

File No. 140099

Committee Item No. 8

Board Item No. 18

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee: Budget and Finance Sub-Committee

Date: 3/12/2014

Board of Supervisors Meeting

Date: 3/18/14

Cmte Board

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| <input type="checkbox"/> | <input type="checkbox"/> | Department/Agency Cover Letter and/or Report |
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Completed by: Victor Young

Date: March 7, 2014

Completed by: L.W

Date: March 14, 2014

AMENDED IN COMMITTEE

3/12/14

FILE NO. 140099

RESOLUTION NO.

1 [Accept and Expend Grant - San Francisco Family Intervention, Reentry and Supportive
2 Transitions Program - \$749,967]

3 **Resolution retroactively authorizing the Department of Public Health to accept and**
4 **expend a grant in the amount of \$749,967 from U.S. Department of Justice, Office of**
5 **Juvenile Justice and Delinquency Prevention, and Second Chance Act Juvenile**
6 **Reentry Program, to participate in a program entitled, "San Francisco Family**
7 **Intervention, Reentry and Supportive Transitions Program," for the period of October 1,**
8 **2013, through September 30, 2014.**

9
10 WHEREAS, U.S. Department of Justice, Office of Juvenile Justice and Delinquency
11 Prevention, Second Chance Act Juvenile Reentry Program has agreed to fund Department of
12 Public Health (DPH) in the amount of \$749,967 for the period of October 1, 2013, through
13 September 30, 2014; and

14 WHEREAS, As a condition of receiving the grant funds, U.S. Department of Justice,
15 Office of Juvenile Justice and Delinquency Prevention, Second Chance Act Juvenile Reentry
16 Program requires the City to enter into an agreement (Agreement), a copy of which is on file
17 with the Clerk of the Board of Supervisors in File No. 140099; which is hereby declared to be
18 a part of this Resolution as if set forth fully herein; and

19 WHEREAS, The grant requires matching funds in the amount of \$324,896 from the
20 Department of Public Health General Fund, \$120,439 from Mental Health Services Act,
21 \$154,561 from Public Safety Realignment - Drug Court, \$100,000 from Department of
22 Children, Youth, and Families work order to Department of Public Health, and \$50,104 from
23 Department of Children, Youth, and Families General Fund; and

24 WHEREAS, The purpose of this project is to provide evidence-based, intensive family
25 therapy services for 100 youth and their families; and

1 WHEREAS, DPH will subcontract with UCSF Young Adult and Family Center and
2 Seneca Family of Agencies, in the total amount of \$554,865; for the period of October 1,
3 2013, through September 30, 2014; and

4 WHEREAS, An Annual Salary Ordinance amendment is not required as the grant
5 partially reimburses DPH for one existing position, one Health Program Coordinator III (Job
6 Class No. 2593) at .80 FTE for the period of October 1, 2013, through September 30, 2014;
7 and

8 WHEREAS, The budget includes a provision for indirect costs in the amount of
9 \$12,496; now, therefore, be it

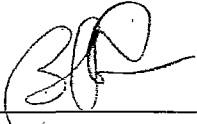
10 RESOLVED, That DPH is hereby authorized to retroactively accept and expend a grant
11 in the amount of \$749,967 from U.S. Department of Justice, Office of Juvenile Justice and
12 Delinquency Prevention, Second Chance Act Juvenile Reentry Program; and, be it

13 FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and
14 expend the grant funds pursuant to San Francisco Administrative Code section 10.170-1; and,
15 be it

16 FURTHER RESOLVED, That the Director of Health is authorized to enter into the
17 Agreement on behalf of the City.

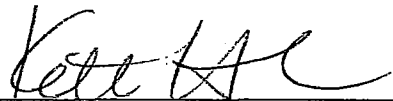
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RECOMMENDED:




Barbara A. Garcia, MPA
Director of Health

APPROVED:



Office of the Mayor



Office of the Controller

Item 8 File 14-0099	Department: Department of Public Health
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EXECUTIVE SUMMARY

Legislative Objective

- The proposed resolution would authorize the Department of Public Health (DPH) to (a) retroactively accept and expend U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, Second Chance Act Juvenile Reentry Program funds of \$749,967 to implement a new one-year pilot program called Family Intervention, Reentry and Supportive Transitions (FIRST) from October 1, 2013 through September 30, 2014, (b) retroactively enter into subcontract agreements in an amount totaling \$554,865 with the University of California-San Francisco (UCSF) Young Adult and Family Center and Seneca Family of Agencies, and (c) authorize the Director of Health to enter into a grant agreement with the U.S. DOJ on behalf of the City.

Key Points

- The Second Chance Act of 2007 requires the City to provide 1:1 matching funds as a condition of receiving the Second Chance Juvenile Reentry Program grant funds. Therefore, the proposed one-year FIRST pilot program would include \$749,967 from the subject U.S. DOJ grant and \$750,000 City matching funds, for a total one-year program cost of \$1,499,967.
- The proposed resolution would authorize DPH to retroactively accept and expend these grant funds and to enter into the subcontract agreements, due to delays in the award and approval of the grant funds. However, none of the grant funds have been expended, none of the subcontracts have been finalized, and the grant funds can be expended over a two-year period.

Fiscal Impact

- City matching funds of \$750,000 were appropriated in the FY 2013-14 budget, including \$324,896 from DPH, \$120,439 from State Mental Health Services Act funding, \$154,561 from the Superior Court Public Safety Realignment Drug Court funding, \$50,104 General Funds from the Department of Children, Youth, and Families (DCYF), and a \$100,000 work order from DCYF to DPH to support occupational therapy for juveniles.

Recommendation

- Approve the proposed resolution.

MANDATE STATEMENT

City Administrative Code Section 10.170-1 states that acceptance and expenditure of Federal, State, or other grant funds in the amount of \$100,000 or more is subject to the approval by resolution of the Board of Supervisors. If, as a condition of the grant, the City is required to provide any matching funds, those funds shall be included in determining whether the grant meets the \$100,000 threshold.

BACKGROUND

In 2009 and 2012, the City applied to the U.S. Department of Justice (U.S. DOJ), Office of Juvenile Justice and Delinquency Prevention, for Second Chance Act Juvenile Reentry Program funds for the Juvenile Collaborative Reentry Unit (JCRU) program to reduce recidivism rates for delinquent youths. The JCRU program is a collaboration between San Francisco's Superior Court's Office of Collaborative Justice, the Juvenile Probation Department, the Public Defender, and the Center on Juvenile and Criminal Justice, a nonprofit organization. Under the JCRU program, 100 delinquent youths receive reentry planning services which includes housing, vocational training, completion of education, and therapy or drug treatment services, with the goal of reducing recidivism rates.

On June 17, 2013, the Department of Public Health (DPH) applied to the U.S. DOJ, Office of Juvenile Justice and Delinquency Prevention, Second Chance Act Juvenile Reentry Program for a grant of \$749,967 to fund the Family Intervention, Reentry and Supportive Transitions (FIRST) program to enhance the existing JCRU program by providing additional family therapy services to youth in long-term detention. On September 30th, 2013, DPH was awarded a one-year grant of \$749,967 by the U.S. DOJ to fund FIRST. According to Dr. Emily Gerber, DPH Assistant Director, Child, Youth & Family System of Care, the FIRST program is designed to provide intensive rehabilitative therapy to approximately 100 delinquent youths and their families to further assist in reducing the juvenile recidivism rates for youths returning from long-term detainment (12-18 months).

DETAILS OF PROPOSED LEGISLATION

The proposed resolution would authorize DPH to (a) retroactively accept and expend U.S. DOJ, Office of Juvenile Justice and Delinquency Prevention, Second Chance Act Juvenile Reentry Program funds of \$749,967 to implement a new one-year pilot program called Family Intervention, Reentry and Supportive Transitions (FIRST) from October 1, 2013 through September 30, 2014, (b) retroactively enter into two subcontract agreements in an amount totaling \$554,865 with the University of California-San Francisco (UCSF) Young Adult and Family Center and Seneca Family of Agencies, and (c) authorize the Director of Health to enter into a grant agreement with the U.S. DOJ on behalf of the City.

According to Dr. Gerber, currently there are 101 San Francisco youths in long-term detainment, including in (a) 13 youths in Log Cabin Ranch in La Honda, CA, (b) 54 youths in other California

facilities, and (c) 34 youths in multiple out-of-state facilities. These out-of-state facilities are George Junior and Glen Mills in Pennsylvania, Lakeside Academy in Michigan, Clarinda Academy and Woodward Academy in Iowa, Mingus Mountain Academy in Arizona, and Normative in Wyoming. Under the proposed FIRST program, approximately 100 delinquent youths and their families would participate in this new three stage intensive therapy model during the one-year FIRST program, including:

(1) Commitment stage: FIRST initiates therapy with the delinquent youths and their families between 2-8 weeks before the youths are sent to their long-term detention;

(2) Engagement stage: during the first four months when the youths are in long-term detention, FIRST engages with the youths at least once a month and their families up to 2-3 times a week to provide counseling support and case management services; and

(3) Intensive Family Therapy stage: in the final 6-10 months of the FIRST program, FIRST provides intensive, home-based therapy sessions to youth and the families three times a week.

For youths already in long-term detention facilities, FIRST may only conduct the final two stages of treatment, depending on their release date.

The U.S. DOJ Second Chance Act of 2007 requires the City to provide 1:1 matching funds as a condition of receiving the U.S. DOJ Second Chance Juvenile Reentry Program grant funds. Therefore, the proposed one-year FIRST pilot program would include \$749,967 from the subject U.S. DOJ grant and \$750,000 City matching funds, for a total one-year program cost of \$1,499,967.

DPH is requesting retroactive approval to accept and expend the proposed grant funds and to enter into subcontract agreements with UCSF and Seneca Family of Agencies, a nonprofit organization, for the grant period of October 1, 2013 through September 30, 2014. According to Dr. Gerber, the requested retroactive approval is needed because the Federal government's shutdown in October of 2013 significantly delayed award and final U.S. DOJ approval of the subject grant funds. However, Dr. Gerber advises that to date, none of the grant funds have been expended, none of the subcontracts have been finalized, and the subject grant funds can be expended over a two-year period, or through September 30, 2015.

According to Dr. Gerber, DPH will enter into separate contracts with UCSF and Seneca Family of Agencies to implement the FIRST program. Dr. Gerber advises that the contract with UCSF would be on a sole-source basis due to UCSF's extensive experience in providing family therapy services, UCSF's previous innovative work in developing family therapy models and UCSF's remote video conferencing and teletherapy facilities, which would be integral components in the proposed FIRST program. Under FIRST, DPH will contract with UCSF for \$156,612 to provide (a) overall clinical leadership, training and supervision of clinical teams, (b) remote video conferencing and teletherapy facilities, and (c) research expertise and support for the evaluation of FIRST.

Dr. Gerber advises that Seneca Family of Agencies, a nonprofit organization, was previously selected by the Juvenile Probation Department to provide mental health services for youth under contract, based on a competitive Request for Proposal (RFP) process. Dr. Gerber advises that the existing Juvenile Probation Department contract with Seneca Family of Agencies would be increased by \$398,253 to provide three clinicians and offer direct services to approximately 50 participating youth and families under the FIRST program.

Under the FIRST program, one new DPH temporary Project Director position would be hired to coordinate cross agency teams for oversight, operations, travel, training, reimbursements, information gathering, and evaluation critical to the development of the FIRST program, with 0.8 FTE funded through the proposed grant and 0.2 FTE funded with DPH matching funds. In addition, DPH's Family Mosaic Team would use three existing DPH clinicians to provide direct services to approximately 50 youths and their families. The temporary Project Director position will be terminated upon conclusion of the grant.

As part of the proposed FIRST one-year pilot program, the results will be analyzed for the program's effectiveness on reducing recidivism rates with youths returning from long-term detention or placement. The Department of Children, Youth, and Families (DCYF) currently has a contract with Mission Analytics for \$364,000 to evaluate San Francisco's juvenile justice programs based on the results of a competitive RFP process. As part of their existing contract, the DCYF assigned Mission Analytics to provide \$50,104 of services to evaluate the FIRST program.

FISCAL IMPACT

The U.S. DOJ Second Chance Act requires 1:1 matching funds for the proposed grant of \$749,967, such that DPH is proposing City matching funds of \$750,000 for a total one-year pilot FIRST program budget of \$1,499,967, as summarized in the Table below. All of the City's \$750,000 matching funds were previously appropriated by the Board of Supervisors in the FY 2013-14 budgets of DPH, the Superior Court, and DCYF.

Table: DPH Grant Budget for FIRST Program October 1, 2013 through September 30, 2014

Sources of Funds	Federal Grant	Local Match	One-Year Budget
Federal Funds			
Department of Justice, Office of Juvenile Justice & Delinquency Prevention	\$749,967	\$0	\$749,967
Federal Funds Subtotals	\$749,967	\$0	\$749,967
City Matching Funds			
Department of Public Health (in-kind)	\$0	\$324,896	\$324,896
Mental Health Services Act ¹	0	120,439	120,439
Public Safety Realignment - Drug Court ²	0	154,561	154,561
DCYF work order (in-kind) ³	0	100,000	100,000
DCYF General Fund ⁴	0	50,104	50,104
City Matching Funds Subtotal	\$0	\$750,000	\$750,000
Total Sources	\$749,967	\$750,000	\$1,499,967
Uses of Funds			
Personnel	\$113,600	\$324,896	\$438,496
Travel	67,806	0	67,806
Supplies	1,200	0	1,200
Indirect Costs	12,496	0	12,496
FIRST Program Expenditures	\$195,102	\$324,896	\$519,998
Contract Expenditures			
UCSF Young Adult & Family Center	\$156,612	\$0	\$156,612
Seneca Family of Agencies	398,253	0	398,253
SF Achievement Collaborative Court ⁵	0	275,000	275,000
Occupational Therapy Training Program through DCYF	0	100,000	100,000
Mission Analytics through DCYF	0	50,104	50,104
Contract Expenditures Subtotal	\$554,865	\$425,104	\$979,969
Total Uses	\$749,967	\$750,000	\$1,499,967

¹ The Mental Health Services Act, which was approved by California voters in November 2004 (Proposition 63), imposes a 1% tax on incomes over \$1 million per year, with such tax revenues dedicated to expanding access to public mental health programs in California. Based on a formula, San Francisco receives approximately \$30 million annually of Mental Health Services Act funding from the State Department of Health Care Services. The Mental Health Services Act previously funded the Youth Justice Institute, a nonprofit organization, which provided case management services to youths in the juvenile justice system. When the Youth Justice Institute closed in 2013, \$120,489 was transferred to DPH to provide mental health related services to youths in the juvenile justice system.

² Under the State's Public Safety Realignment-Drug Court program the Superior Court receives approximately \$300,000 annually in Comprehensive Drug Court Initiative Funding to provide alternatives to incarceration, such as substance abuse treatment. In FY 2013-14, the Superior Court transferred \$154,561 of such funds to DPH for intensive outpatient treatment for delinquent youth.

³ In FY 2013-14, the Department of Children, Youth, and Families (DCYF) contracted with the Occupational Therapy Training Program, a nonprofit organization, that provides therapeutic treatment to youths in the juvenile justice system, based on a RFP process, of which \$100,000 is proposed as existing matching funds.

⁴ In FY 2013-14, based on a RFP process, DCYF contracted with Mission Analytics to provide \$349,360 of evaluation services with General Fund revenues, including \$50,104 to evaluate the FIRST program.

⁵ SF-Achievement Collaborative Court (SF-ACT) is a program through the Superior Court's Juvenile Drug Court which provides services for intensive outpatient treatment therapy. In FY 2013-14, SF-ACT contracted with Richmond Area Multi-Services (RAMS), a nonprofit organization, to provide intensive outpatient treatment to juveniles, based on a RFP process, including \$275,000 funded with Mental Health Services Act and Public Safety Realignment Funds for continued treatment services through FIRST.

As shown in the Table above, the Federal FIRST grant will fully fund all travel (\$67,806), supplies (\$1,200), indirect costs (\$12,496), and the costs for the two contractors (\$554,865). In addition, under the proposed FIRST program, the Federal grant will fund 0.8 FTE salary and fringe benefit costs for the FIRST Project Director (\$113,600), for a total Federal grant of \$749,967. Because of the frequency of meetings, and the location of many of the incarcerated youth, Dr. Gerber notes that travel costs are a significant portion of the grant.

DPH's FY 2013-14 budget will fund \$324,896 in local matching funds which includes the salary and fringe benefit costs for three existing DPH clinicians and the remaining 0.2 FTE for the new temporary Project Director. City matching funds also include the existing \$275,000 contract to provide outpatient treatment to juveniles through the SF Achievement Collaborative Court program in the Superior Court, DCYF's existing \$100,000 Occupational Therapy Training Program and DCYF's \$50,104 contract with Mission Analytics for an independent evaluation, as displayed in the Table. In total, the City will contribute \$750,000 in matching funds to FIRST.

According to Dr. Gerber, when the Federal grant ends, based on the results of the evaluation, DPH's existing clinical teams hope to retain the FIRST program's intensive therapy model, while eliminating the more expensive travel costs by transitioning to more remote video conferencing and teletherapy sessions. In addition, Dr. Gerber advises that Seneca's therapy services that would be funded under the existing grant could potentially be continued by recovering Medical funds for these juvenile patient mental health services.

RECOMMENDATION

Approve the proposed resolution.



Edwin M. Lee
Mayor

Barbara A. Garcia, MPA
Director of Health

TO: Angela Calvillo, Clerk of the Board of Supervisors

FROM: Barbara A. Garcia, MPA
Director of Health

DATE: January 24, 2014

SUBJECT: Grant Accept and Expend

GRANT TITLE: San Francisco Family Intervention, Reentry and Supportive Transitions Program- \$749,967

Attached please find the original and 4 copies of each of the following:

- Proposed grant resolution, original signed by Department
- Grant information form, including disability checklist -
- Budget and Budget Justification
- Grant application
- Agreement / Award Letter
- Other (Explain):

Special Timeline Requirements:

Departmental representative to receive a copy of the adopted resolution:

Name: Richelle-Lynn Mojica

Phone: 255-3555

Interoffice Mail Address: Dept. of Public Health, Grants Administration for
Community Programs, 1380 Howard St.

Certified copy required Yes

No

****Disability Access Checklist***(Department must forward a copy of all completed Grant Information Forms to the Mayor's Office of Disability)**

13. This Grant is intended for activities at (check all that apply):

- | | | |
|--|---|---|
| <input checked="" type="checkbox"/> Existing Site(s) | <input type="checkbox"/> Existing Structure(s) | <input checked="" type="checkbox"/> Existing Program(s) or Service(s) |
| <input type="checkbox"/> Rehabilitated Site(s) | <input type="checkbox"/> Rehabilitated Structure(s) | <input type="checkbox"/> New Program(s) or Service(s) |
| <input type="checkbox"/> New Site(s) | <input type="checkbox"/> New Structure(s) | |

14. The Departmental ADA Coordinator or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local disability rights laws and regulations and will allow the full inclusion of persons with disabilities. These requirements include, but are not limited to:

1. Having staff trained in how to provide reasonable modifications in policies, practices and procedures;
2. Having auxiliary aids and services available in a timely manner in order to ensure communication access;
3. Ensuring that any service areas and related facilities open to the public are architecturally accessible and have been inspected and approved by the DPW Access Compliance Officer or the Mayor's Office on Disability Compliance Officers.

If such access would be technically infeasible, this is described in the comments section below:

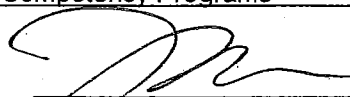
Comments:

Departmental ADA Coordinator or Mayor's Office of Disability Reviewer:

Ron Weigelt
(Name)

Director of Human Resources and Interim Director, EEO, and Cultural Competency Programs
(Title)

Date Reviewed: 1/24/14



(Signature Required)

Department Head or Designee Approval of Grant Information Form:

Barbara A. Garcia, MPA
(Name)

Director of Health
(Title)

Date Reviewed: 01/24/14


(Signature Required)

File Number: _____
(Provided by Clerk of Board of Supervisors)

Grant Resolution Information Form
(Effective July 2011)

Purpose: Accompanies proposed Board of Supervisors resolutions authorizing a Department to accept and expend grant funds.

The following describes the grant referred to in the accompanying resolution:

1. Grant Title: **San Francisco Family Intervention, Reentry and Supportive Transitions Program (FIRST)**

2. Department: **San Francisco Department of Public Health**

3. Contact Person: **Emily Gerber** Telephone: **(415) 255-3448**

4. Grant Approval Status (check one):

Approved by funding agency

Not yet approved

5. Amount of Grant Funding Approved or Applied for: **\$749,967**

6a. Matching Funds Required: \$ 750,000

b. Source(s) of matching funds (if applicable):

San Francisco Department of Public Health General Fund- \$324,896; Mental Health Services Act- \$120,439; Public Safety Realignment- Drug Court- \$154,561; Department of Children, Youth, and Families work order to San Francisco Department of Public Health- \$100,000; Department of Children, Youth, and Families General Fund- \$50,104

7a. Grant Source Agency: **U.S. Department of Justice, Office of Juvenile Justice Delinquency Prevention, Second Chance Act Juvenile Reentry Program**

b. Grant Pass-Through Agency (if applicable):

8. Proposed Grant Project Summary:

The requested Second Chance Act grant will support the FIRST program to provide evidence-based, intensive family therapy services for 100 youth and their families during its one to two-year pilot phase. If the FIRST program is successful in further reducing recidivism rates for this high-risk population, SFJPD will identify local and other sources of funding to sustain program operation over the longer term.

9. Grant Project Schedule, as allowed in approval documents, or as proposed:

Start-Date: **10/1/2013**

End-Date: **09/30/2014**

10a. Amount budgeted for contractual services: **\$554,865 (\$156,612 for UCSF Young Adult & Family Center; \$398,253 for Seneca Family of Agencies)**

b. Will contractual services be put out to bid? **No.** The \$156,612 contract with UCSF YAFC is For the development and adaptation of an Intensive Family Therapy Model for engagement and therapy using Brief Strategic Family Therapy and training clinical teams to deliver these ongoing services with diverse youth and families in residential and home-based settings; training teams to provide multifamily skill building groups in the community based on Dialectical behavior Therapy (DBT); and providing Reflecting Team Collaborative Consultation to clinical teams. Within San Francisco, YAFC is uniquely qualified to adapt BSFT for use in juvenile reentry with diverse youth and families. By leveraging local talents and expertise to build capacity within the Child, Youth and Family System of Care, we reduce the repeated training costs and sustainability issues that typically thwart the effectiveness of EBP implementation. For those reasons, a sole source contract with YAFC is justified.

The \$398,253 contract with Seneca is to fund a clinical team to provide pre- and post-release family intervention for youth placed in long-term detention facilities. Reentry planning, assessment, and treatment begin with the youth and family so that the family is prepared for his or her return. The team will be based within the well-established SF AIIM Higher Unit at the SF Juvenile Justice Center. AIIM is a successful collaboration among SFJPD, CYF and the Seneca Family of Agencies. In 2010, Seneca was awarded a contract to deliver SF AIIM Higher Services through a competitive RFP for California Mental Health Services Act Funding. This funding will expand services to meet needs of high risk juveniles and their families with substance use disorders.

c. If so, will contract services help to further the goals of the Department's Local Business Enterprise (LBE) requirements?

d. Is this likely to be a one-time or ongoing request for contracting out? **One-time for the grant period.**

11a. Does the budget include indirect costs? Yes No

b1. If yes, how much? **\$12,496**

b2. How was the amount calculated? **@11% of grant-funded project director salary (\$80,000) and benefits (\$33,600) to maximize funding for direct services**

c1. If no, why are indirect costs not included?

Not allowed by granting agency

To maximize use of grant funds on direct services

Other (please explain):

c2. If no indirect costs are included, what would have been the indirect costs?

12. Any other significant grant requirements or comments:

We respectfully request for approval to accept and expend these funds retroactive to November 1, 2013. We ran into some unforeseeable delays in award notification and in communication with the funder, U.S. Department of Justice, Office of Juvenile Justice Delinquency Prevention.

GRANT CODE (Please include Grant Code and Detail in FAMIS): HMCH05-14

SF FIRST

The Family Intervention, Reentry & Supportive Transitions (FIRST) Program
 Budget & Justification for **\$749,967** in Federal Funding Awarded

Category	Year 1	Total	Justification
Personnel/Fringe	\$113,600	\$113,600	Total Salaries= \$80,000 Project Director @ .80 FTE; Health Program Coordinator III (#2593) = \$80,000 with Federal Funds; <u>please note that an additional .20 FTE will be supported with Medi-Cal funds for a total 1.0 FTE.</u> Fringe @ 42%= \$33,600 Total Personnel + Fringe= \$113,600
Travel	\$67,806	\$67,806	Travel funds are to support youth & family intensive reengagement & placement transition intervention; to insure that families are ready to support youth as they reenter we will conduct pre-release reentry planning with youth and their families in face to face visits as well as with a HIPAA compliant teletherapy platform. Air travel (\$500 RT Air x 2 travelers) x 38 three-day placement visits= \$38,000 Hotel (\$105 x 2 nights x 2 travelers) x 38 visits= \$15,960 Travel to Log Cabin Ranch, La Honda, CA (90 mi x \$.565/mi x 12 clients) x 3 one-day visits= \$1,831 Travel to home-based visits (2400 mi x .565) x 3 staff= \$4,065 For annual grantee two-day meeting in Washington D.C.: Air travel to Washington, D.C. 800 RT Airfare x 3 travelers x 2 meetings= \$4,800 Hotel Washington, D.C. \$175 x 3 nights x 3 travelers x 2 meetings= \$3,150 All travel expenses by CYF SOC personnel for a total of \$67,806
Supplies	\$1,200	\$1,200	Supplies include materials that are necessary to facilitate communication and documentation that supports high quality service delivery. These include such items as binders, paper, pens, and other small items. These costs are budgeted at (\$100 per month x 12 months) = \$1,200
Indirect Costs	\$12,496	\$12,496	IDC @ 11% salaries (\$80,000) & benefits (\$33,600) = \$12,496
Contracts	\$554,865	\$554,865	Total Contracts = \$554,865; see justification detail below.
UCSF Young Adult & Family	\$156,612	\$156,612	A total of \$156,612 is requested in federal funding to contract with the UCSF Young Adult Family Center (YAFC), Intensive

Center, IFT adaptation, training, and evaluation			<p>Family Therapy (IFT) Program for training, supervision and coaching,</p> <p>By leveraging local talent and expertise to build capacity within the CYF SOC we reduce the repeated training costs and sustainability issues that typically thwart the effectiveness of EBP implementation. For this reason a contract with YAFC is justified.</p> <p>YAFC will be responsible for the development and adaptation of the Intensive Family Therapy (IFT) Model for engagement and therapy utilizing BSFT and training clinical teams to deliver these services with diverse youth and families in residential and home-based settings; training teams to provide multifamily skill building groups in the community based on Dialectical Behavior Therapy (DBT); and providing Reflecting Team Collaborative Consultation to clinical teams. Within San Francisco, YAFC is uniquely qualified to adapt BSFT for use in juvenile reentry with diverse youth and families.</p> <p>Personnel: .1 FTE Clinical Director= \$9, 483; 1.0 FTE Clinical Supervisor-Trainer= \$77,235; .025 FTE Research Director= \$4,093; total salaries = \$90,811; fringe @ 39% = \$35,416; IDC @ 11% salaries & wages = \$13,885.</p> <p>Supplies: Supplies include materials that are necessary to facilitate communication and documentation that supports high quality service delivery. These include such items as binders, paper, pens, and other small items. These costs are budgeted at (\$100 per month x 12 months) = \$1,200</p> <p>Other Costs: Costs include necessary and reasonable expenses to support engagement of staff with families and partners. A total of \$15,300 in other costs are budgeted for UCSF's team.</p> <p>Telephone: \$800 x 1.125 FTE= \$900</p> <p>Facilities: Expenses budgeted at Seneca's currently monthly rate of \$2.00 per square foot for 200 square feet for each month of the project period. \$2.00 x 200 sq. ft. x 12 months = \$4,800</p> <p>IFT Reflecting Teams: As experts in family systems and evidence-based family therapies, the IFT Reflecting Team will observe IFT sessions (160 hours x \$60/hour = \$9,600.</p>
Seneca Family of Agencies	\$398,253	\$398,253	<p>A total of \$398,253 is requested in federal funding to contract with Seneca Family of Agencies. As described in the program narrative, FIRST will be based within the already established SF AIIM Higher Unit at the SF Juvenile Justice Center. AIIM is a successful collaboration among SFJPD, CYF and the Seneca Family of Agencies. In 2010, Seneca was awarded a contract to deliver SF AIIM Higher Services through a competitive RFP for California Mental Health Services Act Funding. The funding to</p>

			<p>support a TRACK Recovery Coach (RC) will be added to the existing contract.</p> <p>Seneca will be contracted to provide a second clinical team (in addition to the FMP Team) that will be trained to implement the IFT model and offer direct services to 50 participating youth and families in placement and at home. Seneca's proposed budget leverages Seneca's significant existing infrastructure in San Francisco and throughout the Bay Area in order to maximize available funds and most effectively and efficiently serve participants. These funds will be used to expand existing services based on the demonstrated need for family-focused services to support juvenile reentry.</p> <p>Personnel: .1FTE Program Director=\$8,000; .4FTE Supervisor= \$30,000; 3.0FTE Clinicians=\$165,000; .4FTE Clerical Assistance=\$14,976; total staff salaries= \$217, 976; fringe @26%= \$56,674; IDC @11% salary & wages= \$30,211</p> <p>Travel: Two months prior to reentry, a clinician will accompany a family member to the placement for a three-day visit. For each visit (\$500 x 2 travelers x 38) = \$38,000</p> <p>For each visit the per diem (hotel and meals & incidental expenses) is estimated at \$405 (\$163 x 2 nights x 2 travelers x 38 = \$24,776). The per diem rate is based on an average of all current GSA rates for the CONUS.</p> <p>Twelve youth will be returning to their families and communities from the Log Cabin Ranch. For each youth, two-months prior to reentry, a clinician and family member will make day trips on three consecutive Sundays (family visiting day). For these 12 youth, a total of 36 trips (90 miles x \$0.565 x 36 = \$1,831). The \$0.565 per mile rate is based on current GSA privately owned vehicle mileage reimbursement rates.</p> <p>Once youth have returned to their communities, a Seneca clinician and a FIRST trainer/coach will make weekly home-based family therapy visits. Over the project period, based on experience and projected need we estimate that each clinician and trainer will travel approximately 2000 miles (2400 miles x \$.565 x 3 teams = \$4,065).</p> <p>Total travel expense for Seneca Family of Agencies = \$67,997.</p> <p>Supplies: Supplies include materials that are necessary to facilitate communication and documentation that supports high quality service delivery. These include such items as binders, paper, pens, and other small items. These costs are budgeted at (\$100 per month x 12 months) = \$1,200</p>
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			<p>Other Costs: Costs include necessary and reasonable expenses to support engagement of staff with families and partners.</p> <p>Telephone: $\\$800 \times 3.9 \text{ FTE} = \\3120</p> <p>Facilities: Expenses budgeted at Seneca's currently monthly rate of \$2.00 per square foot for 200 square feet for each month of the project period. $\\$2.00 \times 200 \text{ sq. ft.} \times 12 \text{ months} = \\$4,800$</p> <p>Contracted child psychiatrists to provide assessment and medication monitoring 2 hours a week ($2 \times \\$150/\text{hr} \times 52 \text{ weeks} = \\$15,600$).</p>
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FIRST Program Budget
San Francisco Department of Public Health

A. PERSONNEL						Local Match Breakdown	
Name/Position	Salary	FTE	Federal	Local	Total	cash	in kind
Kenneth Epstein, LCSW, Ph.D., Principal Investigator	\$144,000	0.10		\$14,400	\$14,400		\$14,400
Allison McGee, M.S., Co-Principal Investigator	\$130,000	0.10		\$13,000	\$13,000		\$13,000
Emily B. Gerber, Ph.D., CYF Probation Services	\$104,000	0.10		\$10,400	\$10,400		\$10,400
Deborah Sherwood, Ph.D., CYF Research, Evaluation & Quality Mgmt.	\$130,000	0.10		\$13,000	\$13,000		\$13,000
FIRST Project Director, TBD	\$100,000	1.00	\$80,000	\$20,000	\$100,000		\$20,000
Family Mosaic Program Director	\$100,000	0.20		\$20,000	\$20,000		\$20,000
Family Mosaic Medical Director	\$170,000	0.15		\$25,500	\$25,500		\$25,500
Family Mosaic Clinicians	\$75,000	1.50		\$112,500	\$112,500		\$112,500
Total Personnel		3.25	\$80,000	\$228,800	\$308,800	\$0	\$228,800
B. FRINGE BENEFITS							
Name/Position	Salary	Fringe	Federal	Local	Total	cash	in kind
Kenneth Epstein, LCSW, Ph.D., Principal Investigator	\$14,400	0.42		\$6,048	\$6,048		\$6,048
Allison McGee, M.S., Co-Principal Investigator	\$13,000	0.42		\$5,460	\$5,460		\$5,460
Emily B. Gerber, Ph.D., CYF Probation Services	\$10,400	0.42		\$4,368	\$4,368		\$4,368
Deborah Sherwood, Ph.D.,	\$13,000	0.42		\$5,460	\$5,460		\$5,460
FIRST Project Director, TBD	\$80,000	0.42	\$33,600	\$8,400	\$42,000		\$8,400
Family Mosaic Program Director	\$20,000	0.42		\$8,400	\$8,400		\$8,400
Family Mosaic Medical Director	\$25,500	0.42		\$10,710	\$10,710		\$10,710
Family Mosaic Clinicians	\$112,500	0.42		\$47,250	\$47,250		\$47,250
Total Fringe			\$33,600	\$96,096	\$129,696	\$0	\$96,096
Total Personnel & Fringe			\$113,600	\$324,896	\$438,496	\$0	\$324,896
C. TRAVEL							
Purpose of Travel			Federal	Local	Total	cash	in kind
Youth & Family Intensive Reengagement & Placement Transition Intervention							
Air travel w/n CONUS (\$500 RT Air x 2 travelers) x 38 three-day placement visits			\$38,000		\$38,000		
Hotel (\$105 x 2 nights x 2 travelers) x 38 visits			\$15,960		\$15,960		
Travel to Log Cabin Ranch, La Honda, CA (90 mi x \$.565/mi x 12 clients) x 3 one-day visits			\$1,831		\$1,831		
Travel to home-based visits (2400 mi x .565) x 3 staff			\$4,065		\$4,065		
Air travel to Washington, D.C. 800 RT Airfare x 3 travelers x 2 meetings			\$4,800		\$4,800		
Hotel Washington, D.C. \$175 x 3 nights x 3 travelers x 2 meetings			\$3,150		\$3,150		
Total Travel			\$67,806	\$0	\$67,806	\$0	\$0
D. SUPPLIES							
			Federal	Local	Total	cash	in kind
Total Supplies			\$1,200		\$1,200	\$0	\$0
E. INDIRECT COSTS							
			Federal	Local	Total	cash	in kind
Total Indirect Costs @ 11% Salary and Benefits			\$12,496		\$12,496		

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F. CONSULTANTS/CONTRACTS		Federal	Local	Total Cost	cash	in kind
Contracted Services:						
1. UCSF Young Adult & Family Center, IFT adaptation, training, & evaluation						
1a. Personnel: 1.125 FTE personnel		\$90,811		\$90,811		
1b. Benefits: Fringe benefits @ 39%		\$35,416		\$35,416		
1c. Supplies		\$1,200		\$1,200		
1d. Other Costs						
Telephone		\$900		\$900		
Facilities \$400 x 12 mos.		\$4,800		\$4,800		
Reflecting Team Community 160 hrs x \$60		\$9,600		\$9,600		
1e. Indirect Costs: @ 11% of salary & benefits		\$13,885		\$13,885		
Total UCSF Young Adult & Family Center		\$156,612		\$156,612		
2. Seneca Family of Agencies, Model Implementation						
2a. Personnel: 3.9 FTE personnel		\$217,976		\$217,976		
2b. Benefits: Fringe benefits @ 26%		\$56,674		\$56,674		
2c. Travel						
Out -of-state Air travel w/n CONUS (\$500 RT Air x 2 travelers) x 38 three-day visits		\$38,000		\$38,000		
Out of state travel per diem @ \$163 (\$105 hotel & M & IE \$58) x 2 travelers x 38 visits		\$24,776		\$24,776		
Travel to LCR (90 mi x .565 x 12) x 3 visits per family		\$1,831		\$1,831		
Travel to home-based visits (2400 mi x .565) x 3 staff		\$4,065		\$4,065		
2d. Supplies		\$1,200		\$1,200		
2e. Other Costs						
Telephone (\$800 per FTE)		\$3,120		\$3,120		
Facilities \$400 x 12 mos.		\$4,800		\$4,800		
Child Psychiatrist \$150/hr x 2hrs/wk x 52 wks		\$15,600		\$15,600		
2f. Indirect Costs: @ 11% of salary & benefits		\$30,211		\$30,211		
Total Seneca Family of Agencies		\$398,253		\$398,253		
3. SF-ACT Intensive Community-based Outpatient Treatment						
3.0 FTE personnel			\$275,000	\$275,000	\$275,000	
4. Youth Workforce Development						
Assessment and Referral Coordinator, 1.0 FTE			\$100,000	\$100,000	\$100,000	
5. Mission Analytics						
Independent Evaluation			\$50,104	\$50,104		\$50,104
Total Consultants/Contracts		\$554,865	\$425,104	\$979,969	\$375,000	\$50,104
TOTAL COSTS		\$749,967	\$750,000	\$1,499,967	\$375,000	\$375,000

A. STATEMENT OF THE PROBLEM

During the past 15 years, the City and County of San Francisco has established itself as a national leader in developing alternatives to secure detention for juvenile-justice involved youth, including establishing innovative reentry and aftercare programs. Consistent with a nationwide trend, San Francisco juvenile crime has declined dramatically over the past several years. Detentions have declined by 60%, and both referrals and petitions have declined by 46%. The number of youth ordered to the California Division of Juvenile Justice (formerly the California Youth Authority) has also decreased dramatically, with only four San Francisco youth committed there in 2012, a 79% decline compared to 2000.

San Francisco's continued success in reducing juvenile arrests and detentions comes despite the ongoing disparities in arrest and detention rates. The majority of juvenile justice-involved youth in San Francisco are African Americans and Latinos originating from specific, low-income communities with high levels of violence and gang activity. In 2012, African American and Latino youth comprised 49.17% and 25.46% of juvenile probation referrals, respectively, despite the fact that African American juveniles make up only 12% of San Francisco youth ages 10 to 17, and Latino juveniles make up only 23%.

These disparities are present when reviewing long-term commitments over the past two years. Since January 1, 2011, there have been 63 commitments to Log Cabin Ranch, a county-operated, staff-secure ranch facility for delinquent boys. Of that group, 79% were African American, or Latino.

In 2008, 108 of San Francisco's 205 out-of-home placements (53%) ended in placement failure, with African American and Latino youth comprising 72% and 21% of placement failures, respectively (SF Juvenile Probation Department). Thanks in part to the Juvenile

Collaborative Reentry Team (JCRT), established as a pilot program in 2009 with the support of a Second Chance Act grant, those numbers have improved significantly with 31% of the 137 out-of-home placements in 2011 ending in placement failure. The disproportionality continues, however, with African American and Latino youth making up 65% and 21% of those failures.

These patterns, while encouraging in their continued decline, also reflect the disproportionate concentration of crime and violence in San Francisco's most disadvantaged and underserved communities. Police and juvenile probation data corroborate that juvenile offenders originate from, and return following commitment to San Francisco's most disadvantaged communities. In 2012, youth living in the Bayview Hunter's Point, Tenderloin, South of Market, Mission, Western Addition, Potrero Hill, Ingleside, and Visitacion Valley neighborhoods accounted for 75% of San Francisco's unduplicated juvenile referrals. According to data from the Socioeconomic Mapping and Resource Topography (SMART) system, census tracts in these neighborhoods are among the most disadvantaged in the country. Bayview Hunter's Point has a mean Community Disadvantage Index (CDI) of 9 (more disadvantaged than 90% of census tracts in the country), and five of its twelve census tracts have CDIs of 10 (the most disadvantaged). These same neighborhoods have been mapped as gang turf, gang conflict, and shooting hot spot areas (clustered in and near gang turf) by the San Francisco Police Department.

To further improve outcomes for juvenile justice-involved youth, San Francisco in 2012 utilized Second Chance Act funding to transform the Juvenile Collaborative Reentry Team (JCRT) pilot into the expanded Juvenile Collaborative Reentry Unit (JCRU), an unprecedented partnership of key juvenile justice system stakeholders that includes integration of pragmatic, evidence-based reentry practices. A centralized collaborative unit for all reentry services, JCRU relies on team decision making practices while juvenile offenders are in custody and ensures

closely monitored planning through the reentry process. The model offers coordinated case management and brokered comprehensive services designed to reduce recidivism and maximize positive outcomes for all juveniles released in San Francisco. The goal of the program is to improve outcomes for justice-involved youth returning to San Francisco from out-of-state juvenile detention centers, as well as from Log Cabin Ranch, a county-operated, staff-secure ranch facility for delinquent boys located 45 miles south of San Francisco in La Honda, CA. The Log Cabin Ranch program is based on the nationally recognized Missouri Model and focuses on group interaction and process rather than time and compliance.

Enhanced services are provided to high-need juveniles by linking them to the JCRU as early as possible in their commitment. Once a youth is referred to the JCRU, the dedicated probation officers (POs), attorneys and social work staff connect with youth and their families, conduct the initial assessments, and track their progress while they are in the assigned placement. The team uses the required local six-month review hearings to re-evaluate each youth's progress and timing for release. At the six-month release marker (coinciding with the review hearing), the PO updates the risk-needs assessment and works with the team, the youth, and the family to prepare a preliminary release plan. The JCRU team meets regularly to consult and coordinate on the youth's progress, and at three months the team finalizes the plan and begins implementation.

Reentry plans include family history, housing, education, employment/vocational training, mental health, substance abuse, extracurricular/peer activities, mentoring, and any additional services a youth may require to succeed outside of placement. At the time the plan is finalized, about 90-days prior to release, the JCRU staff begins the intensive process of preparing the youth and family for reentry. Visits to out-of-state placements by JCRU staff are coordinated with the PO's regular visits to ensure coordination and consistency. The case management

coordinator updates team members on the preparations during the team's regularly scheduled meetings. At every turn, each reentering youth and their families are involved in making decisions that impact services, education, vocational opportunities, and other areas. To facilitate family support for juveniles in reentry, the JCRU involves the family in team meetings at the six month and three month prerelease points.

JCRU was formally established in January of this year, but data from the three-year program pilot indicates that the model has a significant impact on recidivism. The following table summarizes duplicated and unduplicated recidivism rates since the introduction of JCRT in 2009:

	2009		2010		2011		2012		Net Change	
	Dup	Undup	Dupl	Undup	Dup	Undup	Dup	Undup	Dup	Undup
Commitments	159	140	131	121	137	118	99	93	-22	-22
Subsequent Bookings	120	61	83	52	39	31	71	47	-81	-30
Recidivism Rate	75%	44%	63%	43%	28%	26%	72%	51%	-47%	-17%
Subsequent Probation Violations	35	25	17	14	6	4	3	3	-29	-21
Recidivism Rate	22%	18%	13%	12%	4%	3%	3%	3%	-18%	-14%
Subsequent Sustained Petitions	192	109	64	41	28	25	15	13	-164	-84
Recidivism Rate	121%	78%	49%	34%	20%	21%	15%	14%	100%	-57%
Subsequent Court Dispositions	174	79	107	62	38	28	20	18	-136	-51
Recidivism Rate	109%	56%	82%	51%	28%	24%	20%	19%	-82%	-33%

The table shows striking reductions in both duplicated and unduplicated counts of recidivism at various points of entry into the system. Perhaps most interesting are the dramatic reductions in the duplicated counts that represent youth who reoffend multiple times in the given period. The reductions shown above imply that at the end of the period, the most chronic re-offenders virtually stopped committing new offenses. While the JCRT pilot and expanded JCRU have achieved significant reductions in recidivism for youth reentering the community from

residential commitment, overall outcomes have been less than satisfactory due to the fact that many young people are returning to live in chaotic, traumatized families, many of whom have longstanding system involvement and/or reside within San Francisco's most disadvantaged communities. As a result, the San Francisco Juvenile Probation Department's (SFJPD) most recent report (January 2013) on the City's juvenile reentry program highlighted the need for intensive family therapy services to engage and support multi-problem families to develop the skills and confidence they need to exercise effective supervision and guidance of their children returning from residential commitment. The report found that in many cases, young people have undergone phenomenal changes and growth while in residential placement, only to return to a family that has not changed, so that negative triggers that remain in place may drive the young person to self-sabotage and reoffend. In addition to the need for intensive therapeutic family support, the report highlighted a high rate of marijuana and alcohol abuse among youth and family members as a serious challenge to the success of San Francisco's juvenile reentry program.

Beyond San Francisco's direct experience with juvenile reentry programming, the need for family-focused juvenile reentry services that offer treatment as well as surveillance and community restraint has also been identified by a growing number of states and juvenile justice researchers throughout the United States (Early, Chapman & Hand, 2013). While individually-focused supportive programs may arguably help youth offenders in many ways, they have yet to show a significant or consistent impact on reducing repeat contact with the criminal justice system (Abrams & Snyder, 2010). The rationale for including the family in reentry

programs is that researchers have repeatedly linked several family-related factors to delinquent behaviors, including: coercive parenting, strained parent-child relationships, inconsistent discipline, neglect, parental substance abuse, violence, sexual abuse, attachment disruption, and inadequate levels of warmth and affection (Underwood, von Dresner, & Phillips, 2006).

To increase the availability of effective family therapeutic supports for youth released from residential custody, SFJPD has asked the Child, Youth and Family System of Care (CYFSOC) in the Community Behavioral Health Services division of the San Francisco Department of Public Health to lead the start-up and implementation of evidence-based, intensive family therapy services for this high-risk population. Toward this end, CYFSOC has partnered with the Young Adult and Family Center at University of California, San Francisco, as well as Seneca Family of Agencies (a nonprofit, youth and family mental health services provider), to develop the Family Intervention, Reentry & Supportive Transitions (FIRST) program for the highest-need youth supervised by the JCRU. The Second Chance Act grant requested in this application will support the FIRST program to provide evidence-based, intensive family therapy services for 100 youth and their families during its one to two-year pilot phase. If the FIRST program is successful in further reducing recidivism rates for this high-risk population, SFJPD will identify local and other sources of funding to sustain program operation over the longer term.

B. GOALS, OBJECTIVES, AND PERFORMANCE MEASURES

The primary goal of the FIRST program is to further reduce recidivism among San Francisco youth who are re-entering their communities from out-of-home placements. San Francisco's robust system of care and targeted juvenile reentry initiatives have made significant strides in reducing recidivism, and we believe that current practice will be greatly enhanced by

coordinated, family-centered, evidenced-based models. We propose to serve 100 youth per year, the majority of whom will be African Americans and Latinos originating from specific, low-income communities with high levels of violence and gang activity. Within two months prior to release, FIRST program staff will begin a comprehensive assessment of the youth, informing an individualized, family-centered treatment plan. Data collection will include tracking of individual-level OJJDP-specified performance indicators, including youth demographics, educational history, vocational history, mental health history, and family history. In compliance with GPRA regulations, we will also provide data on a semi-annual basis to OJJDP on the following measures: number of youth served by the program and reporting period, number of youth served by an evidence-based model, number of discreet services provided to youth, number of youth adjudicated or who had technical violations, percentage of youth completing program requirements, and number of youth with desired change in the targeted behavior. Research staff from UCSF and San Francisco's Child, Youth, and Families System of Care will conduct a rigorous internal evaluation of the model and will coordinate the Institutional Review Board submission for the protection of human subjects. Additionally, an independent evaluation of the model will be conducted by Mission Analytics, a local evaluation firm with expertise in public health and human service organizations.

The three goals of the FIRST program are:

- 1) To further reduce recidivism for high-risk and high-need youth returning from out-of-home placement.
- 2) To address the disproportionate representation of African-American and Latino youth who recidivate back into the juvenile justice system.

- 3) To demonstrate and disseminate an inter-agency collaborative approach that improves the skills and confidence of multi-stressed families in preventing delinquent behavior of their children post-reentry.

Objectives:

- 1) 100 youth per year will be served by the FIRST program, based on assessment of need and referral of Probation Officer or Social Worker.
- 2) 100% of enrolled youth and their families will receive family-centered services beginning two months prior to release, and up to 9 months post-release
- 3) A rigorous process and impact evaluation will be conducted to demonstrate the effectiveness of the FIRST model.

Performance Measures:

As specified by OJJDP, the FIRST program will track the following performance measures:

<i>Process measures</i>	<i>Outcomes</i>
<ul style="list-style-type: none"> ➤ Number of released youth served by a reentry program ➤ Number of program youth served during the reporting period ➤ Percentage of youth served with whom an evidence-based best practice model was used ➤ The number of services provided to youth (e.g. substance use/counseling, mental health, and housing services) 	<ul style="list-style-type: none"> ➤ Number of youth who were adjudicated ➤ Number of program youth who had technical violations ➤ Percentage of youth completing program requirements (e.g. number of youth who complete all program requirements) ➤ Percentage of youth exhibiting desired change in the targeted behavior

These performance measures will be extracted from the Juvenile Probation IT department in coordination from the Public Defender's Office. Utilization and outcomes data for intensive

family therapy will be collected and analyzed in coordination with the FIRST program's internal evaluation team, led by UCSF researchers.

Outcomes:

The short-term outcomes we expect to see include an improvement in youth and family functioning, as captured by the Child and Adolescent Needs and Strengths (CANS) assessment tool, which was developed by John Lyons, PhD, and is administered at intake, at six month intervals, and at discharge. A Reliable Change Index is calculated to determine the statistically significant change in CANS items from intake to reassessment or discharge. The CANS has been adopted widely by many local and statewide jurisdictions, including the City and County of San Francisco. UCSF has also adapted additional tools to track family efficacy.

Parents/caregivers, and adolescents completed surveys at least three points: at intake, after twelve sessions, after twenty-four sessions, and/or at exit from the program. Families on the waitlist completed an initial survey to serve as a comparison group. The surveys included the following:

Family Efficacy Measures

- Collective Family Efficacy: perceived ability to meet family members' needs, exert influence, be involved with one another, and carry out specific courses of action. (*e.g. Resolve conflicts when family members feel they are not being treated fairly*)
- Parenting Efficacy: perceived ability to parent her/his adolescent child (*e.g. Express disagreement with your child without getting angry*).
- Co-parenting Efficacy: perceived ability to co-parent their adolescent child (*e.g. Deal with co-parenting problems together without blaming each other*).

- Adolescent Efficacy: perceived ability to relate to parents (e.g. Talk with your parents even when your relationship with them is tense).

Additional Measures

- Family Communication: (Barnes and Olson, 1985) Participants rate statements about their family's communication using a modified 5-point Likert scale (ranging from "strongly disagree" to "strongly agree" e.g. *Family members are satisfied with how they communicate with each other*).
- Family Satisfaction: (Olson and Wilson, 1986) Participants rate their level of satisfaction with their family in various situations using a modified 5-point Likert scale (ranging from "dissatisfied" to "extremely satisfied", e.g. *With how your family deals with conflicts?*).
- Kessler 6 inventory Screening Scale for Psychological Distress: (Kessler et al., 2002). Participants rate how they have been feeling during the past 28 days using a 5-point Likert scale (ranging from "none of the time" to "all of the time", e.g. *During the past 4 weeks, about how often did you feel hopeless?*).

We will collect satisfaction surveys from family members and any youth who is 18 or over. Finally, the reflecting teams and ongoing consultation from UCSF will provide fidelity checks to ensure the intensive family therapy models are implemented consistently and reliably.

C. PROJECT DESIGN AND IMPLEMENTATION

With the support of Second Chance Act grants in 2009 and 2012, San Francisco has made great strides in establishing a strong infrastructure of juvenile reentry and aftercare services for high-need and high-risk youth returning from residential commitment. The Juvenile Collaborative Reentry Team (JCRT) pilot, followed by its expansion into the Juvenile

Collaborative Reentry Unit (JCRU), have provided the opportunity for SF JPD to utilize emergent best practices to implement a streamlined and dynamic system of care for committed youth to achieve a successful return to their homes and communities. The result has been a dramatic drop in recidivism since the implementation of the JCRT/JCRU in 2009.

San Francisco's juvenile reentry services are implemented according to the Juvenile Justice Local Action Plan, which is developed annually by the San Francisco Juvenile Justice Coordinating Council (JJCC), a collaborative of 21 system stakeholders including the Public Defender, Juvenile Probation, the Superior Court, the District Attorney, the San Francisco Police Department, the San Francisco Unified School District, the Public Health Department, community-based organizations and other local stakeholders. The Local Action Plan, overseen by the JJCC, serves as San Francisco's strategic document for responding to, and reducing youth violence, including reentry services. To ensure seamless coordination with the reentry programming for adults, the JJCC works closely with the San Francisco Reentry Council, which serves as the coordinating body for reentry services for adult offenders.

San Francisco recognizes the value of collaboration and communication between juvenile justice system stakeholders and the community including community based organizations, and the need to maximize collaboration and minimize duplication across systems. As such, the Chief of the Juvenile Probation Department (SFJPD) meets regularly with a 25-member coalition of service providers, the Juvenile Justice Providers Association, to discuss systematic hurdles and to move toward appropriate and near-term solutions. In addition, SFJPD has established the Juvenile Advisory Committee (JAC), a group of formally system involved youth who provide the Department with a youth perspective in policy matters. The JAC also supports probationers

and their families as they navigate the complex and sometimes intimidating juvenile justice system.

SF JPD has fully implemented the YASI for probationers reentering the community from residential commitment. This comprehensive risk, need, and protective factor assessment instrument is designed for use in juvenile probation and other high-risk youth service settings. Critical to JCRU's focus on coordinated case management and team decision making, the YASI tool includes an in-depth assessment of the family environment. Questions address the family history, the adults living in the home, the opportunities for learning, parental caring and supervision, and how the family responds to conflict and applies consequences. Answers allow JCRU staff to begin the service planning process with the family immediately after assessment. Other important areas addressed by the YASI include legal history, school history and enrollment status, community and peer relationships, alcohol and drug involvement, physical and mental health history, skills, and employment relationships.

Through the operation and evaluation of its juvenile reentry program, San Francisco, like many other jurisdictions around the United States, has identified the need for intensive family therapy services to engage and support chaotic and traumatized families to develop the skills and confidence they need to exercise effective supervision and guidance over their children returning from residential commitment. In early-2013, SFJPD asked the Community Behavioral Health Services—Child, Youth and Family System of Care (CYF SOC), a division of the San Francisco Department of Public Health, to begin the planning and program development process to address this increasingly urgent need. Under the leadership of Dr. Kenneth Epstein and Dr. Emily Gerber, the CYF SOC began researching promising evidence-based practices and recruiting academic and service provider partners, toward the goal of implementing the most effective

family-focused treatment services for high-risk youth returning from residential placement. The result of these planning efforts was the conceptual development of the Family Intervention, Reentry & Supportive Transitions (FIRST) program, designed to address the treatment needs of high-risk youth supervised by the JCRU.

In addition to CYF SOC and SF JPD, FIRST program partners include (1) the Young Adult and Family Center (YAFC) at University of California, San Francisco (UCSF), which has developed and tested intensive family treatment models that integrate evidence-based practices such as Brief Strategic Family Therapy and Dialectical Behavior Therapy, along with (2) Seneca Family of Agencies, a statewide provider of evidence-based and promising practices for juvenile justice-involved youth and their families in multiple Bay Area counties. In its choice of these expert training/research and service provider partners for the FIRST program, CYF SOC has sought to incorporate the research of the National Implementation Research Network (<http://nirn.fpg.unc.edu/>), in order to ensure that the selected evidence-based practices are implemented with fidelity both during and sustained beyond the period of the requested Second Chance Act grant. The mission of the National Implementation Research Network (NIRN) is to contribute to the best practices and science of implementation, organization change, and system reinvention to improve outcomes across the spectrum of human services.

The primary roles of the FIRST program partners are as follows:

- Dr. Emily Gerber and the CYF SOC will assume administrative and contractual leadership of the project, including partnering with SF JPD to assess (using the Child and Adolescent Needs and Strengths (CANS) research-based tool) and identify reentering youth for enrollment in the project's evidence-based, intensive family treatment services.

- CYF SOC Family Mosaic Project supervisors (Program Director and Psychiatrist) and 3 clinicians will receive training and coaching on and provide the project's intensive family treatment services.
- SF JPD will enable all of its JCRU staff to receive training and coaching on the project's family treatment services, so that they can be effectively incorporated into the six to 12-month individualized reentry plan for each youth returning from residential commitment.
- The Young Adult and Family Center (YAFC) at UCSF will provide overall clinical leadership for the project, including training and coaching Seneca clinicians, JCRU and Family Mosaic Project staff in the delivery and case management of FIRST intensive family treatment services. UCSF will provide research expertise and support for the evaluation of the FIRST program, including expanding the empirical base for family-focused juvenile reentry/treatment services, toward the goal of replication.
- Seneca Family of Agencies will employ a team of direct practice staff (three master's level clinicians, a part-time supervisor, a part-time psychiatrist, and case assistant) responsible for providing, with sustained fidelity, the evidence-based family treatment services offered by the FIRST program. Seneca will also provide research expertise and support for the evaluation of the FIRST program.

Given the current scarcity of research on family-focused treatments for juvenile reentering from residential commitment, UCSF suggested to Dr. Gerber that the FIRST project implement and test the evidence-informed family treatment models created by the YAFC in 2006, particularly since they were developed for adolescents in disorganized, difficult-to-engage families. The YAFC's Intensive Family Therapy (IFT) model draws substantially upon the theory and methodology of Brief Strategic Family Therapy (BSFT), while the YAFC's Multi-Family

Group (MFG) model draws upon the theory and practices of Dialectical Behavioral Therapy (DBT). Following are detailed descriptions of the two models, which will be trained/coached by the YAFC Clinical Supervisor/Trainer and implemented by Family Mosaic and Seneca clinicians, with case management support provided by JCRU.

Intensive Family Therapy (IFT) Model

The IFT model is designed to help engage families experiencing chaos and conflict related to multiple problems including exposure to trauma, violence, substance abuse, loss and the impacts of poverty and inequity. Destructive and pervasive family' disruptions, chaos and conflict can have a devastating impact on children, youth, adults, families, and communities across generations (Cummings & Davies, 2010). The IFT practice model focuses on engagement and safety in order to help families recover and develop; the model is built on a family-centered approach, meaning that the family itself identifies and creates treatment goals that are culturally relevant, include family or community members the family identifies as meaningful, and prioritize the issues that the family chooses. The core of effective practice in diverse community-based settings requires accessible, affordable, and flexible services that incorporate empirically tested interventions and are grounded in a theoretical and developmental framework that are adapted to meet the needs of the community being served. IFT will adapt its model to ensure services are field and community-based, and to be flexible in working remotely, or working with subsystems of the family when youth are in placement.

The goals of IFT are to reduce and/or eliminate internalizing and externalizing youth behavior problems that are interfering with family, social and school functioning. This is accomplished by helping parents/caregivers and youth regain hope, increase family efficacy, promote positive and open communication, help parents and caregivers develop effective

parenting skills and to support children and adolescents in their successful growth into young adulthood. IFT emphasizes treating the whole family, and not just the “identified patient.” Families are typically seen at minimum of once or twice weekly, sometimes for extended meetings in a clinic, home or school setting.

IFT uses a time-limited approach (3-9 months) in order to build and sustain youth and family motivation and to aggressively target symptoms and family issues. IFT is a four-phase modular treatment model. Modular treatment models help provide guidance for clinicians and a context to assess progress in therapy while continuing to respect the diversity of the families seen, the problems they present, and their therapeutic needs. YAFC's modular framework, referred to as the Four Cs, is outlined below:

- Phase 1: Coming Together & Care Management – Defining the problem systemically, developing a co-constructed and culturally responsive treatment plan, and developing a more reflective stance of family members towards changing behavior. Ensuring that basic needs of family are being met sufficiently to support engagement in IFT.
- Phase 2: Containment & Change – Focusing on symptom reduction to reduce the incidence of dangerous and challenging internalized and externalized symptoms contributing to family and social disequilibrium. Support family in making structural changes in the family system.
- Phase 3: Consolidation – Reinforce changes the family has made; support generalization to other family challenges; Help to restore and/or develop positive family communication and structure.
- Phase 4: Closure & Collaboration: Support a structured and appropriate ending, using culturally informed and relevant rituals to support and sustain re-entry to family or

community life within the context of a natural and intentionally defined community support structure.

Multi-Family Group (MFG) Model

One predominant common attribute among adolescents entrenched in the juvenile justice system is their struggles with judgment, risk taking and emotional regulation. To address these issues FIRST will adapt the Dialectical Behavior Therapy for Adolescents, multifamily skills group (MFG) curriculum developed at UCSF, YAFC in order to help youth and their families learn how to tolerate distress, increase interpersonal effectiveness, regulate strong emotions and reduce impulsive risk taking behavior. MFG is a two-hour group where the first 50 minutes are comprised of mindfulness, administration and homework review. Following a ten minute break a new set of skills are taught. There are typically two or three group leaders for up to five families (typically 15 group members). Each group has a rotating entry point, so that each module is comprised of five sessions and new members may enter at each new module point. The first session of each module focuses on orienting families to treatment, introducing the biosocial theory, reviewing the rules and assumptions and introducing the mindfulness skills. All skills are taught within 20 weeks and families typically graduate after 30 weeks of treatment.

Reflecting Teams/Collaborative Consultation

A unique component of the Intensive Family Therapy program is the collaborative nature of the work that the therapist will be doing with the family. One way in which this is accomplished is through the use of an intensive consultation model and the use of a reflecting team of clinicians and outside witnesses who observe and/or consult with the practitioners and family about what they were curious about and found meaningful in the conversations they were having. The process of reflective consultation helps families and practitioners collaborate more effectively to

see themselves in a new way that can cause a shift in thinking and functioning together, and increase motivation needed for change within the family system.

The UCSF Young Adult and Family Center will adapt its evidence-informed and empirically-driven models to support the goals of the FIRST program by building a flexible, community-based intervention model. UCSF will provide the following contracted services:

1. Develop an adapted modular IFT model and train all FIRST clinicians and JCRU/Family Mosaic case managers in the IFT model (Clinical director, Supervisor/Trainer)
 - a. Adapt IFT model to client population and to community-based work in field
 - b. Didactic training in structural family therapy and IFT model
 - c. Clinical demonstration
 - d. Ongoing clinical consultation
2. Co-develop an evaluation tool that will be used to continuously improve the model and quantify outcomes. (Research Director)
 - a. Client satisfaction and program improvement
 - b. Measure and track outcomes
3. Develop a research protocol. (Research Director)
 - a. Obtain human subjects approval and develop research protocol for quantitative study on impact of FIRST program
4. 1.0 FTE Clinical Supervisor/Trainer(s) will be designated by UCSF for the FIRST program. The supervisor/trainer spend time in the field with the clinicians actively teaching the model and building clinician skills. The supervisor/trainer will provide ongoing coaching to field staff.
 - a. Lead weekly “huddles” or meetings to respond to immediate needs

- b. Lead supervision groups to review cases and fidelity to the model
 - c. Provide daily check-ins and on-call availability for as-needed consultation
 - d. Provide in the field coaching and modeling
 - e. Provide individual clinical supervision to clinicians as needed
5. In collaboration with FIRST Seneca clinicians and JCRU/Family Mosaic case managers, YAFC will develop a community based reflecting/training team. This team will include the clinical supervisor/trainer, one UCSF Psychiatry faculty member, one senior clinician from the community with cultural connection to the family being served, and one young adult who has successfully transitioned out of probation. (Clinical Director, Supervisor/Trainer)
- a. Adapt and develop flexible community-based model
 - b. Train FIRST clinicians and JCRU/Family Mosaic staff in reflecting team model
 - c. FIRST staff and clients will also have access to the reflecting team for modeling, observation, or to bring clients for participation
6. YAFC DBT staff will provide consultation and supervision of a multi-family skills-building/support group. (Supervisor/Trainer)
- a. Adapt DBT skills model to client population (focus on relevant emotional regulation, validation, mindfulness, target behavior skills)
 - b. Provide didactic training
 - c. Provide modeling and co-facilitation as needed
 - d. Provide ongoing weekly supervision/consultation
 - e. Provide on-call availability for consultation as needed.

The YAFC utilizes a fully HIPAA compliant private social network (TIATROS), which allows for confidential case collaborations, as well as offers a platform for remote video conferencing and teletherapy. Using this technology we can create collaborative health care communities where providers can work together to manage and coordinate care, including video chats, the ability to post confidential notes or updates on the case, post common resources that would be useful in the case, etc – critical for cross-agency collaboration. By providing a confidential and monitored private setting, providers can also utilize the platform for live video family sessions where the youth may be in placement in a different state, or where another family member may be located remotely; or where providers may need to hold a conference from different locations. This platform has been approved for use by the University of California for clinical use and can store private health data. It has also been approved to store clinical research data, and is being used for that purpose by a number of groups at UCSF including the Pediatric Device Consortium, as well as by the Scripps Institute.

FIRST Family Treatment Implementation Approach

A critical strength of the proposed FIRST program will be its focus on engaging families in assessment and treatment at least two months before their sons and daughter return to the community, whether from San Francisco's Log Cabin Ranch or out-of-state juvenile detention centers. Engage, motivate, reengage. Engagement is the key and we have to stress that this has been a major barrier to success and often evidence based practices are not applied to this population because they do not qualify or are screened out due to complex problems, motivation, inability to engage or the lack of culturally sensitive engagement strategies. For youth placed in out-of-state facilities, the program will support long-distance travel of JCRU staff, FIRST clinicians and family/caregivers to the residential placements, along with using TIATROS video

sessions to facilitate additional "face-to-face" contact among each youth, his/her family members, JCRU case manager and FIRST clinician. These and other family/youth engagement activities will be tracked as part of the FIRST program evaluation. Some examples of engagement will involve developing a family team that discusses and plans for reentry. This may involve putting together photo and memory albums, developing letter writing, blogging or other communication plan, collecting stories of success and accomplishment and reinforcing the possibility of success, addressing family barriers that may have complicated reentry in the past. The youth will be working on a similar plan simultaneously. This is all to address the fact that the major cause of reentry failure is how family members do not feel prepared. The primary goal with engagement is to ensure all along family mentors, community members, peer parents, youth advocates, friends, clergy will be incorporated into the nothing but success plan. For youth and families that have limited family and community connections, FIRST staff will utilize existing JPD Family Finder staff person who currently conducts relative notification per AB938, to reach out to family members who may have been separated from the youth. This process of notification is an entry point for engagement to create a supportive network for justice-involved youth preparing for transition back into the community.

Once FIRST program-enrolled youth return to San Francisco, access to IFT sessions and Multi-Family Groups will be flexible, based upon CANS (Child and Adolescent Needs and Strengths) actionable items and initial/ongoing clinical assessment conducted by the Seneca therapist in collaboration with JCRU/Family Mosaic case managers. The CANS is an evidence-based assessment tool designed to guide service delivery decisions for children and adolescents with emotional and behavioral health needs, developmental disabilities, and juvenile justice involvement. San Francisco administers the CANS for all detained youth.

All families will be assessed using formal (e.g. CANS) and informal assessment tools to help develop an appropriate Family Plan. Some enrolled families may start in the group and begin IFT before or after their completion of group's therapy. Other families will benefit from IFT and then matriculate into the Multi-Family Group. The Multi-Family Group together with IFT provides a way to learn and practice content areas that contribute to prosocial and more regulated behavior, including making better choices and achieving more consistency at home. IFT provides an opportunity for families to address what YAFC clinicians refer to as SEARCH (Structure, Emotion, Accommodation, Reflection, Communication and History), as well as to address the impact of trauma, mental illness, substance abuse, unstable living environments, learning disabilities, family conflict and abuse on family functioning. The Multi-Family Groups will be facilitated using a skills-based curriculum designed to teach youth and families how to regulate their emotions, communicate more positively, make better choices, and be more mindful, as well as to build a supportive community among the families.

Ensuring the Implementation of IFT and MFG with Fidelity

Implementation science is the study of methods to promote the successful uptake of evidence based and validated interventions into routine practice and policies. Implementation science has demonstrated time and again that simply training staff in new practices, often referred to as the “train and hope” approach, rarely leads to meaningful impact and reliable benefits. Rather, as identified by the National Implementation Research Network, there are a range of ***competency, organization, and leadership drivers*** that enable and compel the consistent use and results of new practices. The FIRST program provides support to strengthen and address each of these drivers to support the full and successful implementation of the model with fidelity. *Competency drivers* in the designed program include training, structured individual and group

supervision, and ongoing in-field coaching. *Leadership drivers* include the activities of the reflecting teams and collaborative consultation process which insure that the model is flexible and responsive to the field and challenges that may arise, gathering feedback from participating families, clinicians, and the community. The ability of the multiple participating systems to respond to changes is enhanced by the embedding and strong investment of top leadership within the program. This also acts as an important *organization driver*, as does the thoughtful and intentional use of data that has been built in to the model. Data systems have been used both for identifying the most pressing needs to inform the program design as well as for providing ongoing progress monitoring.

Reflecting Teams/Collaborative Consultation: build a reflecting model that is flexible, in the field and involves the family, clinicians, and supportive individuals in the community.

Leveraged Resources and Plan for Sustainability

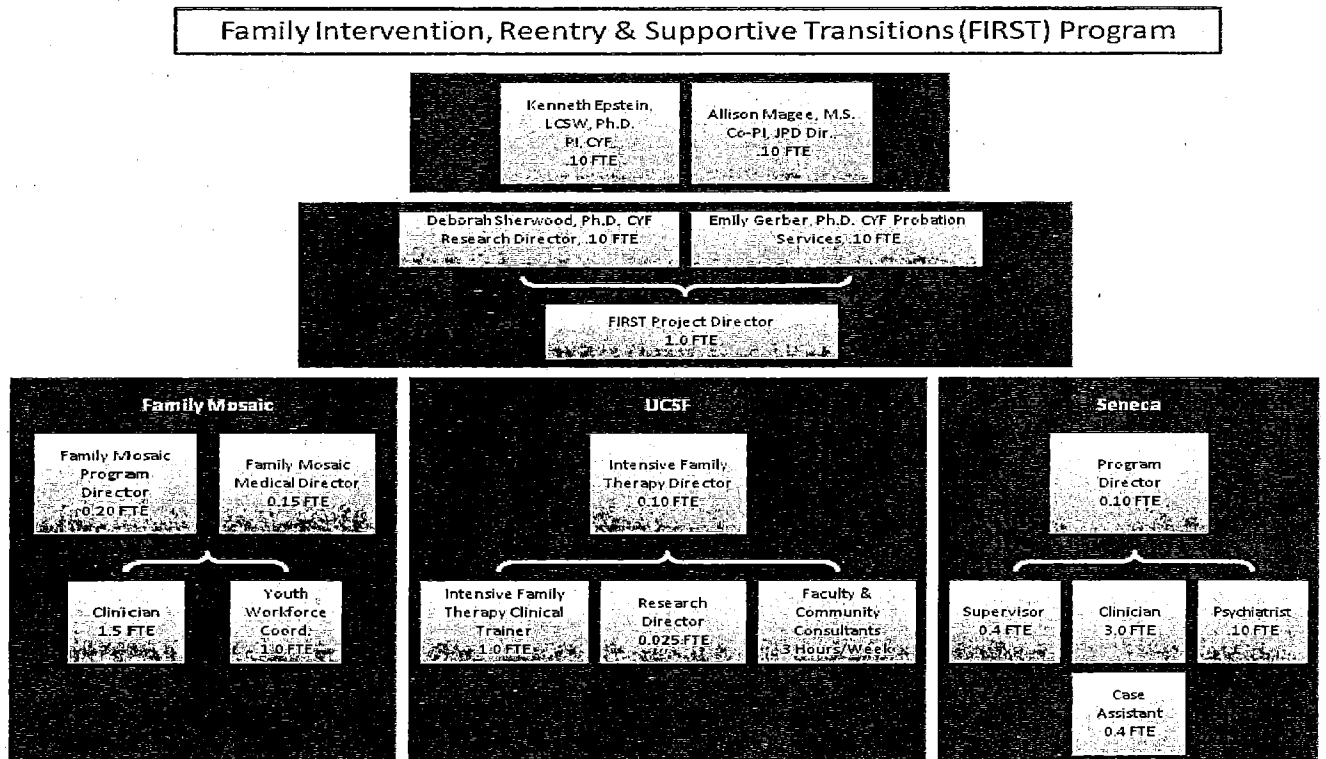
In order to maximize a significant investment of resources and to ensure that FIRST continues beyond the project period, we have embedded sustainability into the FIRST program design and implementation plan in several ways: 1) leveraging the well-established JCRU program as a foundation for family-focused reentry services, 2) partnering with local experts (UCSF YAFC) makes continued training and coaching feasible and affordable, 3) building capacity to deliver services by training existing JCRU and CYF supervisors and clinicians, and identifying blended cash match (local share of Medicaid, MHSA State Funding, and County General Fund to support and extend services, and 4) manualizing FIRST so that services are portable and replicable.

Plan for Project Dissemination and Replication

It will be the intent of SF FIRST to make contributions to the field, by researching and disseminating information on the efficacy of family-focused reentry work. Information about the impact of our project

will be disseminated through presentations at conferences and publication of the findings of our efficacy studies. We have already presented two concept papers about reflecting teams at the American Family Therapy Academy meetings in 2012 and 2013.. and anticipate presenting the results of our studies at other national meetings. Manuscripts detailing our findings will be targeted for publication in peer-reviewed journals in the fields of family therapy and clinical neuroscience such as *Human Systems* or *Family Process*, as well as traditional journals like the *New England Journal of Medicine*. We would also like to publish the results of our research in publications whose target audiences include lay people such as: local newspapers; national organization (i.e., NAMI) websites; and mainstream magazines.

D. CAPABILITIES AND CAPACITIES



Key Implementing Agencies

Community Behavioral Health Services—Child, Youth and Family System of Care (CYF SOC): CYF SOC provides culturally competent, family-centered, outcomes-based mental health services to San Francisco children, youth, and their families. This includes direct mental health services to approximately 4,900 children and youth, as well as prevention and early intervention services to an additional 5,000 children and youth in schools, child care sites, and homeless shelters each year. Services are delivered through a vast network of community mental health programs, clinics, agencies, private psychiatrists, psychologists, and therapists. Mental health services are available to San Francisco children and youth who receive Medi-Cal benefits and those with limited or no resources for their mental health needs. Community Behavioral Health Services—Child, Youth and Family System of Care is under the City and County of San Francisco Department of Public Health, Community Programs Division.

Dr. Emily Gerber oversees access to a continuum of community-based care for probation-involved youth. The continuum of services, which are portable and delivered at home, in school and in the community, includes integrated substance abuse and mental health outpatient services, the Intensive Community Supervision and Clinical Services program, Juvenile Wellness Court Case Management, Multisystemic Therapy, Wraparound, and Youth Workforce Assessment and Referral. CYF SOC services are accessed through AIIM (Assess, Identify Needs, Integrate Information, and Match to Services) Higher, a collaborative juvenile justice-behavioral health assessment and aftercare planning unit located at the SF Juvenile Justice Center. CYF SOC has extensive experience managing grants, contracts, federal awards, and local funding streams. Dr. Gerber and CYF SOC manage millions of dollars of subawards, and have partnered with UCSF, Probation, and Seneca on collaborative programs. CYF SOC is

under the City's Department of Public Health department and subject to oversight by the Mayor and City and County Administrator.

San Francisco Juvenile Probation Department (SFJPD): The mission of SFJPD is to: serve the needs of youth and families brought to its attention with care and compassion, identify and respond to the individual risks and needs presented by each youth; engage fiscally sound and culturally competent strategies that promote the best interests of the youth; provide victims with opportunities for restoration; identify and utilize the least restrictive interventions and placements that do not compromise public safety; hold youth accountable for their actions while providing them with opportunities and assisting them to develop new skills and competencies; and contribute to the overall quality of life for the citizens of San Francisco within the sound framework of public safety as outlined in the Welfare & Institutions Code. SFJPD supervises youth who are alleged and have been found to be beyond their parents' control, runaway, or truant, as well as those who have been found to have committed law violations. SFJPD operates Juvenile Hall, the short-term detention facility for youth in custody awaiting hearings or placement, as well as Log Cabin Ranch, the post adjudication facility for delinquent male juveniles. The agency's Private Placement Unit supervises youth removed from their homes by the Court and placed in foster homes, group homes and residential treatment programs primarily in California as well as Nevada, Colorado and Pennsylvania. SFJPD is involved in several ongoing systems change efforts that bear directly on the challenges and opportunities described in this proposal. It is one of five City agencies that serve on the Task Force on Residential Treatment for Youth in Foster Care.

Young Adult and Family Center, University of California, San Francisco: The Young Adult and Family Center (YAFC) is dedicated to innovation in the creation and delivery of clinical

services, clinical training, clinical research, health education, and outreach for the benefit of adolescents with mental illness, and their families. Dr. Kim Norman leads this effort, working with a multidisciplinary and interdepartmental collaboration of psychiatrists, psychologists, social workers, pediatricians, scientists, public health officials, and philanthropists to improve the mental health of adolescents in all communities in the San Francisco Bay Area and beyond. The YAFC is among the first academically-based psychiatry programs in the nation dedicated to advancing the understanding and care of an important subset of adolescents (transition-aged youth ages 16–24) with mental illness. Clinical care in the YAFC is provided primarily within the clinical services at Langley Porter Psychiatric Institute and includes:

- **Intensive Family Therapy Program:** provides intensive crisis intervention and stabilization to families. Designed to help those who are suicidal or engaged in self-injurious behavior, substance abuse, delinquency, or unsafe sexual activity to remain at home while receiving necessary treatment, the program treats the whole family.
- **Dialectical Behavior Therapy Program:** Combining group, individual, and family therapy, this is an evidence-based treatment program for adolescents at risk for suicide, self-injurious behaviors, eating disorders, substance abuse, and unsafe sexual activity. The offerings include a parent skills course and a multi-family therapy group.
- **Adolescent Assessment Clinic:** provides comprehensive multidisciplinary assessments for more than 80 adolescents each year.
- **Coping with Depression and Anxiety Program:** provides cognitive behavioral therapy services for adolescents and young adults with depression and/or anxiety disorders.

- **Eating Disorder Program:** a collaboration with UCSF Adolescent Medicine, and provides assessment and treatment to young people 10-24 with Anorexia, Bulimia, Eating Disorders NOS, and other eating-related disorders.

Seneca Family of Agencies: Seneca was founded in 1985 as a California nonprofit agency to provide unconditional care and treatment for youth and families struggling with the most challenging needs and circumstances. Since its inception, Seneca has dedicated itself to providing family-driven, culturally competent and strengths-based treatment for youth diagnosed with severe emotional disturbances. One of the primary strengths of this application is Seneca's strong history of successfully engaging and serving the juvenile justice population. The agency has significant experience serving juvenile justice involved youth and their families, including seven years providing Multisystemic Therapy (MST), as well as other manualized evidence-based treatments such as Functional Family Therapy. The agency has a strong collaborative partnership with SFJPD, providing trainings for its staff, Wraparound services for families with justice-involved youth, and comprehensive assessment and community linkages. **Project Staff**

Roles and Responsibilities

The FIRST program is collaboration between Child, Youth, and Family System of Care, Juvenile Probation Department, UCSF, and Seneca Family of Agencies. Each partner will have distinct roles working with youth and families, continuously from placement through reentry and termination of probation. Team members will include:

FIRST Project Director (1.0 FTE): The Program Director (PD) manages the grant-related daily activities and deliverables of the development, implementation and evaluation of all the components of this multi-site intensive family therapy program, ensure seamless coordination between JCRU reentry activities and FIRST, convene and participate in weekly planning and

operations meetings to review progress and address challenge, facilitate monthly cross-agency leadership and oversight meetings to support attainment of the project objectives.

Seneca & FMP Teams

Program Director (.10 FTE): Provide general oversight for FIRST team, supervise the FIRST supervisor, and participate in leadership and oversight meeting to support attainment of the project objectives.

Supervisor (.4 FTE): provide program supervision and case supervision to clinicians and direct services staff in the FIRST program. The Supervisor ensures that services are delivered with fidelity to comprehensively address the needs of participating youth and family.

Clinicians (3.0 FTE): provide direct services to youth and families which include: engaging youth referred through JCRU probation department in the process of transitioning from placement and their families, facilitating intensive family therapy and multifamily groups therapy, maintenance of case records and progress notes, ongoing training and consultation with UCSF Clinical Supervisor-Trainer.

Medical Director (.20 FTE) and Psychiatrist (.10 FTE): Complete initial and ongoing evaluations of clients to determine medication and treatment needs, prescribe and monitor medications, provide consultation and education to treatment staff regarding medication use as part of the treatment regimen.

Youth Workforce Coordinator (1.0 FTE): collaborate with JCRU to conduct occupational assessment and assist FIRST youth in identifying interests, strengths, and needed skills,

Case Assistant (.4 FTE): maintain client charts with a focus on the quality assurance of the program and to support the administrative functioning of the program.

UCSF Team

Intensive Family Therapy Director (.10 FTE): Provide general oversight of project, adapt models to client population and community-based work, supervise supervisor/trainer, develop didactic trainings, deliver didactic trainings (with supervisor/trainer)

Clinical Supervisor-Trainer (1.0 FTE): The Clinical Supervisor-Trainer will implement training and supervision/consultation, serve as liaison between field staff and IFT/clinical director, provide didactic trainings (with clinical director), provide ongoing supervision, weekly meetings, case reviews, etc., provide on-call support as needed and oversee faculty & community consultants.

Research Director (.025 FTE): Support co-development of evaluation tools, obtain CHR approval for any human subjects research, develop research study protocols, oversee ongoing research, train SF FIRST staff as needed in implementation of research protocols

Faculty and Community Consultants (3 hours/week): Faculty consultants to participate in and coach reflecting teams, faculty consultants to train and support community consultant reflecting team members, community consultants to participate in reflecting teams



Department of Justice
Office of Justice Programs

Office of the Assistant Attorney General

Washington, D.C. 20531

September 30, 2013

Dr. Marcellina Ogbu
San Francisco Department of Public Health
101 Grove Street, Room 323
San Francisco, CA 94102

Dear Dr. Ogbu:

On behalf of Attorney General Eric Holder, it is my pleasure to inform you that the Office of Justice Programs has approved your application for funding under the FY 13 Second Chance Act Juvenile Offender Reentry Program in the amount of \$749,967 for San Francisco Department of Public Health.

Enclosed you will find the Grant Award and Special Conditions documents. This award is subject to all administrative and financial requirements, including the timely submission of all financial and programmatic reports, resolution of all interim audit findings, and the maintenance of a minimum level of cash-on-hand. Should you not adhere to these requirements, you will be in violation of the terms of this agreement and the award will be subject to termination for cause or other administrative action as appropriate.

If you have questions regarding this award, please contact:

- Program Questions, Mark Morgan, Program Manager at (202) 353-9243; and
- Financial Questions, the Office of the Chief Financial Officer, Customer Service Center (CSC) at (800) 458-0786, or you may contact the CSC at ask.ocfo@usdoj.gov.

Congratulations, and we look forward to working with you.

Sincerely,

A handwritten signature in cursive script that reads "Karol V. Mason".

Karol Virginia Mason
Assistant Attorney General

Enclosures



Department of Justice
Office of Justice Programs
Office for Civil Rights

Washington, D.C. 20531

September 30, 2013

Dr. Marcellina Ogbu
San Francisco Department of Public Health
101 Grove Street, Room 323
San Francisco, CA 94102

Dear Dr. Ogbu:

Congratulations on your recent award. In establishing financial assistance programs, Congress linked the receipt of Federal funding to compliance with Federal civil rights laws. The Office for Civil Rights (OCR), Office of Justice Programs (OJP), U.S. Department of Justice is responsible for ensuring that recipients of financial aid from OJP, its component offices and bureaus, the Office on Violence Against Women (OVW), and the Office of Community Oriented Policing Services (COPS) comply with applicable Federal civil rights statutes and regulations. We at OCR are available to help you and your organization meet the civil rights requirements that come with Justice Department funding.

Ensuring Access to Federally Assisted Programs

As you know, Federal laws prohibit recipients of financial assistance from discriminating on the basis of race, color, national origin, religion, sex, or disability in funded programs or activities, not only in respect to employment practices but also in the delivery of services or benefits. Federal law also prohibits funded programs or activities from discriminating on the basis of age in the delivery of services or benefits.

Providing Services to Limited English Proficiency (LEP) Individuals

In accordance with Department of Justice Guidance pertaining to Title VI of the Civil Rights Act of 1964, 42 U.S.C. § 2000d, recipients of Federal financial assistance must take reasonable steps to provide meaningful access to their programs and activities for persons with limited English proficiency (LEP). For more information on the civil rights responsibilities that recipients have in providing language services to LEP individuals, please see the website at <http://www.lep.gov>.

Ensuring Equal Treatment for Faith-Based Organizations

The Department of Justice has published a regulation specifically pertaining to the funding of faith-based organizations. In general, the regulation, Participation in Justice Department Programs by Religious Organizations; Providing for Equal Treatment of all Justice Department Program Participants, and known as the Equal Treatment Regulation 28 C.F.R. part 38, requires State Administering Agencies to treat these organizations the same as any other applicant or recipient. The regulation prohibits State Administering Agencies from making award or grant administration decisions on the basis of an organization's religious character or affiliation, religious name, or the religious composition of its board of directors.

The regulation also prohibits faith-based organizations from using financial assistance from the Department of Justice to fund inherently religious activities. While faith-based organizations can engage in non-funded inherently religious activities, they must be held separately from the Department of Justice funded program, and customers or beneficiaries cannot be compelled to participate in them. The Equal Treatment Regulation also makes clear that organizations participating in programs funded by the Department of Justice are not permitted to discriminate in the provision of services on the basis of a beneficiary's religion. For more information on the regulation, please see OCR's website at <http://www.ojp.usdoj.gov/ocr/etfbo.htm>.

State Administering Agencies and faith-based organizations should also note that the Safe Streets Act, as amended; the Victims of Crime Act, as amended; and the Juvenile Justice and Delinquency Prevention Act, as amended, contain prohibitions against discrimination on the basis of religion in employment. Despite these nondiscrimination provisions, the Justice Department has concluded that the Religious Freedom Restoration Act (RFRA) is reasonably construed, on a case-by-case basis, to require that its funding agencies permit faith-based organizations applying for funding under the applicable program statutes both to receive DOJ funds and to continue considering religion when hiring staff, even if the statute that authorizes the funding program generally forbids considering of religion in employment decisions by grantees.

Questions about the regulation or the application of RFRA to the statutes that prohibit discrimination in employment may be directed to this Office.

Enforcing Civil Rights Laws

All recipients of Federal financial assistance, regardless of the particular funding source, the amount of the grant award, or the number of employees in the workforce, are subject to the prohibitions against unlawful discrimination. Accordingly, OCR investigates recipients that are the subject of discrimination complaints from both individuals and groups. In addition, based on regulatory criteria, OCR selects a number of recipients each year for compliance reviews, audits that require recipients to submit data showing that they are providing services equitably to all segments of their service population and that their employment practices meet equal employment opportunity standards.

Complying with the Safe Streets Act or Program Requirements

In addition to these general prohibitions, an organization which is a recipient of financial assistance subject to the nondiscrimination provisions of the Omnibus Crime Control and Safe Streets Act (Safe Streets Act) of 1968, 42 U.S.C. § 3789d(c), or other Federal grant program requirements, must meet two additional requirements: (1) complying with Federal regulations pertaining to the development of an Equal Employment Opportunity Plan (EEOP), 28 C.F.R. § 42.301-.308, and (2) submitting to OCR Findings of Discrimination (see 28 C.F.R. §§ 42.205(5) or 31.202(5)).

1) Meeting the EEOP Requirement

In accordance with Federal regulations, Assurance No. 6 in the Standard Assurances, COPS Assurance No. 8.B, or certain Federal grant program requirements, your organization must comply with the following EEOP reporting requirements:

If your organization has received an award for \$500,000 or more and has 50 or more employees (counting both full- and part-time employees but excluding political appointees), then it has to prepare an EEOP and submit it to OCR for review **within 60 days from the date of this letter**. For assistance in developing an EEOP, please consult OCR's website at <http://www.ojp.usdoj.gov/ocr/eeop.htm>. You may also request technical assistance from an EEOP specialist at OCR by dialing (202) 616-3208.

If your organization received an award between \$25,000 and \$500,000 and has 50 or more employees, your organization still has to prepare an EEOP, but it does not have to submit the EEOP to OCR for review. Instead, your organization has to maintain the EEOP on file and make it available for review on request. In addition, your organization has to complete Section B of the Certification Form and return it to OCR. The Certification Form can be found at <http://www.ojp.usdoj.gov/ocr/eeop.htm>.

If your organization received an award for less than \$25,000; or if your organization has less than 50 employees, regardless of the amount of the award; or if your organization is a medical institution, educational institution, nonprofit organization or Indian tribe, then your organization is exempt from the EEOP requirement. However, your organization must complete Section A of the Certification Form and return it to OCR. The Certification Form can be found at <http://www.ojp.usdoj.gov/ocr/eeop.htm>.

2) Submitting Findings of Discrimination

In the event a Federal or State court or Federal or State administrative agency makes an adverse finding of discrimination against your organization after a due process hearing, on the ground of race, color, religion, national origin, or sex, your organization must submit a copy of the finding to OCR for review.

Ensuring the Compliance of Subrecipients

If your organization makes subawards to other agencies, you are responsible for assuring that subrecipients also comply with all of the applicable Federal civil rights laws, including the requirements pertaining to developing and submitting an EEOP, reporting Findings of Discrimination, and providing language services to LEP persons. State agencies that make subawards must have in place standard grant assurances and review procedures to demonstrate that they are effectively monitoring the civil rights compliance of subrecipients.

If we can assist you in any way in fulfilling your civil rights responsibilities as a recipient of Federal funding, please call OCR at (202) 307-0690 or visit our website at <http://www.ojp.usdoj.gov/ocr/>.

Sincerely,



Michael L. Alston
Director

cc: Grant Manager
Financial Analyst



Department of Justice
Office of Justice Programs
**Office of Juvenile Justice and
Delinquency Prevention**

Grant

PAGE 1 OF 5

1. RECIPIENT NAME AND ADDRESS (Including Zip Code) San Francisco Department of Public Health 101 Grove Street, Room 323 San Francisco, CA 94102		4. AWARD NUMBER: 2013-CZ-BX-0004	
		5. PROJECT PERIOD: FROM 10/01/2013 TO 09/30/2014 BUDGET PERIOD: FROM 10/01/2013 TO 09/30/2014	
1A. GRANTEE IRS/VENDOR NO. 946000455		6. AWARD DATE 09/30/2013	7. ACTION Initial
		8. SUPPLEMENT NUMBER 00	
		9. PREVIOUS AWARD AMOUNT \$ 0	
3. PROJECT TITLE The Family Intervention, Reentry & Supportive Transitions (FIRST) Program		10. AMOUNT OF THIS AWARD \$ 749,967	
		11. TOTAL AWARD \$ 749,967	
12. SPECIAL CONDITIONS THE ABOVE GRANT PROJECT IS APPROVED SUBJECT TO SUCH CONDITIONS OR LIMITATIONS AS ARE SET FORTHON THE ATTACHED PAGE(S).			
13. STATUTORY AUTHORITY FOR GRANT This project is supported under FY13(OJDP Second Chance Reentry)42 U.S.C. 3797w; Pub. L. No. 110-199, Sec. 101			
15. METHOD OF PAYMENT GPRS			
AGENCY APPROVAL		GRANTEE ACCEPTANCE	
16. TYPED NAME AND TITLE OF APPROVING OFFICIAL Karol Virginia Mason Assistant Attorney General		18. TYPED NAME AND TITLE OF AUTHORIZED GRANTEE OFFICIAL Marcellina Ogbu Director, Community Programs	
17. SIGNATURE OF APPROVING OFFICIAL <i>Karol V. Mason</i>		19. SIGNATURE OF AUTHORIZED RECIPIENT OFFICIAL	19A. DATE
AGENCY USE ONLY			
20. ACCOUNTING CLASSIFICATION CODES FISCALYFUND C BUD.A OFC. DIV.RE SUB. POMS AMOUNT EAR ODE CT. G. X B CZ 70 00 00 .749967.		21. MCZGT0337	

OJP FORM 4000/2 (REV. 5-87) PREVIOUS EDITIONS ARE OBSOLETE.

OJP FORM 4000/2 (REV. 4-88)



Department of Justice
Office of Justice Programs
**Office of Juvenile Justice and
Delinquency Prevention**

**AWARD
CONTINUATIONSHEET
Grant**

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PROJECT NUMBER 2013-CZ-BX-0004

AWARD DATE 09/30/2013

SPECIAL CONDITIONS

1. The recipient agrees to comply with the financial and administrative requirements set forth in the current edition of the Office of Justice Programs (OJP) Financial Guide.
2. The recipient acknowledges that failure to submit an acceptable Equal Employment Opportunity Plan (if recipient is required to submit one pursuant to 28 C.F.R. Section 42.302), that is approved by the Office for Civil Rights, is a violation of its Certified Assurances and may result in suspension or termination of funding, until such time as the recipient is in compliance.
3. The recipient agrees to comply with the organizational audit requirements of OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations, and further understands and agrees that funds may be withheld, or other related requirements may be imposed, if outstanding audit issues (if any) from OMB Circular A-133 audits (and any other audits of OJP grant funds) are not satisfactorily and promptly addressed, as further described in the current edition of the OJP Financial Guide.
4. Recipient understands and agrees that it cannot use any federal funds, either directly or indirectly, in support of the enactment, repeal, modification or adoption of any law, regulation or policy, at any level of government, without the express prior written approval of OJP.
5. The recipient must promptly refer to the DOJ OIG any credible evidence that a principal, employee, agent, contractor, subgrantee, subcontractor, or other person has either 1) submitted a false claim for grant funds under the False Claims Act; or 2) committed a criminal or civil violation of laws pertaining to fraud, conflict of interest, bribery, gratuity, or similar misconduct involving grant funds. This condition also applies to any subrecipients. Potential fraud, waste, abuse, or misconduct should be reported to the OIG by -

mail:

Office of the Inspector General
U.S. Department of Justice
Investigations Division
950 Pennsylvania Avenue, N.W.
Room 4706
Washington, DC 20530

e-mail: oig.hotline@usdoj.gov

hotline: (contact information in English and Spanish): (800) 869-4499

or hotline fax: (202) 616-9881

Additional information is available from the DOJ OIG website at www.usdoj.gov/oig.

6. Recipient understands and agrees that it cannot use any federal funds, either directly or indirectly, in support of any contract or subaward to either the Association of Community Organizations for Reform Now (ACORN) or its subsidiaries, without the express prior written approval of OJP.
7. The recipient agrees to comply with any additional requirements that may be imposed during the grant performance period if the agency determines that the recipient is a high-risk grantee. Cf. 28 C.F.R. parts 66, 70.



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**AWARD
CONTINUATIONSHEET
Grant**

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PROJECT NUMBER 2013-CZ-BX-0004

AWARD DATE 09/30/2013

SPECIAL CONDITIONS

8. The recipient agrees to comply with applicable requirements regarding registration with the System for Award Management (SAM) (or with a successor government-wide system officially designated by OMB and OJP). The recipient also agrees to comply with applicable restrictions on subawards to first-tier subrecipients that do not acquire and provide a Data Universal Numbering System (DUNS) number. The details of recipient obligations are posted on the Office of Justice Programs web site at <http://www.ojp.gov/funding/sam.htm> (Award condition: Registration with the System for Award Management and Universal Identifier Requirements), and are incorporated by reference here. This special condition does not apply to an award to an individual who received the award as a natural person (i.e., unrelated to any business or non-profit organization that he or she may own or operate in his or her name).
9. Pursuant to Executive Order 13513, "Federal Leadership on Reducing Text Messaging While Driving," 74 Fed. Reg. 51225 (October 1, 2009), the Department encourages recipients and sub recipients to adopt and enforce policies banning employees from text messaging while driving any vehicle during the course of performing work funded by this grant, and to establish workplace safety policies and conduct education, awareness, and other outreach to decrease crashes caused by distracted drivers.
10. The recipient agrees to comply with all applicable laws, regulations, policies, and guidance (including specific cost limits, prior approval and reporting requirements, where applicable) governing the use of federal funds for expenses related to conferences, meetings, trainings, and other events, including the provision of food and/or beverages at such events, and costs of attendance at such events. Information on pertinent laws, regulations, policies, and guidance is available at www.ojp.gov/funding/confcost.htm.
11. The recipient understands and agrees that any training or training materials developed or delivered with funding provided under this award must adhere to the OJP Training Guiding Principles for Grantees and Subgrantees, available at <http://www.ojp.usdoj.gov/funding/ojptrainingguidingprinciples.htm>.
12. The recipient agrees that if it currently has an open award of federal funds or if it receives an award of federal funds other than this OJP award, and those award funds have been, are being, or are to be used, in whole or in part, for one or more of the identical cost items for which funds are being provided under this OJP award, the recipient will promptly notify, in writing, the grant manager for this OJP award, and, if so requested by OJP, seek a budget-modification or change-of-project-scope grant adjustment notice (GAN) to eliminate any inappropriate duplication of funding.
13. The recipient understands and agrees that award funds may not be used to discriminate against or denigrate the religious or moral beliefs of students who participate in programs for which financial assistance is provided from those funds, or of the parents or legal guardians of such students.
14. The recipient understands and agrees that - (a) No award funds may be used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of pornography, and (b) Nothing in subsection (a) limits the use of funds necessary for any Federal, State, tribal, or local law enforcement agency or any other entity carrying out criminal investigations, prosecution, or adjudication activities.
15. The recipient agrees that it will submit quarterly financial status reports to OJP on-line (at <https://grants.ojp.usdoj.gov>) using the SF 425 Federal Financial Report form (available for viewing at www.whitehouse.gov/omb/grants/standard_forms/ff_report.pdf), not later than 30 days after the end of each calendar quarter. The final report shall be submitted not later than 90 days following the end of the award period.
16. The recipient shall submit semiannual progress reports. Progress reports shall be submitted within 30 days after the end of the reporting periods, which are June 30 and December 31, for the life of the award. These reports will be submitted to the Office of Justice Programs, on-line through the Internet at <https://grants.ojp.usdoj.gov/>.



Department of Justice
Office of Justice Programs
**Office of Juvenile Justice and
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**AWARD
CONTINUATIONSHEET
Grant**

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PROJECT NUMBER 2013-CZ-BX-0004

AWARD DATE 09/30/2013

SPECIAL CONDITIONS

17. The recipient agrees to comply with applicable requirements to report first-tier subawards of \$25,000 or more and, in certain circumstances, to report the names and total compensation of the five most highly compensated executives of the recipient and first-tier subrecipients of award funds. Such data will be submitted to the FFATA Subaward Reporting System (FSRS). The details of recipient obligations, which derive from the Federal Funding Accountability and Transparency Act of 2006 (FFATA), are posted on the Office of Justice Programs web site at <http://www.ojp.gov/funding/ffata.htm> (Award condition: Reporting Subawards and Executive Compensation), and are incorporated by reference here. This condition, and its reporting requirement, does not apply to grant awards made to an individual who received the award as a natural person (i.e., unrelated to any business or non-profit organization that he or she may own or operate in his or her name).

18. With respect to this award, federal funds may not be used to pay cash compensation (salary plus bonuses) to any employee of the award recipient at a rate that exceeds 110% of the maximum annual salary payable to a member of the federal government's Senior Executive Service (SES) at an agency with a Certified SES Performance Appraisal System for that year. (An award recipient may compensate an employee at a higher rate, provided the amount in excess of this compensation limitation is paid with non-federal funds.)

This limitation on compensation rates allowable under this award may be waived on an individual basis at the discretion of the OJP official indicated in the program announcement under which this award is made.

19. The recipient may not obligate, expend or draw down funds until the Office of the Chief Financial Officer (OCFO) has approved the budget and budget narrative and a Grant Adjustment Notice (GAN) has been issued to remove this special condition.
20. The recipient agrees to report data on the grantee's OJJDP-approved performance measures as part of the semi-annual categorical progress report. This data will be submitted on line at OJJDP's Performance Measures website (<http://ojjdp.ncjrs.gov/grantees/pm/index.html>) by July 31 and January 31 each year for the duration of the award. Once data entry is complete, the grantee will be able to create and download a "Performance Measures Data Report." This document is to be included as an attachment to the grantee's narrative categorical assistance progress report submitted in GMS for each reporting period.
21. The recipient acknowledges that the Office of Justice Programs (OJP) reserves a royalty-free, non-exclusive, and irrevocable license to reproduce, publish, or otherwise use, and authorize others to use (in whole or in part, including in connection with derivative works), for Federal purposes: (1) any work subject to copyright developed under an award or subaward; and (2) any rights of copyright to which a recipient or subrecipient purchases ownership with Federal support.

The recipient acknowledges that OJP has the right to (1) obtain, reproduce, publish, or otherwise use the data first produced under an award or subaward; and (2) authorize others to receive, reproduce, publish, or otherwise use such data for Federal purposes. "Data" includes data as defined in Federal Acquisition Regulation (FAR) provision 52.227-14 (Rights in Data - General).

It is the responsibility of the recipient (and of each subrecipient, if applicable) to ensure that this condition is included in any subaward under this award.

The recipient has the responsibility to obtain from subrecipients, contractors, and subcontractors (if any) all rights and data necessary to fulfill the recipient's obligations to the Government under this award. If a proposed subrecipient, contractor, or subcontractor refuses to accept terms affording the Government such rights, the recipient shall promptly bring such refusal to the attention of the OJP program manager for the award and not proceed with the agreement in question without further authorization from the OJP program office.



Department of Justice
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**AWARD
CONTINUATIONSHEET
Grant**

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PROJECT NUMBER 2013-CZ-BX-0004

AWARD DATE 09/30/2013

SPECIAL CONDITIONS

22. Any Web site that is funded in whole or in part under this award must include the following statement on the home page, on all major entry pages (i.e., pages (exclusive of documents) whose primary purpose is to navigate the user to interior content), and on any pages from which a visitor may access or use a Web-based service, including any pages that provide results or outputs from the service:

"This Web site is funded [insert "in part," if applicable] through a grant from the [insert name of OJP component], Office of Justice Programs, U.S. Department of Justice. Neither the U.S. Department of Justice nor any of its components operate, control, are responsible for, or necessarily endorse, this Web site (including, without limitation, its content, technical infrastructure, and policies, and any services or tools provided)."

The full text of the foregoing statement must be clearly visible on the home page. On other pages, the statement may be included through a link, entitled "Notice of Federal Funding and Federal Disclaimer," to the full text of the statement.

23. The recipient shall submit one copy, as well as a computer diskette in Corel or compatible format, of any final reports, publications, etc., and the master tape and/or electronic file for any video, CD or DVD products developed with or in response to funds awarded to the recipient by OJJDP. Any publications or products, whether published at the recipient's or government's expense, shall contain the following statements:

This project was supported by Grant No. 2013-CZ-BX-0004 awarded by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice. Points of view or opinions in this document are those of the author and do not necessarily represent the official position or policies of the U.S. Department of Justice.

The current edition of the OJP Financial Guide provides guidance on allowable printing activities.

The recipient must submit to OJJDP all grant-funded reports and products for review and comment prior to publication. All such reports and products may display the OJJDP logo on the cover (or other location) with the agreement of the program office.

24. The award recipient agrees, as a condition of award approval, to comply with the requirements of 28 CFR Part 46 and all other Department of Justice/Office of Justice Programs policies and procedures regarding the protection of human research subjects, including informed consent procedures and obtainment of Institutional Review Board (IRB) approval, if appropriate.
25. The award recipient agrees, as a condition of award approval, to comply with the requirements of 28 CFR Part 22, including the requirement to submit a properly executed Privacy Certificate that is in accordance with the requirements of 28 CFR Section 22.23 to OJJDP for approval.



Department of Justice

Office of Justice Programs

Office of Juvenile Justice and Delinquency Prevention

Washington, D.C. 20531

Memorandum To: Official Grant File

From: Lou Ann Holland, OJJDP NEPA Coordinator

Subject: Categorical Exclusion for San Francisco Department of Public Health

The recipient agrees to assist OJJDP to comply with the National Environmental Policy Act (NEPA) and other related federal environmental impact analyses requirements in the use of these grant funds either directly by the recipient or by a subrecipient. Accordingly, prior to obligating grant funds, the grantee agrees to first determine if any of the following activities will be related to the use of the grant funds and, if so, to advise OJJDP and request further NEPA implementation guidance. Recipient understands that this special condition applies to its activities whether or not they are being specifically funded with these grant funds. That is, as long as the activity is being conducted by the recipient, a subrecipient, or any third party and the activity needs to be undertaken in order to use these grant funds, this special condition must first be met. The activities covered by this special condition are: a. new construction; b. minor renovation or remodeling of a property either; (1) listed on or eligible for listing on the National Register of Historic Places or; (2) located within a 100-year flood plain; c. a renovation, lease, or any other proposed use of a building or facility that will either; (1) result in a change in its basic prior use or; (2) significantly change its size and; d. Implementation of a new program involving the use of chemicals other than chemicals that are; (1) purchased as an incidental component of a funded activity and; (2) traditionally used, for example, in office, household, recreational, or education environments.



Department of Justice
Office of Justice Programs
Office of Juvenile Justice and
Delinquency Prevention

**GRANT MANAGER'S MEMORANDUM, PT. I:
PROJECT SUMMARY**

Grant

PROJECT NUMBER

2013-CZ-BX-0004

PAGE 1 OF 1

This project is supported under FY13(OJJDP Second Chance Reentry)42 U.S.C. 3797w; Pub. L. No. 110-199, Sec. 101

1. STAFF CONTACT (Name & telephone number)

Mark Morgan
(202) 353-9243

2. PROJECT DIRECTOR (Name, address & telephone number)

Jana L. Rickerson
Grants Unit Administrator
1380 Howard St, 5th Flr
San Francisco, CA 94103
(415) 255-3940

3a. TITLE OF THE PROGRAM

OJJDP FY 13 Second Chance Act Juvenile Reentry Program: Category 2: Implementation Projects

3b. POMS CODE (SEE INSTRUCTIONS
ON REVERSE)

4. TITLE OF PROJECT

The Family Intervention, Reentry & Supportive Transitions (FIRST) Program

5. NAME & ADDRESS OF GRANTEE

San Francisco Department of Public Health
101 Grove Street, Room 323
San Francisco, CA 94102

6. NAME & ADDRESS OF SUBGRANTEE

7. PROGRAM PERIOD

FROM: 10/01/2013 TO: 09/30/2014

8. BUDGET PERIOD

FROM: 10/01/2013 TO: 09/30/2014

9. AMOUNT OF AWARD

\$ 749,967

10. DATE OF AWARD

09/30/2013

11. SECOND YEAR'S BUDGET

12. SECOND YEAR'S BUDGET AMOUNT

13. THIRD YEAR'S BUDGET PERIOD

14. THIRD YEAR'S BUDGET AMOUNT

15. SUMMARY DESCRIPTION OF PROJECT (See instruction on reverse)

The Second Chance Act provides a comprehensive response to the increasing number of incarcerated adults and juveniles who are released from prison, jail, and juvenile residential facilities and are returning to their communities. The FY 2013 Second Chance Act Juvenile Reentry Program helps ensure that the transition the youth make from secure confinement facilities to the community is successful and promotes public safety. A secure confinement facility may include a juvenile detention center, juvenile correctional facility, or staff-secure facility. Eligible juveniles must have been confined under juvenile court jurisdiction. CATEGORY 2: Implementation Projects must include specific strategies for implementing the ten Mandatory Requirements of a Comprehensive Reentry Program.

The San Francisco Juvenile Collaborative Reentry Unit (JCRU), piloted in 2009 and expanded in 2012 with the support of Second Chance Act funding, provides reentry case planning and aftercare services for youth returning from long-term commitment in juvenile detention centers. The JCRU, which is designed to reduce recidivism and improve outcomes for high-risk and high-need youth, includes dedicated probation officers, a public defender, and social worker/case managers

who develop and oversee implementation of comprehensive reentry and aftercare plans for the returning youth. While the pilot and recently expanded versions of the JCRU have achieved significant reductions in recidivism for youth reentering the community from residential commitment, commitment. In addition, the need for family-focused juvenile reentry services that offer treatment as well as surveillance and community restraint has been identified by a growing number of states and researchers around the United States. To address this gap in family therapeutic supports for youth released from residential custody, SFJPD has asked the Child, Youth and Family System of Care (CYFSOC) at the San Francisco Department of Public Health (SFDPH) to lead the start-up and implementation of evidence-based, intensive family therapy services for this high-risk population. Toward this end, CYFSOC has partnered with the Young Adult and Family Center at University of California, San Francisco, as well as Seneca Family of Agencies (a nonprofit, youth and family mental health services provider), to develop the Family Intervention, Reentry & Supportive Transitions (FIRST) program for the highest-need youth supervised by the JCRU. The requested Second Chance Act grant will support the FIRST program to provide evidence-based, intensive family therapy services for 100 youth and their families during its one to two-year pilot phase. If the FIRST program is successful in further reducing recidivism rates for this high-risk population, SFJPD will identify local and other sources of funding to sustain program operation over the longer term. CA/NCF

Caldeira, Rick (BOS)

From: Jon Givner [Jon.Givner@sfgov.org]
Sent: Thursday, March 13, 2014 12:01 PM
To: Calvillo, Angela (BOS)
Cc: Caldeira, Rick (BOS); Wong, Linda (BOS)
Subject: Files 131216, 131217, 131209, and 140099

The sponsors of items 131216, 131217, 131209, and 140099 all submitted Form SFEC-126s with the proposed legislation. I have informed the sponsors that Campaign and Governmental Conduct Code section 1.126 does not apply to any of these items because the Board is not approving any contracts covered by that code section. Therefore, to avoid any confusion, I recommend that the Clerk's Office withdraw the forms from the file and not submit the completed forms to the Ethics Commission after the Board approves the resolutions. I have advised the affected departments to submit letters to your office to include in the files for these items, but I understand that you may not receive those letters before publication of the agenda for Tuesday's meeting. In the meantime, feel free to include this email in the file.

Jon Givner, Deputy City Attorney
Office of San Francisco City Attorney Dennis J. Herrera
1 Dr. Carlton B. Goodlett Place, Suite 234
San Francisco, CA 94102
phone: (415) 554-4694
fax: (415) 554-4745