

- 85% of the client participating in the FFT PEI
 - Based on the outcomes of the Y-OQ and Y-OQ-SR, 79% of the
-

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH – OUTCOMES- Attachment A

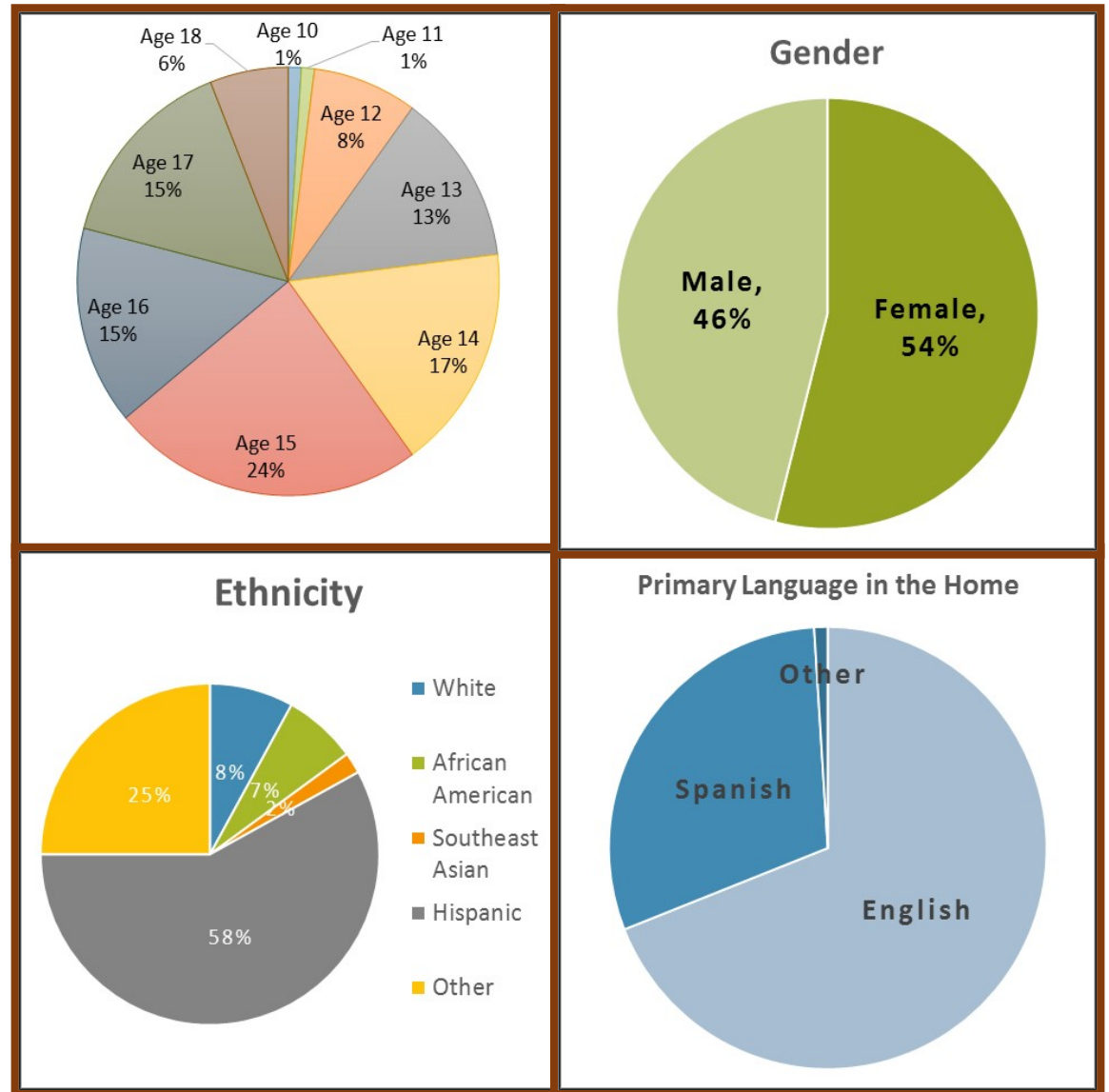
program that are diagnosed with mental health disorders, e.g., Conduct Disorder, Oppositional Defiant Disorder, Disruptive Disorder, etc., when they begin the FFT PEI program will report improvement after successfully completing the program.

clients and parents reported a clinically significant decrease in mental health symptoms. (See Chart 2 for Y-OQ and Y-OQ-SR scores).

DEPARTMENT RECOMMENDATION(S):

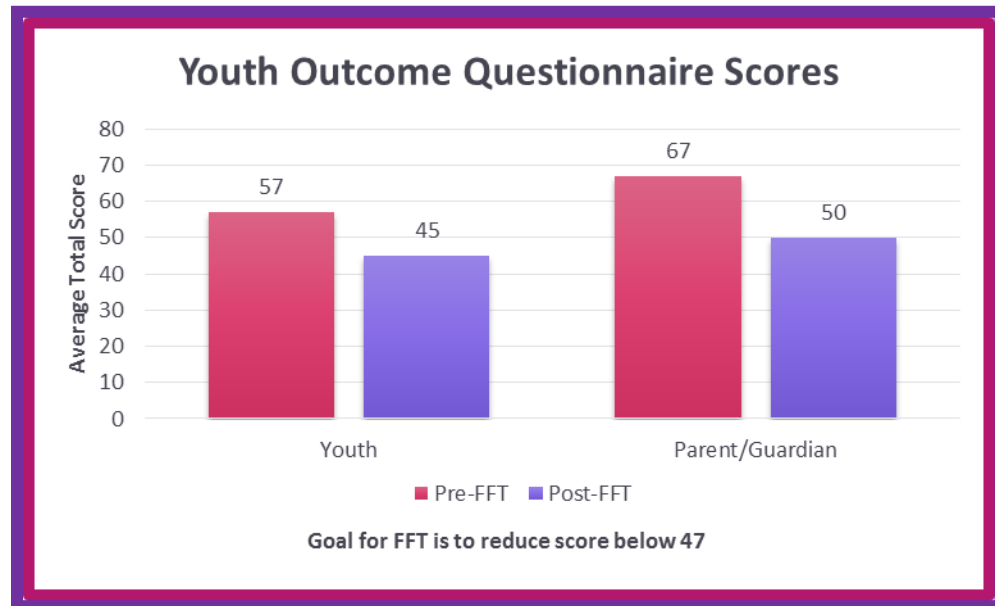
Demographics – Chart 1

Age	
10	< 1%
11	< 1%
12	8%
13	13%
14	17%
15	24%
16	15%
17	15%
18 (turned 18 while in the program)	6%
Gender	
Female	54%
Male	46%
Ethnicity	
White	8%
African American	7%
Southeast Asian	2%
Hispanic	58%
Other	25%
Primary Language in the Home	
English	69%
Spanish	30%
Other	1%
Families with Monolingual Spanish Speaking Parent/Guardian	52%



Y-OQ Scores – Chart 2

Youth Outcome Questionnaire	Pre-FFT	Post-FFT
Youth	57	45
Parent/Guardian	67	50

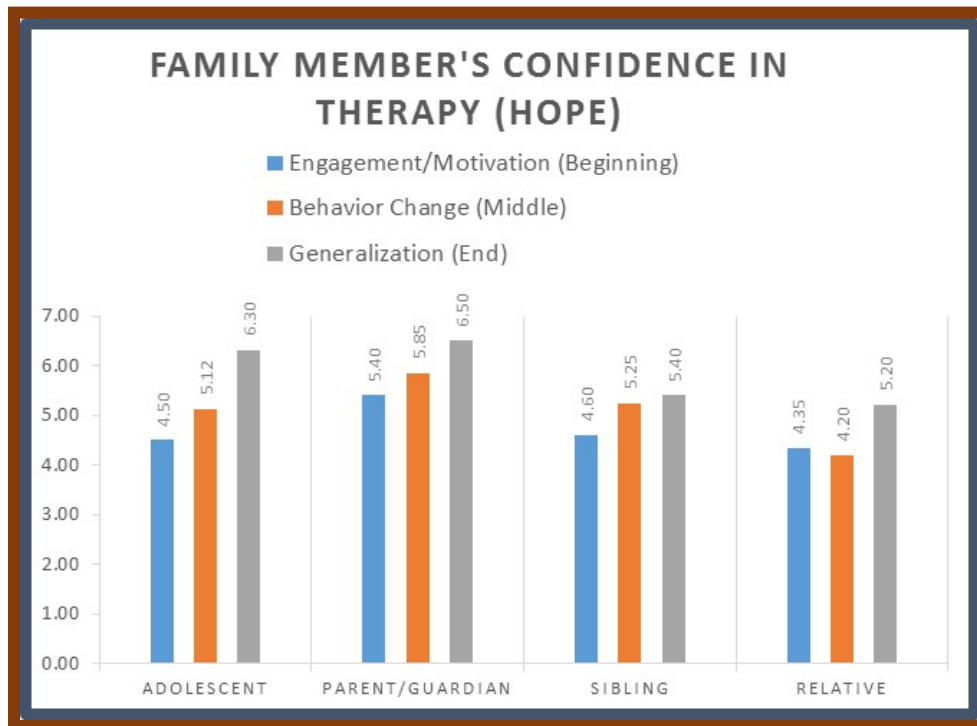


A total score of 47 or less indicates no significant clinical impairments. As demonstrated in the graph, parents and youth initially reported clinically significant impairments in the youth’s functioning. However, after treatment, the Y-OQ and Y-OQ-SR scores indicate no clinically significant impairment in the youths’ functioning and indicate an increased ability to manage behavior, decreased mental health concerns, and increased interpersonal and family relationships.

Total youth participating in FFT: 509. Total youth completed YOQ-SR: 305 = 60%
 Total parent/guardian participating in FFT: 441. Total completed YOQ: 275 = 62.5%

Family Members’ Confidence in Therapy (Hope) – Chart 3

Overall, how confident or hopeful are you that your family will get better?				
SCALE:				
1 (Not Confident)	2 (I’m Doubtful)	3 (I’m Unsure)	4 (I’m Hopeful)	5 (I’m Very Confident)
6	7			
	Adolescent	Parent/Guardian	Sibling	Relative
Percent of People Responded to Surveys	60%	62.5%	48%	41%
Engagement/Motivation Phase I (Pre Treatment)	4.50	5.40	4.60	4.35
Behavior Change Phase II (Middle Phase of Treatment)	5.12	5.85	5.25	4.20
Generalization Phase III (Graduation/Termination)	6.30	6.50	5.40	5.20



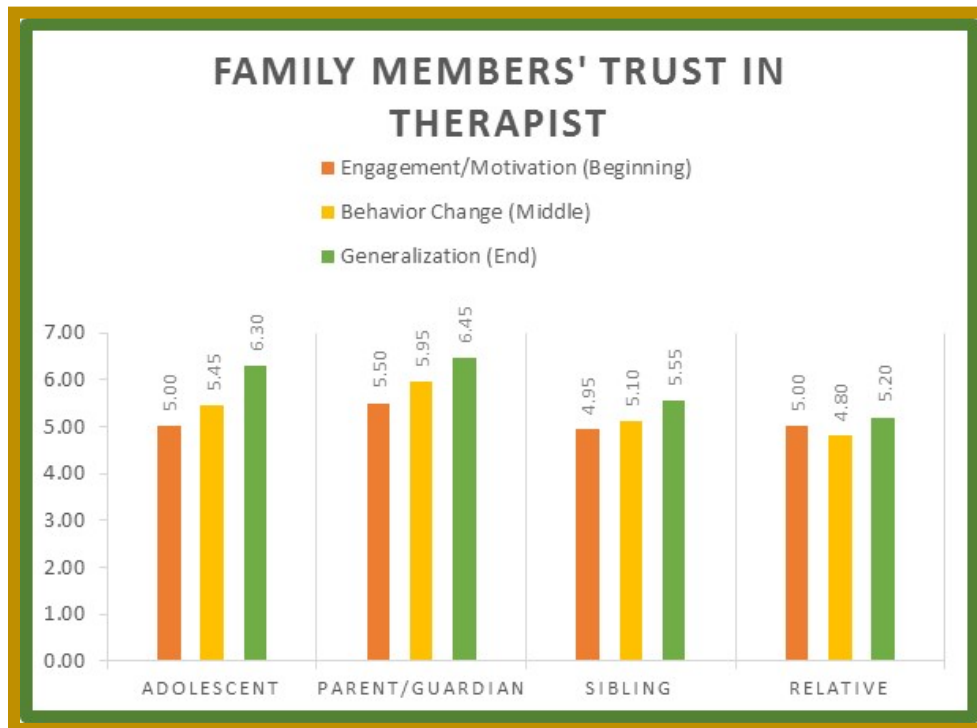
A total of 509 youth, 441 parents/guardians and 332 siblings and relatives participated in the FFT program. Of those who participated: 305 youth, 276 parents/guardians and 146 siblings and relatives completed the FSR surveys.

As shown on the graph, FFT staff are trained to encourage hope for change in youth and family members.

The clients’ and family members’ confidence and hope in the therapeutic process increased as the family moved through the treatment process.

Family Members’ Trust in Therapist – Chart 4

How much do you trust your therapist?								
SCALE:								
	1 (Not at All)	2 (Not Much)	3 (I Have Mixed Feelings)	4 (I Trust a Lot)	5 (I Have Total Trust)	6 (I Trust a Lot)	7 (I Have Total Trust)	
	Adolescent		Parent/Guardian		Sibling		Relative	
Percent of People Responded to Surveys	60%		62.5%		48%		41%	
Engagement/Motivation Phase I (Pre Treatment)	5.00		5.50		4.95		5.00	
Behavior Change Phase II (Middle Phase of Treatment)	5.45		5.95		5.10		4.80	
Generalization Phase III (Graduation/Termination)	6.30		6.45		5.55		5.20	



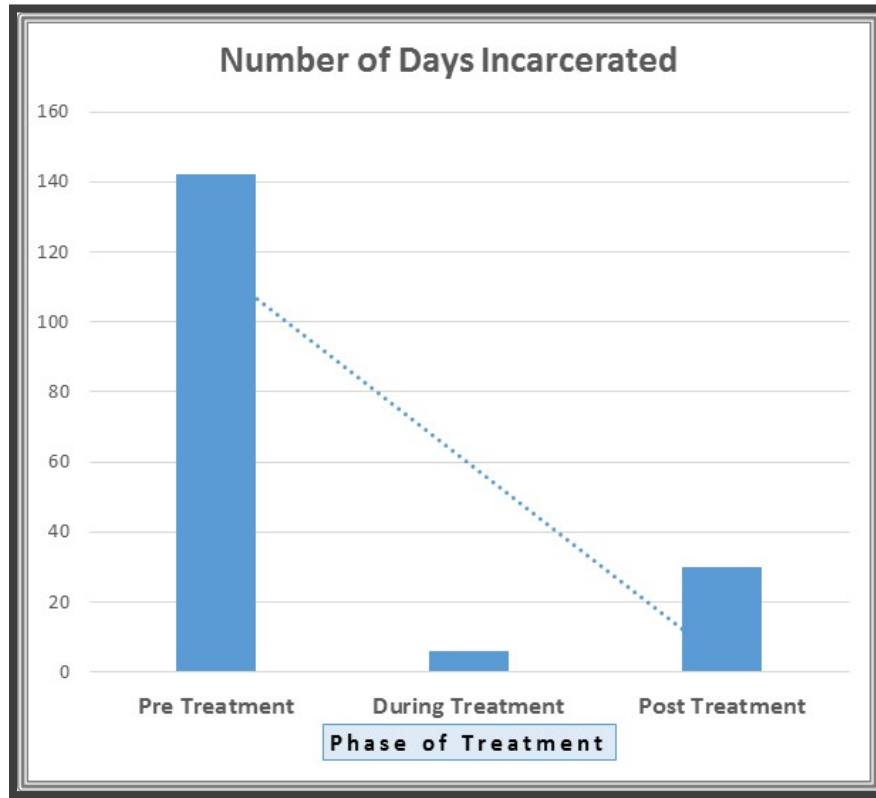
Based on the Family Self Report (FSR) Questionnaire, clients and family members have a high degree of trust in their FFT therapists. As noted in the table, the clients’ and family member’s trust in their therapist increases as service progress. Typically fathers and siblings/relatives do not have consistent participation in the services, which is reflected in their “Trust” scores. The youth and mother, who are the typical participants in FFT, had significantly increased trust with the increased contact. This table demonstrates the FFT therapists’ ability to build alliances with consumers and their families.

FRESNO COUNTY DEPARTMENT OF BEHAVIORAL HEALTH - OUTCOMES

Comprehensive Youth Services – Functional Family Therapy (FFT) Program

Incarceration Days – Chart 5

	Pre Treatment	During Treatment	Post Treatment	Number of Days/Clients Decreased Pre to Post
Number of Days Incarcerated	142	6	30	106
Number of Clients	8	1	1	6



Of the clients that have been incarcerated prior to participating in FFT treatment, 75% have not been reincarcerated and there has been a 75% reduction in the number of days of incarceration.